

Waka Kotahi COVID-19 transport impact

Fieldwork wave 26 deep dive analysis
COVID-19 impacts by disability

14 September 2021



Disclaimer

This presentation is based on research currently being undertaken by Ipsos on behalf of Waka Kotahi NZ Transport Agency. In order to support an agile response to the unfolding COVID-19 pandemic, we are releasing regular key insights from the preliminary findings prior to this work being finalised. Please note that these deliverables have not yet been through a formal peer review process and the findings should be considered as draft.

While Waka Kotahi provided investment, the research was undertaken independently, and the resulting findings should not be regarded as being the opinion, responsibility or policy of Waka Kotahi or indeed of any NZ Government agency.

For more information on the COVID-19 weekly tracker contact:
NZTAresearch@nzta.govt.nz.

Report content

COVID-19 transport impact

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Section 1 – About this research

Study purpose and importance

Introducing the Waka Kotahi NZ Transport Agency COVID-19 transport impact tracker

The **purpose of the COVID-19 Tracker** research is:

To understand **how travel is changing** and evolving in response to COVID-19 on a regular basis

- such as trip frequency and journey type changes.

To understand **why travel is changing** and evolving in response to COVID-19 on a regular basis

- such as perceptions/attitudes towards COVID-19 and travel options.

To include sufficient respondent numbers to understand how this varies across region and cohorts of interest

- such as different employment types (work from home, essential workers, etc), vulnerable groups (elderly, immune compromised, etc), DHB, etc.

To provide updates in a timely fashion so actions and planning can respond to the evolving situation.

The **importance of this research** cannot be understated:

There has been a major disruption to travel habits that will have long-lasting impacts on society:

- Where and how people choose to work, and how they choose to travel will change.
- Where people choose to travel domestically will change.
- How these changes will play out in the medium to long-term is unknown.

Without regularly updated knowledge on **what people are thinking and feeling**, and **why they are choosing** to travel the way they do, we won't be able to quantify how people are responding to COVID-19; without this, we won't know how best to respond and how we are able to influence travel habits.

- With regularly updated knowledge on COVID-19's impact, we can quantify how road usage and modal choice is changing, and we will know how to respond and influence future travel habits.

Overview of research (i)

Research design and outputs

The **design of the tracker** ensures we can undertake analysis at various levels for different purposes, and for different stakeholders.

The study is an online quantitative survey that is a nationally representative sample of New Zealanders 15+ years old, with a sample of ~n=1259 per wave, using quotas and data weighting.

- With sample boosts to ensure sufficient numbers to analyse key cities of interest, such as Tauranga, Dunedin and Hamilton.
- Sample numbers allow longitudinal view on cohorts and regions of interest.
- Sample is sourced from a blend of online panels, including Pure Profile, Ipsos iSay, Dynata and Consumer Link.

Average survey duration of between 12-15 mins

- Outside core measures, flexibility to change questions every week

Fast turnaround of results to allow a weekly* view on how behaviours and attitudes are changing.

- Design will pivot according to alert level changes that may occur at nationwide and regional levels.

There will be **two types of outputs** available:

1) Regular* overview power point report

- benchmark and longitudinal summary of key data points
- including extra analysis based on topical questions.

2) [Open Data tables](#)

- Downloaded crosstabs of key variables in excel format, accompanied by survey technical report and questionnaire changes tracking log, downloadable from Waka Kotahi Open Data portal

*For waves 1-14 fieldwork and reporting was undertaken weekly, for waves 15 and 16 fieldwork and reporting was undertaken bi-weekly, while wave 17 fieldwork and reporting was undertaken three weeks after wave 16 as fieldwork was brought forward from an intended monthly cycle due to an outbreak of COVID-19 community cases. Waves 17, 18, 19, 20 and 21 are weekly. Wave 22 took place 3 weeks after wave 21. Waves 23, 24, 25 and 26 have occurred on an ad hoc basis.

Overview of research (ii)

Question topics in the survey

Question areas covered in the research:

Level of personal concern of the impact of COVID-19

- to themselves, their families, their work, the country, etc.

Current essential journeys and domestic travel undertaken and changes

- change is measured since February 2020.

Modal shift patterns and perceptual shifts

- including perceptions of public transport among users
- perceptions of various transports modes with regards to safety, hygiene, convenience, etc
- perceptions of potential shifts in work flexibility.

Measuring attitudinal shifts towards COVID-19

- using a Behavioural Science framework to understand current people's current state to facilitate potential interventions.

Questions to classify into a variety of segments of interest

- including journey profile, vulnerability, COVID-19 attitudes, economic, etc.

Ad hoc questions of interest

- including perceptions of future workplace flexibility, domestic tourism intentions, intention to return children to school, etc.

Report notes (i)

Key information to note for this report

- This report is based on 26 waves of fieldwork, see table ►
- The sample for this report is presented in a number of ways, including as a combined sum of fieldwork for specific alert levels, as well as individual waves where appropriate.
- The focus of this report is tracking trends and changes over time and how New Zealanders have adjusted their use of transport and travel behaviour. As this study was not conducted prior to level 4 restrictions, respondents were asked to recall their transport and travel behaviour prior to level 4 restrictions based on a 'normal week' ie in February this year.
- At a total population level, significance testing indicated in this wave 26 report is based on a statistically significant shift of results between waves 1 to 26, as well as statistically significant shifts between combined alert levels.
- At a sub-population level, significance testing indicates a statistically significant difference between the sub-population and the base or total population. The total population benchmark is based on the total sample base collected across the first four waves of data.

Wave	Dates of fieldwork	Alert level
1	Friday 3 April to Wednesday 8 April	Alert level 4
2	Thursday 9 April to Tuesday 14 April	
3	Thursday 16 April to Monday 20 April	
4	Thursday 23 April to Sunday 26 April	Alert level 3
5	Thursday 30 April to Sunday 3 May	
6	Thursday 7 May to Sunday 10 May	
7	Thursday 14 May to Sunday 17 May	Alert level 2
8	Thursday 21 May to Sunday 24 May	
9	Thursday 28 May to Monday 1 June	
10	Thursday 4 June to Sunday 7 June	Alert level 1
11	Thursday 11 June to Sunday 14 June	
12	Thursday 18 June to Sunday 21 June	
13	Thursday 25 June to Sunday 28 June	
14	Thursday 2 July to Sunday 5 July	
15	Thursday 16 July to Sunday 19 July	
16	Thursday 30 July to Sunday 2 August	Alert Level 3 (AKL) Alert level 2 (Rest of NZ)
17	Thursday 20 August to Sunday 23 August	
18	Thursday 27 August to Sunday 30 August	Alert Level 2.5 (AKL) Alert level 2 (Rest of NZ)
19	Thursday 3 September to Sunday 6 September	
20	Thursday 17 September to Sunday 20 September	Alert level 2 (AKL) Alert level 1 (Rest of NZ)
21	Thursday 24 th September to Sunday 27 September	
22	Thursday 15 th October to Sunday 18 th October	Alert level 1
23	Thursday 12 th November to Sunday 15 th November	
24	Thursday 4 th March to Monday 8 th March*	Alert Level 3 (AKL) Alert Level 2 (Rest of NZ)
25	Thursday 20 th May to Monday 24 th May	Alert level 1
26	Thursday 2 nd September to Monday 6 th September**	Alert Level 4 (AKL) Alert Level 3 (Rest of NZ)

*Please note: During the fieldwork period, on the 7th March AKL dropped to Alert Level 2 and the rest of New Zealand moved to Alert Level 1.

**Please note: Northland was also under Level 4 for much of the week preceding fieldwork, dropping to Level 3 at midnight on day of launch.

Report notes (ii)

Key transport terms and demographic groupings

There are a number of transport terms used in this report. Below are key terms with definitions:

Public transport (PT): refers to bus, train and ferry and does not include taxi/uber services and private hirer vehicles (these will be treated separately in the analysis).

Private vehicle (PVT): refers to car, van, motorcycle or scooter, and does not include e-bikes.

Active modes: refers to walking (of at least 10 mins) and cycling, including e-bikes.

There are a number of demographic subgroup terms used in this report. Below are key groups with definitions:

Any disability: All respondents indicating that they have a great deal of difficulty or cannot do the following: seeing, even when wearing glasses; hearing, even with a hearing aid; walking or climbing steps; remembering or concentrating; washing or dressing; communicating in their usual language.

COVID-19 vulnerable: All respondents indicating that they personally have a medical condition that makes them acutely vulnerable to COVID-19, such as heart disease, hypertension, chronic respiratory disease or cancer.

