

# 2025

# PUBLIC OPINION POLL

## Health and Medical Research and Innovation

RESEARCH AUSTRALIA

*Championing Australian health & medical research & innovation*

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# FOREWORD

Welcome to the report of Research Australia's 2025 Opinion Poll, the latest in a long-running series that began in 2003. This year's Poll continues to provide valuable insights into Australians' perceptions, priorities and expectations around key issues shaping the future of health and medical research and innovation.

Public understanding, perspectives and trust play a vital role in the success of health and medical research and innovation. This year's poll comes at a critical time – when Australia is reflecting on what health and medical research and innovation should look like in 10 years' time through the development of the National Health and Medical Research Strategy. The public's voice should inform this Strategy and our Opinion Poll provides insights on a range of critical topics.


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As Artificial Intelligence (AI) becomes increasingly prominent in healthcare and everyday life, this year's survey includes questions on applications transforming the sector, including the use of AI to transcribe consultations with health professionals, and the use of synthetic data in research. These insights shed light on how Australians weigh the potential benefits of innovation against their concerns about privacy, accuracy, and transparency.

Clinical trials remain a cornerstone of health and medical research. As the Australian Government progresses the National One Stop Shop for health and medical research, our poll builds on our long-running approach to canvassing Australians' attitudes toward clinical trials. Encouragingly, public support remains strong, with six in ten respondents indicating their willingness to participate if invited. However, understanding motivations and barriers will be essential to improving engagement and inclusivity in the reforms and future studies.

Finally, with the Australian Government's emphasis on building advanced manufacturing and sovereign capability, the 2025 Opinion Poll highlights widespread public backing for a robust health and medical research industry. Among the many ways governments can strengthen this sector, Australians most strongly support using public procurement in healthcare to 'Buy Australian', ensuring that investment in local innovation delivers national benefit.

We look forward to continuing to elevate the voices of the public, and through the results set out in this opinion poll, as well as previous ones, we will advocate to strengthen our health and medical research and innovation sector, so that it continues to deliver for the health and wealth of our nation.

**Nadia Levin**
CEO & Managing Director
Research Australia



# ACKNOWLEDGEMENT

**The polling for this report was generously conducted by Roy Morgan Research, a Research Australia Member.**

ROY MORGAN

"Roy Morgan is proud to partner with Research Australia on this important research"

**Michele Levine**
CEO of Roy Morgan



# POLL HIGHLIGHTS

## More funding

for health and medical research is in Australians' Top 10 for Federal Government funding priorities.

## 9 in 10

people believe investing in health services research is as important (60.7%) or more important (27.9%) as investing in other types of health and medical research.

Nearly three quarters (73.9%) of Australians would be

## willing to use genetic testing



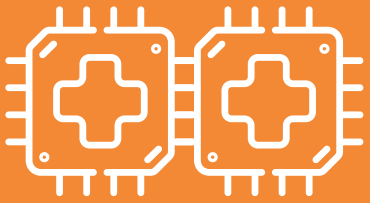
to identify the best treatment.

## 76.9% of the Australian public



consider a strong HMR industry to be important, and 79.2% agree Australia should be less reliant on foreign medical products and more self-sufficient in manufacturing medical products.

## 6 in 10



Australians feel comfortable with the use of AI-enabled transcription during doctors consultations, however trust in clinicians remains strong, with 72% agreeing that a doctor is more likely to provide a correct diagnosis than an app or software alone.


*See page 26 for the questions that we asked.*



# HEALTH AND MEDICAL RESEARCH HIGH IN AUSTRALIANS' PRIORITIES FOR AUSTRALIAN GOVERNMENT

The Australian Government is a key source of funding for Australian health and medical research (HMR). Around a quarter (24%) of all Australian Research and Development (R&D) is spent on HMR (total R&D is around $44.1 billion in 2023/24).

Understanding the public's priorities on how government allocates funds is critical for determining what matters most to the public and whether it aligns with government spending. We asked people to rank 19 different government funding priorities for the Federal Government to focus on during the next 2–3 years. The results indicate that spending on improving our health system, and health and medical research specifically, are key priorities for the public. Specifically, more funding for health and medical research is the sixth highest priority, behind improving hospitals and the health care system, improving housing affordability, keeping the national economy strong, improving education and addressing domestic and family violence.

01 **90.1%** Improving hospitals and the health care system

02 **83.7%** Improving housing affordability

03 **83.4%** Keeping the national economy strong

04 **81.6%** Improving education standards and outcomes

05 **78.3%** Addressing domestic and family violence

06 **78.2%** More funding for health and medical research

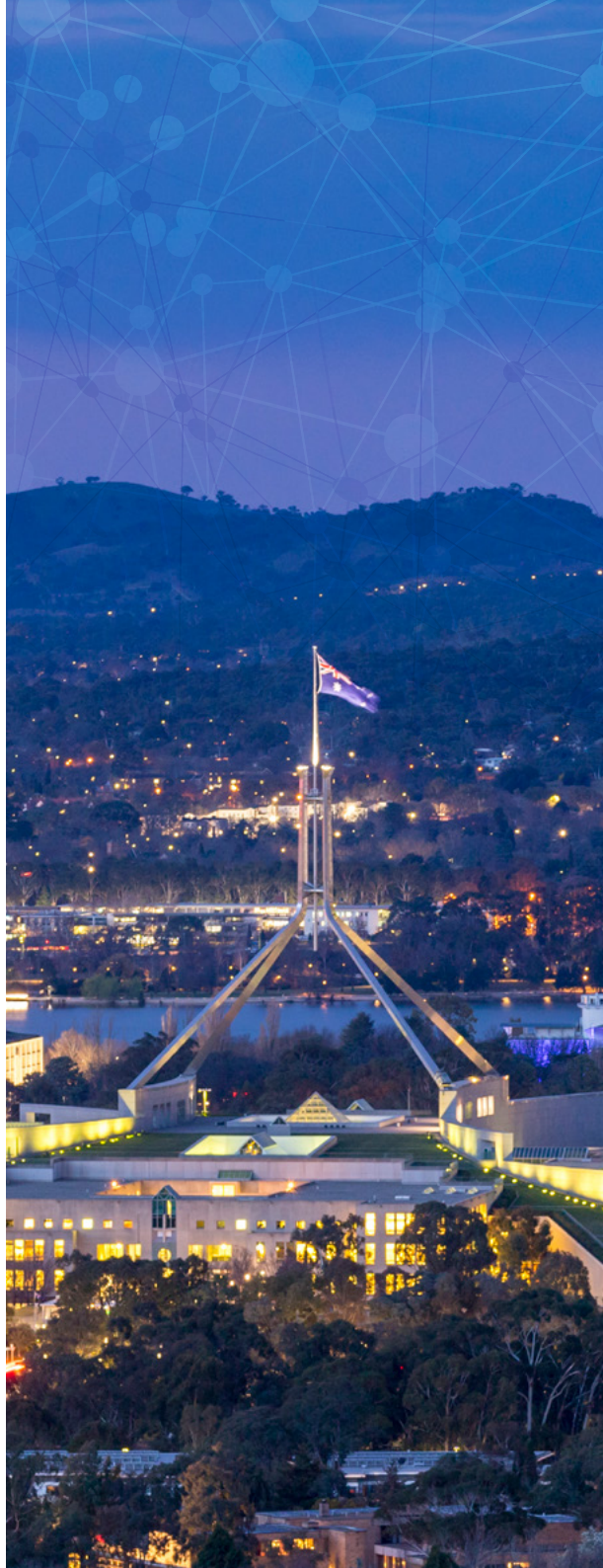
07 **77.8%** Increasing funding and programs for preventive health care

08 **71.0%** Improving employment opportunities through skills training and apprenticeships

09 **79.6%** Providing strong leadership and communicating definite plans and goals for Australia's future

10 **71.0%** Doing more for regional and rural Australia

Respondents were shown 19 spending priorities for the Australian Government action and asked to rank them from zero (not important) to 10 (extremely important). The above lists the top 10 with a score of 7 or above.




*See page 26 for the questions that we asked.*



## Previous Polling

Since Research Australia commenced its annual polling in 2003, more funding for health and medical research has always been in the top 10.

| 3rd | 4th | 5th | 6th | 7th | 8th | 9th | 10th |
|---|---|---|---|---|---|---|---|
| 2021<br>2010<br>2003 | 2011<br>2009 | 2007<br>2006 | 2025<br>2019 2018<br>2015 2013<br>2008<br>2005 | 2022<br>2017<br>2016 | 2014<br>2012 | 2014<br>2012 | 2024<br>2020 |

(The question was not included in our 2004 poll.)

