

Prevalence and patterns of use of natural health products and medicines in New Zealand – a pilot study using an online market research panel

E Lyn Lee¹, Jeff Harrison¹, Joanne Barnes¹

¹ School of Pharmacy, University of Auckland, New Zealand

Corresponding author:

Name: Joanne Barnes

Affiliation: Professor in Herbal Medicines; Deputy Head of School

Department, Institution: School of Pharmacy, University of Auckland, 85 Park Rd, Grafton, Auckland 1023, New Zealand

Email: j.barnes@auckland.ac.nz

ORCID: 0000-0002-1522-8433

Project title: Towards a natural health products and medicines census for New Zealand

New Zealand 'All-Medicines' (All-MedsNZ) questionnaire

We recommend that you have all the NHPs and conventional medicines that you are currently using with you before starting the questionnaire. You will be asked to answer questions about each product/medicine and capture and upload a photograph of each natural health product.

You should complete this questionnaire ONCE only.

Please enter your unique ID: _____

For this project, 'natural health products' (NHPs) includes, but is not limited to, products or preparations described as natural health products, complementary/alternative medicines/remedies, dietary supplements, nutraceuticals, and/or traditional medicines (products or preparations used in traditional medicine systems, such as rongoā Māori, or traditional Chinese medicine); NHPs may be used in different dosage forms, including tablets, capsules, powders, liquids, creams, ointments, and fresh or dried herbs. NHPs may contain a single ingredient (such as one dietary supplement ingredient, e.g. glucosamine, or one herbal medicine ingredient, e.g. kava root) or several ingredients (e.g. many 'traditional medicines' are preparations of several herbal ingredients or herbal ingredients and other substances).

For example:

Dietary supplements or 'nutraceuticals'	products/preparations containing various ingredients (e.g. omega-3 fatty acids, fish oils, glucosamine, chondroitin, co-enzyme Q10), as well as some of the types of ingredients listed below
Herbal medicines/remedies	medicines made from plants, or parts of plants (e.g. echinacea root, ginkgo leaf, St John's wort, valerian)
Homeopathic remedies; biochemic tissue salts	usually highly dilute preparations based on plants or other substances (e.g. Bryonia, Natrum muriaticum); tissue salts: Kali phos and others
Flower remedies/ essences	usually highly dilute preparations based on flowers, plants and trees (e.g. Bach flower remedies)
Probiotics	live preparations of some types of bacteria, usually made as capsules
Traditional Māori medicines	preparations usually made from certain plants, minerals, animal products, and/or other substances (e.g. kawakawa, koromiko)
Traditional Pacific medicines	preparations usually made from certain plants, minerals, animal products, and/or other substances (e.g. noni, kava)
Traditional Chinese medicines	preparations (formula) usually made from certain plants, minerals, animal products, and/or other substances (e.g. licorice (gan cao), angelica (dang gui), ephedra (ma huang), ginseng (ren shen))
Traditional Ayurvedic medicines	preparations usually made from certain plants, minerals, animal products, and/or other substances (e.g. ashwagandha, triphala)
Vitamins and/or minerals	e.g. vitamin B, C, E etc, multivitamins, calcium, iron, magnesium, zinc
Sports supplements	e.g. creatine, beta-alanine, arginine, citrulline, protein powders, caffeine
Essential oils	typically used in aromatherapy massage (e.g. lavender oil, peppermint oil)
Specially compounded formulations	e.g. individualised preparations of amino acids, hormones, or other 'natural' substances

For this project, 'natural-health or traditional-medicine practitioners/healers' are practitioners of traditional, complementary, or alternative medicine. This includes, but is not limited to, acupuncturists, aromatherapists, chiropractors, herbalists, homeopaths, massage therapists, naturopaths, osteopaths, spiritual healers, and practitioners of traditional medicines such as traditional Chinese medicine practitioners, Ayurvedic medicine practitioners, traditional Māori healers, and Pacific traditional healers. Some natural-health or traditional-medicine practitioners/healers are also 'conventional medicine' practitioners (e.g. general practitioners, pharmacists, nurses); for instance, an integrative medicine doctor who combines conventional medical treatment with complementary and alternative medicine/therapies in diagnosing/treating a patient.

