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## COVID-19 impacts worse for Māori, Pasifika and disabled people, study finds

Results of a major nationwide study show the impacts of COVID-19 have been worse for Māori, Pasifika, and disabled people.

The [study](#), published today, is based on survey research with 990 people who caught COVID-19 before 1 December 2021. Information was also collected through in-depth interviews with 52 people.

“The COVID-19 pandemic has affected everyone but it’s had much greater health, social, and financial impacts on populations that are already significantly disadvantaged,” said study co-leader Dr Lynne Russell (*Ngāti Kahungunu, Rangitāne, Kāi Tahu, Ngāti Porou*) from Te Herenga Waka—Victoria University of Wellington.

“Results of the survey research we carried out for this study show Māori, Pasifika, and disabled people were more likely to report barriers to healthcare when they had the virus. They were also more likely to report poorer mental health and higher rates of financial stress,” Dr Russell said.

Key findings include:

- Māori and Pasifika found it harder to see a GP when they had COVID-19, mainly due to the difficulty of getting an appointment and cost: 43 percent of Māori and 36 percent of Pasifika had seen a GP, compared with 55 percent of Pākehā and other participants
- disabled people were also more likely to report barriers to seeing a GP, either because they didn’t have transport or a carer or support person, or because they owed money to their health provider
- Māori (13 percent) and Pasifika (14 percent) were more likely to report they were unable to afford a prescription medication since getting COVID-19, compared with 5 percent of other participants
- levels of anxiety and depression among respondents were high: 75 percent of Pasifika and 62 percent of Māori reported anxiety or depression, compared with 56 percent of other participants
- experience of anxiety or depression was much more likely to be reported among disabled people, indicating significant mental health needs for those with disabilities
- financial concerns contributed to stress for many, with 57 percent of Māori and 40 percent of Pasifika reporting money worries, compared with 30 percent of other participants
- since having COVID-19, 18 percent of Pasifika and 12 percent of Māori participants said their whanau was “doing worse”; in comparison, just 2 percent of other participants said their whanau was “doing worse”

- Māori and Pasifika were also more likely to report needing ongoing support: 23 percent of Māori and 21 percent of Pasifika said they continued to need support since having COVID-19, compared with 16 percent of other participants.

A significant proportion of participants in the study reported symptoms of Long COVID.

“About one in five reported Long COVID symptoms, such as fatigue, brain fog, shortness of breath, muscle aches, and joint pain,” said Dr Mona Jeffreys, who co-led the research.

The risk of Long COVID was higher among people with pre-existing heart disease or a high body mass index (BMI).

Dr Jeffreys said many of those with Long COVID symptoms felt there was a lack of understanding of the condition by health professionals.

“About half felt the healthcare they received wasn’t adequate and reported not feeling listened to or understood,” she said.

The study contains a list of recommendations to address the problems the researchers identified. Among the key recommendations, the study calls on the government to:

- ensure the ongoing COVID-19 response is based on Te Tiriti o Waitangi and responds to the needs of Māori communities
- significantly reduce barriers to primary healthcare, especially for Māori, Pasifika, and disabled people, to address inequities in health and wellbeing
- provide a wider range of services to support whānau and families in the future and fund community organisations to deliver these services
- develop a mental health plan to deal with the fallout from COVID-19 as well as future pandemics
- revisit the recommendations of the Welfare Expert Advisory Group, particularly in relation to income support policies
- reconsider sick leave and employment support policies to ensure that in future pandemics people can take time off work when unwell
- develop a consumer-led Long COVID service, integrated with primary health care services.

**For more information, contact [Dr Lynne Russell](mailto:lynne.russell@vuw.ac.nz) on [lynne.russell@vuw.ac.nz](mailto:lynne.russell@vuw.ac.nz) or 022 359 8212, or [Dr Mona Jeffreys](mailto:mona.jeffreys@vuw.ac.nz) on [mona.jeffreys@vuw.ac.nz](mailto:mona.jeffreys@vuw.ac.nz) or 027 418 7455.**

The *Impacts of COVID-19 in Aotearoa—Ngā Kawekawe o Mate Korona* report is available [here](#).

### **About the study**

Survey research for the study was carried out in 2022. Anyone aged 16 and over who had COVID-19 before 1 December 2021 was able to participate. About 8000 people who had a positive COVID-19 test before this date received a letter inviting them to take part.

Results are based on responses from 990 people who completed one or more of four surveys available. Participants were not representative of the cohort of all eligible people. However, it’s not possible to assess the impact of this potential bias selection on the results.

Dr Russell and Dr Jeffreys led the multi-disciplinary team of researchers who worked on the study. [Dr Marianna Churchward](#) (Lotofaga, Faleasiu, Samoa) led the Pacific arm of the research. The work was funded by Manatū Hauora—Ministry of Health.

**University name:** The University's full name is Te Herenga Waka—Victoria University of Wellington. Where space constraints require our name to be abbreviated, please retain the word 'Wellington' to ensure our location is clear to readers.

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