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Article: Complementary therapies

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Complementary therapies

In 2004–05, 748,000 people consulted one of seven common types of complementary health therapists in a two week period.

Complementary therapies – such as those practised by naturopaths, chiropractors and acupuncturists – have become increasingly popular in Australia over the last few decades. Interest initially coincided with enthusiasm for alternative lifestyles,^{1,2} while immigration and increased contact and trade with China have also had an influence.³ The status of complementary therapies is being re-visited in a number of areas: legal regulation; the stances of doctors' associations; their inclusion in medical education; and scientific research into their efficacy.^{3,4,5} With the exception of acupuncture, complementary therapies are not routinely funded through Medicare, so there is little administrative data regarding their use. However, the ABS has some data about the use of complementary therapies which can help inform discussion.

Increase in practitioners

According to the census, 8,600 people were employed as complementary health therapists in 2006. This was 80% higher than the number in 1996 (although some of the increase was due to classification changes). The leading occupations were naturopaths (2,980) and chiropractors (2,490), up 56% and 45% respectively from 1996. The fastest growing group was osteopaths, tripling in number between 1996 and 2006. Over the same period, the Australian population increased by 12% and the total number of health professionals rose by 31%.

Data sources and definitions

This article draws on data from recent Censuses of Population and Housing and from the ABS 2004–05 National Health Survey.

The term 'complementary therapy' is used to cover a wide range of health treatment methods. This article covers visits to selected, common types of complementary therapist only and the therapists covered vary between the two data sources used.

Data are available from the 2006 Census of Population and Housing on the characteristics of people employed as: *Chiropractors; Osteopaths; Acupuncturists; Homeopaths; Naturopaths; and Traditional Chinese Medicine Practitioners* (and other occupations not elsewhere classified or not further defined). See ANZSCO – *Australian and New Zealand Standard Classification of Occupations, First edition 2006* (ABS cat. no. 1220.0) for details. While there is an occupation group within ANZSCO termed 'complementary health therapists' this article has a wider scope, covering in addition chiropractors and osteopaths, historically part of the natural therapies movement and commonly regarded as complementary therapists.^{2,6}

In the 2004–05 National Health Survey people living in private dwellings (i.e. excluding hospitals and cared accommodation) were asked about their visits in the previous two weeks to 23 selected types of health professional. These included: *Chiropractor; Osteopath; Naturopath; Acupuncturist; Herbalist; Traditional healer; and Hypnotherapist*. See *ABS National Health Survey 2004–05: Users' Guide – Electronic* (ABS cat. no. 4363.0.55.001) for definitions.

Some people in these occupations may not regard themselves as complementary therapists, and, likewise, some people in other health occupations may use complementary therapy techniques.

Complementary health therapists

	1996	2001	2006	Change 1996–2006
	no.	no.	no.	%
Chiropractor	1 711	2 073	2 488	45.4
Naturopath	1 910	2 514	2 982	56.1
Acupuncturist	460	675	948	106.1
Osteopath	257	429	776	201.9
Traditional Chinese medicine practitioner	n.a.	n.a.	480	n.a.
Homeopath	n.a.	n.a.	236	n.a.
Total(a)	4 787	6 343	8 595	79.5

(a) Includes other complementary health professionals whose occupations were not elsewhere classified or not further defined. In 1996 and 2001 homeopaths and traditional Chinese medicine practitioners were among these occupations. In 2006, some additional occupations were moved into this category, contributing 485 people (or 10 percentage points) to the increase in 2006. These were hypnotherapists and dance, drama and music therapists.

Source: ABS 1996 to 2006 Census of Population and Housing.

Complementary health therapists — 2006

	Female %	Median age(a) years	Overseas born %	Bachelor degree or higher qualification(b) %	Employed part-time(c) %	Owner managers(d) %
Chiropractor	32.6	38	26.1	92.3	43.2	84.1
Osteopath	48.7	33	21.8	86.9	38.6	88.2
Acupuncturist	49.5	44	53.7	72.9	49.9	86.0
Homeopath	75.8	50	34.9	43.3	74.5	90.7
Naturopath	79.0	43	27.8	43.1	59.8	72.3
Traditional Chinese medicine practitioner	41.7	47	71.9	72.1	40.1	84.7
Total(e)	56.9	42	32.4	67.8	51.8	79.4
All employed people	46.1	40	25.4	23.3	31.5	16.6

(a) Age reported in whole years.

(b) In any field of study.

(c) Of those who had worked in the week prior to census.

(d) Of incorporated and unincorporated enterprises.

(e) Includes other complementary health therapists whose occupations were not elsewhere classified or not further defined.

Source: ABS 2006 Census of Population and Housing.

