Active transport to and from school

This report presents information from the New Zealand Health Survey on the estimated number of school-aged children (5–14 years) who usually used active transport (such as walking or cycling) to travel to and from school.

Key facts

- In 2023/24, 38.8% of children aged 5–14 years used active transport to travel to or from school.
- There has been no notable change in the percentage of children using active transport to school since 2011/12.
- In general, older children (aged 10–14 years) were more likely to participate in active transport than younger children (5–9 years).
- In 2023/24, there was no significant difference in the use of active transport between ethnic groups, socioeconomic deprivation groups, or by health region.

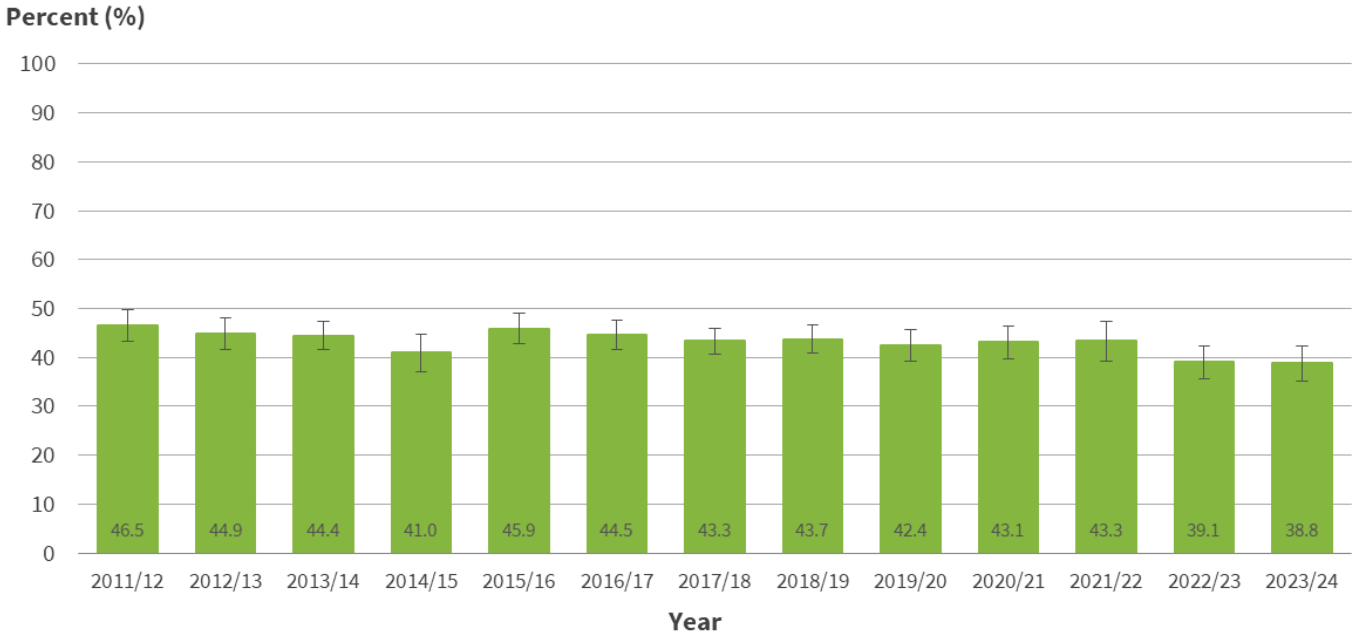
Using active transport to school is good for children's health

Using active transport to and from school is an effective way for children to get some physical activity each day. Sport New Zealand (2024) estimates that in 2023, only 62% of New Zealand children aged 5–11 years met the physical activity guidelines for the amount of daily physical activity. Considering the high child obesity rate in New Zealand, this is a relatively easy way to increase physical activity in children. The latest results from the New Zealand Health Survey indicate that around one in eight children (12.5%) were obese in 2023/24 (Ministry of Health 2024). Active transport also has other benefits, including producing less (or no) air pollution, noise pollution or greenhouse gases.

Less than 40% of 5–14-year-olds used active transport to or from school in 2023/24

Between July 2023 and June 2024 (2023/24), 38.8% of children aged 5–14 years usually travelled to and from school using a physically active form of transport, equivalent to around 262,000 children. This result is very similar to the previous year (Figure 1).

