



Drivers of student training choices – a focus on student support services — support document 1

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NCVER

This document was produced by the author based on their research for the report *Drivers of student training choices - a focus on student support services*, and is an added resource for further information. The report is available on NCVER's Portal: <<https://www.ncver.edu.au>>.

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Introduction

Context

This report is a support document accompanying *Drivers of student training choices - a focus on student support services*, which examines the influence of student support service offerings on students' choice of training provider and how they compare with other drivers of student choice such as course cost, delivery mode and travel time. In particular, the research focuses on health and welfare support, career counselling and job search support, and tutoring and study skills guidance.

The first section of the support document provides key results from the analysis for a range of demographic groups. The second section presents only those results that have been found to be statistically significant.

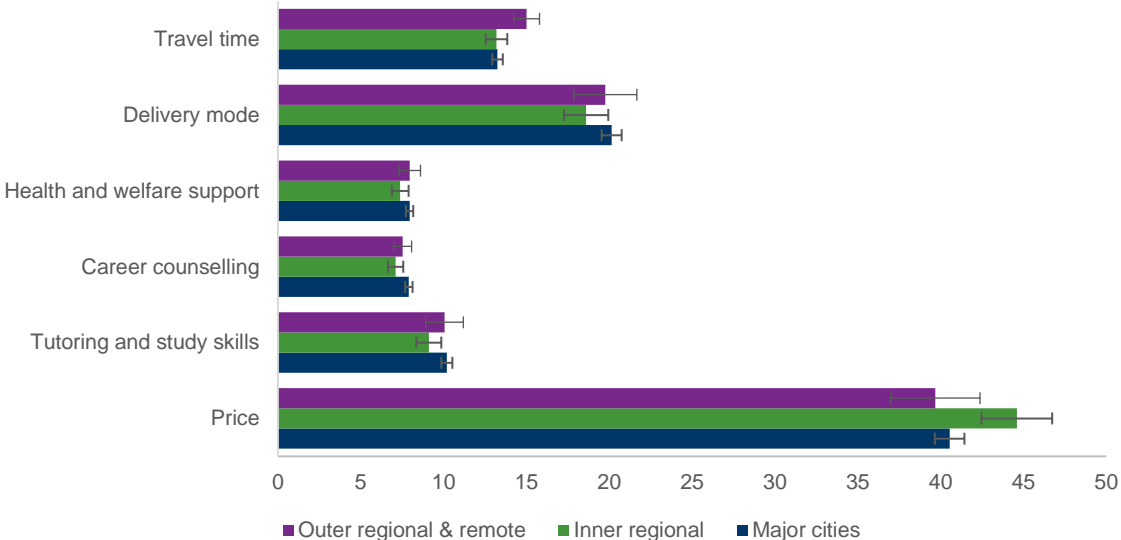
Discrete choice experiment results for different demographic groups

This section contains a breakdown of the average share of importance for each attribute by demographic group as well as the share of importance for each type of support by delivery mode. The results are presented with a travel time of 30 to 60 minutes for the blended and face-to-face delivery options and a set course cost of \$1500 across all delivery options. The student supports not under investigation are set to group sessions. This allows for only the influence of different levels of the specific student support to be explored.

Location

The average importance for each attribute is similar for the three location groups - major cities, inner regional and outer regional and remote - with price having the most influence on choice of RTO and the three student supports having the least influence. Looking at the level of student supports across the three delivery modes, those in outer regional and remote areas were less likely to choose the no support option in most instances compared with those in other regions, particularly when it comes to career counselling and job search support.

Figure 1 Average importance by location (based on ARIA region), %



Note: Major cities, n = 508; Inner regional, n = 91; Outer regional & remote, n = 51.

Health and welfare support

Figure 2 Share of preference by location and level of health & welfare support for online delivery mode, %

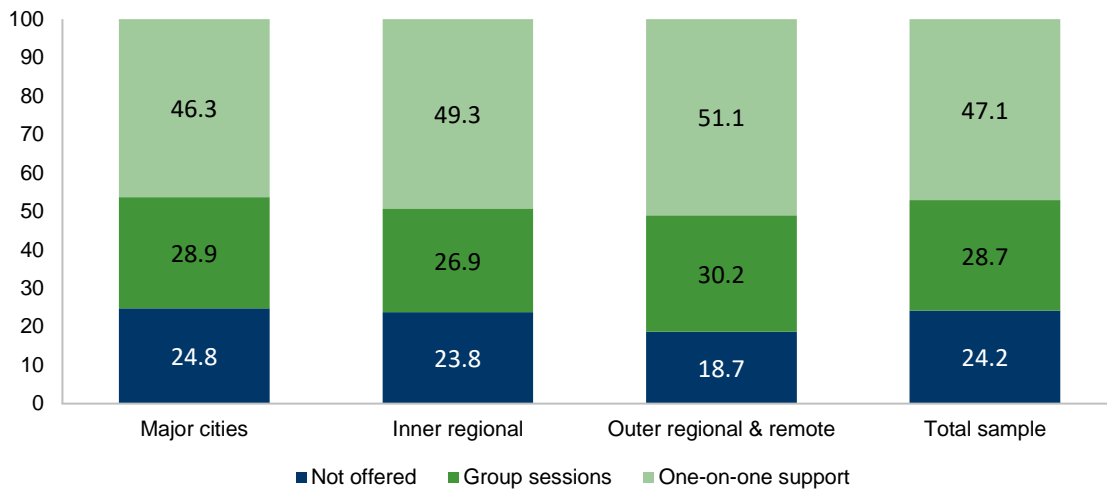


Figure 3 Share of preference by location and level of health & welfare support for blended delivery mode, %

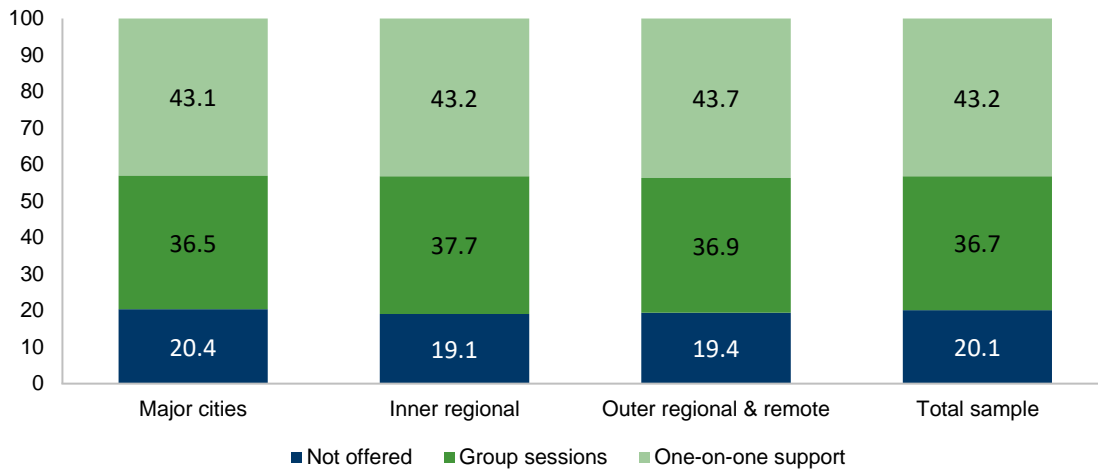
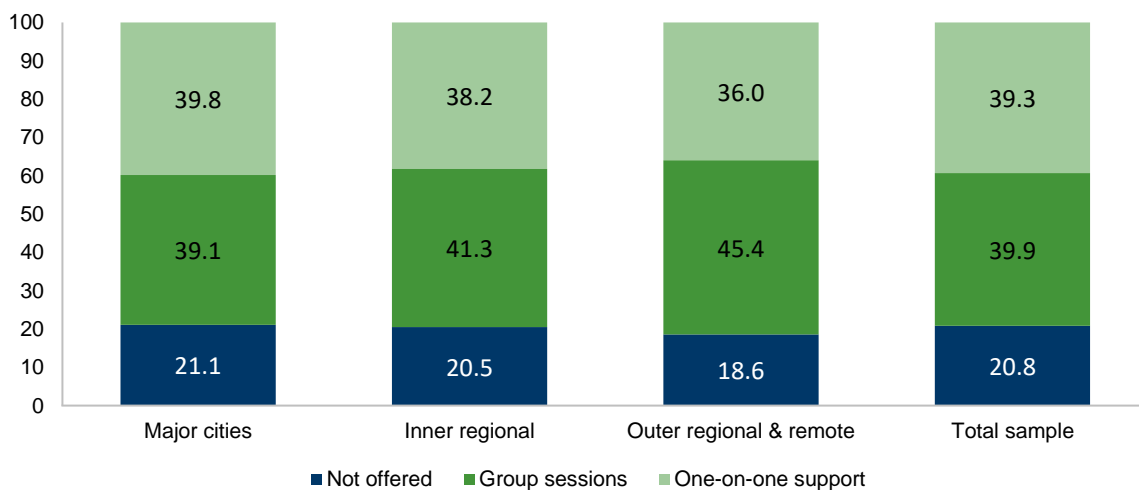


Figure 4 Share of preference by location and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 5 Share of preference by location and level of career counselling & job search support for online delivery mode, %

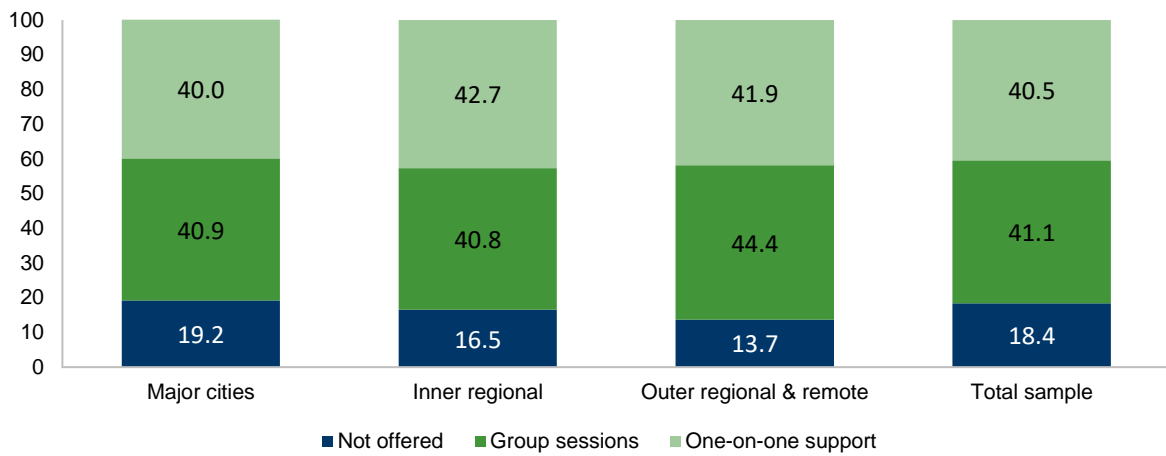


Figure 6 Share of preference by location and level of career counselling & job search support for blended delivery mode, %

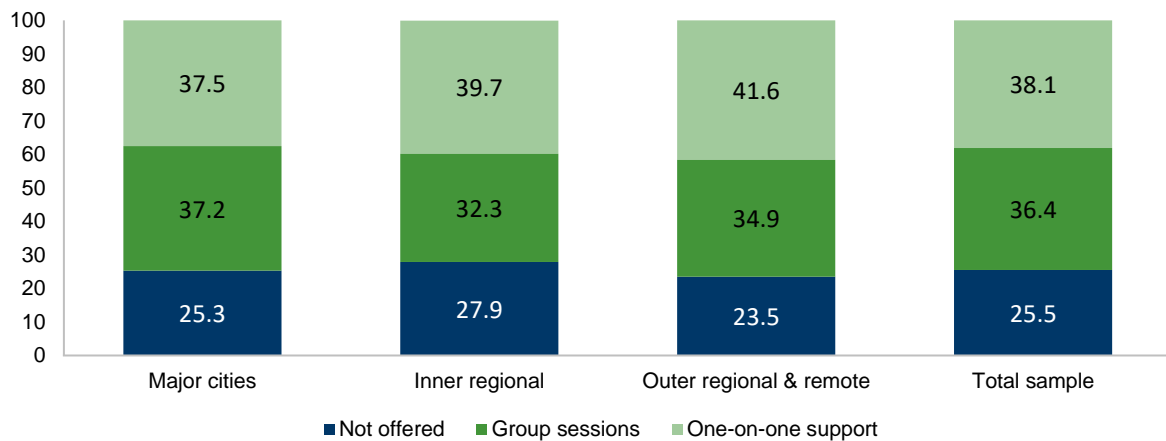
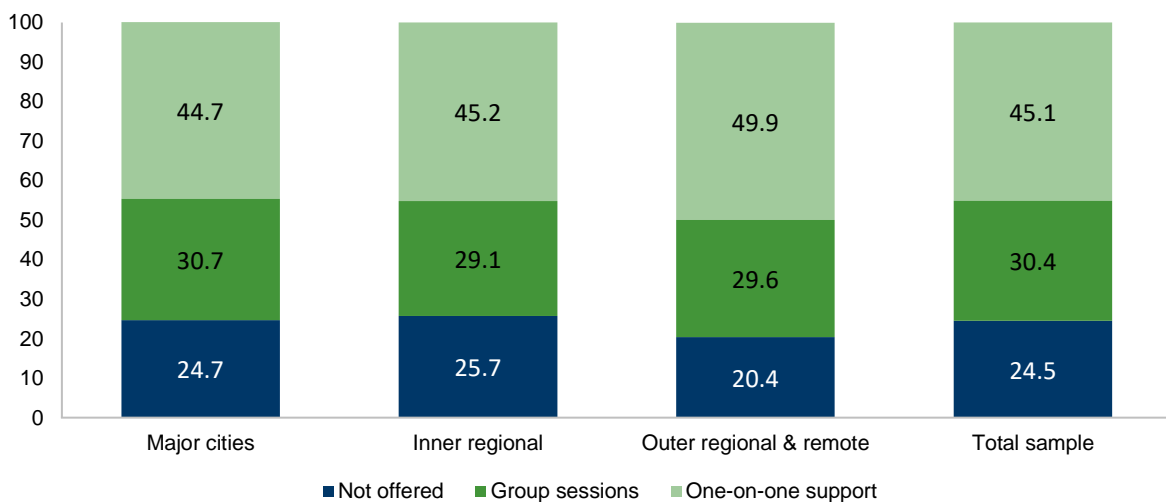


Figure 7 Share of preference by location and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 8 Share of preference by location and level of tutoring and study skills guidance for online delivery mode, %

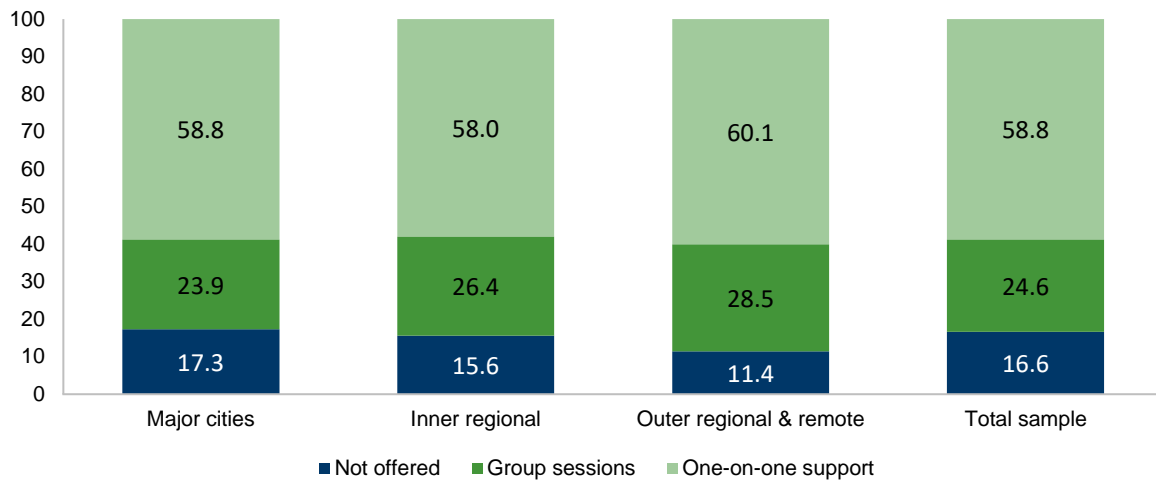


Figure 9 Share of preference by location and level of tutoring and study skills guidance for blended delivery mode, %

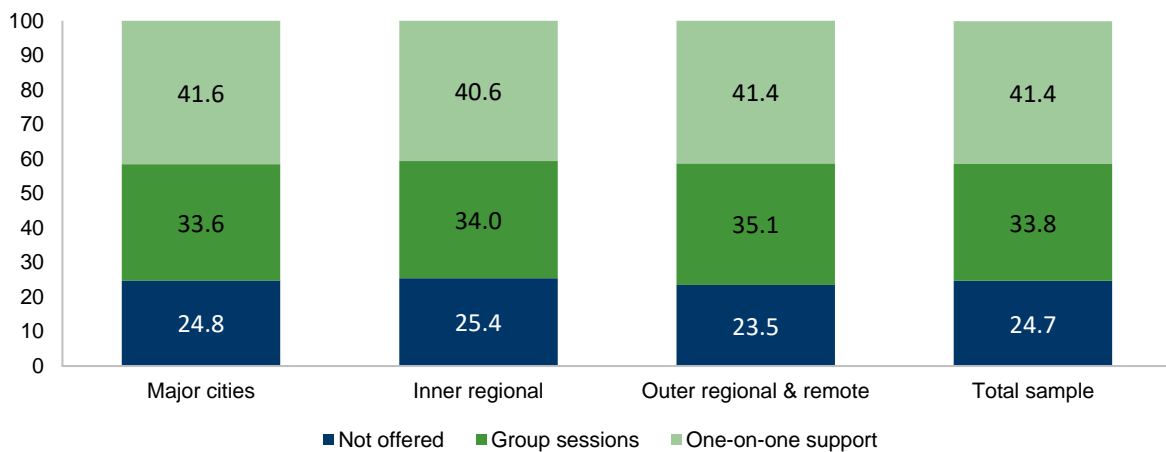
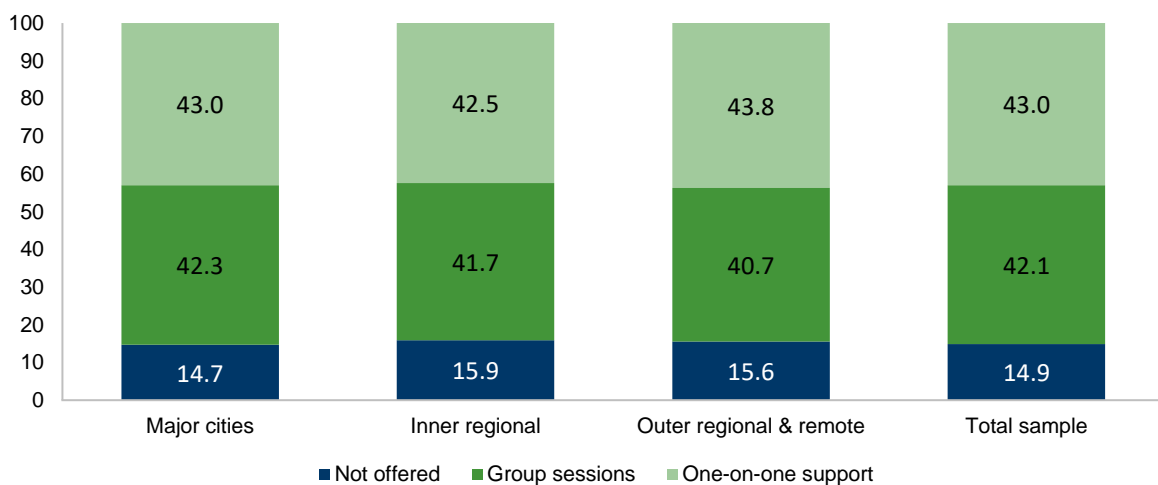


Figure 10 Share of preference by location and level of tutoring and study skills guidance for face-to-face delivery mode, %



Disability

The results were able to be segmented into four different types of disability - learning-related¹, physical, mental health and medical condition. Participants were also able to identify with more than one disability type. Comparisons are made with those who did not identify with the specific disability being looked at, for example someone in the no learning-related disability group may still have another form of disability.

When looking at the average importance of the six attributes, the order of importance is the same across all disability types and those not identifying with the disability - price is the most important followed by delivery mode, travel time, and tutoring and study skills guidance with health and welfare support and career counselling and job search support roughly equal in least importance. For those with learning-related disability, price is slightly less important than for those without learning-related disability and all the other attributes are slightly more important. For those with physical disability, all three supports are somewhat higher in importance than they are for those without physical disability. Tutoring and study skills guidance have more influence on RTO choice for those with mental health-related disability than for those without (about 3 percentage points higher, figure 31). For those with a medical condition, price is more important than for those without a medical condition and delivery mode is slightly less important.

There were differences between the different types of disabilities and how they favoured the different support options across the delivery modes. With health and welfare support and online delivery, those with learning-related disability preferred group sessions compared with those without learning-related disability, whereas those with physical disability or a medical condition preferred one-on-one support compared with those without either disability. Those with mental health-related disability had similar preferences to those without mental health-related disability. For blended delivery, preference for one-on-one health and welfare support was higher for those with learning-related disability and those with a medical condition compared with participants without disability. Those with mental health-related disability were less likely to prefer group sessions compared with those without mental health-related disability. With face-to-face delivery, one-on-one support was less favoured by those with either learning- or mental health-related disability compared with those without. Those with physical disability had similar preferences to those without. Those with a medical condition have a higher preference for one-on-one health and welfare support than those without a medical condition.

When looking at career counselling and job search support, those with physical disability were more likely to prefer one-on-one support across all three delivery modes compared with those without a physical disability. Those with learning-related disability had higher preferences for no support for the online and face-to-face delivery options compared with those without learning-related disability. For blended delivery mode, they had a greater preference for group sessions compared with those without learning-related disability. One of the more interesting findings is that participants with mental health-related disability preferred no support to group sessions when it came to face-to-face delivery mode. It was very rare for the no support level to rate more highly than a support option. Those with mental health-related disability were also more likely to prefer no support for the online and blended delivery modes compared with those without mental health-related disability, although group sessions and one-on-one support had a greater share of the preference in these instances to no support. When it came to participants with a medical condition, they had a higher preference for group sessions in the online delivery mode option and a higher preference for one-on-one support in the face-to-face delivery mode

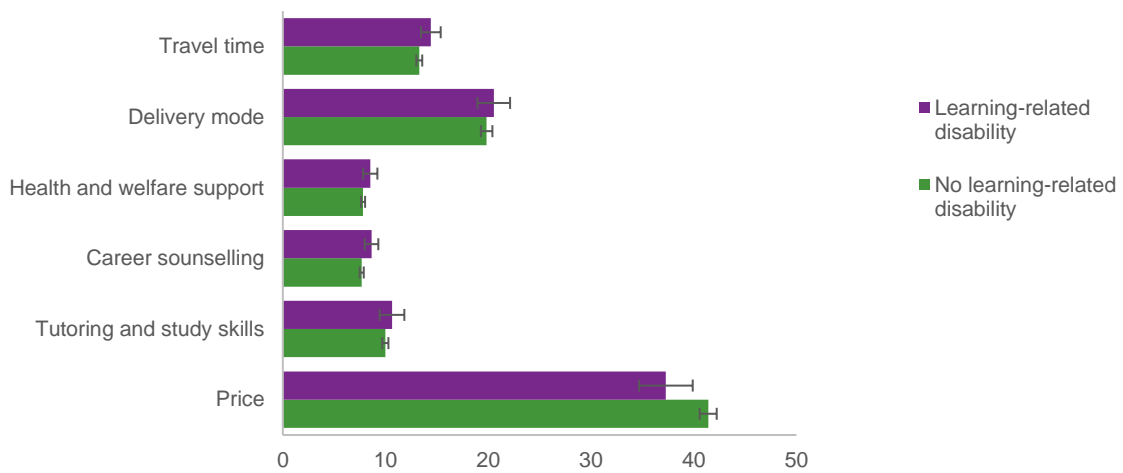
¹ Learning-related disability includes forms of learning, vision, hearing, intellectual, and acquired brain impairments.

than those without a medical condition. Support option preferences were similar between those with a medical condition and those without in the blended delivery mode.

While one may assume that those with disability may be more inclined to choose options with greater levels of group or one-on-one support when it came to tutoring and study skills guidance, particularly for those with learning-related disability, any differences were usually slight (less than 4 percentage points). One of the larger differences was for the online delivery mode and participants with physical disability where they had a higher preference for group sessions than those without disability (4.2 percentage points, see figure 28). Additionally, participants with learning-related disability were less inclined to choose one-on-one tutoring and study support than those without learning-related disability for the online delivery mode (4.4 percentage points lower, see figure 18).

Learning-related disability

Figure 11 Average importance by learning-related disability, %



Note: Learning-related disability, n = 57. Although results are presented separately, respondents may have listed having more than one form of disability.

