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## **ABOUT AIA**

### **ABOUT AIA**

AIA Group Limited and its subsidiaries (collectively "AIA" or the "Group") comprise the largest independent publicly listed pan-Asian life insurance group. It has a presence in 18 markets in Asia-Pacific – wholly-owned branches and subsidiaries in Hong Kong, Thailand, Singapore, Malaysia, mainland China, Korea, the Philippines, Australia, Indonesia, Taiwan, Vietnam, New Zealand, Macau, Brunei, Cambodia, a 97 per cent subsidiary in Sri Lanka, a 49 per cent joint venture in India and a representative office in Myanmar.

The business that is now AIA was first established in Shanghai almost a century ago. It is a market leader in the Asia-Pacific region (ex-Japan) based on life insurance premiums and holds leading positions across the majority of its markets. It had total assets of US\$216 billion as of 30 November 2017.

AIA meets the long-term savings and protection needs of individuals by offering a range of products and services including life insurance, accident and health insurance and savings plans. The Group also provides employee benefits, credit life and pension services to corporate clients.

Through an extensive network of agents, partners and employees across Asia-Pacific, AIA serves the holders of more than 30 million individual policies and over 16 million participating members of group insurance schemes.

# THE AIA HEALTHY LIVING INDEX

## THE AIA HEALTHY LIVING INDEX

This is the fourth Asia-Pacific-wide AIA Healthy Living Index Survey AIA has conducted since 2011. The survey findings highlight prevailing health trends and indicate areas in which individuals and communities can move towards sustaining more healthy lifestyles. The findings are also reflected in our careful approach to the development of products and services and the design of initiatives that motivate people across Asia-Pacific to adopt healthier habits.

In addition to producing the AIA Healthy Living Index itself, which measures consumers' satisfaction with their health and wellness behaviours, this year the survey had several additional objectives. In each market, we wanted to find out:

- How the issue of financing healthy activities and medical treatment affects people's ability to live healthily;
- What motivates people to adopt healthy behaviours, what factors make it hard for them to sustain them, and how they can make sustainable changes to adopt a more healthy lifestyle;
- What role technology is playing in people's attempts to adopt healthier habits.

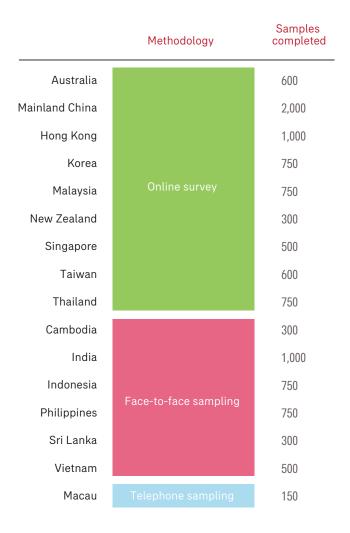
## **METHODOLOGY**

## **METHODOLOGY**

For the 2018 Index we carried out surveys among 11,000 adults in 16 of our markets. To ensure the best possible research outcomes we commissioned an independent market research agency to carry out the surveys on behalf of AIA.

The research agency conducted online surveys in Australia, mainland China, Hong Kong, Korea, Malaysia, New Zealand, Singapore, Taiwan and Thailand. The study was conducted by face-to-face sampling in Cambodia, India, Indonesia, the Philippines, Sri Lanka and Vietnam, and by telephone sampling in Macau.

Quotas were applied in all markets to provide broadly representative age and gender sampling among adults, ages 18 years or older. For more details on sampling in each market see the section on Market-Specific Findings below.



## **KEY FINDINGS**

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## People's satisfaction with their health and habits has declined since 2016...

 Over the whole region, 81 per cent of respondents are satisfied with their health, down slightly from 84 per cent in 2016. Only 62 per cent rate themselves positively on the amount of exercise they are getting, and only 60 per cent are satisfied with the frequency of their medical check-ups

 both down nine percentage points from 2016.

#### ... but they are more likely to behave healthily

 More people claim to exercise and for longer durations than in 2016. On average, respondents claim to do 3.6 hours exercise each week – ranging from a claimed 5.6 hours in mainland China to 1.4 in Sri Lanka. The fact that people's satisfaction with their lifestyles has nevertheless declined is likely to reflect changing expectations about ideal healthy lifestyles and behaviours as much as changing habits.

#### Many worry about the financial burden of critical illness

 Across the region, 50 per cent of people are concerned about the potential costs of critical illness (cancer, heart disease, diabetes or other serious conditions). When asked to estimate the costs of treatment for cancer they expect they would have to bear, 46 per cent estimate an amount that would cause serious financial implications for them

## The expected shortfall in financing cancer treatment costs is considerable

Across all respondents in the region (including those
who expect to be able to afford treatment), there is an
expected average shortfall of over one-third (36 per cent)
of the cancer treatment costs that people expect to bear,
implying a financing burden that would have to be borne
by other sources. The average expected shortfall for cancer
treatment is highest in the Philippines, at 75 per cent of
expected direct costs; in each of India, Indonesia, Macau
and Vietnam the average shortfall exceeds 40 per cent.

## People often avoid medical check-ups because of the cost

 Some 33 per cent of people across the region who have not had a medical check-up in the past year cite the cost as a reason for not doing so. It is among the top two reasons for all markets except mainland China, India, the Philippines, Vietnam and Macau.

#### Healthy habits are hard to sustain

 Although people find it relatively easy to eat better, they find it more difficult to maintain diets and reduce consumption. Only 52 per cent of those who have ever tried a diet programme continue to use them now, and 58 per cent of those who have ever tried a weight loss scheme continue with one now.

## Health and activity trackers are a positive force for change

- Most people (68 per cent of all respondents) consider health and activity tracking technology to be easy to use and 65 per cent think they motivate positive changes in behaviour. That said, just 63 per cent of those who have tried such trackers keep using them; more than one in three (37 per cent) have stopped doing so.
- Of those surveyed in Singapore, 20 per cent are currently using activity trackers – the most likely to do so from the markets surveyed, followed by 17 per cent in mainland China and 13 per cent in Malaysia and Hong Kong.

## Concerns about sharing data with doctors are not a barrier to health tech usage, but worries about data security might be

 Seventy-five per cent of people across the region would be happy to have devices that provide healthcare professionals with on going health data. However, almost half (49 per cent) do not want their health data kept in a single medical database because they are concerned about the data not being secure. This is a particular concern in India (84 per cent), Sri Lanka (65 per cent) and Vietnam (65 per cent).

#### Air pollution remains a prime health concern

- People across the region think that environmental factors are negatively impacting their health. Sixty-two per cent think that air pollution is affecting their health, while 49 per cent are concerned about food safety.
- In order to mitigate the effects of the environment,
   43 per cent have tried wearing anti-pollution masks.

# THE AIA HEALTHY LIVING INDEX 2018



#### ABOUT THE AIA HEALTHY LIVING INDEX

The AIA Healthy Living Index is a composite score comprising satisfaction with health and how often people conduct healthy activities, such as exercising regularly, eating healthy food, sleeping sufficiently and having regular medical check-ups, based on self-reported survey data. A higher score indicates greater satisfaction and more frequent conduct of such activities.

In the Index score behaviour (e.g. sleeping habits and exercise) is given a 66 per cent weighting and satisfaction with health accounts for the remainder.

### The Asia-Pacific region's long-term health satisfaction is improving – slowly

 The overall regional AIA Healthy Living Index score (64/100) remains unchanged since the survey was last conducted in 2016. However, it is three points higher than when the survey was first conducted in 2011, suggesting a slow improvement in health satisfaction and healthy habits.