Since 2020 we have also asked people about whether they think their top 10 priorities for government spending are similar to the government's own priorities. A significant portion of respondents feel their priorities and the government's are not well aligned.

| How similar are your top 10 priorities with those of the government? | 2025 | 2024 | 2023 | 2022 | 2021 | 2020 |
|---|---|---|---|---|---|---|
| They are very similar/exactly the same as mine | 5.0% | 3.1% | 3.6% | 4.5% | 3.3% | 5.3% |
| They are somewhat similar to mine | 43.4% | 41.6% | 44.2% | 49.4% | 33.6% | 35.9% |
| They are not similar to mine | 33.0% | 33.0% | 30.3% | 21.8% | 39.8% | 37.6% |
| Don't know | 18.6% | 22.3% | 21.9% | 24.3% | 23.3% | 21.2% |

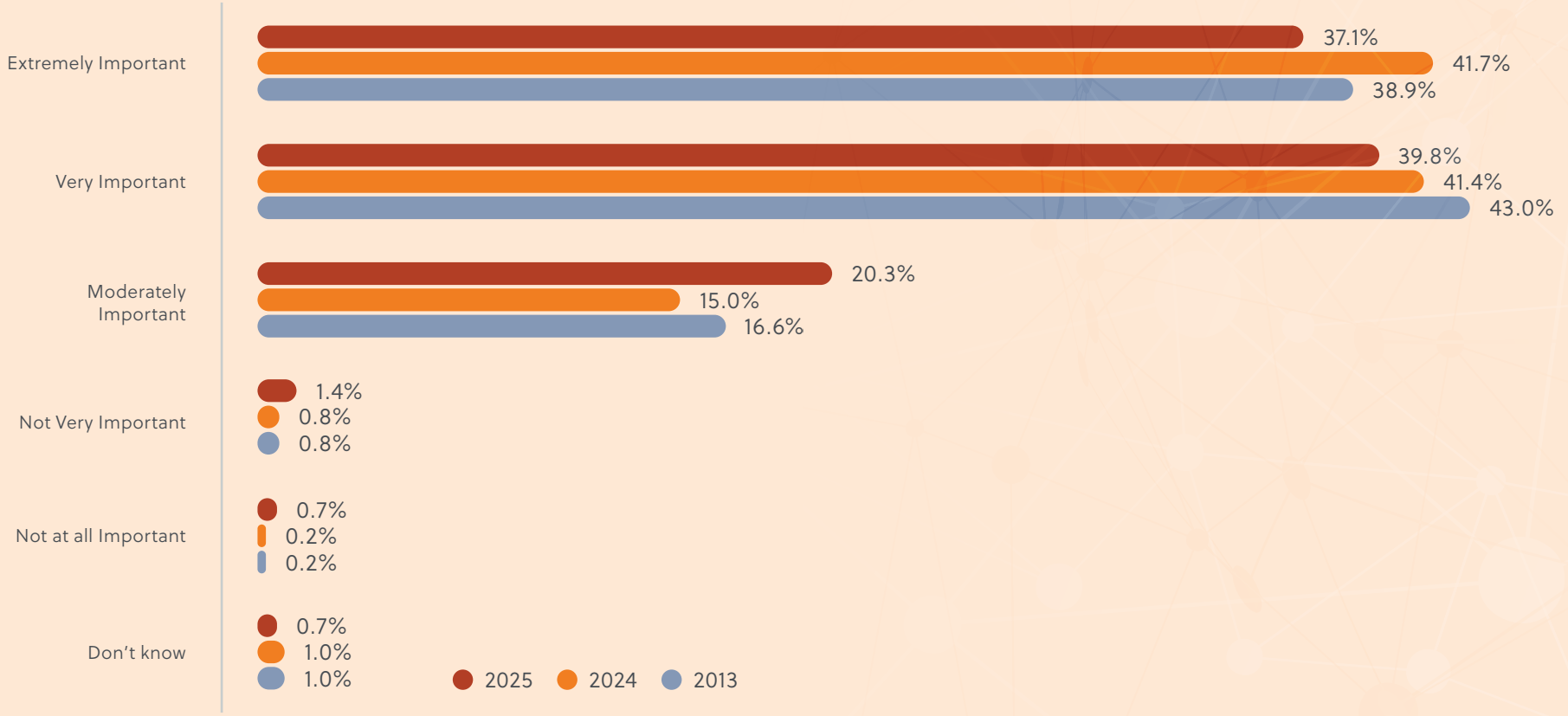
# IMPORTANCE OF A STRONG AUSTRALIAN HEALTH AND MEDICAL RESEARCH INDUSTRY

A strong health and medical research industry is vital for Australia's present and future. In Australia around $10.5 billion is spent on health and medical research every year, accounting for roughly 4% of all health spending.

This investment not only underpins the discovery of new treatments and technologies such as vaccines and diagnostic tools but also drives economic growth, job creation, and improvements in productivity by reducing the burden of disease and enabling a healthier workforce.

More than three quarters (76.9%) of the Australian public consider a strong health and medical research industry to be important. This emphasis on strong local industries is not new, with this view sustained over three polls dating back to 2013.

**How important do you think it is for Australia to have a strong HMR industry?**





*See page 26 for the questions that we asked.*



*"Investing in health services research and clinical trials enables us to embed evidence into our hospitals, residential aged care, and home care services – leading to improved patient outcomes, and more responsive, efficient and resilient health systems.*

*By integrating research into all areas of clinical and social care and influencing change in the wider health and social sectors, we can achieve common goals and community benefit – building social return beyond direct health gains."*

Associate Professor Angelita Martini,
Calvary Health Care



# SOVEREIGN CAPABILITY AND SELF-SUFFICIENCY IN HMR MANUFACTURING

On many levels, Australia has a vibrant health and medical research industry creating pharmaceuticals, diagnostic tests and medical devices, however, we remain a net importer of these vital products.

Our reliance on imports for many medical products leaves us vulnerable to the current uncertainties in world trade and to other disruptions to global supply chains, like those we experienced during the COVID pandemic.

Australia needs domestic capacity for health innovation and manufacturing (for example, in biomedicine, digital health, medtech) to build resilience in our supply chains and health systems. These are crucial aspects of what is known as 'sovereign capability'.

The current rapidly changing, and unpredictable geopolitical environment requires this even more than immediately after COVID. This means supporting the companies in Australia, both small and large, that are engaging in research and development, creating new jobs and opportunities and diversifying our economy.

From the following responses it is clear the vast majority of Australians value greater self-reliance as a medical product manufacturer, and believe there is an important role for the Australian Government in achieving this goal.

The results show very strong public support for greater Australian leadership and self-sufficiency in medical product development and manufacturing. Almost 80% strongly agree (47.3%) or somewhat agree (31.9%) that Australia should be less reliant on foreign medical products. Support is even higher for government action to back Australian companies developing new and improved medical products, with almost 87% strongly agreeing (53.3%) and somewhat agreeing (33.5%). Similarly, many respondents endorse the idea that the Australian Government should identify unmet health system needs and encourage local companies to develop solutions, with 85%  strongly agreeing (49%) and somewhat agreeing (36.4%). Levels of disagreement across all three statements are minimal, and only very small proportions were unsure. Overall, the findings reflect a clear public preference for national investment, innovation, and independence in Australia's medical product sector.

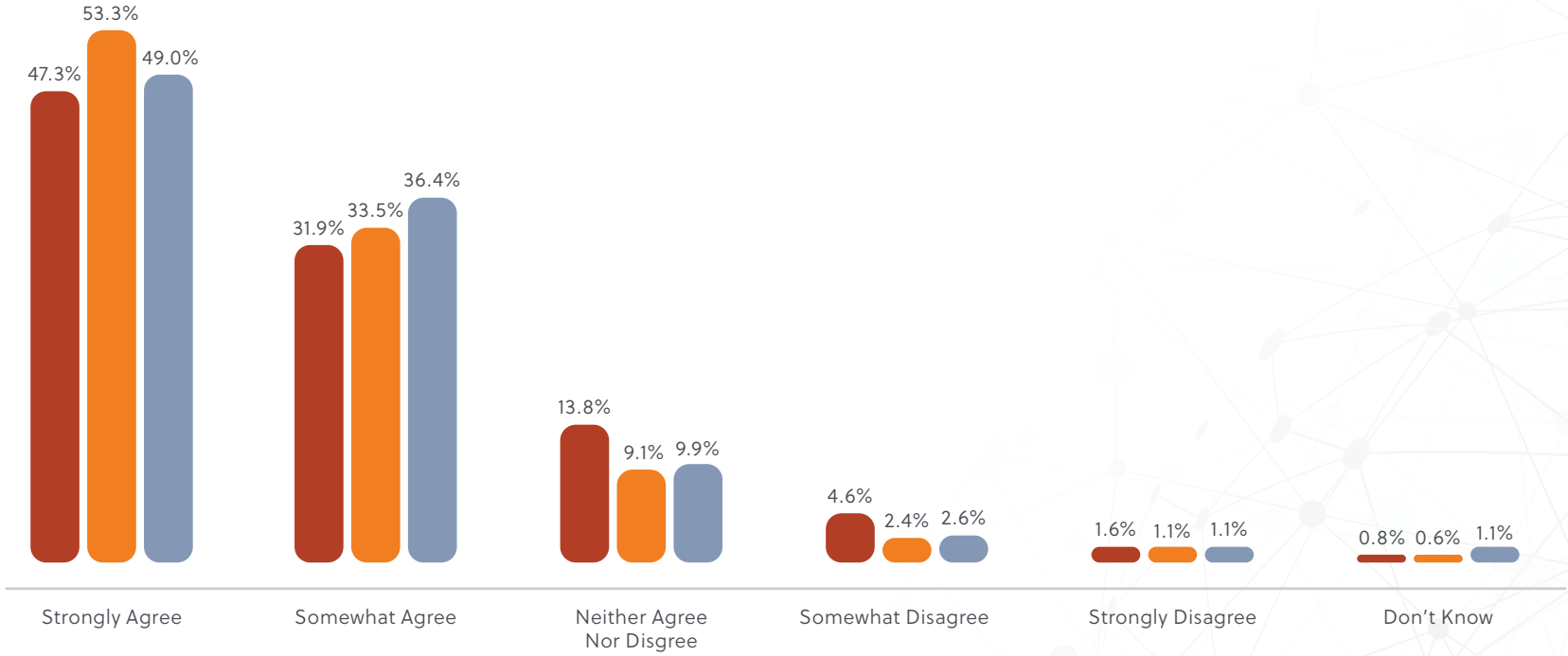
We first tested responses to these statements in our 2024 Opinion Poll; the results are very similar.


