

CORRECTED TRANSCRIPT

RURAL AND REGIONAL SERVICES AND DEVELOPMENT COMMITTEE

Inquiry into Country Football

Melbourne – 10 May 2004

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Research Officers: Dr V. Koops

Witnesses

Dr M. Townsend, School of Health and Social Development, Deakin University (sworn).

Dr J. Salmon, School of Exercise and Nutrition Sciences, Deakin University (sworn).

The CHAIR – Under the powers conferred on this committee by the Constitution Act and the Parliamentary Committees Act, this committee is empowered to take all evidence of these hearings on oath or affirmation. I wish to advise all present at these hearings that all evidence taken by this committee, including submissions, is, under the provisions of the Constitution Act and granted immunity from judicial review. I also wish to advise witnesses that any comments made by witnesses outside the committee's hearing are not protected by parliamentary privilege. We are an all-party parliamentary committee, including one Independent, hearing evidence into the inquiry into country football.

Thank you both very much. If you could please provide us with your evidence and we'll have some questions for you afterwards.

Dr SALMON – I'm going to give a little bit more of a background of population health and talk not only about physical health, but also social and community health and maybe zero in on the actual question at hand.

Overheads shown.

As a bit of background about physical activity and sport, most importantly at the population level, I want you to keep in mind, I suppose, through all the evidence that I present, that rural populations are not different from urban populations in terms of populations – it's important for all of us. So physical activity: we know that people who are active are much less likely to prematurely die or develop cardio vascular disease, osteoporosis, Type 2 diabetes, some cancers, such as colon cancer and breast cancer, and also develop overweight and obesity. But there are also social and mental health benefits. People who are physically active can have sports participation.

In addition, a lot of often not recognised benefits of physical activity are the social community fabric benefits – and this is what Mardie will talk to you about in a moment – and particularly about rural communities and what's the community fabric in terms of sports participation, and the economic health burden. I've got a little bit of information about that. Less frequently recognised is the environmental benefits if people are more frequently active. So if more people are walking and cycling as transport we've got less cars on the road, and there are all sorts of benefits in people being active. That's in terms of adults. We know much less about children's physical activity in health, but I think we should consider the importance of children and youth in all this. In terms of physical activity and health outcomes for kids, we do know that if they are more active they have better fitness – and there is some evidence in children as young as 10 that if they are inactive, they have poorer blood cholesterol profiles. If they are active, they have improved blood cholesterol. If they are active, they have reduced body fat. It is also very important for children who are active, in terms of activity levels and bone health, laying down bone health at that age.

In terms of disease, some people are often surprised to learn that inactivity is actually the second leading contributor to disease in our country. In Victoria, among women, it's the leading contributor. I must acknowledge Bill Bellow from the NSW Health Department for this slide in here. He actually makes a point with this slide that the dollars that are contributed to physical inactivity, even though it's the second leading contributor to disease, actually a third of that is perhaps put towards illicit drugs. So I guess it's really important that we keep an eye on it. We can do a lot better than we are doing in terms of sport and team participation in our population.

Dr NAPHTHINE – I'm impressed with your technology.

Dr SALMON – In terms of economic estimates, I think there's probably underestimates, but in 2001 it was estimated that inactivity costs our population, our government, \$5.6 billion per annum – and that is in all your associated health care costs from acquiring all the chronic diseases that go with inactivity. Of course, you probably hear a lot about increases in overweight and obesity among adults in Australia – and these data are taken from three Risk Factor Prevalent Survey from the National Heart Foundation and also most recent, the National Nutrition Survey, and it does show a certain trend increasing in the proportion of overweight and obesity among adults.

There is very little information about weight status in rural populations. However, David Crawford, a colleague of mine, did look at a couple of the populations in rural Victoria – Campaspe in 1993 and also the Hunter region in NSW in 1994 – and there was some indication of slightly higher prevalences, although you probably notice here that these figures are a little bit dated. It could have been perhaps increases in trends, although maybe not that much that quickly – but I was surprised. So there is some little evidence that there might be a higher risk of overweight and obesity in rural populations, which is also something important to keep in mind.

And of course we also probably hear a lot in the popular press about children and their levels of overweight and obesity going up. Among girls in Australia the levels of overweight have doubled and obesity has trebled from 1985 to 1997, and among boys the same – we've doubled in our proportion of overweight and trebled in proportion of obesity. We like to keep up with the rest of the world in Australia. We should be proud that we're actually right up there with the rest of the world with these increasing trends – and certainly similar to other developed countries around the world – and we need to address this, I think, quite urgently.

