

Unmet need for GP services due to a lack of transport

This factsheet presents an indicator of unmet need for GP services due to a lack of transport in New Zealand. Access to transport is important for accessing health services and other amenities in society. Not accessing health-care services in a timely way can lead to an unmet need for healthcare and a potential worsening of health.

Key facts



In 2018/19, about 130,000 New Zealanders (2.3% of children and 2.8% of adults) had missed out on a GP visit due to a lack of transport in the previous 12 months.



Women were more than twice as likely as men to have had an unmet GP need due to a lack of transport in the previous 12 months.



Lack of transport was a significant barrier to accessing GP services for Māori and Pacific peoples, with 5–10% of people in these ethnic groups affected.



People living in the most deprived areas had much higher rates of unmet GP need due to lack of transport than those who live in the least deprived areas.



In 2014–17, Northland and Hawke's Bay District Health Boards (DHBs) have the highest rates of unmet GP need due to a lack of transport for children. For adults, the highest rates were Hawke's Bay, Northland, and Counties Manukau DHBs.

How a lack of transport can affect health

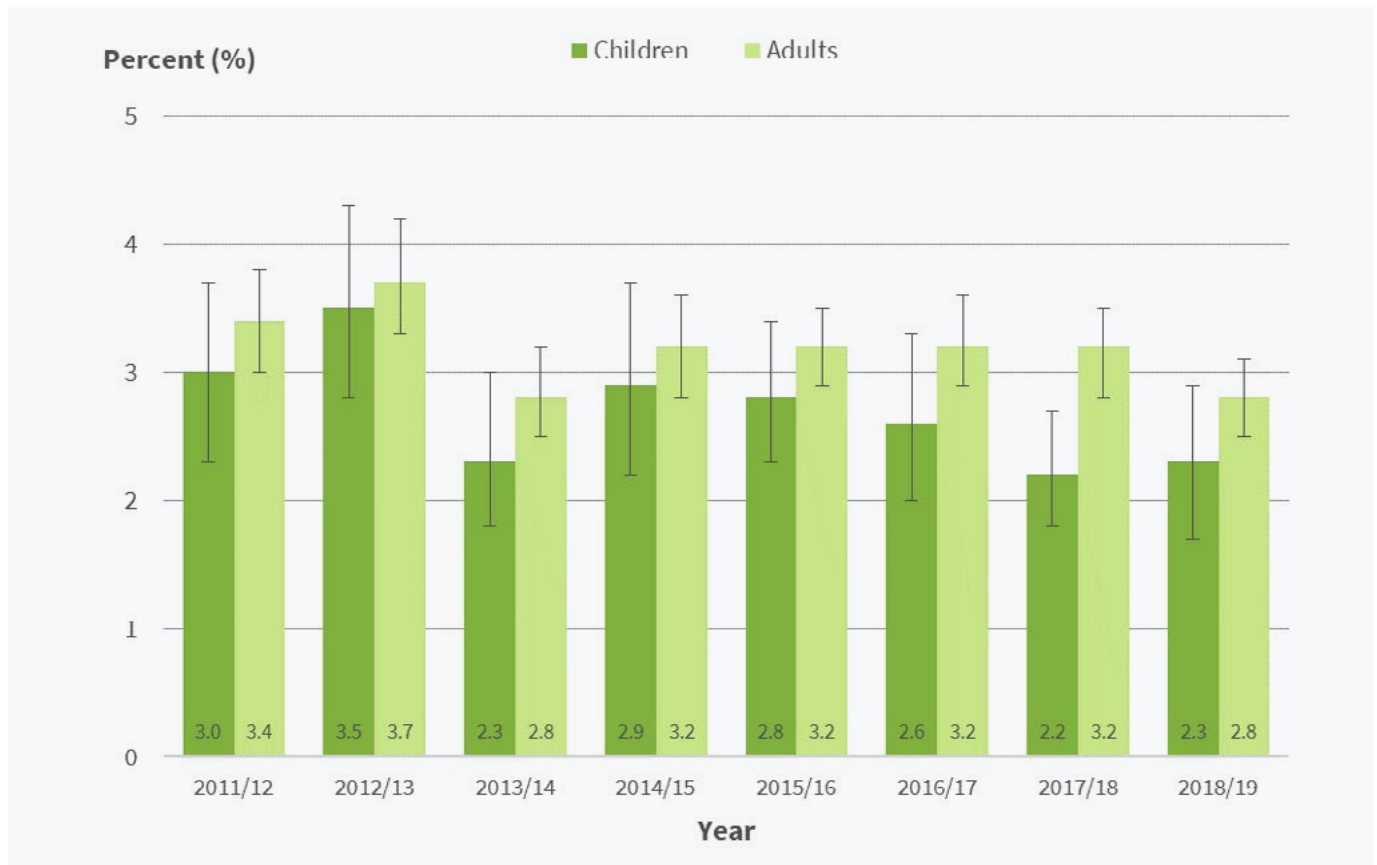
Transportation is a basic but necessary requirement for access to healthcare services and other services and facilities in society (Syed et al 2013). Lack of access to transportation may lead to an inability to access appropriate medical treatment, leading to 'unmet healthcare needs' (that is, missing out on healthcare when it is needed), which can exacerbate health outcomes.