*See page 26 for the questions that we asked.*

**Statement 1:** Australia should be less reliant on foreign medical products and be more self-sufficient in developing and manufacturing its medical products

**Statement 2:** The Australian Government should support Australian companies that are developing and/or manufacturing new and better medical products for Australian and overseas markets

**Statement 3:** The Australian Government should identify unmet needs in our health system for new diagnostic tests, vaccines or more effective treatment, and invite Australian companies to develop new products that would address an unmet need



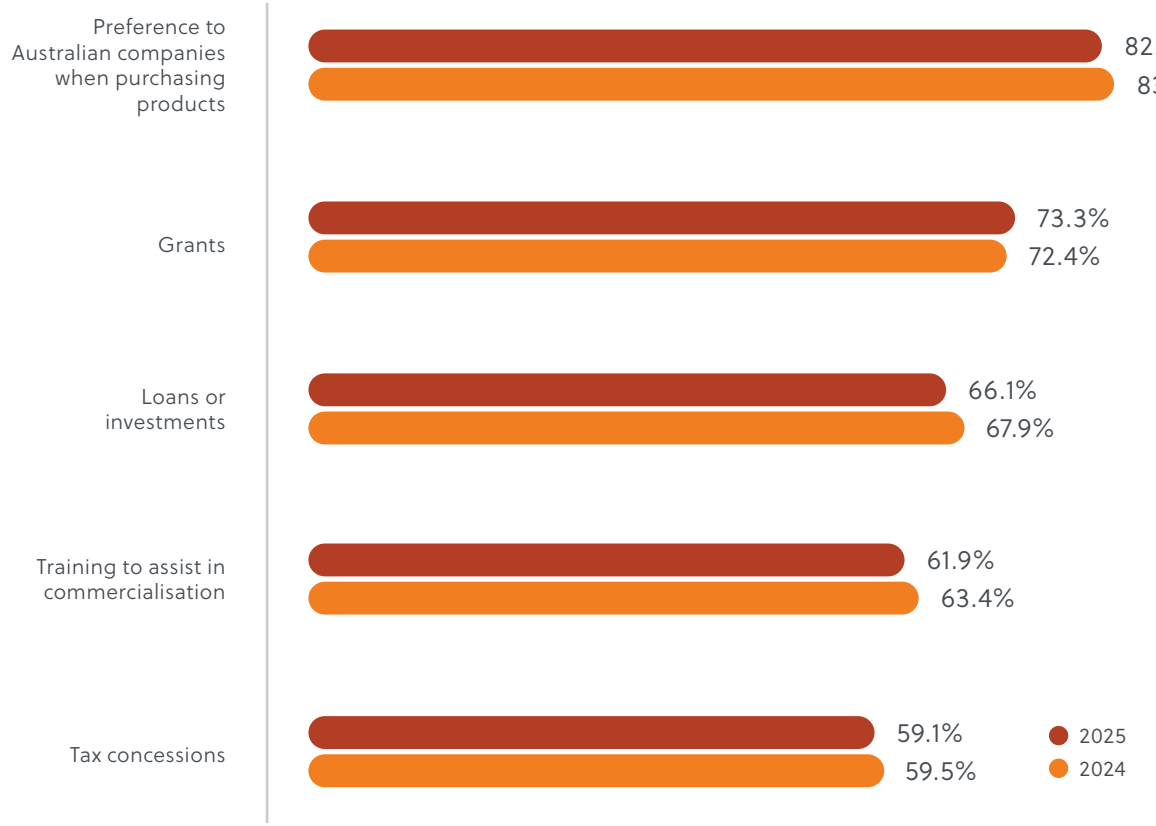
# TYPES OF AUSTRALIAN GOVERNMENT SUPPORT TO GROW OUR OWN HEALTH AND MEDICAL RESEARCH INDUSTRY

The leading role industry plays in health and medical research, development and innovation is clear, with 31% of all health and medical research expenditure located in the private sector.

To encourage industry and business leaders to invest more and increase health and medical research activities in Australia, a combination of financial, strategic, and systemic incentives is needed.

The government plays a fundamental role in this, and we asked what kinds of mechanisms Australians prefer in supporting companies to develop and manufacture new and better products.

**Forms of Government support for HMR**

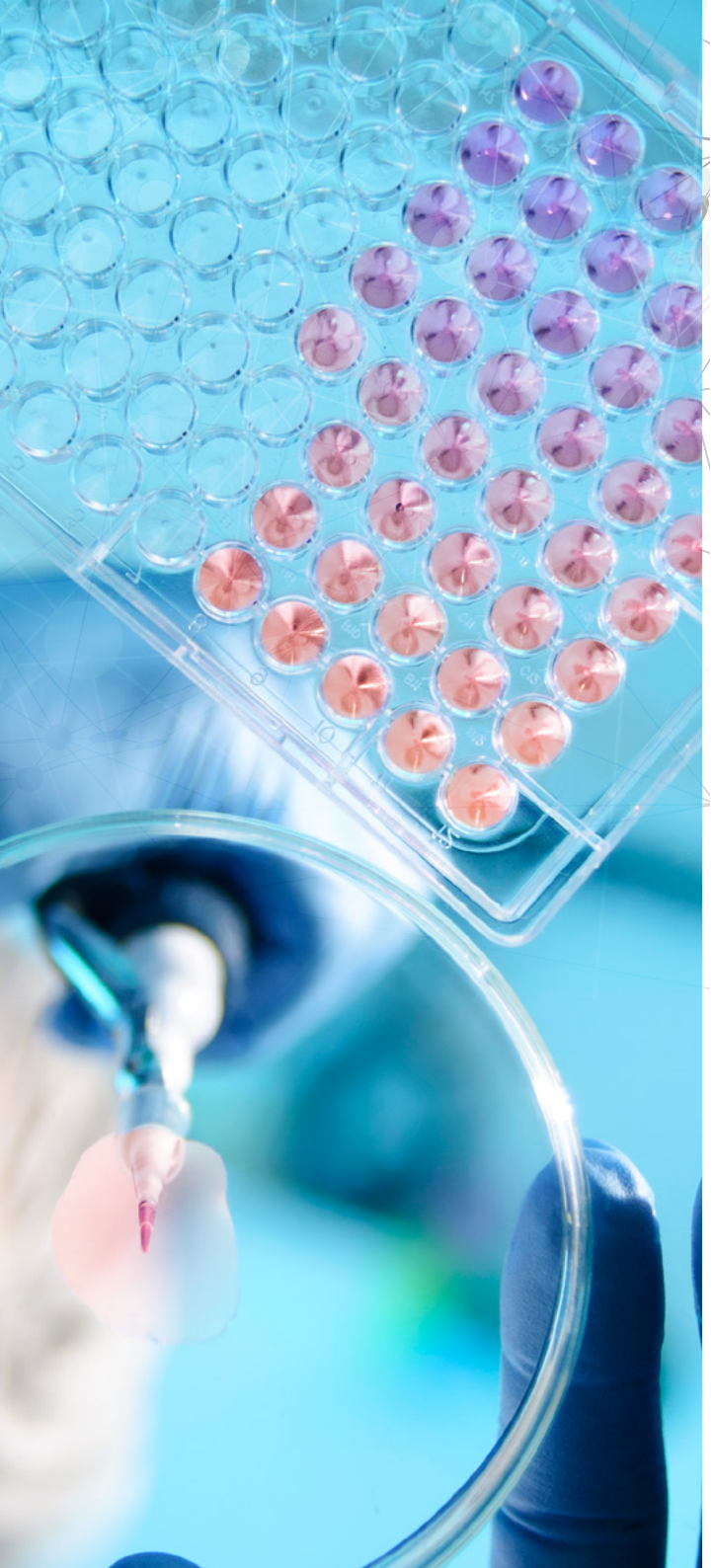



Giving Australian companies preference when the government is purchasing products is the most supported method of assistance. Providing grants is the second most supported method. The least supported method of assistance listed is tax concessions, at 59.1%.

**These results are consistent with our 2024 poll.**




*See page 26 for the questions that we asked.*



# AUSTRALIAN HEALTH AND MEDICAL RESEARCH FUNDING AND INTERNATIONAL INVOLVEMENT

Strengthening our health and medical research industry also includes focussing on our international relationships and partnerships.

We assessed public reactions in Australia to a range of scenarios involving government funding, examining how support varies with the level of benefits to Australians and the degree of international involvement.

The scenario with the strongest public support (75.6% Total Agree) involves an Australian laboratory requiring specialised overseas equipment and technology to develop a new medication. In contrast, the scenario with the lowest support (37.9% Total Agree) describes an Australian-owned company overseeing the development of a new treatment while all clinical trials and research is conducted overseas. Overall, the Australian public clearly prioritises initiatives that strengthen domestic research capacity and deliver tangible health benefits for Australians. Younger Australians (18-34) consistently show greater support for scenarios involving international elements or overseas benefits compared to older cohorts (50+), who demonstrate a stronger preference for domestically focused and beneficial research.