Health and welfare support

Figure 12 Share of preference by learning-related disability and level of health & welfare support for online delivery mode, %

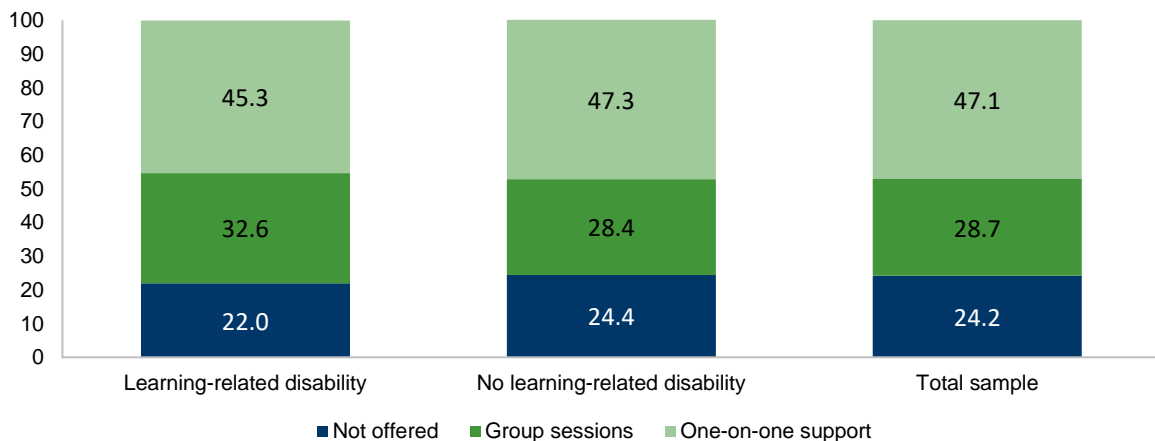


Figure 13 Share of preference by learning-related disability and level of health & welfare support for blended delivery mode, %

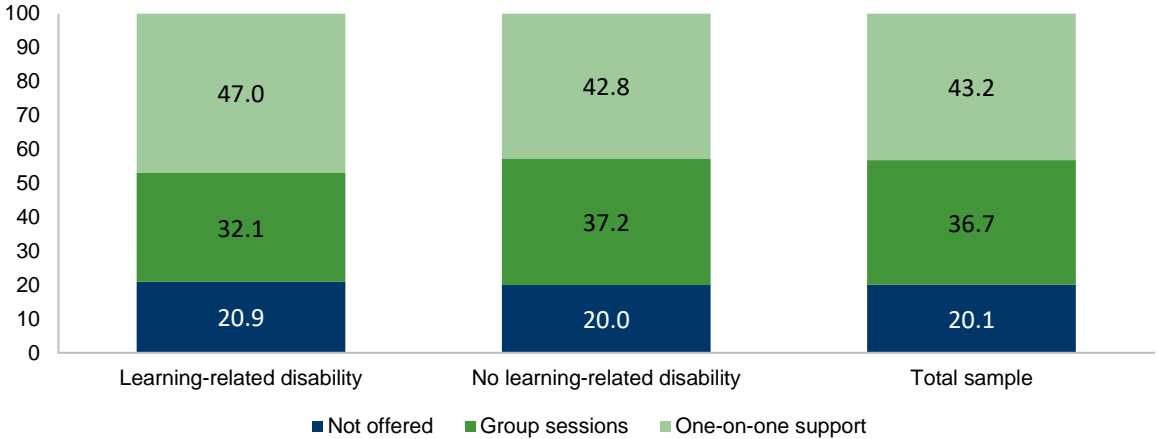
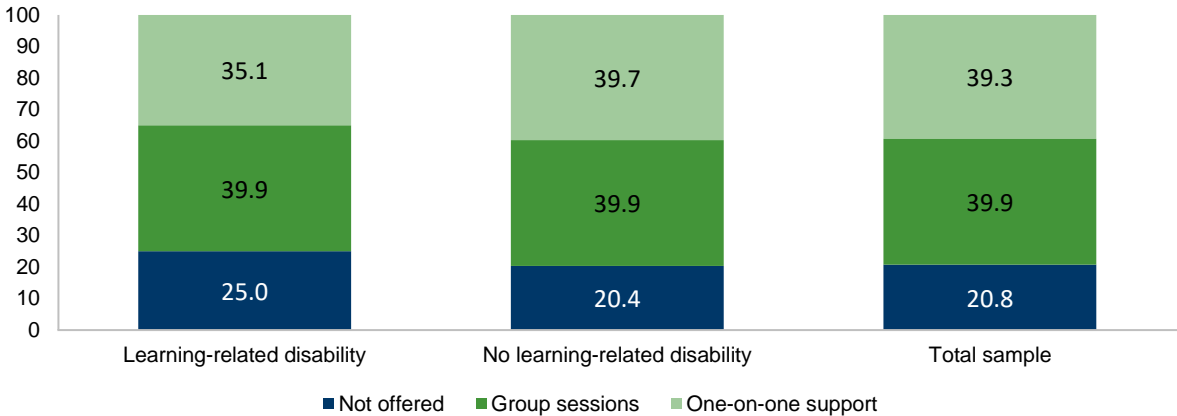


Figure 14 Share of preference by learning-related disability and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 15 Share of preference by learning-related disability and level of career counselling & job search support for online delivery mode, %

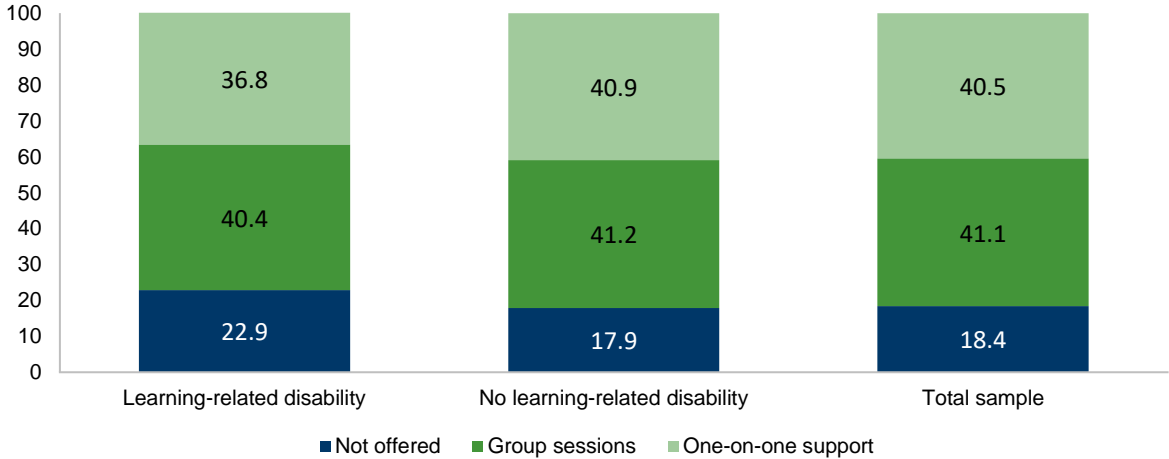


Figure 16 Share of preference by learning-related disability and level of career counselling & job search support for blended delivery mode, %

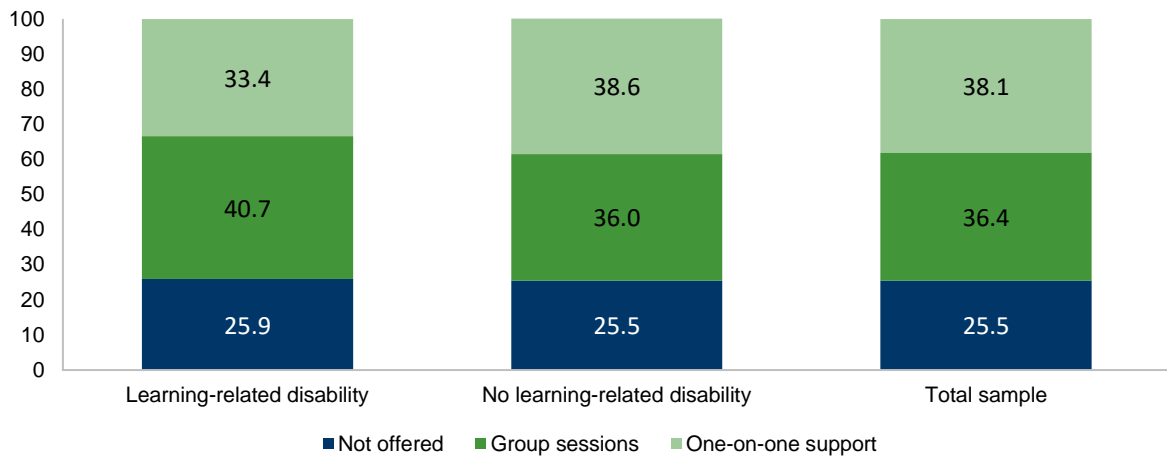
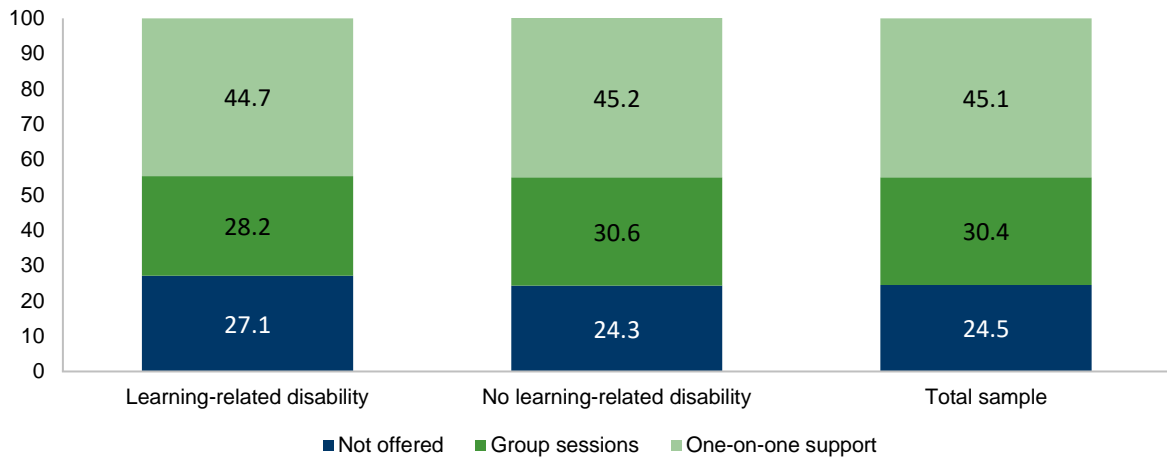


Figure 17 Share of preference by learning-related disability and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 18 Share of preference by learning-related disability and level of tutoring and study skills guidance for online delivery mode, %

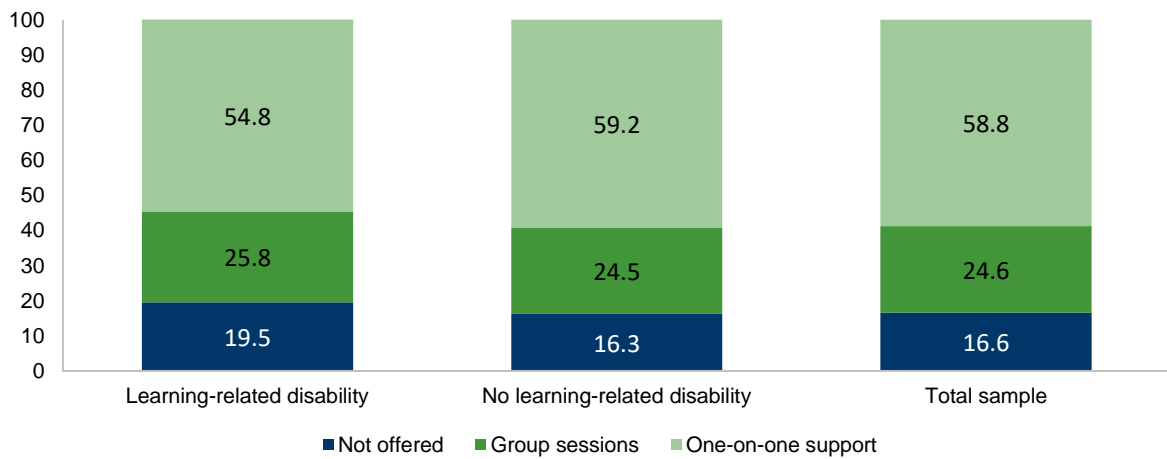


Figure 19 Share of preference by learning-related disability and level of tutoring and study skills guidance for blended delivery mode, %

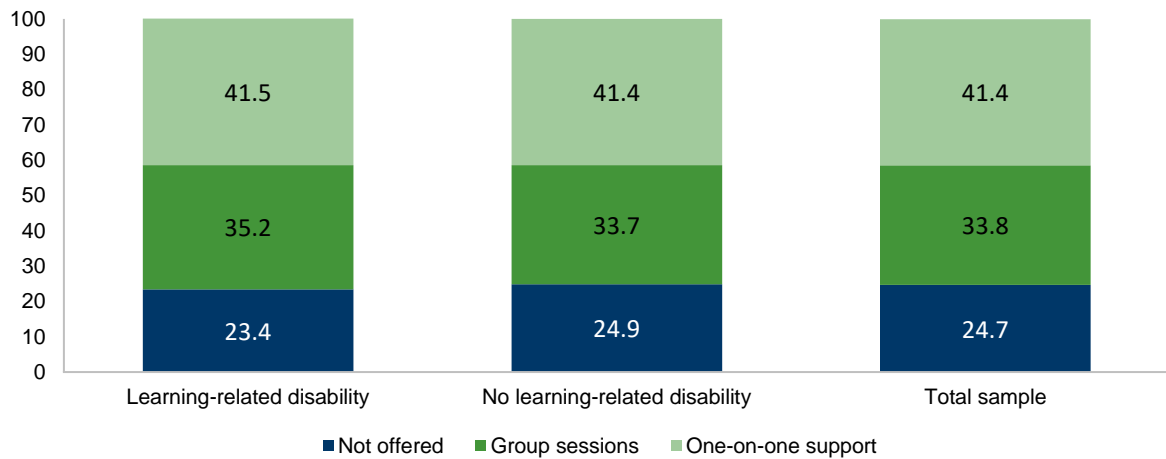
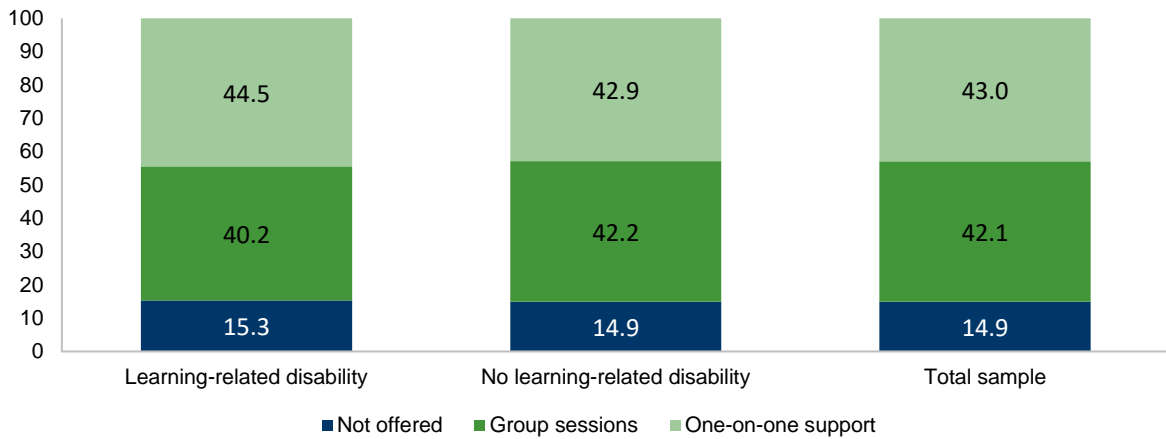
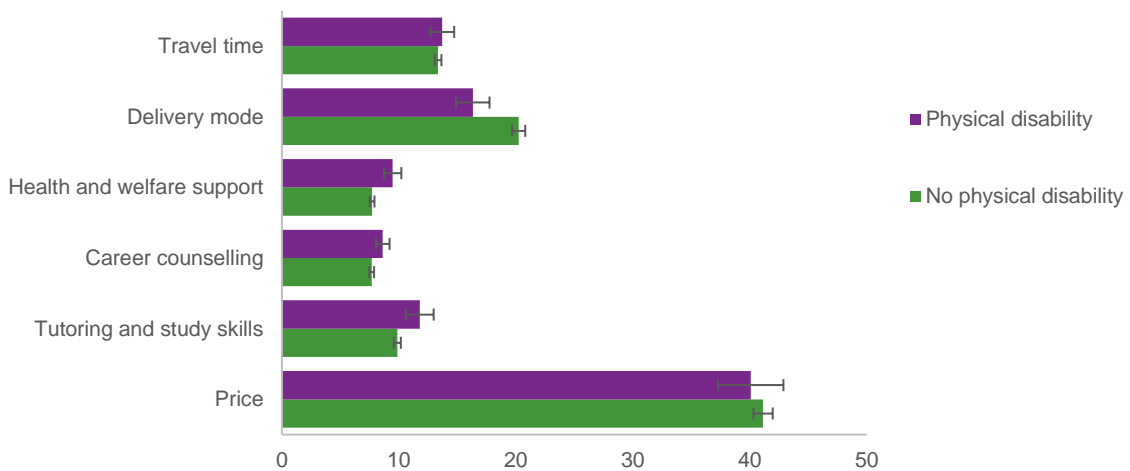


Figure 20 Share of preference by learning-related disability and level of tutoring and study skills guidance for face-to-face delivery mode, %



Physical disability

Figure 21 Average importance by physical disability, %



Note: Physical disability, n = 57. Although results are presented separately, respondents may have listed having more than one form of disability.

Health and welfare support

Figure 22 Share of preference by physical disability and level of health & welfare support for online delivery mode, %

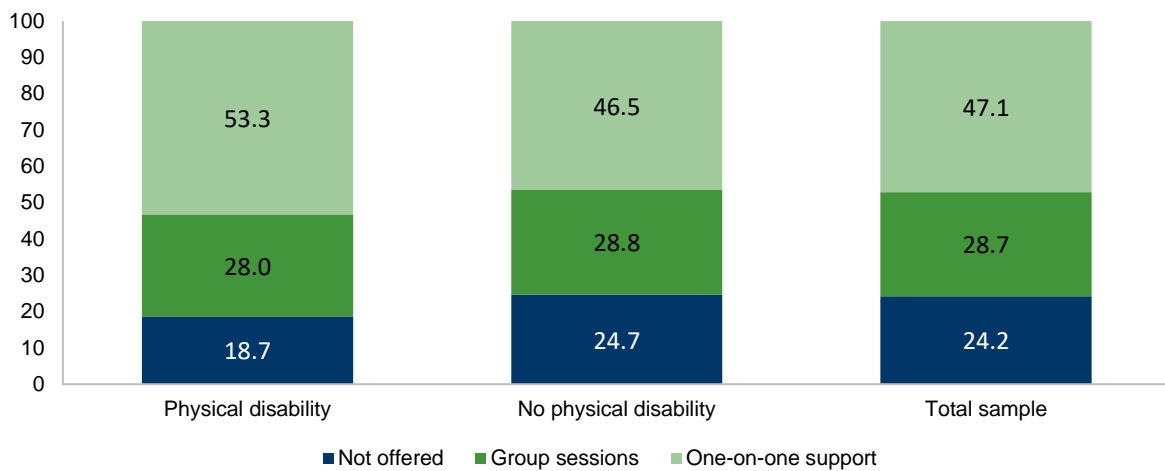


Figure 23 Share of preference by physical disability and level of health & welfare support for blended delivery mode, %

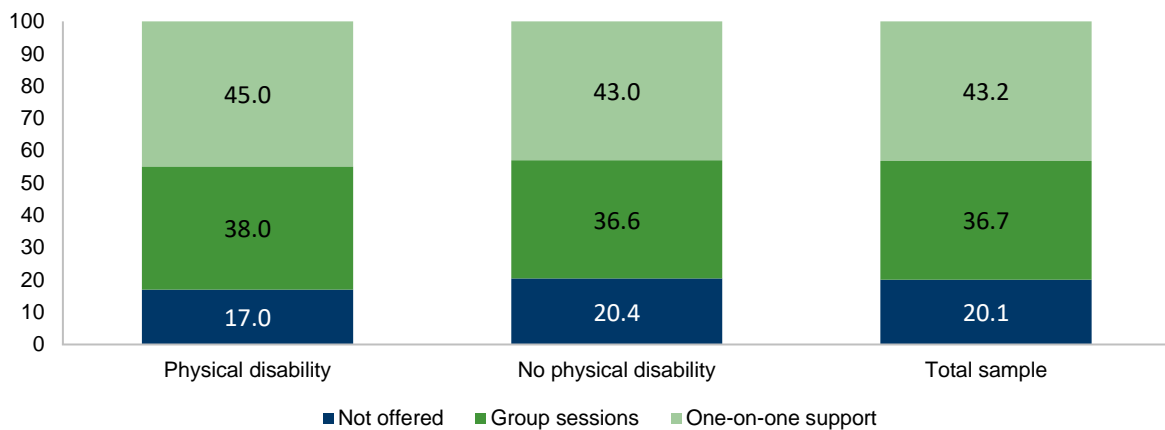
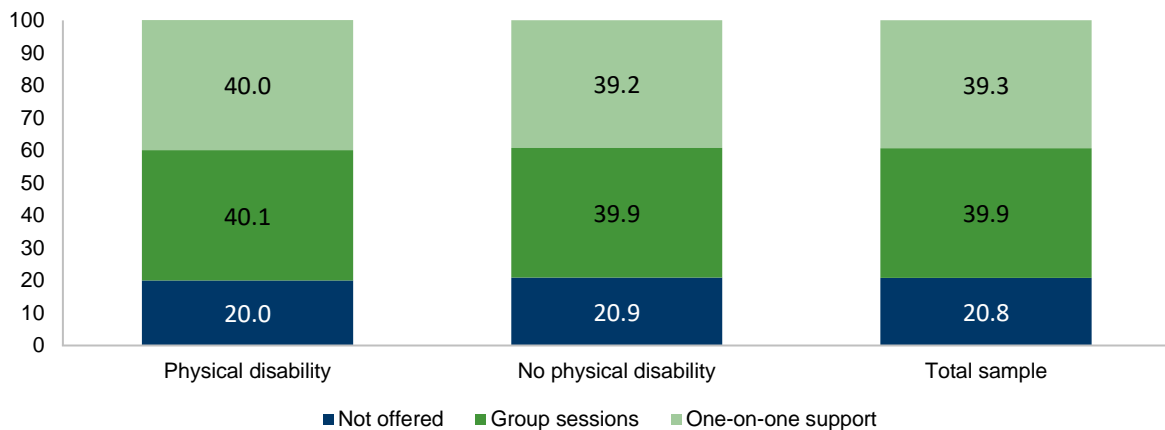


Figure 24 Share of preference by physical disability and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 25 Share of preference by physical disability and level of career counselling & job search support for online delivery mode, %

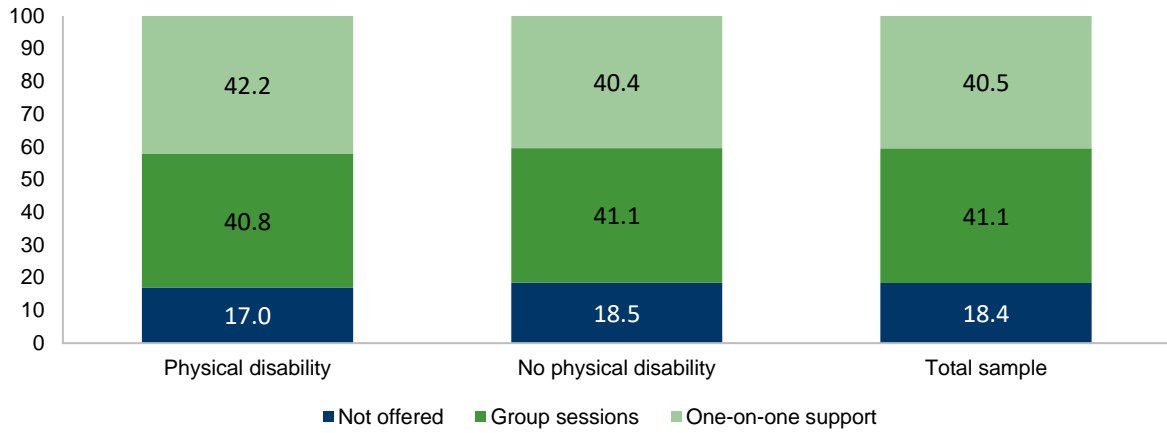


Figure 26 Share of preference by physical disability and level of career counselling & job search support for blended delivery mode, %

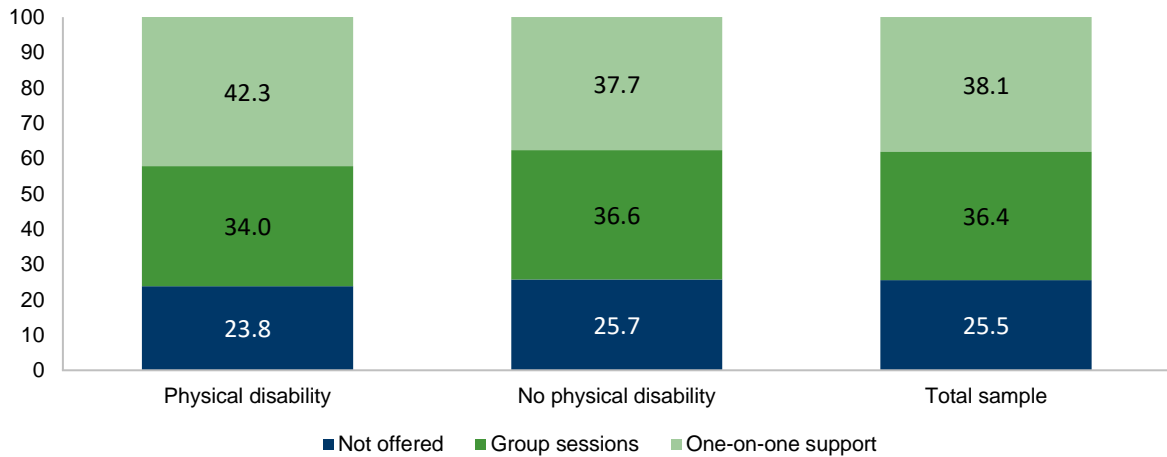
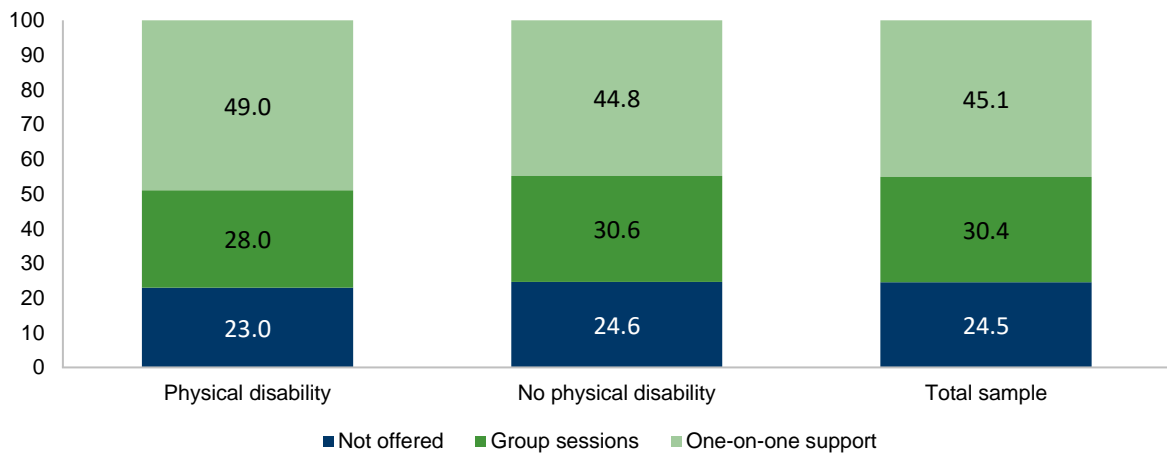


Figure 27 Share of preference by physical disability and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 28 Share of preference by physical disability and level of tutoring and study skills guidance for online delivery mode, %

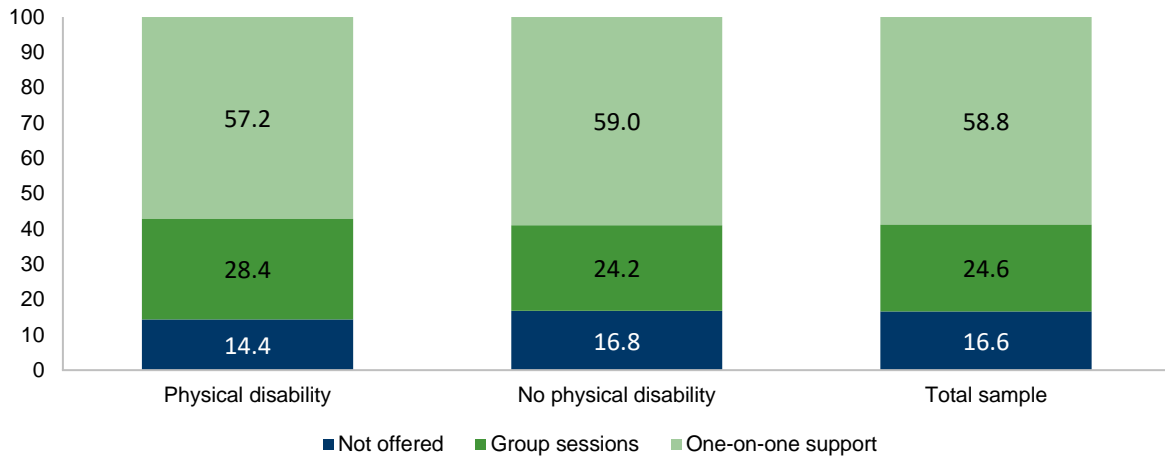


Figure 29 Share of preference by physical disability and level of tutoring and study skills guidance for blended delivery mode, %

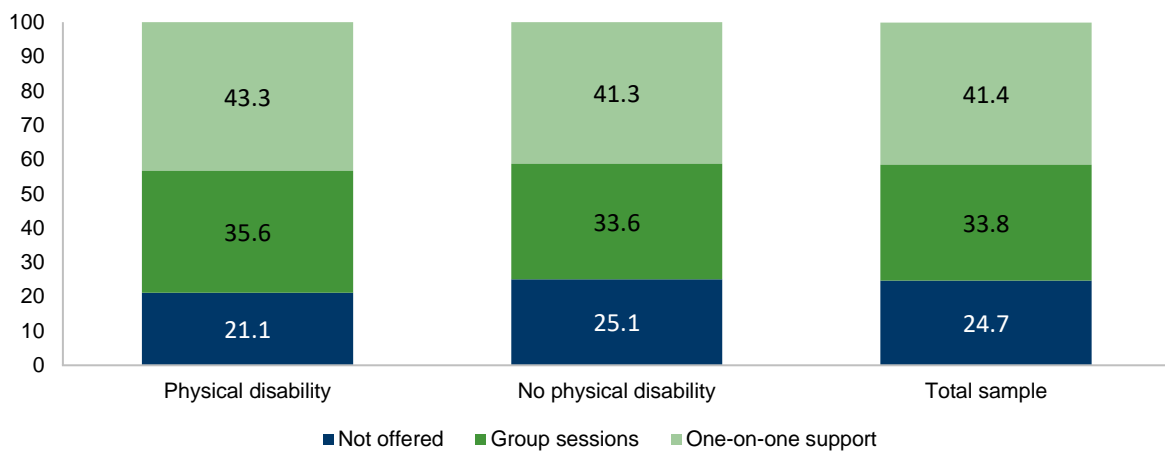
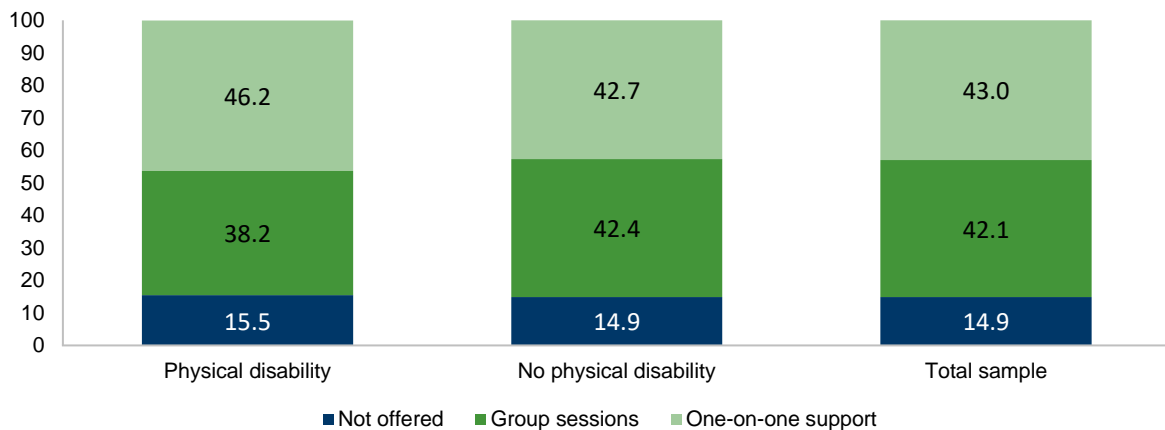
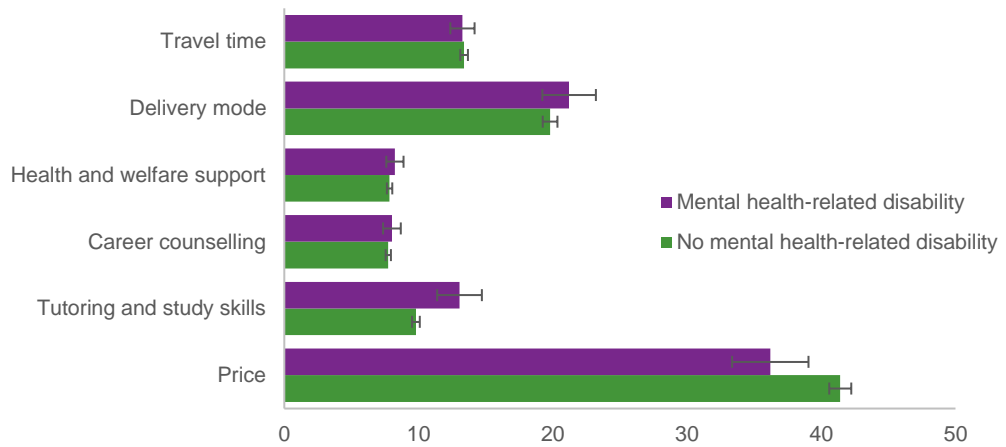


Figure 30 Share of preference by physical disability and level of tutoring and study skills guidance for face-to-face delivery mode, %



Mental health-related disability

Figure 31 Average importance by mental health-related disability, %



Note: Mental health-related disability, n = 46. Although results are presented separately, respondents may have listed having more than one form of disability.