Characteristics of therapists

Women predominated among naturopaths (79%) and homeopaths (76%). They accounted for almost half of acupuncturists and osteopaths (about 49% in each case). They were least prominent among traditional Chinese medicine practitioners (42%) and chiropractors (33%).

Just over one-half (54%) of acupuncturists, and 72% of traditional Chinese medicine practitioners, were born overseas. Most overseas-born acupuncturists and traditional Chinese medicine practitioners were born in North-East Asia (60% and 76% respectively). Among the other types of complementary health therapist, the proportion born overseas ranged from 22% (osteopaths) to 35% (homeopaths).

The proportion who reported having a bachelor degree or higher qualification (in any field of study) was highest for chiropractors and osteopaths (92% and 87% respectively); around 72% for acupuncturists and traditional Chinese medicine practitioners; and lowest for naturopaths and homeopaths (both 43%).

Part-time work was relatively common among complementary health therapists, especially homeopaths (75% worked part-time) and naturopaths (60% worked part-time), in keeping with the higher proportion of women in these occupations. Traditional Chinese medicine practitioners were the least likely to be working part-time (40%).

The majority of each type of complementary health therapist were owner managers, ranging from 91% of homeopaths to 72% of naturopaths.

Visits to therapists

According to the National Health Survey, in 2004–05, 3.8% of the population (748,000 people) had consulted one of seven selected complementary health therapists in the previous two weeks, compared with about 2.8% in 1995. The most commonly consulted were chiropractors (433,000 visitors), naturopaths (134,000 visitors) and acupuncturists (90,600 visitors). Also consulted were osteopaths, herbalists, traditional healers (identified for the first time in 2004–05) and hypnotherapists. The number of people visiting osteopaths increased by 88% to 60,000 over the period.

In comparison, in 2004–05, 32% of the population (6.4 million people) had consulted a doctor, dentist, chemist or one of 13 other commonly used health professionals such as a physiotherapist, psychologist or audiologist, the same proportion as in 1995.

...demographic characteristics

While females comprised half the population in 2004–05, they accounted for 62% of people who had visited a complementary health therapist in the previous two weeks and 56% of people who had visited other health professionals.

People who had visited complementary health therapists in the previous two weeks

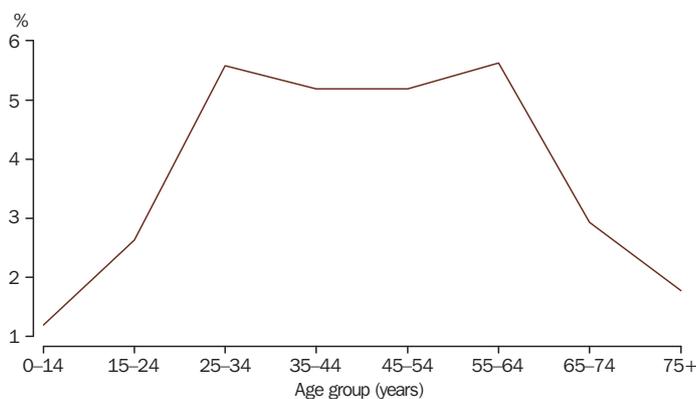
	1995	2004-05	2004-05
	'000	'000	%(a)
Chiropractor	286.3	432.6	2.2
Naturopath	112.9	133.6	0.7
Acupuncturist	54.2	90.6	0.5
Osteopath	32.1	60.3	0.3
Herbalist	41.3	56.7	0.3
Traditional healer	—	32.6	0.2
Hypnotherapist	*4.8	*9.7	—
Any of the above(b)	497.0	748.4	3.8
<i>Other health professional(b)(c)</i>	5 725.4	6 367.1	32.4
<i>Total people in private dwellings</i>	18 061.1	19 681.5	100.0

- (a) People in private dwellings who visited health professionals in the previous two weeks as a proportion of the population living in private dwellings.
 (b) People who had consulted a complementary health professional may also have consulted other types of health professional in the previous two weeks.
 (c) People who had consulted any of 16 other types of health professionals in 2004-05. Three additional types were included in 2004-05 compared with 1995. A total of 97,500 people consulted one of the three types of health professional added in 2004-05.

Source: ABS 1995 and 2004-05 National Health Surveys.

People who visit health professionals tend to be older than the general population, because illness increases with age. However, the proportion of the population who visited complementary health therapists was highest between the ages 25 and 64 years. The lower rates for people aged 65 years and over contrasted with the rate of visits to other health professionals which increased steadily with increasing age. The reasons for this difference might include lower levels of acceptance of complementary therapies by older people. Alternatively, older people may have different treatment priorities than do

People who consulted complementary health therapists(a) — 2004-05



(a) As a proportion of the population of each age group.