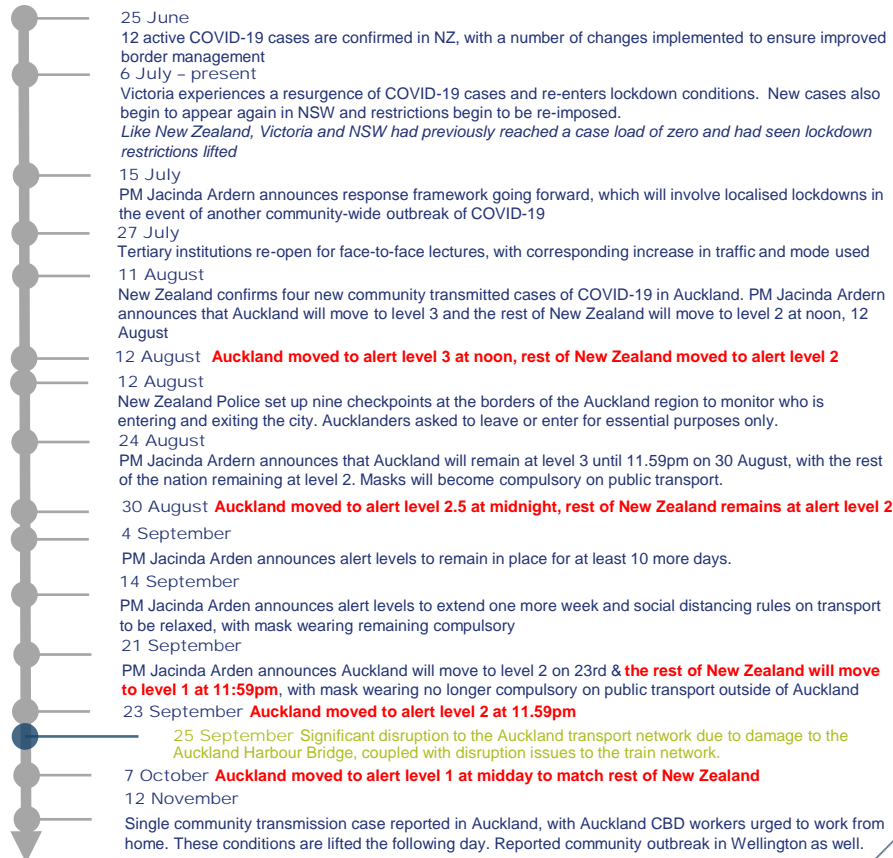
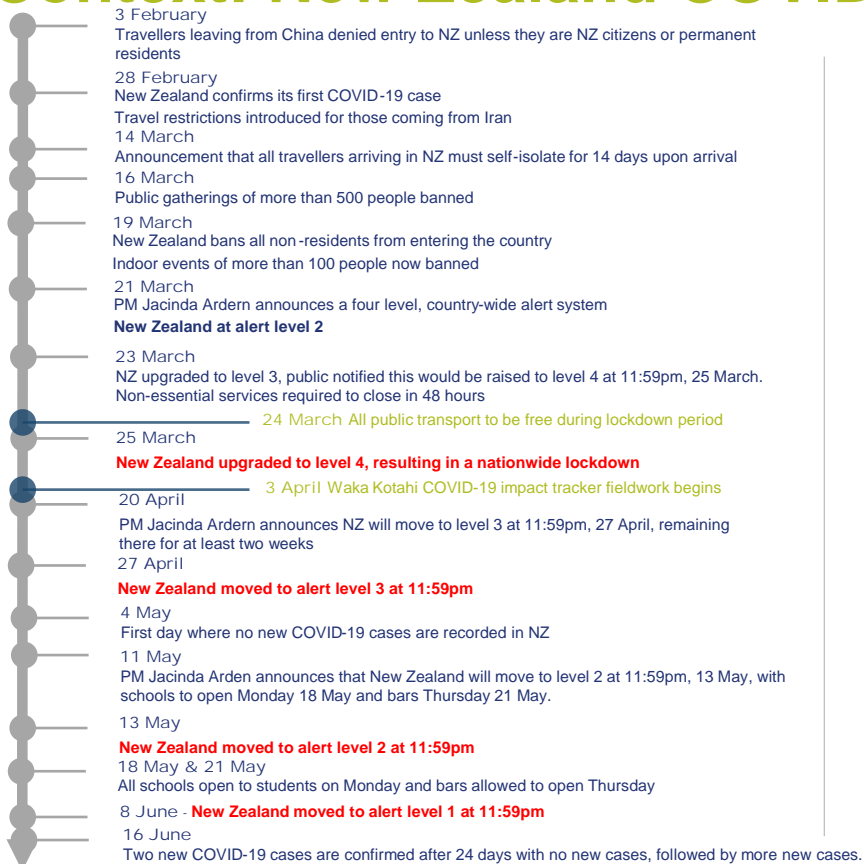
Sample structure and further definitions

	Definition	Waves 1-4		Waves 5-6		Waves 7-10		Waves 11-16		Waves 17-18		Waves 19-20		Wave 21		Wave 22		Wave 23		Wave 24		Wave 25		Wave 26	
		Sample	MoE*	Sample	MoE*	Sample	MoE*	Sample	MoE*	Sample	MoE*	Sample	MoE*	Sample	MoE*	Sample	MoE*	Sample	MoE*	Sample	MoE*	Sample	MoE*	Sample	MoE*
Total		n=5,060	1.38	n=2,532	1.95	n=5,043	1.38	n=7,561	1.13	n=2,455	1.98	n=2,626	1.91	n=1,253	2.77	n=1,220	2.81	n=1,247	2.77	n=1,232	2.79	n=1,259	2.76	N=1,261	2.76
Auckland	All in Auckland Region, including city and surrounding rural areas	n=1,324	2.69	n=662	3.81	n=1,324	2.69	n=1,964	2.21	n=661	3.81	n=676	3.77	n=331	5.39	n=331	5.39	n=331	5.39	n=331	5.39	n=331	5.56	n=331	5.39
Tauranga	All living in the city of Tauranga	n=400	4.9	n=200	6.93	n=400	4.9	n=599	4.0	n=200	6.93	n=197	6.98	n=100	9.8	n=97	9.95	n=86	10.57	n=67	11.97	n=100	9.8	n=100	9.8
Hamilton	All living in the city of Hamilton	n=400	4.9	n=200	6.93	n=400	4.9	n=600	4.0	n=200	6.93	n=217	6.65	n=100	9.8	n=101	9.75	n=100	9.8	n=100	9.8	n=100	9.8	n=100	9.8
Wellington	All in Wellington Region, including city and surrounding rural areas	n=684	3.75	n=418	4.79	n=799	3.47	n=1,129	2.92	n=311	5.56	n=357	5.19	n=175	7.41	n=156	7.85	n=165	7.63	n=161	7.72	n=194	7.04	n=164	7.65
Christchurch	All living in the city of Christchurch	n=400	4.9	n=200	6.93	n=400	4.9	n=601	4.0	n=200	6.93	n=200	6.93	n=100	9.8	n=100	9.8	n=100	9.8	n=100	9.8	n=100	9.8	n=100	9.8
Dunedin	All living in the city of Dunedin	n=398	4.91	n=200	6.93	n=392	4.95	n=607	3.98	n=200	6.93	n=208	6.79	n=87	10.51	n=93	10.16	n=100	9.8	n=100	9.8	n=100	9.8	n=100	9.8
Rest of NZ	All living in areas outside of those noted above	n=1,454	2.57	n=652	3.84	n=1,328	2.69	n=2,061	2.16	n=683	3.75	n=771	3.53	n=360	5.16	n=342	5.3	n=365	5.13	n=373	5.07	n=334	5.36	n=336	9.8
Disability, Vulnerability and COVID-19**																									
Any Disability	See previous page	n=550	4.18	n=297	5.69	n=611	3.96	n=866	3.33	n=284	5.82	n=323	5.45	n=132	8.53	n=130	8.6	n=142	8.22	n=142	8.22	n=187	7.17	n=133	8.5
COVID-19 Vulnerable	See previous page	n=1,230	2.79	n=597	4.01	n=1,139	2.9	n=1,640	2.42	n=584	4.06	n=617	3.95	n=317	5.5	n=299	5.67	n=305	5.61	n=297	5.69	n=311	5.56	n=324	5.44
Aged 70+ years	All indicating that they are considered higher risk for COVID-19 as they are aged 70 or over	n=618	3.94	n=315	5.52	n=627	3.91	n=830	3.4	n=266	6.01	n=293	5.73	n=162	7.7	n=131	8.56	n=141	8.25	n=160	7.75	n=133	8.5	n=159	7.77

*Margin of error is calculated at 95% confidence level based upon an estimated population of 4,978,388 as at Thursday 16 April 12:44pm.

**Sub-groups are *not mutually exclusive* as individuals may fit into more than one category (for example, some may be aged over 70 and also have a chronic respiratory condition that makes them more vulnerable to COVID-19) any such respondents within the sample would be counted in *both* applicable groups.

Context: New Zealand COVID-19 timeline



Context: New Zealand COVID-19 timeline - 2021



*Cumulative vaccination data sourced from health.govt.nz on 14.09.2021

Deep dive analysis

Emergent stories and trends

- It is expected that with the constantly evolving nature of the COVID-19 pandemic, the changing alert levels governing public behaviour and emergent narratives impacting civil society discourse, the environment in which this research takes place will also be ever evolving.
- Deep dive analysis delivered as part of this research will enable questions to be answered outside of the core remit, and to periodically check in on societal variables and trends that may not be of interest every single week, but will speak to contextual changes and important landmarks in New Zealand's response to the COVID-19 overtime.
- Content included in the deep dive is generated from steering group requests.
- The emerging narratives in this deck are in places more complex than would warrant inclusion in the core report, included also are other narratives that may take on greater prominence later on when more responses are accumulated or when alert levels are changed.

Summary

Wave 26 deep dive - disabilities

The 26th wave of fieldwork took place between Thursday 2 and Monday 6 March 2021.

This deep dive is designed to investigate how New Zealanders with disabilities differ in their experiences of COVID-19 travel restrictions in travel and access to the transportation network.

Context

New Zealanders with disabilities (defined as having at least some difficulty with any of the 6 tested functions in the Washington Group Short Set classification) were initially self-isolating at a similar rate to those without disabilities during the early weeks of the COVID-19 lockdown. However, as time has gone on a comparatively high proportion of this group has continued to report self-isolating behaviours compared to those without disabilities, and this gap increased over time as lockdown restrictions were relaxed.

As there is no comparable pre-lockdown measure of these behaviours, it is not possible to confirm if this represents a return to normal, but the fact that stated concern about infection was not notably higher in this group during these time periods suggests that COVID related hesitancy cannot be definitively attributed as the cause of these lower activity levels.

Journeys

Prior to lockdown restrictions, people with disabilities reported that they tended to travel less often for certain essential journey types than those without disabilities, particularly in travelling for groceries, but a little more often for medical appointments and care visits.

Due to the more universal nature of the initial lockdowns at higher alert levels, the difference between the two population groups was reduced. However, as restrictions were relaxed, the difference began to reflect pre-lockdown conditions. There are two apparent exceptions to this in travel to places of education (which those with disabilities have consistently carried out more than those without since lockdowns came into effect) and grocery shopping, where the difference in trips made has been consistently a lot higher than pre lockdown levels.

