

# A.I. CHATBOTS

TWO CONSUMER REPORTS NATIONALLY REPRESENTATIVE PHONE AND  
INTERNET SURVEYS: AUGUST AND NOVEMBER 2023

REPORT PREPARED DECEMBER 29, 2023  
CONSUMER REPORTS® SURVEY GROUP

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# INTRODUCTION

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In August 2023, Consumer Reports conducted a nationally representative multi-mode American Experiences Survey. NORC at the University of Chicago administered the survey from August 11<sup>th</sup> – 21<sup>st</sup>, 2023 through its AmeriSpeak® Panel to a nationally representative sample of 2,062 adult U.S. residents.

The August omnibus survey included seven sections:

- AI Chatbots
- Plasticizers in Food Packaging
- Alcohol Use Perceptions
- Rear Seatbelt Use
- Vacuuming Habits
- Used Tire Purchases
- Customer Service

In November 2023, Consumer Reports conducted another wave of the American Experiences Survey. NORC at the University of Chicago administered the survey from November 10<sup>th</sup> – 20<sup>th</sup>, 2023 through its AmeriSpeak® Panel to a nationally representative sample of 2,070 adult U.S. residents.

The November omnibus survey included five sections:

- Inflation
- Insurance
- Video Doorbells
- Health-Related Uses of Chatbots and Apps
- Commuting

This report covers one section from each omnibus: the AI Chatbots section from August 2023 and the Health-Related Uses of Chatbots and Apps section from November 2023.

Toplines for the complete surveys, including all sections, are available at the following links.

August 2023:

[https://article.images.consumerreports.org/image/upload/v1693432536/prod/content/dam/surveys/Consumer\\_Reports\\_AES\\_August\\_2023.pdf](https://article.images.consumerreports.org/image/upload/v1693432536/prod/content/dam/surveys/Consumer_Reports_AES_August_2023.pdf)

November 2023:

[https://article.images.consumerreports.org/image/upload/v1701794445/prod/content/dam/surveys/Consumer\\_Reports\\_AES\\_November\\_2023.pdf](https://article.images.consumerreports.org/image/upload/v1701794445/prod/content/dam/surveys/Consumer_Reports_AES_November_2023.pdf)

## AI CHATBOTS (AUGUST 2023)

This section opened with a description of the kinds of chatbots—and the kinds of artificial intelligence (AI)—we were interested in:

