



**Public Health Association**  
AUSTRALIA

**Submission from the Public Health Association of Australia to the  
Senate Rural and Regional Affairs and Transport Committee**

*Inquiry into the investment of Commonwealth and State funds in public  
passenger transport infrastructure and services*

Committee Secretary  
Senate Rural and Regional Affairs and Transport Committee  
Department of the Senate  
PO Box 6100  
Parliament House  
Canberra ACT 2600  
Australia

[rrat.sen@aph.gov.au](mailto:rrat.sen@aph.gov.au)

**19 February 2009**

## Contents

Introduction .....	3
Climate Change .....	4
Comments on Terms of Reference .....	4
Conclusion.....	7

## Attachment

- PHAA Climate Change Policy

This is also available on the web at:

- <http://www.phaa.net.au/documents/policy/20081006revisedClimateChange.pdf>

## Introduction

The Public Health Association of Australia Incorporated (PHAA) is recognised as the principal non-government organisation for public health in Australia and works to promote the health and well-being of all Australians. The Association seeks better population health outcomes based on prevention, the social determinants of health and equity principles.

The PHAA is a national organisation comprising around 1500 individual members and representing over 40 professional groups concerned with the promotion of health at a population level. This includes, but goes beyond the treatment of individuals to encompass health promotion, prevention of disease and disability, recovery and rehabilitation, and disability support. This framework, together with attention to the social, economic and environmental determinants of health, provides particular relevance to, and expertly informs the Association's role.

Key roles of the organisation include capacity building, advocacy and the development of policy. Core to our work is an evidence base drawn from a wide range of members working in public health practice, research, administration and related fields who volunteer their time to inform policy, support advocacy and assist in capacity building within the sector. The PHAA has been a key proponent of a preventive approach for better population health outcomes championing such policies and providing strong support for the government and for the Preventative Health Taskforce and NHMRC in their efforts to develop and strengthen research and actions in this area across Australia.

The PHAA has Branches in every State and Territory and a wide range of Special Interest Groups. The Branches work with the National Office in providing policy advice, in organising seminars and in mentoring public health professionals. This work is based on the agreed policies of the PHAA. Our Special Interest Groups provide specific expertise, peer review and professionalism in assisting the National Organisation to respond to issues and challenges as well as a close involvement in the development of policies. In addition to these groups the Australian New Zealand Journal of Public Health draws on individuals from with the PHAA who provide editorial advice, review and who edit the Journal.

In recent years the PHAA has further developed its role in advocacy to achieve the best possible health outcomes for the community, both through working with all aspects of government and promoting key policies and advocacy goals through the media and other means.

## Climate Change

... within the current multiple crises, climate change is the "only one truly existential threat" ... (UN Secretary-General Ban Ki-moon, Davros 2009)

PHAA has an extensive policy on Climate Change (Attachment A). The PHAA recognises the need to respond to climate change as a major priority in public health for this century. Our Association also recognises the strategic links between action to address climate change and action to address other important public health issues such as chronic disease and obesity, social well being and environmental pollution.

The experience and expertise from the PHAA allows us to comment on the health and welfare benefits relating to this inquiry. Apart from some general comments on Terms of Reference a), d) and e), we will focus on Term of Reference c).

## Comments on Terms of Reference

### **(c) an assessment of the benefits of public passenger transport, including integration with bicycle and pedestrian initiatives;**

There are both direct and indirect benefits to be derived from enhancing the public transport system in Australia, particularly in urban areas.

#### **Direct Benefits**

As little as 30 minutes exercise daily helps to promote weight loss and improve physical fitness. Both are prevention strategies for obesity and chronic diseases such as diabetes and coronary heart disease. There is also evidence that exercise in younger people assists in preventing or reducing the impact of osteoporosis later in life. Even moderate exercise via endorphin release in the brain as well as the positive benefits of feeling fitter promotes psychological wellbeing.

Use of public transport of itself promotes exercise in that people need to get to transport nodes, either by walking or bicycling. Even for people driving to a transport node, the movement about the transport system which involves walking is also of benefit. Thus more utilised public transport is a win win for health by increasing physical activity and for the environment by reducing greenhouse gas emissions.

Reduced use of motor vehicles will result in reduced exposure for drivers, residents and workers along traffic corridors, and other users of public spaces, to particulate, chemical and noise pollution.

High rates of motor vehicle use contribute to accidents and increases carbon footprint.