Figure 1: Percent of children who usually used physically active transport to and from school, children aged 5–14 years, 2011/12–2023/24

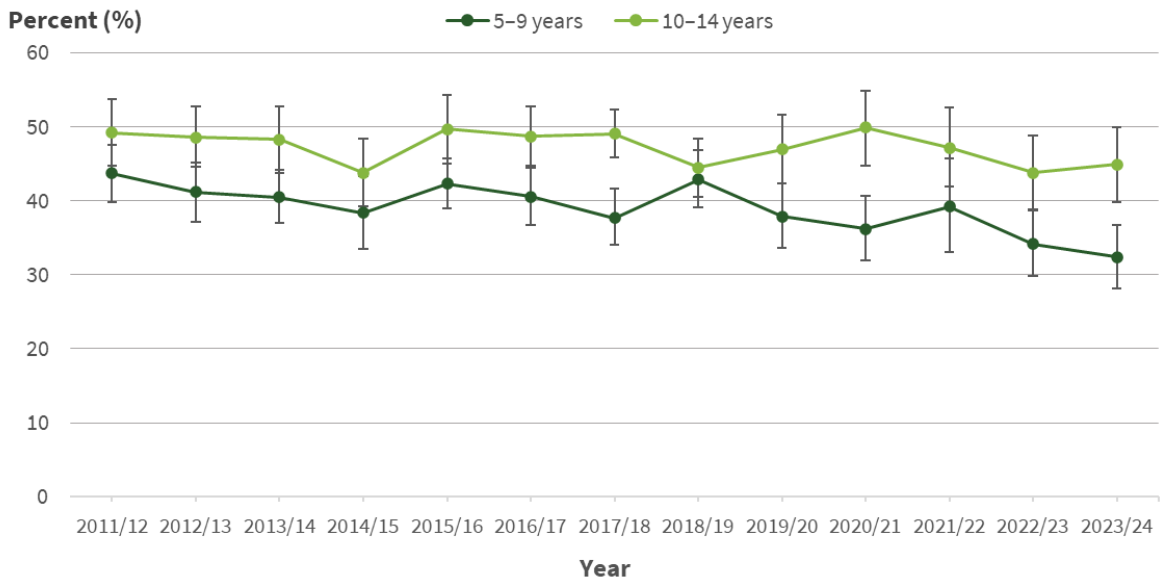


Notes: 95% confidence intervals (95%CIs) have been presented as vertical bars.
Source: New Zealand Health Survey (Ministry of Health 2024)

Use of active transport is more common in older children

In 2023/24, 32.4% (95%CI 28.2–36.8) of children aged 5–9 years and 44.9% (95%CI 39.8–50.0) of children aged 10–14 years usually travelled to and from school using active transport (Figure 2). The difference in use of active transport between older and younger children was larger in 2023/24 than the previous year, but has fluctuated over time.

Figure 2: Percent of children who usually used physically active transport to and from school, by age group, 2011/12–2023/24



Note: 95% confidence intervals have been presented as vertical bars.
Source: New Zealand Health Survey (Ministry of Health 2024)

Use of active transport is similar between boys and girls

There was no statistically significant difference in the use of active transport between boys and girls aged 5–14, either at the total level or in any age group, in 2023/24 (Table 1).

Table 1: Percent of children who usually used active transport to and from school, by age group and sex, 2023/24

Age group (years)	Unadjusted prevalence (95%CI)	
	Boys	Girls
5–9	33.8 (27.6–40.5)	30.8 (25.7–36.4)
10–14	47.1 (40.5–53.7)	42.5 (37.0–48.1)
Total	40.6 (35.8–45.6)	36.8 (33.2–40.6)

Source: New Zealand Health Survey (Ministry of Health 2024a)

Active transport use was similar across most ethnic and deprivation groups

After adjusting for differences in age and sex, there were no statistically significant differences for Māori, Pacific or Asian children versus their comparison groups (Table 2).

