INQUIRY INTO INTER-REGIONAL PUBLIC TRANSPORT

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Date Received: 18/05/2012



NSW Consumer Advisory Group – Mental Health Inc.

Going somewhere?

Submission to Inquiry on inter-regional public transport

May 2012

This submission was compiled on behalf of NSW CAG by:

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Acknowledgements

Thank you to the individual participants who generously shared with us their experiences and insights.

We would also like to acknowledge the staff at all agencies that gave us the opportunity to consult with the individuals accessing their services.

About NSW Consumer Advisory Group – Mental Health Inc (NSW CAG)

NSW CAG is an independent not for profit organisation. NSW CAG receives core and project funding from the NSW Ministry of Health.

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NSW Consumer Advisory Group - Mental Health Inc.

NSW Consumer Advisory Group – Mental Health Inc. (NSW CAG) is the independent, state-wide peak organisation for people with a lived experience of mental illness (consumer). We work with consumers to achieve and support systemic change.

NSW CAG's vision is for all consumers to be able to participate meaningfully in society and to experience fair access to quality and recovery focused services which reflect their needs. Participation is a fundamental human right as enshrined in Article 25 of the *International Covenant on Civil and Political Rights* (ICCPR). We work from the premise that the participation of consumers results in more effective public policy and facilitates individual recovery.

Our work is guided by six principles:

- Being person centred and empowering consumers in the interests of consumers;
- Adopting a recovery approach to building positive futures;
- Promoting positive images and reducing stigma and discrimination;
- Enhancing best practice and building understanding of effective approaches to consumer participation;
- Capacity building of our organisation, consumers and services; and
- Promoting professionalism and continuous improvement in our ways of working.

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Introduction

Transport disadvantage, or difficulty in accessing public transport and/or maintaining private transport¹, is an issue that disproportionately affects people with a mental illness. People with a mental illness often experience underemployment, live on limited incomes or are living in poverty² which can restrict vehicle ownership. Others may have difficulty with driving due to the side effects of medication. These factors, along with living in regional and remote areas can make it difficult for people to get to where they need to go, access the services they need and keep in touch with friends and family.

Not being able to connect easily with formal and informal sources of support can have detrimental impacts on one's wellbeing and sense of inclusion. It can also have a cost to the wider community that is felt in terms of lost social capital, productivity and economic costs (such as people accessing expensive crisis services rather than preventative care).

We are aware that the NSW Government is currently consulting with the community to determine a long term transport plan. We are taking the opportunity to comment through this inquiry as we believe it is important to flag specific issues within the larger discussion on how to improve the quality and uptake of inter-regional public transport.

We are commenting on the following terms of reference:

- 1. how CountryLink services can be improved
- 2. the role local councils can play in improving inter-regional public transportation networks.

Our submission and recommendations are based on our ongoing consultations with consumers throughout NSW.

1. Improving CountryLink services

Making the Connections, a report on transport disadvantage in the United Kingdom, states that accessibility is central to considering transport and asks: 'can people get to key services at reasonable cost, in reasonable time and with reasonable ease?'³ We have heard that cost, timetabling and ease of travel are all factors that discourage people from using public transport in regional areas. These issues have been raised by mental health consumers, we think that they have a disproportionate impact on all people experiencing disadvantage but that improving ease and cost of inter-regional transport would benefit all people living in regional and rural NSW.

1.1 CountryLink Timetabling

Consumers living in regional and remote areas often need to travel to other regions to access health and human support services. This is particularly common for those in smaller communities where there are fewer General Practitioners (GPs) or where GPs or medical specialists are not taking any new patients. In addition, many people have told us that they have moved from country towns to larger regional centres to access health services but have difficulty in visiting friends and family in their hometowns.

We have heard that the timetabling of transport is often a deterrent to using public transport. For example, a person living in a regional town in the Murray Riverina Region, said that it was easier to travel to Melbourne and back in a day, than it was to get to the next regional centre. In addition to having to allow multiple days for return travel, she was also required to find money for accommodation for those nights. This is expensive and is untenable for those on limited incomes. Even for those eligible for the Isolated Patients Travel and Accommodation Scheme (IPTAAS), the amounts reimbursed for accommodation (\$46 per night for a single room⁴) are minimal.

Recommendation

One: We recommend that the Committee review CountryLink timetabling with an aim of increasing the frequency of inter-regional services so that people can make return trips in one day.

1.2 Cost of inter-regional public transport

Consumers have told us that it is often too expensive to use public transport for interregional travel. We have heard that:

- having access to concession fares is inconsistent
- amounts reimbursed through IPTAAS are minimal and the reimbursement process is cumbersome (ie people are out of pocket for long periods of time)
- people who have to book tickets through a travel agent, have difficulty affording the extra cost of the booking fee.