### Australian medical research funding

| | Strongly Agree (%) | Somewhat Agree (%) | **Total Agree (%)** |
|---|---|---|---|
| An Australian medical research lab requires specific equipment and technology from overseas to develop a new medication | 29.8% | 45.8% | **75.6%** |
| Distribution and access across Australia of a new treatment which was developed overseas | 20.6% | 42.4% | **63.0%** |
| The research is being conducted in Australia for a treatment which will only be used overseas (e.g. a treatment for a subtropical disease) | 9.2% | 34.6% | **43.7%** |
| An Australian-owned company is overseeing the development of a new treatment. All clinical trials and research are being conducted overseas | 10.4% | 27.5% | **37.9%** |

# CLINICAL TRIALS

## Clinical trials are essential to delivering new treatments to Australians.

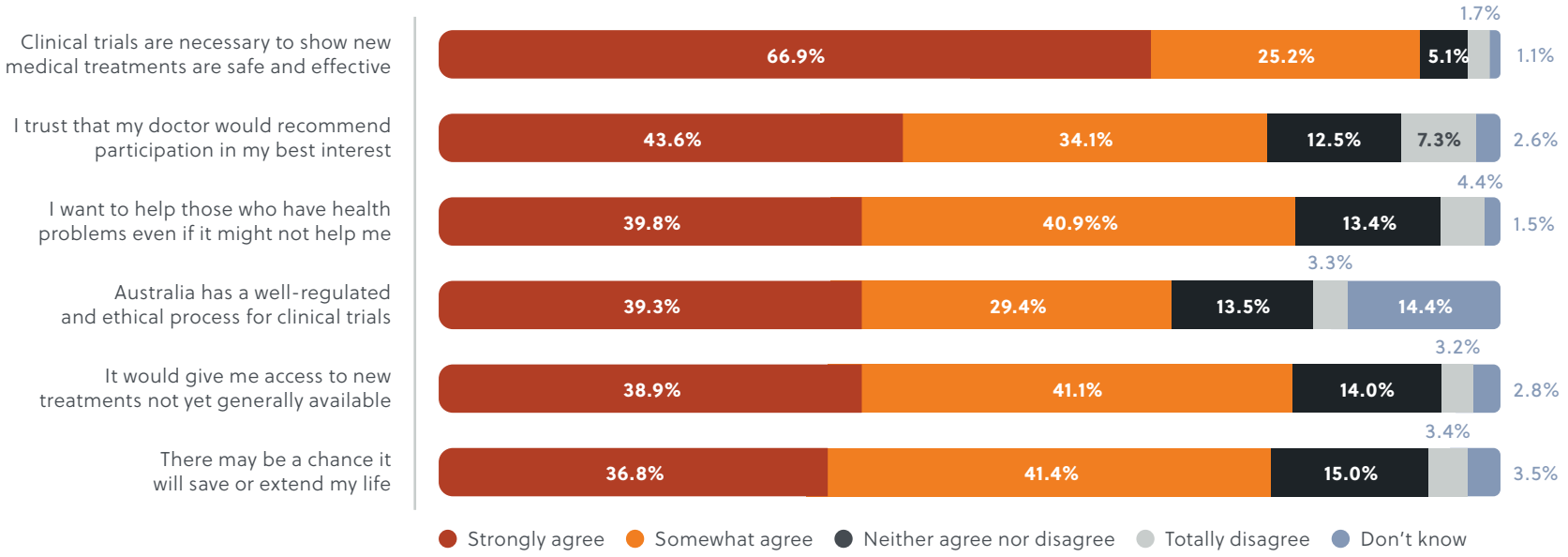
National reforms, including the National One Stop Shop and streamlined ethics and governance processes, aim to make trials faster, more consistent and easier to navigate for patients and researchers. Strengthening Australia's clinical trial system supports greater participation and faster access to innovative therapies.

Australians show strong willingness to participate in clinical trials, particularly when research is conducted locally, clearly explained and offers potential benefits to individuals or the wider community. While some barriers to participation remain, many can be addressed through service and system-level improvements.

Willingness to participate is driven by trust, altruism and confidence in research. Over 92% of Australians agree that clinical trials are necessary to demonstrate the safety and effectiveness of new treatments. Trust in healthcare professionals is a strong motivator, with almost 78% trusting their doctor to recommend participation in their best interest. Altruism is also prominent, with more than 80% wanting to help others, even without direct personal benefit.

Confidence in Australia's clinical trial system is high, with nearly 70% agreeing it is well regulated and ethical. Many also recognise personal benefits, including access to new treatments (80%) and the potential to extend or save life (almost 78%). Overall, disagreement across these measures is very low, reflecting broadly positive public attitudes toward clinical trials.

### Reasons for participating in clinical trials





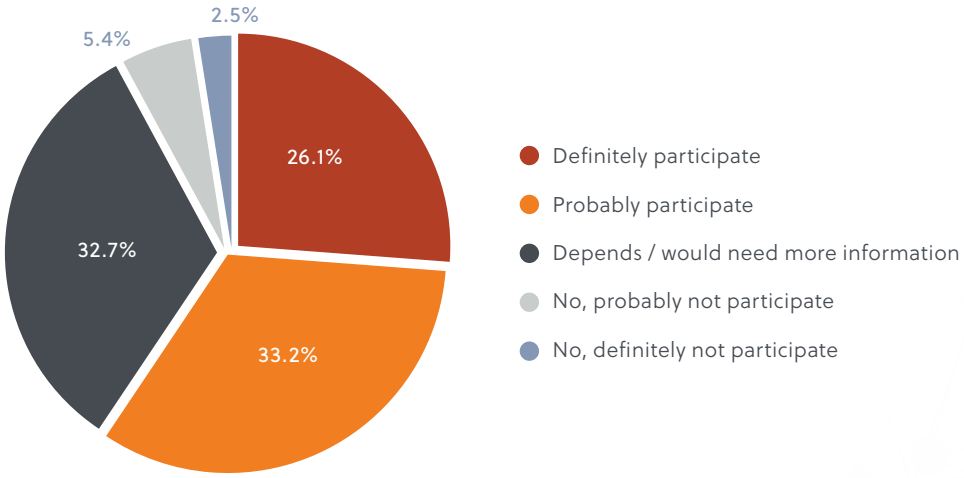
*See page 26 for the questions that we asked.*

## Strong willingness to participate in clinical trials

Almost 6 in 10 Australians would definitely or probably participate in a clinical trial (59.4%), while around 3 in 10 (32.7%) say that 'it depends/would want more information first. Interest is strongest among younger people, particularly those aged 18–24 (46.5%) and 25–34 (40.3%). Men are more likely than men to say their participation depends on receiving more information (37.2% vs 28.8%). Fewer than 1 in 10 would not participate.

Willingness to participate has increased since 2024 (from 52.6%), while the proportion needing more information has fallen (from 39.4%).

### Willingness to participate in clinical trials

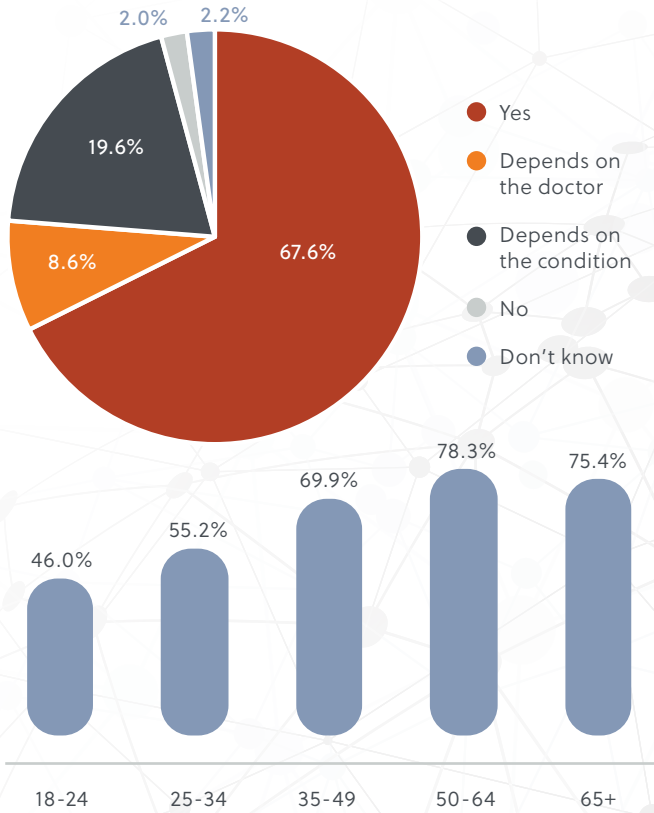



## The role of doctors

Doctors play a central role in clinical trials as trusted advisers, identifying eligible patients, explaining risks and benefits, and ensuring informed consent. Reflecting high levels of trust in doctors, nearly 68% of respondents believe it is appropriate for doctors to suggest a clinical trial when it may benefit a patient's condition, while only 2% believe this is never appropriate.

> Responses to this question vary with age, with younger people generally less likely to consider a recommendation appropriate.

### Appropriate for a doctor to suggest a clincial trial, by age group




18-24, 25-34 significantly lower than the average, 50-64 and 65+ significantly higher than the average. 35-49 is not significantly different to the average.

# REASONS FOR NOT PARTICIPATING IN A CLINICAL TRIAL

Equally important to why one would participate in a clinical trial is understanding the reasons why people might choose not to participate.

