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# USE OF HEALTHCARE SERVICES BY ADULTS IN IRELAND FROM DIFFERENT COUNTRIES OF ORIGIN

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## INTRODUCTION

Ireland has experienced strong inward migration in the last two decades, leading to a greater diversification of the population in terms of nationalities, ethnicities, cultures, and religions. The 2016 Irish Census revealed that overall, 17.3% of the resident population of Ireland were born outside of Ireland. The aim of this research is to investigate whether immigrants (i.e., those not born in Ireland) differ from those born in Ireland in terms of their use of healthcare services. An understanding of how frequently immigrants to Ireland encounter the healthcare system is required to help respond to their healthcare needs and facilitate integration.

# **DATA AND METHODS**

We used data from the 2016 *Healthy Ireland* survey, a nationally representative survey of residents of the Republic of Ireland. Data on over 6,300 individuals were analysed where immigrant status was based on the individual's stated country of birth<sup>2</sup>. Three categories of country of birth could be distinguished for the purpose of the analysis of this paper:

- Born in Ireland (83.5% of the sample)
- Born in the UK (6.1%); and
- Born in countries other than Ireland or the UK 'Other' (10.4%).

The main outcomes compared were whether a respondent had attended a General Practitioner (GP) in the previous 12 months, and whether the respondent had attended a consultant doctor in the previous 12 months. Other important influences such as gender, age, education and employment status, medical card

<sup>&</sup>lt;sup>1</sup> This Bulletin summaries the findings from: Barlow, P., Mohan, G., and Nolan, A. "Utilisation of healthcare by immigrant adults relative to the host population: Evidence from Ireland", *Journal of Migration and Health*, Available online: https://doi.org/10.1016/j.jmh.2021.100076.

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<sup>&</sup>lt;sup>2</sup> Specifically, *Healthy Ireland* asks, 'In which country were you born?' where a response of 'the UK' includes England, Scotland, Wales, Northern Ireland, Isle Of Man, Jersey and Guernsey.

status, having private health insurance, smoking and health status, as well as locational factors including supply of GPs in their neighbourhood were considered in the analysis.

# RESULTS

Figure 1 (i) indicates that the use of GP services was highest among the native-born Irish group, and GP attendance for those born in the UK was similar to the Irishborn group. However, a much lower proportion of the sample who were born in countries other than Ireland or the UK, the 'Other' immigrant group, used GP services compared to the native-born and UK group.

The pattern was slightly different for consultant use, demonstrated in Figure 1 (ii), where a greater proportion of the UK-born group used consultant services than those born in Ireland, though the proportion using consultant doctor services among the 'Other' group was again substantially lower than the Ireland-UK groups of origin.

Further statistical analysis, accounting for factors such as health status and health insurance entitlements, confirmed that those born outside Ireland or the UK, the 'Other' group, were less likely to visit a GP or a consultant doctor than the native-born Irish population.



## FIGURE 1 Country of birth and utilisation of GP and consultant doctor services

## CONCLUSIONS

Immigrants represent a key, growing and diverse demographic in Ireland. This investigation finds that some groups of immigrants were less likely to use healthcare services in 2016. The finding arises despite the Health Service Executive's publication of an *Intercultural Health Strategy* in 2008, updated in 2019, which outlines objectives to promote and facilitate equitable access to healthcare for migrants.

The results show that while the group of non-UK 'Other' immigrants have relatively lower interactions with the health system in Ireland, these patterns are not fully explained by differences in need for healthcare nor by differences in healthcare entitlements. This suggests that other barriers to access (e.g., willingness to use healthcare services, knowledge of the healthcare system, etc.) may be important for this group. Whitaker Square, Sir John Rogerson's Quay, Dublin 2 Telephone **+353 1 863 2000** Email **admin@esri.ie** Web **www.esri.ie** Twitter **@ESRIDublin** 

