What are the barriers to cycling amongst ethnic minority groups and people from deprived backgrounds?

Policy Analysis Research Summary, November 2011

Introduction

Cyclists in London are typically white, under 40, male, with medium to high household income. Evidence to date suggests that the increase in cycling in London has come from existing cyclists cycling more often rather than a net increase in the number of cyclists. To meet the Mayor’s challenging targets for cycling (a 400% increase in trips between 2001 and 2026 and a 5% mode share), TfL needs to implement initiatives that encourage current non-cyclists to start cycling. Black and ethnic minority (BME) groups, women, people from more deprived neighbourhoods, those with disabilities and older people are typically under-represented in cycling. However, there is a significant opportunity to increase cycling amongst these groups. For example, BMEs represent 35% of all ‘potential’ cyclists in London.

This note sets out our current understanding of the lower levels of participation in cycling among BME and other disadvantaged groups and explores the barriers that deter them from cycling.

Who participates in sport?

Population estimates (2005) show that in England as a whole, 89% of the population is white and 11% BME. In London, 30% of residents, and 48% of those aged under 20, are from BME backgrounds, and the proportion will increase in the future.

People from the poorest households and living in deprived areas are also the least active. As 44% of the BME population in England falls within the most deprived fifth of society, it is not surprising to find that BME groups tend to have lower levels of participation in physical recreation, particularly BME women. This is reflected in poorer levels of health – many ethnic minority groups experience higher levels of cardiovascular disease, diabetes and coronary heart disease.

Over half of those from ethnic minority groups do no sport or physical activity and Asian (Indian, Pakistani, Bangladeshi and Chinese) groups in England are less likely to meet the physical activity recommendations than the general population. Only 11% of Bangladeshis and 14% of Pakistanis women meet the recommended physical activity levels, compared to an average of 28% of women.

Who participates in cycling?

While cycling is apparently the fourth most popular sport undertaken on a regular basis for recreation amongst BME groups, less than 7% of all cyclists are BMEs. Recent data suggests that 4.7% of white adults in England participate in cycling, compared to just 2.6% of BMEs. TfL data similarly shows that white Londoners are more likely to cycle than those from BME groups: 57% of white Londoners say they ‘never’ cycle, compared to 71% of residents from ethnic minority backgrounds.

Yet participation is very diverse and levels vary considerably between and within BME groups. Asian residents are the least likely to cycle (6% do so once a week), followed by Black residents (8%) while

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1 TfL (2010) Analysis of Cycling Potential
2 Produced by Office for National Statistics (ONS) based on 2001 Census data, quoted in Systematic Review of the Literature on Black and Ethnic Minority Communities in Sport and Physical Recreation, p11
3 Based on 2001 Census categories, ‘White’ includes White British (Scottish, Other British), Irish, Other White and ‘BME’ includes Mixed White and Black Caribbean, White and Black African White and Asian Other Mixed, Asian or Asian British/Scottish Indian, Pakistani, Bangladeshi, Other Asian, Black or Black British/Scottish Black Caribbean, Black African, Black Other, Chinese or other ethnic group Chinese, Other
5 Active Travel (2008) Active travel and health inequalities, Information Sheet FH12
6 Dept of Health 2007 data, quoted in Active Travel (2008) Active travel and health inequalities, Information Sheet FH12
7 ONS (2005) data, quoted in Active Travel (2008) Active travel and health inequalities, Information Sheet FH12
8 British Cycling & Sporting Equals (2010) British Cycling Tackling Inequalities
9 30 minutes of moderate intensity physical activity on at least 5 days per week for adults
11 Sporting Equals (2010) Cycling, Briefing Sheet 01
12 Sport England (2010), Active People Survey (APS) results for Cycling (APS2 Oct 07/Oct 08 to APS4 Oct 09/Oct 10)
13 TfL (2010) Travel in London 3
those with a mixed ethnicity are as likely as white Londoners to be frequent cyclists (10% of both groups cycle on at least two days per week). White and BME men are more likely to cycle than white and BME women: 7% of white and 4% of BME men cycle weekly, compared to just 2% of white and 1% of BME women. There are more than three times as many cyclists with an annual household income of over £52,000 than with an income of less than £15,559, and in London, only 9% of those with a household income of less than £20,000 cycle on at least a weekly basis, compared to 15% of those with an income of at least £50,000.