Mode usage

Those with disabilities were already much more likely to use public transport each week prior to the outbreak of COVID-19 and this cuts across all modes. They have continued to be similarly reliant on the PT network throughout different lockdown levels and whilst weekly usage increased as alert levels decreased, this relationship is less pronounced than in the general population

Weekly active mode and private vehicle usage has not differed as significantly when compared with New Zealanders who have no disability.

Barriers

In general, the barriers measured in terms of ability to get around, shop, participate in society and use public transport do not appear to be more prevalent as a result of COVID restrictions when comparing those with disabilities and other New Zealanders. Instead, they reflect a generally greater prevalence of specific barriers in day to day life which remain in place regardless of COVID alert restrictions.



Section 2 – Context

Disability Status

Washington Short Set Classification

Disability is an important consideration within transportation research, as it always impacts how people participate in the transport network and has the potential to result in different modification in behaviour to those who do not have a disability.

Respondent disability is collected and classified using the Washington Group Short Set on Function. This is a set of six questions on functioning developed, tested and adopted by the Washington Group on Disability Statistics (WG).

The question set uses the World Health Organization's International Classification of Functioning, Disability, and Health (ICF) as a model that locates disability at the interaction between a person's capabilities and environmental barriers that may limit their participation in society.

This can be analysed in a number of ways, but to ensure maximum comparability through larger sample bases each wave, respondents are sorted into a binary disability status distinction:

"Any disability"

"No disability"

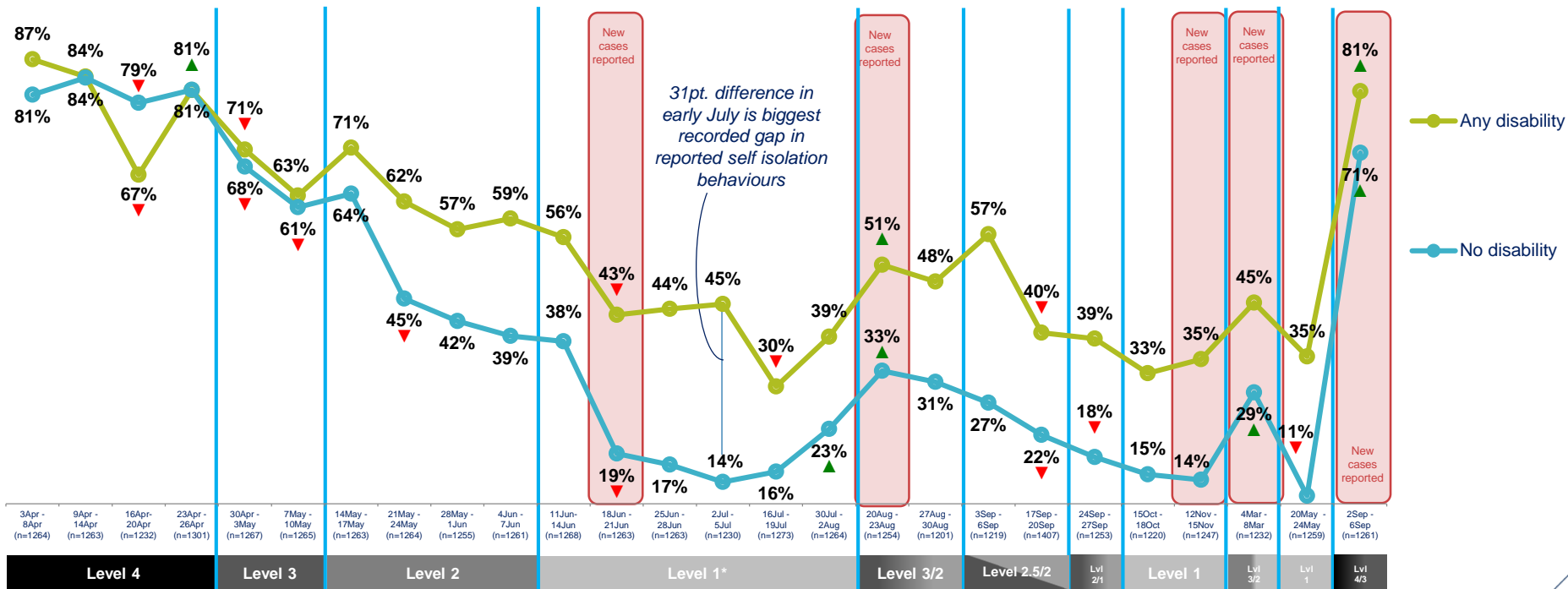
This classification is described in the grid to the right.

Other classifications by disability type and severity are possible, but due to the low incidences at which these occur in the population, there is limited scope to deploy other classifications within COVID-19 impact tracking.

	No – no difficulty	Yes – some difficulty	Yes – a lot of difficulty	Cannot do at all
a. Do you have any difficulty seeing, even if wearing glasses?	No disability	Any disability		
b. Do you have any difficulty hearing, even if using a hearing aid?				
c. Do you have any difficulty walking or climbing steps?				
d. Do you have any difficulty remembering or concentrating?				
e. Do you have any difficulty (with self-care such as) washing or dressing?				
f. Using your usual (customary) language, do you have any difficulty communicating, for example understanding or being understood?				

In early lockdowns, New Zealanders with disabilities were not self isolating at different rates to the rest of the country, but as restrictions lifted, the gap between the two grew

Self isolation over time - % at least partially self isolating



ISO_1_TRAVEL Which, if any of the following best describes your approach to leaving the house over the last week, excluding for exercise?

Base: all adults 15+ in New Zealand *fieldwork frequency decreased from weekly during level 1



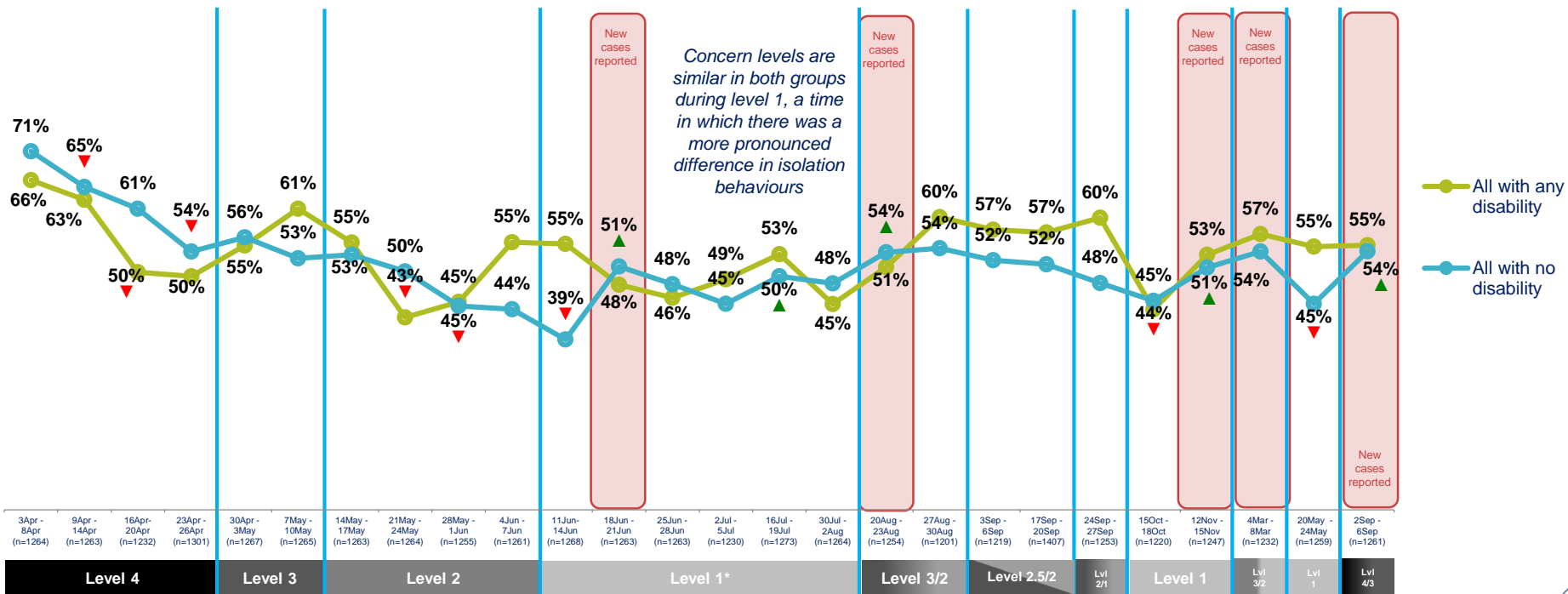
Indicates a statistically significant increase from previous time period



Indicates a statistically significant decrease from previous time period

Concern about infection is frequently higher among those with no disability and is unlikely to be a cause of greater rates of isolation among those with disabilities

Concern about risk of COVID infection



QPTUSE3. How personally concerned are you about each of the following?