### Emerging South-East Asia sees the biggest gains in health satisfaction and habits

 Mainland China and Macau remain the top two markets with the highest index scores, as in 2016, but the most notable gains are in emerging South-East Asian markets: the Philippines (+5), Indonesia (+4), Malaysia (+3) and Thailand (+1) each saw improvements since 2016, with Vietnam (-4) a regional exception.

### Older respondents are more satisfied with their health and habits

Older people in the Asia-Pacific region have higher AIA Healthy Living Index scores on average – mostly because they are more likely to conduct healthy activities regularly, since they presumably have more time and motivation to do so. The index for those aged over 65 is 70/100, compared to a score of 63/100 for those aged 18 to 29.

	Index 2018	Index 2016	Index 2013	Index 2011	Change in score since 2016	Change in rank since 2016
Regional	64	64	62	61	0	N/A
Mainland China	70	72	69	68	-2	0
Macau	70	70	69	70	0	+1
Thailand	67	66	61	57	+1	+1
Malaysia	66	63	61	62	+3	+3
Philippines	66	61	61	63	+5	+5
India	64	61	58	61	+3	+4
Australia	63	64	62	59	-1	-1
Vietnam	63	67	71	68	-4	-5
New Zealand	62	63	61	58	-1	-2
Cambodia	62	N/A	N/A	N/A	N/A	N/A
Indonesia	62	58	55	55	+4	+4
Taiwan	61	59	58	59	+2	+2
Korea	60	61	57	55	-1	-3
Singapore	60	61	59	57	-1	-4
Hong Kong	58	57	58	57	+1	+1
Sri Lanka	58	65	63	NA	-7	-11

Note: Cambodia is newly added market in 2018

## PEOPLE ARE SLIGHTLY LESS SATISFIED WITH THEIR HEALTH...

### People's satisfaction with their health and habits has declined since 2016

Over the whole region, 81 per cent of respondents are satisfied with their health, down slightly from 84 per cent in 2016.

The largest declines are seen in Sri Lanka (-12 per cent) and mainland China (-9 per cent), while there were increases in satisfaction in Macau, Malaysia, Vietnam, Indonesia, Taiwan and Hong Kong.

#### Overall satisfaction on health (% positively satisfied)



## People are least happy with their exercise and medical checkup habits

On average, people are less happy about most aspects of their health. Only 62 per cent rate themselves positively on the amount of exercise they are getting, and only 60 per cent are satisfied with the frequency of their medical check-ups – both down nine percentage points from 2016.

The results are likely to reflect changing expectations about ideal healthy lifestyles and behaviours as much as changing habits.

## Regional happiness with aspects of wellbeing (% positive self-rating)



## ...BUT THEY ARE MORE LIKELY TO BEHAVE HEALTHILY

#### The rate of adoption of healthy behaviours is rising

Although people in the region are less satisfied with their health, they are more likely to undertake healthy activities, and are more likely to want to lose weight.

More of them claim to exercise and for longer durations than in 2016. On average, respondents claim to do 3.6 hours exercise each week – ranging from a claimed 5.6 hours in mainland China to 1.4 in Sri Lanka.

Some 57 per cent have had medical check-ups in the past year, compared with 52 per cent in 2016, one of the most significant factors raising the AIA Healthy Living Index score.

#### Want to lose weight, %



### More in India, the Philippines and mainland China are fighting fat

Compared to 2016, some 13 per cent more respondents in India, 12 per cent in the Philippines and 8 per cent in mainland China want to lose weight. Across the region a majority – 54 per cent, up from 48 per cent in 2016 – feel the same.

#### The "sleep gap" continues to grow

People in the Asia-Pacific region still struggle to get enough sleep. On average each person sleeps 1.2 hours less each night than they want, compared to a one-hour "sleep gap" in 2016.

#### **HEALTHY BEHAVIOUR (REGIONAL)**

#### Claimed time exercising each week



#### Whether had medical check-up in past 12 months



## Number of different health activities done in the past 4 weeks (out of 15)



## Gap between hours of sleep wanted and hours actually slept



-1.2 hours (2018)

-1.0 hour (2016)

## FINANCING HEALTHY LIVING



#### Many worry about the financial burden of critical illness

Across the region, 50 per cent of people are concerned about the potential costs of critical illness (cancer, heart disease, diabetes or other serious conditions).

The burden is seen as severe by more people in less wealthy countries: 88 per cent of those in Cambodia, 87 per cent in Indonesia and 86 per cent in the Philippines are concerned or very concerned, compared to just 33 per cent of those in mainland China.

In general, smaller proportions of people in wealthier markets are concerned, although there are some outliers: some 62 per cent of those in Singapore are worried about the potential costs of serious illness.

## Percentage concerned or very concerned about potential critical illness costs



## CRITICAL ILLNESS IS EXPECTED TO BE UNAFFORDABLE

Many people expect critical illness will seriously affect their finances

When asked to estimate the costs they would expect to bear for treatment for cancer, 46 per cent estimate an amount that would cause serious financial implications for them.

Some 38 per cent expect the direct costs for heart disease would cause serious financial implications and 26 per cent expect the costs for treating diabetes would be serious.

Those in the Philippines are the most likely to think that cancer treatment will seriously affect them financially (81 per cent); those in Sri Lanka are the least concerned (17 per cent).

Share of population that expects cost of **cancer** they would have to bear is more than they can afford



**46%**(Regional)

Share of population that expects cost of **heart disease** they would have to bear is more than they can afford



**38%** (Regional)

Share of population that expects cost of **diabetes** they would have to bear is more than they can afford



**26%** (Regional)

Share of population who estimate cost of treatment they would have to bear is higher than they can afford, by market

	Cancer	Heart Disease	Diabetes
Australia	46%	40%	32%
Cambodia	35%	31%	25%
Mainland China	26%	15%	11%
Hong Kong	44%	33%	23%
India	58%	49%	20%
Indonesia	53%	47%	31%
Korea	36%	31%	16%
Macau	59%	51%	36%
Malaysia	53%	47%	31%
New Zealand	46%	43%	35%
Philippines	81%	74%	63%
Singapore	54%	45%	33%
Sri Lanka	17%	21%	9%
Taiwan	43%	30%	21%
Thailand	51%	46%	31%
Vietnam	58%	39%	26%

## CONCERNS ABOUT A CRITICAL ILLNESS "FINANCING GAP" ARE COMMON

## Those who struggle to pay for critical illness expect major financing shortfalls

Those respondents who expect the direct costs of critical illness treatments to exceed what they can afford to pay expect a major financing gap, almost two-thirds (62 per cent) of the treatment costs for cancer they expect to have to bear, 61 per cent for heart disease and 60 per cent for diabetes.

Those who expect to struggle to pay for critical illness treatment in mainland China (where shortfalls are expected in the region of 37-39 per cent) and Korea (42-43 per cent) face the smallest financing gaps, although they are still sizeable.

In the Philippines, those who would be unable to afford treatment expect to be able to cover only around 8-12 per cent of costs of critical illness.