Throughout the questionnaire, please take into account the following instructions:

1. There are no right or wrong answers to the questions. Please give the answer that best fits your opinion
2. For some questions, we ask you to provide reasons for your answer, or to describe what you had in mind when answering
3. Please take some time to answer these questions. Your answers will help us to understand the data that we collect and to fully test the questionnaire.

This questionnaire consists of 5 sections:

Section 1: Your use of natural health products

Section 2: Your visits to natural-health or traditional-medicine practitioners and use of natural-health or traditional-medicine therapies (e.g. chiropractic/osteopathic manipulation, massage, spiritual healing)

Section 3: Your use of conventional medicines

Section 4: Your personal information

Section 5: Your thoughts about future studies

Questions are not mandatory. You may skip any question you do not wish to answer and still advance through the questionnaire.

Section 1: Your use of natural health products (NHPs)

This section ask questions about your use of natural health products.

1. Have you EVER taken/used any natural health products/preparations?

Natural health products (NHPs) includes, but is not limited to, products or preparations described as natural health products, complementary/alternative medicines/remedies, dietary supplements, nutraceuticals, and/or traditional medicines (products or preparations used in traditional medicine systems, such as rongoā Māori, or traditional Chinese medicine)

Yes

No (go to question 49)

2. In the LAST 12 MONTHS, how many different natural health products/preparations have you taken/used in total, including those you are currently taking/using?

0

1 – 5

6 – 10

11 – 15

16 – 20

21 – 25

More than 25

3. Are you CURRENTLY taking/using any natural health products/preparations?

Current use refers to products/preparations that you are taking daily, or at regular intervals over time (e.g. you take the product once a week), as well as products that you only take when needed (e.g. products for seasonal allergies).

Yes

No (go to question 49)

4. How many different natural health products/preparations are you CURRENTLY taking/using?

Current use refers to products/preparations that you are taking daily, or at regular intervals over time (e.g. you take the product once a week), as well as products that you only take when needed (e.g. products for seasonal allergies).

A multi-ingredient product is considered **ONE** product/preparation (e.g. Multivitamin/mineral tablets, Chinese herb mixture)



= 1 product



= 1 product



= 1 preparation

Enter number of products/preparations: _____
(State 0 if none)

5. Are you CURRENTLY taking/using any formulated or specially compounded products/preparations made for you by a natural-health or traditional-medicine practitioner/healer?

e.g. tinctures, creams, ointments or herbs prepared by your practitioner for your use or treatment

Current use refers to products/preparations that you are taking daily, or at regular intervals over time (e.g. you take the product once a week), as well as products that you only take when needed (e.g. products for seasonal allergies).



Yes

No (go to question 7)

6. List the names of ALL the formulated or specially compounded natural health products/preparations made for you by a natural-health or traditional-medicine practitioner/healer that you are CURRENTLY taking/using

e.g. traditional Māori medicines or traditional Chinese herbs supplied to you by a practitioner; write the name of the formula, or state, e.g. 'traditional Māori medicines', 'traditional Chinese herbs'

Leave the space blank if this does not apply to you

1.		11.	
2.		12.	
3.		13.	
4.		14.	
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7.		17.	
8.		18.	
9.		19.	
10.		20.	

7. Are you CURRENTLY taking/using any manufactured/commercial natural-health or traditional-medicine products/preparations?
e.g. products obtained from pharmacies, health food shops, or supermarkets

Current use refers to products/preparations that you are taking daily, or at regular intervals over time (e.g. you take the product once a week), as well as products that you only take when needed (e.g. products for seasonal allergies).



Yes

No (go to question 9 if stated 'yes' in question 5. Otherwise, go to question 32)

8. List the names of ALL the manufactured/commercial natural-health or traditional-medicine products/preparations that you are CURRENTLY taking/using

e.g. Blackmores fish oil, Women's multivitamins, kawakawa, probiotics

Leave the space blank if this does not apply to you

1.		11.	
2.		12.	
3.		13.	
4.		14.	
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6.		16.	
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8.		18.	
9.		19.	
10.		20.	