Base: all adults 15+ in New Zealand *fieldwork frequency decreased from weekly during level 1



Indicates a statistically significant increase from previous time period

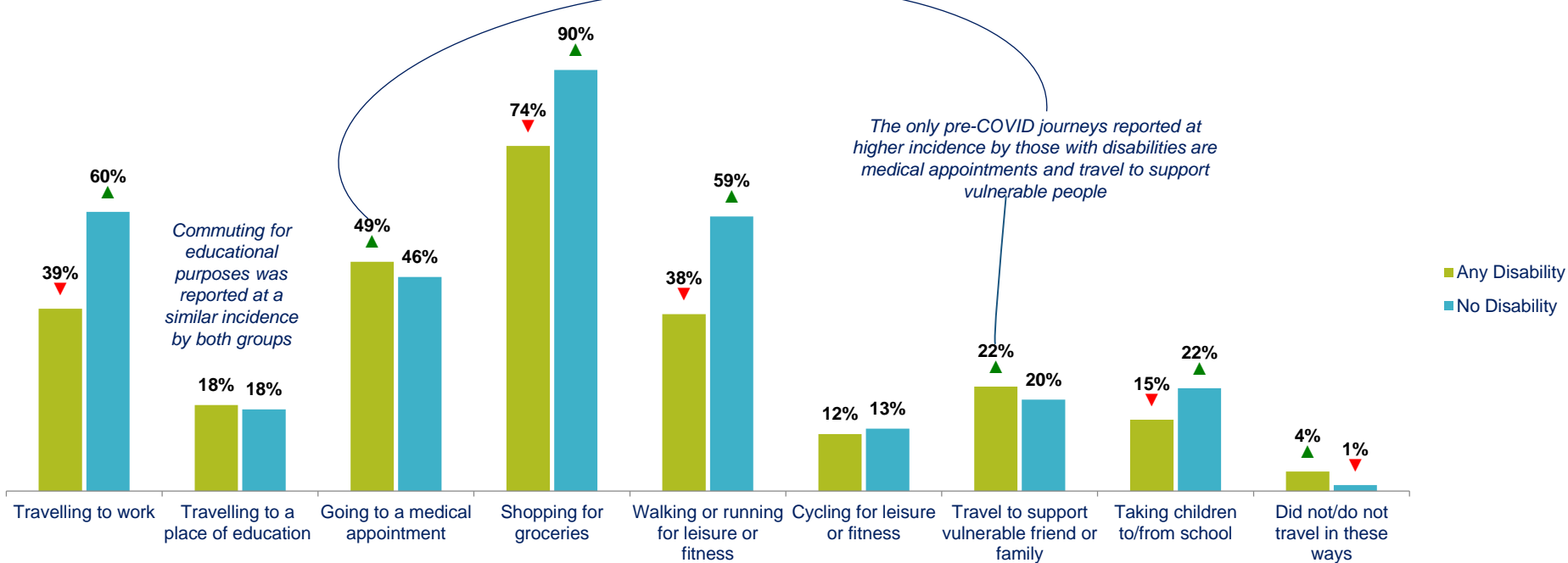


Indicates a statistically significant decrease from previous time period

Section 3 – Journeys

When it comes to *essential journeys*, it is notable that New Zealanders with disabilities reported their pre-COVID travel as generally lower than those without disabilities

Pre-lockdown essential journeys (data from benchmark waves)



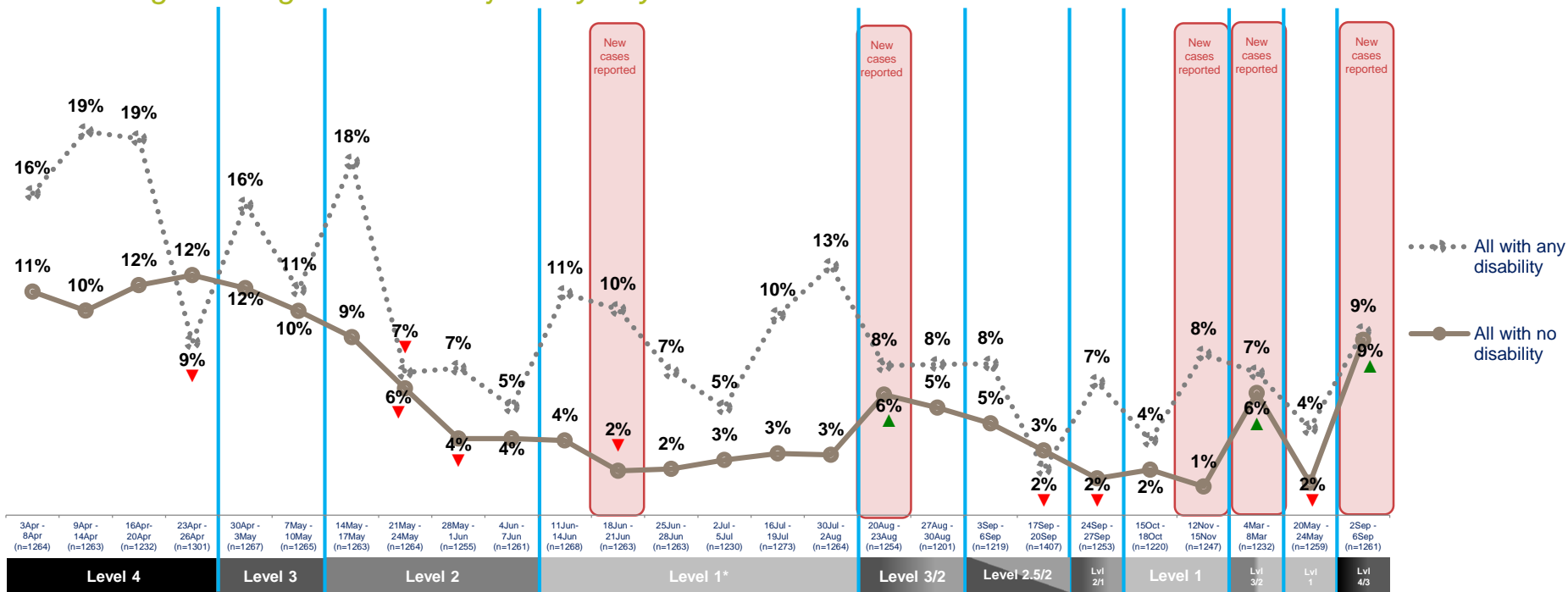
QJOURNEY1. Which, if any of the following types of journeys would you have made in a normal week (eg in February this year)?

Base: all adults 15+ in New Zealand in Benchmark: (n=3,759); all with any disability in Benchmark (n=410); all with no disability in Benchmark (n=3,349)



The proportion making no essential journeys at all has remained higher for those with disabilities most waves, but has a less straightforward relationship with alert levels

Percentage making no 'essential journeys' by wave



QJOURNEY1/QJOURNEY2. Which, if any of the following types of journeys would you have made in a normal week (eg in February this year)? And which, if any of the following types of journeys did you make during the last seven days?

Base: all adults 15+ with any disability Benchmark: (n=410); Wave 1 – 26 (n= c.130 – 163); all with no disability in Benchmark (n=3,349); wave 1-26 (n=1,099-, 1,244)



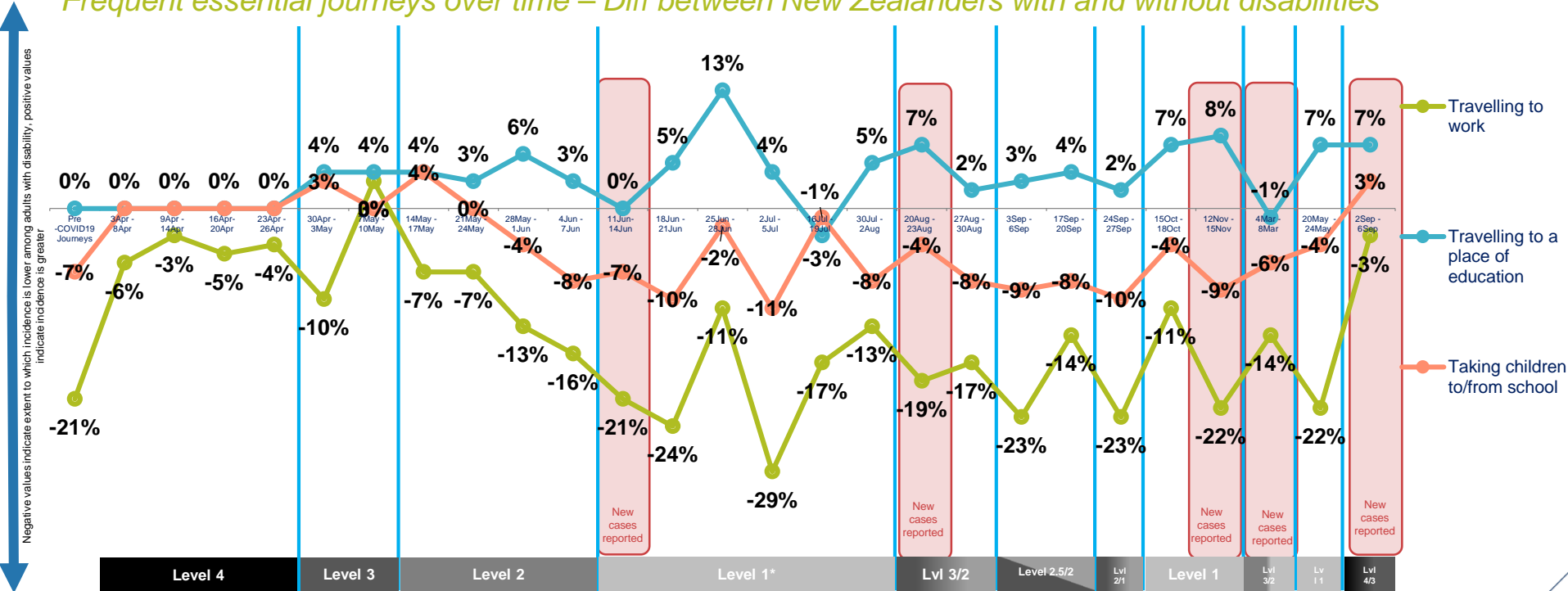
Indicates a statistically significant increase from previous time period



Indicates a statistically significant decrease from previous time period

Higher alert levels have tended to reduce the difference in frequency of essential journeys typically seen between the two groups

Frequent essential journeys over time – Diff between New Zealanders with and without disabilities

