

ITEM 9: CYCLING FOR HEALTH

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1. Purpose of the Report

1.1 This report considers how cycling can contribute to beneficial health outcomes and how the Council could discharge its new responsibilities for improving public health by encouraging and enabling more people to cycle.

2. Supporting Information**Background**

- 2.1 Physical inactivity poses a major public health risk, and is associated with the increased likelihood of a range of chronic conditions including coronary heart disease, diabetes, obesity and certain cancers.
- 2.2 Around two thirds of men and three quarters of women in England do not achieve at least 150 minutes of moderate intensity activity per week, as recommended by official guidelines.
- 2.3 Encouraging more active travel is an effective way to increase physical activity levels. There is huge potential for increasing the number of journeys made by bike. Currently, these trips make up just 2% of all journeys in Britain. Around 20% of all trips made cover less than 1 mile and just over half of all car journeys cover less than 5 miles. These are ideal distances for cycling.
- 2.4 From April this year, councils in England will be taking on the new role of improving the public health of their communities, and the National Institute for Health and Clinical Excellence (NICE) has produced a range of public health briefings to help them with this, including one on promoting walking and cycling.
- 2.5 The briefing recommends addressing barriers to walking and cycling such as reducing road danger and the perception of road danger through traffic calming schemes and cycle routes and by making local facilities and services easily accessible for pedestrians and cyclists.
- 2.6 It recommends that local strategy, policy and planning, and planning applications for new developments should support walking and cycling to prioritise the need for people to be physically active as a routing part of their daily life.
- 2.7 It also recommends that local programmes should be put in place to support walking and cycling. These could include community challenges, workplace challenges, and activities aimed at children and families.

2.8 The Royal Borough is already implementing many of the recommendations from the NICE briefing, with the main activities summarised below.

NICE Recommendation	RBWM Activity
Infrastructure	<ul style="list-style-type: none"> • Cycling capital programme • Maintenance programme • Safer routes to schools programme • 20 mph zones
Policies	<ul style="list-style-type: none"> • Local Transport Plan • Local Plan • Maidenhead Town Centre Area Action Plan • Supplementary Planning Guidance (Travel Plans)
Promotional programmes	<ul style="list-style-type: none"> • Love to Ride website • Workplace Cycle Challenge • Bike It • STaRS scheme • Sky Ride Local / Breeze • Bikeability (including family sessions) • Workplace Travel Plans • School Travel Plans • Personalised Travel Planning

2.9 It should be noted that several of the promotional programmes are currently funded through the Local Sustainable Transport Fund. Future funding sources are unclear at this stage, but if these initiatives are shown to be successful, then it may be that health related funding could be considered for such programmes.

2.10 NICE says that plans to change health-related behaviour should be informed by the circumstances in which people live, especially the socioeconomic and cultural context. Barriers to change should be assessed.

2.11 The Health Profile for the Royal Borough, produced by the Public Health Observatory provides an overview of the main health indicators for local residents. A number of relevant performance indicators are summarised below.

Indicator	England Average	RBWM
Obese children (year 6)	19%	12.6%
Obese adults	24.2%	19.1%
Physically active adults	11.2%	13.4%
Early deaths: heart disease / strokes (per 100k population)	67.3	59.8
Road injuries / deaths (per 100k population)	44.3	42.4
Life expectancy – male	78.6	79.8
Life expectancy – female	82.6	83.6

- 2.12 In all cases, the Royal Borough is better than the England average. However, there is still room for improvement. Promoting increased levels of cycling and providing more segregated cycling facilities could help to improve many of these indicators.
- 2.13 It should be noted that the indicator on physically active adults is solely related to sport and active recreation and does not include activity relating to active travel (e.g. utility cycling). Department for Transport (DfT) data on cycling shows that around 13% of Royal Borough residents cycle at least once a week. Although better than the figure of 10% for England as a whole, it is still some way behind the highest level of 52% which is seen in Cambridge.
- 2.14 The DfT data does not provide any statistics by gender, but our own annual cycle counts show that women are far less likely to cycle than men, accounting for 20% of cyclists in Windsor and just 14% of cyclists in Maidenhead. This implies that we should focus activities more on encouraging women to cycle. Existing / planned activities include family Bikeability sessions and Breeze rides.

3. Recommendation

It is recommended that members of the Cycle Forum:

- a. Note the contents of the report.**
- b. Make suggestions for how the Royal Borough could best discharge its new responsibilities for improving health, in particular by promoting cycling and other forms of active travel.**
- c. Consider how other local organisations could be engaged to help promote the health benefits of cycling.**