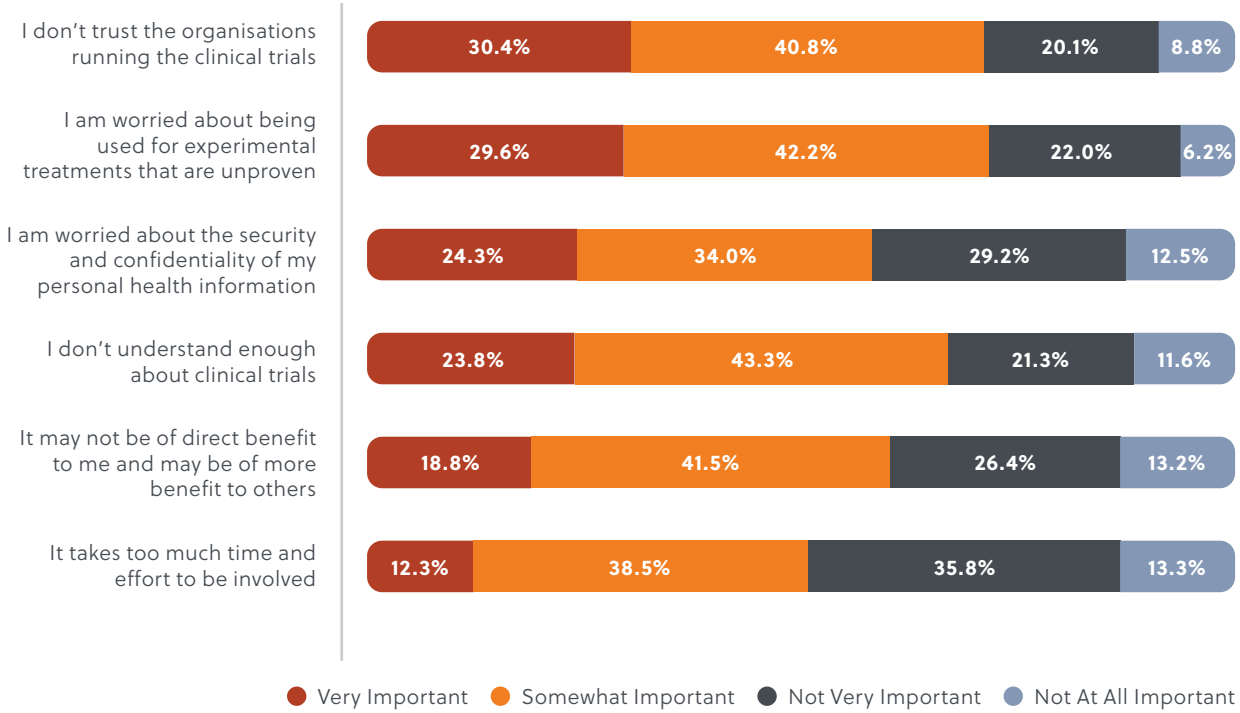
The data shows that concerns about trust, safety, and understanding play a major role in why some people hesitate to participate in clinical trials. Many respondents view lack of trust in the organisations running trials as an important barrier, and a similar proportion are worried about being used for unproven experimental treatments. Issues around privacy also feature strongly, with the majority expressing concern about the security and confidentiality of their personal health information. Limited understanding of how clinical trials work further contributes to uncertainty, as does the perception that participation may benefit others more than themselves. Practical barriers also matter: for some, the time and effort required to be involved is an important deterrent. Overall, the findings highlight that building trust, improving public understanding, addressing safety and privacy concerns, and reducing practical burdens could help reduce these barriers to participation.

Younger Australians (18-24) express significantly heightened levels of concern across nearly all categories, particularly regarding the experimental nature of treatments, where 43.0% rate this as 'Very important' compared to the national average of 29.6%. Conversely, older demographics (65+) and retired individuals tend to show lower levels of concern, especially regarding logistical issues like time and effort. These findings underscore the need for targeted communication strategies that address specific demographic anxieties and information gaps.

**We also asked this question in our poll last year and in 2021.**

In 2021 over 90% of people cited worry about being used for experimental treatments as a very or somewhat important concern, compared to around three quarters in this poll and last year. Otherwise the results are very similar.

**Reasons for not participating in clinical trials**





*See page 26 for the questions that we asked.*


Case 11275465
Name
Race
Date Collected
Test No.
CHILD
Jessica Holt
African
01/05/2018
111676537-30
Alleged FATHER
John Holt
Locus PI
Allele Sizes
D3S117 1.56
65 9.45
vWA 1.76
D16S56 56.89
HI98FC 4.87
TY97K 8.94
UBD35J 2.67
JB87FD 1.94
D465 0.43
D208K9 5.65
FG6Y87 7.87
D345G 2.04
HJ7G 0.02

# PATHWAYS TO JOINING A CLINICAL TRIAL

There are several pathways through which people can join a clinical trial. Most commonly, individuals are informed by their doctor, who identifies that they may be eligible based on their medical condition, history, or treatment needs.

People can also self-refer by responding to information they encounter in hospitals, clinics, universities, medical research institutes, or reputable online registries. In some cases, patients already receiving specialist care are invited by the research team if they meet the trial's eligibility criteria.

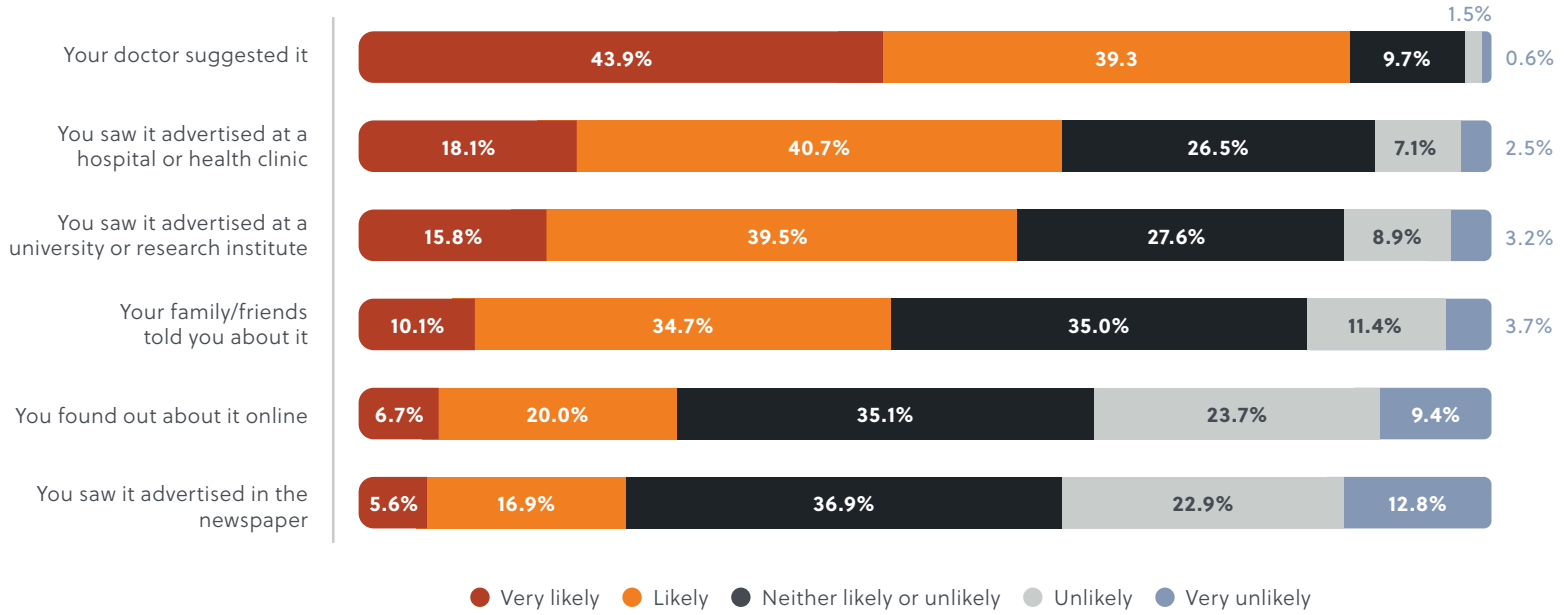
Given the challenges in recruitment as well as the opportunities participating in a trial can offer, its important to understand pathways individuals would take to joining a clinical trial.

Across all scenarios, women consistently show a higher likelihood of considering participation than men. Likelihood also tends to increase with age. A notable 5.0% of respondents state they would not consider taking part in a clinical trial under any circumstance, with this sentiment being most pronounced among young men (18-24).

A recommendation from a doctor is the most influential, making 83.2% of respondents likely to consider participation. This is followed by information found in a hospital/clinic or a university/research institute. Personal networks, such as family and friends, hold moderate sway.

Conversely, impersonal and broad-reach channels are less effective.

**Reasons for participating in a clinical trial**





*See page 26 for the questions that we asked.*

# GENETIC TESTING AND DATA SHARING

Genetic testing is a medical tool used to analyse a person's DNA to identify changes or variations that may influence their health, risk of disease, or how they respond to certain treatments.

It can be used for many purposes, including diagnosing inherited conditions, assessing the likelihood of developing particular diseases, guiding personalised treatment decisions, and informing family planning. Advances in technology have made genetic testing faster, more accurate, and increasingly accessible, expanding its role in both clinical care and preventative health. Research Australia has been monitoring Australians' willingness to use genetic testing since 2018.

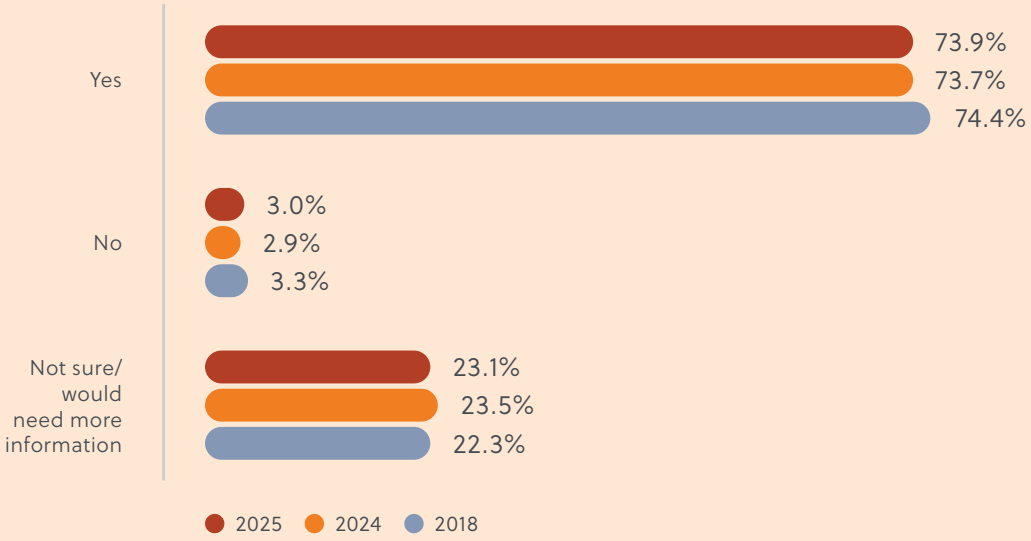
The effectiveness of genetic testing for identifying effective treatments relies on using evidence from previous patients to understand how people with different genetic traits respond to different drugs for particular diseases, such as cancer. This enables doctors to prescribe drugs for new patients that have worked before for other patients with similar genetic profiles. We asked whether the public would allow their genetic tests to be used for research to improve treatments for future patients. More than 9 in 10 (92.9%) are willing to do so.