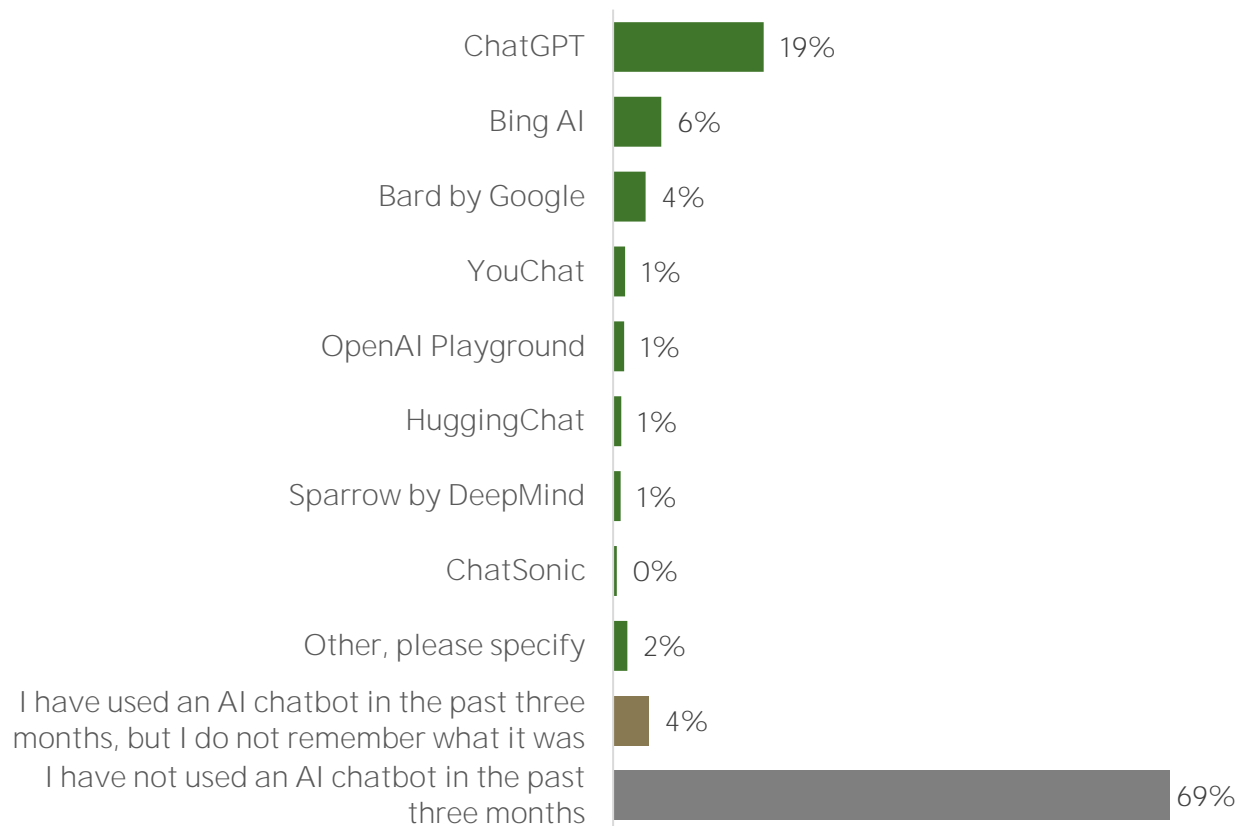
The next section is about text-based generative artificial intelligence (AI) chatbots like ChatGPT. These are interactive computer programs that humans can have a conversation with by typing. In addition to making conversation, they can respond to instructions like "Write an email cancelling my appointment" or "Make a list of common baby names" or "What are three themes in War and Peace?"

We are not interested in task-focused chatbots, like some online customer service tools.

### PREVALENCE

In August 2023, a third of Americans said they had used an AI chatbot in the past three months. ChatGPT was far and away the most common, with 19% of Americans having used it. Six percent had used Bing AI and four percent had used Google's Bard AI.

Which, if any, of the following AI chatbots have you used in the past three months?