For every product/preparation entered in **Question 6**, the following questions will be displayed:

You have entered: [name of product/preparation entered above]

9. Which term(s) would you use to describe this product/preparation?	Select all that apply Dietary supplement(s) or nutraceutical(s) Herbal medicine(s)/ herbal remedy/ies Homeopathic remedy/ies or biochemic tissue salt(s) Flower remedy/ies or essences Probiotic(s) Traditional Māori medicine(s) Traditional Pacific medicine(s) Traditional Chinese medicine(s) Traditional Ayurvedic medicine(s) Vitamin(s) and/or mineral(s) Sports supplement(s) Essential oil(s) Specially compounded formulation(s) Other; please state: _____
10. What type of product/preparation is it?	Tablet or capsule Granules or powder Liquid, including syrup, suspension, emulsion, tincture, oil Eye or ear drops, or nasal drops or spray Tea or decoction Cream or ointment Gel or paste or balm or plaster Crude (raw) dried or fresh herbs Injection Other; please state: _____

11. How do you take/use this product/preparation?		swallowed by mouth dissolved under the tongue applied on the skin put into the eye, ear or nose by inhalation injected under the skin, or into a vein or a muscle other; please state: _____
12. Which natural-health or traditional-medicine practitioner/healer recommended/prescribed this product for you?		Select the option that best describes the practitioner Acupuncturist Aromatherapist Chiropractor Herbalist Homeopath Massage therapist Naturopath Osteopath Integrative medicine doctor Traditional Chinese medicine practitioner Ayurvedic medicine practitioner Traditional Māori healer Pacific traditional healer Spiritual healer Other; please state: _____ Myself; please state type of practitioner: _____
13. When was the last time you bought this product/preparation? State the month and year		
14. Do you know the cost of this product/preparation (not including the practitioner consultation cost)? Yes No		
Yes	14a. About how much (to the nearest \$5) did it cost (not including practitioner consultation cost) the last time you bought one unit/bottle/box/packet of this product/preparation?	<\$10 \$10 - \$19 \$20 - \$29 \$30 - \$39 \$40 - \$49 >\$50

No	14b. About how much (to the nearest \$5) did it cost (including practitioner consultation cost) the last time you saw this practitioner?	<\$10 \$10 - \$19 \$20 - \$29 \$30 - \$39 \$40 - \$49 >\$50
15. About how long will one unit/bottle/box/packet of this product/preparation last you? <i>Select the appropriate time period</i>		_____ day(s)/ week(s)/ month(s)/ year(s)
16. How did you pay this cost?		Select all that apply Paid for it myself Friend or family member paid for it Koha Ministry-funded rongoā Māori provider Accident Compensation Corporation (ACC) Work and Income New Zealand (WINZ) Private health insurance Other; please state: _____ There was no charge
17. Please upload a photograph of the <u>front</u> of the product/preparation (photograph contents if there is no label)		

For every product/preparation entered in **Question 8**, the following questions will be displayed:

You have entered: [name of product/preparation entered above]

18. Which term(s) would you use to describe this product/preparation?	Select all that apply Dietary supplement(s) or nutraceutical(s) Herbal medicine(s)/ herbal remedy/ies Homeopathic remedy/ies or biochemic tissue salt(s) Flower remedy/ies or essences Probiotic(s) Traditional Māori medicine(s) Traditional Pacific medicine(s) Traditional Chinese medicine(s) Traditional Ayurvedic medicine(s) Vitamin(s) and/or mineral(s) Sports supplement(s) Essential oil(s) Specially compounded formulation(s) Other; please state: _____
19. Who is the manufacturer/company of this product/preparation? (if known/relevant)	
20. What is/are the main ingredient(s) in this product/preparation?	
21. What type of product/preparation is it?	Tablet or capsule Granules or powder Liquid, including syrup, suspension, emulsion, tincture, oil Eye or ear drops, or nasal drops or spray Tea or decoction

