



Perspectives among
American Citizens Abroad
membership on

HEALTHCARE *and*
U.S. POLICY



International Member Survey

October 2025

AudienceNet & NP Agency
for ACA

About the study

PURPOSE:

The ACA International Member Survey was conducted to capture the experiences and perspectives of Americans living abroad regarding healthcare.

METHODOLOGY & SAMPLE COMPOSITION:

- Online survey of 833 U.S. citizens abroad
- Fieldwork via ACA contact database



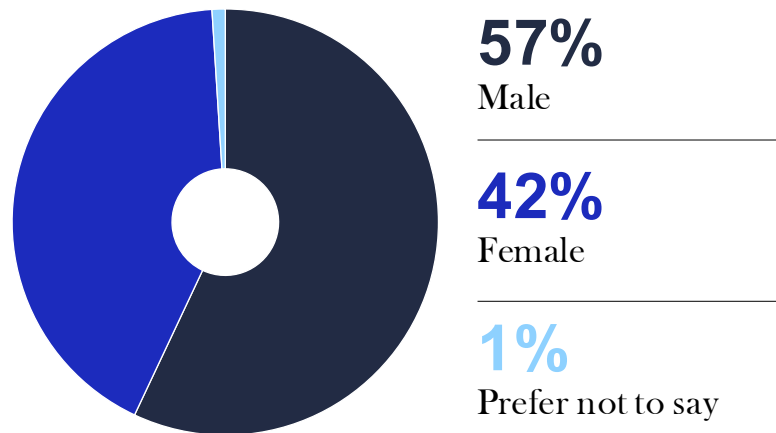
79% would be prepared to take part in future research conducted on behalf of ACA

Respondent profile

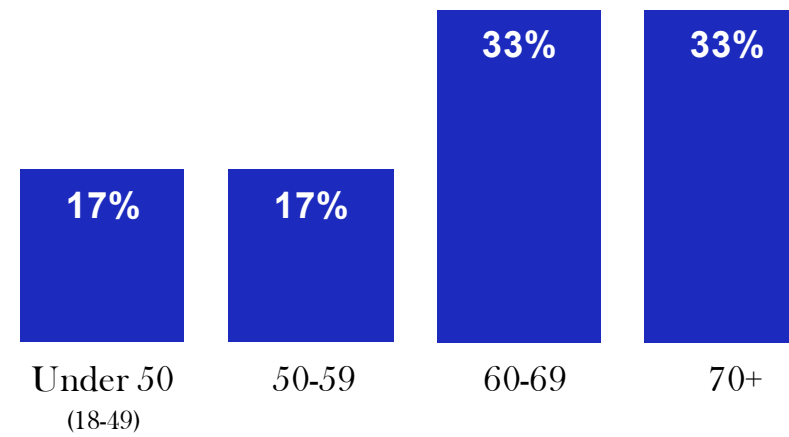
Voting



Gender



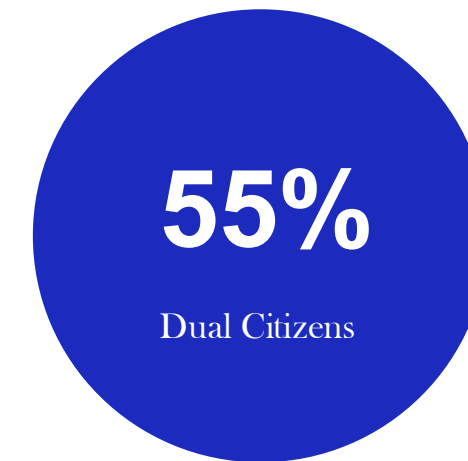
Age



Region:

Western Europe	54%
North America	13%
APAC (Asia & AU & NZ)	16%
Australia & New Zealand	7%
Asia (excl. AU & NZ)	9%
Other (Middle East, Africa + Nordics + LatAm)	10%

Citizenship



Key findings



HEALTHCARE

Strong belief in U.S. leadership in medical innovation:

Eight in ten (80%) say maintaining U.S. leadership in pharmaceutical R&D is important, and three-quarters believe patients benefit when the U.S. leads.