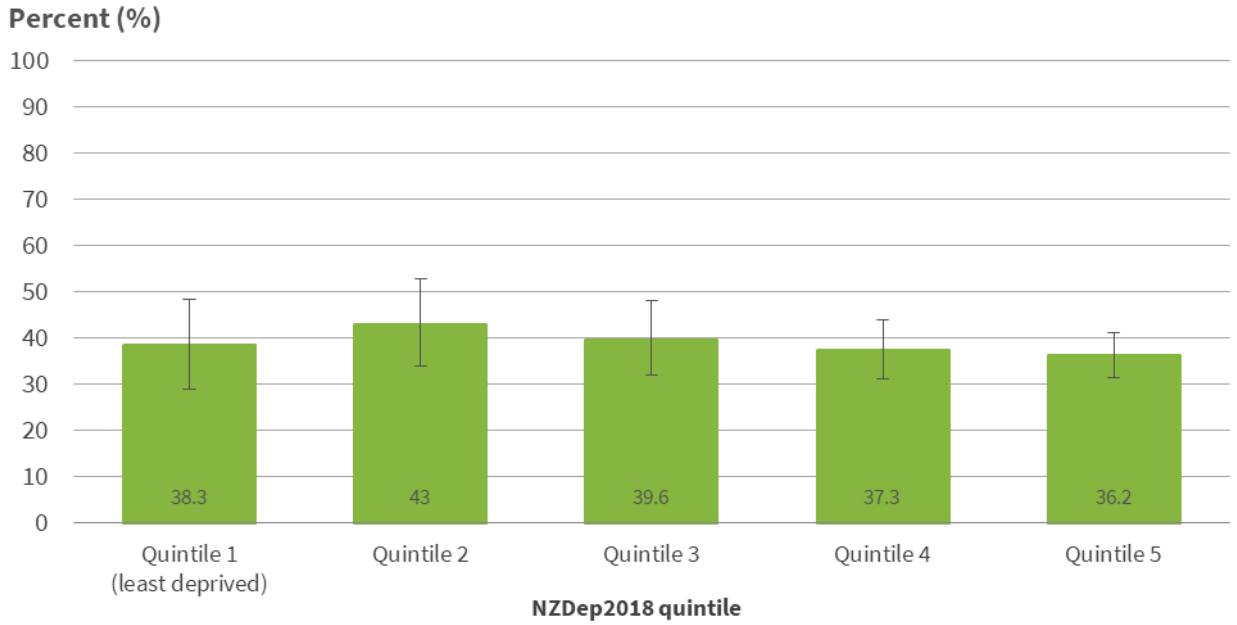
Table 2: Percent of children who usually used active transport to and from school, by ethnic group (total response), 2023/24

Age group (years)	Unadjusted prevalence (%, 95%CI)	Estimated number of children	Comparison groups	Adjusted rate ratio (RR, 95%CI)
Māori	35.3 (30.2–40.6)	64,000	vs. non-Māori	0.88 (0.74–1.04)
Pacific	36.4 (29.4–43.9)	31,000	vs. non-Pacific	0.92 (0.74–1.14)
Asian	37.9 (31.2–45.0)	49,000	vs. non-Asian	0.99 (0.82–1.21)
European/Other	39.6 (35.1–44.2)	181,000		
Total	38.8 (35.2–42.5)	262,000		

Note: Total response ethnic groups have been used, where respondents are counted in every ethnic group they report. This means that estimated numbers will add to more than the total.
Source: New Zealand Health Survey (Ministry of Health 2024)

The prevalence of regular active transport users was similar across all NZDep2018 quintiles (Figure 3). After adjusting for age, sex and ethnicity, there was no significant difference in the use of active transport between the most and least socio-economically deprived areas (adjusted rate ratio 0.98, 95%CI 0.72–1.32).