Health and welfare support

Figure 32 Share of preference by mental health-related disability and level of health & welfare support for online delivery mode, %

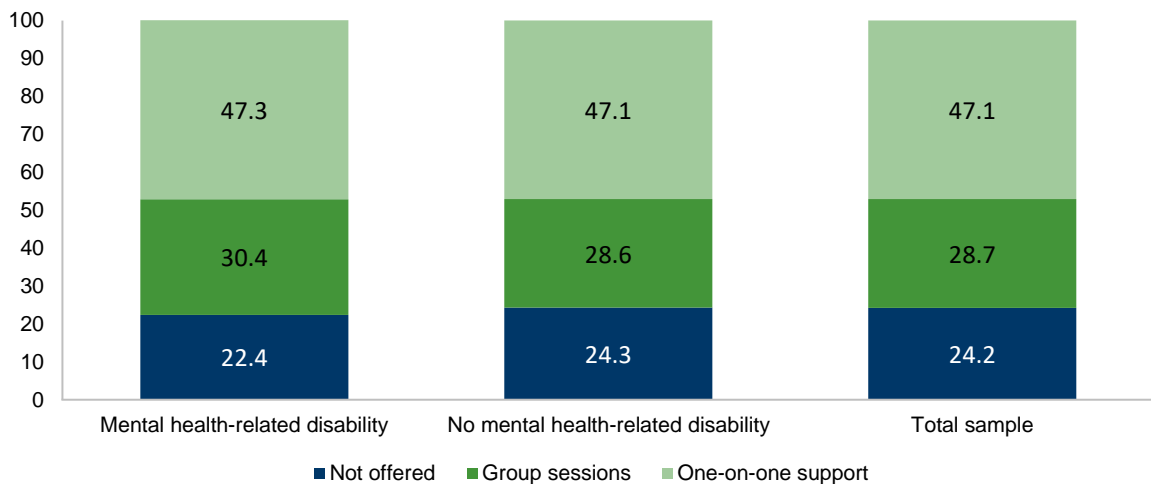


Figure 33 Share of preference by mental health-related disability and level of health & welfare support for blended delivery mode, %

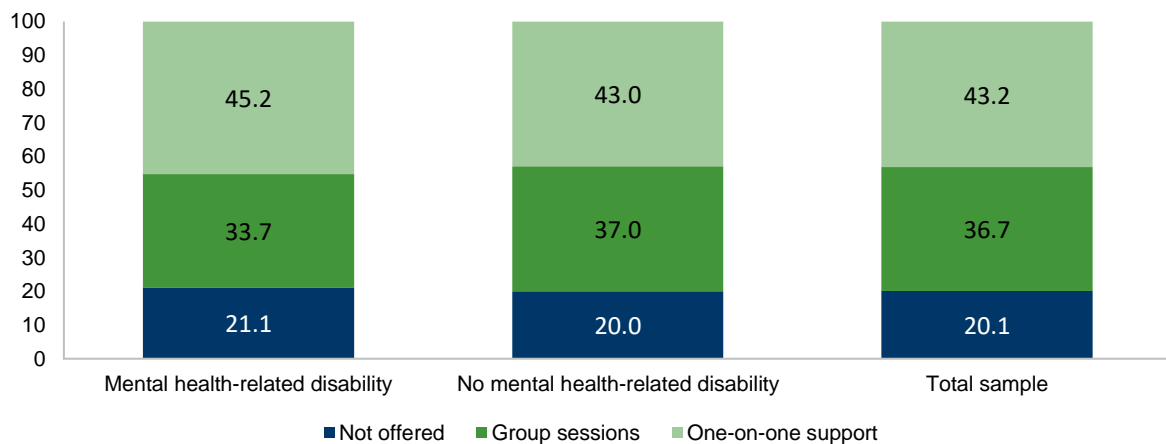
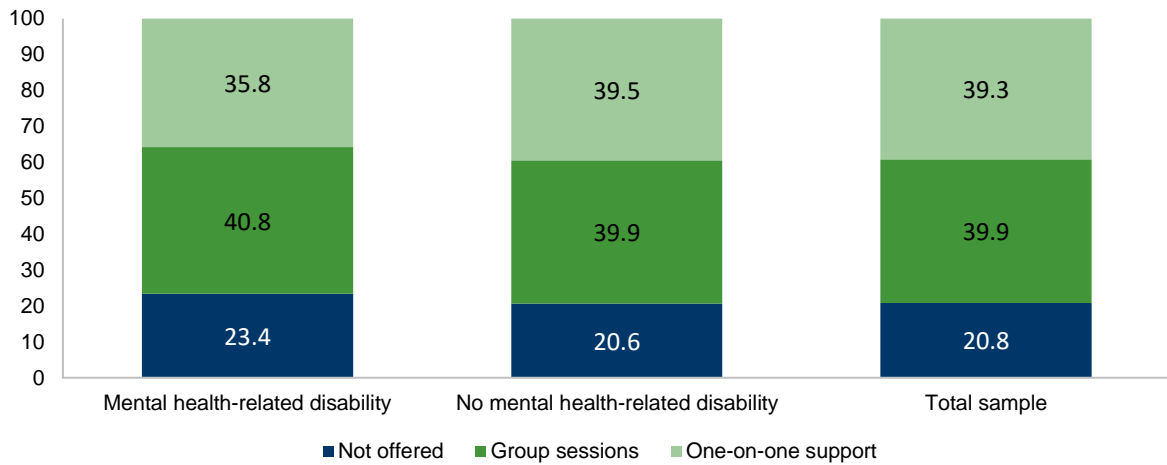


Figure 34 Share of preference by mental health-related disability and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 35 Share of preference by mental health-related disability and level of career counselling & job search support for online delivery mode, %

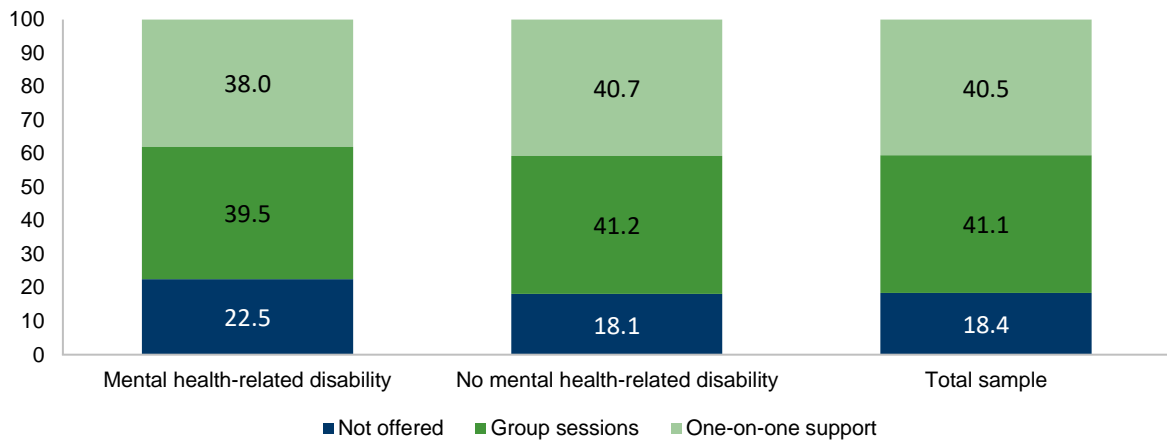


Figure 36 Share of preference by mental health-related disability and level of career counselling & job search support for blended delivery mode, %

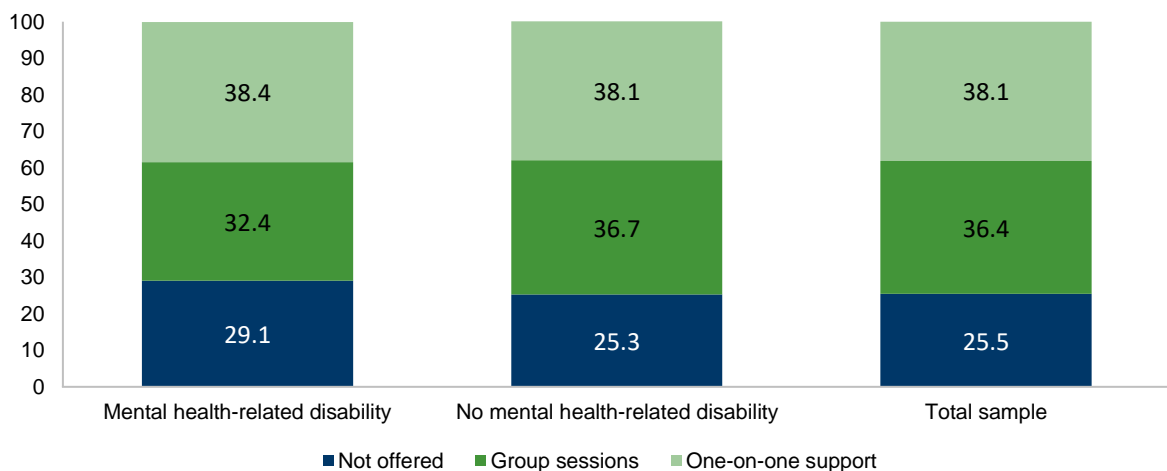
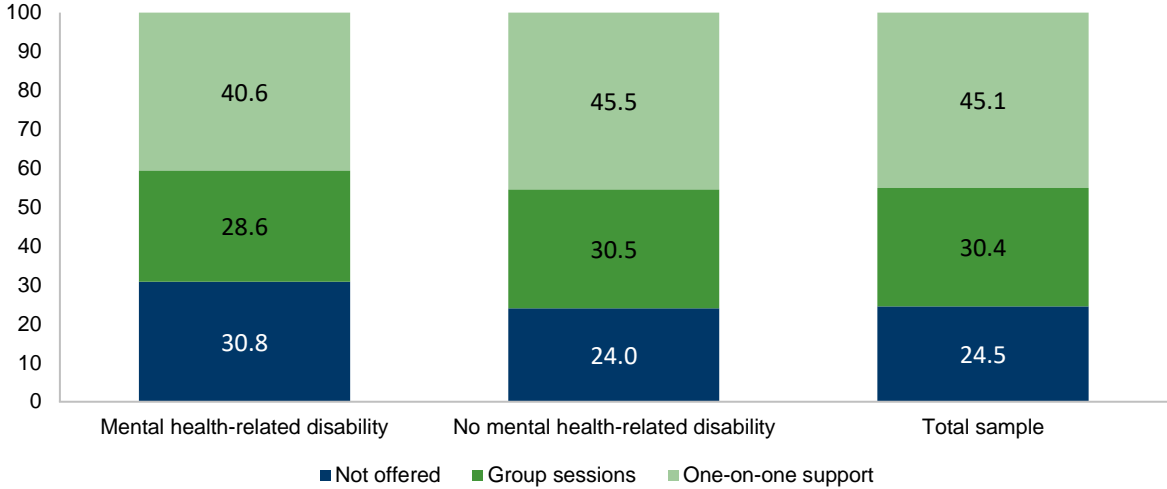


Figure 37 Share of preference by mental health-related disability and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 38 Share of preference by mental health-related disability and level of tutoring and study skills guidance for online delivery mode, %

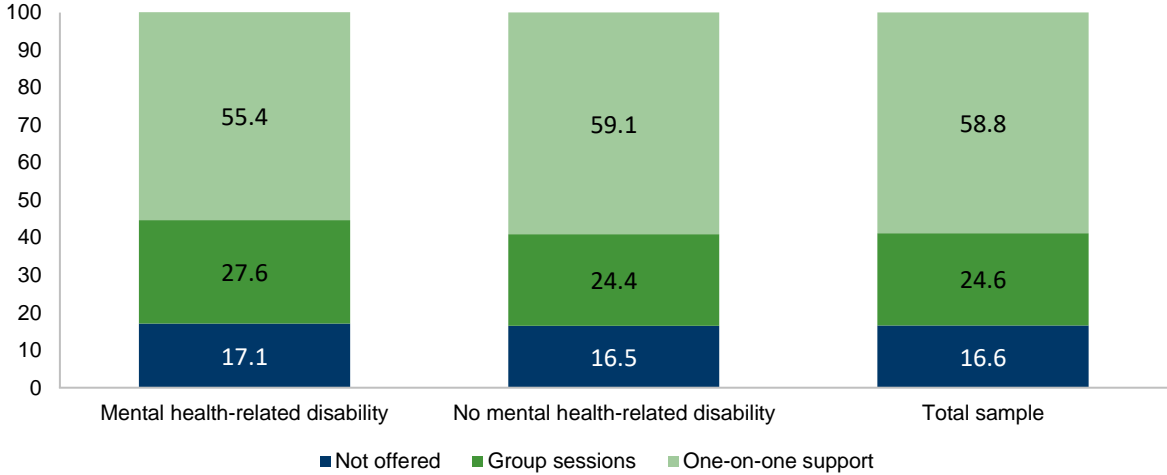


Figure 39 Share of preference by mental health-related disability and level of tutoring and study skills guidance for blended delivery mode, %

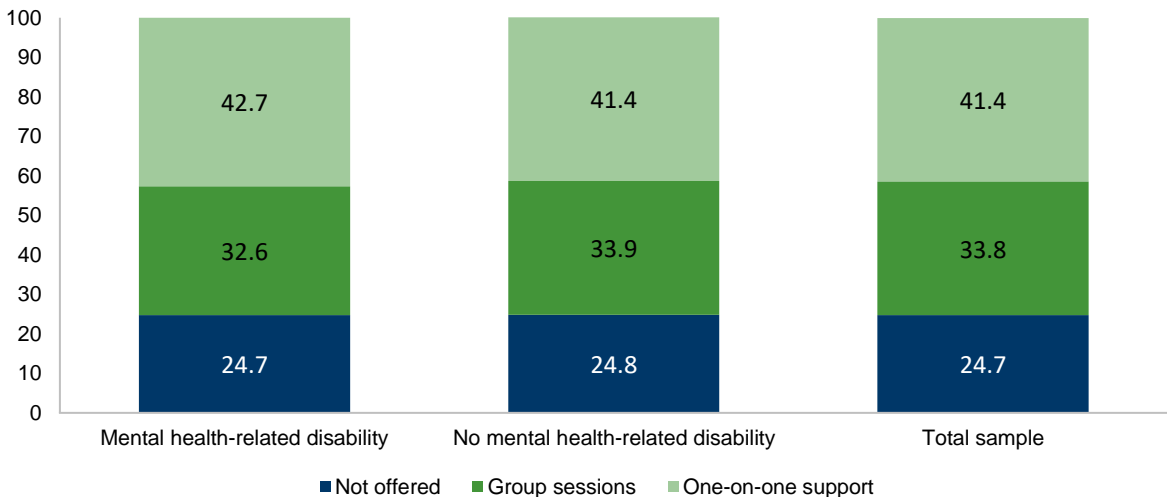
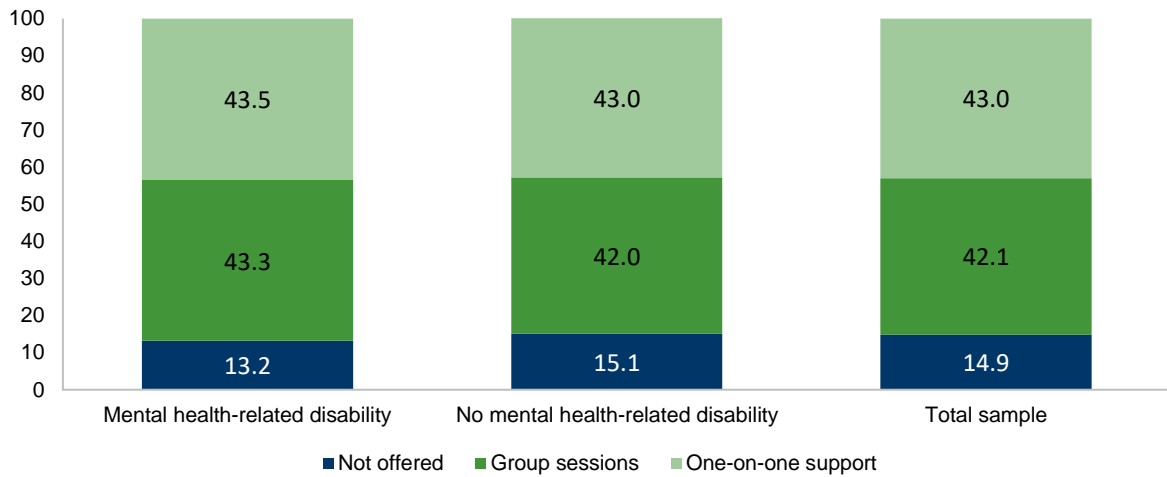
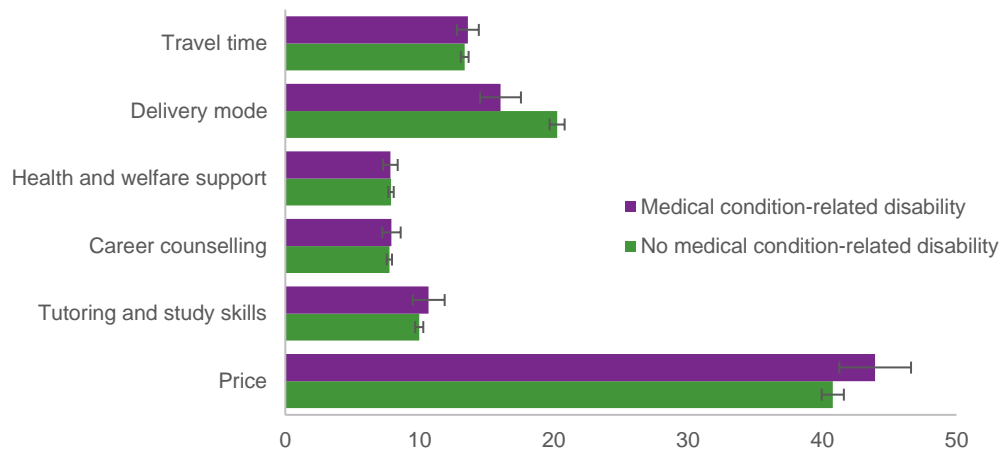


Figure 40 Share of preference by mental health-related disability and level of tutoring and study skills guidance for face-to-face delivery mode, %



Medical condition-related disability

Figure 41 Average importance by medical condition-related disability, %



Note: Disability related to medical condition, n = 54. Although results are presented separately, respondents may have listed having more than one form of disability.

Health and welfare support

Figure 42 Share of preference by medical condition-related disability and level of health & welfare support for online delivery mode, %

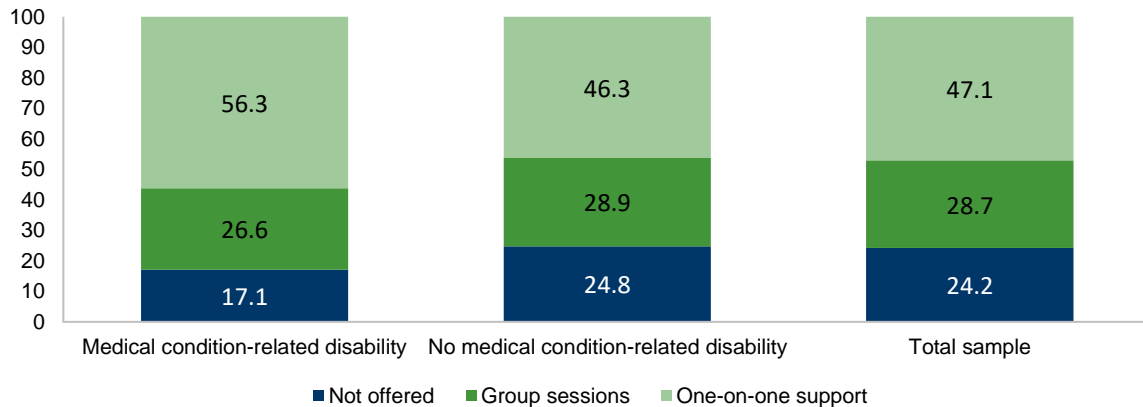


Figure 43 Share of preference by medical condition-related disability and level of health & welfare support for blended delivery mode, %

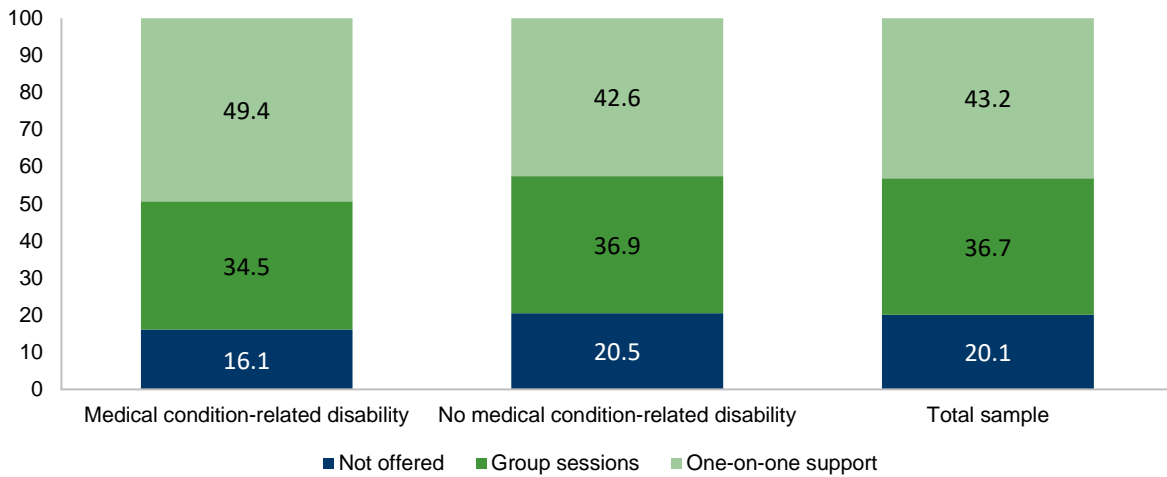
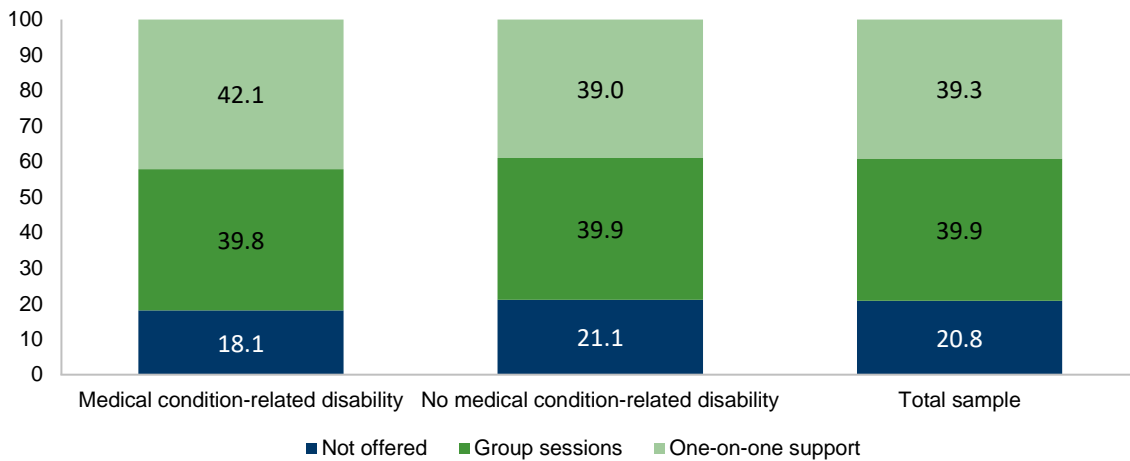


Figure 44 Share of preference by medical condition-related disability and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 45 Share of preference by medical condition-related disability and level of career counselling & job search support for online delivery mode, %