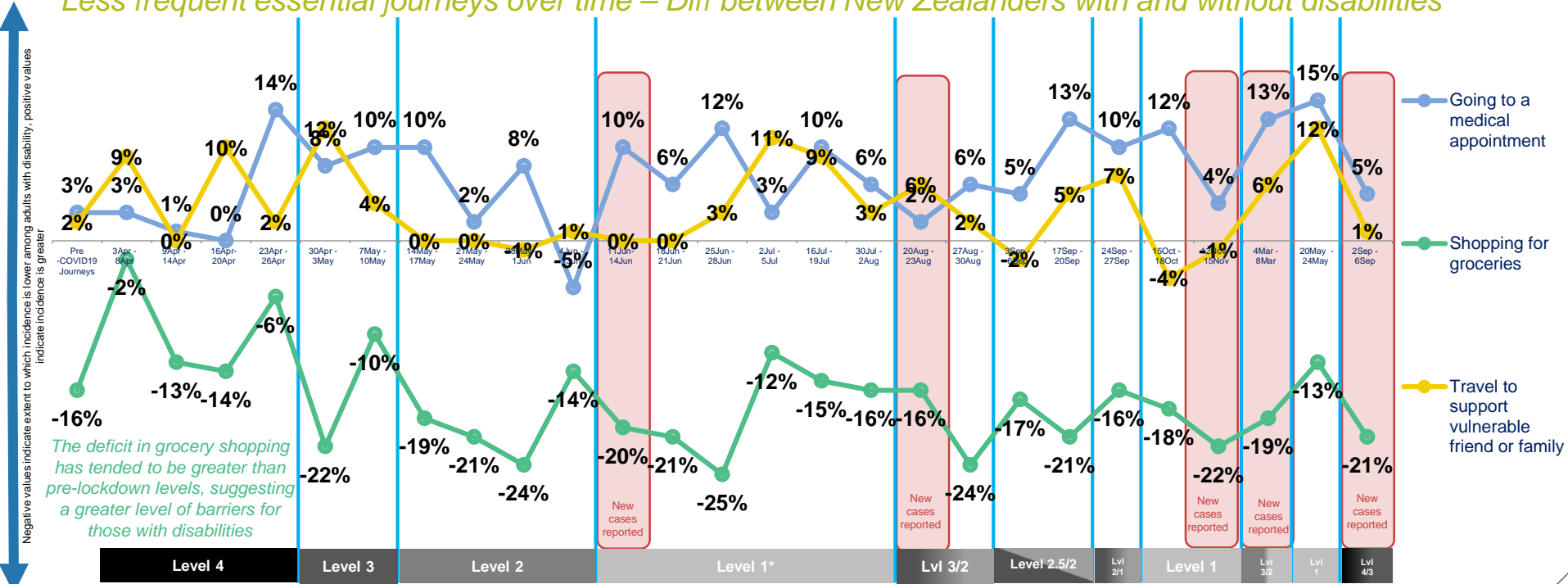


QJOURNEY1/QJOURNEY2. Which, if any of the following types of journeys would you have made in a normal week (eg in February this year)? And which, if any of the following types of journeys did you make during the last seven days?

Base: all adults 15+ with any disability Benchmark: (n=410); Wave 1 – 26 (n= c.130 – 163); all with no disability in Benchmark (n=3,349); wave 1-26 (n=1,099, 1,244)

Those with disabilities tend to travel more for medical appointments and to support vulnerable people

Less frequent essential journeys over time – Diff between New Zealanders with and without disabilities



QJOURNEY1/QJOURNEY2. Which, if any of the following types of journeys would you have made in a normal week (eg in February this year)? And which, if any of the following types of journeys did you make during the last seven days?

Base: all adults 15+ with any disability Benchmark: (n=410); Wave 1 – 26 (n= c. 130 – 163); all with no disability in Benchmark (n=3,349); wave 1-26 (n=1,099-1,244)



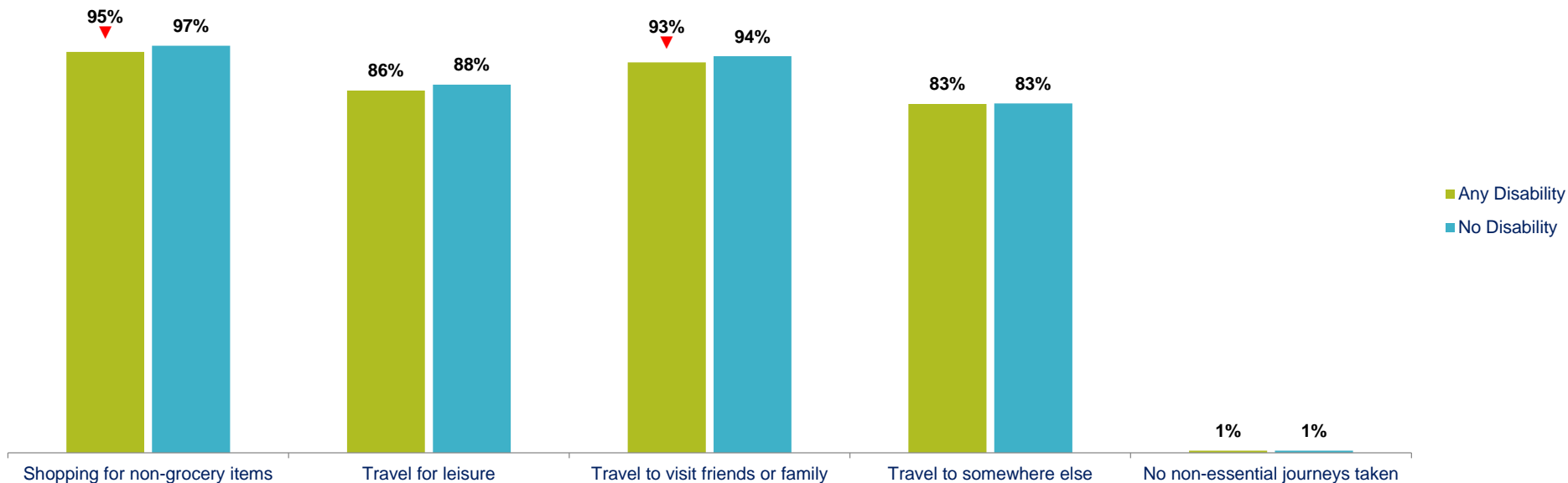
Indicates a statistically significant increase from previous time period



Indicates a statistically significant decrease from previous time period

Comparatively, when it comes to non-essential travel, there is little difference in the reported *pre-lockdown* travel between the two groups

Pre-lockdown non-essential journeys



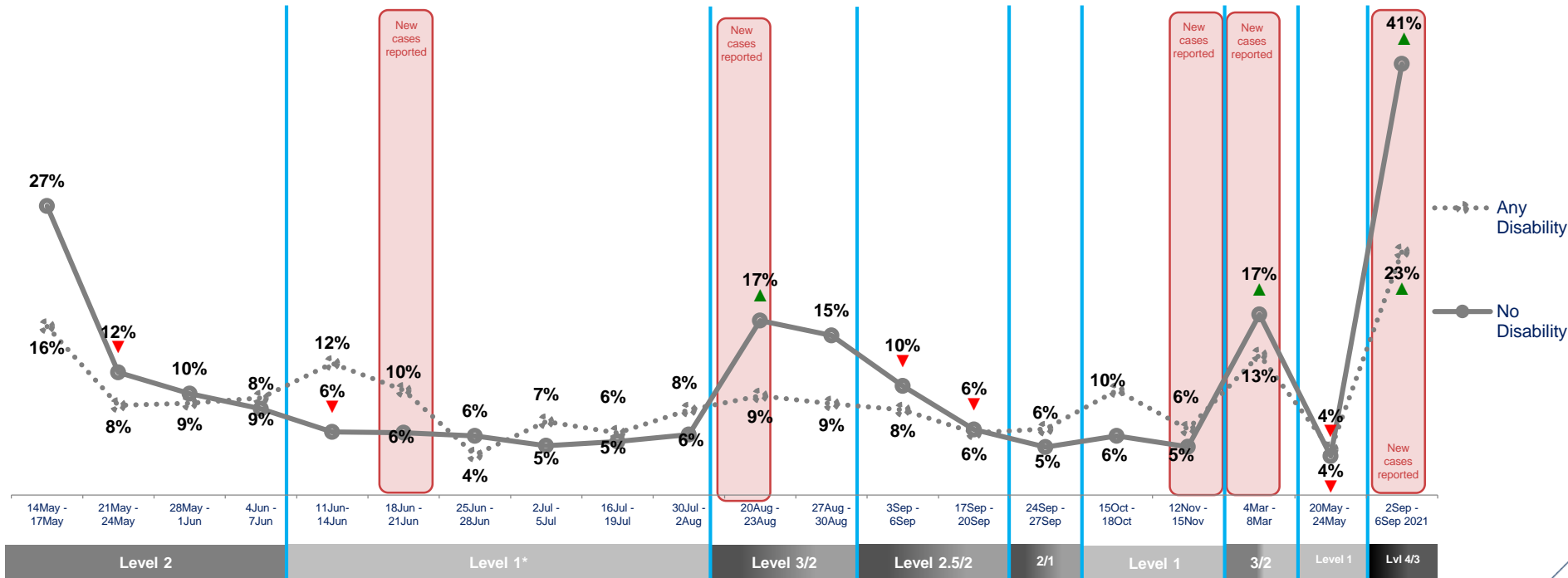
QMODE1A/2A. How would you normally make each of the following types of journeys?

Base: all adults with a disability 15+ interviewed between wave 7 and wave 9 (Benchmark for non-essential journeys) (n=486); all with no disability (n=3,295)



This has been reflected during lockdowns, when the proportion of New Zealanders with disabilities making none of these journeys has not been comparatively high

Percentage making no 'non-essential journeys' by wave



QM0DE1A/2A. How would you normally make each of the following types of journeys? And thinking about other types of journeys you might have made in the past seven days.

How, if at all did you make each of the journeys listed below in the past seven days?