		Cream or ointment Gel or paste or balm or plaster Crude (raw) dried or fresh herbs Injection Other; please state: _____
	22. How do you take/use this product/preparation?	swallowed by mouth dissolved under the tongue applied on the skin put into the eye, ear or nose by inhalation injected under the skin, or into a vein or a muscle other; please state: _____
	23. Did any of the following <u>recommend</u> this product/preparation to you?	Select all that apply general practitioner/family doctor specialist medical doctor (e.g. dermatologist, gynaecologist) nurse pharmacist pharmacy sales assistant health food store sales assistant dietitian/nutritionist optician/optometrist physiotherapist natural-health or traditional-medicine practitioner (e.g. naturopath) other; please state: _____ not sure No, this product/preparation was not recommended by any of the above
Natural-health or traditional-	23a. Which natural-health or	Select the option that best describes the practitioner

medicine practitioner - selected	traditional-medicine practitioner/healer recommended this product/preparation to you?	Acupuncturist Aromatherapist Chiropractor Herbalist Homeopath Massage therapist Naturopath Osteopath Integrative medicine doctor Traditional Chinese medicine practitioner Ayurvedic medicine practitioner Traditional Māori healer Pacific traditional healer Spiritual healer Other; please state: _____ Myself; please state type of practitioner: _____
24. Where did you obtain this product/preparation?		From a pharmacy pharmacy with prescription health-food or health-product store supermarket market or health fair ethnic grocery store gym, beauty salon, barber or hairdresser online pharmacy or other online store in New Zealand online from outside New Zealand friends or family natural-health or traditional-medicine practitioner (e.g. naturopath); please state: _____ other; please state: _____
25. When was the last time you bought this product/preparation? State the month and year		

26. About how much (to the nearest \$5) did it cost the last time you bought one unit/bottle/box/packet of this product/preparation?	<\$10 \$10 - \$19 \$20 - \$29 \$30 - \$39 \$40 - \$49 >\$50
27. About how long will one unit/bottle/box/packet of this product/preparation last you? <i>Select the appropriate time period</i>	_____ day(s)/ week(s)/ month(s)/ year(s)
28. How did you pay this cost?	Select all that apply Paid for it myself Friend or family member paid for it Koha Ministry-funded rongōā Māori provider Accident Compensation Corporation (ACC) Work and Income New Zealand (WINZ) Private health insurance Other; please state: _____ There was no charge
29. What is the barcode number of the product/preparation? (if available) 	
30. Please upload a photograph of the <u>front</u> of the product/preparation	
31. Please upload a photograph of the product's/preparation's <u>ingredient list</u>	

32. Are you CURRENTLY taking or using any other natural health-type product(s)/preparation(s) for your health that you have not listed previously?

e.g. kale powder, pea protein powder, medicinal cannabis

Yes

No (go to question 49)

33. List the names of ALL the natural health-type products/preparations that you are CURRENTLY taking/using BUT have not listed previously.

e.g. kale powder, pea protein powder, medicinal cannabis

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For every product/preparation entered in **Question 33**, the following questions will be displayed:

You have entered: [name of product/preparation entered above]

34. Why did you not consider this product/preparation to be a natural health product?	
35. What term(s) would you use to describe this product/preparation?	
36. Who is the manufacturer/company of this product/preparation? (<i>if known/relevant</i>)	
37. What is/are the main ingredient(s) in this product/preparation?	
38. What type of product/preparation is it?	Tablet or capsule Granules or powder Liquid, including syrup, suspension, emulsion, tincture, oil Eye or ear drops, or nasal drops or spray Tea or decoction Cream or ointment Gel or paste or balm or plaster Crude (raw) dried or fresh herbs Injection Other; please state: _____
39. How do you take/use this product/preparation?	swallowed by mouth dissolved under the tongue applied on the skin put into the eye, ear or nose by inhalation injected under the skin, or into a vein or a muscle other; please state: _____
40. Did any of the following <u>recommend</u> this product/preparation to you?	Select all that apply general practitioner/family doctor

	specialist medical doctor (e.g. dermatologist, gynaecologist) nurse pharmacist pharmacy sales assistant health food store sales assistant dietitian/nutritionist optician/optometrist physiotherapist natural-health or traditional-medicine practitioner (e.g. naturopath) other; please state: _____ not sure No, this product/preparation was not recommended by any of the above
Natural-health or traditional- medicine practitioner - selected	40a. Which natural- health or traditional-medicine practitioner/healer recommended this product/preparation to you? Select the option that best describes the practitioner Acupuncturist Aromatherapist Chiropractor Herbalist Homeopath Massage therapist Naturopath Osteopath Integrative medicine doctor Traditional Chinese medicine practitioner Ayurvedic medicine practitioner Traditional Māori healer Pacific traditional healer Spiritual healer Other; please state: _____ Myself; please state type of practitioner: _____