These factors mean that some people can't go where they need to. Some have to rely on staff from non-government organisations (NGOs), who are funded to provide mental health support services, to provide transport for consumers. We heard from one service provider in a regional location who said that she typically goes to the nearest regional town once a week with a car full of people. This is because there are not GP services available in her community. She is trained to provide mental health support, which is greatly needed in her area, but instead spends a large portion of her week transporting people from place to place. This is not sustainable option for the community, the organisation, or for the individuals who are being transported.

Recommendations

Two: We recommend that the Committee encourages the NSW Government to undertake a review of transport concessions.

Three: We recommend that the Committee reviews NCOSS's work on transport for health contained in NCOSS's *Vote 1: Fairness in NSW*⁵. Of specific interest to NSW CAG are the recommendations around improving IPTAAS; we acknowledge recent improvements to the scheme but think that the scheme should bulk-bill or cover travel costs in advance, adjust reimbursements to account for CPI and continue to invest in the Transport for Health Program.

Four: We recommend that booking fees are reviewed as they disadvantage people in rural and remote areas who have no other choice than to purchase tickets through travel agents.

2. Role of councils in improving interregional public transportation networks

Councils can play an important role in providing community transport but also in facilitating community participation in Transport Working Groups.

2.1 Providing community transport

In NSW, councils provide approximately 30% of community transport services.⁶ We have heard that there are inconsistencies in how community transport is provided. In one remote community, we heard that people who should be eligible for community transport were discriminated against because it was known they also had a mental illness and because they have been deemed to be a 'risk'. As one consumer told us, '*we're all dangerous apparently*...⁷ These inconsistencies are unacceptable and need to be resolved.

In addition, there are many groups of people, including people with a mental illness, who require services like community transport but who do not meet Home and Community Care (HACC) criteria. Recent research suggests that if community transport providers in NSW were recognised under the *Passenger Transport Act 1990*, and provided with additional funding and support, that they could provide innovative and efficient solutions for more people who experiencing transport disadvantage.⁸ We recommend that the Committee consider the overarching need for additional community transport options, how legislation could be amended to include community transport, and how council run community transport could be a part of and enhance public transportation networks.

2.2 Community participation is essential to finding solutions

Finding transport solutions in regional and rural areas is a complex policy matter and crosses portfolios and levels of government. For this reason, decision making needs to include people who are using public transport. Participation by community members, especially those experiencing difficulties in accessing services, will ensure that current and emerging issues are identified quickly and that proposed solutions are realistic. While Transportation Working Groups are supported by NSW's Transport Coordinators, we believe that Councils can play a role in assisting community members to participate in these decision making processes.

Recommendations

Five: We recommend that the Committee consider ways that Community Transport options provided by councils and NGO's can be broadened to address transportation disadvantage, and how the legislation could be amended to include these transportation options.

Six: We recommend that the Committee work with Councils so that consumer representatives are included in transport decision making processes.

Conclusion

Thank you for considering our submission. We believe that if the Committee can address access issues about inter-regional transport, specifically factors that impact cost and ease of travel, that all people using transport in regional and rural areas of NSW will benefit. We also believe that it is time to be broadly reconsidering how community transport operates and identifying how this service can be more accessible for many other groups of people in regional areas.

¹ Rosier, Kate and Myfanwy McDonald (August 2011) 'CAFCA resource sheet: The relationship Between transport and disadvantage in Australia,' Communities and Families Clearinghouse Australia, <u>http://www.aifs.gov.au/cafca/pubs/sheets/rs/rs4.pdf</u>

² Mason, Andrea (2011) 'Mental health and poverty: A poisonous relationship' ACOSS 2011 National Conference,

http://www.acoss.org.au/images/uploads/Mental%20and%20poverty%20feature.pdf

³ Social Exclusion Unit (February 2003) 'Making the Connections: Final Report on Transport and Social Exclusion' <u>http://webarchive.nationalarchives.gov.uk/+/http://www.cabinetoffice.gov.uk/media/cabineto</u>

ffice/social_exclusion_task_force/assets/publications_1997_to_2006/making_transport_2003.p df

⁴ NSW Health, Transport for Health: <u>http://www.health.nsw.gov.au/initiatives/iptaas/</u>

⁵ NCOSS (2011) Vote 1: Fairness in NSW, http://www.ncoss.org.au/content/view/3206/194/

⁶ Bettellino, Helen and Kevin McClain (September 2011) 'Community Transport in NSW – Broadening the Horizon' Australian Transport Research Forum 2011, <u>http://www.atrf11.unisa.edu.au/Assets/Papers/ATRF11_0080_final.pdf</u>

 ⁷ NSW CAG Consultation Participant, March 2012

Bettellino, Helen and Kevin McClain (September 2011) 'Community Transport in NSW – Broadening the Horizon' Australian Transport Research Forum 2011, <u>http://www.atrf11.unisa.edu.au/Assets/Papers/ATRF11_0080_final.pdf</u>