### 4. CITIES AND NATIONAL ECONOMIES

## Access to services in cities

While 87% of people living in the core of metropolitan areas have access to health services nearby, only 57% of people living in commuting zones benefit from the same degree of access.

Within countries, there are large disparities in access to services and amenities across metropolitan areas. For example, in the United Kingdom, Spain, Austria, France, and Italy, the difference between the metropolitan areas with the highest and lowest percent of population with access to green areas within 15 minutes of walking is of at least 25 percentage points (Figure 4.17). This pattern is also observed in other kinds of services, such as access to hospitals. Whereas at least 90% of the population of Valencia (Spain), Catania (Italy), and Paris (France) have access to a hospital within 30 minutes of driving, only around 70% of the inhabitants of Las Palmas (Spain), Genova (Italy), and Rennes (France) count with the same degree of accessibility to this service (Figure 4.18).

Large spatial disparities in acces to health services are also present within metropolitan areas. For example, in the urban cores of the OECD metropolitan areas, 87% of the population have access to a hospital within 30 minutes

### Definition

In 31 OECD countries, 329 metropolitan areas have been identified (functional urban areas with population above 500 000) according to the OECD-EU methodology that defines metropolitan areas on the basis of densely populated cities and their commuting zones (travel to work journeys) to reflect the economic geography of the population's daily commuting patterns (see Annex A for details). of driving, while only 57% of the people living in the commuting zones can benefit from the same type of service. In Hungary, Estonia, Austria, and Slovenia, the disparities in access to hospitals between the core and the periphery are more than 50 percentage points, while in Greece, the United Kingdom, Belgium, Italy, and the Netherlands, these inequalities are less than 25 percentage points (Figure 4.19).

### Source

OECD (2018), "Metropolitan areas", OECD Regional Statistics (database). http://dx.doi.org/10.1787/data-00531-en.

Green space: Copernicus Urban Atlas 2012. Hospitals: Data aggregated at 500 m<sup>2</sup> grid level, provided by the European Commission, Joint Research Centre.

#### **Reference years and territorial level**

Metropolitan areas as defined in OECD (2012).

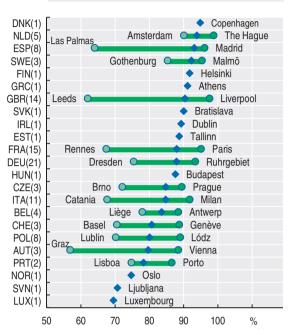
### **Further information**

TAP ....

- OECD (2012), Redefining "Urban": A New Way to Measure Metropolitan Areas, OECD Publishing, Paris, http://dx.doi. org/10.1787/9789264174108-en.
- European Commission, Joint Research Centre (JRC); Columbia University, Center for International Earth Science Information Network - CIESIN (2015): GHS population grid, derived from GPW4, multitemporal (1975, 1990, 2000, 2015). European Commission, Joint Research Centre (JRC) [Dataset] PID: http://data.europa. eu/89h/jrc-ghsl-ghs\_pop\_gpw4\_globe\_r2015a.

# 4.17. Access to green spaces in metropolitan areas, 2012

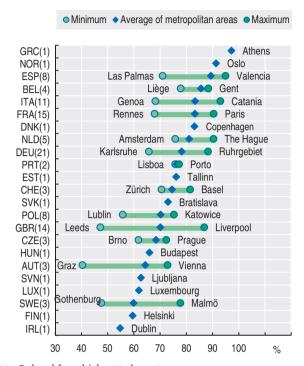
Percentage of people with access to 1 hectare of green urban space within a 15-minute walk



#### Minimum Average of metropolitan areas Maximum

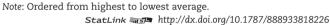
4.18. Access to hospitals in metropolitan areas, 2017

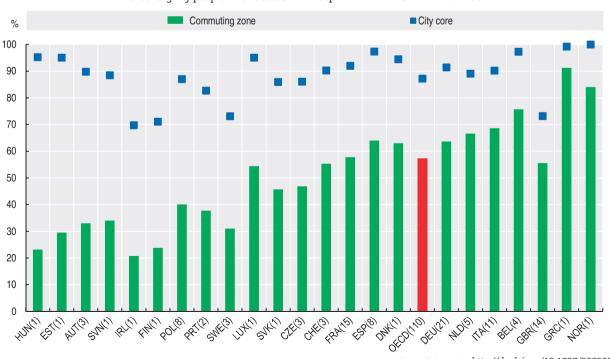
Percentage of people with access to 1 hospital within a 30-minute drive



Note: Ordered from highest to lowest average.

StatLink and http://dx.doi.org/10.1787/888933818207

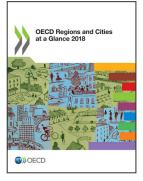




**4.19.** Access to hospitals in the core and commuting zones of metropolitan areas, 2017 Percentage of people with access to 1 hospital within a 30-minute drive

StatLink and http://dx.doi.org/10.1787/888933818245

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