Though, given its relative affordability, cycling is seen as one of the most equitable forms of transport, this is not reflected in participation levels, as lower income groups and BMEs, particularly women, are far less likely to cycle. However, there is considerable potential to increase levels of cycling among these groups in London: 13% of potential cyclists are Black, 15% Asian and 7% Mixed and Other ethnicity, and 22% are on a low income (less than £20,000).

TfL segmentation analysis shows that the Young Couples and Families is one of the two groups with the greatest propensity to cycle at present and in the future. Around half of the population of this group has a BME background. This segment makes more than 600,000 potentially cyclable trips per year. The Hard Pressed Families group, 58% of which is BME, also shows some willingness to cycle in the future: the group makes more than 800,000 potentially cyclable trips per year. Given the sheer volume of potential for cycling amongst BME and low income groups, it is imperative to understand the barriers that currently prevent them from cycling.

What are the barriers to participation in cycling?

"Socio-economic status has been demonstrated to be a major factor in the inclusion in, and exclusion from, regular and higher levels of sport participation. Being a member of a BME community is associated with higher incidences of disadvantage stemming from long-term unemployment, low income, poor living conditions and poor health, which act as material constraints on participation.” (Carnegie Review, 2009).

Research has demonstrated that overall, the main barriers to cycling are primarily safety concerns (associated with traffic and crime), the lack of facilities for cyclists and poor weather. A number of studies have highlighted the deterrents that are specifically relevant to those from BME and disadvantaged communities, though it is noted that in nearly all cases, cycling is seen primarily as a recreational activity rather than as a mode of transport. These barriers, taken from a range of sources, are summarised in Figure 1 overleaf.

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14 TfL (2011) Travel in London, Supplementary Report: London Travel Demand Survey (LTDS)
15 Sporting Equals (2011) Insight Report: Active People Survey Trends–BME Communities, provided by email
16 Sport England (2009) Primary Offer Data: Information pack for cycling
17 TfL (2009) Travel in London 2
18 TfL (2010) Analysis of Cycling Potential
19 TfL (2010) Analysis of Cycling Potential
21 Bowles Green Ltd (2008) on behalf of Blackburn with Darwen Borough Council and Lancashire County Council, Engaging Ethnic Minority Communities in Cycling
22 TfL (2008) Assisting Decisions: Exploratory car ownership and use research
23 Sustrans (2011) Ocean Estate Community Travel Planning: Project Activity Report, provided by email
24 TfL (2009) Travel in London 2
26 STA bikes (by email/phone) www.stabikes.org.uk
Figure 1: Summary of barriers to participation in cycling