Source: ABS 2004-05 National Health Survey.

younger people because their health on average is worse while their incomes are generally lower.

People aged less than 18 years accounted for 9% of those who had consulted a complementary health therapist. These 66,000 people aged less than 18 years included 46,000 who had consulted a chiropractor or osteopath and 21,000 who had consulted a naturopath, acupuncturist, herbalist or traditional healer.

...health-related characteristics

People with certain serious health conditions are known to use complementary therapies. For example, some cancer patients make use of relaxation, diet, vitamins, positive imagery and faith healing.⁷ The 2004-05 National Health Survey collected information about whether or not people had a condition from one of Australia's national health priority areas: arthritis; asthma; diabetes; cardiovascular disease; injuries; cancer; and mental and behavioural problems. These seven broad health areas – together with the risk factor obesity – have been prioritised by Australian Health Ministers because they add significantly to the burden of disease while having potential for improvement.⁸

Of people who had visited a complementary health therapist in the previous two weeks, 42% reported that they had one of the priority health conditions. This was higher than the rate for the total population (33%) but lower than the rate for people who had consulted other types of health professional (46%). Of these conditions, arthritis (20%), asthma (14%) and mental or behavioural disorders (13%) were the ones most commonly reported by people who had visited a complementary health therapist. These were also the leading three conditions for the total population.

Self rating of health has been found to be a good general indicator of mental and physical condition. Close to one-fifth (18%) of people who had visited a complementary health therapist in the previous two weeks rated their own health as 'fair' or 'poor'. This was about the same as for the total population (16%), but lower than the rate of self-reported fair or poor health among people who had consulted other types of health professional in the previous two weeks (26%).

The lower rates of illness and self-assessed fair or poor health among people who had visited a complementary health therapist compared with those who had visited other types of health professional in part reflects the younger age profile of the former group.

People who had visited complementary health therapists in the previous two weeks — 2004–05

Type of practitioner	Had a selected health condition(a) %	Assessed own health as fair/poor(b) %	High/Very high levels of psychological distress(c) %	Had visited a GP or specialist in the previous two weeks %	Had been admitted to hospital in previous 12 months %	With private health insurance ancillary cover %
Chiropractor	40.8	15.1	11.6	27.3	18.9	66.3
Naturopath	41.6	19.0	19.7	30.2	23.0	57.3
Acupuncturist	45.7	26.1	19.2	45.1	17.5	59.6
Complementary health therapist(d)	42.0	18.1	15.3	31.6	18.4	60.6
Other health professional(e)	46.5	25.8	19.3	70.6	21.8	43.2
Total population	32.9	15.9	13.0	22.9	14.8	41.8

(a) Arthritis; asthma; diabetes; cardiovascular disease; injuries; cancer; and mental and behavioural problems.

(b) Restricted to people aged 15 years and over.

(c) Restricted to people aged 18 years and over.

(d) Chiropractor, naturopath, acupuncturist, osteopath, herbalist, traditional healer or hypnotherapist.

(e) People who had consulted any of 16 other types of health professionals in 2004–05. People who had consulted a complementary health professional may also have consulted other types of health professional in the previous two weeks.

Source: ABS 2004–05 National Health Survey.

Of those who had visited a complementary health therapist in the previous two weeks, 15% were assessed as having high/very high levels of psychological distress according to the Kessler scale – based on information supplied by the respondent about negative emotional states experienced in the previous four weeks. This was similar to the rate of high/very high psychological distress scores in the total population (13%) but lower than the rate for people who had consulted other types of health professional (19%). People who had visited a complementary health therapist, however, were more likely to be taking medication for mental wellbeing (35%) than either the total population (19%) or people who had consulted other types of health professional (28%).

Of people who had consulted a complementary health therapist, 18% had been admitted to hospital in the previous 12 months. This was higher than the rate for the total population (15%) but it was not significantly different to the rate for people who had consulted other types of health professional (22%).

...did they also visit doctors?

One of the concerns regarding complementary therapies is that people may undergo risky treatments, or fail to access proven treatments from the mainstream health system.³ It is therefore of interest to know whether people used complementary therapists together with, or as an alternative to, the health care offered by general practitioners or specialists. Just under one-third (32%) of people who had visited a

complementary health therapist had also visited a doctor in the previous two weeks, rising to 63% who had visited a doctor in the previous three months. Of people who had visited an acupuncturist during the last two weeks, 45% reported that they had also seen a doctor during this time. While these people may have discussed either the same or different conditions with their doctor and complementary therapist, they were nevertheless in touch with mainstream medicine.