About 130,000 New Zealanders missed out on a GP visit due to no transport in 2018/19

In 2018/19, about 2.5% of New Zealanders had a medical problem but did not visit a GP due to a lack of transport (children 2.3%, 95% confidence interval [CI] 1.7–2.9; adults 2.8% [2.5–3.1]) (Figure 1). This is about 21,000 children and 109,000 adults.

There has been no significant change in the percentage of people with unmet need for a GP due to a lack of transport between 2011/12 and 2018/19, either for children or adults, even when adjusted for age differences.

Figure 1: Unmet need for GP services due to a lack of transport in the past 12 months, children and adults, 2011/12–2018/19 (unadjusted prevalence)

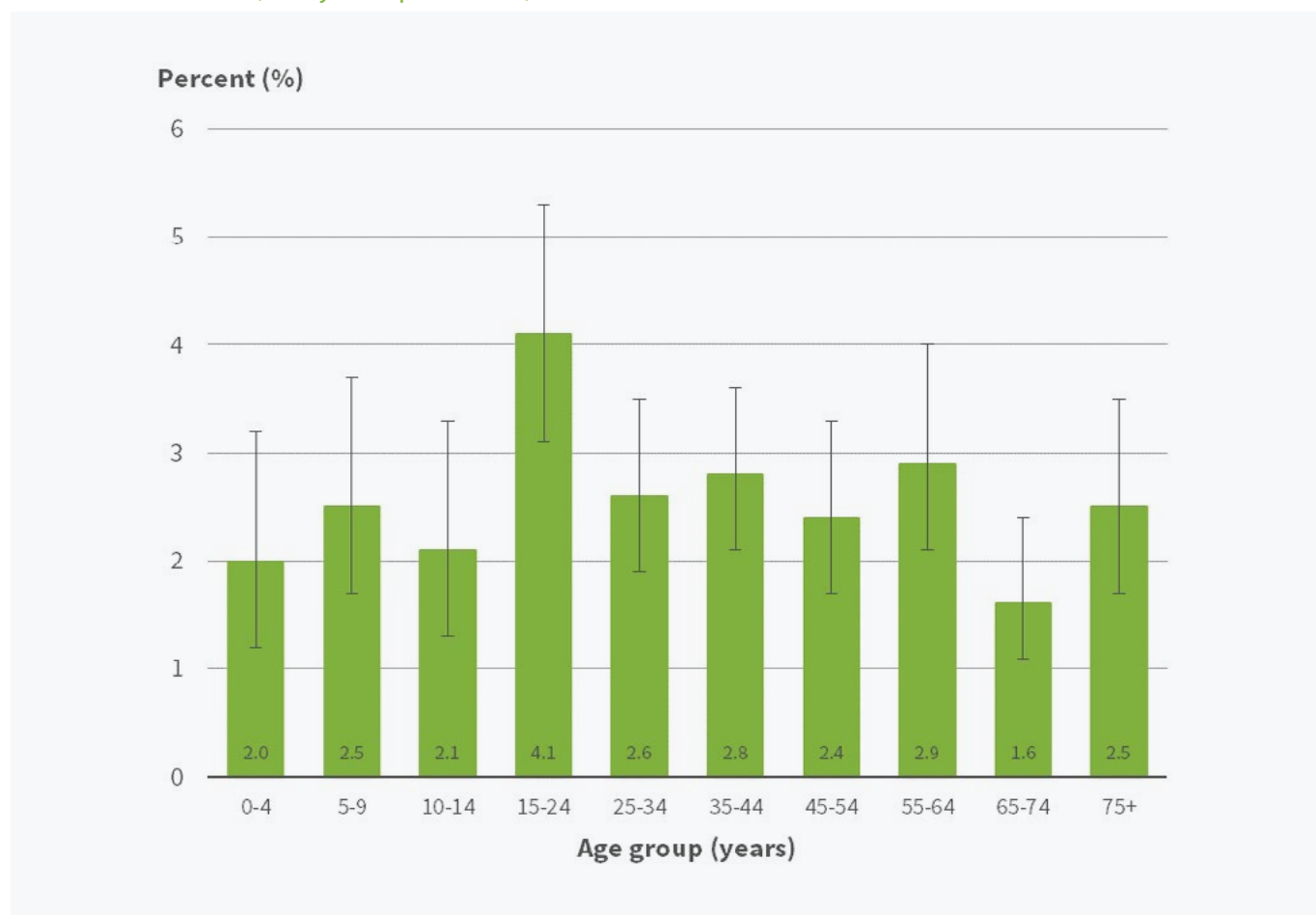


Source: New Zealand Health Survey (Ministry of Health 2019).

There was variation by age group in unmet need for a GP due to a lack of transport

In 2018/19, the highest percentages of unmet need for a GP due to a lack of transport were in children aged 5–9 years old (2.5%, 1.7–3.7) and adults aged 15–24 years old (4.1%, 3.1–5.3) (Figure 2). This is different from 2016/17 where children aged 0–4 years and adults aged 25–34 years old had the highest unmet need (3.5% [2.4–4.8] and 4.2% [3.3–5.3], respectively).

Figure 2: Unmet need for GP services due to a lack of transport in the past 12 months, by age group, 2018/19 (unadjusted prevalence)



Source: New Zealand Health Survey (Ministry of Health 2019).

Women were more likely to have an unmet need for a GP due to a lack of transport than men

In 2018/19, GP need due to a lack of transport was significantly higher among women (3.8%, 3.3–4.4) than men (1.7%, 1.3–2.1).

Women were 2.4 times as likely as men to have experienced an unmet need for a GP due to lack of transport, when adjusting for age (adjusted rate ratio 2.4, 1.8–3.1).