Nearly three quarters (73.9%) of Australians would be willing to use genetic testing to identify the best treatment, with another quarter (23.1%) unsure. Only a tiny minority (3%) are opposed.

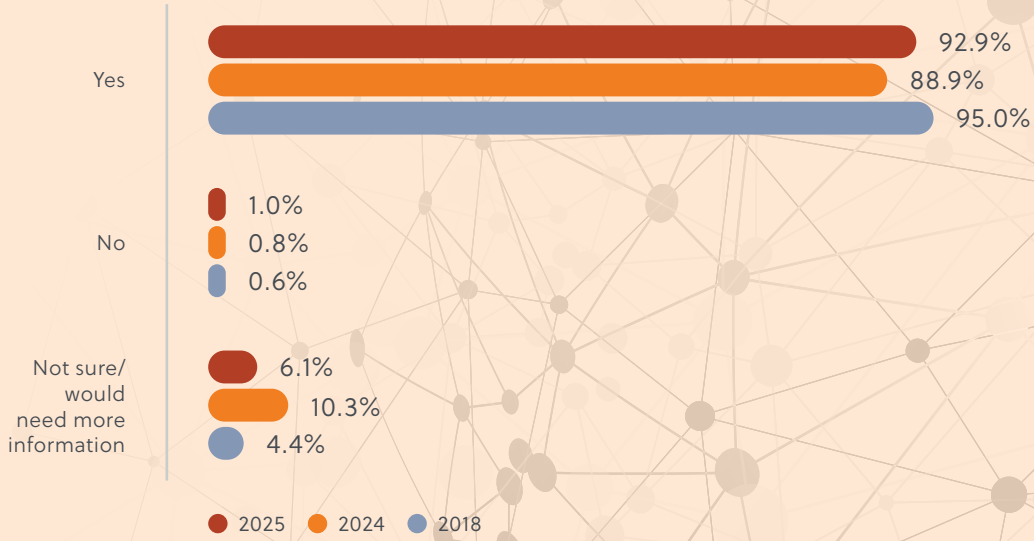
These findings have been remarkably consistent since 2018.

Willingness is lowest among young adults (18-24) at 64.2% and peaks in middle age (35-49) at 77.4%.

**Use genetic testing to identify best treatment**




**Allow genetic tests to be used for research**





# ARTIFICIAL INTELLIGENCE IN HEALTHCARE

Artificial intelligence is becoming an increasingly embedded tool in healthcare, offering opportunities to improve diagnosis, streamline administrative tasks, support clinical decisions, and enhance patient care.

However, its use also raises complex challenges about ethics, public trust and social licencing, accuracy, bias in algorithms, the security of sensitive health data, and the possibility that technology could undermine, rather than support, the clinician–patient relationship. The role of government is essential in establishing national standards and regulatory structures that are consistent, clear, and fit for purpose. These frameworks must be shaped by evidence-informed approaches, and for some aspects, in partnership with the broader community and consumers.

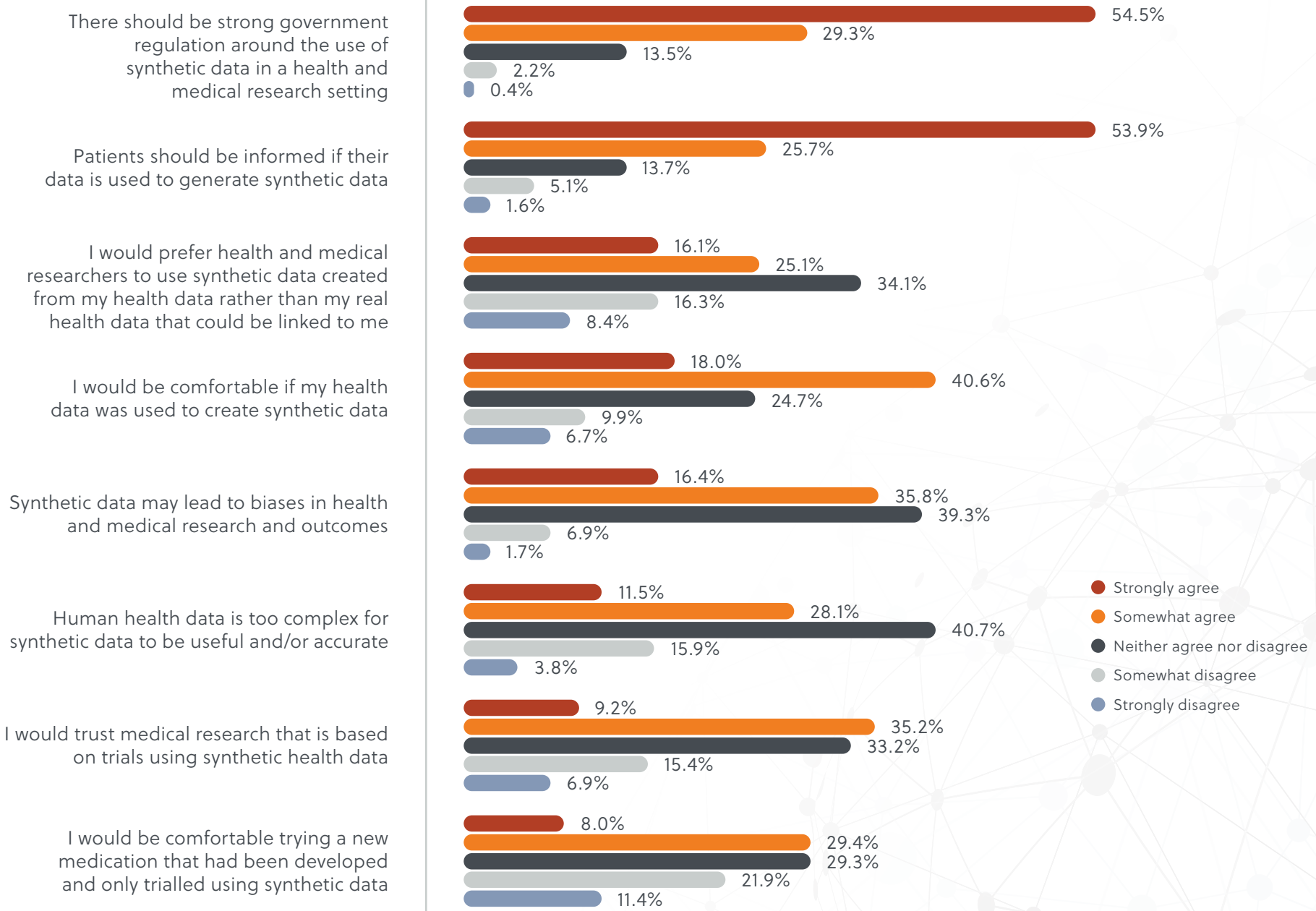
## The use of synthetic data

Synthetic data refers to artificially generated information that replicates the statistical properties and key characteristics of real patient data without exposing any individual's identity or personal details. It is increasingly valuable for testing, validating, and training new medical technologies, particularly in situations where real-world data is limited, highly sensitive, or difficult to access. As this is a relatively new and emerging area, we aimed to assess the public's understanding of synthetic data and their attitudes towards its use. To do so, we sought responses to several statements regarding synthetic data and its applications.

The findings show that while the public sees value in synthetic data, they also express strong expectations around oversight, transparency, and safety. A clear majority (83.8%) believe there should be strong government regulation of its use in health and medical research, and 79.6% think patients should be informed when their data is used to generate synthetic versions. Less than half of respondents prefer researchers to use synthetic data derived from their information rather than identifiable real data (41.2%) and just over half (58.6%) say they would feel comfortable with their data being used in this way. However, concerns remain: large proportions agree that synthetic data may lead to biases (52.2%) or that human health data is too complex for synthetic models to be fully accurate (39.6% agree, with 40.7% neither agreeing nor disagreeing). Trust drops when considering downstream applications—only 44.4% say they would trust medical research based on trials using synthetic data, and fewer than 4 in 10 (37.4%) would feel comfortable trying a new medication developed solely using synthetic data. Overall, the public supports synthetic data in principle but wants strong safeguards and remains cautious about its accuracy and use in decision-making.


*See page 26 for the questions that we asked.*

## Synthetic Data in Clinical Trials



# DIGITAL TRANSCRIPTION IN HEALTHCARE

Artificial intelligence is increasingly being explored as a tool to support prescribing in healthcare, offering the potential to improve safety, accuracy, and efficiency.

AI systems can analyse large volumes of clinical data, patient histories, and evidence-based guidelines to help clinicians identify the most appropriate medications, adjust dosages, and avoid harmful drug interactions. These tools may also support personalised treatment by predicting how individual patients might respond to specific therapies. However, the use of AI in prescribing also raises important considerations, including the need for transparency in how recommendations are generated, safeguards to ensure accuracy, and clear accountability for clinical decisions.

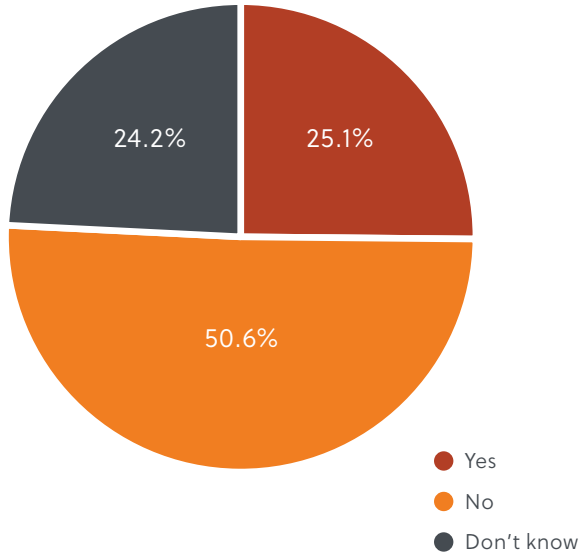
We also asked about the potential benefits and risks of a health professional using AI transcription tools.