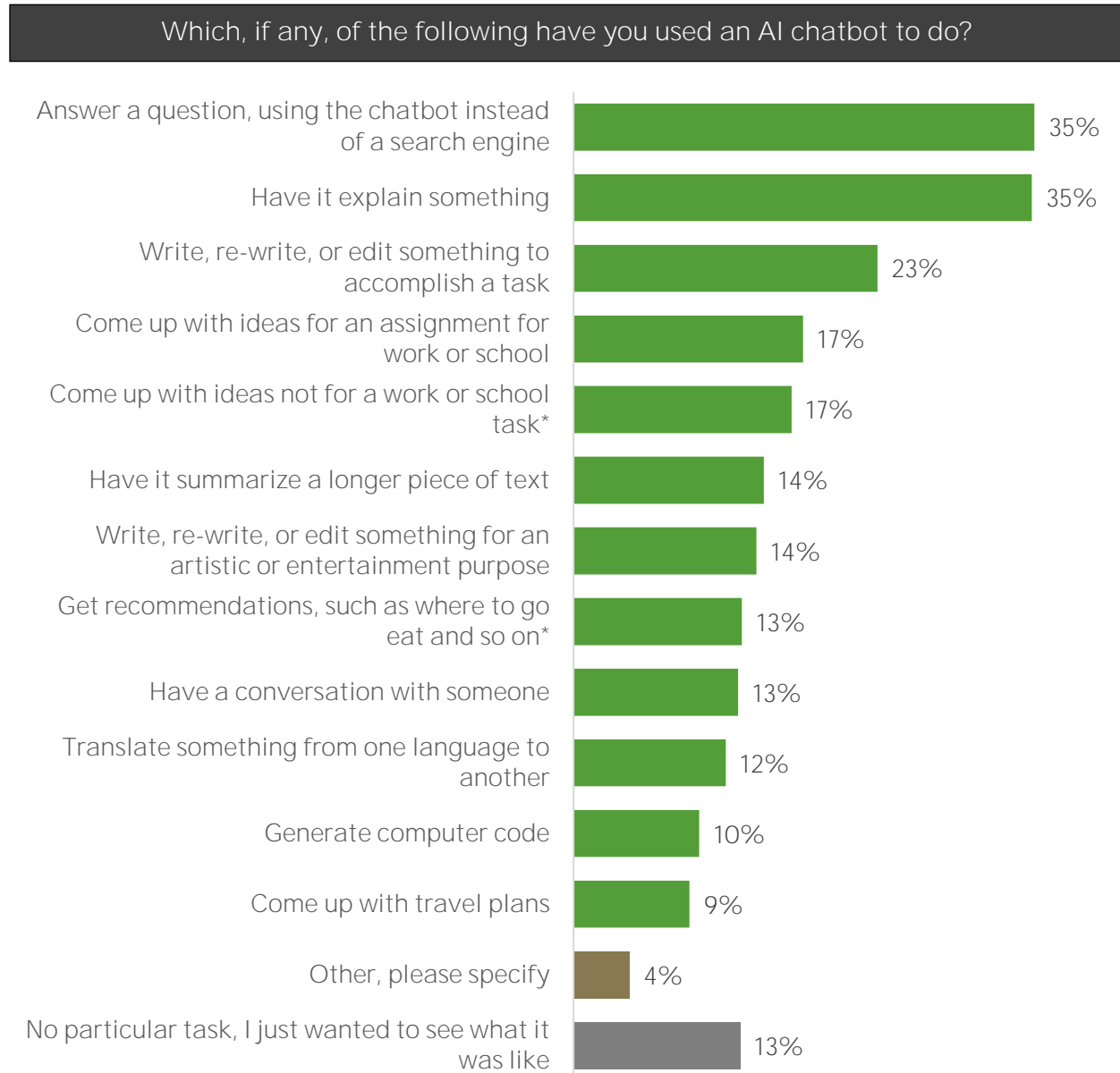


Base: All respondents  
Respondents could select all that applied.

## WHAT AMERICANS USE AI CHATBOTS TO DO

The most common ways Americans had used AI chatbots were related to gathering and understanding information. **Thirty-five percent say they have used it instead of a search engine to answer a question, and the same percentage have used it to explain something.** Around one in five (23%) Americans who had used an AI chatbot in the last three months had used it to help them accomplish a writing-related task; fewer (14%) had done so for *entertainment*.

Thirteen percent said they did not use the AI for any particular task, but just wanted to see what it was like.



Base: Respondents who have used any AI chatbot in the past three months  
Respondents could select all that applied.