Regulatory delays are a visible issue for U.S. medicines overseas:

17% have encountered or observed delays in accessing new U.S. medicines, attributed mainly to safety reviews, administrative inefficiency and slow approval negotiations.

Some respondents (17%) have experienced or observed delays in accessing new U.S. medicines while overseas:

Access gaps do occur but this remains a relatively limited issue overall. Reported delays tend to be attributed to safety reviews, administrative processes, or negotiation timelines.

Medicare abroad is widely supported:

A majority (57%) believe Medicare should reimburse care received overseas (34% fully, 23% partially).

EXECUTIVE SUMMARY

Healthcare & innovation

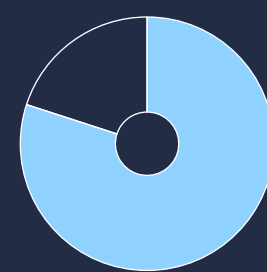
U.S. leadership in innovation is valued.



American citizens abroad strongly link U.S. leadership and free-market innovation to better patient outcomes.

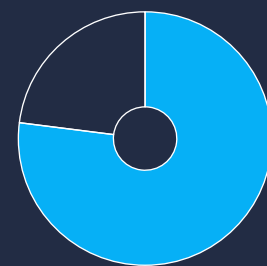
They support protecting IP and R&D incentives, while remaining open to global pricing reforms.

Top Resonating Messages



80%

believe it is important for the U.S. to maintain leadership in pharmaceutical R&D and innovation.



77%

agree that U.S. patients benefit when the U.S. continues to lead in medical innovation.

6 in 10

(60%) *agree* that private companies and market competition are better at encouraging innovation than government regulation

55% currently view the U.S. as the world leader in the development of innovative medicines.

Supporting Views

68% *agree* that in a global health crisis the U.S. should fund vaccines for its citizens worldwide.

54% *agree* that strict government control of prices slows innovation.

54% *support* stronger U.S. patent protections for the continuation of medical innovation; 35% believe other countries don't pay their fair share for R&D.

SECTION 1:

Healthcare & Innovation



Strong belief in U.S. innovation leadership

Eight in ten respondents (80%) agree it is important for the U.S. to maintain its leadership in pharmaceutical R&D and innovation, and three-quarters (77%) agree that patients benefit when the U.S. continues to lead. Male respondents were most likely to agree.

Over half (55%) believe the U.S. currently leads in the development of innovative medicines.

77% U.S. patients benefit when the U.S. continues to lead in medical innovation

55% The U.S. currently leads the world in the development of innovative medicines

Messages highlighting market competition resonate more strongly than those favoring regulation

Six in ten respondents (60%) agree that private companies and market competition play a stronger role than government regulation in driving medical innovation. Agreement is higher among those aged 50-59 (63%) and 70+ (64%), and is notably stronger among men (68% vs. 48% of women).

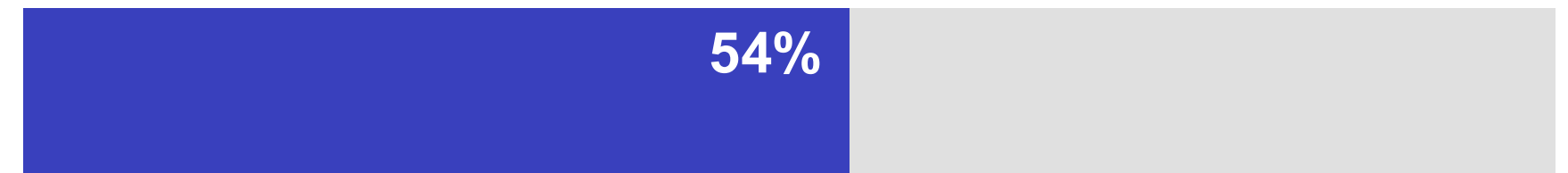
Just over half (54%) also believe that strict price controls could slow the development of new treatments.

Taken together, Americans abroad tend to associate continued innovation with open-market approaches rather than increased regulatory intervention.