Average expected shortfall in **cancer** treatment costs for those who expect not to be able to afford treatment



62%

Average expected shortfall in **heart disease** treatment costs for those who expect not to be able to afford treatment



61% (Regional)

Average expected shortfall in **diabetes** treatment costs among for who expect not to be able to afford treatment



**60%** (Regional)

Average expected financing gap (% shortfall in costs) of critical illness treatment (among respondents who cannot afford treatment)

	Cancer	Heart Disease	Diabetes
Australia	73%	73%	75%
Cambodia	79%	77%	70%
Mainland China	37%	39%	38%
Hong Kong	53%	51%	52%
India	79%	76%	70%
Indonesia	82%	81%	78%
Korea	43%	43%	42%
Macau	72%	70%	70%
Malaysia	63%	62%	54%
New Zealand	78%	71%	73%
Philippines	92%	90%	88%
Singapore	62%	59%	64%
Sri Lanka	83%	75%	92%
Taiwan	49%	47%	51%
Thailand	58%	56%	55%
Vietnam	71%	69%	68%

## THE AVERAGE CRITICAL ILLNESS "FINANCING GAP" IS CONSIDERABLE

### The average shortfall could be as high as one-third of cancer treatment costs

Across all respondents in the Asia-Pacific region (including those who expect to be able to afford treatment), there is still an average expected shortfall of over one-third (36 per cent) of direct cancer treatment costs, implying a financing burden that would have to be borne by other sources. For heart disease the shortfall is 31 per cent and for diabetes 23 per cent.

The average shortfall for cancer treatment is highest in the Philippines, at 75 per cent of expected costs; in each of India, Indonesia, Macau and Vietnam the average shortfall exceeds 40 per cent.

The average expected shortfalls among respondents in mainland China, Sri Lanka and Korea are the lowest in the region, implying a smaller burden on individuals and other financing sources.

Weighted average expected shortfall in **cancer** treatment costs for all respondents



**36%** (Regional)

Weighted average expected shortfall in **heart disease** treatment costs for all respondents



31% (Regional)

Weighted average expected shortfall in **diabetes** treatment costs for all respondents



**23%** (Regional)

Weighted average expected financing gap (% shortfall in costs) of critical illness treatment (among all respondents)

	Cancer	Heart Disease	Diabetes
Australia	34%	29%	24%
Cambodia	27%	24%	18%
Mainland China	10%	6%	4%
Hong Kong	23%	17%	12%
India	46%	37%	14%
Indonesia	43%	38%	24%
Korea	16%	13%	7%
Macau	43%	36%	25%
Malaysia	33%	29%	17%
New Zealand	36%	31%	25%
Philippines	75%	67%	55%
Singapore	34%	27%	21%
Sri Lanka	14%	15%	8%
Taiwan	21%	14%	11%
Thailand	30%	26%	17%
Vietnam	41%	27%	18%

## CRITICAL ILLNESS TREATMENT: HOW WILL YOU PAY?

### Personal savings are a principal source of funding for critical illness care

For most markets, many people expect critical illness treatment will be funded through personal savings (cited by 54 per cent across the region), alongside insurance plans (54 per cent). A minority (42 per cent) expect government financing to contribute.

In mainland China 78 per cent expect to have to use their personal savings for treatment, despite 70 per cent saying they also have insurance coverage. In Singapore (where 62 per cent are worried about critical illness costs) a majority (51 per cent) expect to have to use personal savings, with 76 per cent having insurance cover.

#### Family support remains crucial in less wealthy markets

Those in Cambodia are the least likely to rely on insurance plans (8 per cent) or on the government (4 per cent). Instead, they expect the payment from other family members/relatives (53 per cent) or spouses (40 per cent).

Similarly, those in the Philippines and Vietnam also rely on their spouses (Philippines: 31 per cent, Vietnam: 57 per cent) and other family members. (Philippines: 38 per cent; Vietnam 37 per cent). The Philippines is the only market where most (56 per cent) would also turn to charities or trusts for financial help.

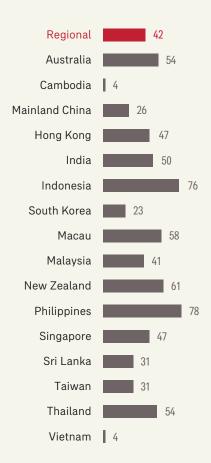
### Percentage who expect to use personal savings to pay for treatment



## Percentage who expect insurance plan to help pay for treatment



### Percentage who expect government to help pay for treatment



## THE COST OF MEDICAL CHECK-UPS IS OFTEN AN ISSUE

#### The frequency of medical check-ups is increasing...

Overall more than half of adults in the Asia-Pacific region (57 per cent) had a medical check-up in the past 12 months, up from 52 per cent in 2016.

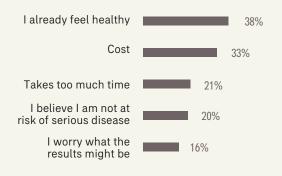
Mainland China (76 per cent), New Zealand (73 per cent), and Australia (71 per cent) are the markets in which people are most likely to have had a medical check-up in the past 12 months. People in Hong Kong are the least likely to have done so (35 per cent).

There has been a large increase since 2016 in those having check-ups in India (from 29 per cent in 2016 to 47 per cent) and Indonesia (from 34 per cent to 49 per cent).

### ...but one-third of people who have not had check-ups recently cite cost as a reason

Across the region one third of people (33 per cent) who have not had a medical check-up in the past year cite the cost as a reason for not doing so. It is among the top two reasons for all markets except mainland China, India, the Philippines, Vietnam and Macau.

#### Top 5 reasons for not having a medical check-up recently



#### Had a medical check-up in past 12 months



## DOES MORE FINANCIAL HELP = HEALTHIER LIVING?

### People would have regular check-ups more often if they were subsidised

If they received more financial help, people in the Asia-Pacific region were most likely to say they would have more medical treatment and check-ups in general (63 per cent), with routine medical check-ups the most likely choice (40 per cent).

Some 44 per cent of respondents said they would be likely to get more exercise if they had financial support, with fitness classes (picked by 20 per cent) the most likely choice.

Among other activities, those in Vietnam are the most interested in buying fitness trackers (27 per cent), those in Taiwan most likely to seek fitness classes (30 per cent) and people in Hong Kong are the most likely from all markets to want alternative medicine (25 per cent).

#### Activities would use more if there was financial help



## HOW HEALTHY LIVING BUDGETS ARE ALLOCATED

### On average people spend as much on medical treatment as on eating more healthily

Considering total spending on healthy living activities, on average 28 per cent of this budget is allocated to buying more healthy foods and 28 per cent on medical treatment. 20 per cent is spent on exercise with the rest spent on other activities such as meditation and supplements.

Sri Lanka leads in terms of the proportion of budget devoted to buying healthy food (73 per cent), followed by Indonesia (50 per cent) and Vietnam (44 per cent).

People in mainland China are the most likely to spend significant sums on exercise (accounting for 35 per cent of all healthy living spending).

#### Share of total healthy living spending on each type of activity



## **EATING HEALTHILY CAN BE EXPENSIVE**

### In most Asia-Pacific markets healthy food is seen as more expensive than unhealthy food

Across the region, 59 per cent think that it is cheaper to buy unhealthy food than healthy food. This rises to over 70 per cent in each of Australia, mainland China, Hong Kong, Korea, New Zealand, Singapore and Taiwan.

Conversely, the majority of those in India, Indonesia, the Philippines and Vietnam think that healthy food is cheaper than unhealthy food. This correlates directly with the fact that in these markets, unlike the others, the perception is that healthy food is more widely available than unhealthy food.

#### Budget isn't as serious a barrier to exercise as time

In almost all markets, people thought that time is more of a barrier than cost to doing more exercise. The exception is in India, where 61 per cent think that exercise is too expensive.

#### Statement agreed with most



#### Percentage who agree with each statement, by market

	Healthy food is cheaper than unhealthy food	Healthy food is more widely available than unhealthy food
Australia	30%	26%
Cambodia	39%	40%
Mainland China	30%	39%
Hong Kong	25%	26%
India	77%	76%
Indonesia	73%	78%
Korea	19%	27%
Macau	31%	31%
Malaysia	34%	38%
New Zealand	21%	20%
Philippines	81%	80%
Singapore	25%	27%
Sri Lanka	36%	37%
Taiwan	24%	23%
Thailand	36%	36%
Vietnam	64%	70%

## MAKING HEALTHY LIVING SUSTAINABLE



# MAKING HEALTHY LIVING SUSTAINABLE

Drinking more water, eating more fruit and vegetables and moderate exercise are easily sustainable health changes...