Māori and Pacific people have higher rates of unmet need for a GP due to a lack of transport

The percentage of unmet need varied by ethnic group. Among adults, Māori had the highest rate (7.3%, 6.1–8.7) of unmet GP need due to a lack of transport followed by Pacific adults (7.2%, 5.4–9.5) (Table 1). The lowest percentage was in Asian adults (2.0%, 1.3–3.0). Among children, Pacific children had the highest rate of unmet GP need (6.0%), followed by Māori children (5.3%). The lowest proportion was in Asian children (0.4%).

Table 1: Unmet need for GP services due to a lack of transport, by ethnic group, 2018/19 (unadjusted prevalence and estimated number)

Ethnic group (total response)	Unmet need for GP services due to a lack of transport (% , 95% CI)		Estimated number of people affected	
	Children	Adults	Children	Adults
Total	2.3 (1.7–2.9)	2.8 (2.5–3.1)	21,000	109,000
Māori	5.3 (3.8–7.3)	7.3 (6.1–8.7)	12,000	34,000
Pacific	6.0 (4.2–8.6)	7.2 (5.4–9.5)	8,000	19,000
Asian	0.4 (0.1–1.4)	2.0 (1.3–3.0)	1,000	11,000
European/Other	1.1 (0.7–1.6)	2.1 (1.8–2.4)	7,000	62,000

Notes for table 1: 95% CI are given in brackets. Estimated numbers will add to more than the total, due to total response ethnicity (where everyone is included in every ethnic group they report). An asterisk (*) shows a statistically significant adjusted rate ratio.

Source: New Zealand Health Survey (Ministry of Health 2019).

Māori adults and children were 3.2–4.2 times more likely than non- Māori adults and children to have experienced an unmet GP need due to a lack of transport, after adjusting for age and sex (Table 2). Pacific children were 3.6 times more likely than non-Pacific children to have experienced this unmet need, while Pacific adults were 2.7 times more likely than non-Pacific adults.