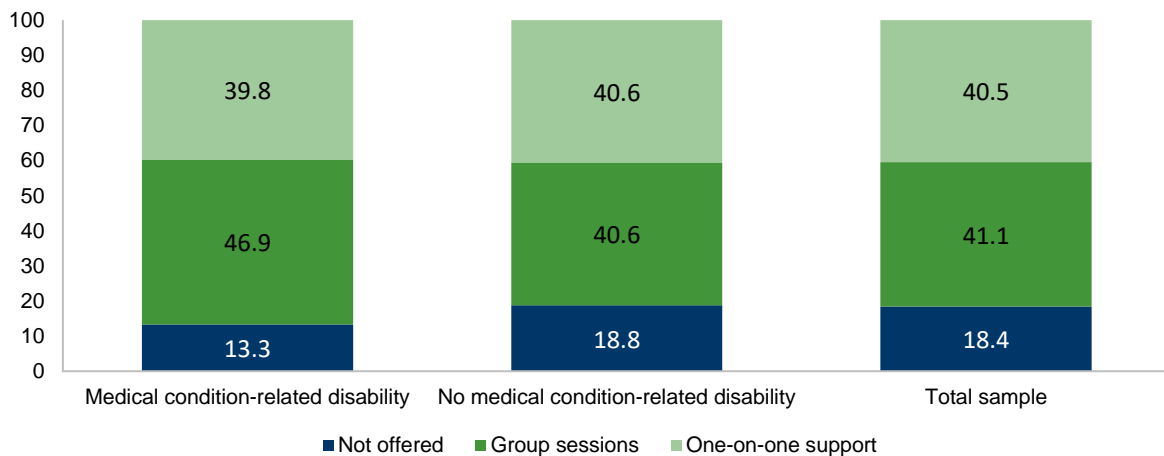


Figure 46 Share of preference by medical condition-related disability and level of career counselling & job search support for blended delivery mode, %

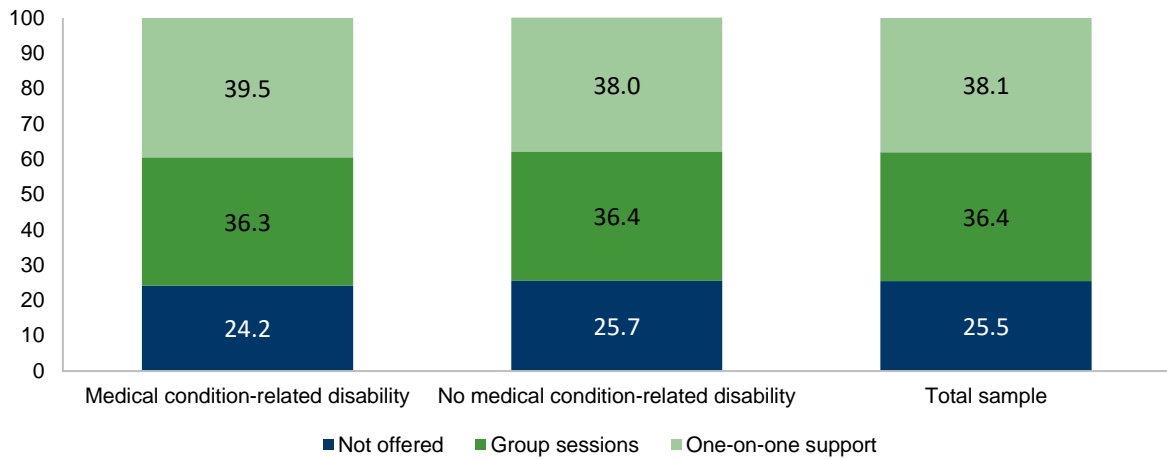
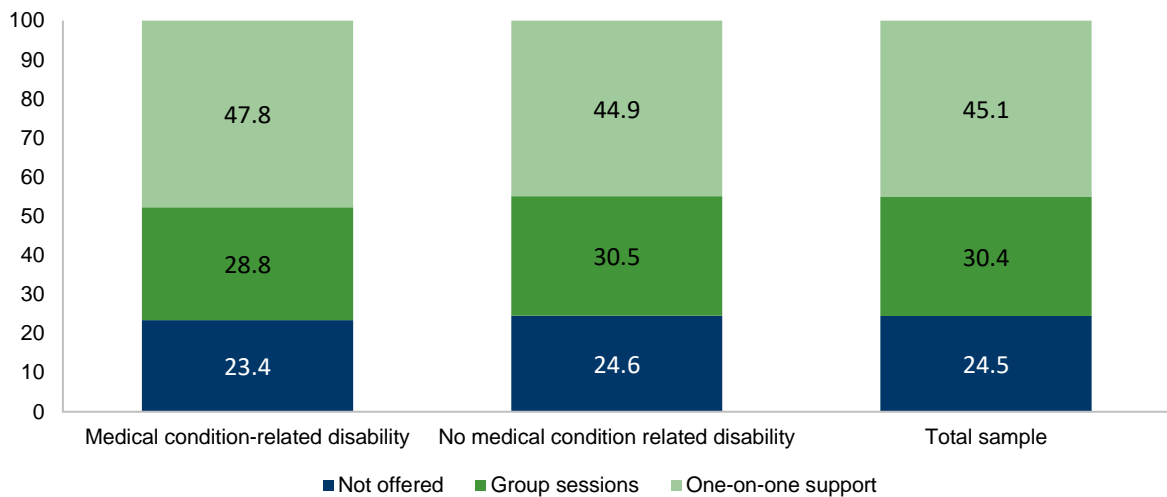


Figure 47 Share of preference by medical condition-related disability and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 48 Share of preference by medical condition-related disability and level of tutoring and study skills guidance for online delivery mode, %

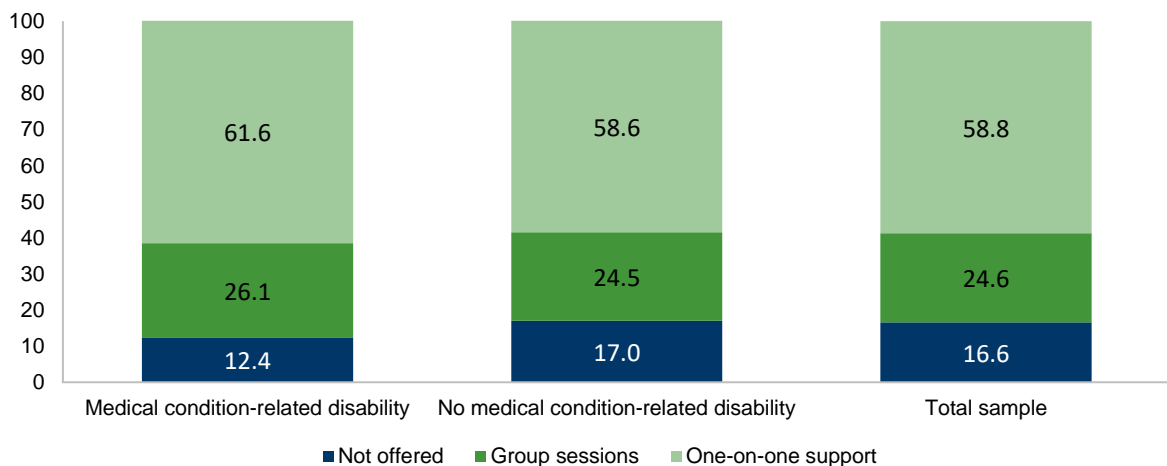


Figure 49 Share of preference by medical condition-related disability and level of tutoring and study skills guidance for blended delivery mode, %

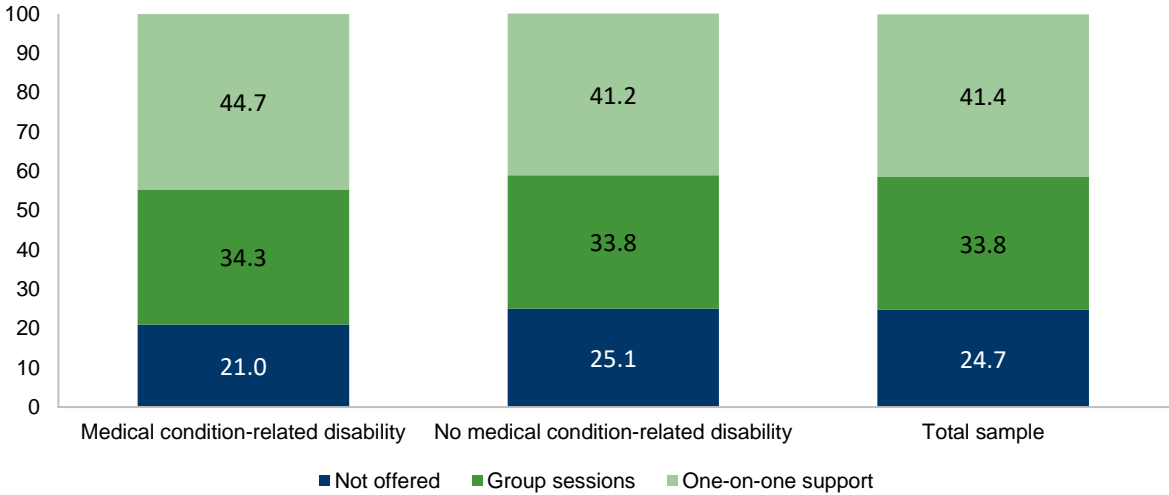
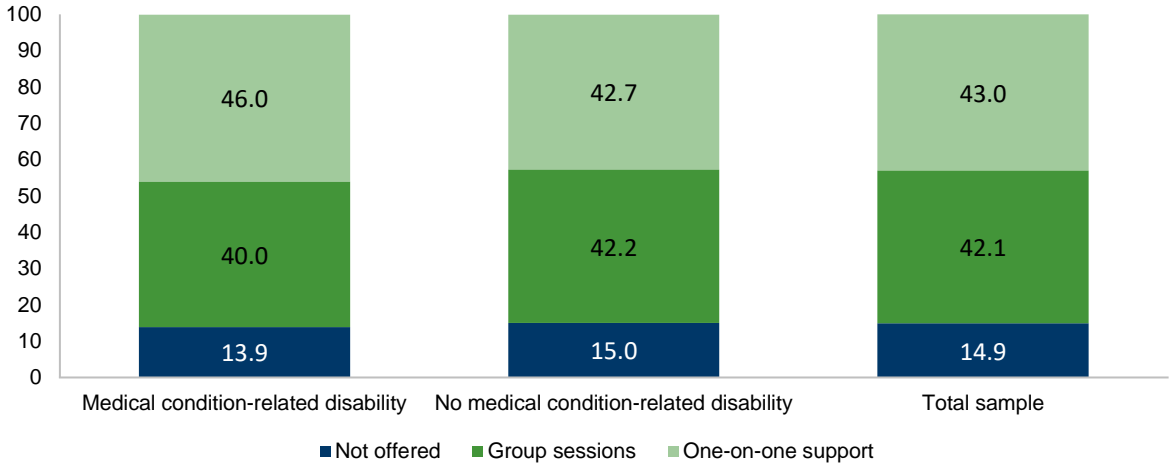


Figure 50 Share of preference by medical condition-related disability and level of tutoring and study skills guidance for face-to-face delivery mode, %



Highest education level

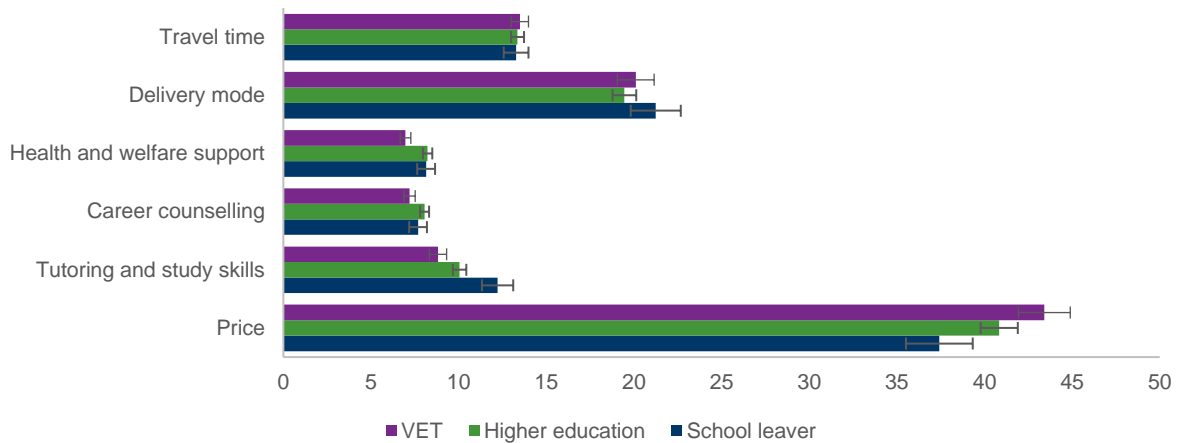
The average importance across all six attributes was overall similar for school leavers, those with a VET qualification and those with a higher education qualification in that price had the highest influence on RTO choice, followed by delivery mode, travel time and the three types of student support. Price was more highly influential on choice for those with a VET qualification compared with school leavers (43.4% compared with 37.4%). Additionally, tutoring and study skills guidance was more important to school leavers than those with a higher education or VET qualification (school leaver 12.2%, higher education 10.1% and VET 8.8%) (see figure 51).

When looking at health and welfare support, those with a higher education qualification are more likely to choose the no support option for all delivery modes. With the blended delivery mode, participants with a VET qualification have a higher preference for group sessions compared with school leavers and those with higher education qualifications.

For career counselling and job search support, the results across the three groups were similar when it came to online learning, although higher education graduates had slightly more preference for no support compared with school leavers and VET graduates. Across the other two delivery modes, school leavers much preferred one-on-one support compared with VET and higher education graduates.

When it came to tutoring and study skills support, the results were very similar across the three groups and the three delivery modes. The main difference was for blended delivery, where school leavers were slightly more likely to prefer one-on-one support compared with those with VET and higher education qualifications (school leavers 45.7%, VET 41.2% and higher education 40.5%) (see figure 59).

Figure 51 Average importance by highest education level, %



Note: School leaver, n = 96; VET, n = 179; Higher education, n = 375.

Health and welfare support

Figure 52 Share of preference by highest education level and level of health & welfare support for online delivery mode, %

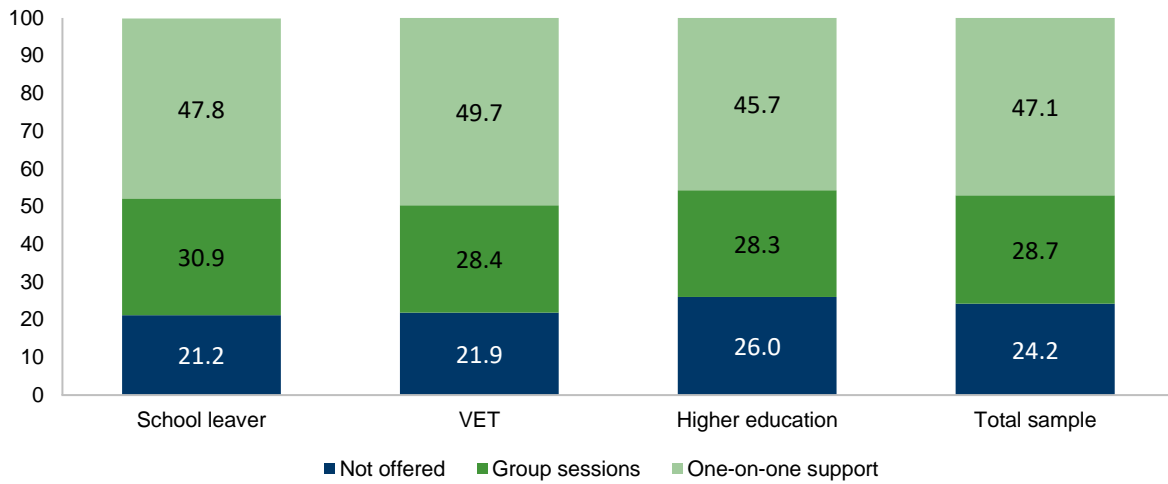


Figure 53 Share of preference by highest education level and level of health & welfare support for blended delivery mode, %

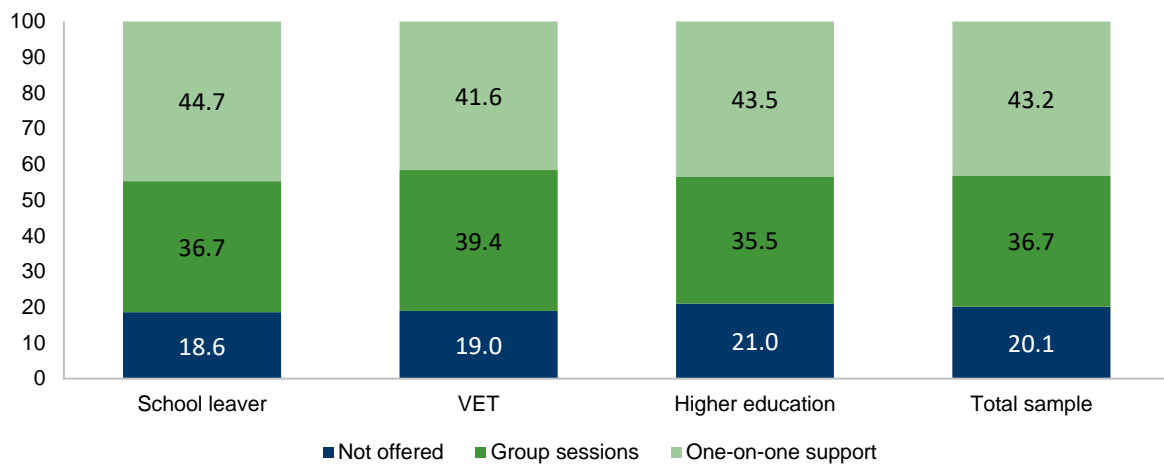
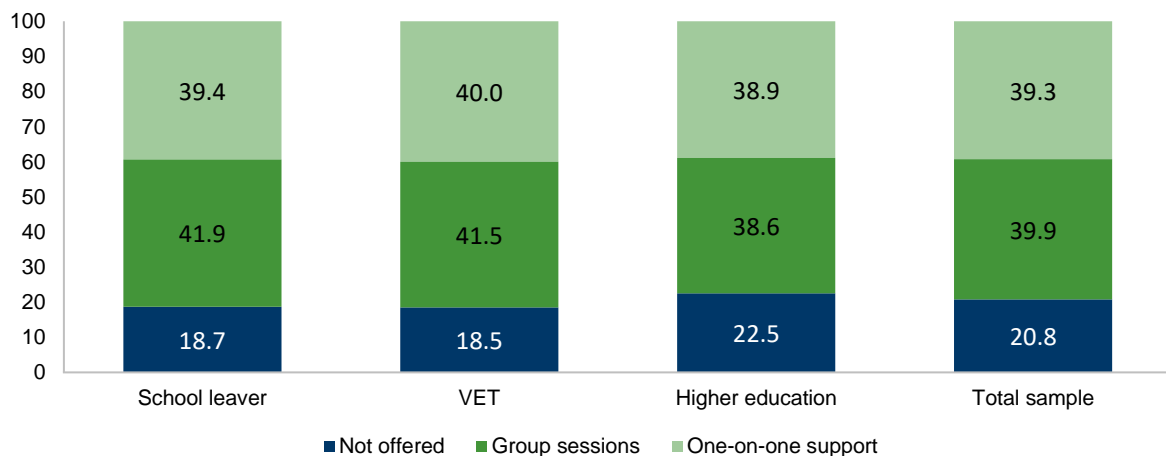


Figure 54 Share of preference by highest education level and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 55 Share of preference by highest education level and level of career counselling & job search support for online delivery mode, %

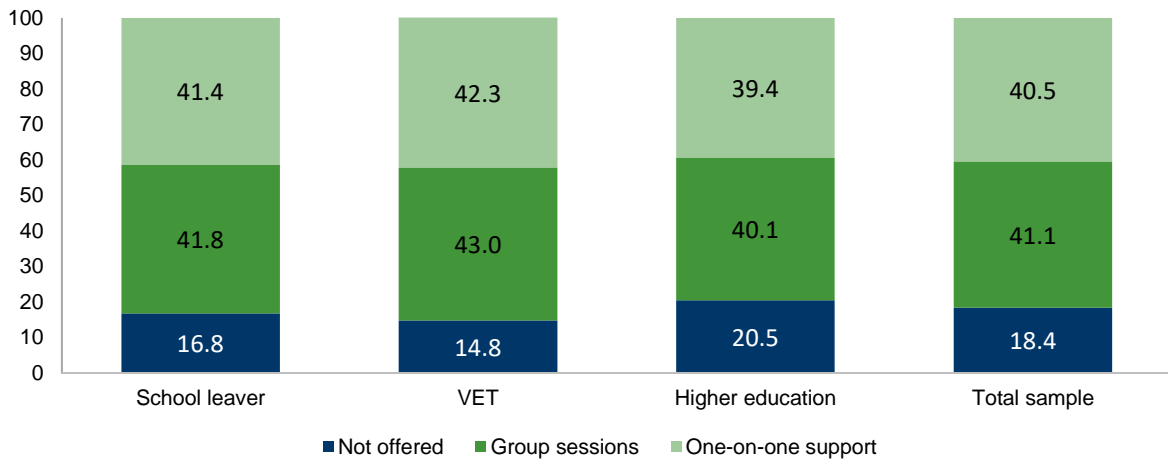


Figure 56 Share of preference by highest education level and level of career counselling & job search support for blended delivery mode, %

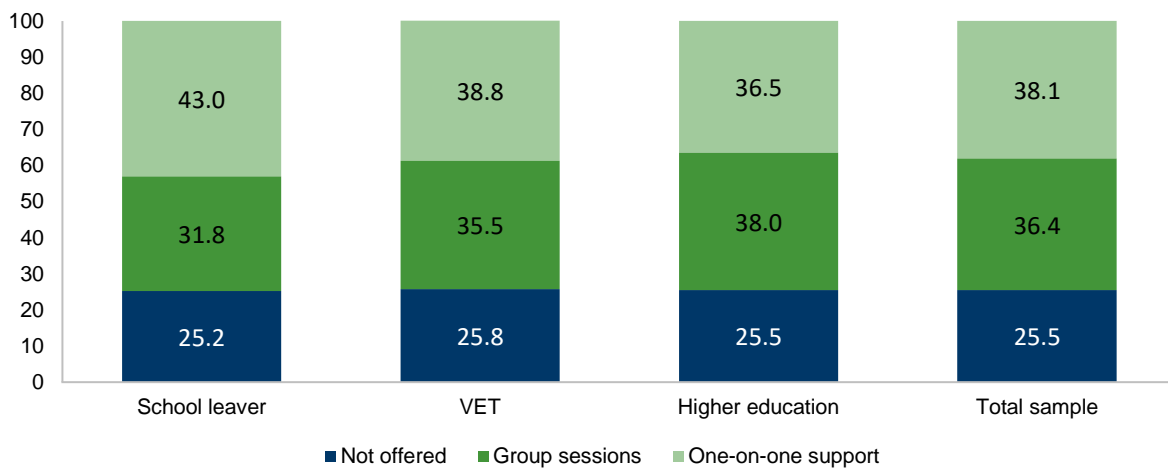
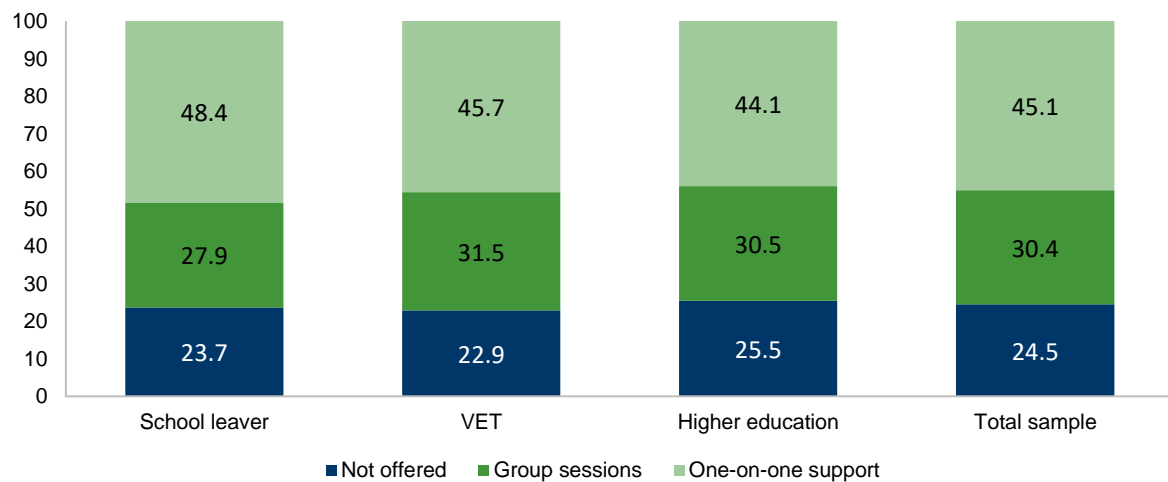


Figure 57 Share of preference by highest education level and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 58 Share of preference by highest education level and level of tutoring and study skills guidance for online delivery mode, %

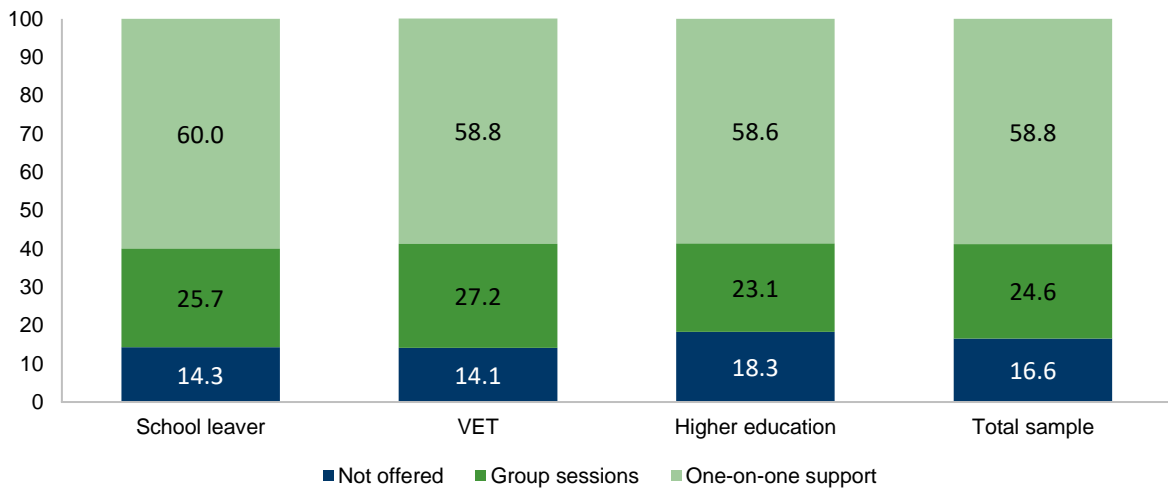


Figure 59 Share of preference by highest education level and level of tutoring and study skills guidance for blended delivery mode, %

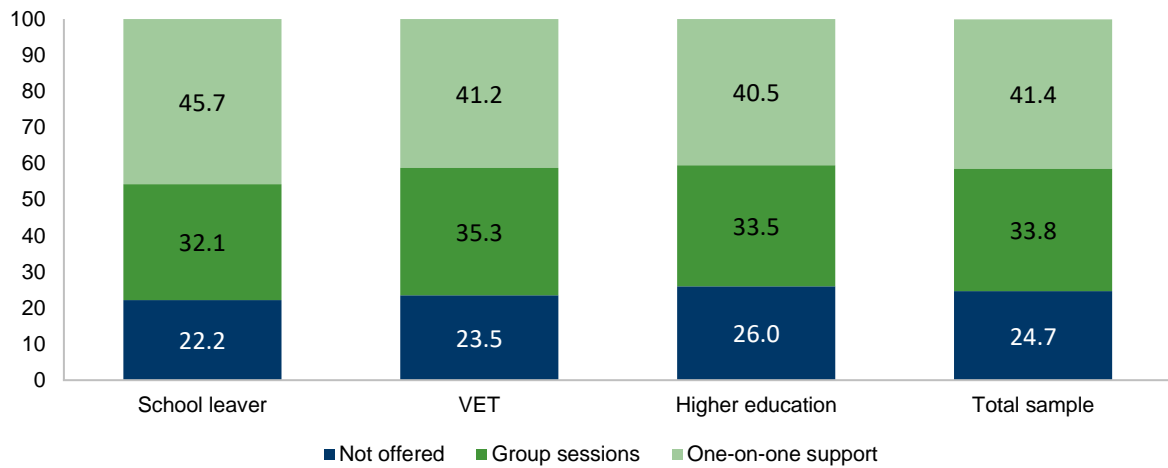
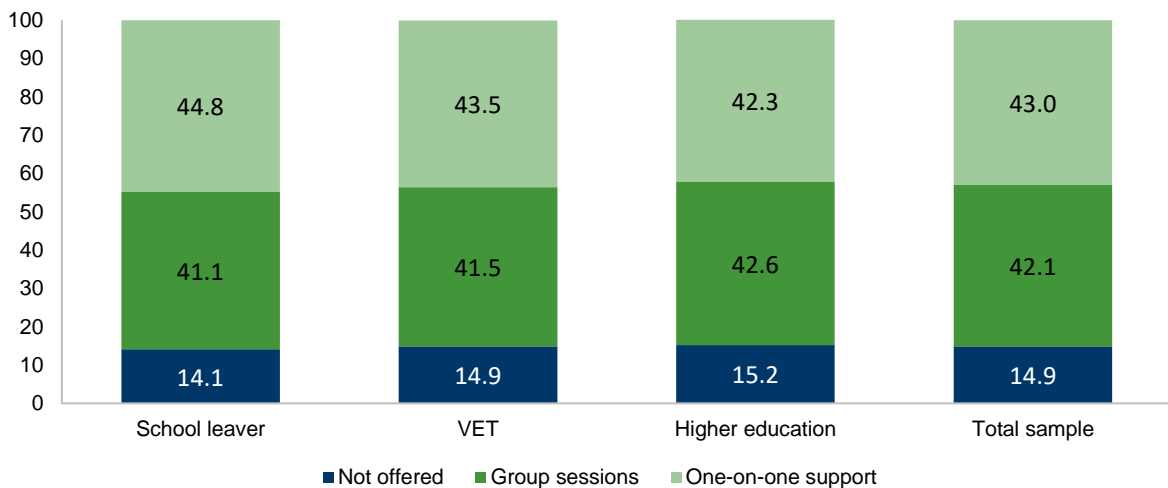


Figure 60 Share of preference by highest education level and level of tutoring and study skills guidance for face-to-face delivery mode, %



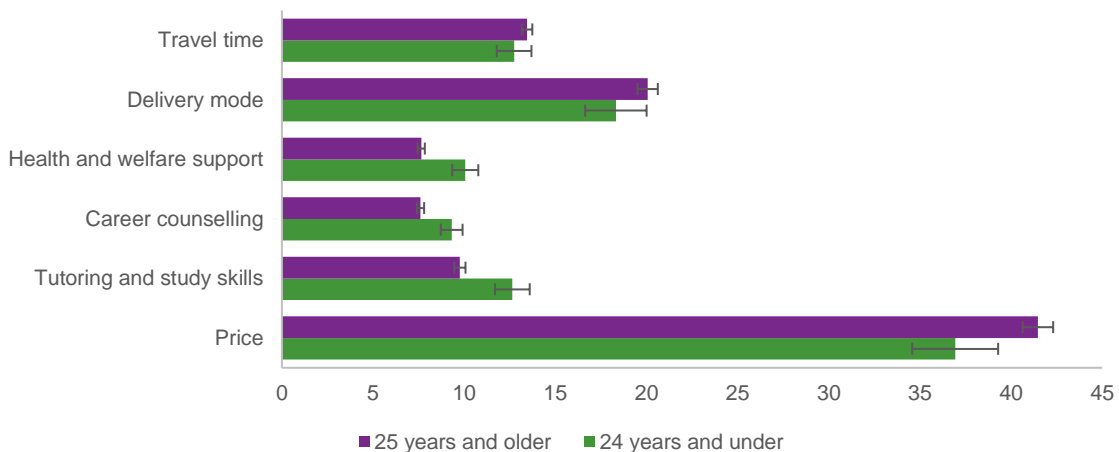
Young people

Young people, defined here as those 24 years and younger, are less influenced by price, delivery mode and travel time than those 25 years and older and exhibit greater importance for the three student supports, particularly tutoring and study skills support.

