



What price petrol?

Most people will have noticed that the price of a litre of petrol has gone over a dollar and looks far more likely to go up a lot further than to go down. What impact will this have on the poorest parts of society, with barely enough money for food and dependent on a car to get them to work? Will the price of most goods go up because transport costs increase? Will this create a spiral of poverty and associated health problems, and exacerbate one of the social determinants of health that health promotion advocates need to address?

There are a number of factors which help to explain this steady price increase. Immediate triggers which have led to price spikes are associated with oil supply crises, due to natural disaster (e.g. Hurricane Katrina) or war or terrorism. Long-term pressure on existing global oil reserves from the growth economies of China and India on top of the ravenous demand of the US and other western countries mean that global demand for oil is expected to exceed supply within our lifetime.¹

In addition to these demand pressures, oil industry experts have been predicting since the 1950s that there will come a point when half the world's oil resources have been pumped, and the remaining half becomes harder to access. This point is called 'Peak oil' and predictions of when it will happen have varied between 2007 and 2020.² There may be no definable moment, but the inescapable fact remains that the global oil supply will start to dry up, probably within the next decade or two.

Is this the end of the world as we know it? The answer has to depend on what we and our governments do.³ Those who see no reason to change anything argue that technology will allow previously unextractable oil to be accessed or make the use of oil or petrol more efficient. Arguing along similar lines, others say that new forms of energy will become available, such as hydrogen or other alternative fuels. Technology will simply change the type of engines in our cars and how we produce our electricity.

Of course, others are far less sanguine.³ Technology may help us lessen the pain of weaning from our oil dependency, but there is currently no viable global alternative to oil ready for mass consumption, and this seems unlikely in the next twenty years. Governments are still investing in exploration for oil rather than alternatives, including the Australian government. The re-emergence of the uranium power debate flows from the search for options for wide-scale power generation.

The doomsday scenarios of a world without oil and associated products such as internal combustion engines and plastics

are very bleak. Transport in outer city suburbs with minimal public transport might well rely again on bicycles, horses and walking. International travel would not be viable for most. Commercial agriculture without industrial machines would have to return to labour intensive methods. The transport and distribution of food and resources would have to be reconsidered and definitely would not rely on road-based motor transport.¹

Even if an acceptable alternative to oil was found in the coming decades, it is unclear whether simply substituting oil with a new product would actually benefit us collectively. Electric cars will not solve traffic congestion problems or reduce social isolation for people without transport.

The Australian Government is concerned about the increased price of petrol and what this may mean for the Australian economy. A recent Senate inquiry sought submissions on Australia's future oil supply and alternative transport fuels.⁴ For Australia's long-term security, it would seem critical that policies and strategies be put into place as soon as possible to reduce Australian dependency on oil.

One approach that highlights the value of oil and encourages it be conserved is to increase its price. Europe has for many years charged much more for petrol than in Australia, higher fuel prices make alternative trip modes more economically viable in comparison. This is an important aspect of travel demand management. Any additional revenue from higher fuel prices should go into public transport or alternative travel modes such as infrastructure for bicycles and walking. There could be variable pricing with lower rates for commercial use compared with private travel, although this might be difficult to apply in practice.

Probably the most overlooked source of transport fuel is human energy. Currently, about half of the Australian population is not physically active enough to meet public health guidelines of 30 minutes a day of moderate level physical activity.⁵ This could be met by a 15 minute walk to a bus or train station on the journey to work and return each day, or a 5 km bicycle ride. Two-thirds of urban trips are under 5 km, a distance easily cycled.⁶ Many short car trips could be substituted by walking or cycling, which would produce health benefits while saving petrol.⁷ What's more, the technology for walking and cycling already exists! It is very inexpensive, does not harm the environment, and contributes to more livable neighbourhoods, which have been shown to be economically desirable. Investment in alternative fuel sources for private motor vehicles will not solve congestion problems, and traffic congestion adversely affects the economy.

A recent review of Australian interventions to promote cycling⁸ identified that while there was a relatively low level of regular cycling for transport in Australia, cycling is a popular recreational

activity (fourth most popular nationally⁹). This suggests that under favourable conditions some of these riders could substitute short car trips for bicycle trips. Almost all of the 17 identified cycling promotion program evaluations showed some degree of increase in cycling,⁸ suggesting that if these programs were to be implemented on a wider scale and with adequate resources they would lead to increases in population levels of regular cycling.

Health promotion advocates are unlikely to be able to influence the price of petrol in Australia. We do have a role in investing in and supporting the strategies and organisations that are trying to make the environment amenable to walking and cycling. Not only does this have health benefits but will help Australia's future security.

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Journal issues

This issue marks the third full year of stewardship of the *Health Promotion Journal of Australia* by the current editorial team. There have been some changes along the way with Jan Ritchie taking over from Marilyn Wise last year, and with Ben Smith joining as Book Review Editor.

The most significant milestones have been the notifications of the Journal being indexed by firstly MEDLINE/Index Medicus, PROQUEST and then the Elsevier indexes, including EMBASE, EMNursing, Compendex, GEOBASE and Scopus.

With better indexing, the *Journal* should be increasingly cited by other authors. To get an early measure of these citations the process for calculating the *Journal's* impact factor has begun. Whether increasing interest in the *Journal* is linked to membership to the Australian Health Promotion Association is hard to judge, but the number of subscriptions to the Association has slowly increased, and at last count was 1130.

Increased indexing and changes in electronic publishing around the world also affect the *Journal*. There are increased requests for electronic copies of papers by authors or on-line access to full-text of papers by researchers. Currently only paper copies are made publicly available and these are sent to members of the Australian Health Promotion Association and subscribers. This limited circulation contributes to healthy membership of the Association, but does limit access to the material in the *Journal*. It is currently unclear whether moving more into on-line availability of the *Journal*, with associated increases in revenue from indexing services, will harm or benefit the Association that supports the *Journal's* production.

In the past year, the number of submissions has remained stable compared with the previous year, with a marked increase of papers received from authors based outside of Australia. New South Wales continues to be the State from which most submissions are received (28%) followed by Victoria (17%). The rejection rate of papers has continued to increase, up from 28% for the year ending February 2005 to 33% for the year ending February 2006.

The time to publication from original submission to the *Health Promotion Journal of Australia* for the April 2005 issue was 10.2 months for articles and brief reports, 8.2 months for the August 2005 issue, and 9.4 months for the December 2005 issue. This compares favourably to other international journals.

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