How much should adults and their children be doing to try to alleviate and obviously prevent some of these chronic disease onsets? I don't know if any of you have recognised these guidelines. These were released by the National Department of Health and Aged Care for the Commonwealth government in 1999. They recommend all adults should do at least 30 minutes, most if not all days of the week, and it should be moderate intensity activity – such as walking – that you can accumulate, say in 30 minutes three 10-minute bouts – so you don't have to do 30-minute chunks, which is an important public health message, I think. How are we going in terms of meeting that recommendation? The last three national surveys that were conducted are not great. They showed there was actually a bit of a decline in the proportion of adults who are meeting that recommendation. And of course it's important to consider that sport is an important component of that physical activity recommendation as well as other types of activity. Just a side note: the Victorian Population Health Survey's most recent data showed that the rural populations are 8 per cent less likely to meet this recommendation, but that wasn't a statistically significant difference. So I guess pretty much, there wasn't a huge difference between rural and urban; but nevertheless, only just over half are meeting it, no matter which population you look at.

For the children we don't actually have recommendations, but the Commonwealth is doing something about that. They're involved in writing the physical activity recommendations for children and youth in Australia at the moment. And it will most likely be something similar to the UK and the US, where we can compare physical activity prevalence of children and youth in Australia. We do know, however, that for children we don't have good data overall, but we do know that in children walking and cycling for transport has declined. More importantly, we know that children's sport participation has declined between 1985 and 1997 – whether they're doing one, two or three sports, the prevalence has declined among children. These are South Australian data, but I'm fairly sure that these data are comparable to other states.

So we want active children and we want to increase children's activity. We know that just over half the adults are meeting their recommendations. If we get more children active thinking into the future, is that going to help? There is some evidence that less active children become active adolescents, but it doesn't show that tracks through into adulthood. Inactive kids are much more likely to become inactive adults. So we really want to be maintaining the activity levels of children and youth as well as adults into the future.

In summary, I've just presented some of the public health burdens of physical inactivity. I've spoken a little bit about the levels and the fact that there are similarities in rural and urban populations. And I'm going to pass on to Mardie to talk about why it's particularly important for rural populations in terms of their sport participation.

Dr TOWNSEND – I want to present to you the role of football clubs, particularly in rural communities. The information that I'm presenting is based on a number of studies done particularly in small communities in Western Victoria. I believe that you have access to an article published on this, but also drawing on some other data from another article published on rural sports injury among young children as well. The studies that we did in Western Victoria showed that over 70 per cent of the people in each of the two small communities that we studied – Hopetoun and Peshurst – have playing and non-playing involvement with football. And a publication in the *Age* from Paul Daffey in 1999 indicated that this was typical of rural communities. He talked about how the whole community comes out on Thursday to chop nights, and everyone comes to the game on Saturday. I grew up in rural Victoria and my experience was certainly the same. In the first study we did –

Dr NAPHTHINE – Chop nights at Jack Fisher's place!

Dr TOWNSEND – The people that we talked to in those small communities talked about the importance of football to the viability and the sustainability of the towns, and not just socially. In thinking about this, I looked at the criteria that you had on the terms of reference for this study, and tried to address them. But in terms of community identity, some of the quotes that we had were that football is involved in keeping the community together through providing a sense of community, by being a social leveller, by fostering a sense of trust and contributing to social cohesion. Many small rural communities have had an influx of people who have come from lower-income groups and because of cheap housing a lot of single-parent families move into these. Those of us

who have grown up in rural communities know that you're not local until you've been there for 30, 40 or 50 years. But the football club is seen as a mechanism that would level out this perceived inequality and enable these people to gain acceptance. Another comment was that it acted as a mentoring system for young children, and had lessons, by demonstrating unity and solidarity and thereby creating greater respect for property and people. Not only does it offer a mentoring system, but in response to Jo's comments about the tracking of exercise through life, it also provides a system for modelling exercise behaviour to young children. And if we keep adult activities going in rural communities, we provide greater incentive for kids to also continue that activity.

In terms of social interaction, people commented how the football club crosses barriers of age, length of residence and economic status. Everyone's involved. You don't have to have a particular amount of money to be involved and there's a role for everyone to play. And they talked about it being a means to increase community pride and loyalty. It highlighted the issue of healthy rivalry between towns. An example was given of towns and their residents gaining a feeling of prestige when their team's in a football final. And that becomes a focus for the town and a sense of pride. But it's also a sense of pride individually, because people can be involved one-to-one and have a sense of self-esteem from what they achieve through the football club. So that's an important aspect, but there are some other benefits as well. They talked about the football club being an opportunity to provide social support. One example given was of a family whose house had burnt down. The football club rallied around and raised money for them and were able to support them. It's a mechanism by which people connect in the community in this way. It also was seen as an outlet for frustrations. In the late 1990s people in rural communities suffered some frustrations because of declines in markets for agricultural products, the amalgamation of local government – which was met with some resistance – and the like, and people felt that being able to go to the football and cheer loudly and be part of it all was a way they could get through their frustrations creatively.