Eighty per cent of people in the Asia-Pacific have consciously tried to drink water every day, of whom 87 per cent have continued to do so. The majority of people who tried eating more fruit and vegetables are also very likely to have sustained the habit (82 per cent).

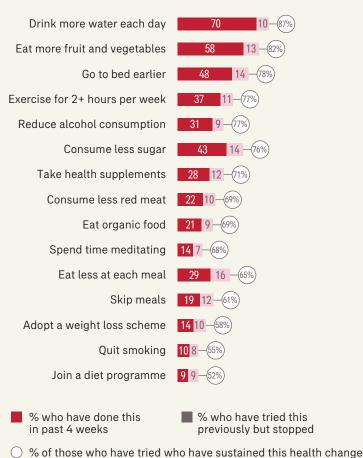
Seventy-seven per cent of those who have ever tried to maintain an exercise programme of at least two hours each week claim to do so now.

#### ...but sticking to a diet and quitting smoking are not

Although people find it relatively easy to eat better, they find it more difficult to maintain diets and reduce consumption. Only 52 per cent of those who have ever tried a diet programme continue to use them now, and 58 per cent of those who have ever tried a weight loss scheme continue with one now. Compared with other activities, people are also relatively less likely to continue eating less at each meal (65 per cent) or to skip meals altogether (61 per cent).

As is well known, smoking is a difficult habit to quit – of all those who previously tried quitting, only 55 per cent have successfully managed to do so.

#### Percentage who have tried different health activities



## WHY START, AND WHY STOP EATING MORE HEALTHILY?

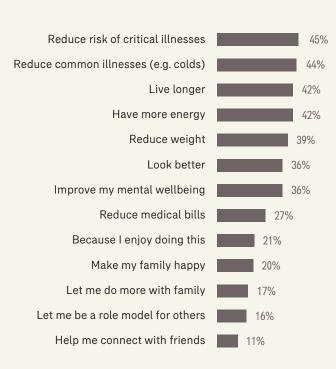
### People see a clear link between eating better and improving their health

The major reasons for eating more vegetables, fruits and organic food are reducing the chance of illness – 45 per cent do so for reducing the risk of critical illness, 44 per cent for reducing common illnesses and 42 per cent to live longer.

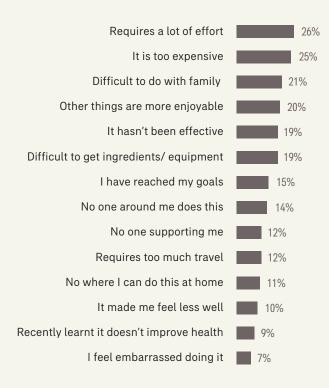
#### Cost is often the reason for stopping

People stop eating healthily for a wide variety of reasons, with no one single factor predominating across all markets. However, the cost of eating healthy food is the most cited factor in Australia, New Zealand, Korea, Taiwan, the Philippines, Cambodia and Sri Lanka.

#### Reasons for eating more healthy food



#### Reasons for stopping eating healthily



## WHY START, AND WHY STOP GETTING MORE EXERCISE?

### People exercise to gain energy and improve their looks, not for health reasons

People are more likely to start exercise to improve their looks (47 per cent) and for weight loss (49 per cent) than for reducing the risk of illnesses. In Thailand, 63 per cent exercise to look better.

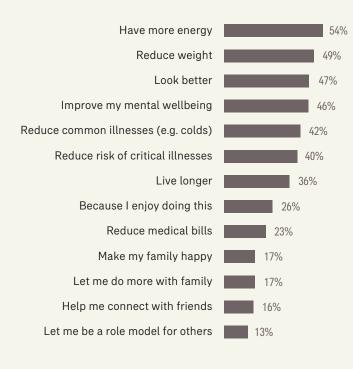
#### They stop because of the effort required

Those who stop exercise are most likely to stop because it requires too much effort (42 per cent). In Taiwan, the number one reason is that they find other things more enjoyable (32 per cent).

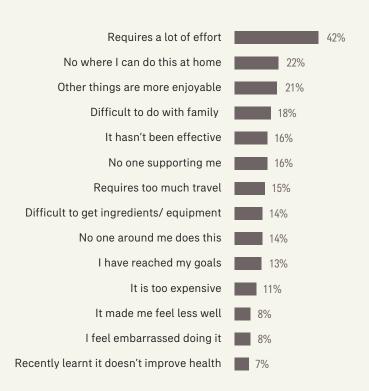
#### Lack of space to exercise at home can be demotivating

People in the Philippines, Indonesia, Hong Kong and Vietnam are more likely than others to stop exercise due to lack of space to work out at home (Philippines: 39 per cent; Hong Kong: 33 per cent; Indonesia: 32 per cent, Vietnam: 30 per cent).

#### Reasons for doing more exercise



#### Reasons for stopping exercise



## WHY START, AND WHY STOP SLEEPING MORE?

#### People try to sleep more for energy and mental wellbeing

Fifty-eight per cent of those who have tried sleeping for longer do so to improve their energy levels. This is particularly true in New Zealand (73 per cent) and Malaysia (73 per cent).

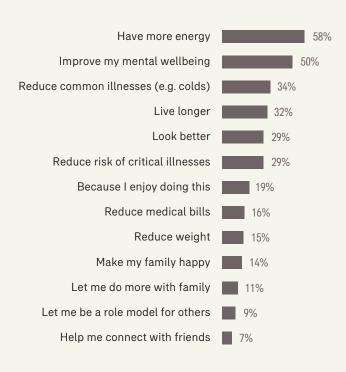
People in mainland China (67 per cent) and Vietnam (58 per cent) are the most likely to try sleeping longer to improve their mental wellbeing.

#### Getting more sleep is too much hard work

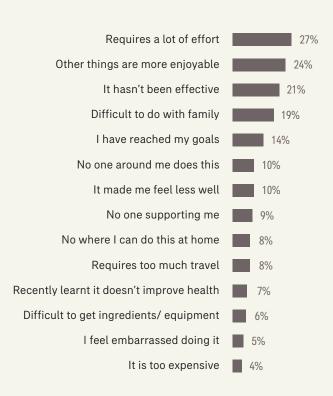
Besides requiring too much effort (cited by 27 per cent), people are often not sleeping enough because they find other things more enjoyable (24 per cent).

In Australia and New Zealand, families are also likely to get in the way of sleeping more (Australia: 31 per cent; New Zealand: 31 per cent)

#### Reasons for trying to sleep longer



#### Reasons for not sleeping enough



## PEOPLE WANT TO MAKE HEALTHY LIVING SUSTAINABLE

#### People who stop healthy habits often want to try again

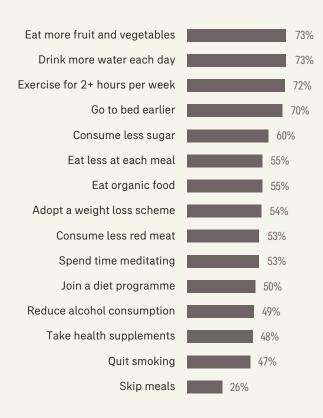
Of the activities that people have stopped before, people most want to try eating more fruit and vegetables and drinking more water again (73 per cent); and moderate exercise (72 per cent). These are also among the habits that people usually find it easiest to sustain.