Private companies and market competition are better at encouraging innovation than government regulation

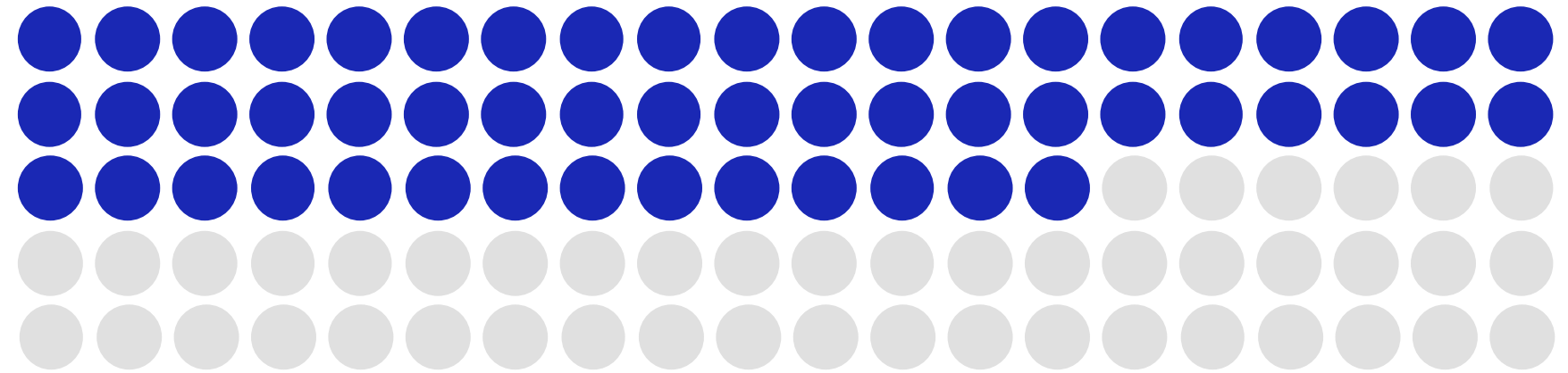


When governments try to control drug prices too strictly, it can slow down the development of new treatments



Americans abroad support stronger patent protection.

Over half of respondents (54%) support stronger U.S. patent protections for new medicines, rising to 60% among those aged 70 and over.



54% *agree*

“Stronger U.S. patent protections for new medicines are important to support continued medical innovation in the United States and worldwide.”

Americans abroad follow U.S. healthcare policy via traditional media, not social platforms

Americans abroad stay informed through traditional media channels rather than social networks. Over half rely on U.S. news outlets (56%) and international sources such as the BBC or Reuters (53%), compared with just 15% who use social media. Friends and family are a source for around a quarter (24%). 21% said they don't actively follow these topics.

Younger adults rely more on digital and informal sources, including international outlets, social media, and podcasts. Older respondents depend more on traditional news and official sources, with the 70+ group showing the highest use of U.S. news outlets and government websites.

Men report slightly higher use of digital channels (social media and podcasts), while women more often rely on personal networks such as friends and family.

Where do you typically get information about U.S. healthcare, pharmaceutical policy, or drug pricing issues?

N=833

U.S. news outlets	56%
International news outlets	53%
Friends or family	24%
I don't actively follow these topics	21%
Government websites or official communications	17%
Social media	15%
Trade or health policy organizations	15%
Colleagues or professional networks	15%
Podcasts or YouTube commentary	15%

Delays are most often attributed to system capacity, regulation and cost

Voice of Americans abroad:

Regulatory delays

Respondents frequently mentioned medicines and vaccines arriving years after FDA approval (e.g. cancer drugs, Covid vaccines, diabetes treatments), often because national regulators and payers take longer to assess and fund them.

“A drug that I could benefit from was approved by the FDA in August 2025. I was told by my doctor that it is unlikely to be available in Switzerland before 2027.”

“The new weight loss drug was not available for the first 2+ years after its launch and still is not available in all forms. Also it is very expensive on an Indian standard but about 1/3 of the cost in the U.S. In the U.S. this would have been readily available.”

“Regulatory barriers often cause delays of medicines vaccines and treatments.”

