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20-year Preventive Health Strategy Exposure Draft

Thank you for the opportunity to comment on the exposure draft of the Tasmanian 20-year preventive health strategy and to offer ideas for the first four-year action plan.

Bicycle Network represents about 45,000 members nationally. We are dedicated to making it easier for more people to ride more often because of the physical and mental health benefits that regular activity brings.

We agree with the focus on physical activity in the Healthy Environments and Places and Healthy Communities and Social Conditions pillars. As we pointed out in our April 2025 submission, getting enough physical activity is one of the key determinants of good health and riding a bike is an easy way to build that activity into most days.

We note the goals to be fleshed out in four-year action plans that are relevant for bike riders:

- **Transport and active travel:** Tasmanians get around safely, easily and without fuss. We have transport that works for everyone, with cleaner, healthier ways to move and reliable options that get us and our things where we need to be without wearing us out or hurting the environment.
- **Physical activity:** Tasmania is a place where moving our bodies feels good, and every one of us can find our own pace and feel welcome, safe and proud of what our bodies can do. Our State is alive with people who feel stronger in themselves because life around us makes being active easy

Having more defined goals enables evaluation to assess whether a strategy has achieved its aims. As they stand, the goals are too broad to be meaningfully evaluated. The state government has existing strategies and plans that outline specific goals around active travel and transport that should be incorporated into this strategy. The same goes for physical activity, the strategy should reference national benchmarks of getting at least 30 minutes of moderate exercise five times a week as a measure of success.

Safe cycling infrastructure

Evidence is also strong that providing paths and cycleways that protect people from traffic will get more people moving. While this is acknowledged by the government and several councils in planning and strategy documents, the funding is rarely there to implement change to the extent needed.

There is a fair amount of “buck passing” that occurs in government when it comes to building safe, connected cycling routes that are suitable for all ages and abilities. We often hear from different levels of government and different departments, “that’s not our road” or “that’s not in scope” or “we don’t do that” instead of a whole-of-government approach.

We’d like to see the first action plan pursue a framework that holds other areas of government to account for the preventive health goals. The areas of infrastructure and transport, local government, education and planning can all contribute to safer routes for people to ride, whether it’s for transport or recreation.

The health outcomes of providing safe cycling routes should be acknowledged in assessments of new infrastructure so that safe connections are not cut out of final designs or not funded because they don’t meet the requirements of an evaluation system that has been built around existing car travel rather than the potential for active travel.

Back on your Bike

During the consultation for the strategy, Bicycle Network pointed out the lack of ongoing funding for programs and activities that have been shown to work, like our Back on your Bike program

We were not the only organisation to express this frustration, with the strategy directly referencing the need to focus on evidence-based responses.

“Lots of plans start with small pilots and hope they scale up later. But we already know what needs to be done; Tasmanians told us clearly in our consultation that they’re sick of stop-start trials that never add up to real change.”

We believe the Back on your Bike program has provided strong evidence that working one-on-one or in small groups with people helps them to be more active than they would without the intervention. We also believe that with adequate funding we could follow those participants up to keep them engaged in the activity.

Proven physical activity programs should be funded for people who cannot always afford lessons from a private provider, as should relevant equipment. The government has a history of providing financial assistance for formal sporting participation but not for individuals to get active on their own, which is often more convenient than having to

attend a club. Current sporting-club-only programs should be expanded to allow people to choose how they want to get active.

Such programs could be useful for health providers to be able to provide prescriptions for physical activity. While GPs, for example, may recommend patients get more active to avoid diabetes, heart disease and some cancers, it usually ends there.

Recommending patients attend one of the programs from a short list of activity providers who have prove their interventions make a difference may go some way to helping patients make the changes they need to.

The list of actions we included in our April 2025 submission are still useful for assessing how to make it safer and easier for people to ride or ride more often:

How we can change the way our streets operate

1. Changing the balance of the road infrastructure budget by increasing spending on AAA cycling and walking infrastructure to 20% of overall spend.ⁱ
2. Dropping traffic speed limits to safer levels, especially in built-up areas where people are walking and riding. 30km speed limits should be the norm in the hearts of our cities and towns and around schools and aged care facilities.
3. Providing separated cycling infrastructure on streets with speeds above 30km and high traffic flows.
4. Ensuring governments account for health impacts in all infrastructure builds. Providing safe pedestrian and cycling infrastructure in all road projects should be the norm and not something added on at the end, or left out completely.
5. A planning system that mandates safe, comfortable AAA rated cycling and walking infrastructure and end of trip facilities in all new developments and street upgrades.
6. Providing recurrent funding to behaviour change programs which have positive results for long-term physical activity levels, such as our Ride2School and Back on your Bike programs.

ⁱ <https://www.un.org/sustainabledevelopment/blog/2016/10/un-environment-report-put-people-not-cars-first-in-transport-systems/>