Those in Taiwan (87 per cent), Philippines (76 per cent) and New Zealand (64 per cent) are the most likely to want to resume going to bed earlier.

#### Harder habits to sustain may need better incentives

Fewer people who have tried and failed to maintain health changes that are hard to sustain, such as joining a diet programme or quitting smoking, are likely to want to try again, suggesting they might need better incentives to get back to healthy habits.

#### Lapsed activities that people want to resume doing



# TECHNOLOGY AND HEALTHY LIVING



#### People see the benefits of health and activity trackers

Across all markets, most people (68 per cent of all respondents) consider health and activity tracking technology to be easy to use and 65 per cent think they motivate positive changes in behaviour.

Those in Cambodia (80 per cent) India (76 per cent), and mainland China (68 per cent) are the most likely to think that activity trackers are fashionable.

Percentage who agree about each statement about activity trackers - All respondents (Regional)



Forty-four per cent think that health and activity trackers do not share too much information. This proportion is lowest in New Zealand (where only 19 per cent agree).

Percentage who agree about each statement about activity trackers - Activity tracker users (Regional)



## CAN ACTIVITY TRACKERS PROMOTE HEALTHY LIVING?

### More people are trying health and activity trackers, but one-third give up

Fifteen per cent of all adults in the Asia-Pacific region have tried using activity trackers before, rising from almost one in three (30 per cent) in Singapore, one in four in mainland China (25 per cent) and over one in five (23 per cent) in Australia, to less than one in 20 (under 5 per cent) in each of Cambodia, Indonesia, the Philippines, Vietnam and Sri Lanka .

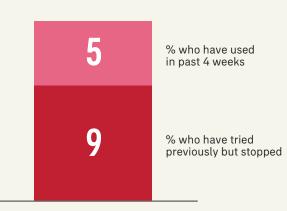
Just 63 per cent of those who have tried such trackers keep using them; more than one in three (37 per cent) have stopped doing so.

Of those surveyed in Singapore, 20 per cent are currently using activity trackers – the most likely to do so from the markets surveyed, followed by 17 per cent in mainland China and 13 per cent in Malaysia and Hong Kong

#### Usage of activity trackers

% of those who have ever used who keep doing so

63%



Wear and activity tracker

## WHY START, AND WHY STOP USING HEALTH TRACKING TECHNOLOGY?

#### Weight loss is the key motivator

Losing weight is the key reason for why people use health and activity trackers, cited by 43 per cent across the region and as many as 70 per cent of those in New Zealand and 66 per cent in Singapore.

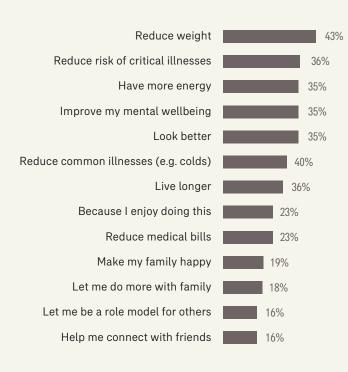
#### The effort of using them is often a barrier

Although people claim to find activity trackers easy to use, the effort of doing so regularly can be off-putting. Some 34 per cent of those who quit using them did so because they took too much effort. One quarter (25 per cent) did so because they were not seen as effective.

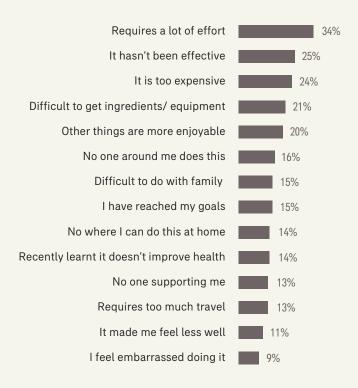
#### Cost is a factor in some markets

Over half (54 per cent) of those in Indonesia who stopped using activity trackers did so because they were too expensive; 43 per cent in Sri Lanka and 40 per cent in the Philippines felt the same.

#### Reasons for using activity trackers



#### Reasons for stopping using activity trackers



# WHAT KIND OF HEALTHY LIVING TECHNOLOGY DO PEOPLE WANT?

#### Awareness levels about the availability of personal health tracking technology are low

Across the Asia-Pacific region, majorities lack awareness of many health and fitness monitoring technologies that are available through devices such as smartphone apps or other platforms that do not require a doctor's visit.

People are most likely to be aware of technologies that track blood pressure (41 per cent), heartbeat (40 per cent) and steps walked each day (39 per cent).

### People most want devices that measure blood pressure, blood sugar and body fat percentage

People in the Asia-Pacific region are most likely to believe that devices that measure blood pressure will encourage healthy behaviour, especially in Cambodia (where 71 per cent think so) and the Philippines (62 per cent).

### Proportion that thinks this technology would encourage healthy behaviour



## SECURITY, SPEED AND OTHER HEALTH TECH TRADE-OFFS

People in the Asia-Pacific region have mixed views on how technology can be applied to healthcare and the trade-offs that are often required between speed, cost and in-person consultation and treatment.

#### Concerns about sharing data with doctors are not a barrier to health tech usage...

Seventy-five per cent of people across the region would be happy to have devices that provide healthcare professionals with ongoing health data.

#### ...but worries about data security might be

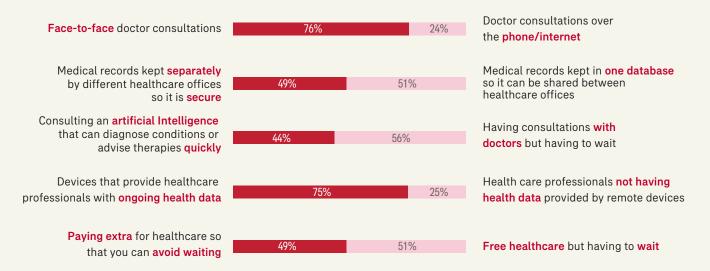
However, almost half (49 per cent) do not want their health data kept in a single medical database because they are concerned about the data not being secure. This is a particular concern in India (84 per cent), Sri Lanka (65 per cent) and Vietnam (65 per cent).

#### Remote consultations remain unpopular, but some are open to Al if it means quicker diagnoses

Less than one in four (24 per cent) prefer doctor consultations over the phone or internet than face-to-face interaction. But just under half (44 per cent) are open to using artificial intelligence (AI) for medical consultations if it meant that they could be diagnosed or treated more quickly — with majorities open to this in each of mainland China (65 per cent), Malaysia (56 per cent), Korea (59 per cent), Taiwan (52 per cent), Thailand (65 per cent), Macau (57 per cent) and Sri Lanka (53 per cent).

Those in Thailand are highly prepared to use technology for consultations. They are the most likely to accept AI medical diagnoses (65 per cent) and the most likely to be open to having doctor consultations over the telephone or internet (46 per cent).

#### Given the choice, which of these would you prefer?



# THE ENVIRONMENT AND HEALTHY LIVING



#### Most think that environmental factors are affecting their health

Across the region, 87 per cent of people are satisfied with their environment. Even so, the majority say that some environmental factors are negatively affecting their health, including 98 per cent of those surveyed in Cambodia, mainland China and Taiwan.

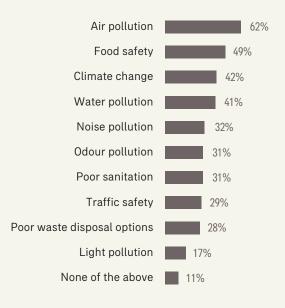
#### Air pollution is a prime concern

Sixty-two per cent think that air pollution is negatively affecting their health. This is the number-one concern in all the markets with the exception of Vietnam, where food safety is the primary concern (70 per cent), Cambodia, where the biggest concern is poor sanitation (67 per cent) and among New Zealanders who are most concerned about climate change (22 per cent).