...private health insurance

Private health insurance ancillary cover often includes chiropractic and osteopathy, and sometimes other complementary therapies. In 2004–05, 61% of people who had visited a complementary health therapist in the previous two weeks had ancillary coverage, including 66% of those who had visited a chiropractor and 60% of those who had visited an acupuncturist. These rates were higher than the rates of ancillary coverage for the total population (42%) or for people who had consulted other types of health professional in the previous two weeks (43%).

...healthy lifestyles?

People who had visited a complementary health therapist in the previous two weeks were more likely to have certain healthy behaviours than were either the total population, or people who had consulted any other health professional. These behaviours included eating the recommended minimum

People(a) who had visited complementary health therapists in the previous two weeks — 2004–05

Type of practitioner	Not current daily smokers	Exercised at moderate to high level	Normal weight(b)	Ate two or more serves of fruit per day	Ate five or more serves of vegetables per day	Did not have risky or high risk alcohol consumption(c)
	%	%	%	%	%	%
Chiropractor	84.7	33.6	44.3	58.6	20.5	83.5
Naturopath	87.2	44.2	49.6	72.7	26.5	86.5
Acupuncturist	91.3	34.4	50.6	58.6	25.5	86.1
Complementary health therapist(d)	84.8	35.8	45.6	63.3	21.3	84.4
Other health professional(e)	80.7	28.2	42.1	56.8	15.2	87.9
Total population	78.7	29.6	43.9	54.0	14.4	86.5

(a) Restricted to those aged 18 years and over.

(b) Body Mass Index from 18.5 to less than 25.0, based on self-reported weight and height.

(c) Based on reported alcohol consumption previous week (see *ABS National Health Survey 2004–05: Users' Guide – Electronic* (ABS cat. no. 4363.0.55.001)).

(d) Chiropractor, naturopath, acupuncturist, osteopath, herbalist, traditional healer or hypnotherapist.

(e) People who had consulted any of 16 other types of health professionals in the previous two weeks. People who had consulted a complementary health therapist may also have consulted other types of health professional in the previous two weeks.

Source: ABS 2004–05 National Health Survey.

serves of fruit and vegetables, exercising at high or moderate level, and not smoking regularly. As an example, almost three-quarters (73%) of people who had consulted a naturopath during the last two weeks reported eating at least two serves of fruit a day, compared with 54% of the total population. There was little difference among the three groups with regard to risky alcohol consumption over a seven-day period, with 84% of people who had visited a complementary health therapist in the low risk category, compared with 87% of the total population and 88% of people who had visited any other type of health professional.

Looking ahead

An issue related to the use of complementary therapists is people's use of vitamins and minerals and herbal or natural substances. See *2004–05 National Health Survey: Summary of Results, Australia* (cat. no. 4364.0) for some information on people's use of these in treating National Health Priority Area conditions.

In addition to the therapies described in this article, there is a vast array of other therapies described as 'complementary', 'alternative' or 'natural' (one Australian natural therapy site lists close to 100 types).⁹ There are practical limits on collecting statistical data on less commonly used therapies. If some of these become more popular, statistical collections will reflect this, for example by separately identifying additional types of therapist in the census and in surveys.

Endnotes

- 1 Webb EC et al 1977, *Report of the Committee of Inquiry into Chiropractic, Osteopathy, Homeopathy, and Naturopathy*. Canberra: AGPS.
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- 3 Benoussen A and Myers SP 1996, *Towards a safer choice: The Practice of Traditional Chinese Medicine in Australia*, Faculty of Health, University of Western Sydney, Macarthur, viewed 20 June 2008, <www.health.vic.gov.au/archive2006/chinese/report/contents.html>.
- 4 Vivian Lin et al (2006) *The Practice and Regulatory requirements of Naturopathy and Western Herbal Medicine*, La Trobe University School of Public Health, Bundoora viewed 20 February 2008, <www.health.vic.gov.au/pracreg/naturopathy.htm>.
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- 6 Devereux E P 1998, History of Chiropractic from a New South Wales Perspective (1969–1982) *Australasian Chiropractic and Osteopathy* (ACO) Vol. 7 No. 2, pp 68–79.
- 7 Cancer Institute NSW, 'Frequently asked questions about complementary therapies', viewed 13 May 2008, <http://www.cancerinstitute.org.au/professionals/comp_therapies_faqs.html>.
- 8 Australian Institute of Health and Welfare 'National Health Priorities' and 'Risk factors' viewed 15 May 2008, <www.aihw.gov.au/nhpa/index.cfm>.
- 9 Natural Therapy Pages, viewed 5 April 2008, <www.naturaltherapypages.com.au>.

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