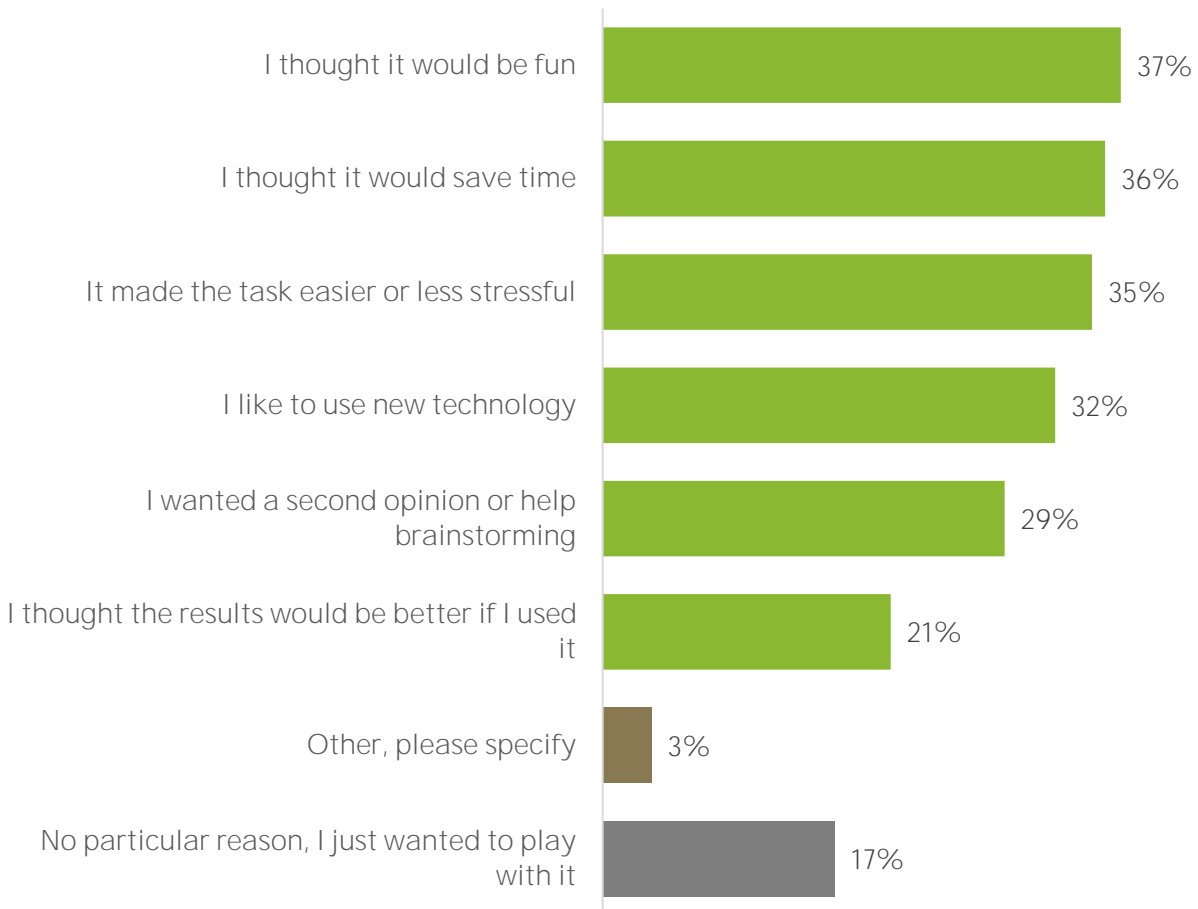
\*Response abbreviated to fit. See toplines for full wording.

## WHY AMERICANS USE AI CHATBOTS

Finally, we asked why Americans chose to use an AI chatbot for these tasks, rather than doing it themselves, asking someone else, or looking up information in another way. The most common responses here were **thinking that it would be fun (37%)**; **that it would save time (36%)**; and/or **that it would make the task easier or less stressful (35%)**.

As with the question about what they used AI chatbots to do, a small group (17%) said they had no particular reason for using an AI chatbot. Between that and the 37% using it because it would be fun, it appears that novelty and curiosity drive at least some use of these tools.

Which, if any, of the following are reasons you chose to use an AI chatbot to do what you did?



Base: Respondents who have used any AI chatbot in the past three months  
Respondents could select all that applied.  
\*Response abbreviated to fit. See topline for full wording.

