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To: Transport & Health Policy Makers, & Practitioners

From: Prof Adrian Davis, TRI, Edinburgh Napier University

Date: 6th December 2018

Subject: Essential Evidence 4 Scotland No. 2. Cycling campaigns

promoting health versus campaigns promoting safety

Top line: Messages to non-cyclists might be more likely to influence perceptions of cycling, and positively, if they emphasise health benefits rather than safety precautions.

Cycling levels in most parts of the United Kingdom, like in many parts of the world, are stagnating or even declining. This is unfortunate, given the social benefits more utility bicycling — that is, riding to accomplish tasks such as shopping and commuting — would bring and the number of short, motorised journeys that could feasibly be transitioned to the bicycle. Of late, transport mode-choice research has started to consider the role of emotion. In the case of cycling, it is suggested that safety fears play a central role in people's decisions about whether or not to use this mode. However, little research has investigated this topic beyond the general notion that perceived traffic risk deters cycling.

Various campaigns have attempted to communicate the risks of cycling to cyclists and potential cyclists. Sometimes explicitly, but more often implicitly, these campaigns are based on models of behaviour like the Health Belief Model, which suggest that the way to make people protect themselves from risk is to make that risk more salient. This approach has worked in health settings where, for example, framing and information provision have been found to increase the perceived risks of breast cancer and thereby motivate protective behaviours such as breast self-examination and mammography screening. In a UK study addressing cycling, a research aim was to test whether promoting self-protective behaviours for cyclists – particularly with campaigns targeted at novice riders or non-riders - might fail to appreciate that people can also reduce the risk of cycling injury simply by avoiding the activity altogether. The study tested the idea that cycle safety campaigns might increase the perceived risk of bicycling and affect intentions to travel by cycle.¹ At the same time, the researchers tested the related idea that campaigns framing cycling in more positive ways might encourage participation. In the case of physical activity, research suggests that perceived health benefits and perceived enjoyment play a central role. Hence, it is possible that cycle safety campaigns might discourage people from cycling by reducing perceived health benefits and/or reducing perceived enjoyment of this activity, in addition to increasing perceived risk. Therefore, the study used both safety-focused materials, which covered risks and protective behaviours, and health-focused materials, stressing the physical and mental health benefits of cycling. For both types of material, possible shifts in both positive and negative perceptions of cycling were measured.

For non-cyclists, perceptions of health benefits increased after the health-focused message and there was no corresponding change in perceived risks from seeing the safety-focused message. As such, it appears these two types of message are not ends of a continuum but rather separately influence perceptions about cycling. Messages about safety did not 'dangerize' bicycling for non-bicyclists but messages about health did make the activity look more beneficial. People who were already cycle, on the other hand, were unaffected by all the messages, and remained throughout more positive about how enjoyable cycling is and the extent to which they intended to use a cycle in the future.

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¹ Gamble, T., Walker, I., Laketa. A. 2015. Bicycling campaigns promoting health versus campaigns promoting safety: A randomized controlled online study of 'dangerization', *Journal of Transport & Health*, 2: 369-378.