41. Where did you obtain this product/preparation?	From a pharmacy pharmacy with prescription health-food or health-product store supermarket market or health fair ethnic grocery store gym, beauty salon, barber or hairdresser online pharmacy or other online store in New Zealand online from outside New Zealand friends or family I made it myself natural-health or traditional-medicine practitioner (e.g. naturopath); please state: _____ other; please state: _____
42. When was the last time you bought this product/preparation? State the month and year	
43. About how much (to the nearest \$5) did it cost the last time you bought one unit/bottle/box/packet of this product/preparation?	<\$10 \$10 - \$19 \$20 - \$29 \$30 - \$39 \$40 - \$49 >\$50
44. About how long will one unit/bottle/box/packet of this product/preparation last you? <i>Select the appropriate time period</i>	_____ day(s)/ week(s)/ month(s)/ year(s)
45. How did you pay this cost?	Select all that apply Paid for it myself Friend or family member paid for it Koha

	Ministry-funded rongoā Māori provider Accident Compensation Corporation (ACC) Work and Income New Zealand (WINZ) Private health insurance Other; please state: _____ There was no charge
46. What is the barcode number of the product/preparation? (<i>if available</i>) 	
47. Please upload a photograph of the <u>front</u> of the product/preparation	
48. Please upload a photograph of the product's/preparation's <u>ingredient list</u>	

Section 2: Your visits to natural-health and/or traditional-medicine practitioners

This section ask questions about your visits to natural-health and/or traditional-medicine practitioners for your own health.

49. Have you EVER met/consulted/had an appointment with any of the following practitioners for your own health?

Select all that apply

Select one term that best describes each practitioner you met/consulted/had an appointment with

Acupuncturist

Aromatherapist

Chiropractor

Herbalist

Homeopath

Massage therapist

Naturopath

Osteopath

Integrative medicine doctor

Traditional Chinese medicine practitioner

Ayurvedic medicine practitioner

Traditional Māori healer

Pacific traditional healer

Spiritual healer

Other; please state: _____

No, I have never met/consulted/had an appointment with any natural-health or traditional-medicine practitioner (go to question 60)

50. In the LAST 12 MONTHS, have you met/consulted/had an appointment with any natural-health or traditional-medicine practitioners for your own health? This includes but is not limited to:

- Acupuncturist
- Aromatherapist
- Chiropractor
- Herbalist
- Homeopath
- Massage therapist
- Naturopath
- Osteopath
- Integrative medicine doctor
- Traditional Chinese medicine practitioner
- Ayurvedic medicine practitioner
- Traditional Māori healer
- Pacific traditional healer
- Spiritual healer

Yes

No, I have not met/consulted/had an appointment with any natural-health or traditional-medicine practitioner in the last 12 months (go to question 59)

51. Select all the natural-health and/or traditional-medicine practitioner(s) that you have met/consulted/had an appointment with in the LAST 12 MONTHS

Select all that apply

Select one term that best describes each practitioner you met/consulted/had an appointment with

Acupuncturist
Aromatherapist
Chiropractor
Herbalist
Homeopath
Massage therapist
Naturopath
Osteopath
Integrative medicine doctor
Traditional Chinese medicine practitioner
Ayurvedic medicine practitioner
Traditional Māori healer
Pacific traditional healer
Spiritual healer

52. In the LAST 12 MONTHS, have you met/consulted/had an appointment with any other natural-health and/or traditional-medicine practitioner(s) that is/are not listed in the question above?

Yes

No (go to question 54 if stated 'yes' in question 50. Otherwise, go to question 59)

53. List the types of ALL the other natural-health and/or traditional-medicine practitioner(s) you have met/consulted/had an appointment with in the LAST 12 MONTHS?

e.g. functional medicine practitioner, reiki practitioner, medium

1.	
2.	
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9.	
10.	