## HEALTH-RELATED USES OF CHATBOTS AND APPS (NOVEMBER 2023)

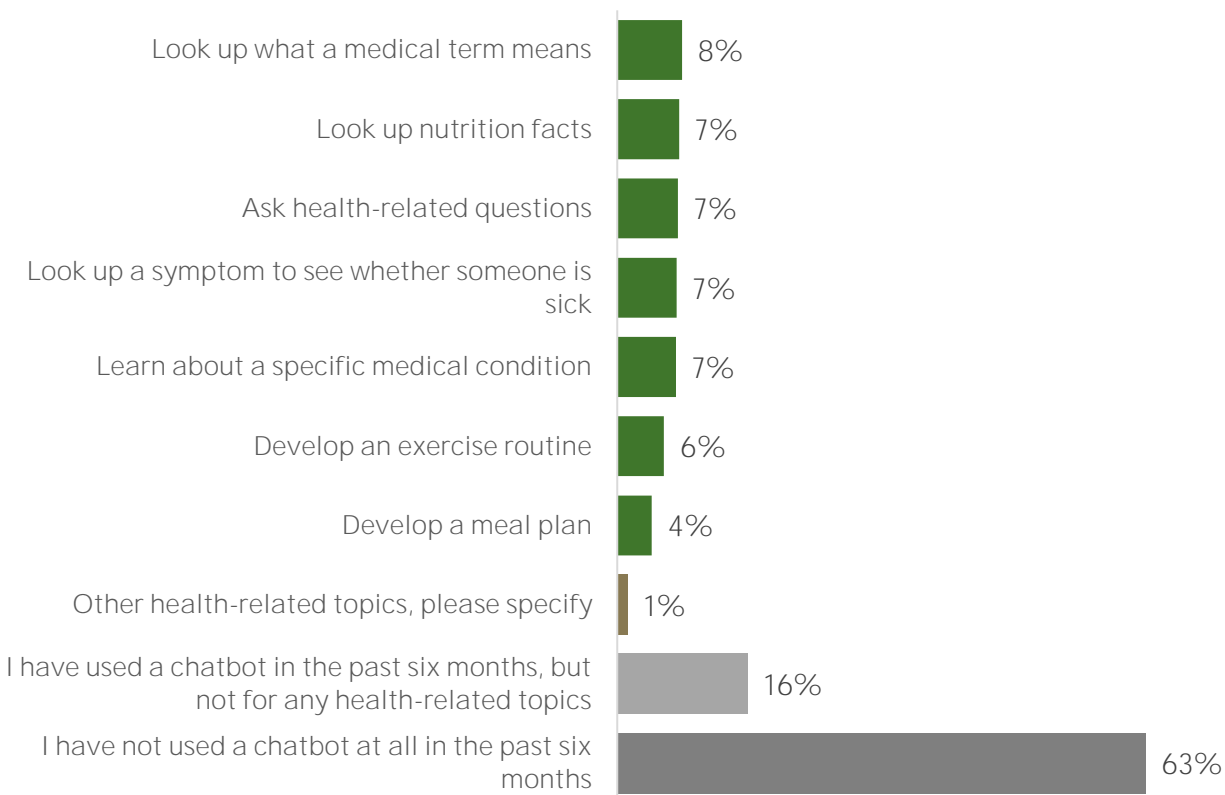
This section opened with a blurb defining what “chatbot” meant in the context of this survey, borrowed from the August 2023 language:

This section is partly about text-based generative artificial intelligence (AI) chatbots like ChatGPT. These are interactive computer programs that humans can have a conversation with by typing. In addition to making conversation, they can respond to instructions like “Write an email cancelling my appointment.”

### USING CHATBOTS FOR HEALTH-RELATED TOPICS AND ACTIVITIES

In November 2023, around one in five Americans (21%) had used a chatbot for some health-related activity or to discuss a health-related topic in the past six months. This was more than half of the people who had used a chatbot at all in that same timeframe. We offered several possible topics to choose from and found most of these were about equally common uses of chatbots. Developing a meal plan was relatively less common.

Which, if any, of the following health-related activities or topics have you discussed with an AI chatbot in the past six months?

