



2.2.14

Dear sir

### Adjudication 238750

THSG is the principal public health organisation in the transport field, certainly in the UK and probably in Europe.

We were deeply concerned at the ASA ruling banning a cycling advertisement in which the rider was not wearing a cycle helmet. In our view it is far from clear that cycle helmets ought to be promoted as actively as such a ruling would imply. There is significant professional and scientific controversy on this subject, so much so that the Journal of Transport and Health (a scientific journal which we sponsor for publication by Elsevier) will be devoting an entire issue to the debate in the near future.

The first problem is that epidemiological evidence has never succeeded in demonstrating at a population level the benefits that might be expected. This raises in our minds the real possibility that there is some factor which counters the benefits that might be expected from the helmet, possibly a physical factor (such as increased risk of neck damage), possibly a behavioural factor in the cyclist (such as risk compensation) or possibly a behavioural factor in others (there is one study which shows that drivers drive closer to cyclists who are wearing a cycle helmet). There are also good reasons to accept that research on cycle helmet effectiveness was strongly affected by confounding factors, related to social class differences between those who do, or do not, choose to wear a helmet. Whilst this issue remains unresolved there is a basis on which a scientifically well-informed rider could legitimately decide that it was safer not to wear a helmet.

The second problem is one of proportionality. If the above doubts can be resolved there is indeed a case for wearing a helmet whilst cycling. It is however no stronger than the case for wearing a helmet whilst walking in icy weather, whilst walking when over the age at which balance starts to decline, whilst walking when tired, inebriated or unwell, or whilst driving. Serious head injuries occur in all of these settings. Some might query the equivalence of wearing a helmet whilst cycling or whilst driving by asserting that the cyclist is more vulnerable. However, properly analysed, the statistical risks are indeed equivalent. The cyclist may be less protected but the forces involved in car collisions are greater (indeed rise with the square of the speed). Indeed, driving helmets have been compulsory in

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The Transport & Health Study Group is a network of professionals and academics which promotes the study of and research into the relationship between transport and the health

motorsport since the 1950's, yet there have been no moves to promote their use in daily driving. The case for wearing a helmet when playing football is much stronger than the case for wearing a helmet whilst cycling.

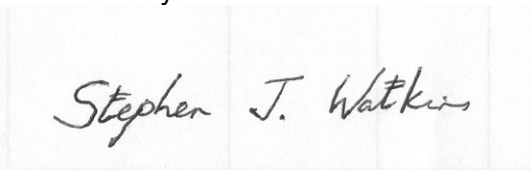
of the population. It also manages the Transport Special Interest Group of the Faculty of Public Health.

The third problem is the impact that the disproportionate advocacy of cycle helmets has on cycling rates and hence on the diseases of physical inactivity such as heart disease, obesity and diabetes. To advocate helmet-wearing when walking, driving, cycling and playing football would be harmless and would represent one legitimate point of view in the debate about risk-aversion. To pick cycling out of that list is to make it abnormal – to put it in the same category as motorcycling or being on a construction site. Cycling is safe. Urban cycling in England is safer than driving in France. Comparing like journeys cycling is very similar in risk to driving. It is safer than walking. For young male road users it is considerably safer than driving. If there is a very small difference in risk between cycling and driving it is of the same order as choices which people make unthinkingly such as to take a car rather than a train or to drive on an all-purpose road rather than a motorway. And that very small risk is more than offset for the individual by the health benefits (cycling increases life expectancy rather than reducing it) and for society by reduced third party risks (if third party risks are taken into account cycling is considerably safer than driving). Yet the false idea has arisen that cycling is unsafe. And that idea causes serious harm to many people by dissuading them from cycling.

Of course the fact that something is safe does not mean that it ought not to be made safer. It is indeed perhaps an exaggeration to describe something as safe when it is simply no more dangerous than driving, an activity which has killed more people than both world wars. But to select cycling from a list of activities which would equally benefit from helmet-wearing, and to deploy regulatory activity to cycling uniquely from that list, is to present a harmful false impression of its danger. This harmful false impression will kill people – they will be put off cycling and as a direct consequence will be twice as likely to die of heart disease and much more likely to suffer diabetes.

The ASA could correct this disproportionate message in either of two ways. It could stop banning advertisements which show cyclists without helmets or it could extend the ban to cover adverts which show people driving or walking without helmets. It should do one or other of these two things.

Yours sincerely

A handwritten signature in black ink that reads "Stephen J. Watkins". The signature is written in a cursive style and is placed on a white rectangular background.

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