Base: all adults 15+ interviewed since initial alert level 2 in New Zealand (c. 1,200 per wave)

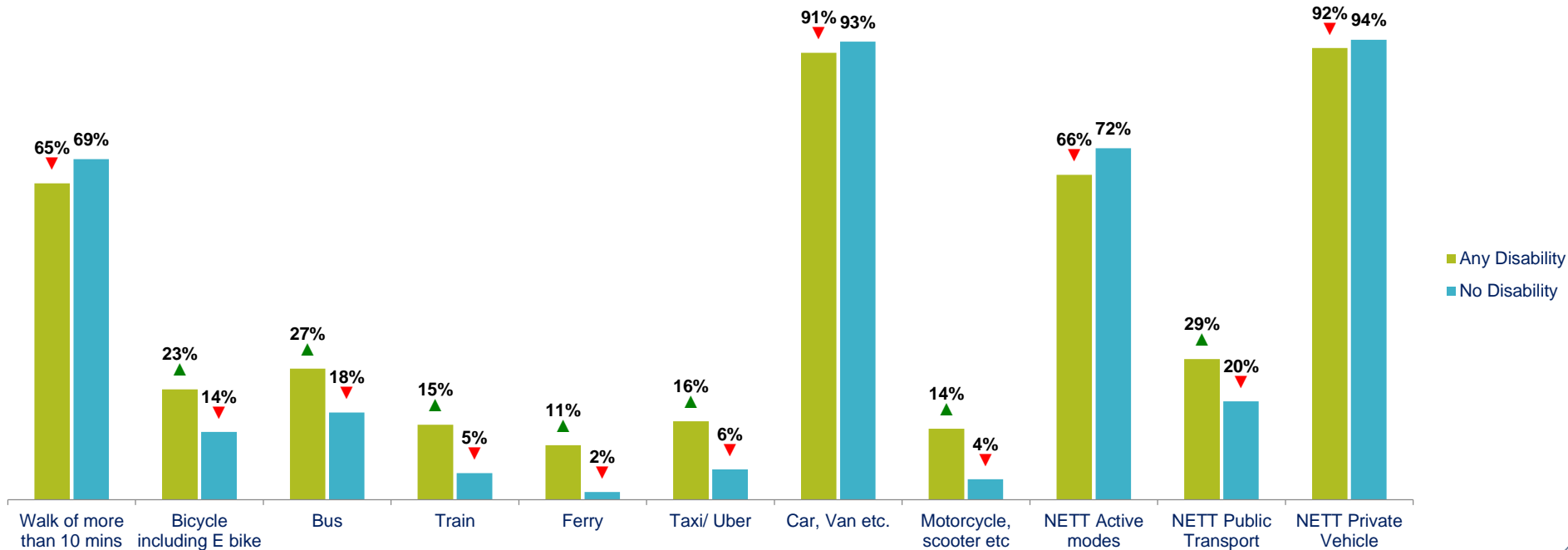




Section 4 – Modes

Weekly pre-COVID usage of public transport was almost 50% higher among those with disabilities, with bicycles and private hire cars also over-indexing

Pre-COVID mode usage by disability



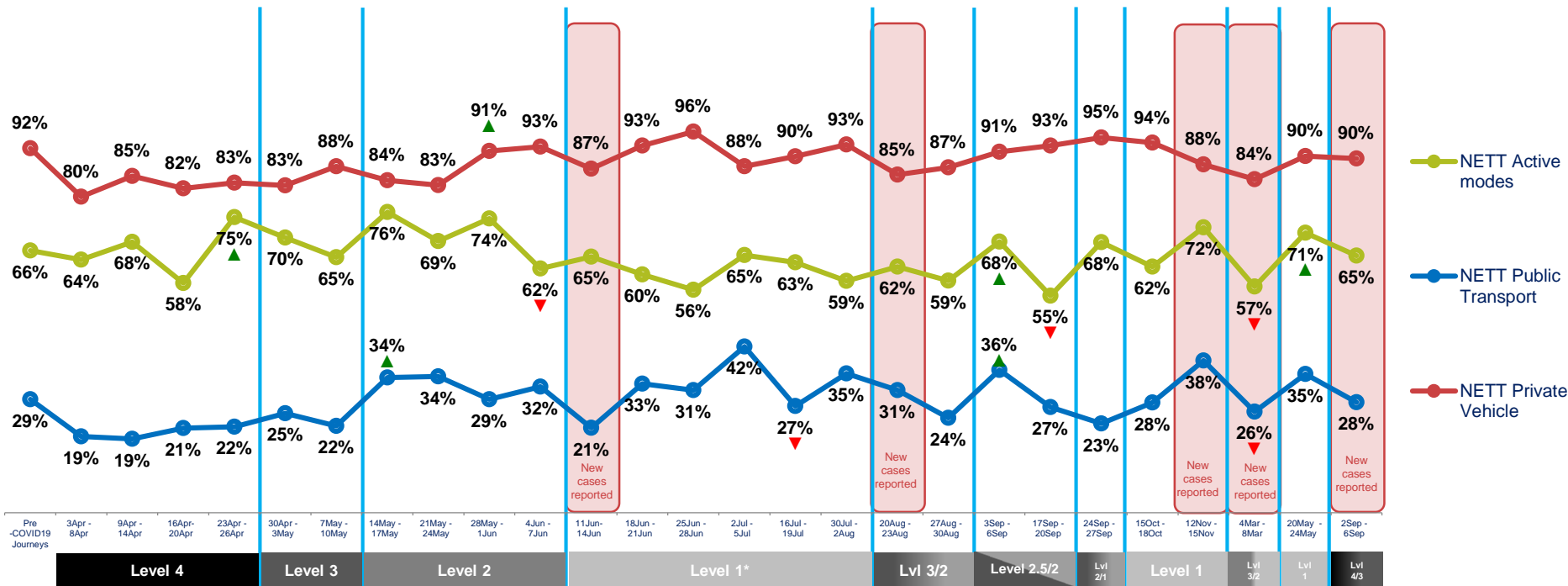
QFREQ1 – And in the course of a normal week, on how many days would you normally travel via each of the methods listed below?

Base: all adults 15+ in New Zealand in Benchmark: (n=3,759); all with any disability in Benchmark (n=410); all with no disability in Benchmark (n=3,349)



Weekly public transport and active mode usage have not been significantly reduced among adults with disabilities during the most recent lockdown

Changes in mode usage by wave – all adults with a disability



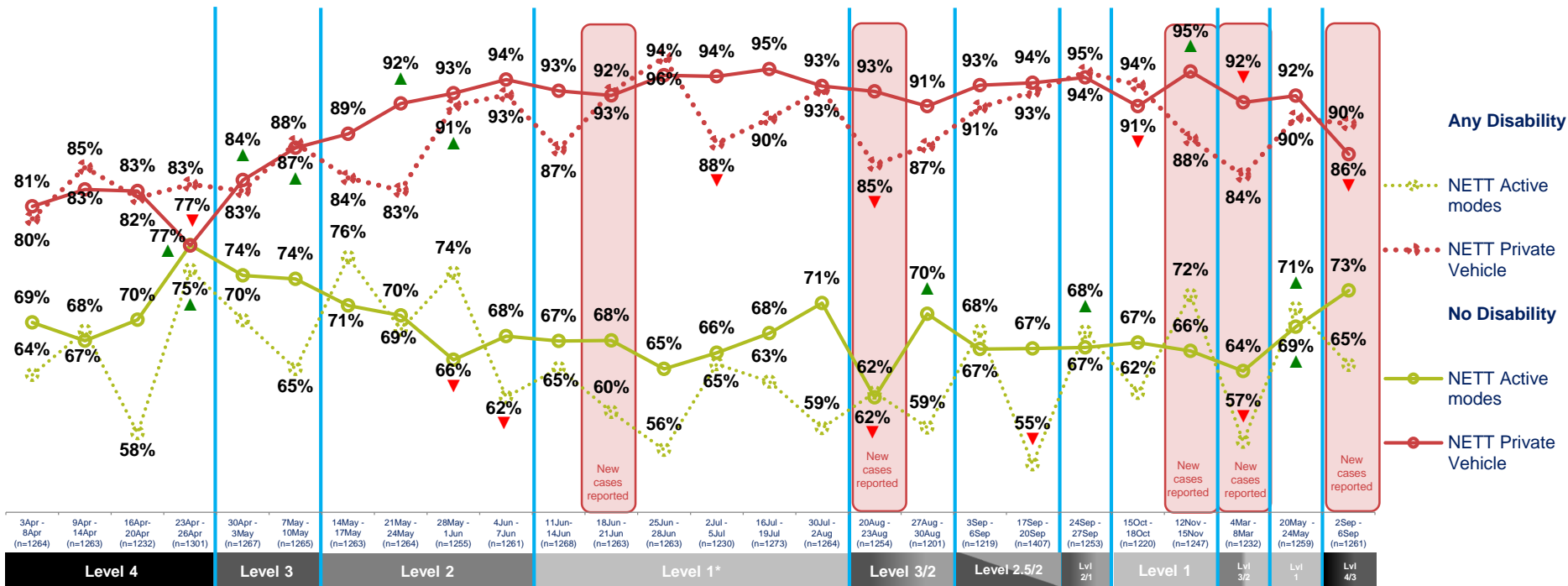
QFREQ1/QFREQ2 – And in the course of a normal week, on how many days would you normally travel via each of the methods listed below? And during the past seven days, on how many days have you travelled via each of the modes listed below?

Base: all adults 15+ with any disability Benchmark: (n=410); Wave 1 – 26 (n= c.130 – 163)



There has not been sustained, substantial difference between those with disabilities and those without when it comes to weekly rates of walking, cycling and driving

Changes in mode usage



QFREQ1/QFREQ2 – And in the course of a normal week, on how many days would you normally travel via each of the methods listed below? And during the past seven days, on how many days have you travelled via each of the modes listed below?