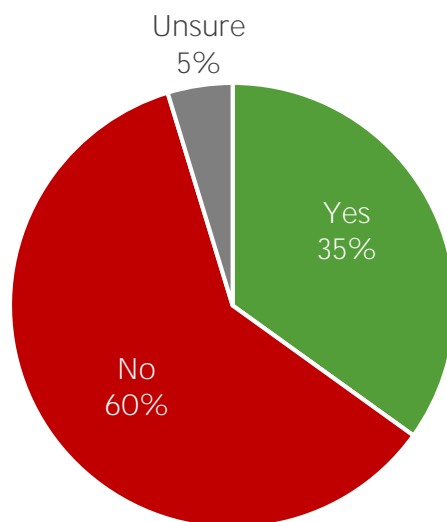


Base: All respondents  
Respondents could select all that applied.

## USING HEALTH APPS

In the previous six months, **about a third of Americans (35%) had used a health-related app**, making this more common than using chatbots for health-related activities. We referred to these as “health, mental health, fitness, or nutrition” apps and elaborated that: *“For this question, we are interested in apps that are DESIGNED for health purposes, including weight management, exercise planning or tracking, period tracking, illness management, mental health management, and meditation. We are NOT interested in apps designed to improve mental sharpness, like puzzle games.”*

Have you used a health, mental health, fitness, or nutrition app in the past six months?



Base: All respondents

## ACCEPTABLE USES OF HEALTH DATA

Next, we explained to Americans that companies that own chatbots or health apps can gather data on users' health information through these services:

When you use chatbots or health-related apps to learn about health issues, the interaction often becomes data for the company that runs the service. That means these companies know what health topics you have been researching, and possibly your own health information, depending on the service and what you chose to share. Below are several different things companies could do with this information.

For both chatbots and health-related apps, we asked which of those uses Americans found acceptable.

For both companies that own chatbots and those that own health-related apps, Americans were most likely to say that the companies **should never store any health-related information they might gather** on their users or that this information **can be stored as part of a user profile, but should never be shared** with any other companies. In both cases, very few—five percent—said they thought it was acceptable for a company to sell health-related information to organizations that would use it



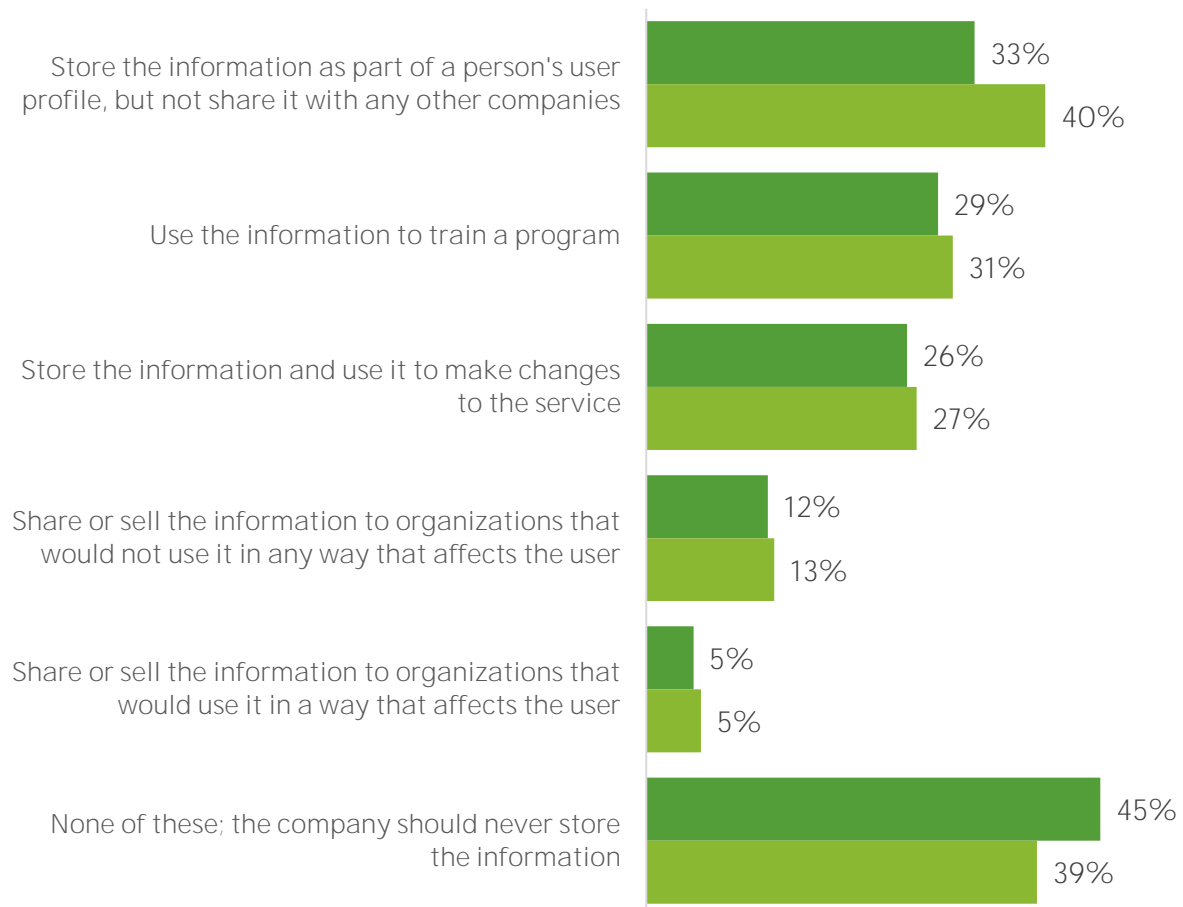
in a way that affects the user, such as targeted advertising. Only around ten percent said they would find it acceptable for a company to sell this information even to organizations that would *not* use it in a way that affects the user.