The results show that the public sees clear potential benefits from the use of AI tools in healthcare, alongside notable concerns about data security and privacy. Many respondents believe these tools could improve the clinical experience: 61.6% agree that they would allow doctors to spend more one-on-one time with patients, and 70.9% agree that they could reduce administrative burdens, enabling doctors to treat more people. Comfort with AI-enabled transcription during consultations is also relatively high, with 63.9% agreeing they would feel comfortable with its use. Respondents maintain strong trust in clinicians, with 72% agreeing that a doctor is more likely to provide a correct diagnosis than an app or software alone.

Despite these perceived benefits, key concerns remain around data protection. Half of respondents (51.1%) express worry about the security of their health information when using such tools, and a similar proportion (47.5%) worry that their data may be shared with others. Overall, while the public acknowledges substantial potential for AI to improve healthcare efficiency and patient experience, these advantages are balanced by apprehension about data privacy and the need for robust safeguards.

On all questions, between 21.9%-27.9% of people neither agree nor disagree, suggesting further analysis is needed to understand this position.

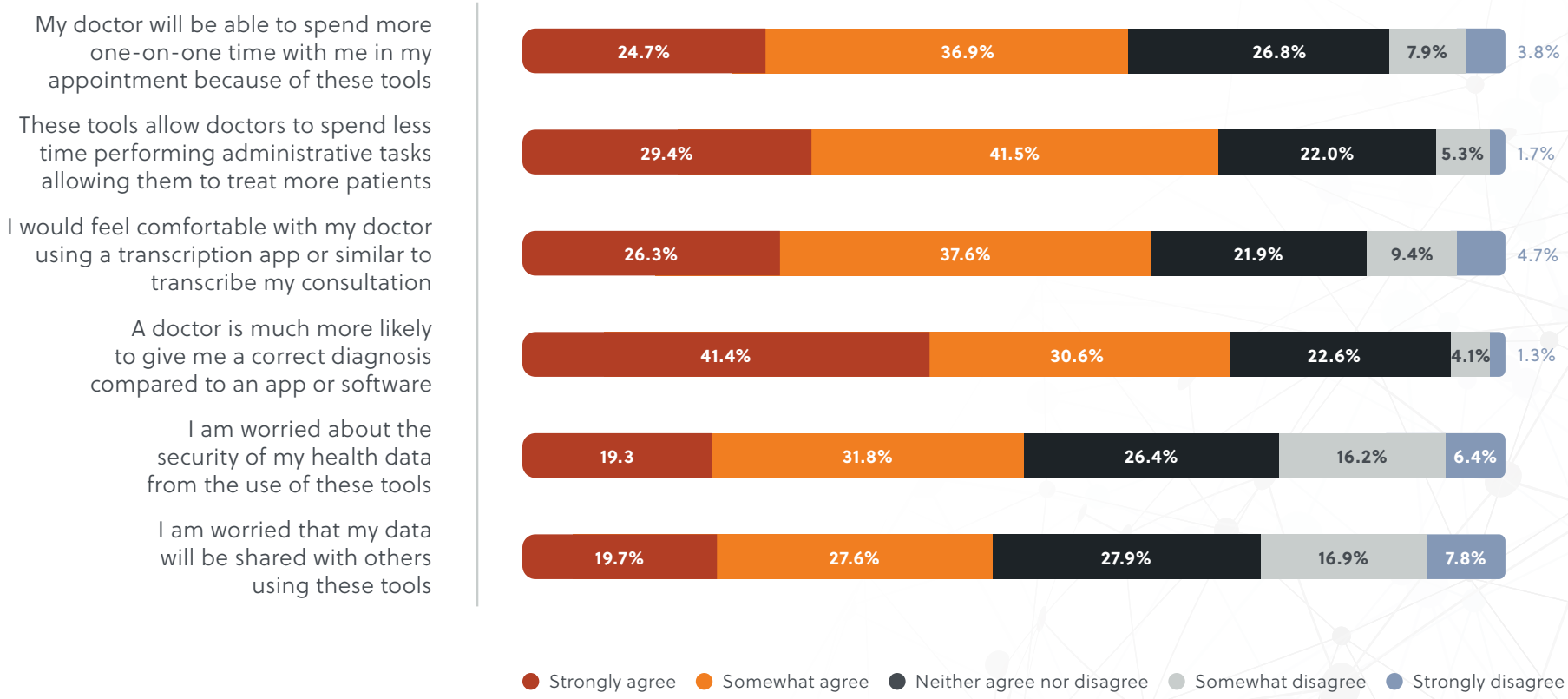
**As far as you know, has a healthcare professional ever digitally transcribed an appointment with you?**




We asked respondents whether a healthcare professional has ever digitally transcribed an appointment with them. One quarter (25.1%) reported they had, with a further quarter (24.2%) unsure.


*See page 26 for the questions that we asked.*

## Digital Transcription in Healthcare

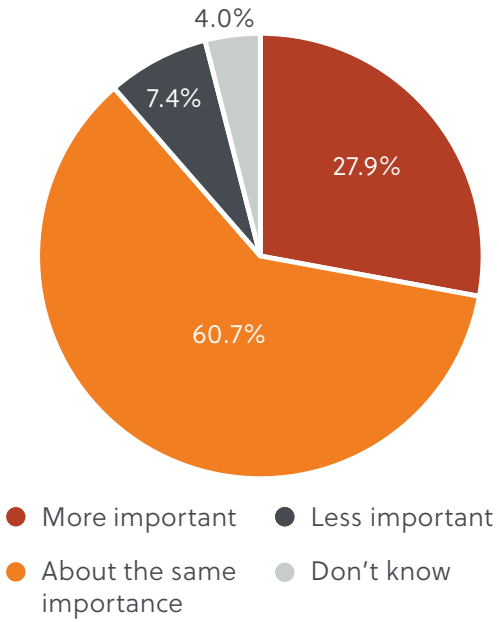


# HEALTH SERVICES RESEARCH

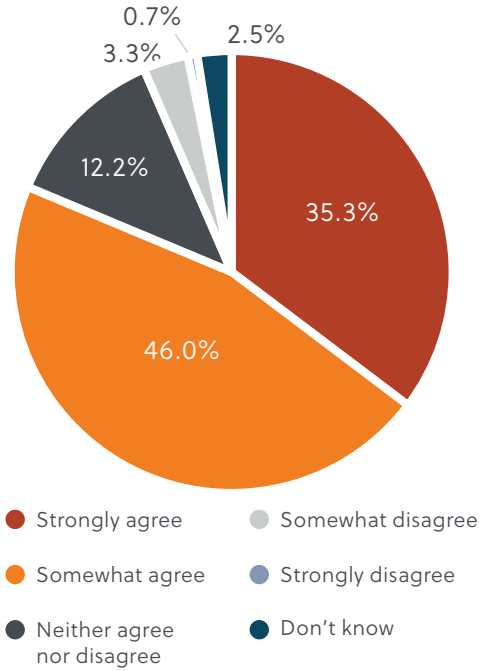
Most people tend to associate health and medical research and health innovation with laboratory work and the development of new medicines.

However, Health Services Research (HSR) is a distinct and equally important component of health and medical research and health innovation. HSR focusses on improving the safety, equity, effectiveness, and efficiency of the ways in which health services are delivered. To understand public perceptions of its value, we asked respondents to compare the importance of investing in health services research with other forms of research, such as drug development or investigations into the causes of specific diseases.