With health and welfare support, younger people are more likely to have a higher preference for group sessions and slightly less preference for one-on-one support compared with those 25 years and older across all three delivery modes. It is a similar story for career counselling and job search support where, for online and blended delivery modes, young people have a higher preference for group sessions and a slightly lower preference for one-on-one support compared with those 25 years and older. On the other hand, young people have a higher preference for one-on-one career counselling and job search support than those 25 years and older when the course is being delivered face-to-face.

For tutoring and study skills support, the results for online learning are similar. However, for the blended and face-to-face delivery modes, younger people have a higher preference for one-on-one support than those 25 years and older (for blended it is a difference of 3.4 percentage points and for face-to-face delivery it is a difference of 6.3 percentage points) (see figures 69 and 70).

Figure 61 Average importance by age cohort, %



Note: Age ≤ 24, n = 61; Age ≥ 25, n = 589.

Health and welfare support

Figure 62 Share of preference by age cohort and level of health & welfare support for online delivery mode, %

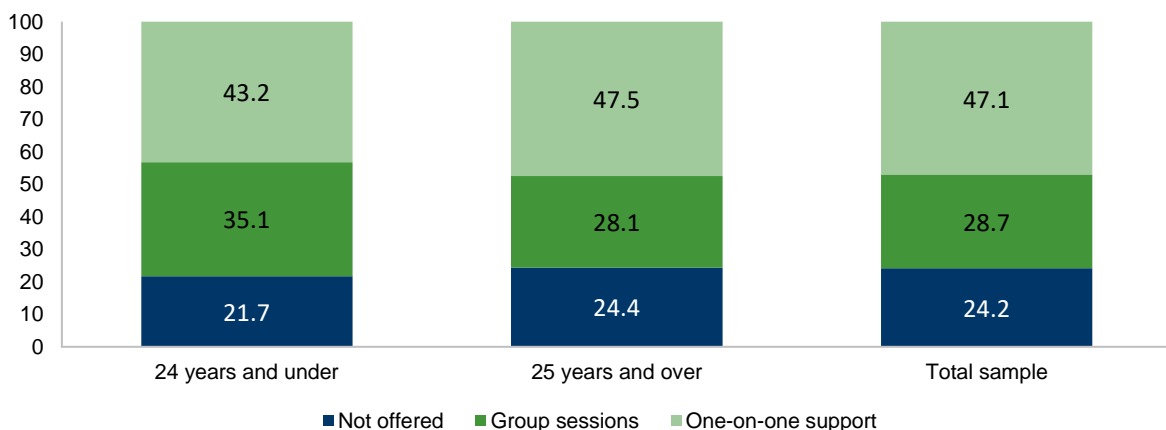


Figure 63 Share of preference by age cohort and level of health & welfare support for blended delivery mode, %

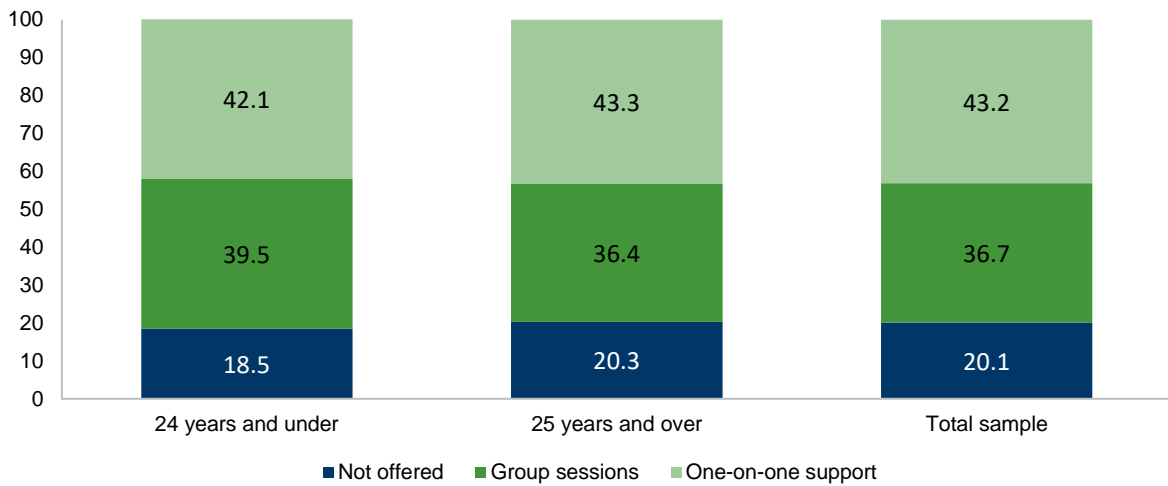
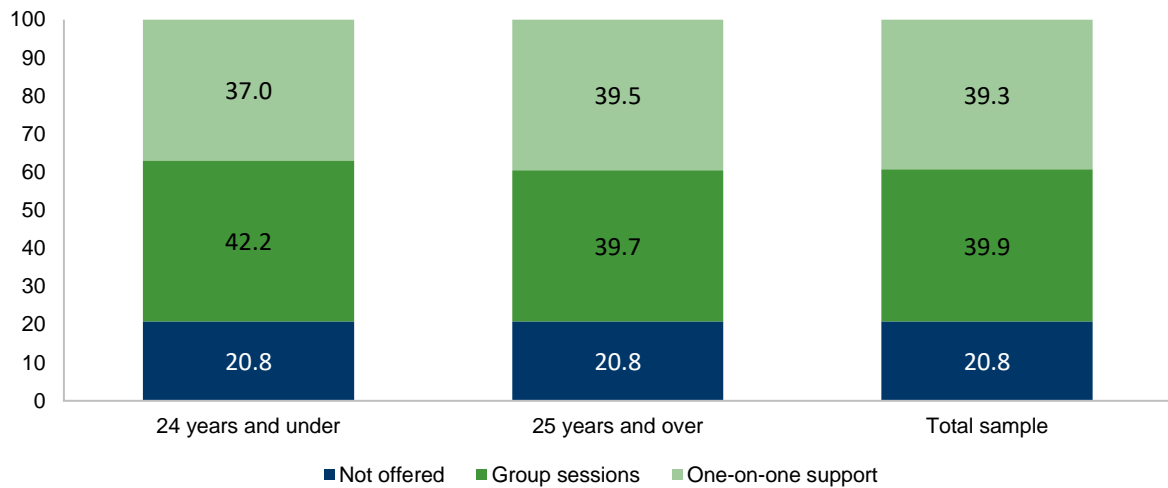


Figure 64 Share of preference by age cohort and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 65 Share of preference by age cohort and level of career counselling & job search support for online delivery mode, %

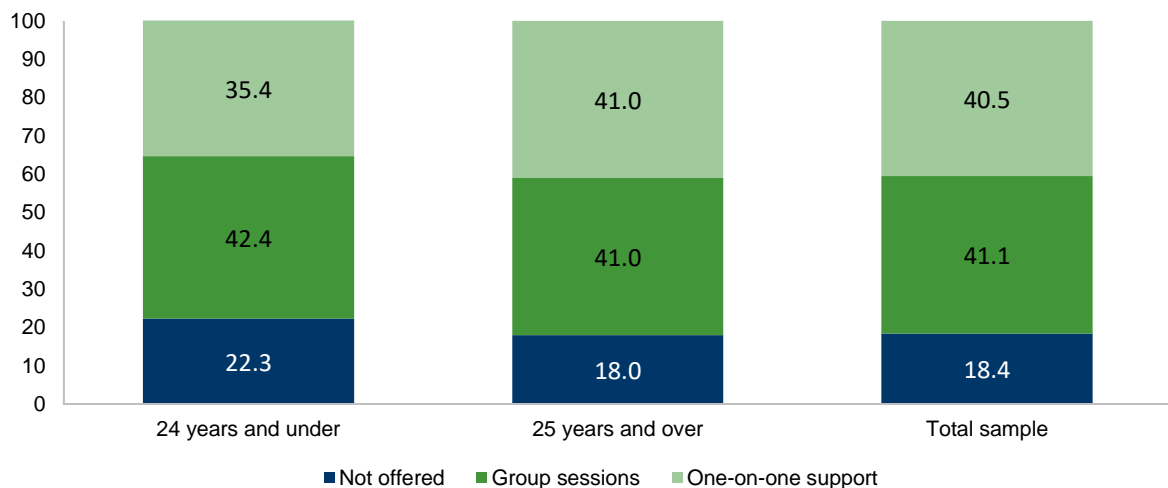


Figure 66 Share of preference by age cohort and level of career counselling & job search support for blended delivery mode, %

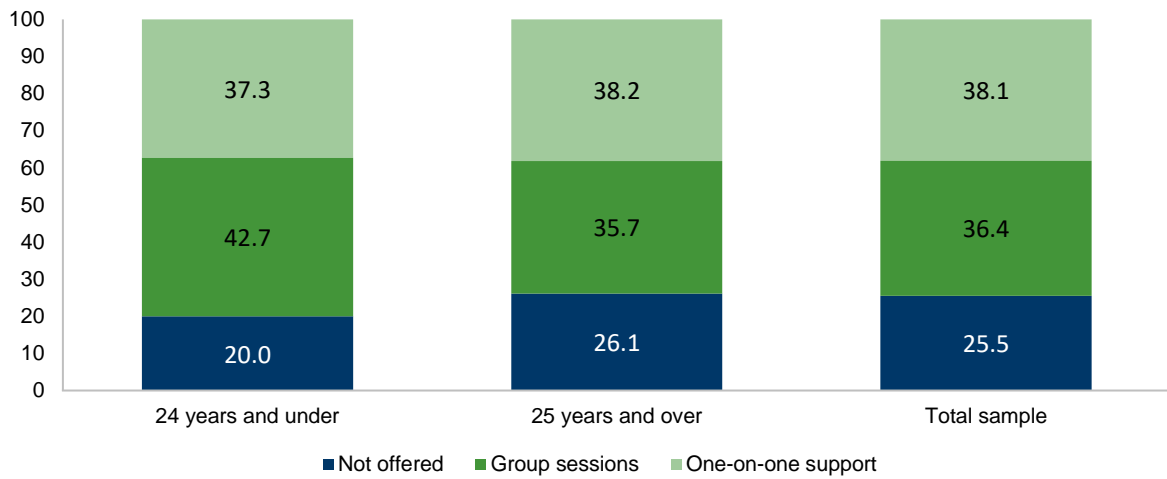
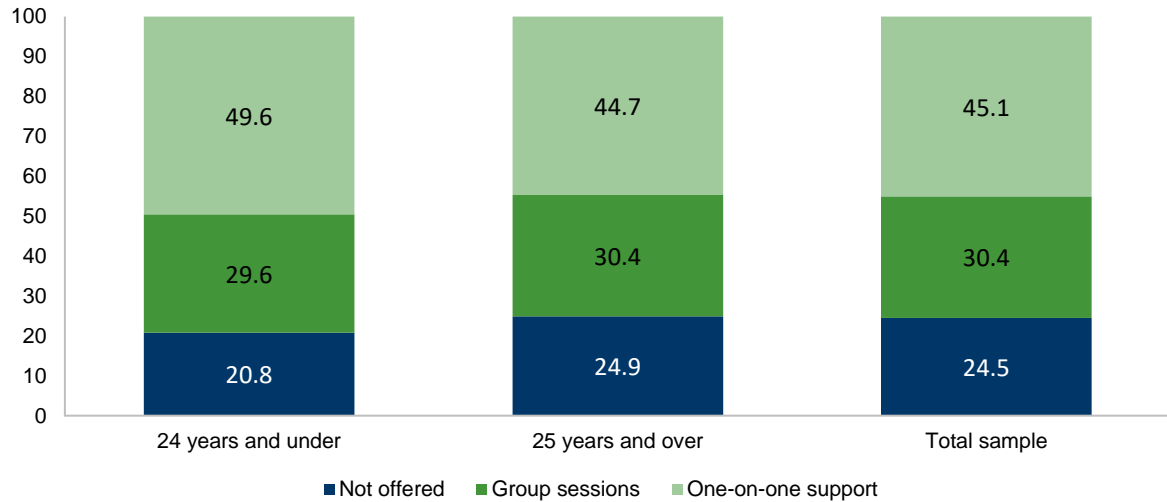


Figure 67 Share of preference by age cohort and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 68 Share of preference by age cohort and level of tutoring and study skills guidance for online delivery mode, %

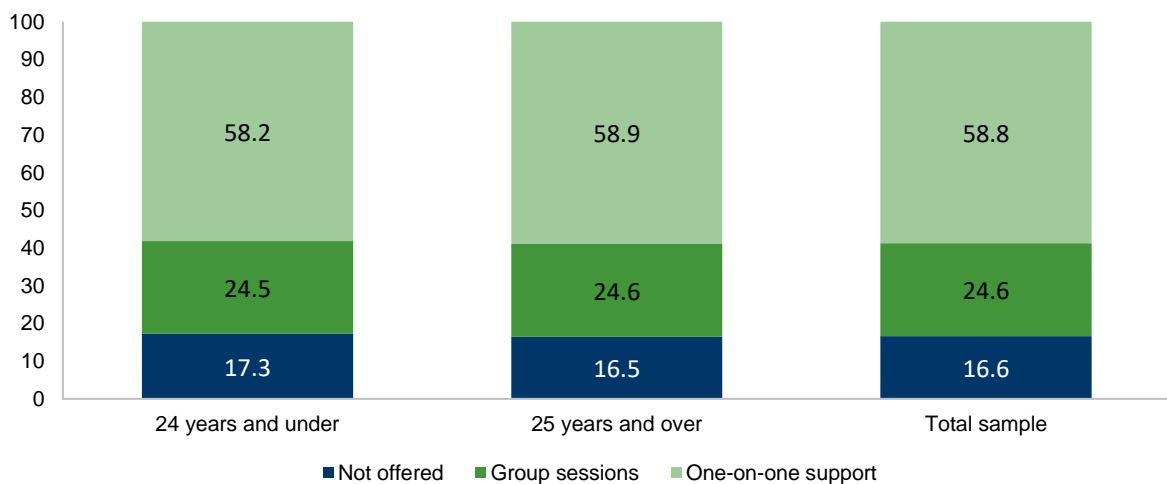


Figure 69 Share of preference by age cohort and level of tutoring and study skills guidance for blended delivery mode, %

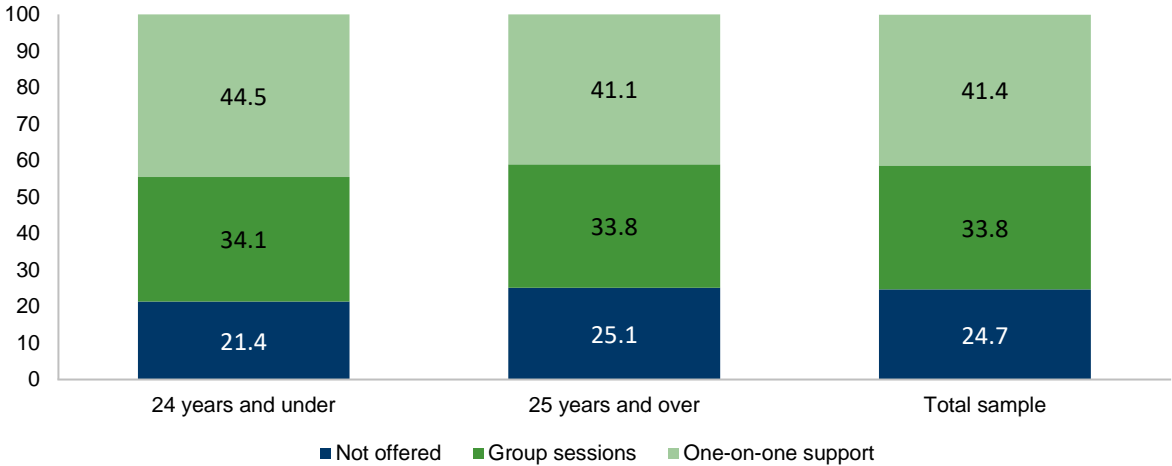
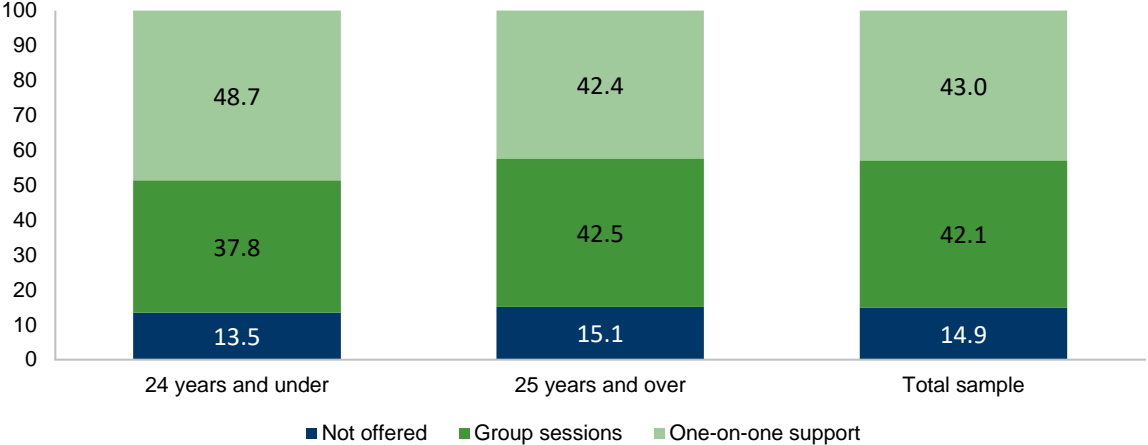


Figure 70 Share of preference by age cohort and level of tutoring and study skills guidance for face-to-face delivery mode, %



Employment status

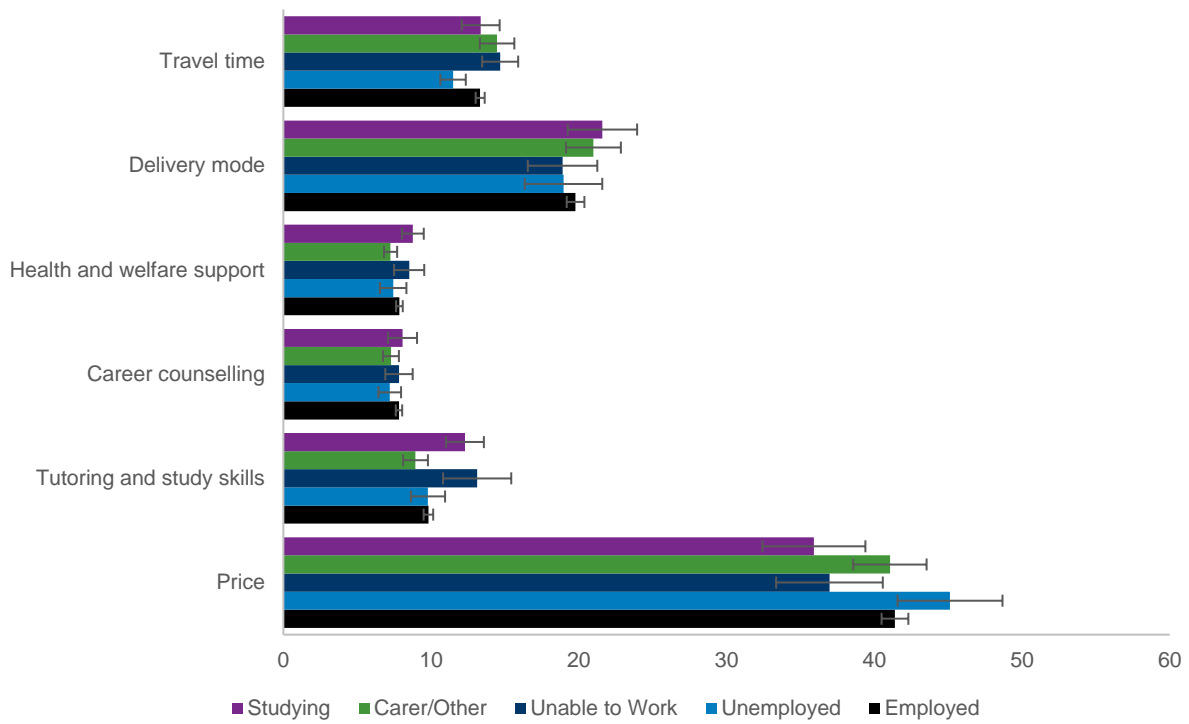
Looking at the average importance across the six attributes included in the discrete choice experiment, price had the most influence on RTO choice, followed by delivery mode and travel time across all employment status groups. This was followed by tutoring and study skills support with the final two support attributes having similar levels of influence. It could be assumed that those who are unemployed may have a greater interest in career counselling and job search support, but this was not the case with this support having the least influence on RTO choice compared with the other employment status groups - employed, studying, unable to work and carer/other (figure 71).

Looking at health and welfare support, there are differences between the three delivery modes. With online delivery, all of the employment status groups prefer one-on-one support, with the unemployed having the greatest preference at 55.0% and employed the lowest at 46.1% (figure 72). With blended delivery, all of the employment status groups prefer one-on-one health and welfare support except for the unemployed who have a higher preference for group sessions. On the other hand, for face-to-face delivery, all of the employment status groups prefer group sessions or have similar preferences for group or one-on-one support except for the unemployed who prefer one-on-one support over group sessions.

With career counselling and job search support and online delivery mode, most of the employment status groups prefer group sessions or have a similar preference for group and one-on-one support except for the unemployed who had a higher preference for one-on-one support over group sessions. With blended delivery, most employment status groups had a similar preference for group and one-on-one support besides those studying and the unemployed who both had a noticeably higher preference for one-on-one support. With face-to-face delivery and career counselling and job search support, all employment status groups had a higher preference for one-on-one support over group sessions, with those studying having the highest preference at 51.9% and the employed the lowest at 44.2% (figure 77). On another note, those that are unable to work had similar preferences for no support (27.6%) and group sessions (26.1%).

For tutoring and study skills guidance, all employment status groups had at least a slight preference, but mostly a much higher preference, for one-on-one support over group sessions across all three delivery modes. The only exception was for employed participants with the face-to-face delivery mode where group sessions and one-on-one support were similarly preferred (42.4% for group sessions compared with 42.3% for one-on-one support) (figure 80).