Figure 3: Percent of children who usually used active transport to travel to and from school, by socioeconomic deprivation (NZDep2018 quintile), 2023/24

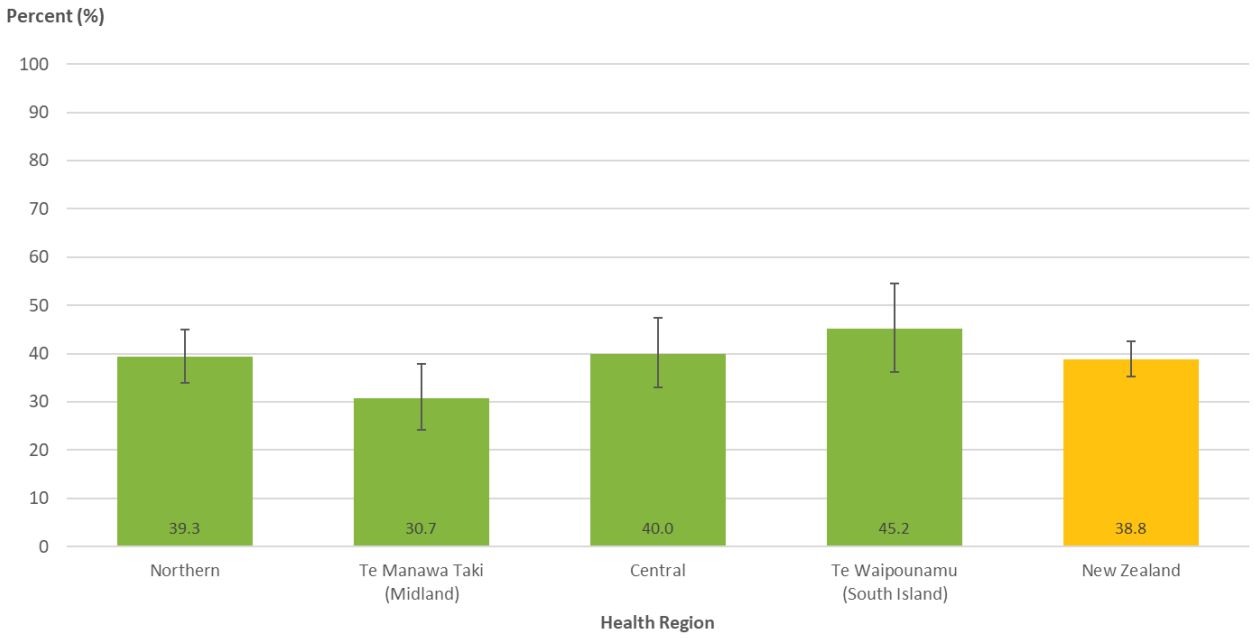


Notes: 95% confidence intervals have been presented as vertical bars.
Source: New Zealand Health Survey (Ministry of Health 2024)

Active transport use was similar across health regions

The latest NZHS results include estimates by health region rather than districts (formerly District Health Boards). A map showing the areas covered by each health region is available on the Health NZ–Te Whatu Ora website. Regular use of active transport in 2023/24 was similar across health regions (Figure 4).

Figure 4: Percent of children who usually used active transport to travel to and from school, by health region, 2023/24



Notes: 95% confidence intervals have been presented as vertical bars. The four health regions (and the districts they cover) are: Te Waipounamu (Canterbury, West Coast, Nelson Marlborough, Southern and South Canterbury), Central (MidCentral, Whanganui, Capital & Coast/Hutt Valley, Hawkes Bay and Wairarapa), Te Manawa Taki (Waikato, Bay of Plenty, Lakes, Tairāwhiti and Taranaki), and Northern (Northland, Waitematā, Auckland and Counties Manukau).
Source: New Zealand Health Survey (Ministry of Health 2024)

Data for this indicator

This indicator presents an analysis of the most recent results available from the 2023/24 New Zealand Health Survey (Ministry of Health 2024). Data collection took place between July 2023 and June 2024. All 95% confidence intervals have been presented as vertical bars on graphs. The Ministry of Health calculated all the results.

Adjusted rate ratios are a type of analysis that illustrates differences between groups, adjusting for differences in age (and other variables) between groups. A rate ratio above 1.0 means that whatever is being measured (e.g. use of active transport) is higher in the primary interest group than in the comparison group.

For additional information, see the Metadata sheet.

References

Ministry of Health. 2024. *New Zealand Health Survey Annual Data Explorer*. URL: https://minhealthnz.shinyapps.io/nz-health-survey-2023-24-annual-data-explorer (accessed 20 November 2024).

Sport New Zealand. 2024. *Active New Zealand: Participation Trends 2017–2023*. URL: https://sportnz.org.nz/resources/active-nz-participation-trends-2017-2023 (accessed 13 December 2024).

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