An important economic aspect was the boost to retail businesses and towns. When home matches are played in rural communities, the local milk bar sells more pies and more milk and supports the football club by supplying ingredients for the afternoon teas. And so these were days of high turnover for those local businesses. Local newspapers were recognised as being dependent on the sport, and particularly the football during the winter season, to have material to print in the paper; hence the local paper had a sense of contributing to community cohesion. So all of these are important factors – all signs from the net physical and mental health benefits that Jo talked about.

Thinking about the impact of the democratic shifts and the changes in sport and entertainment preferences and other social changes, it seems to me from the studies that we've done that there were three key sources of change. One was demographic, with declining rural populations and the ageing, the structural ageing, of rural populations as young people move away. The second set of changes were the economic changes, such as downturns in some agricultural markets, changes in tariff barriers and developments in agricultural technology, which resulted in fewer but larger farms with fewer people running them. The third set of changes were policy changes such as local government amalgamations, rationalisation and regionalisation of services – and public liability insurance changes and associated culture changes such as the threat of litigation. One you probably might not even have thought about is the food safety laws. Changes in food safety laws have played an important role.

As a result of those three sets of changes, there has been a loss of numbers in rural communities. This is in terms of players, spectators and officials. This has meant that a number of clubs have merged and associations have merged. As a result, there's been an undermining of that community pride, where the local team used to be an important source of pride. There's been difficulty in recruiting people for executive roles in past years – the bank staff, the local government staff, the teachers in the schools, staff in the hospital provided a new source of leadership in the community, that either provided leadership that was not there, or gave the locals some relief from having to be constant community leaders. Another effect of all of this has been that there's been an encouragement for people to play beyond the normal retirement age. For outside age groupings or gradings there's a higher injury risk as a result, and I've promised to send Kristen a paper on these matters.

In terms of the potential of other sports meeting the social needs: often these are the sports such as basketball, squash and the like, conducted at a distance from very small rural communities. They require specialised facilities, and so they tend to be in regional centres rather than in the small rural towns. So people have to travel there. It precludes people who haven't got the opportunity to travel, who may be reliant on public transport. That's a problem. It also means that local spectators are probably not going to be there to support them. Older members in rural communities are probably also unlikely to be familiar with the newer sports that have developed and emerged in rural communities, so they lack familiarity with those and therefore the interest in them. So you lose that community cohesion that football and netball give – the more traditional sports. It seems to me that these sorts of sports are unlikely to act as the social glue, in the same way that football has in the past.

In terms of the impact of specific costs on rural Australian football clubs and associations: we're all aware of the increase in insurance costs over recent years. This poses issues, particularly in small towns where the gate takings and memberships are down because of declining populations, and so it becomes a double-whammy for them in a sense. The costs go up and the income goes down. At the same time, there have been changes in the food safety laws, and while I'm not suggesting we should all run around giving one another food poisoning, these are issues for small rural communities which were often dependant on the football club committee or ladies' committees being the caterer for local meetings and things like this. And they provided a terrific source of fundraising, but also social capital benefits where they can cater for events and the whole community would come together.

The issue of water availability and costs obviously has huge implications for rural football clubs. If water needs to be carted to keep grounds playable, the cost poses a difficulty for small clubs and associations. If that's not done, then there's a risk of increased injury as a result of playing on hard grounds. This sort of problem, if games have to be played out of town, means no home games can be played, and that then affects the economics of the communities and those small businesses struggle. That can ultimately threaten the retention of those businesses in small towns, and can deprive the community of necessary services.

Finally, there's an ultimate threat to physical and mental wellbeing because of these costs and other factors; local football clubs are lost to rural areas. I think if you take Jo's and my presentations together, it becomes obvious that football is an important contributor to the viability and sustainability of small rural communities in particular, but rural communities generally; in that they provide opportunities for physical, mental and social health as well as social cohesion and mentoring to children, community pride and loyalty. The conclusion I would draw is that sustaining country football is crucial not just to football clubs and associations, but in fact to the whole of the government.

The CHAIR – Thank you very much.

Dr NAPHTHINE – Thank you very much Mardie. In the paper that you've attached, or we've got attached here, it says – and your conclusion is, based on the findings: create a strategy apart from bulldozing people to join the clubs, which needs to be particularly devised to address a shortfall in human and financial capital for effective rural clubs and communities. Question: part (a), is what are those creative strategies? – because that's what we're searching for – and (b), what is the role that government can play?