Base: all adults 15+ with any disability Benchmark: (n=410); Wave 1 – 26 (n= c.130 – 163); all with no disability in Benchmark (n=3,349); wave 1-26 (n=1,099-,1,244)



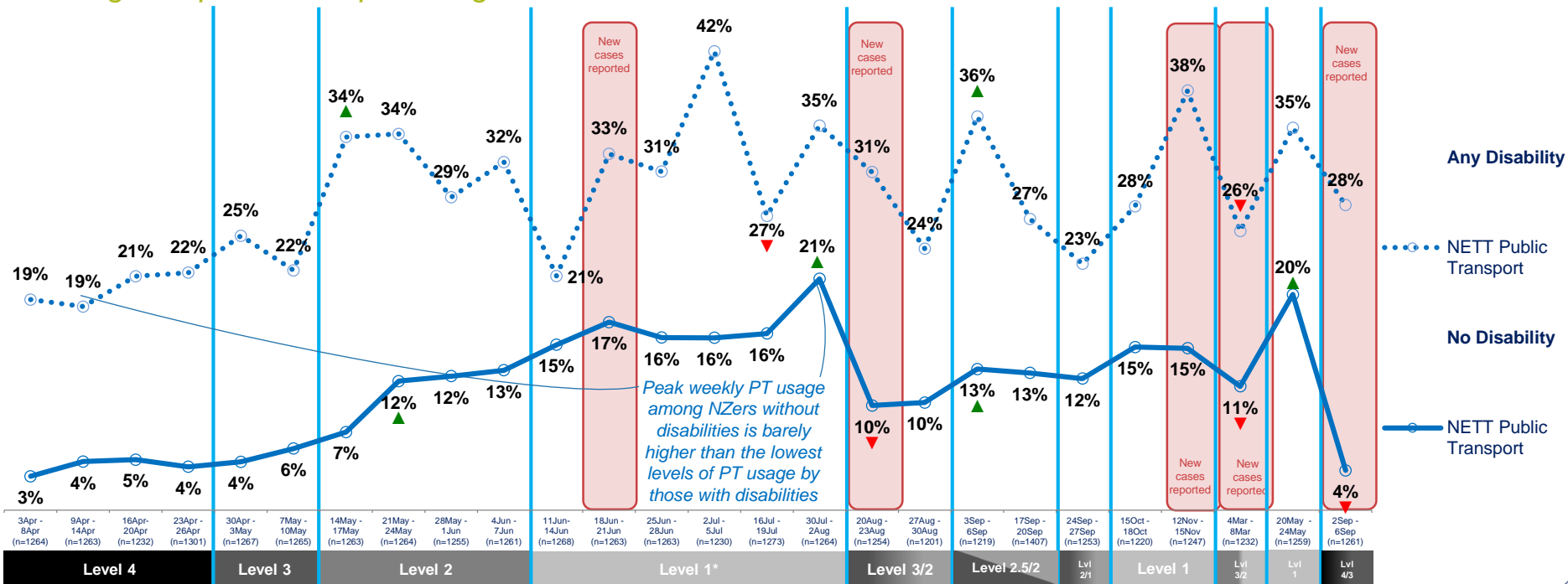
Indicates a statistically significant increase from previous time period



Indicates a statistically significant decrease from previous time period

However, even when travel restrictions have been substantial, those with disabilities have consistently used public transport at a much higher rate

Changes in public transport usage



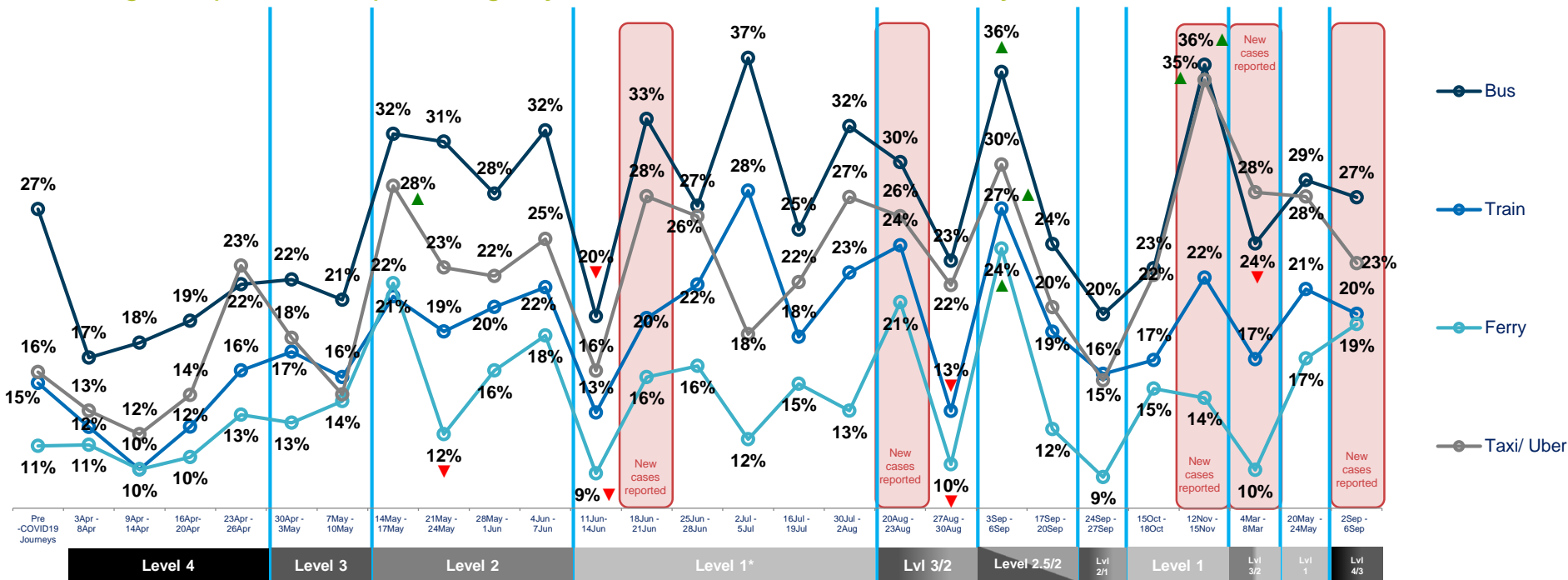
QFREQ1/QFREQ2 – And in the course of a normal week, on how many days would you normally travel via each of the methods listed below? And during the past seven days, on how many days have you travelled via each of the modes listed below?

Base: all adults 15+ with any disability Benchmark: (n=410); Wave 1 – 26 (n= c.130 – 163); all with no disability in Benchmark (n=3,349); wave 1-26 (n=1,099-1,244)



This extends to all modes on the PT network, even ferry usage - it is notable that reliance on taxis seems to have significantly grown for adults with disabilities

Changes in public transport usage by wave – all adults with a disability



QFREQ1/QFREQ2 – And in the course of a normal week, on how many days would you normally travel via each of the methods listed below? And during the past seven days, on how many days have you travelled via each of the modes listed below?

Base: all adults 15+ with any disability Benchmark: (n=410); Wave 1 – 26 (n= c.130 – 163)



Indicates a statistically significant increase from previous time period



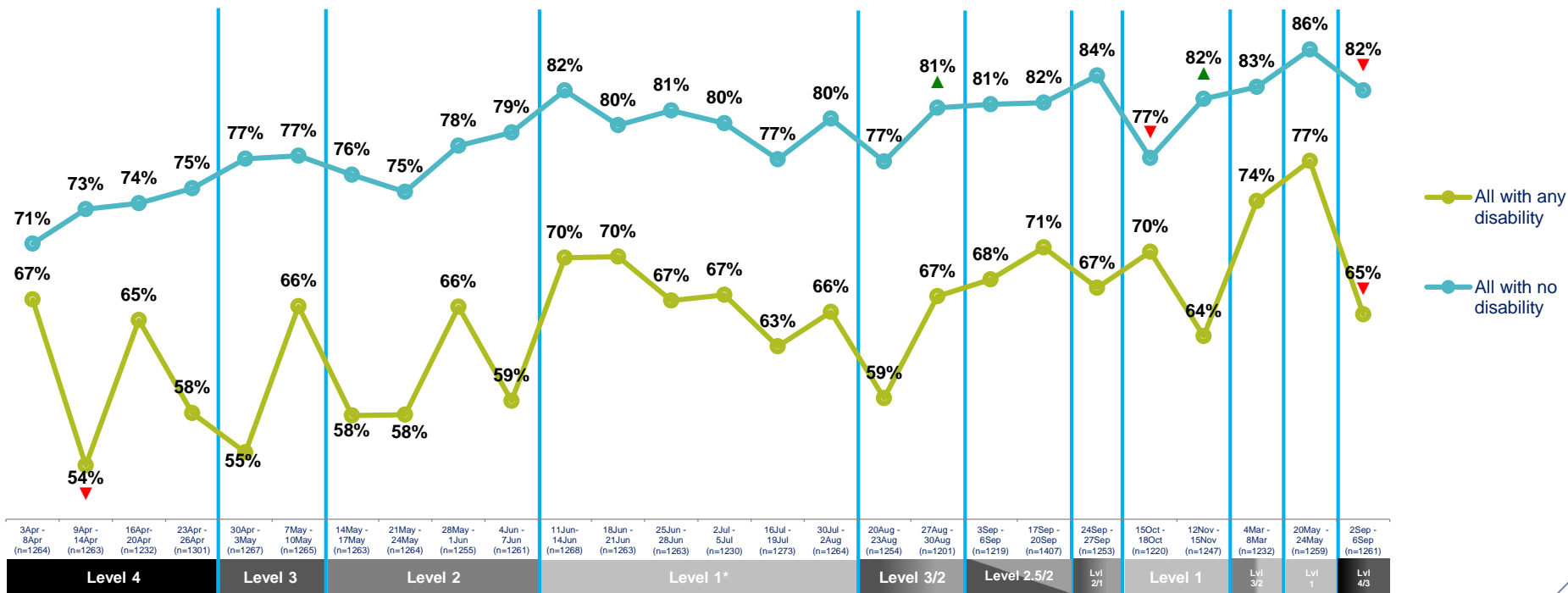
Indicates a statistically significant decrease from previous time period



Section 4 – Types of barriers to travel

Regardless of levels of restrictions, those with disabilities are less likely to agree that they can easily get where they need to, but this trends positively as restrictions lift

I can easily get to the places I need to go – percentage agree



QATT. To what extent do you agree or disagree with the following statements?