Capacity & under-resourcing

Respondents most commonly linked delays to long waits for diagnostics, specialists and non-urgent surgery, often due to too few doctors, limited operating capacity or under-resourced public systems.

“Waiting lists in the U.K. delay treatment as compared to people with excellent health insurance in the U.S. However people with bad or no insurance in the U.S. suffer more than those on NHS waiting lists.”

“Doctors are paid poorly so they move elsewhere and aren’t replaced As a result there aren’t enough and waitlists develop The treatment would probably be faster and easier in the U.S. albeit more expensive.”

“I needed a hip replacement and was in extreme pain I was told I would need to wait four months to see a doctor and at least two years to have the surgery. I went to the U.S. and had it done in two weeks.”

“Limited availability in Canada due to nonexistent market conditions. It’s a “socialized” system here with looong wait times.”

C2 Have you or someone you know ever had to wait a long time to receive a treatment that was available in the U.S.? Please describe the situation in more detail. What do you think caused the delay? How do you feel this compares to how the same treatment might have been accessed in the U.S.?

Voice of Americans abroad:

Limited access to doctors, treatments and medications

Another recurring theme was difficulty accessing the “right” care, including shortages of family doctors and specialists, limited availability of newer or branded medicines, and geographic gaps that require long travel to reach services.

“New treatments are not available to everyone and delays are significant.”

“Lack of family doctors/available trained physicians/long queue.”

“Long wait times and lack of family doctors are frustrating aspects of accessing healthcare.”

“It is difficult to get through to see a specialist... The limited access to specialists is a cost-saving measure.”

“The latest technology in healthcare is often not covered by insurance.”

“Some US firms will not accept prescriptions from Saudi Arabia.”

Bureaucracy, navigation and inconsistent communication

Respondents also frequently described administrative and process-related frustrations, from referral gatekeeping and repeated approvals to confusing rules, poor coordination between providers and challenges reaching staff.

“The bureaucracy involved is frustrating.”

“I have to visit my family doctor to get a referral to see a specialist.”

“I can’t even reach the doctor when I need to. It has to be certain times of day and certain times of the week.”

“Prescription renewal procedure is a frustrating experience.”

“Administrative staff act as gatekeepers.”

“The system is slow and bureaucratic, requiring self-guidance for diagnostics.”

“Getting registered with the health system can be frustrating due to confusing forms.”

“If the government doesn’t deem a medication or treatment necessary it won’t be funded.”

C5 What, if anything, do you find most frustrating about accessing healthcare or medications in the country where you currently reside?