Figure 71 Average importance by employment status, %



Note: Employed, n = 500; Unemployed, n = 32; Unable to Work, n = 29; Carer/Other, n = 52; Studying, n = 37

Health and welfare support

Figure 72 Share of preference by employment status and level of health & welfare support for online delivery mode, %

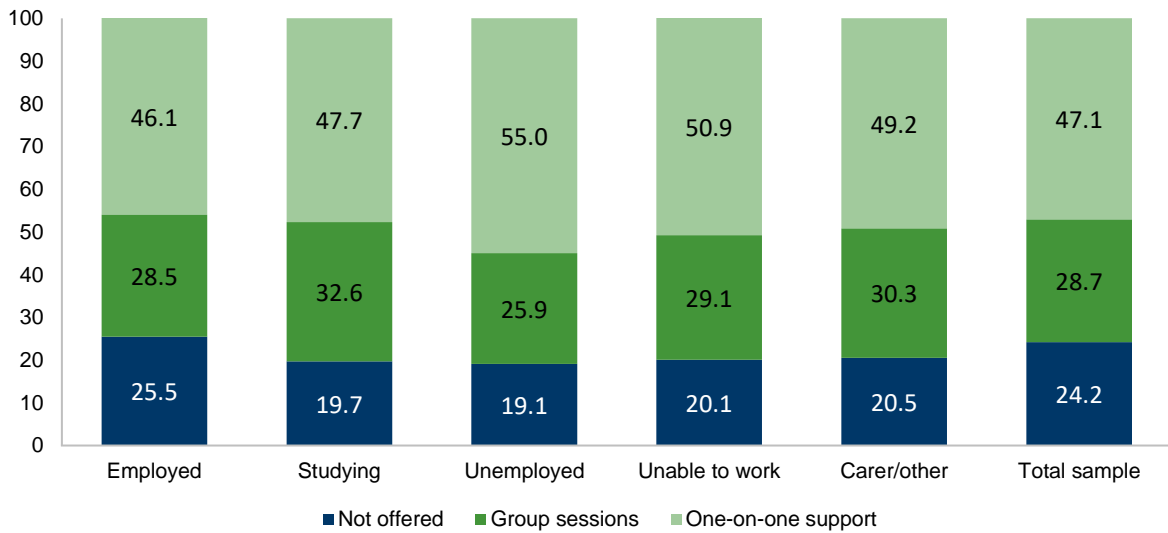


Figure 73 Share of preference by employment status and level of health & welfare support for blended delivery mode, %

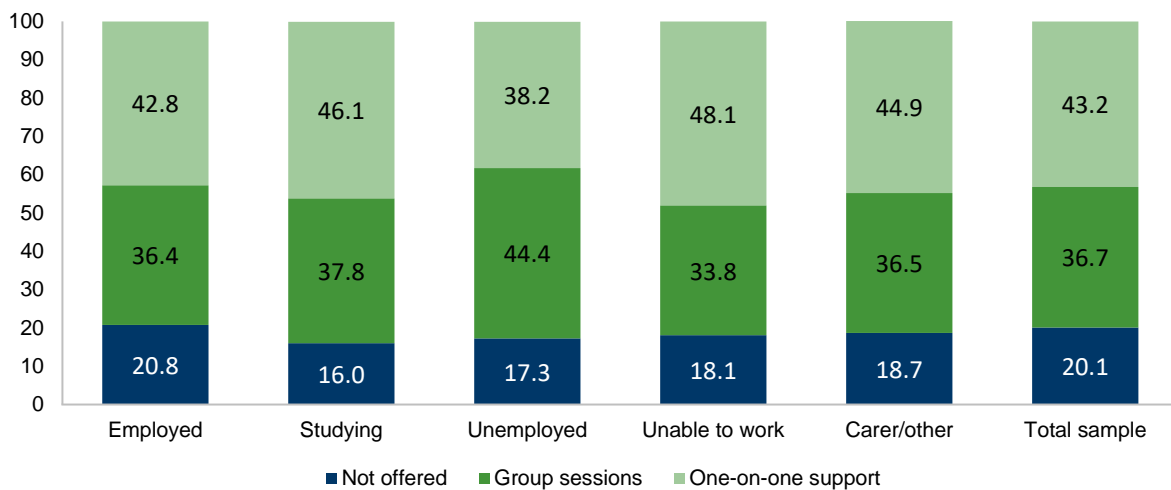
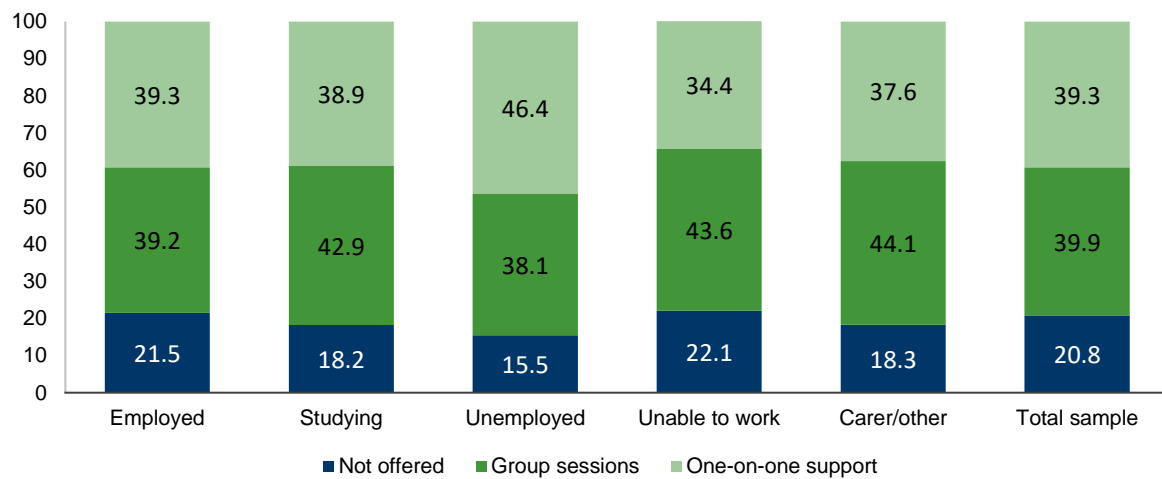


Figure 74 Share of preference by employment status and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 75 Share of preference by employment status and level of career counselling & job search support for online delivery mode, %

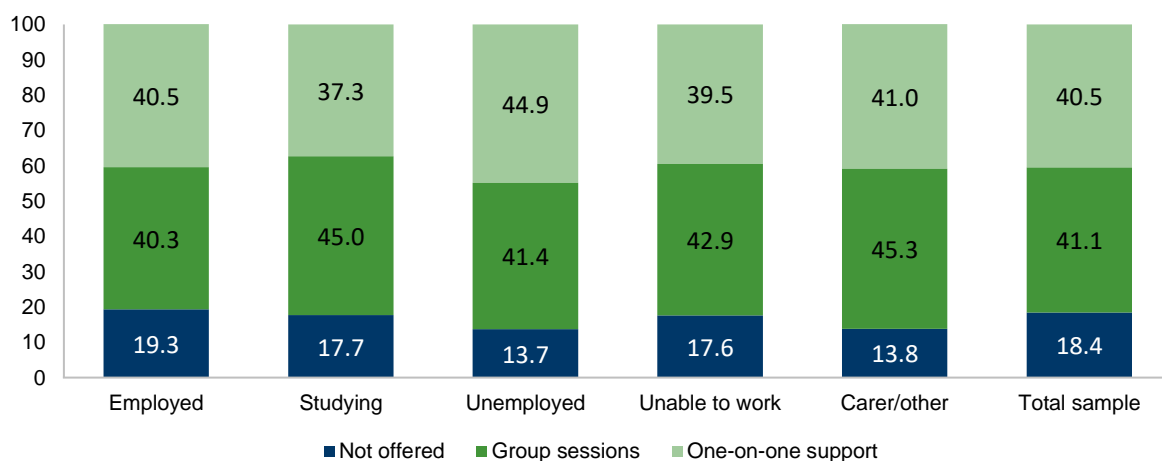


Figure 76 Share of preference by employment status and level of career counselling & job search support for blended delivery mode, %

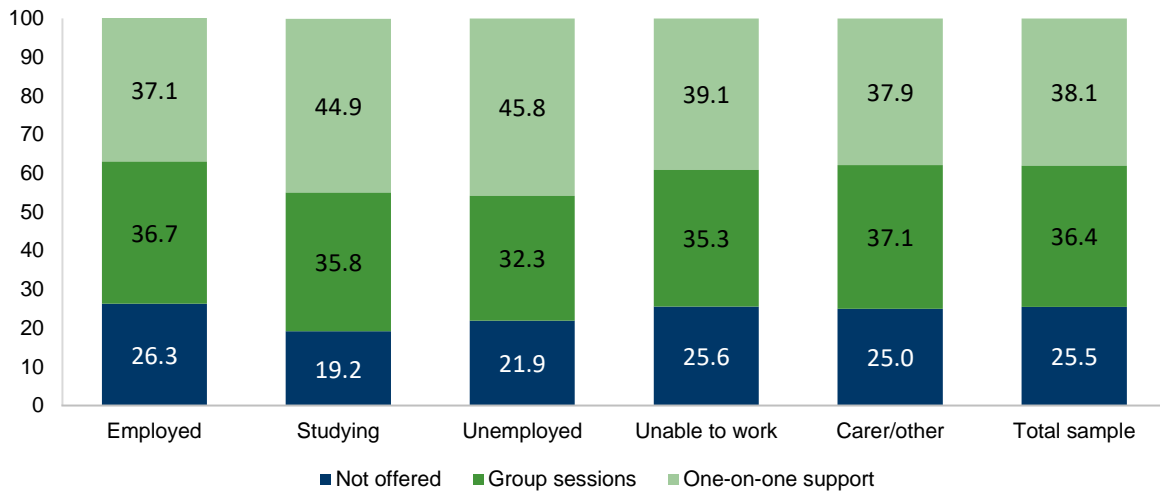
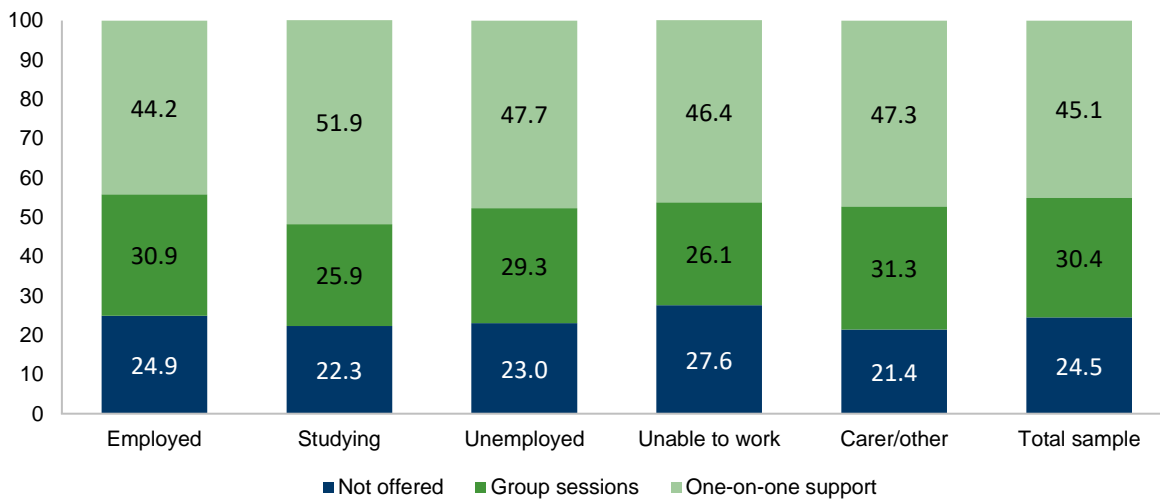


Figure 77 Share of preference by employment status and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 78 Share of preference by employment status and level of tutoring and study skills guidance for online delivery mode, %

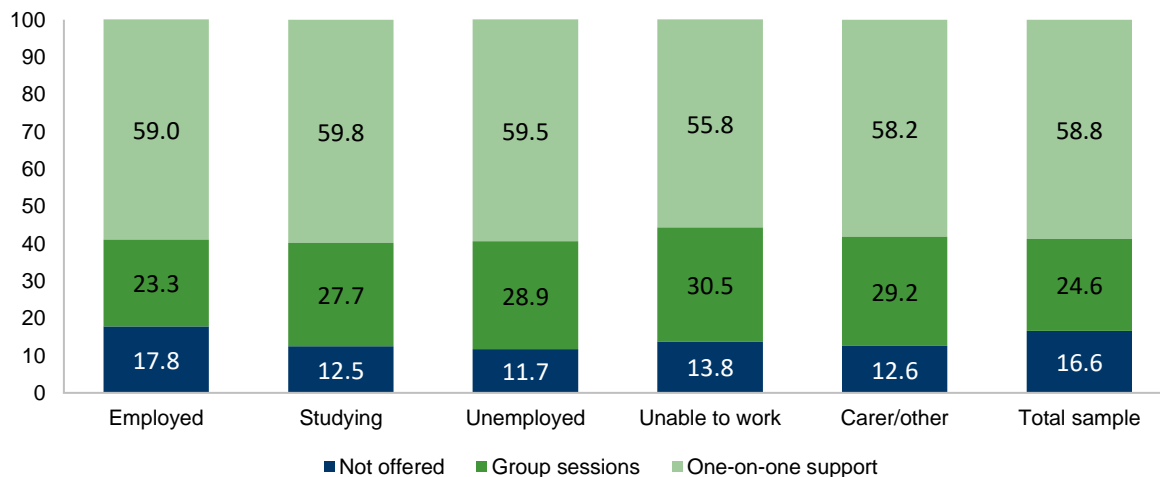


Figure 79 Share of preference by employment status and level of tutoring and study skills guidance for blended delivery mode, %

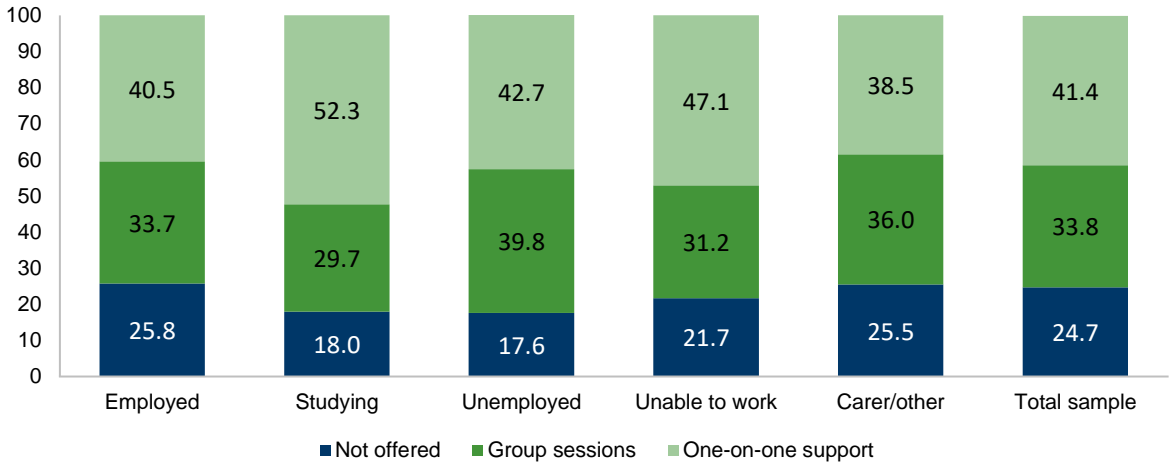
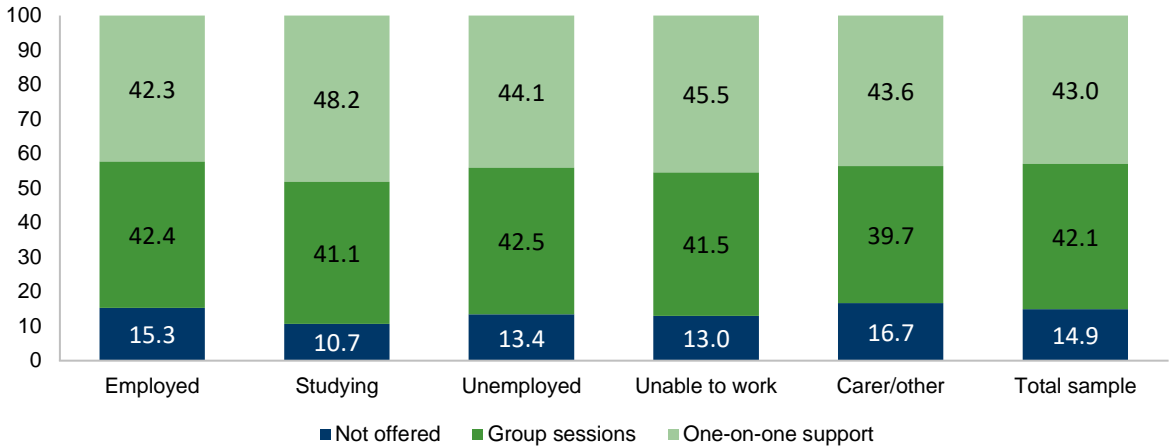


Figure 80 Share of preference by employment status and level of tutoring and study skills guidance for face-to-face delivery mode, %



Language spoken at home

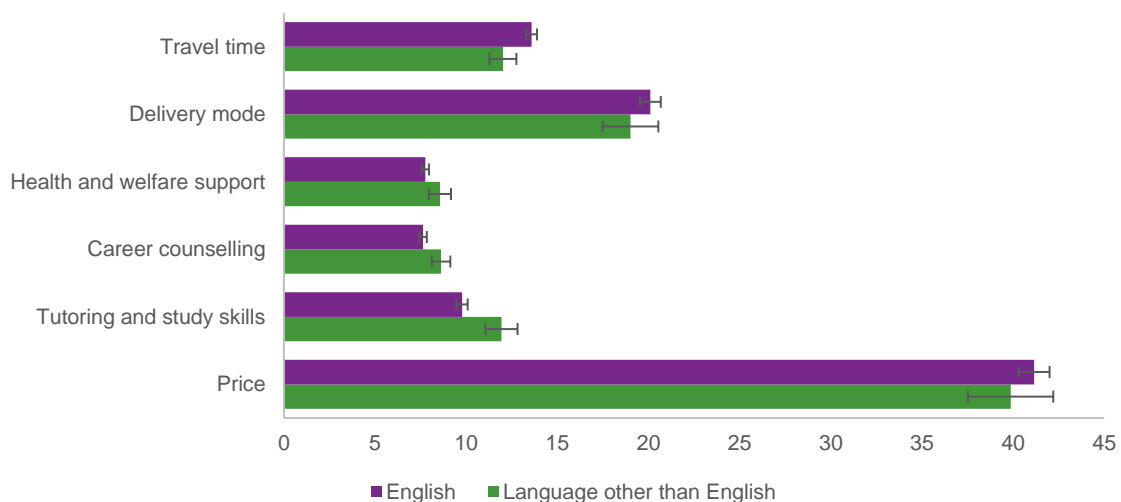
For those who speak a language other than English at home, the average importance of each of the six attributes follows the same order as all the other groups examined, with price the most important and the three support attributes the least important. Although, they have a slightly higher preference for the three supports than those from an English-speaking background.

When it came to health and welfare support, those who speak a language other than English at home are less likely to choose the no support option. With online learning, they prefer one-on-one support to group sessions, the same as their English-speaking counterparts. Looking at blended delivery, those who speak a language other than English at home prefer group sessions to one-on-one support whereas those from an English-speaking background prefer one-on-one support to group sessions. With face-to-face delivery, both groups prefer group sessions to one-on-one support but the difference was more pronounced for those who speak a language other than English at home.

Looking at career counselling and job search support, with the online delivery mode both groups prefer group sessions to one-on-one support, but the difference is greater for those from a non-English speaking background. On the other hand, with the blended and face-to-face delivery modes, both groups prefer one-on-one support to group sessions but the difference is more pronounced for those who speak a language other than English at home.

For tutoring and study skills guidance support, those who speak a language other than English at home are less likely to choose the no support option and have a higher preference for one-on-one support over group sessions across all three delivery modes. The blended delivery mode was where there was the biggest difference between those from a non-English speaking background and those from an English-speaking background - the preference for one-on-one support was 11.5 percentage points higher for those from a non-English speaking background (see figure 89).

Figure 81 Average importance by language spoken at home, %



Note: English, n = 557; Language other than English, n = 84; No answer provided; Prefer not to say, n = 9 (not shown).

Health and welfare support

Figure 82 Share of preference by language spoken at home and level of health & welfare support for online delivery mode, %

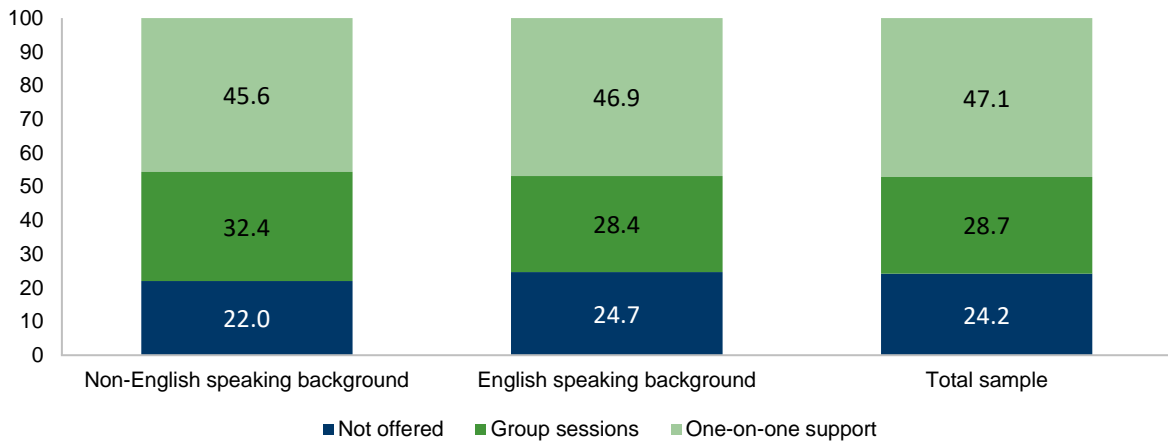


Figure 83 Share of preference by language spoken at home and level of health & welfare support for blended delivery mode, %

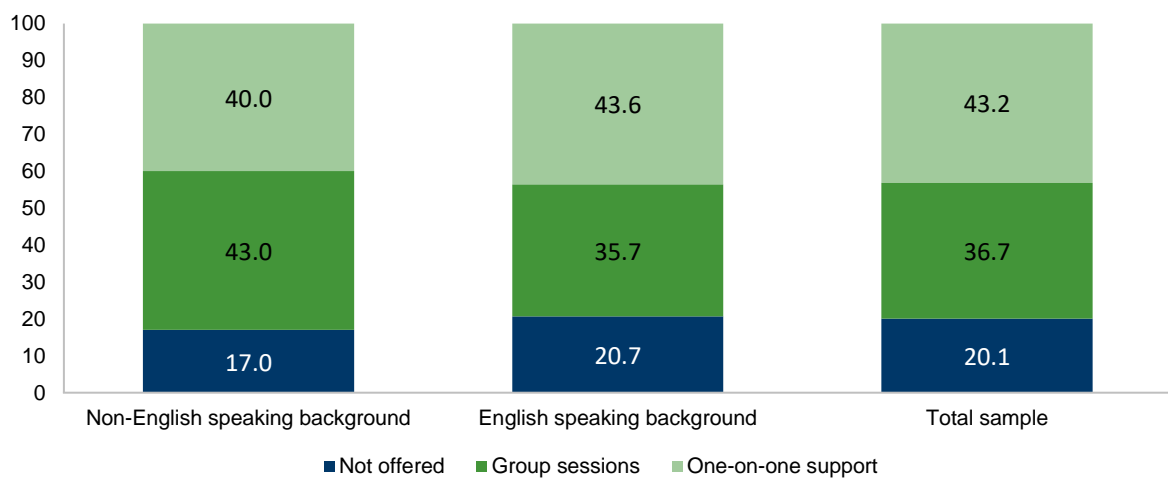
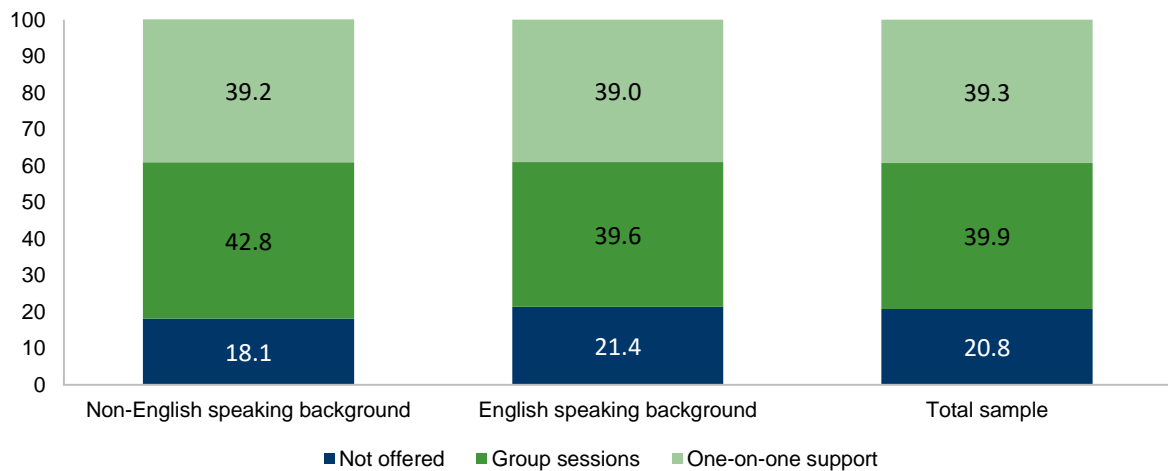


Figure 84 Share of preference by language spoken at home and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 85 Share of preference by language spoken at home and level of career counselling & job search support for online delivery mode, %

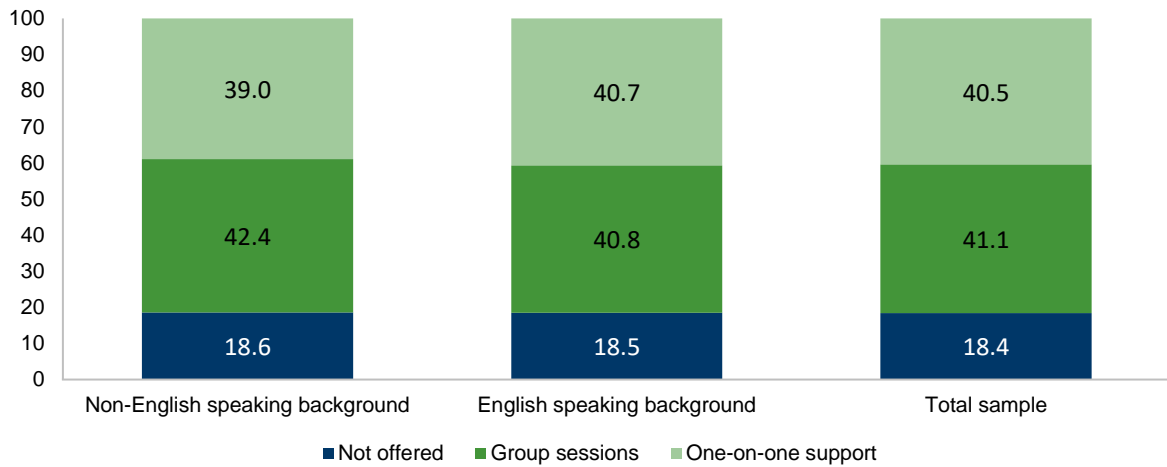


Figure 86 Share of preference by language spoken at home and level of career counselling & job search support for blended delivery mode, %

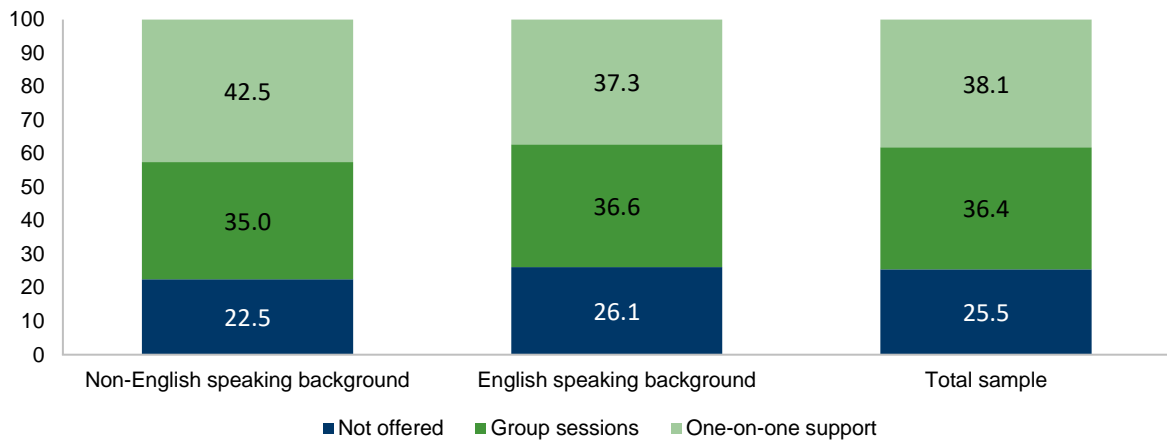
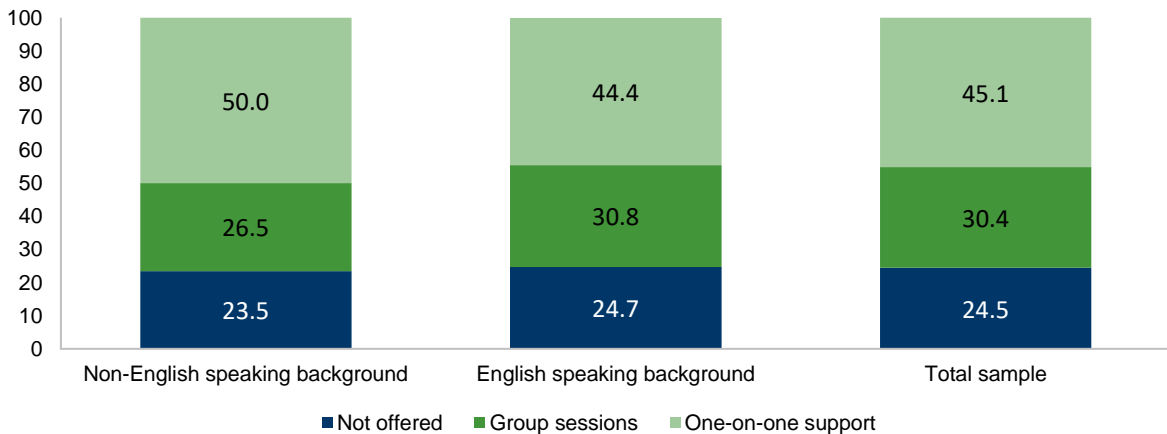