### **Indirect Benefits**

The benefits that will derive indirectly from an improved public transport system are perhaps more extensive than the direct ones.

Such benefits include:

- Improved social cohesion, since people are interacting with others whom they see daily on shared journeys and building social relationships (rather than each being insulated in their own private car). This also has mental health effects in reducing peoples sense of insularity;
- Travel times are likely to reduce overall so that there will be more time available to families to enjoy each other's company promoting better family relationships;
- More egalitarian transport will of itself promote a more equitable society, and current understanding of the social determinants of health show that the more egalitarian a society the healthier its members are;
- Less tension and concentration needed in public transport travel will also provide improved mental and physical health outcomes for travellers; and
- More use of public transport will result in reduced greenhouse gas emissions and so will help to mitigate global warming.

### **(a) an audit of the state of public passenger transport in Australia;**

The PHAA while not able to comment directly on the content of this Term sees this as an essential starting point for any comprehensive strategic approach to improving public transport usage in Australia. "State" would include not only of the physical capacity and robustness of existing infrastructure but also the location, coverage and frequency, ease of access to, safety and the public perceptions of the safety of existing services.

The recent experience in Victoria has demonstrated that in a warming world the ability of both the infrastructure (tracks and road surfaces, train carriages, trams and busses) and equipment (signalling, communications and other) to perform safely and without failure at reasonable expected extremes has to be included in any assessment.

It is important that the energy needs of existing and any planned further replacement infrastructure and equipment be assessed as it would need to reduce rather than increase greenhouse gas emissions.

### **(d) measures by which the Commonwealth Government could facilitate improvement in public passenger transport services and infrastructure; (including the additional Term *options for Commonwealth funding for public passenger transport services and infrastructure*)**

People will tend to do that which is easier. While reliance on cars is easier than public transport, then use of public transport will remain low. This makes undertaking the required amounts of beneficial

physical activity much harder. To counter this situation governments need to make use of public transport more attractive and easier.

More attractive public transport will be priced so as to be affordable and to be less costly, or at least no more costly, and as amenable to use as private cars. Use of private vehicles will also need to be discouraged where possible. These matters are discussed under Term of Reference e).

Examples of how public transport could be more amenable include:

- Well designed and maintained, graffiti free and secure busses / trains and stops;
- Integrating public and other active transport modes such as fitting bicycle racks to buses so they are able to carry bicycles in racks externally;
- Frequent enough service to be useful; and
- Ticketing to enable people to take multiple trips, in multiple directions with relative ease.

Access to clean safe and affordable public transport is an equity issue as well; non-car users need to be able to access employment, services, recreation & relatives. While the majority of transport will cover people living in cities, good quality public transport has to meet the needs of rural and regional people, those living in outer suburbs, and those needing to travel across or tangential to the central business districts. In our partially decentralised urban sprawls much travel is not into the metro hub but across or around 'town'. Having to travel to an urban centre to travel out again is wasteful of both energy and people's time.

Considering that walking and bicycle use are themselves a form of public transport, then designing an extensive and integrated (with existing transport corridors and other networks), well maintained, safe to use (free from obstacles, separated from traffic) and secure (well lit, patrolled) network of walking and cycle ways, that actually follow routes that people tend to use (rather than following vacant usable land), will promote their use.

**(e) the role of Commonwealth Government legislation, taxation, subsidies, policies and other mechanisms that either discourage or encourage public passenger transport;**

PHAA is able to make the following general comment only: public health principles from the 19th century show that it is government investment in infrastructure that is required to achieve public health benefits for the whole community. The measures outlined in Term e) are those that have been previously applied to similar public health issues. The role of government is to lead, to invest in and to encourage others to action by the types of measures listed.

Specific examples include:

- charges that discourage use of vehicles where possible, particularly discouraging entry into central cities, or where access to public transport is possible; and
- subsidies and tax rebates for people and businesses that provide active transport and public transport options and support for themselves or their employees.

## Conclusion

The PHAA appreciates the opportunity to be able to make this submission on public transport to the Senate Rural and Regional Affairs and Transport Committee.

Yours sincerely



19 February 2009

Michael Moore BA, Dip Ed, MPH  
Chief Executive Officer  
Public Health Association of Australia

Dr Peter Tait  
Co-convenor PHAA Special Interest Group on  
Environmental Health  
Public Health Association of Australia