### Mainland China is the most concerned about food safety and water pollution

Nearly three-quarters (72 per cent) of those in Mainland China say food safety has negatively affected their health, the most of any market surveyed. Some 61 per cent say the same about water pollution.

#### Percentage who think each environmental factor negatively impacts health



## ACTIONS TAKEN TO REDUCE EFFECT OF ENVIRONMENTAL PROBLEMS

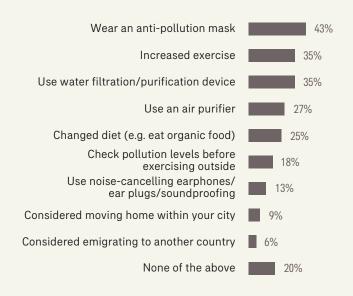
#### Some 43 per cent have worn anti-pollution masks to reduce the effects of environmental problems

When asked what actions people have taken to mitigate the effects of environmental degradation, people in the Asia-Pacific region are most likely to say that they have tried wearing anti-pollution masks (43 per cent) – including 76 per cent who have done so in Taiwan and 73 per cent in Cambodia

#### China is taking the health impact of pollution seriously

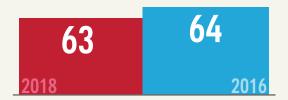
People in mainland China are taking the lead in taking actions to reduce the impact of environmental pollution on their health. They are the most likely out of all the countries surveyed to have tried increased exercise (56 per cent), using an air purifier (52 per cent), checking pollution levels before going out (37 per cent) and in using noise-cancelling earphones (22 per cent). They are also the most likely to buy organic food (45 per cent).

#### Actions taken to reduce effect of environmental problems



# MARKET-SPECIFIC FINDINGS





The AIA Healthy Living Index in Australia has dropped 1 point from 64 in 2016 to 63 in 2018. The change is mainly due to lack of sufficient sleep, which changed from 76 per cent in 2016 to 66 per cent in 2018.

#### **Financing Healthy Living**

Only 33 per cent of people in Australia are concerned about medical costs. Over half (54 per cent) expect the government to contribute to the costs of critical illness treatment. More than half (54 per cent) think that they could afford the expense of cancer treatment.

#### Making Healthy Living Sustainable

Australians are the second least likely to continue going to bed earlier (64 per cent) once they try. On average, each Australian sleeps one-and-a-half hours less than they would ideally like to.

They are the most likely in the region to have stopped sleeping early because of their family (31 per cent).

#### **Technology and Healthy Living**

Twenty-three per cent have used fitness trackers at least once before with 10 per cent continuing to do so. Only 24 per cent would accept artificial intelligence diagnoses so that they could be treated quicker.

Note: 600 interviews were conducted in Australia nationwide. Interviews were conducted via online sampling.



### **CAMBODIA**

### Concerned about medical costs and sanitation

#### The AIA Healthy Living Index

Cambodia is a new market for the survey in 2018. The AIA Healthy Living Index in Cambodia is 62. It ranked 10th out of the 16 markets.

#### **Financing Healthy Living**

Close to nine out of ten people (88 per cent) in Cambodia are concerned about medical costs, with 77 per cent needing to use their personal savings to pay for critical illness treatment. Even so, 65 per cent think that they could afford the expense of cancer treatment.

#### Making Healthy Living Sustainable

People in Cambodia are the most likely to continue a diet program (83 per cent) once they try.

They are most likely so say they want to live longer (86 per cent) as their reason for eating healthier food.

#### **Technology and Healthy Living**

Only 3 per cent have used fitness trackers at least once with 2 per cent continuing to do so.

Despite this, 70 per cent would like to have devices that provide health care professionals with on-going health data.

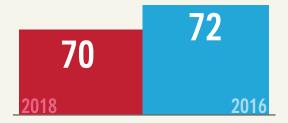
#### The Environment and Healthy Living

Cambodians are the most likely in the region to be concerned about poor sanitation (67 per cent), odour pollution (50 per cent) and traffic safety (49 per cent).

They are the 2nd most likely to have tried anti-pollution masks (73 per cent).

Note: 300 interviews were conducted in Phnom Penh in Cambodia. Interviews were





The AIA Healthy Living Index in mainland China has dropped 2 points from 72 in 2016 to 70 in 2018.

The change is mainly due to lower satisfaction in overall health (92 per cent in 2016 to 83 per cent in 2018).

Mainland Chinese are the most likely to claim to exercise for 2 hours each week (54 per cent)

#### **Financing Healthy Living**

Those in mainland China are the least concerned about the costs of medical care (33 per cent). Even so, 78 per cent say they would use their personal savings to pay for critical illness treatment. Some 74 per cent think that they can afford the expense of cancer treatment.

Note: 2,000 interviews were conducted in China, with 400 in each of the Tier 1 cities of Beijing, Shanghai, Guangzhou and Shenzhen, and 400 across nine Tier 2 cities. Interviews were conducted via online sampling.

#### Making Healthy Living Sustainable

Mainland Chinese are the most likely out of the markets surveyed to have reduced eating unhealthy snacks (71 per cent). They are the second most likely to say they do at least 2 hours exercise each week (65 per cent)

#### **Technology and Healthy Living**

One in four people in mainland China (25 per cent) have used fitness trackers at least once, with 17 per cent continuing to

Along with Thailand, they are the most likely to accept Al diagnoses if it means shorter wait time (65 per cent).





The AIA Healthy Living Index in Hong Kong has increased 1 point from 57 in 2016 to 58 in 2018. The change is mainly due to an increase in the proportion of people who have had a medical check up in the past 12 months, from 29 per cent in 2016 to 35 per cent in 2018 – although this proportion is still the lowest from all the markets surveyed.

#### **Financing Healthy Living**

Just 39 per cent of people in Hong Kong are concerned about medical costs, and some 65 per cent say they would use their insurance plan to pay for critical illness treatment. Over half (56 per cent) think that they could afford the expense of cancer treatment.

Nonetheless, 46 per cent do not have medical check-ups because of the costs involved.

Note: 1,000 interviews were conducted in Hong Kong, throughout the SAR. Interviews were conducted via online sampling.

#### Making Healthy Living Sustainable

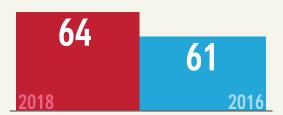
Twenty-eight per cent have tried meditation before – second only to Thais. Around 70 per cent continued meditation after trying it. They are the most likely to have stopped exercise because there is not enough space at home (33 per cent).

#### **Technology and Healthy Living**

Some 18 per cent have used fitness trackers at least once with 13 per cent continuing to do so.

Those in Hong Kong are much more likely to prefer face-to-face doctor consultation (73 per cent) than phone/ internet consultation (27 per cent).





The AIA Healthy Living Index in India has increased 3 points from 61 in 2016 to 64 in 2018. The change is mainly due to an increase in the proportion of people who have had a medical check up in the past 12 months from 29 per cent in 2016 to 47 per cent in 2018.

#### **Financing Healthy Living**

Forty-four per cent of people in India are concerned about medical costs. Half (50 per cent) say they would expect the government to pay for some critical illness treatment.

42 per cent think that they could afford the expense of cancer treatment.

#### Making Healthy Living Sustainable

Only 45 per cent have ever tried reducing sugar consumption – the second lowest proportion from all the markets. They are also the market second most likely to have had dental care in the past 4 weeks (33 per cent).