Table 2: Unmet need for GP services due to a lack of transport, by ethnic group, 2018/19 (adjusted rate ratio)

Ethnic group (total response)	Adjusted rate ratio (adjusting for sex and age)	
	Children	Adults
Māori vs non-Māori	4.2*(2.4–7.2)	3.2*(2.5–4.0)
Pacific vs non-Pacific	3.6*(2.2–6.0)	2.7*(2.0–3.6)
Asian vs non-Asian	0.2 (0.0–0.6)	0.7 (0.4–1.1)

Notes for table 2: 95% CI are given in brackets. Total response ethnic groups have been used. An asterisk (*) shows a statistically significant adjusted rate ratio.

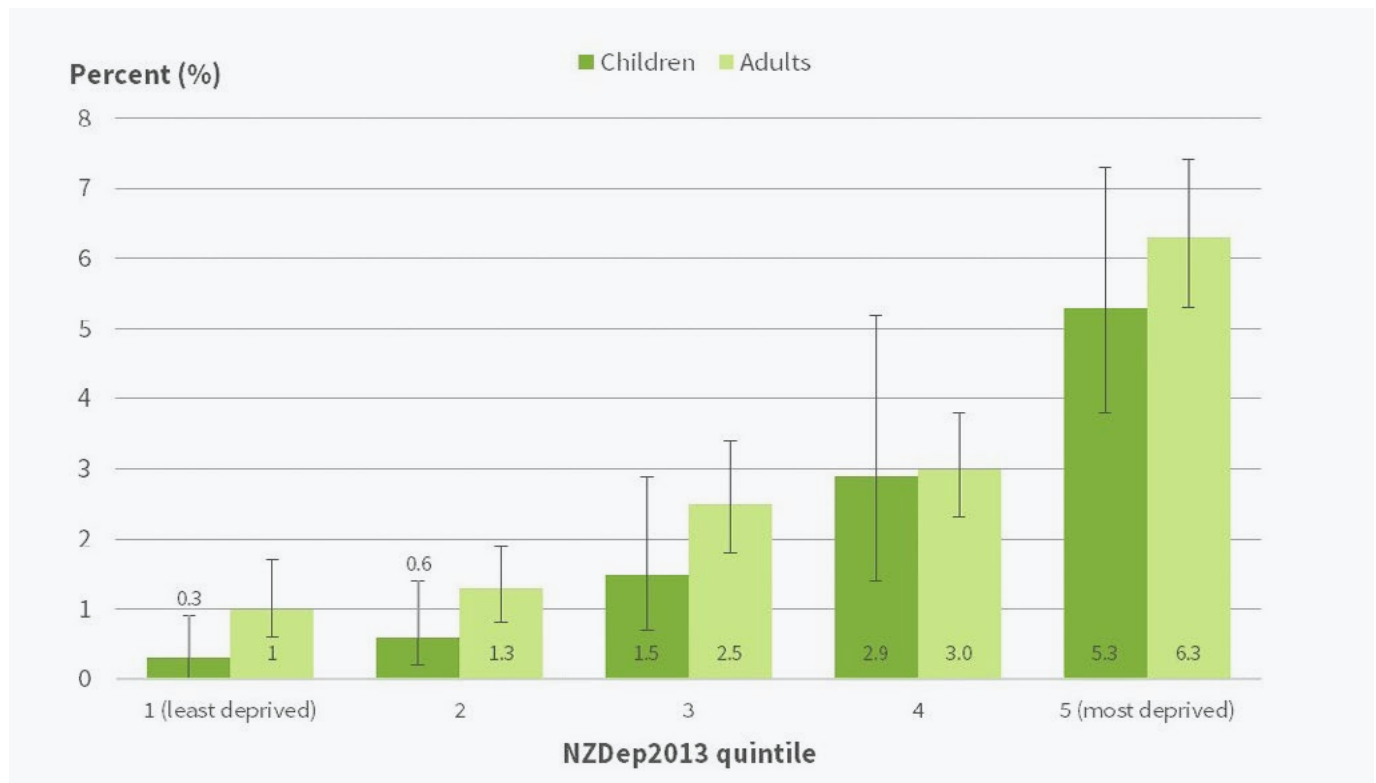
Source: New Zealand Health Survey (Ministry of Health 2019).