For every practitioner selected/entered above in **Question 51 & 53** respectively, the following questions will be displayed:

You have entered: [type of practitioner]

54. How many times have you met/consulted/had an appointment with this practitioner in the <u>PREVIOUS 12 MONTHS</u>?	
55. What types of treatments/therapies did you receive from this practitioner?	Select all that apply None Lifestyle or dietary advice Acupuncture Massage Chiropractic manipulation Osteopathic manipulation Herbal or traditional medicines Homeopathic remedies Spiritual healing Other; please state: _____
56. Is this practitioner also a conventional health professional/practitioner? <i>e.g. general practitioner, pharmacist, nurse</i>	Yes No Not sure
Yes	56a. This practitioner is a: general practitioner/family doctor specialist medical doctor nurse pharmacist dietitian/nutritionist optician/optometrist physiotherapist not sure other; please state: _____
57. About how much (to the nearest \$5) did it cost (including practitioner consultation and product(s)/preparation(s) cost) the last time you saw this practitioner? State \$0 if there was no charge	NZ\$ _____

Leave the space blank if you do not remember	
58. How did you pay this cost?	Select all that apply Paid for it myself Friend or family member paid for it Koha Ministry-funded rongoā Māori provider Accident Compensation Corporation (ACC) Work and Income New Zealand (WINZ) Private health insurance Other; please state: _____ There was no charge

59. Are you CURRENTLY meeting/consulting any of the following practitioners for your own health (i.e. are you receiving treatment, or under the care of, a practitioner for a particular health reason at this time)?

Select all that apply

Select one term that best describes each practitioner you met/consulted/had an appointment with

Acupuncturist

Aromatherapist

Chiropractor

Herbalist

Homeopath

Massage therapist

Naturopath

Osteopath

Integrative medicine doctor

Traditional Chinese medicine practitioner

Ayurvedic medicine practitioner

Traditional Māori healer

Pacific traditional healer

Spiritual healer

Other; please state: _____

No, I am not meeting/consulting any natural-health or traditional-medicine practitioner currently

60. In the past 12 months, was there a time when you had a medical problem but did not visit a natural-health and/or traditional-medicine practitioner because of cost?

Yes

No (go to question 61)

60a. Select all the practitioner(s) that you did not visit for a medical problem because of cost in the PAST 12 MONTHS

Select all that apply

Select one term that best describes each practitioner

Acupuncturist

Aromatherapist

Chiropractor

Herbalist

Homeopath

Massage therapist

Naturopath

Osteopath

Integrative medicine doctor

Traditional Chinese medicine practitioner

Ayurvedic medicine practitioner

Traditional Māori healer

Pacific traditional healer

Spiritual healer

Other; please state: _____

61. In the past 12 months, was there a time when you got a recommendation for a natural health product/preparation for yourself, but did not collect/purchase one or more product(s)/preparation(s) because of cost?

Yes

No (go to question 62)

**61a. Select all the practitioner(s) who recommended a natural health product for you, but you did not collect/purchase one or more product(s)/preparation(s) because of cost in the PAST 12 MONTHS
Select all that apply**

Select one term that best describes each practitioner

Acupuncturist

Aromatherapist

Chiropractor

Herbalist

Homeopath

Massage therapist

Naturopath

Osteopath

Integrative medicine doctor

Traditional Chinese medicine practitioner

Ayurvedic medicine practitioner

Traditional Māori healer

Pacific traditional healer

Spiritual healer

Other; please state: _____

62. In the past 12 months, was there a time when you had a medical problem but did not visit a natural-health and/or traditional-medicine practitioner for other reasons?

Yes

No (go to question 63)

**62a. Select all the practitioner(s) that you did not visit for a medical problem because of other reasons in the PAST 12 MONTHS
Select all that apply**

Select one term that best describes each practitioner

Acupuncturist

Aromatherapist

Chiropractor

Herbalist

Homeopath

Massage therapist

Naturopath

Osteopath

Integrative medicine doctor

Traditional Chinese medicine practitioner

Ayurvedic medicine practitioner

Traditional Māori healer

Pacific traditional healer

Spiritual healer

Other type of practitioner; please state: _____

62b. For every practitioner selected above in Question 62a, the following question will be displayed:

You have selected [type of practitioner selected above]

What was the reason you did not visit this practitioner?

Section 3: Your use of 'conventional' medicines

This section ask questions about your use of 'conventional' medicines, including 'conventional' prescription-only medicines and non-prescription, or 'over-the-counter' (OTC) 'conventional' medicines.