Dr TOWNSEND – I don't think there are any easy solutions to this. I think one of the things is there needs to be support for rural communities to either retain young people in them, in terms of even going back for weekends. Hopetoun Football Club runs a wonderful scheme, where they actually provide a couple of cars to young fellows to come down to Melbourne to university; the football club funds the cars and the petrol, so that they can come back in footy season and play for the team. If there were a scheme to enable clubs to have some sort of claim that enabled them to support them better – because this is coming out of the pockets of the people who are back there in rural communities – some sort of scheme that supported clubs to do something like that would mean that the clubs would remain viable and active, there would be football activities for those who remain in the rural communities, who work on the farms and are still at school there. So that's one strategy.

The other strategy is at a much bigger picture level. We need to think about how we sustain the viability of rural communities generally and encourage people to remain in them, perhaps by thinking about supporting industry in those areas.

Dr NAPHTHINE – Is (b) government? What would you do? Were you going to make recommendations to be looked at by government? Now here's your chance to tell the government what the government should do.

Dr TOWNSEND – Yes, I think one of the things in the studies that we did in Hopetoun and Peshurst – one of the ideas was that there needed to be some sort of active encouragement for industry to be established in rural communities. Perhaps even relatively small ones. But where there were people who were looking for work, not necessarily wanting to come to Melbourne for their education, and establishing some of those industries. Industries that need resources and inputs that are relatively easily available in rural communities, such as labour inputs – if we can set it up so that young people are retained and the resources in terms of materials are easily assessable, at least transporting it to those areas, we can sustain the economic viability of rural communities. That then has a flow-on effect in sustaining the population of rural communities and therefore sustains rural football clubs. If we continue to drain rural communities of their populations, we have no hope of sustaining physical activities in rural communities.

Mr INGRAM – As much a comment as anything: a lot of rural shires nowadays have rates that are up to four times the same rates in metro areas. So obviously it's very, very difficult to develop industries when there is a disincentive to attract people to move back there – considering that probably only 20 years ago, the opposite was true. Do you have a comment?

Dr TOWNSEND – Yeah, sure. As Jo pointed out in her slides, this issue is an issue for taxpayers at large. This is an issue that has flow-on effects healthwise, health cost-wise for the whole of Australia and for the whole of Victoria. And it might be an issue that we at state government and at federal government level will need to be subsidising some of those things in order to ensure that there is social capital retained and physical activity retained at rural community level.

Mr INGRAM – Okay, I'll go another one. The State Grants Commission distributes 30 per cent of its funds as an incentive entitlement. So there are six councils in metro Melbourne who receive 30 per cent of all the money that goes to local government that they don't actually need for roads; whereas a council like in the Mallee, individual ratepayers are paying \$300-odd per head on roads. So that's a subsidy the other way. Even if you just remove those subsidies, which are a disincentive for rural areas, surely that would help promote activity in rural areas.

Dr TOWNSEND – Yeah, I agree. My problem is that it should be on a needs basis in terms of rural communities, obviously because of greater distances and lower levels of populations have smaller amounts of money coming in and greater amounts of money going out.

Dr SALMON – Can I make a comment about perhaps whose responsibility it is – and we talked about government, the comment about the whole-of-government – and I think this goes for the state right through to local government level. A lot of these issues with physical activity in sport could be picked up by the many sectors, not just the sports and rec sector; and your comments about roads and infrastructure, sort of I guess, is a bit along these lines. If you had whole-of-government buy in, and recognition that this is important for all sorts of levels, not just physical health, but all sorts of levels as a community, then that should be distributed across all the areas. I think what often happens is a juggle and balance between this much is for health, this much is for sport, and it's often a tension almost in how much goes towards different areas and different sectors. If all different sectors realise that they need to contribute in part to something that will ultimately result in sport and physical activity – it might not be tagged as that – but it would be something that would benefit roads, it would be something that could benefit urban planning. I just wondered if I would recommend a whole-of-government approach.

Dr TOWNSEND – Absolutely.

Dr NAPTHINE – I think Deakin University can show the lead by relocating all of our departments into regional rural areas.

Mr MITCHELL – With your class study, you talked about parents worrying about kids' safety. Is it more just the physical side or is there –?

Dr SALMON – No, we've had some concerns about safety for children and mainly at metropolitan level, about what the concerns are; apart from traffic safety there is stranger danger. So the result is that children are less likely to be encouraged to go and play outdoors after hours, and when they get home they are encouraged to be inside where they're safe. So it's not just sports injury safety, it's personal safety as well.

The CHAIR – Thanks very much Mardie and Jo for giving us your time for this submission.

Witnesses withdrew.