Strong support for extending U.S. health coverage and vaccine access abroad

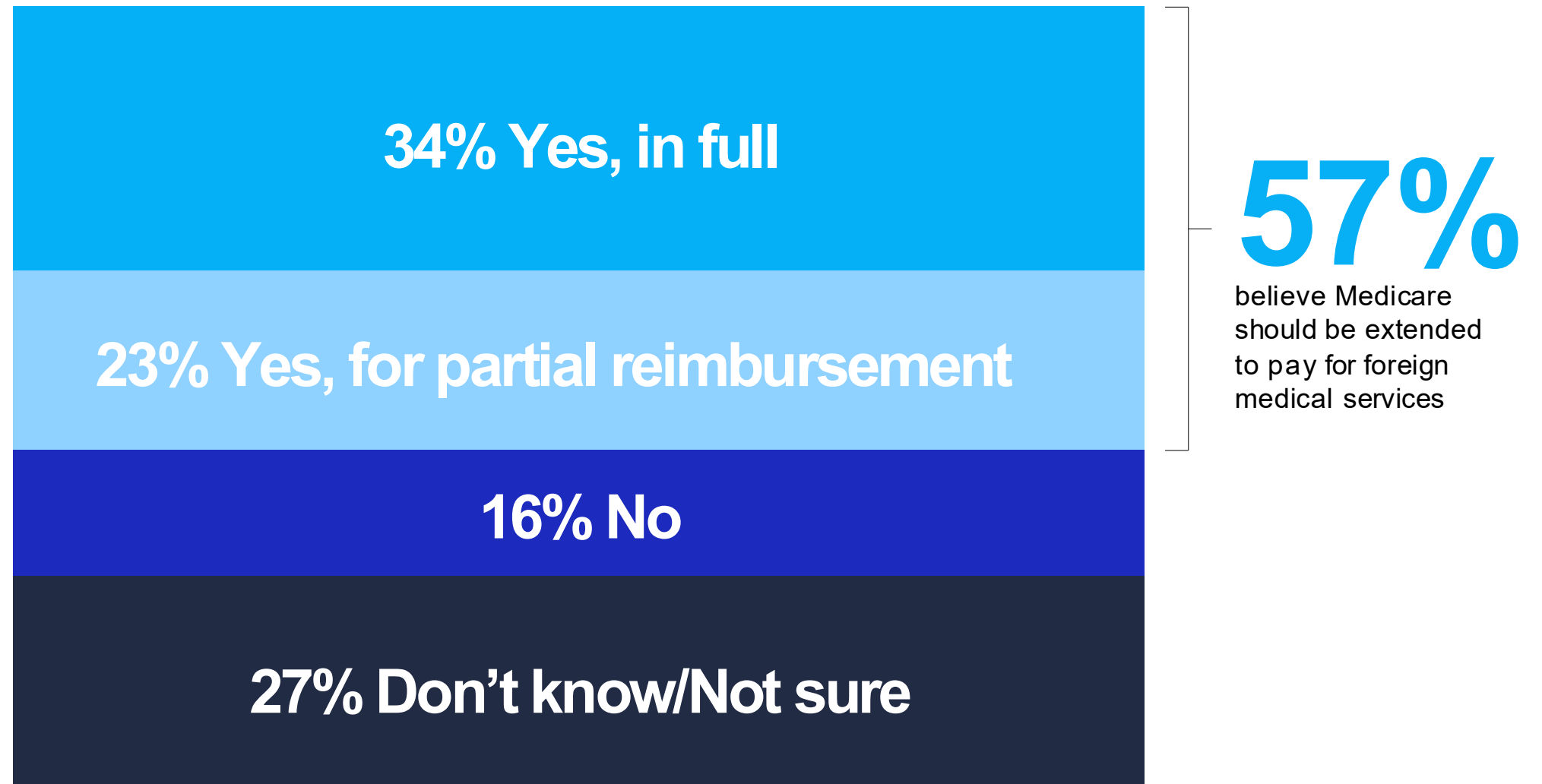
There is broad support for extending elements of U.S. healthcare policy to citizens overseas.

68% agree the U.S. should fund vaccines for all citizens globally during health crises.

Over a third of respondents (34%) feel Medicare should fully cover medical services received abroad, with a further 23% supporting partial reimbursement (net 57%). Support is highest among those aged 60-69 (60%). Men are also more likely than women to favour extending Medicare (63% vs 49%).

Q. Do you think Medicare should be extended to pay for foreign medical services either in full or for partial reimbursement?

N=833



20%

Around a fifth plan on using U.S. Medicare benefits now or in the future

Bureaucracy and safety reviews perceived to drive most regulatory delays

Around one in six Americans abroad (17%) report having encountered or observed regulatory delays for new U.S. medicines in the country in which they currently reside. This rises to over a quarter (27%) among those living in Australia, New Zealand and Asia.

The delays were most commonly attributed to bureaucracy or administrative inefficiency and to safety/efficacy reviews, each selected by just over half of those affected (52%). A further 38% pointed to slow negotiations or approval timelines with manufacturers.

Q. What do you believe these delays are due to?

1.	Bureaucracy / administrative inefficiency	52%
2.	Safety or efficacy concerns (real or perceived)	52%
3.	Slow negotiation or approval timelines with manufacturers	38%
4.	Cost-cutting or budget limitations	27%
5.	Delays in health technology assessment (e.g. cost-effectiveness review)	26%
6.	Deliberate protectionism (favoring domestic products or companies)	16%
7.	Political or ideological opposition to U.S. policies or products	15%
8.	Complex or unclear pricing and reimbursement processes	15%
9.	Lack of regulatory capacity or expertise	11%



Thank you.

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