Figure 87 Share of preference by language spoken at home and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 88 Share of preference by language spoken at home and level of tutoring and study skills guidance for online delivery mode, %

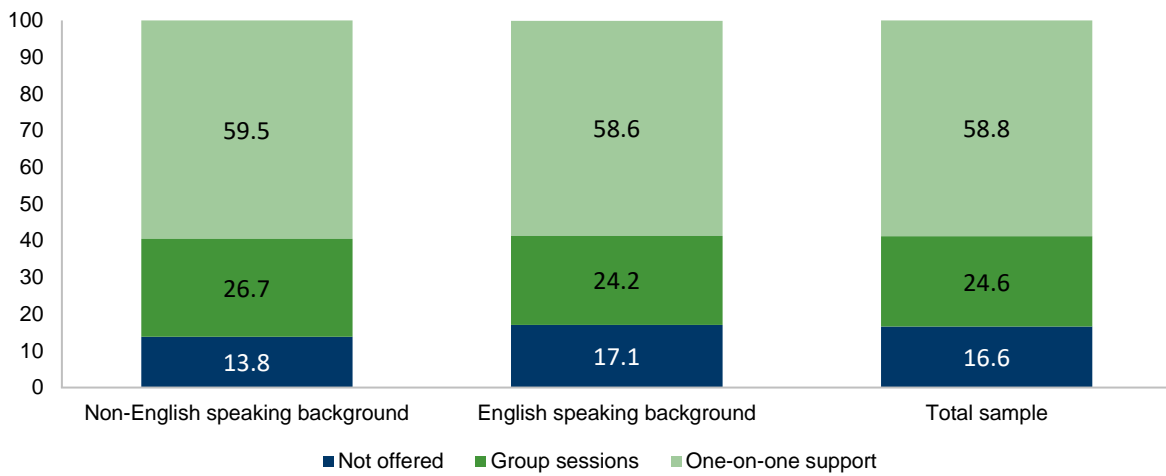


Figure 89 Share of preference by language spoken at home and level of tutoring and study skills guidance for blended delivery mode, %

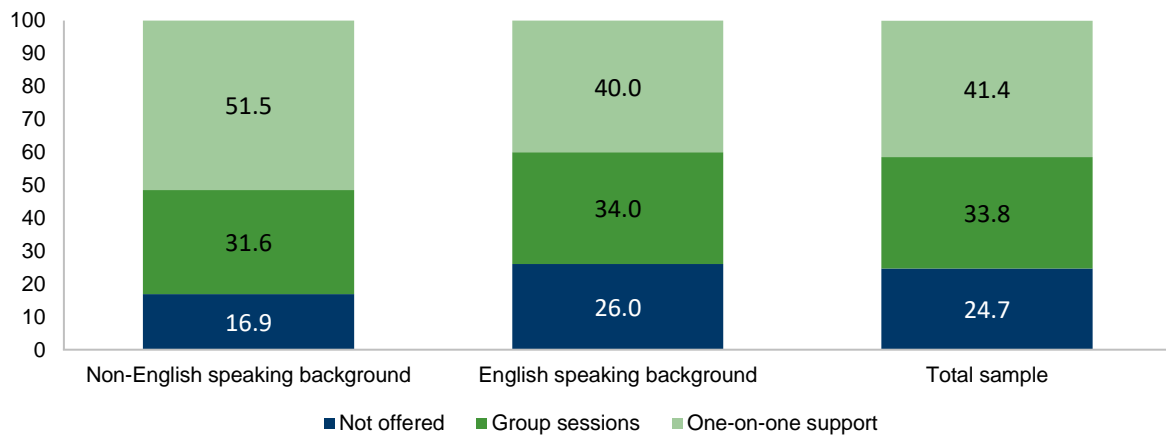
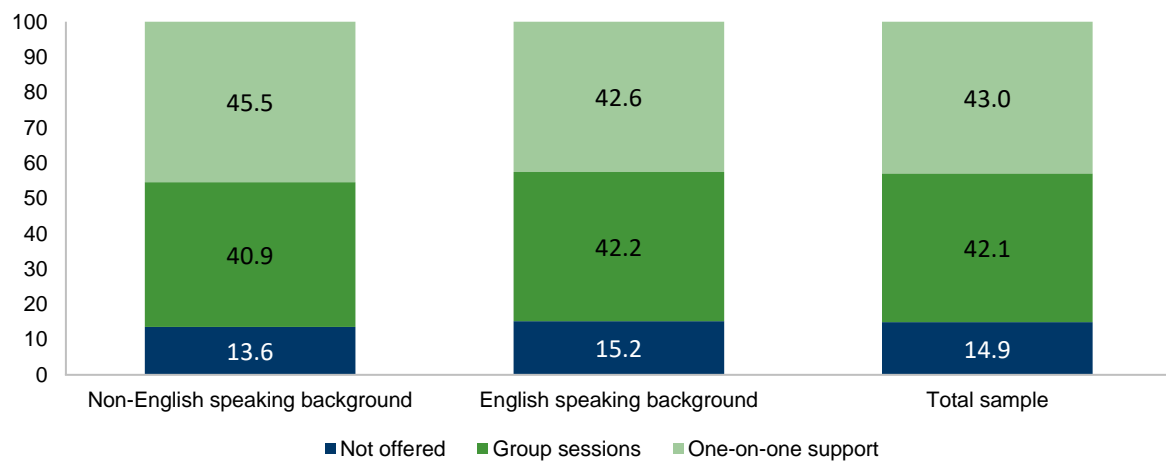


Figure 90 Share of preference by language spoken at home and level of tutoring and study skills guidance for face-to-face delivery mode, %



First Nations status

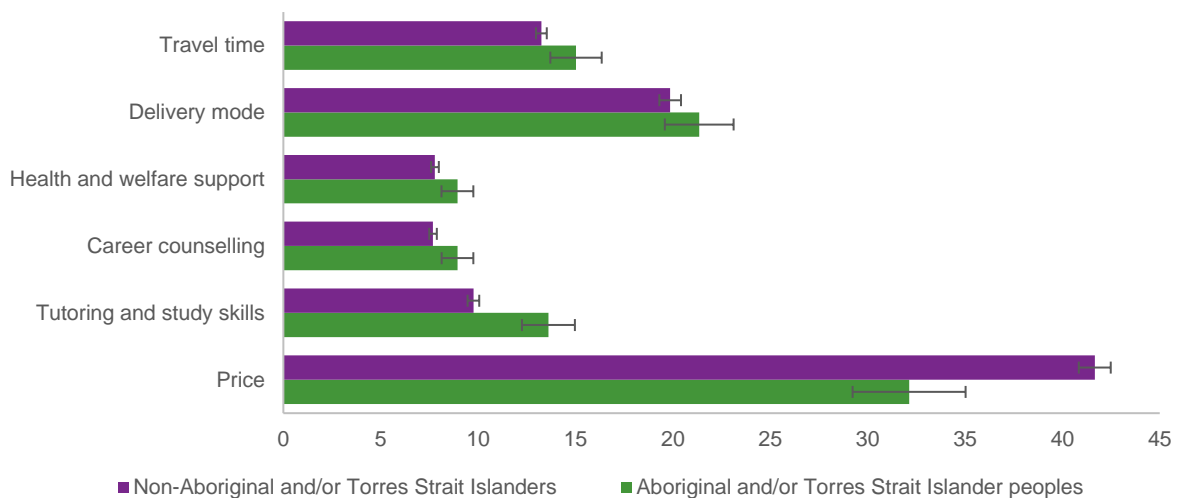
Like the other demographic groups explored, price is the most important attribute impacting RTO choice followed by delivery mode, travel time and then the three student supports for Aboriginal and/or Torres Strait Islander peoples. However, price has a lower average importance for Aboriginal and/or Torres Strait Islander peoples compared with non-Aboriginal and/or Torres Strait Islander peoples (32.1% compared with 41.7%). Additionally, Aboriginal and/or Torres Strait Islander peoples show a higher average level of importance for the remaining five attributes compared with non-Aboriginal and/or Torres Strait Islander peoples.

When looking at health and welfare supports, Aboriginal and/or Torres Strait Islander peoples more highly favour group sessions over one-on-one support for both the online and face-to-face delivery modes. This is the opposite to non-Aboriginal and/or Torres Strait Islander participants who favour one-on-one support for online delivery and have similar preferences for group and one-on-one support for face-to-face delivery. However, for blended delivery Aboriginal and/or Torres Strait Islander participants more greatly prefer one-on-one support to group sessions - the same as non-Aboriginal and/or Torres Strait Islander participants.

For career counselling and job search support, Aboriginal and/or Torres Strait Islander peoples preferred group sessions to one-on-one support for both the online and blended delivery modes. Non-Aboriginal and/or Torres Strait Islander participants also slightly favoured group sessions for online delivery but preferred one-on-one support for blended delivery. Both Aboriginal and/or Torres Strait Islander peoples and non-Aboriginal and/or Torres Strait Islander participants preferred one-on-one support for face-to-face delivery. Interestingly, Aboriginal and/or Torres Strait Islander peoples were more likely to choose the no support option over group sessions for the face-to-face delivery mode.

When it came to tutoring and study skills guidance, Aboriginal and/or Torres Strait Islander peoples preferred one-on-one support to group sessions for both the online and blended delivery modes, which is the same for non-Aboriginal and/or Torres Strait Islander peoples. However, for the face-to-face delivery mode Aboriginal and/or Torres Strait Islander participants slightly preferred group sessions to one-on-one support while non-Aboriginal and/or Torres Strait Islander participants slightly preferred one-on-one support.

Figure 91 Average importance by First Nations status, %



Note: Aboriginal and/or Torres Strait Islander Identifying, n = 41; Non-Aboriginal or Torres Strait Islander, n = 602; Prefer not to say, n = 7 (not shown).

Health and welfare support

Figure 92 Share of preference by First Nations status and level of health & welfare support for online delivery mode, %

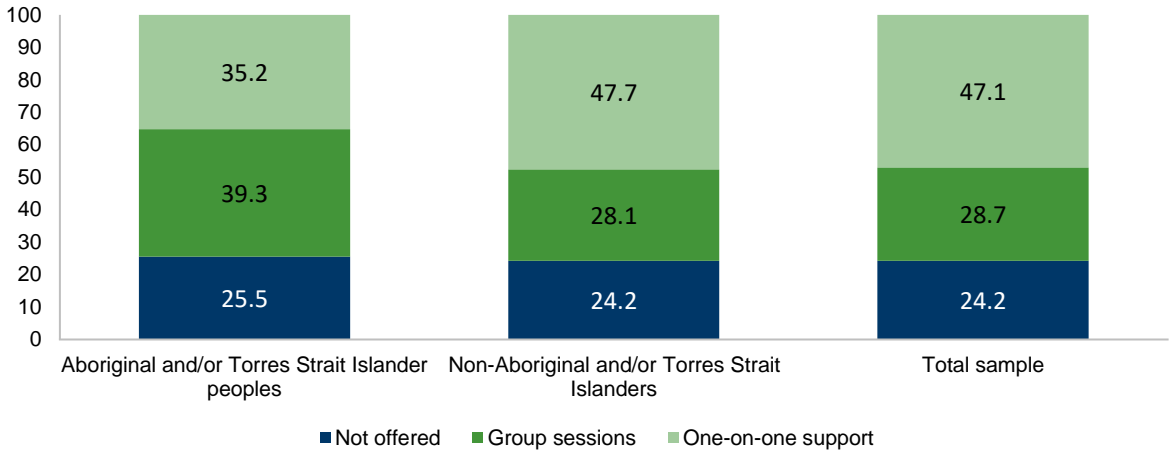


Figure 93 Share of preference by First Nations status and level of health & welfare support for blended delivery mode, %

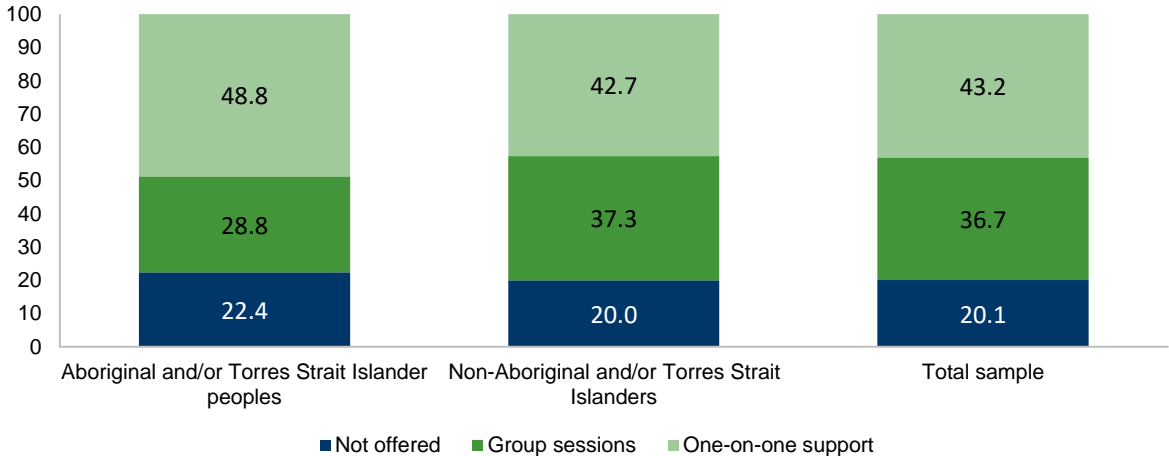
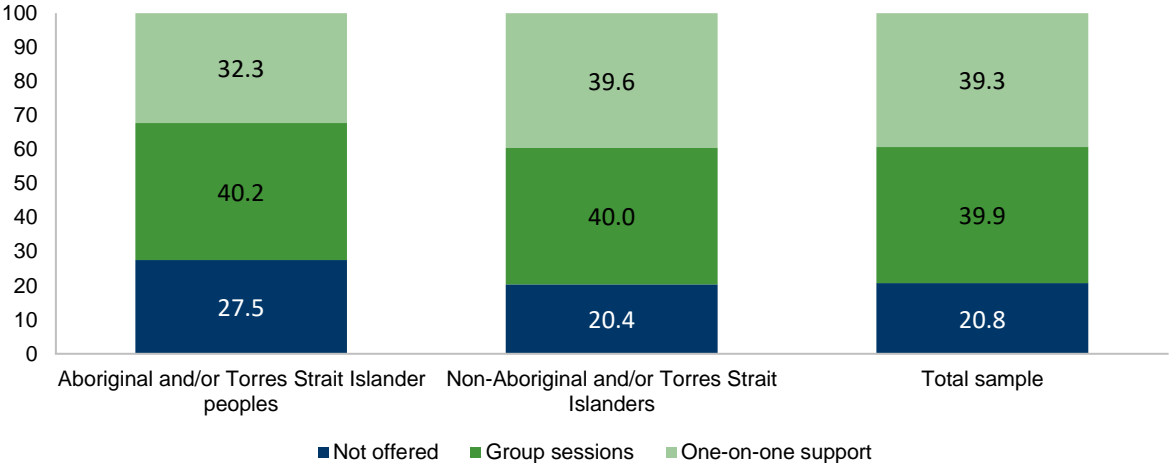


Figure 94 Share of preference by First Nations status and level of health & welfare support for face-to-face delivery mode, %



Career counselling and job search support

Figure 95 Share of preference by First Nations status and level of career counselling & job search support for online delivery mode, %

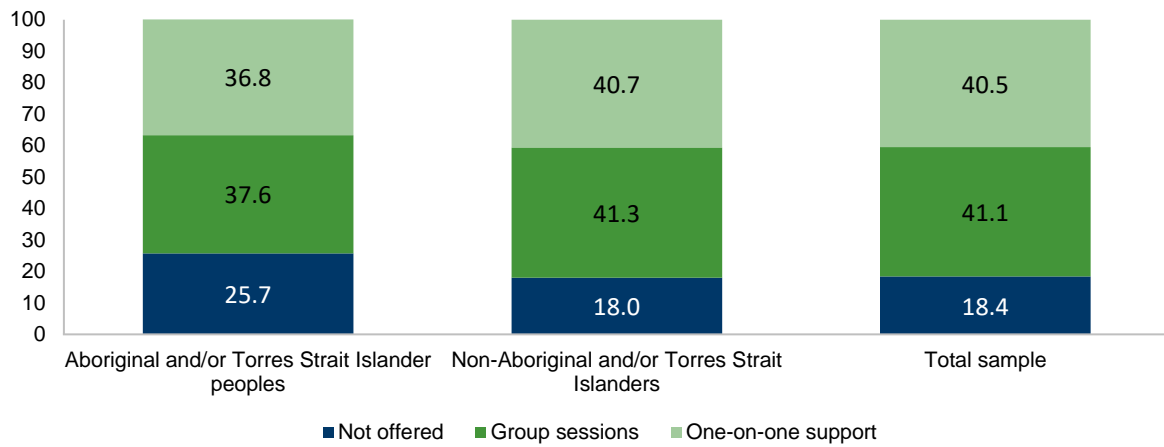
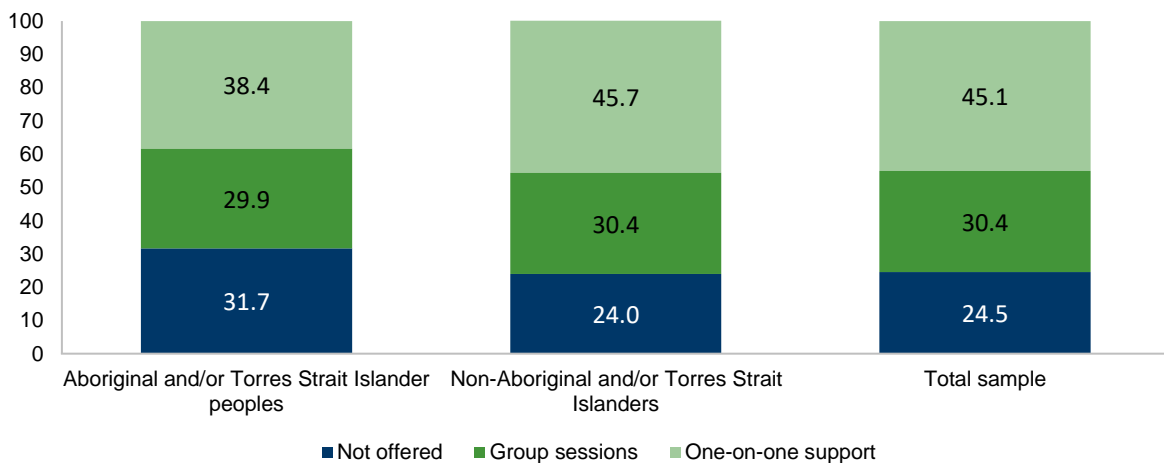


Figure 96 Share of preference by First Nations status and level of career counselling & job search support for blended delivery mode, %



Figure 97 Share of preference by First Nations status and level of career counselling & job search support for face-to-face delivery mode, %



Tutoring and study skills guidance

Figure 98 Share of preference by First Nations status and level of tutoring and study skills guidance for online delivery mode, %

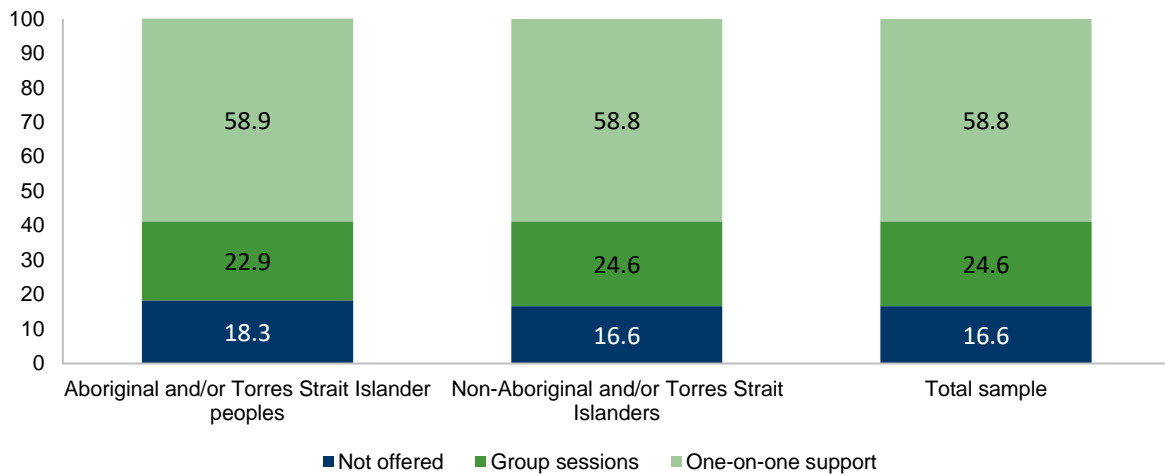


Figure 99 Share of preference by First Nations status and level of tutoring and study skills guidance for blended delivery mode, %

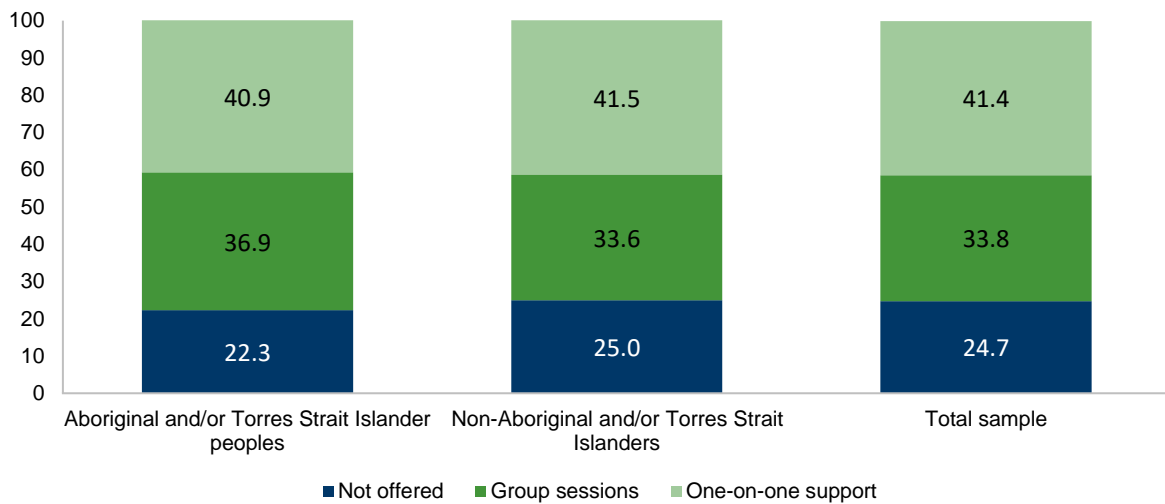
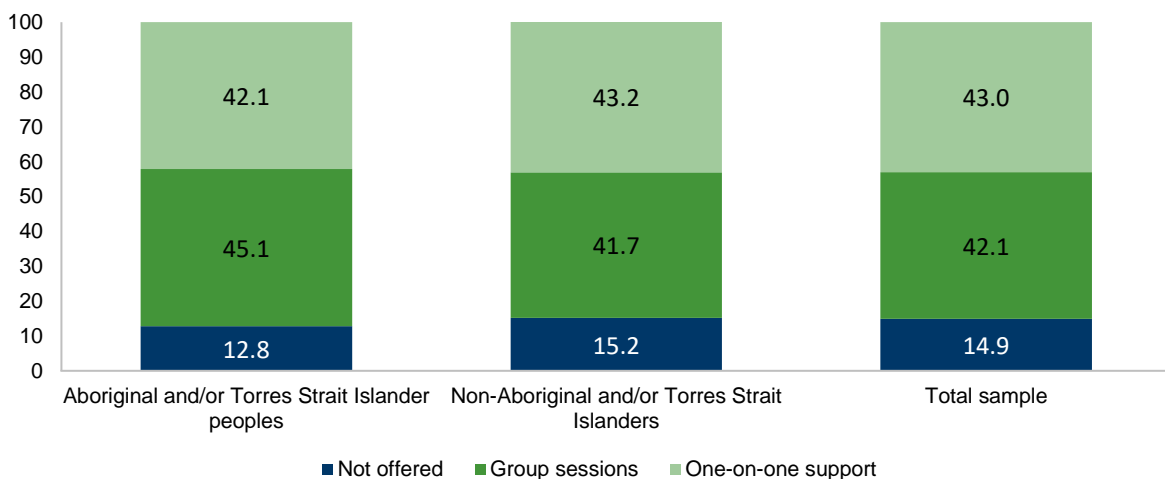


Figure 100 Share of preference by First Nations status and level of tutoring and study skills guidance for face-to-face delivery mode, %



Testing the statistical significance of the results

Expanding on the results in the previous section, Ipsos Public Affairs carried out significance testing to determine if any of the results were statistically significant. The following information on the method and the results of the tests has been provided by Ipsos Public Affairs.

Method

To determine significant differences between groups on their preferences for different types of support, we simulated preferences amongst individuals in each subgroup. In each case, there were three courses varying from low to high on their level of support (e.g., none, group, one-on-one). These shares of preference values ranged from 0% (virtually no uptake of a given course) to 100% (full uptake of a given course).

Then we compared the distribution of preferences between groups for each course using a Welch two-sample t-test. This test compared the mean preferences for a given course between two independent groups (e.g., those with physical disability and those without), while allowing for different levels of variability in the preference between the groups. The Welch two-sample t-test calculates the difference between these group's preferences and yields a p-value (based on a t-statistic), which quantifies how likely the observed difference in preferences would be under the null hypothesis of no difference.

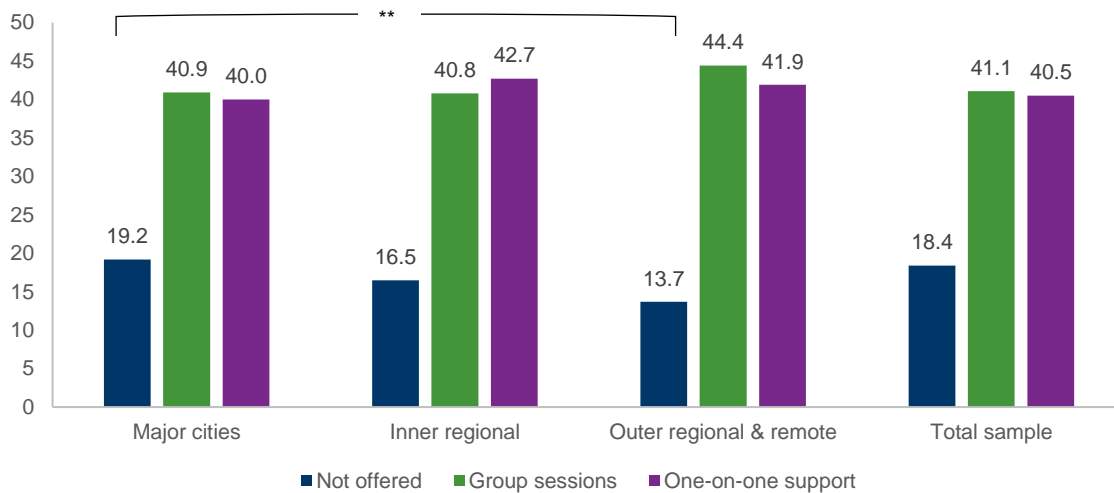
Because we ran a large number of pairwise comparisons between subgroups on different courses varying in their levels of support, we reduced the alpha for these tests to .01 to determine whether the differences were statistically significant whilst controlling for potential false positive rates.