Those in India are the most likely to have stopped eating healthily because no one around them is doing the same (45 per cent)

#### **Technology and Healthy Living**

Only 7 per cent have used fitness trackers at least once with 5 per cent continuing to do so.

Some 90 per cent are willing to wear devices that update health care professionals with ongoing health data, but they are the least likely to accept artificial intelligence for medical diagnoses (12 per cent).

Note: 1,000 interviews were conducted in India, with 200 in each of Delhi, Mumbai, Chennai, Bangalore and Ahmedabad. Interviews were conducted face-to-face.



### **INDONESIA**

### Among the most concerned about medical costs

#### The AIA Healthy Living Index



The AIA Healthy Living Index in Indonesia has increased 4 points from 58 in 2016 to 62 in 2018. The change is mainly due to an increase in the proportion of people who have had a medical check up in the past 12 months from 34 per cent in 2016 to 49 per cent in 2018.

#### **Financing Healthy Living**

Eighty-seven per cent of people in Indonesia are concerned about medical costs – the second highest in the region. Only 31 per cent say they would use personal savings for treatment of critical illness - 76 per cent would seek help from the government, 47 per cent think that they could afford the expense of cancer treatment.

Note: 750 interviews were conducted in Indonesia, with 350 in Greater Jakarta and 200 in each of Surabaya and Medan. Interviews were conducted face-to-face.

#### Making Healthy Living Sustainable

Sixty per cent of people in Indonesia say they eat healthy food in order to look better – the highest proportion from any market.

#### **Technology and Healthy Living**

Only 2 per cent of people in Indonesia have used fitness trackers at least once, with 1 per cent continuing to do so. They are the least likely to want to have doctor consultation via phone/internet, with just 6 per cent preferring this to face-to-face consultations.





The AIA Healthy Living Index in Korea has dropped 1 point from 61 in 2016 to 60 in 2018. The change is mainly due to a reduction of the proportion doing regular exercise from 66 per cent in 2016 to 52 per cent in 2018.

Only 60 per cent of people in Korea are satisfied with their health – the lowest proportion from all markets.

#### **Financing Healthy Living**

Seventy-three per cent say they would use their insurance plan to pay for critical illness treatment. More than two-thirds (64 per cent) think that they could afford the expense of cancer treatment.

Note: 750 interviews were conducted in South Korea, nationwide. Interviews were conducted via online sampling.

#### Making Healthy Living Sustainable

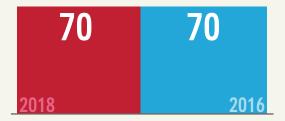
People in Korea are more likely to skip meals with 30 per cent having done so in the past four weeks. They are also the most likely to be using a weight loss scheme (28 per cent).

#### **Technology and Healthy Living**

Only 6 per cent say they have ever used fitness trackers and only 3 per cent say they continue to do so. Some 46 per cent who gave up fitness trackers say they did so because it takes too much effort.

67 per cent would be happy to wear devices that send data to health care professionals remotely.





The AIA Healthy Living Index in Macau remains unchanged in 2018 from 2016. A slightly larger proportion of people medical check-ups in the past 12 months (63 per cent in 2018 from 58 per cent in 2016), but fewer are having sufficient sleep, which fell from 79 per cent in 2016 to 72 per cent in 2018.

#### **Financing Healthy Living**

Close to half (49 per cent) people in Macau are concerned about medical costs. A majority (59 per cent) think that they could not afford the expense of cancer treatment.

#### Making Healthy Living Sustainable

People in Macau are the most likely in the region to have reduced eating unhealthy foods – 69 per cent have cut sugar consumption, 69 per cent have cut processed foods and 60 per cent have cut the number of salt intake.

Fifty-eight per cent are eating better because they want to live longer.

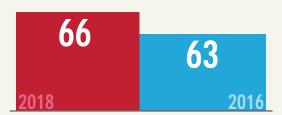
#### **Technology and Healthy Living**

Fourteen per cent have used fitness trackers at least once with 12 per cent continuing to do so.

They are the most likely to agree keeping all medical record in one database is positive, with 75 per cent thinking this would be beneficial.

Note: 150 interviews were conducted in Macau. Interviews were conducted via telephone surveys.





The AIA Healthy Living Index in Malaysia has increased 3 points from 63 in 2016 to 66 in 2018. The change is mainly due to an increase in the proportion of people who have had a medical check up in the past 12 months, which changed from 45 per cent in 2016 to 53 per cent in 2018.

#### **Financing Healthy Living**

Fifty-seven per cent of people in Malaysia are concerned about medical costs; 75 per cent say they would use their insurance plan to pay for critical illness treatment. More than half (53 per cent) think that they could not afford the expense of cancer treatment.

Note: 750 interviews were conducted in peninsular Malaysia. Representative sampling was conducted on ethnicity and region. Interviews were conducted via online sampling.

#### Making Healthy Living Sustainable

Some 53 per cent of people in Malaysia eat healthy food in order to look better; 52 per cent do so to reduce the risk of critical illness.

People in Malaysia are relatively less likely to continue healthy eating habits once they try, such as eating more vegetables/ fruits (79 per cent) and eating less red meat (66 per cent).

They are most likely to have stopped eating healthily because it is difficult to do with family (31 per cent).

#### **Technology and Healthy Living**

In Malaysia 21 per cent have used fitness trackers at least once with 13 per cent continuing to do so.

Fifty-six per cent are willing to have medical diagnoses via artificial intelligence.



### **NEW ZEALAND**

### Eating less healthily due to cost

#### The AIA Healthy Living Index



The AIA Healthy Living Index in New Zealand has dropped 1 point from 63 in 2016 to 62 in 2018. The change is mainly due to fewer people consuming healthy food, which changed from 79 per cent in 2016 to 73 per cent in 2018.

#### **Financing Healthy Living**

Two-fifths (40 per cent) of people in New Zealand are concerned about medical costs. Some 61 per cent say they would expect the government to pay for some critical illness treatment; 54 per cent think that they could afford the expense of cancer treatment.

#### Making Healthy Living Sustainable

Only 10 per cent of New Zealanders have taken part in sports within the previous 4 weeks. Along with Sri Lanka, that is the lowest proportion in the region.

Seventy-nine per cent think that healthy food is more expensive than unhealthy food – the second highest proportion in the region. Some 30 per cent of those who stopped eating healthy food did so because it is too expensive.

#### **Technology and Healthy Living**

Twenty-two per cent have used fitness trackers at least once with 11 per cent continuing to do so. They are the most likely to want their medical records in one healthcare database (73 per cent) instead of having the added security of records being kept separately.

Note: 300 interviews were conducted in New Zealand, nationwide. Interviews were conducted via online sampling.





The AIA Healthy Living Index in the Philippines has increased 5 points from 61 in 2016 to 66 in 2018. The change is mainly due longer claimed exercise hours, which changed from an average of 2.1 hours per week in 2016 to 3.7 hours per week in 2018.

#### **Financing Healthy Living**

Some 86 per cent of people in Philippines are concerned about medical costs – the second highest from the region (behind Cambodia, 88 per cent). Some 78 per cent say they would expect the government to pay for some critical illness treatment. Only 19 per cent think that they could afford the expense of cancer treatment – the lowest in the region.

Note: 750 interviews were conducted in Philippines, with 350 in Manila, and 200 in each of Cebu and Davao. Interviews were conducted face-to-face.

#### Making Healthy Living Sustainable

Along with Thailand, people in the Philippines are the most likely to undertake meditation to improve their health (27 per cent). More than 8 out of ten (85 per cent) who try meditation continue doing so regularly.

Conversely, they are likely to have stopped exercise because it requires too much effort (42 per cent) and because they feel they are not getting support from others (41 per cent).

