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# **Utilisation of Health Care Services by Older Adults: A New Zealand Study**

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## ***ABSTRACT***

This study uses data provided by 354 respondents aged 60 years and over from throughout New Zealand to test Andersen's behavioural model of health care utilisation incorporating expanded sets of indicators of predisposing, enabling, need, and health care utilisation constructs. When hierarchical multiple regression analysis was undertaken, 38% of the total variance relating to the number of visits to the GP was explained, representing a substantial increase compared with previous studies related to health utilisation behaviours of older adults. Other, less common measures of health care utilisation also provided higher  $R^2$  values, with 41% of the variance in the number of prescription items used in the previous 12 months accounted for, and 25% of the variance of the number of other health professionals seen (other than the GP) over the previous 12 months explained by the predictors. While only 18% of the total variance was explained for the number of days spent in bed because of illness, this variable was considered suspect due to significant skewness. Unlike previous research, significant predictors were not predominantly need characteristics, with ethnicity and health worry proving to be consistent predictors of formal health care utilisation. These results suggest that using measures of health care which are more representative of the wide range of health services used by older adults, and using indicator sets more pertinent to the aged, increases the predictive power of the behavioural model.

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