63. Are you CURRENTLY taking/using any medicine that is prescribed for you by a health practitioner?

Current use refers to medicines that you are taking daily or at regular intervals over time, as well as medicines that you only take when needed (e.g. medicines to treat episodes of chest pain).

Health practitioner refers to an authorised prescriber (e.g. general practitioner/family doctor, specialist medical doctor, or other medical/health professional who is legally able to prescribe medicines)

Yes

No (go to question 67)

64. List the names of ALL the medicine(s) you are CURRENTLY taking/using that is/are prescribed for you by a health practitioner e.g. amlodipine, warfarin, Lipitor, Janumet

1.		11.	
2.		12.	
3.		13.	
4.		14.	
5.		15.	
6.		16.	
7.		17.	
8.		18.	
9.		19.	
10.		20.	

For every medicine entered above in **Question 64**, the following questions will be displayed:

You have entered: [name of prescription medicine entered above]

65. What is the brand name and/or manufacturer name of this medicine?	
66. What type of medicine is it?	Tablet or capsule Granules or powder Liquid, including syrup, suspension, emulsion, tincture, oil Eye or ear drops, or nasal drops or spray Cream or ointment Gel or paste or balm or plaster Injection Other; please state: _____

67. Are you CURRENTLY taking/using any medicine that is not prescribed for you by a health practitioner (i.e. non-prescription/'over-the-counter' medicines)?

Current use refers to medicines that you are taking daily or at regular intervals over time, as well as medicines that you only take when needed (e.g. painkillers).

Health practitioner refers to an authorised prescriber (e.g. general practitioner/family doctor, specialist medical doctor, or other medical/health professional who is legally able to prescribe medicines)

Non-prescription medicines, also known as 'over-the-counter' (OTC) medicines, are medicines that can be obtained from pharmacies and retail outlets, such as supermarkets, without a prescription.

Yes

No (go to question 73)

68. List the names of ALL the non-prescription/'over-the-counter' medicine(s)-you are CURRENTLY taking/using.

e.g. ibuprofen, Zyrtec, Benadryl, Panadol

1.		11.	
2.		12.	
3.		13.	
4.		14.	
5.		15.	
6.		16.	
7.		17.	
8.		18.	
9.		19.	
10.		20.	

For every non-prescription/'over-the-counter' medicine entered above in **Question 68**, the following questions will be displayed:

You have entered: [name of non-prescription/'over-the-counter' medicine entered above]

69. What is the brand name and/or manufacturer name of this medicine?	
70. What type of medicine is it?	Tablet or capsule Granules or powder Liquid, including syrup, suspension, emulsion, tincture, oil Eye or ear drops, or nasal drops or spray Cream or ointment Gel or paste or balm or plaster Injection Other; please state: _____
71. About how much (to the nearest \$5) did it cost the last time you bought one unit/bottle/box/packet of this medicine?	<\$10 \$10 - \$19 \$20 - \$29 \$30 - \$39 \$40 - \$49 >\$50
72. How did you pay this cost?	Select all that apply Paid for it myself Friend or family member paid for it Koha Ministry-funded rongoā Māori provider Accident Compensation Corporation (ACC) Work and Income New Zealand (WINZ) Private health insurance Other; please state: _____ There was no charge

73. Are you CURRENTLY taking/using any other conventional medicines (i.e. prescription or non-prescription/'over-the-counter' medicines) that you have not listed previously?

Current use refers to medicines that you are taking daily or at regular intervals over time, as well as medicines that you only take when needed (e.g. painkillers).

Yes

No (go to question 79)

74. List the names of ALL the other conventional medicine(s) you are CURRENTLY taking/using.

e.g. Marvelon, Maxigesic

1.		11.	
2.		12.	
3.		13.	
4.		14.	
5.		15.	
6.		16.	
7.		17.	
8.		18.	
9.		19.	
10.		20.	

