



**MORE PEOPLE BIKING
MORE OFTEN**

Caithlin McArton, MPA

Policy and Legislative Analyst
Legislative and Regulatory Services
Transportation Policy Division

Manitoba Infrastructure
1520-215 Garry Street
Winnipeg, Manitoba R3C 3P3

Re: Bike Helmet Standards Consultation

Thank you for including Bike Winnipeg in the consultation process for your review of Bike Helmet Regulations.

Bike Winnipeg supports removal of the American National Standards Institute standard ANSI Z90.4-1984, *American National Standard for Protective Headgear for Bicyclists*, and Canadian Standards Association Group standard CAN/CSAD113.2-M89, *Cycling Helmets* from any list of recommended bicycle helmets, as both standards are now obsolete.

It should be noted that we have been advised that while the ASTM bike helmet standard is correct, helmet stickers will only reference F1447, not the underlying test method designated as F1446. So citing F1446 is not strictly necessary but doesn't hurt anything.

We are concerned with the general health and well-being of Manitoban's and in with the safety of children and adults on Manitoba's roadways and off road cycling infrastructure. We would welcome provincial actions to Manitoban's health and to improve their safety. We think that the best route to improve both of these goals is to ensure that the roads, cycling infrastructure, and pedestrian infrastructure in Manitoba provide people with comfortable, convenient non-motorized transportation options.

Regrettably, funding to make this happen currently falls far short of needs, as does policy.

Bike Winnipeg questions the efficacy of mandatory helmet legislation as currently required under the Manitoba Highways Traffic Act and notes that mandatory helmet legislation has not been shown is potentially counter to the provincial goal of achieving better health outcomes for Manitoban's.

For instance, in October 2015, the British Medical Journal published [Bicycling injury hospitalisation rates in Canadian jurisdictions: analyses examining associations with helmet legislation and mode share](#) by Teschke, Koehoorn, Shen and Dennis from the British Columbia and Toronto universities: "We found that lower rates of traffic-related injuries were associated with higher cycling mode shares, a finding also reported elsewhere. We did not find a relationship between injury rates and helmet legislation."



**MORE PEOPLE BIKING
MORE OFTEN**

Similarly, research conducted in May 2013 ([Helmet legislation and admissions to hospital for cycling related head injuries in Canadian provinces and territories: interrupted time series](#)) by Jessica Dennis et al from the University of Toronto and published in the British Medical Journal concluded that

“Reductions in the rates of admissions to hospital for cycling related head injuries were greater in provinces with helmet legislation, but injury rates were already decreasing before the implementation of legislation and the rate of decline was not appreciably altered on introduction of legislation. While helmets reduce the risk of head injuries and we encourage their use, in the Canadian context of existing safety campaigns, improvements to the cycling infrastructure, and the passive uptake of helmets, the incremental contribution of provincial helmet legislation to reduce hospital admissions for head injuries seems to have been minimal”

Chief among our concerns is that the introduction of mandatory helmet legislation discourages people from riding their bikes, eliminating the well understood health gains benefits gained by riding a bicycle (including reduced rates of obesity, diabetes, heart & stroke disease, hypertension, and depression). It is widely acknowledged that the health benefits gained by riding a bike greatly outweigh any increased risk posed from injury while riding by a bicycle (see <http://www.cyclehelmets.org/1015.html> for a compilation of research on health benefit vs. injury risk ratios).

For instance, a review of bicycle counts before and after passage of mandatory helmet legislation in Australia reveals that the number of people biking fell after the introduction of mandatory helmet legislation throughout that country in 1990, and have still not recovered (see Heathcote B, Maisey G. Bicycle use and attitudes to the helmet wearing law. Perth: Traffic Board of Western Australia, May 1994, Robinson DL. Head injuries and bicycle helmet laws. Accid Anal Prev 1996;28:463–75., Blacktown City Council. Blacktown Bikeplan study, final report. Sydney: Blacktown City Council, 1993., Smith NC, Milthorpe FW. An observational survey of law compliance and helmet wearing by bicyclists in New South Wales—1993. Sydney: NSW Roads and Traffic Authority, 1993., Finch CF, Heiman L, Neiger D. Bicycle use and helmet wearing rates in Melbourne, 1987 to 1992: the influence of the helmet wearing law. Report 45. Melbourne: Monash University Accident Research Centre, 1993., Heathcote B. Bicyclist helmet wearing in Western Australia: a 1993 review. Perth: Traffic Board of Western Australia).

To put things into perspective, it should be noted that in 2001, deaths in Canada due to all circulatory disease were approximately 60,000 compared to 63 from cycling related injuries (16 Health indicators-January 2005, Statistics Canada – Catalogue no. 82-221, Vol 2005 No1.).

For these reasons, we think that a better approach to helmet standards would be to regulate through other legislation such as the consumer protection act.

Sincerely,

Mark Cohoe
Executive Director
Bike Winnipeg