Lack of transport is an important barrier to healthcare for people living in high deprivation areas

In 2018/19, children and adults living in socioeconomically deprived areas were much more likely to have had an unmet need for GP service due to a lack of transport in the past 12 months than the children and adults living in the least deprived areas.

In particular, 5.3% (3.8–7.3) of children and 6.3% (5.3–7.4) of adults living in the most deprived areas (NZDep2013 quintile 5) had an unmet GP need due to a lack of transport in the past 12 months (Figure 3).

Figure 3: Unmet need for GP service due to a lack of transport in the last 12 months, by socioeconomic deprivation (NZDep2013 quintiles), 2018/19 (unadjusted prevalence)



Source: New Zealand Health Survey (Ministry of Health 2019).

In 2018/19, adults living in the most deprived areas were 5.4 times as likely as those in the least deprived areas to have experienced this unmet need in the past year, after adjusting for age, sex and ethnic differences (Table 3).

A similar pattern was found for children living in the most deprived areas, who were almost 7.0 times as likely as those in the least deprived areas to have experienced the unmet need in the past year, after adjusting for age, sex and ethnic differences.

Table 3: Unmet need for GP services due to a lack of transport, by socioeconomic deprivation (NZDep 2013 quintiles) 2018/19, adjusted rate ratio

Socioeconomic deprivation (NZDep2013)	Adjusted rate ratio (adjusting for sex, age and ethnic group)	
	Children	Adults
The most deprived areas vs. the least deprived areas	6.9* (2.3–20.6)	5.43* (3.1–9.6)

Notes for table 3: 95% CI are given in brackets. An asterisk (*) shows a statistically significant adjusted rate ratio. The rate ratio for socioeconomic deprivation refers to the relative index of inequality (Hayes and Berry 2002), which compares the estimated value for people at the minimum and maximum points on the deprivation scale (Ministry of Health 2002).

Source: New Zealand Health Survey (Ministry of Health 2019).

Hawke’s Bay and Northland DHBs had higher levels of unmet need in 2014–17

There were geographical differences in unmet need for GP services due to a lack of transport between 2014 and 2017 (Figure 4).

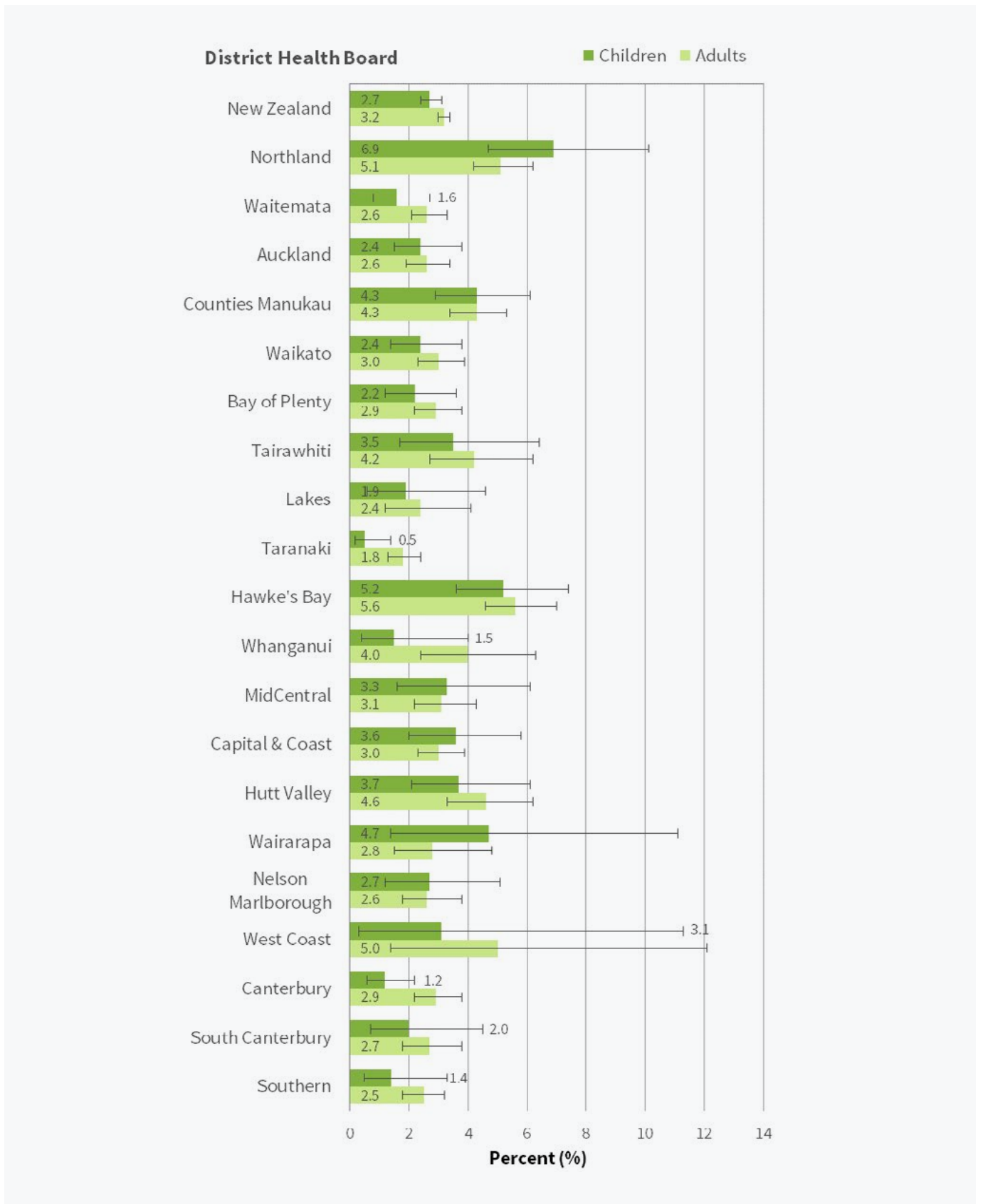
For children, the following District Health Boards (DHBs) had significantly higher rates of unmet need:

- Northland (6.9%, 4.7–10.1)
- Hawke’s Bay (5.2%, 3.6–7.4).

For adults, rates of unmet GP need were significantly higher than the national rate in the following DHBs:

- Hawke’s Bay (5.6%, 4.6–7.0)
- Northland (5.1%, 4.2–6.2)
- Counties Manukau (4.3%, 3.4–5.3).

Figure 4: Unmet need for GP service due to a lack of transport in the last 12 months, by District Health Board (DHB), children aged 0–14 years and adults 15+ years, 2014–17 (unadjusted prevalence)



Note: Significant differences were calculated by the Ministry of Health.
Source: New Zealand Health Survey (Ministry of Health 2018).

Data for these indicators

The data for this factsheet come from the New Zealand Health Survey (Ministry of Health 2019). Unmet need for GP services due to a lack of transport is defined as having had a medical problem but not visiting a GP due to a lack of transport, in the past 12 months (Ministry of Health 2019). The results are presented for children (aged 0–14 years) and adults (aged 15+ years). For more information about this indicator, see the metadata sheet.

References

- Hayes L, Berry G. 2002. *Sampling variability of the Kunst-Mackenbach relative index of inequality*. *Journal of Epidemiology and Community Health* 56: 762–5.
- Kjellstrom T, and Hill S. 2002. *New Zealand Evidence for Health Impacts of Transport: A background paper prepared for the Public Health Advisory Committee*. Wellington: National Health Committee.
- Ministry of Health. 2012. *The Health of New Zealand Adults 2011/12: Key findings of the New Zealand Health Survey*. Wellington: Ministry of Health.
- Ministry of Health. 2015. *Regional results from the 2011–14 New Zealand Health Survey*. Wellington: Ministry of Health.
- Ministry of Health. 2018. *Regional Results 2014–2017: New Zealand Health Survey*. URL: <https://www.health.govt.nz/publication/regional-results-2014-2017-new-zealand-health-survey> (accessed 11/06/2018). Wellington: Ministry of Health.
- Ministry of Health. 2019. *New Zealand Health Survey Annual Data Explorer*. URL: <https://minhealthnz.shinyapps.io/nz-health-survey-2018-19-annual-data-explorer> (accessed 20/02/20). Wellington: Ministry of Health.
- Syed S T, Gerber B S, & Sharp L K. 2013. *Traveling towards disease: transportation barriers to health care access*. *Journal of Community Health*, 38(5): 976-93.

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For descriptive information about the data

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