Base: all adults 15+ with any disability Benchmark: (n=410); Wave 1 – 26 (n= c.130 – 163); all with no disability in Benchmark (n=3,349); wave 1-26 (n=1,099 - 1,244)



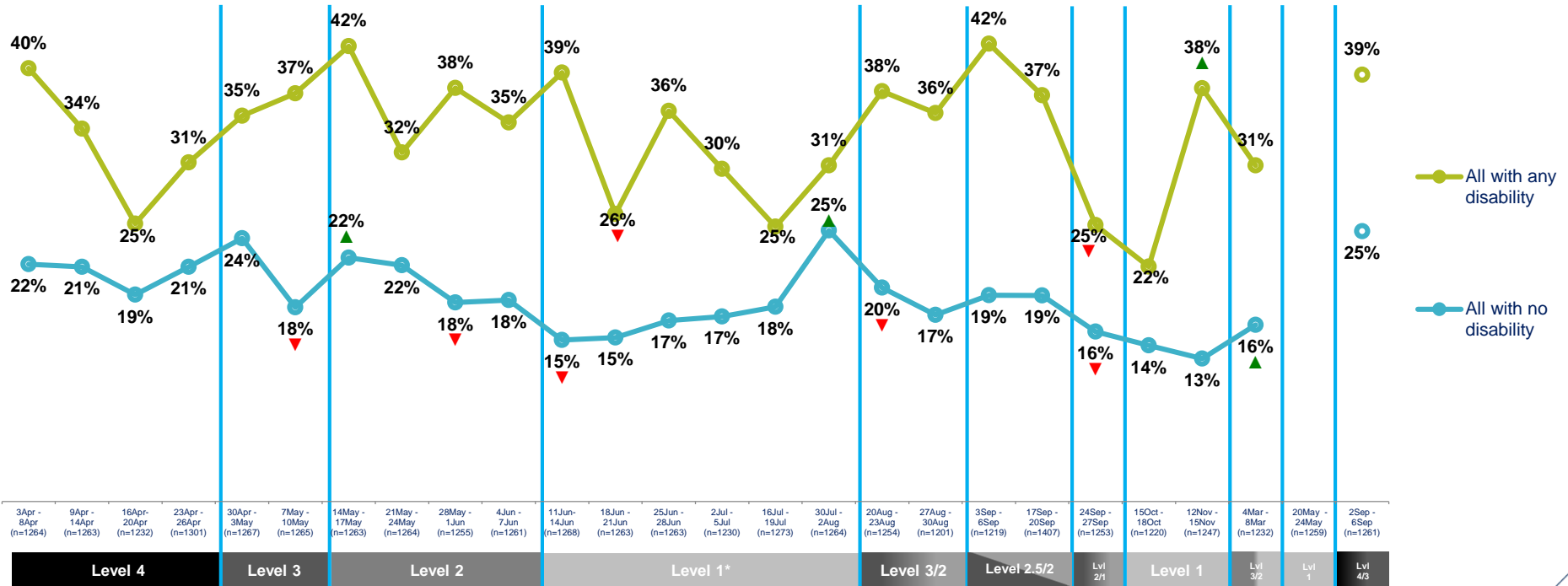
Indicates a statistically significant increase from previous time period



Indicates a statistically significant decrease from previous time period

As many as 2 in 5 of those with disabilities find it hard to get to the places they need to, with these peaks often occurring at the start of a change in alert level

At the moment it's hard to work out how to get to the places I need to go - % Agree



QATT. To what extent do you agree or disagree with the following statements?

Base: all adults 15+ with any disability Benchmark: (n=410); Wave 1 – 26 (n= c.130 – 163); all with no disability in Benchmark (n=3,349); wave 1-26 (n=1,099 - 1,244)



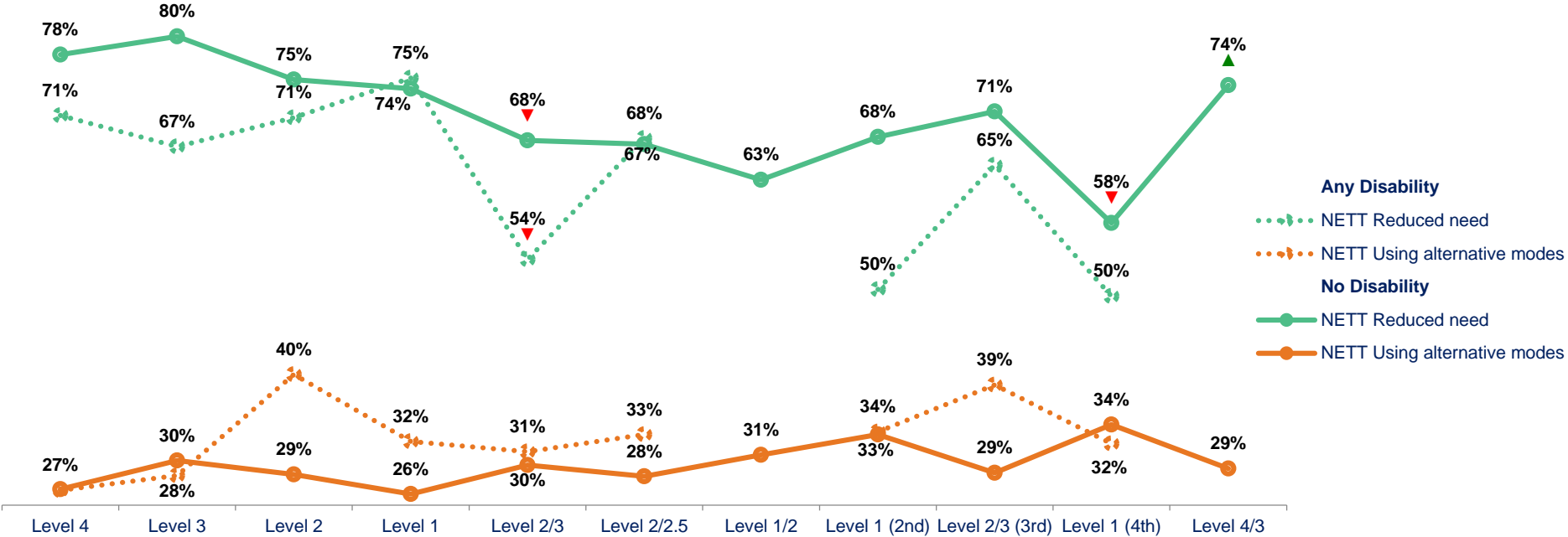
Indicates a statistically significant increase from previous time period



Indicates a statistically significant decrease from previous time period

For those who had reduced their weekly PT usage, there has not been a pronounced difference in the proportion citing reduced needs and alternative modes as a cause

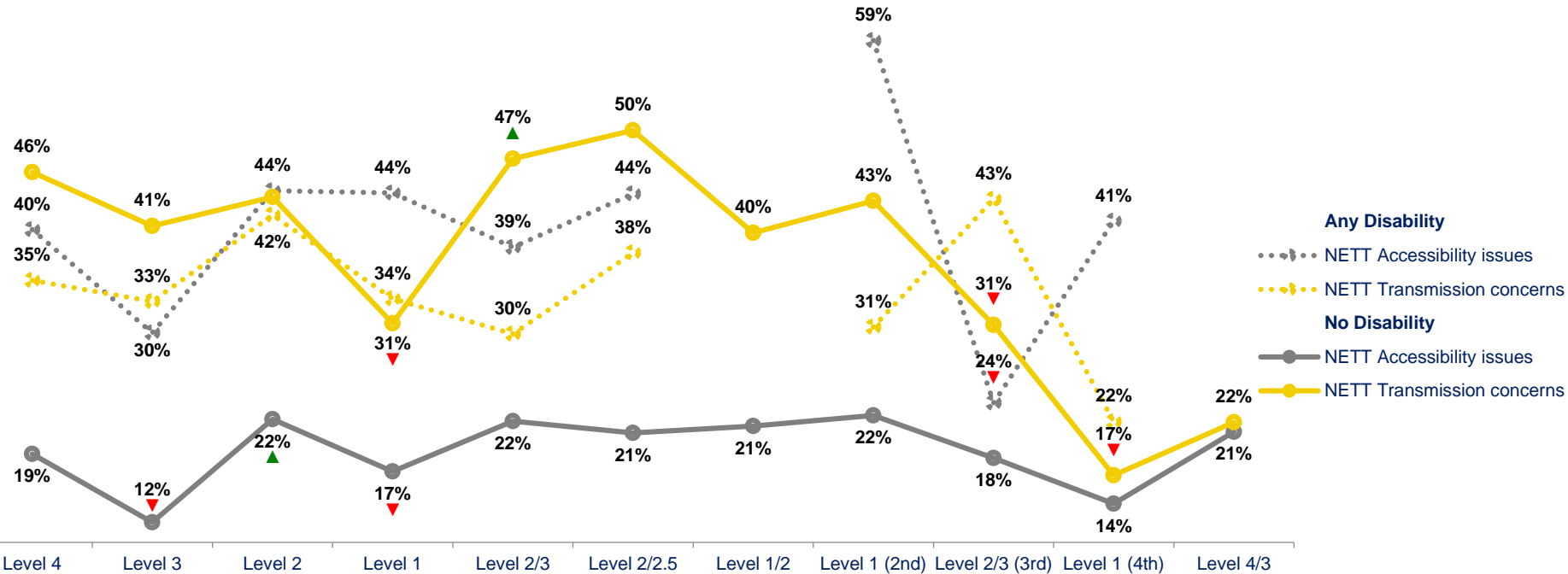
Reasons for decreased PT usage by alert level – need and mode switching



QDEC - For which, if any of the following reasons, has your use of public transport decreased?
 Base: decreasing PT usage in past week; current alert level: level 1 (2nd) among new Zealanders with no disability (n=130-848) New Zealanders with a disability (n=32-148)
 * note, base in Level 1/2 (n=18) and Level 4/3 (n=22) too low among New Zealanders with disabilities for statistical analysis

The only pronounced difference in PT barriers is accessibility, with service reductions and lack of available assistance keeping some with disabilities off services

Reasons for decreased PT usage by alert level – accessibility and transmission concerns



QDEC - For which, if any of the following reasons, has your use of public transport decreased?

Base: decreasing PT usage in past week; current alert level: level 1 (2nd) among new Zealanders with no disability (n=130-848) New Zealanders with a disability (n=32-148)

* note, base in Level 1/2 (n=18) and Level 4/3 (n=22) too low among New Zealanders with disabilities for statistical analysis