Results

Regional locations

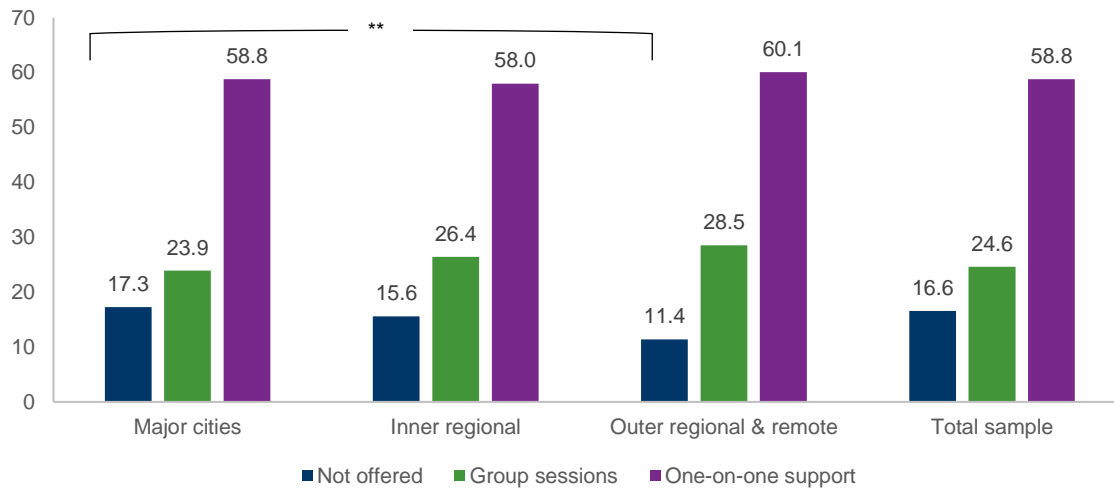
We found that individuals in major cities were more comfortable with having no support offered in an online VET course format for both career counselling and job search support and tutoring and study skills guidance, relative to those in outer regional and remote areas.

Figure 101 Statistically significant results for share of preference by location and career counselling and job search support for online delivery mode, %



Note: ** indicates a statistically significant result between groups.

Figure 102 Statistically significant results for share of preference by location and tutoring and study skills guidance for online delivery mode, %



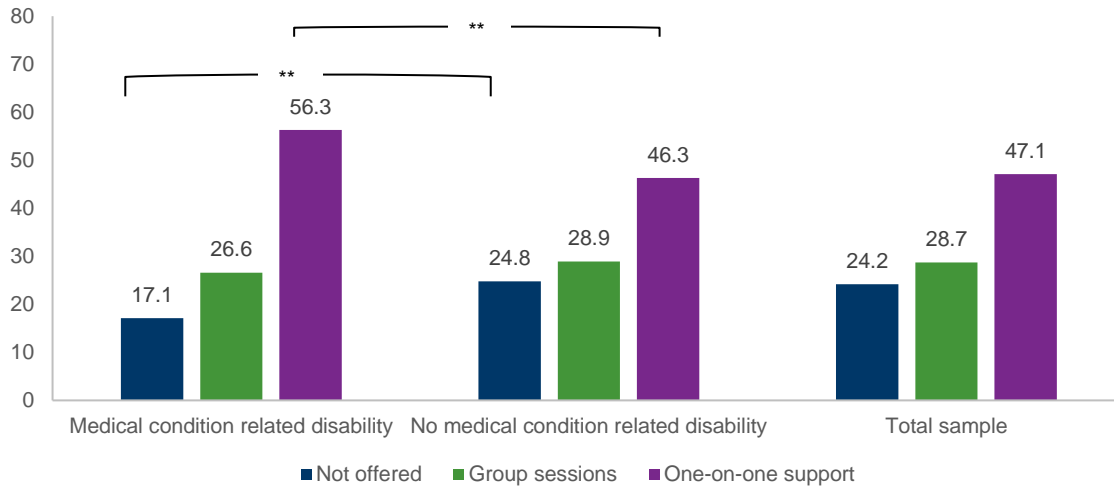
Note: ** indicates a statistically significant result between groups.

Disability

Medical condition-related disability

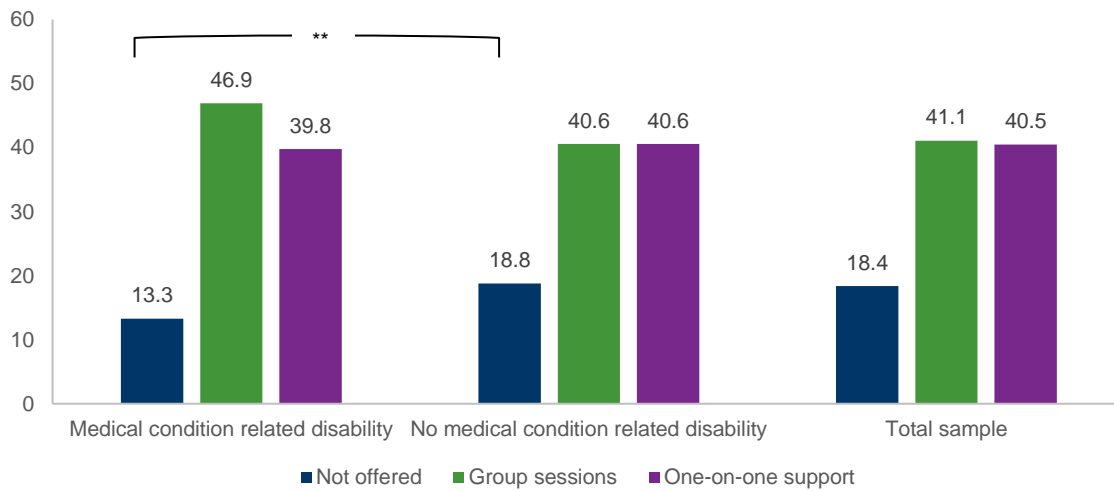
Individuals with medical condition-related disability were less likely to opt for an online VET course that did not offer health and welfare support or career counselling and job search support.

Figure 103 Statistically significant results for share of preference by medical condition-related disability and health and welfare support for online delivery mode, %



Note: ** indicates a statistically significant result between groups.

Figure 104 Statistically significant results for share of preference by medical condition-related disability and career counselling and job search support for online delivery mode, %

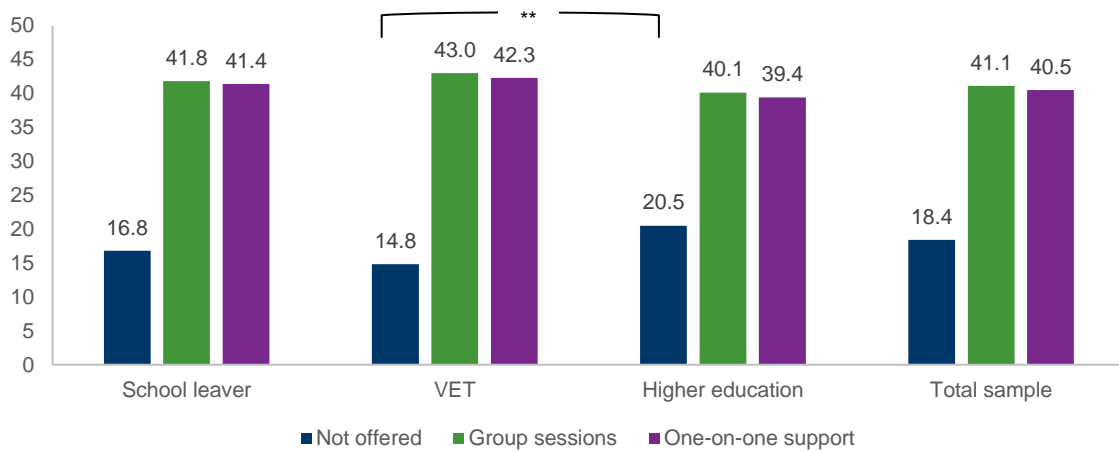


Note: ** indicates a statistically significant result between groups.

Highest education level

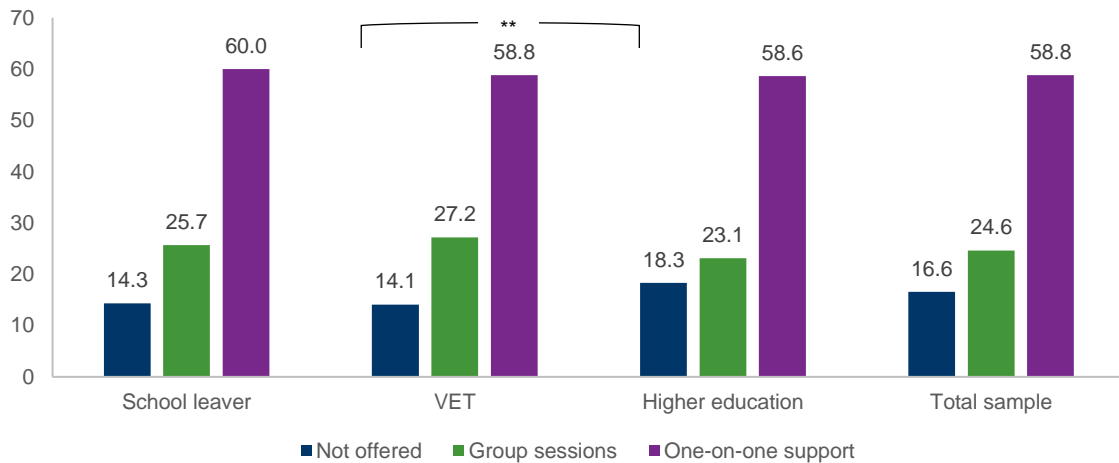
Individuals with a VET qualification as their highest education level were less likely to opt for online courses *not* offering supports in career counselling and job search, as well as tutoring and study skills guidance, relative to those with a higher education qualification. A similar effect was found for health and welfare support in face-to-face delivered courses.

Figure 105 Statistically significant results for share of preference by highest education level and career counselling and job search support for online delivery mode, %



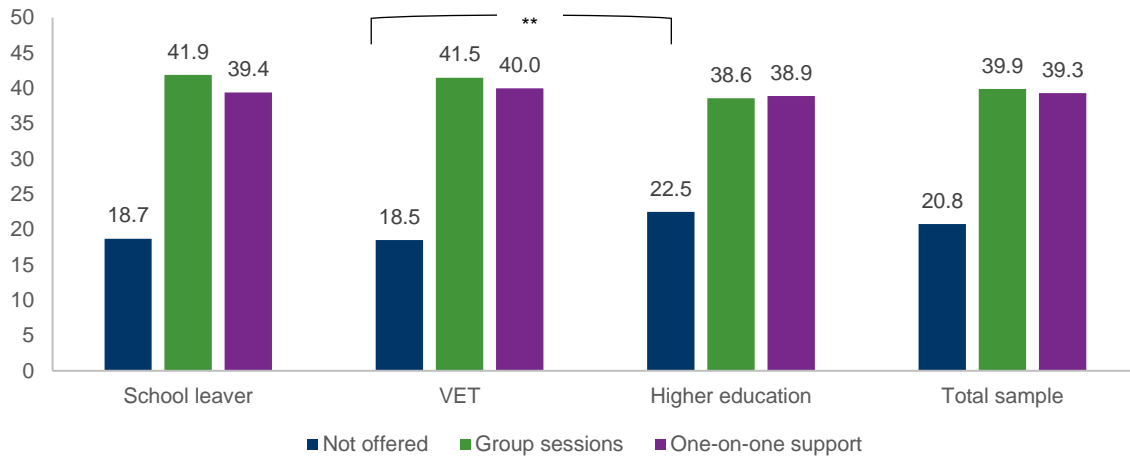
Note: ** indicates a statistically significant result between groups.

Figure 106 Statistically significant results for share of preference by highest education level and tutoring and study skills guidance for online delivery mode, %



Note: ** indicates a statistically significant result between groups.

Figure 107 Statistically significant results for share of preference by highest education level and health and welfare support for face-to-face delivery mode, %

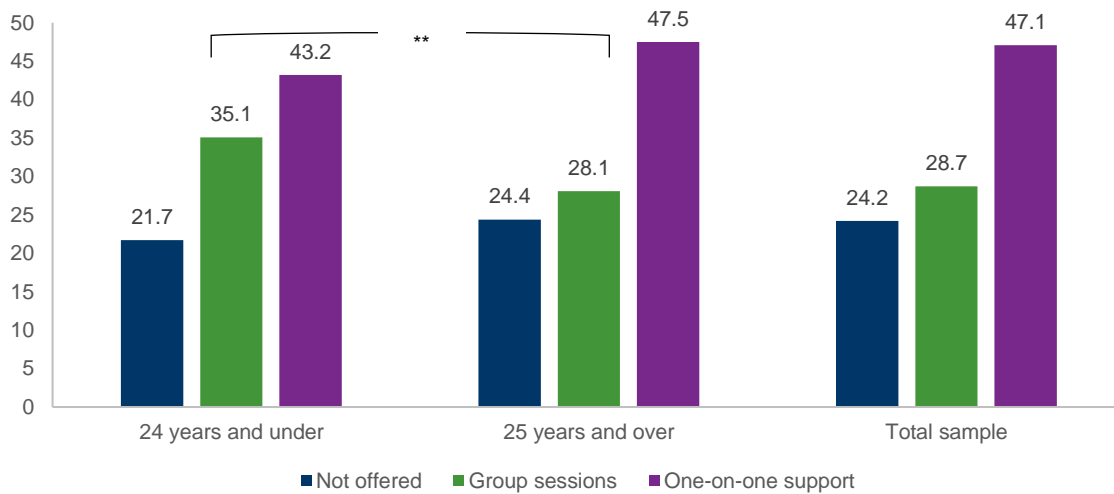


Note: ** indicates a statistically significant result between groups.

Young people

Individuals 24 years and younger were more likely to opt for an online VET course offering group sessions in health and welfare, relative to older individuals.

Figure 108 Statistically significant results for share of preference by age cohort and health and welfare support for online delivery mode, %

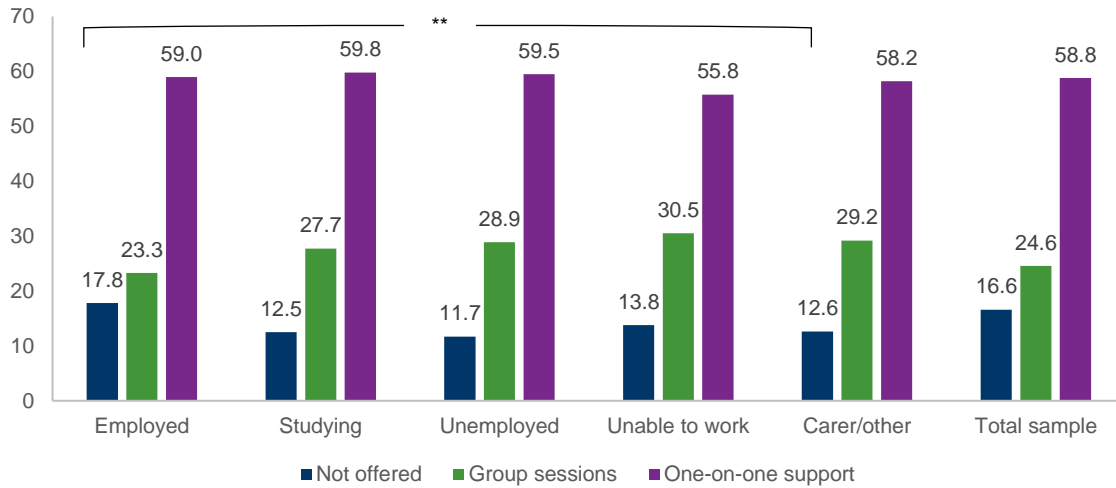


Note: ** indicates a statistically significant result between groups.

Employment status

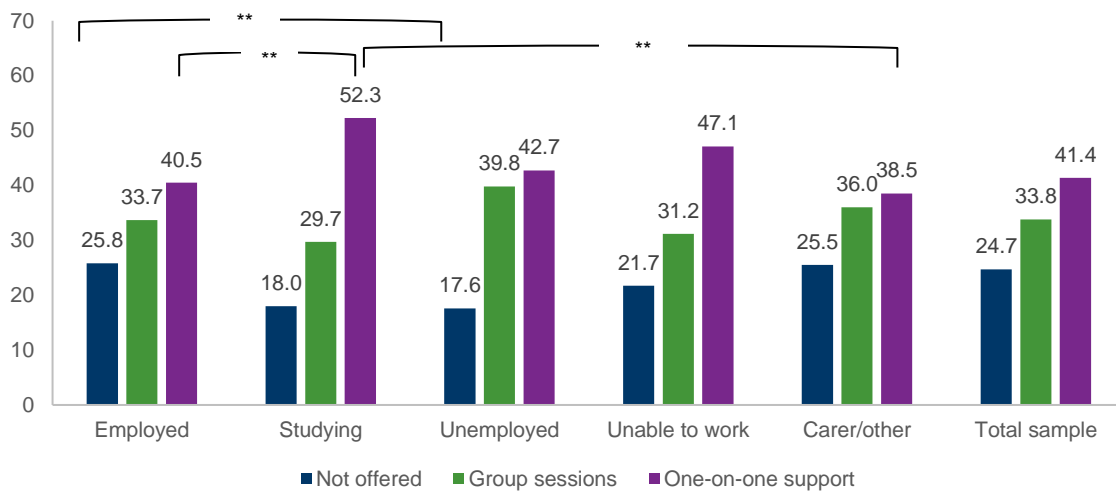
Generally, those currently employed were more comfortable opting for a course with no tutoring and study skills guidance when compared with carers/other (in online delivery), people currently unemployed (blended delivery), and studying (face-to-face delivery).

Figure 109 Statistically significant results for share of preference by employment status and tutoring and study skills guidance for online delivery mode, %



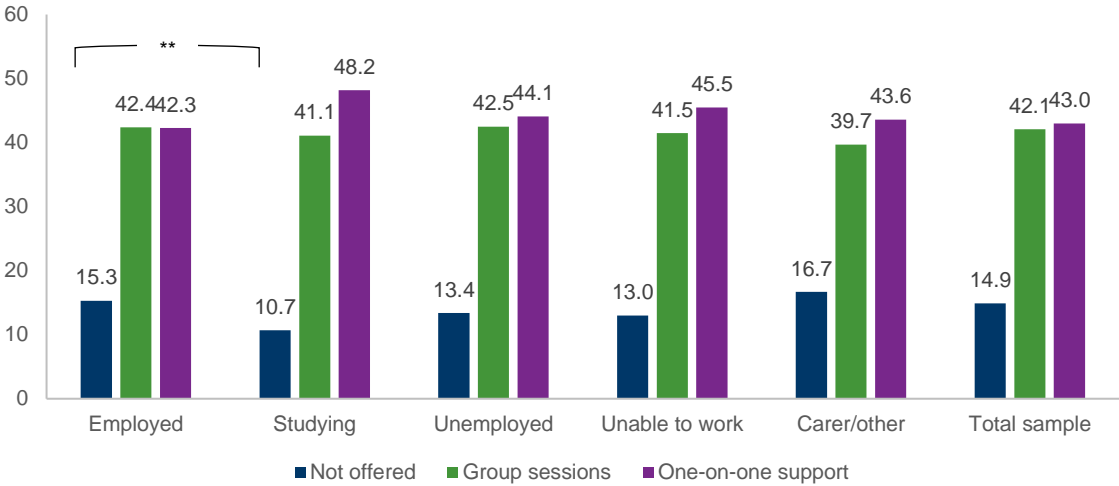
Note: ** indicates a statistically significant result between groups.

Figure 110 Statistically significant results for share of preference by employment status and tutoring and study skills guidance for blended delivery mode, %



Note: ** indicates a statistically significant result between groups.

Figure 111 Statistically significant results for share of preference by employment status and tutoring and study skills guidance for face-to-face delivery mode, %

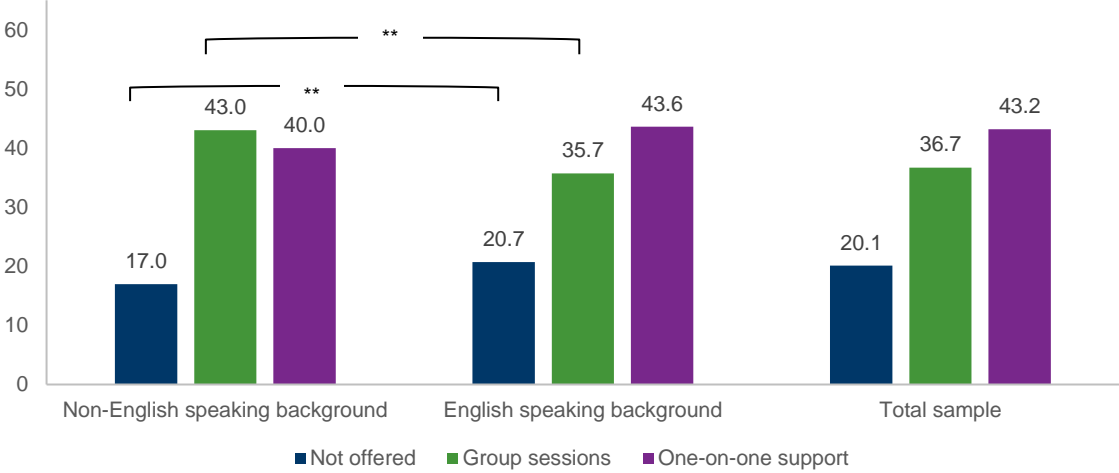


Note: ** indicates a statistically significant result between groups.

Language spoken at home

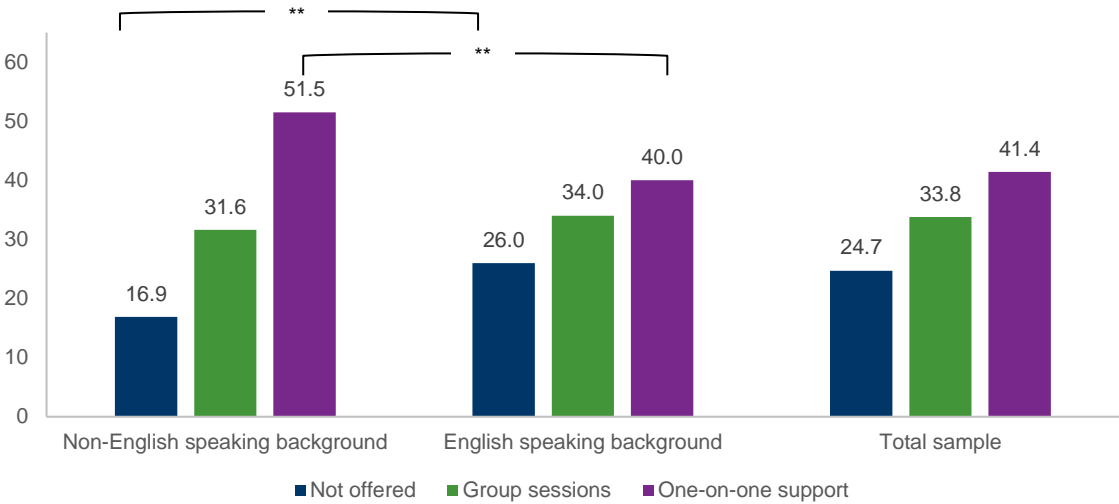
People from a non-English speaking background tended not to prefer blended delivery VET courses without health and welfare support and tutoring and study skills guidance, when compared with those from an English-speaking background. We found that individuals from a non-English speaking background also tended to have a higher share of preference for group format health and welfare support options.

Figure 112 Statistically significant results for share of preference by language spoken at home and health and welfare support for blended delivery mode, %



Note: ** indicates a statistically significant result between groups.

Figure 113 Statistically significant results for share of preference by language spoken at home and tutoring and study skills guidance for blended delivery mode, %

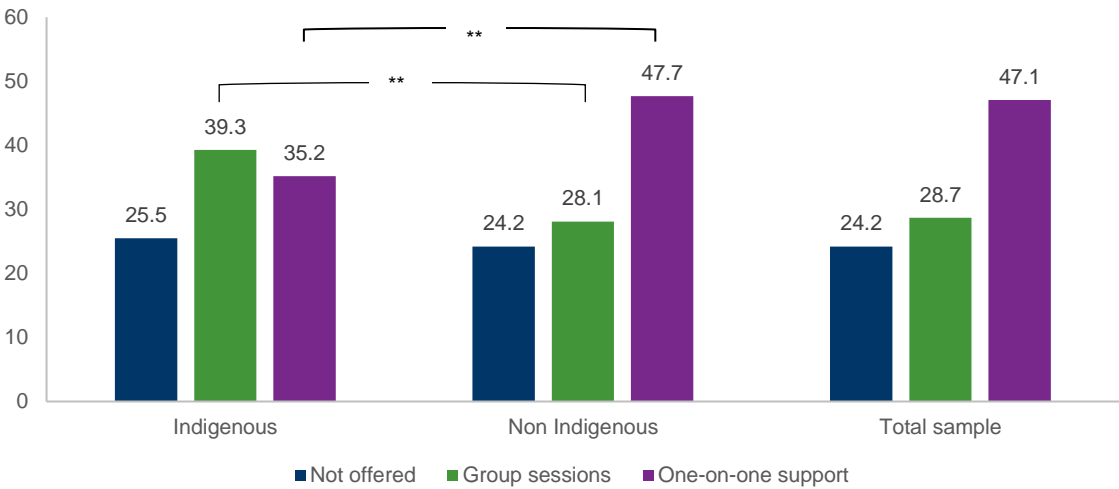


Note: ** indicates a statistically significant result between groups.

First Nations status

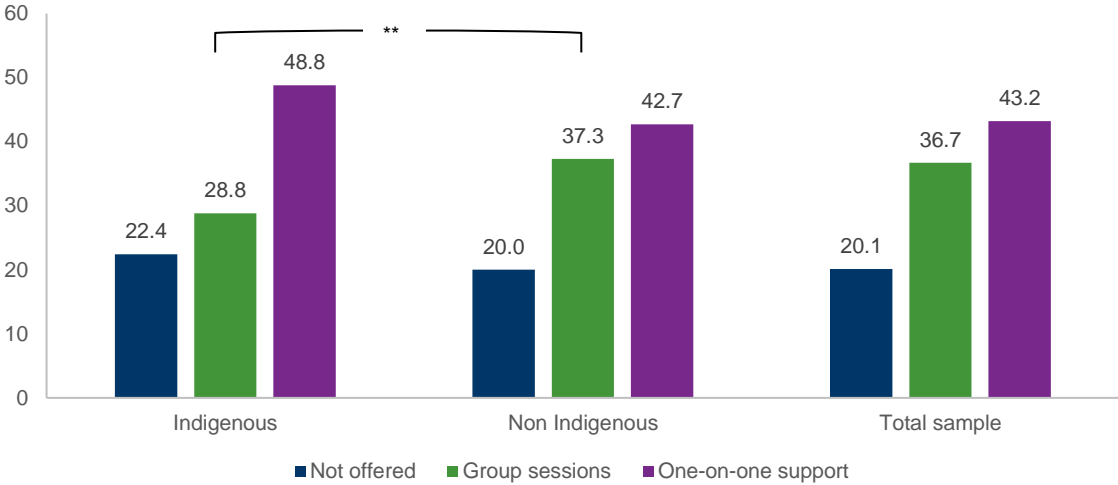
Individuals identifying as Aboriginal and/or Torres Strait Islander preferred group health and welfare sessions in a purely online delivery relative to non-Aboriginal and/or Torres Strait Islander people. Interestingly, the opposite effect was found for blended VET course delivery.

Figure 114 Statistically significant results for share of preference by First Nations status and health and welfare support for online delivery mode, %



Note: ** indicates a statistically significant result between groups.

Figure 115 Statistically significant results for share of preference by First Nations status and health and welfare support for blended delivery mode, %



Note: ** indicates a statistically significant result between groups.