



Registered Charity No. CC36909

Policy title: Health & Wellbeing Through Cycling			
First Produced:	20/08/2008	Authorisation:	CAN Committee
Current Version:	15/09/2014		
Past Revisions:	N/A	Officer Responsible:	Chair
Review Cycle:	3 years		
Applies From:	Immediately	Availability:	Public

CAN Policy:

All sectors of local and central government, private sector organisations and community groups should encourage, promote and provide for cycling because of its contribution to enhanced health and wellbeing.

1 Introduction

1.1 Purpose

This External CAN Policy aims to support cycling advocacy by providing a detailed explanation of cycling as a determinant of improved health and wellbeing.

1.2 Scope and application

This Policy is for public release and for use by advocacy groups. The Policy aims to influence both governmental and non-governmental decision makers to support cycling within their organisations and to promote the benefits of cycling to stakeholders. The Policy also aims encourage cycling by the general public.

1.2 Definitions

1.2.1 Health and wellbeing – a state of complete physical, mental and social wellbeing, and not merely the absence of disease or infirmity (from the Preamble to the Constitution of the World Health Organisation, 1948).

1.2.2 Cycling advocacy – an activity that aims to influence decision makers to support cycling to the benefit of the community.

2 Rationale

2.1 Physical activity contributes substantially to a person's health and wellbeing, and to the wider community through improved public health and community building (Anon 2010; Cohen et al. 2014).

- 2.2 Increased levels of cycling have been shown in multiple studies to decrease the incidence of many contemporary health problems such as obesity, Type 2 diabetes, cancer and cardiovascular disease (Pucher et al. 2010; Rissel & Watkins 2014).
- 2.3 Increased levels of cycling increase the risk of harm from traffic accidents, but this increased risk is much smaller than the collective benefits to the population as a whole (Rojas-Rueda et al. 2013).
- 2.4 Mental health and wellbeing is also increased by cycling. For example, people who cycle to work report much lower stress levels than those who drive (Rissel et al. 2014).
- 2.5 The individual health and wellbeing benefits of cycling benefit the wider community economically (Deenihan & Caulfield 2014).

3 Related CAN Policies - NA

4. Literature cited:

Anon 2010: "Wider health and wellbeing impacts of transport planning", Environment Canterbury/Canterbury District Health Board/Christchurch City Council, Christchurch. 59p.
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<http://ecan.govt.nz/publications/General/HIA%20Literature%20Review%20June%202010.pdf>

Cohen JM, Boniface S, Watkins S 2014: "Health implications of transport planning, development and operations". Journal of Transport & Health 1:63-72. Abstract available from:

<http://www.sciencedirect.com/science/article/pii/S2214140513000169>

Pucher J, Buehler R, Bassett DR, Dannenberg AL 2010: "Walking and cycling to health: a comparative analysis of city, state and international data". American Journal of Public Health 100:1986-1992. Available from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2937005/>

Rissel C, Petrunoff N, Wen LM, Crane M 2014: "Travel to work and self-reported stress: findings from a workplace survey in south-west Sydney, Australia". Journal of Transport & Health 1:50-53.

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Rissel C, Watkins G 2014: "Impact on cycling behaviour and weight loss of a national cycling skills program (AustCycle) in Australia 2010-2013". Journal of Transport and Health 1:134-140. Available from <http://www.sciencedirect.com/science/article/pii/S2214140514000188>

Rojas-Rueda D, de Nazelle A, Taino M, Nieuwenhuysen M 2011: "The health risks and benefits of cycling in urban environments compared with car use: health impact assessment study". British Medical Journal 343, d4521. Available from <http://www.bmj.com/content/343/bmj.d4521>

5. Notes and History

5.1 Policy originally drafted as the CAN Health & Fitness Policy (20/08/2008).

5.2 Reviewed and updated by the CAN Committee in September 2014.