#### **Technology and Healthy Living**

Only 5 per cent of respondents in the Philippines have used fitness trackers at least once, with 4 per cent continuing to do so. Only 2 per cent would want consultations with doctors via telephone or internet.



### **SINGAPORE**

### Tracking their activities and willing to share health data

#### The AIA Healthy Living Index



The AIA Healthy Living Index in Singapore has dropped 1 point from 61 in 2016 to 60 in 2018. The change is mainly due to people reporting a lower frequency reporting regular exercise, from 67 per cent in 2016 to 53 per cent in 2018, but slightly more wanting to lose weight (from 62 per cent in 2016 to 67 per cent in 2018).

#### **Financing Healthy Living**

Sixty-two per cent of people in Singapore are concerned about medical costs, the highest proportion among higher-income countries in the Asia-Pacific region. While 76 per cent say they would use insurance plans to pay for some critical illness treatment, a majority (54 per cent) think that they could not afford the expense of cancer treatment.

#### Making Healthy Living Sustainable

People in Singapore are the second least likely to continue eating organic food (53 per cent) once they try.

#### **Technology and Healthy Living**

People in Singapore are most likely of any across the Asia-Pacific to use health trackers. One-third (30 per cent) have used fitness trackers at least once with 20 per cent continuing to do so.

Some 70 per cent prefer to have their medical records kept in one single database than separately among different healthcare providers – suggesting broad support for the National Electronic Health Record.

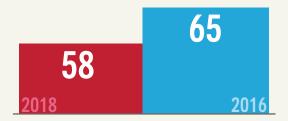
Almost three-quarters (72 per cent) are willing to wear devices that continuously update health professionals with data.

Note: 500 interviews were conducted in Singapore, nationwide. Interviews were conducted via online sampling.



# **SRI LANKA**Unwilling to exercise

#### The AIA Healthy Living Index



The AIA Healthy Living Index in Sri Lanka has dropped 7 points from 65 in 2016 to 58 in 2018. The change is mainly due to a smaller proportion reporting regular exercise (from 63 per cent in 2016 to 35 per cent in 2018), and regular medical check ups, which fell from 49 per cent in 2016 to 41 per cent in 2018).

#### **Financing Healthy Living**

Forty-one per cent of people in Sri Lanka are concerned about medical costs. One third (33 per cent) say they would use their personal savings to pay for critical illness treatment. Heart disease is seen to be the least affordable critical illness:

21 per cent think that they could not afford the expense.

#### Making Healthy Living Sustainable

Sri Lankan are the least likely to say they do at least 2 hours exercise each week (just 16 per cent report that they do this). Only 2 per cent say they have attended a gym or fitness class within the previous four weeks – also the lowest proportion in the region.

Those that do exercise are most likely to have started doing so to make their families happier (40 per cent).

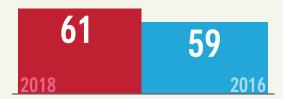
#### **Technology and Healthy Living**

Only 1 per cent have used fitness trackers at least once with none of them continuing to do so.

They are less likely to agree doctor consultation over phone/internet is positive, with only 7 per cent holding this opinion.

Note: 300 interviews were conducted in Sri Lanka, with 100 residents in each of Colombo, Kandy and Galle. Interviews were conducted face-to-face.





The AIA Healthy Living Index in Taiwan has increased 2 points from 59 in 2016 to 61 in 2018. The change is mainly due to a greater proportion of people saying they have had a medical check up in past 12 months which changed from 44 per cent in 2016 to 51 per cent in 2018.

#### **Financing Healthy Living**

Over half (51 per cent) of people in Taiwan are concerned about medical costs. Some 78 per cent say they would use their insurance plans to pay for critical illness treatment. More than two out of five (43 per cent) think that they could not afford the expense of cancer treatment.

Note: 600 interviews were conducted in Taiwan, with 200 residents in each of Taipei, Taichung and Kaohsiung. Interviews were conducted via online sampling.

#### Making Healthy Living Sustainable

People in Taiwan are the fourth least likely to continue eating organic food (59 per cent) once they try.

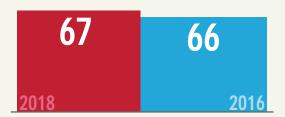
The reasons they are most likely to have stopped eating healthy food are the expensive cost (cited by 27 per cent) and difficulties in getting required ingredients (23 per cent).

#### **Technology and Healthy Living**

Some 13 per cent of people in Taiwan have used fitness trackers at least once with 8 per cent continuing to do so.

Seventy-four per cent are willing to wear devices that share data with health care professionals and 52 per cent would consult artificial intelligence for quicker medical diagnoses.





The AIA Healthy Living Index in Thailand has increased 1 point from 66 in 2016 to 67 in 2018. The change is mainly due to more people reporting that they had a medical check-up in past 12 months (from 57 per cent in 2016 to 62 per cent in 2018).

However, fewer claim to exercise regularly (77 per cent in 2016 to 61 per cent in 2018).

#### **Financing Healthy Living**

Only 36 per cent of people in Thailand are concerned about medical costs. Despite this low number, 59 per cent say they would use their personal savings to pay for critical illness treatment. Over half (51 per cent) think that they could not afford the expense of cancer treatment.

Note: 750 interviews were conducted in Thailand, with 400 in Bangkok, and 350 between Chiang Mai, Nakhon Ratchasima, Surat Thani and Rayong. Interviews were conducted via online sampling.

#### Making Healthy Living Sustainable

People in Thailand are the second most likely to have successfully quit smoking once they tried to do so (72 per cent).

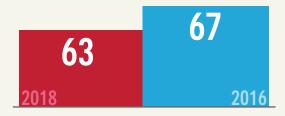
They are most likely to have started exercise because of they want to look better (63 per cent).

#### **Technology and Healthy Living**

Eighteen per cent have used fitness trackers at least once with 11 per cent continuing to do so.

They are the most likely to accept non-face to face doctor consultations, with 65 per cent willing to use AI consultation, and 46 per cent preferring doctors consultations to be over the phone/ internet.





The AIA Healthy Living Index in Vietnam has dropped 4 points from 67 in 2016 to 63 in 2018. The change is mainly due to reduction in the proportion saying they get regular exercise (from 80 per cent in 2016 to 65 per cent in 2018), and insufficient holidays which changed from 77 per cent in 2016 to 61 per cent in 2018.

#### **Financing Healthy Living**

A majority (57 per cent) of people in Vietnam are concerned about medical costs. Three quarters (75 per cent) say they would use their personal savings to pay for critical illness treatment. Only two out of five (42 per cent) think that they could afford the expense of cancer treatment.

Note: 500 interviews were conducted in Vietnam, with 125 in each of Ho Chi Minh City and Ha Noi, and 50 in each of Danang, Can Tho, Hai Phong, Khan Hoa and Vinh. Interviews were conducted face-to-face.

#### Making Healthy Living Sustainable

People in Vietnam are the third least likely to have ever taken part in sports (26 per cent). They are most likely to have stopped exercise because there is no space for exercise at home (30 per cent). They are the least likely to try meditation with only 2 per cent having done so in the past 4 weeks.

Those in Vietnam manage to sleep on average 7 hours and 15 minutes each day – along with people in India this is the longest from all the survey markets. Even so, on average those in Vietnam would like to sleep one hour longer each day. Some 52 per cent have tried going to bed earlier within the past four weeks.

#### **Technology and Healthy Living**

Only 3 per cent have used fitness trackers at least once with 2 per cent continuing to do so. Some 65 per cent prefer to have medical records kept separately by different health care professionals than in a central database, so that the data is kept more secure.