**Investing in health services research compared to other research**



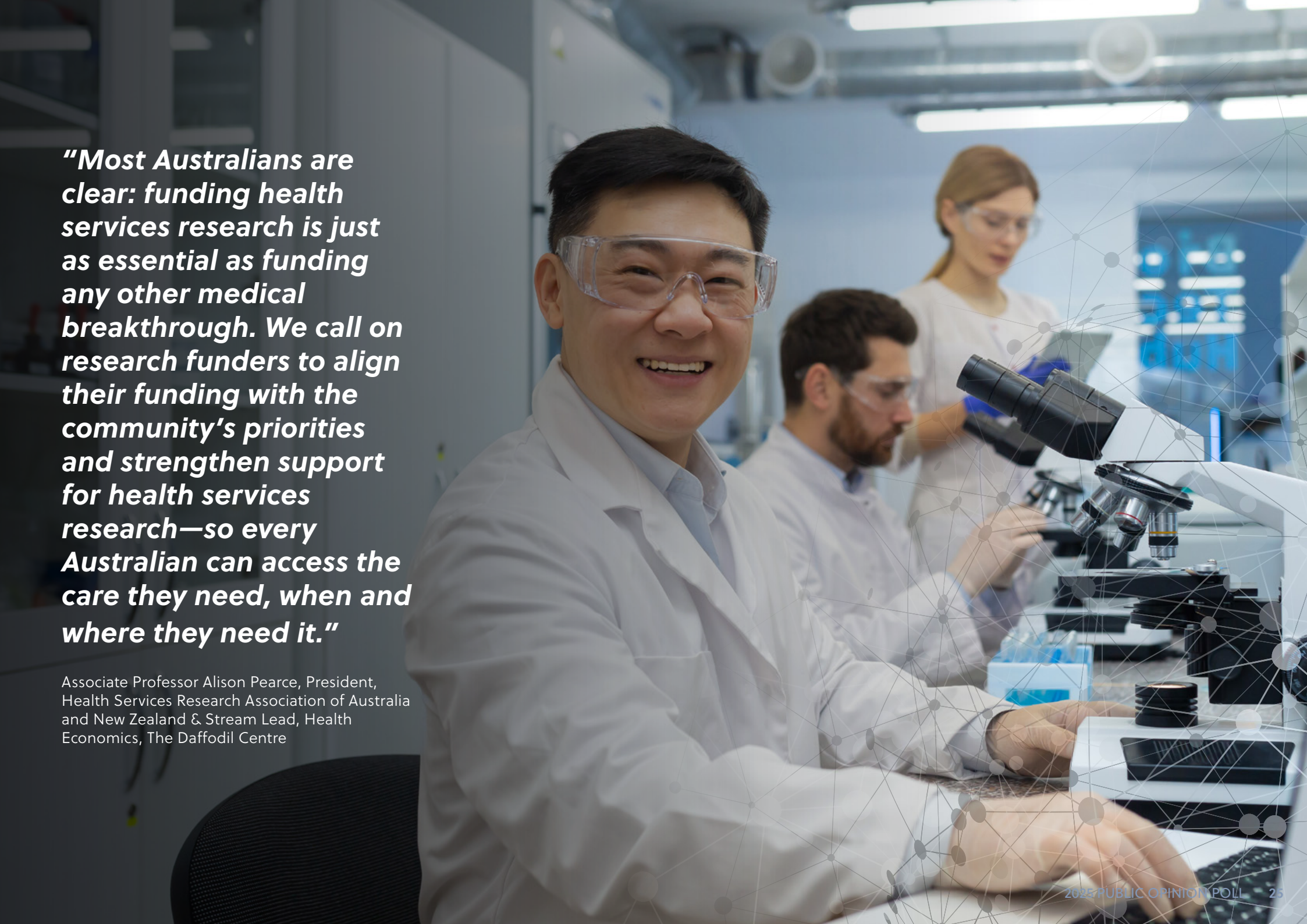

**Prioritise health services research funding to improve healthcare**




A large majority (81.3%) agree that governments should prioritise funding for HSR to improve healthcare delivery.

Women are significantly more likely than men to support prioritising government funding (84.4% vs. 77.8%). Support also increases directly with age, peaking with the 65+ cohort, where 85.2% agree on prioritising funding for HSR.


*See page 26 for the questions that we asked.*



***"Most Australians are clear: funding health services research is just as essential as funding any other medical breakthrough. We call on research funders to align their funding with the community's priorities and strengthen support for health services research—so every Australian can access the care they need, when and where they need it."***

Associate Professor Alison Pearce, President, Health Services Research Association of Australia and New Zealand & Stream Lead, Health Economics, The Daffodil Centre

# HEALTH SERVICES RESEARCH PRIORITIES

Given the breadth of health services research, we were interested in identifying public perceptions of priorities.

The results show that timely access to care is the public's highest priority, with 36.1% selecting it as their first choice—well ahead of all other options. Improving system efficiency also ranks highly overall, consistently appearing across first, second, and third choices. Ensuring proven treatments and models of care are implemented is another key area of importance, though at lower levels. Support for looking after the health workforce grows substantially in later rankings, becoming the most common third choice (24.1%).

By far the highest priority is enabling access to care when people need it, coming number 1 as the first and second options. Ensuring evidence based care (proven treatments) and efficiency of the health system are also popular priorities.

The highest of the third ranked options is looking after our health workforce.

| Health Services Research Priorities | 1ST Choice | 2ND Choice | 3RD Choice |
|---|---|---|---|
| People can get the care they need when they need it | **36.1%** | **17.6%** | 10.7% |
| Ensuring proven treatments and models of care are implemented in the health care system | 13.8% | 9.1% | 8.6% |
| Improving efficiency of the health system | 12.8% | 15.9% | 14.6% |
| Looking after our health workforce (doctors, nurses, allied health etc.) | 9.3% | 12.0% | **24.1%** |
| Reducing unfair differences in health outcomes across the population | 7.4% | 10.1% | 8.0% |
| People can access the care where they need (this might be based on their location or physical abilities) | 7.3% | 12.8% | 8.7% |
| Making healthcare safer for patients | 4.2% | 7.1% | 6.9% |
| Ensuring the care we provide is good value for money | 3.2% | 6.9% | 7.2% |
| People can access care how they need it (this might include language or cultural needs) | 1.9% | 3.9% | 6.2% |


*See page 26 for the questions that we asked.*

# QUESTIONS FOR THE 2025 OPINION POLL

### Health and Medical Research high in Australians' priorities for Australian Government

Firstly, please think about what priorities you think the Federal Government should focus on over the next 2–3 years. As you read through the following list of issues, please rate how important you personally think each issue is, as a priority for the Federal Government to focus on over the next 2–3 years.

Do you think your top 10 priorities for Federal Government spending are the government's top 10 priorities?

### Importance of a strong HMR industry

Thinking specifically about the health and medical research industry. How important do you think it is for Australia to have a strong health and medical research industry?

### Self-sufficiency in HMR manufacturing

Australia manufactures some medical products such as vaccines, medications, diagnostic tests and medical equipment, but we import more products than we export. Please indicate how much you agree or disagree with the following statements.

### Forms of government support for HMR

Do you believe that the Australian Government should provide Australian companies assistance in developing and/or manufacturing new and better medical products with: (Grants; Loans or investments; Training to assist in commercialisation; Tax concessions; Preference to Australian companies when purchasing products)

### Australian medical research funding

Some of the ways the government invests in Australian health and medical research is by providing financial and practical assistance through research grants and funding the development and the distribution of new treatments.

Do you agree or disagree that the following scenarios should receive funding from the Australian Government?

### Willingness to participate in clinical trials

Clinical trials are used to test the effectiveness of new medical treatments and drugs before they are safe to be introduced commercially.

If you required treatment and were invited to participate in a clinical trial of a new medical treatment would you participate?

### Reasons for participating in clinical trials

When thinking about participating in clinical trials, how much do you agree or disagree with the following statements?

Do you think it is appropriate for a doctor to suggest a clinical trial to a patient if they believe it might be helpful to their condition?

### Reasons for not participating in a clinical trial

Here are some possible reasons people may have for not agreeing to take part in a clinical trial. For each reason, please say how important it is to you in deciding not to participate in a clinical trial.

Pathways to a clinical trial

How likely do you think you would be to consider taking part in a clinical trial if:

### Genetic testing and data sharing

'Precision medicine' uses genetic testing to identify the best treatment for that patient. It relies on using evidence from previous patients to understand how people with different genetic traits respond to different drugs for particular diseases, such as cancer. It enables doctors to prescribe drugs for new patients that have worked before for other patients with similar genetic profiles.

If you had a disease and there was the opportunity to use genetic testing to identify the most effective drug, would you do so?

Would you be willing for the results from your genetic tests and your treatment to be used to improve treatments for future patients?

## Health Services Research

Health services research studies how healthcare is delivered—such as how hospitals operate, how care is funded, and how people can access care. It helps improve patient outcomes, reduce costs, and make the health system more efficient.

Compared to other types of research (e.g. developing new drugs, disease specific research), do you think investing in health services research is: (More important; About the same importance; Less important; Don't know)?

## Health Services Research Priorities

Should governments prioritise funding for health services research to improve how healthcare is delivered in Australia?

Which areas of health services research do you think should be prioritised for funding?

Please select up to 3 in order of importance, with 1 being the most important.

## Digital Transcription in Healthcare

Some healthcare professionals have started using tools which digitally transcribe their appointments with patients. This is used to primarily assist in recording a consultation, but may also be used to assist in diagnosis and treatment.

As far as you know, has a healthcare professional every digitally transcribed an appointment with you?

The following statements are some potential benefits and risks which are associated with using these digital transcribing tools. Please rate how much you agree or disagree to the following statements.

## Synthetic Data in Clinical Trials

Synthetic data in healthcare trials is created by mimicking real patient data into a form that retains key characteristics of real health data but cannot be linked to any individual.

For example, a group of health researchers are developing a new method of detecting a disease from blood test results. To train and test this system they would need thousands of patient samples – but using real patient data could risk privacy and be limited in quantity. Researchers instead create synthetic data – artificial data which mimics real patient data without using any actual patient information.

The following statements are some potential benefits and risks associated with synthetic data use. Please rate how much you agree or disagree to the following statements.

# METHODOLOGY

## Research Overview

| | |
|---|---|
| Statement of Compliance with International Standards: | This research project was carried out in compliance with ISO 9001 & ISO 20252 |
| Client Name: | Research Australia |
| Research Service Provider Name(s): | Roy Morgan Research Ltd |
| Sub-contractor used: | None |
| Process sub-contracted: | None |
| Research Objectives: | This research was conducted to trend attitudes towards medical and health issues in Australia. |

## Quantitative Research

| | |
|---|---|
| Target Group: | Australians 18 years and older |
| Proposed Sample Size: | 1,000 |
| Actual Sample Size: | 1,048 |
| Reason for Difference in Proposed to Actual Sample Size: | Slight over-recruitment in some age/gender/location cells to compensate for lower response levels in some specific demographics. This over-recruitment was subsequently corrected during the weighting process (see below) |
| Fieldwork Period: | 30 July to 6 August 2025 |
| Sampling Method: | Members of Roy Morgan Research's Proprietary Online Panel, 18 years and older, living in Australia, were emailed an invitation to participate in the survey. |
| Data Collection Method: | Online survey (CAWI – Computer Assisted Web Interviewing) |
| Incidence Rate: (Completes/Total started surveys) | 61.2% |
| Weighting Process: | Weighted proportional to population by age, sex and area, and projected to Australian 18+ population estimates |
| Estimation/Imputation Procedure: | No estimation/imputation processes used |
| Representatively of the Sample Population: | Sample is broadly representative of Australia's population by sex, age and area |
| Margin of Error: | ±3.0% |
| Incentive Type: | Points redeemable for cash |

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