A little under half (45%) of Americans said that companies that own chatbots should *never* store the information, more than said so for health-related apps (39%). A third of Americans said it would be acceptable for companies that own *chatbots* to store the information as part of a user profile, while four in ten said so for companies that own *health apps*.

Which, if any, of the following do you think is acceptable for the company to do with this data?

**For companies that own....**

■ Chatbots ■ Health apps



Base: All respondents  
Wording of question stem and response options have been adjusted to fit. See topline for full wording.

There were no differences by age or gender in preferences for how companies that own chatbots should handle health data gleaned from these bots.

When it came to preferences for how companies that own health-related **apps** should handle health data, there were differences by both age and gender in one option, using the information to train a program. **Men** were more likely than women to say they find it acceptable for companies to **use the information to train a program** (33% vs. 28%), and **younger Americans** were more likely to say this than older Americans (from 34% of Americans aged 18 – 29 to just 27% of those aged 60 or older).

There were also differences in responses by whether or not Americans used the service in question. For each, those who had used it in the past six months were more likely to find it acceptable for companies to use health-related data in every way we asked about, and those who had not were more likely to say that companies should never store the information.<sup>1</sup>

Which, if any, of the following do you think is acceptable for companies that own \_\_\_\_\_ to do with health-related information about users?

	Chatbots		Health apps	
	Users	Non-users	Users	Non-users
	%	%	%	%
Store the information as part of a person's user profile, but not share it with any other companies	36	32	49	35
Use the information to train a program	41	26	41	25
Store the information and use it to make changes to the service	35	24	32	24
Share or sell the information to organizations that would <u>not</u> use it in any way that affects the person using the chatbot, such as health researchers	18	11	17	11
Share or sell the information to organizations that <u>would</u> use it in a way that affects the person using the chatbot, such as marketers who would use it to selectively target advertisements	10	3	7	4
None of these; the company should never store the information	28	50	26	46
<b>Base: All respondents</b>	<b>429</b>	<b>1,641</b>	<b>745</b>	<b>1,325</b>

<sup>1</sup> Predictors for these models included demographics and use of chatbots for any health-related purposes (analyses predicting attitudes toward uses of data gleaned from chatbots), and demographics and use of health apps (analyses predicting attitudes toward uses of data gleaned from health-related apps).