For each conventional medicine entered above in **Question 74**, the following questions will be displayed:

You have entered: [name of non-prescription/'over-the-counter' medicine entered above]

75. What is the brand name and/or manufacturer name of this medicine?	
76. What type of medicine is it?	Tablet or capsule Granules or powder Liquid, including syrup, suspension, emulsion, tincture, oil Eye or ear drops, or nasal drops or spray Cream or ointment Gel or paste or balm or plaster Injection Other; please state: _____
77. About how much (to the nearest \$5) did it cost the last time you bought one unit/bottle/box/packet of this medicine?	<\$10 \$10 - \$19 \$20 - \$29 \$30 - \$39 \$40 - \$49 >\$50
78. How did you pay this cost?	Select all that apply Paid for it myself Friend or family member paid for it Koha Ministry-funded rongoā Māori provider Accident Compensation Corporation (ACC) Work and Income New Zealand (WINZ) Private health insurance Other; please state: _____ There was no charge

Section 4: Your personal information

79. What is your age?

____ years

80. Are you?

(Respondents whose biological sex is not male nor female (ie intersex), are able to mark both 'male' and 'female' for this question)

Male

Female

81. Which ethnic group do you belong to?

Select all that apply to you.

New Zealand European

Māori

Samoan

Cook Islands Māori

Tongan

Niuean

Chinese

Indian

Other, e.g. Dutch, Japanese, Tokelauan

○ Please enter ethnicity: _____

82. In which region of New Zealand do you live?

Northland

Auckland

Waikato

Bay of Plenty

Gisborne

Hawke's Bay

Manawatu-Wanganui

Taranaki

Wellington

Tasman

Nelson

Marlborough

Canterbury

West Coast

Otago

Southland

83. Do you live in an urban or rural area?

Urban

Rural

84. Which country were you born in?

New Zealand

Overseas

- Please enter the name of the country: _____
- How old were you when you first arrived to live in New Zealand?
____ years

85. Which country was your father born in?

New Zealand

Overseas

- Please enter the name of the country: _____

Don't know

86. Which country was your mother born in?

New Zealand

Overseas

- Please enter the name of the country: _____

Don't know

87. From all the sources of income you have, what will the total income be:

- **that you yourself got**
- **before tax or anything was taken out**
- **in the last 12 months**

loss

zero income

\$1 - \$5000

\$5001 - \$10,000

\$10,001 - \$15,000

\$15,001 - \$20,000

\$20,001 - \$25,000

\$25,001 - \$30,000

\$30,001 - \$35,000

\$35,001 - \$40,000

\$40,001 - \$50,000

\$50,001 - \$60,000

\$60,001 - \$70,000

\$70,001 - \$100,000

\$100,001 - \$150,000

\$150,001 or more

Section 5: Future studies

This section asks you some questions about how you would feel about providing certain types of information for FUTURE studies. We will NOT be asking you to provide any personal information in this study but would like to know your perspective on providing such information.

How would you feel if – in a future study collecting information like the information you have provided here - you were asked for your permission to combine your survey information with other health information already routinely collected by the Ministry of Health, such as hospital admissions data. To do this, you would need to provide your consent for us to combine your data (consent for 'data linkage') and provide information about yourself (your name, address, date of birth, and/or NHI (national health index) number) so that the information you have provided in this questionnaire could be linked with your other health information.

We are asking how you think you would feel about this if asked so that we can consider whether data linkage might be feasible in the future. Being able to link information from a future study like this one would help us understand the relationships between the use of natural health products (including traditional medicines) alone, or with conventional medicines, and health outcomes.

If you were to provide information about yourself (your name, address, date of birth, and/or NHI number) those details would be used for the purposes of data linkage, but would then be de-identified or removed from the dataset – your name, address, date of birth, and/or NHI number would not be available for other researchers to see or use, and would never be stored by us with your survey answers; this makes sure that your survey results would always be anonymous.

Thinking about the above, if asked in a future study like this one, do you think you would provide your consent (give permission) for us to apply to the Ministry of Health to link your survey information with other health data already routinely collected by the Ministry of Health? (N.B. we are NOT asking your permission to do this for this survey – we are only asking how you think you would feel about this if we asked you about this in a future study).

Yes, I think I would provide my consent for this in the future

No, I do not think I would provide my consent for this in the future

Are there any particular reasons for your answer?

Please indicate if you would be willing to provide the following information.

I would be willing to provide my:

Name	Yes	No
Address	Yes	No
Date of birth	Yes	No
NHI	Yes	No
If asked, could you readily provide your NHI number?	Yes	No

Your NHI number is alphanumeric and follows the following structure 'ABC1234'