# METHODOLOGY

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## AUGUST 2023

This multi-mode survey was fielded by NORC at the University of Chicago using a nationally representative sample. The survey was conducted from August 11<sup>th</sup> – 21<sup>st</sup>, 2023. Interviews were conducted in English ( $n = 1,988$ ) and in Spanish ( $n = 74$ ), and were administered both online ( $n = 1,951$ ) and by phone ( $n = 111$ ).

A general population sample of U.S adults age 18 and older was selected from NORC's AmeriSpeak® Panel for this study. Funded and operated by NORC at the University of Chicago, AmeriSpeak® is a probability-based panel designed to be representative of the US household population. Randomly selected US households are sampled using area probability and address-based sampling, with a known, non-zero probability of selection from the NORC National Sample Frame. These sampled households are then contacted by US mail, telephone, and field interviewers (face to face). The panel provides sample coverage of approximately 97% of the U.S. household population. Those excluded from the sample include people with P.O. Box only addresses, some addresses not listed in the USPS Delivery Sequence File, and some newly constructed dwellings. While most AmeriSpeak households participate in surveys by web, non-internet households can participate in AmeriSpeak surveys by telephone. Households without conventional internet access but having web access via smartphones are allowed to participate in AmeriSpeak surveys by web. AmeriSpeak panelists participate in NORC studies or studies conducted by NORC on behalf of governmental agencies, academic researchers, and media and commercial organizations.

In total NORC collected 2,062 interviews. The margin of error for the sample of 2,062 is +/- 2.64 at the 95% confidence level. Smaller subgroups will have larger error margins. Web-mode panelists were offered the cash equivalent of \$3 for completing the survey, while phone-mode panelists were offered the cash equivalent of \$5.

Final data are weighted by age, gender, race/Hispanic ethnicity, housing tenure, telephone status, education, and Census Division to be proportionally representative of the U.S. adult population. Key demographic characteristics (after weighting is applied) of this sample are presented below:

- 51% female
- Median age of 47 years old
- 61% white, non-Hispanic
- 36% 4-year college graduates
- 60% have a household income of \$50,000 or more

## NOVEMBER 2023

This multi-mode survey was fielded by NORC at the University of Chicago using a nationally representative sample. The survey was conducted from November 10<sup>th</sup> – 20<sup>th</sup>, 2023. Interviews were conducted in English ( $n = 1,987$ ) and in Spanish ( $n = 83$ ), and were administered both online ( $n = 1,956$ ) and by phone ( $n = 114$ ).

A general population sample of U.S adults age 18 and older was selected from NORC's AmeriSpeak® Panel for this study. Funded and operated by NORC at the University of Chicago, AmeriSpeak® is a probability-based panel designed to be representative of the US household population. Randomly selected US households are sampled using area probability and address-based sampling, with a known, non-zero probability of selection from

the NORC National Sample Frame. These sampled households are then contacted by US mail, telephone, and field interviewers (face to face). The panel provides sample coverage of approximately 97% of the U.S. household population. Those excluded from the sample include people with P.O. Box only addresses, some addresses not listed in the USPS Delivery Sequence File, and some newly constructed dwellings. While most AmeriSpeak households participate in surveys by web, non-internet households can participate in AmeriSpeak surveys by telephone. Households without conventional internet access but having web access via smartphones are allowed to participate in AmeriSpeak surveys by web. AmeriSpeak panelists participate in NORC studies or studies conducted by NORC on behalf of governmental agencies, academic researchers, and media and commercial organizations.

In total NORC collected 2,070 interviews. The margin of error for the sample of 2,070 is +/- 2.69 at the 95% confidence level. Smaller subgroups will have larger error margins. Web-mode panelists were offered the cash equivalent of \$3 for completing the survey, while phone-mode panelists were offered the cash equivalent of \$5.

Final data are weighted by age, gender, race/Hispanic ethnicity, housing tenure, telephone status, education, and Census Division to be proportionally representative of the U.S. adult population. Key demographic characteristics (after weighting is applied) of this sample are presented below:

- 52% female
- Median age of 47 years old
- 61% white, non-Hispanic
- 35% 4-year college graduates
- 60% have a household income of \$50,000 or more