<table>
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<th>Limited opportunities</th>
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<td>Demands on time – ‘home and family responsibilities’ are the main barrier to participation for many BME groups, particularly for women (responsible for caring for children and other members of the family), while ‘work and study commitments’ are the main barrier for men and some women. Religious commitments also leave little time for sporting activities, for example, as young Asian Muslims attend mosque after school, they do not have much leisure time.</td>
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<td>Affordability – 57% of ethnic minority groups are excluded from participation by poverty. For those on a very low income, the cost of a bike may be a significant barrier to cycling.</td>
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<td>Accessibility – BME groups are distanced from cycling due to a lack of culturally accessible facilities or provision, including low levels of bicycle ownership, a lack of places to cycle, inappropriate clothing (e.g. Asian women), limited places to store or clean a bike, and having to carry a bike up several flights of stairs.</td>
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<td>Awareness – few services specifically target BMEs; as the majority of messages are communicated in English through typical English language mediums such as television, newspapers and publications, they often escape people who are culturally isolated. There is poor awareness of local walking and cycling routes amongst those who rarely walk, cycle or travel outside their immediate area.</td>
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<td>Understanding – residents in deprived areas may not understand that cycling can improve health and fitness. In the Ocean Estate in Tower Hamlets, residents had little understanding of ‘active travel’, its benefits and how it might work for them.</td>
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<td>Need – many Asian families run their own car-sharing networks to transport their children between home, school and the mosque, so they have little need or opportunity to cycle. Good public transport services in more deprived areas can also reduce the need to cycle.</td>
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<td>Environment - people from the most disadvantaged communities are more likely to live in an ‘obesogenic’ environment which discourages walking and cycling. Concerns about personal safety and traffic are also important deterrents.</td>
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<td>No role models to raise awareness and encourage community participation. Low rates of participation can be self-perpetuating – as cycle clubs have few BME members, potential new members may instead turn to other sports clubs with a higher BME presence (e.g. football).</td>
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<th>Image &amp; Perceptions</th>
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<td>Social status &amp; aspirations – cycling is seen by some BMEs as an activity for males of low status. Young Asians are expected to reflect the wealth and status of their parents, and cycling is not seen to do this. Similarly, car ownership is seen as prestigious in some migrant communities in London who prefer the convenience and status that car travel affords. The social connotations of owning a car are deeply ingrained in some communities who see driving as a ‘right’. Here the main barriers to cycling are associations with poverty and lack of freedom: active transport is rarely a choice; walkers and cyclists are seen as ‘disadvantaged and poor’.</td>
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<td>Negative perceptions – young Asians do not consider cycling to be ‘cool’, and they would rather drive or car share. Women (and some men) would be ashamed to be seen cycling by their peers, and Asian men would not wish their wives to be seen cycling. The car is also felt to provide greater personal security.</td>
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<td>Cultural constraints – the value of cycling may not be appreciated or understood by the individuals, their parents or the wider community. As culturally embedded perceptions such as fear are often hard to change, the anxieties of family, friends and colleagues can work against a desire to cycle. In parts of Hackney, though children received cycle training at school, this was not sufficient to encourage them to cycle outside or to/from school because their parents, typically non-cyclists, did not consider cycling to be a valid or safe mode of transport.</td>
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<td>Social intimidation – residents do not want to be in the ‘social minority’ or want to try something new on their own. Conversely, a feeling of being excluded can make an individual feel unable to participate.</td>
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<td>Poor understanding of the cultural needs of BME communities; sustained by a lack of consultation with these communities when new ‘culturally-appropriate’ facilities and services are introduced.</td>
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<td>Lack of funding for programmes to remove the barriers to cycling in particular communities.</td>
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<td>Suspcion of projects introduced by people outside the community.</td>
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TfL research\(^\text{27}\) suggests that a fear of crime, anti-social behaviour or concerns about image may be greater barriers to low income groups. Looking specifically at potential cyclists in London, not owning

\(^{27}\) TfL (2010) Analysis of Cycling Potential
a bike, the cost of a bike and the lack of secure cycle parking (at both home and destination) are
particular barriers for the Young Couples and Families group. The Hard Pressed Families Group is
more likely than others to be deterred by concerns about personal safety (e.g. from an attack) and
security of the bike.

Are specific initiatives necessary to encourage higher levels of participation?

The London Cycle Hire scheme has not been effective in reaching those from minority or deprived
backgrounds. Users are very similar in profile to cyclists in London: just 12% are from BME groups
and only 5% have a household income of less than £20,000 per year (compared to 40% of London
residents)\(^{28}\). The profile of Cycle Superhighways users is similar: only 7% of CS7 and 4% of CS3 users
have a household income of less than £20,000 per annum, and 7% of CS7 users/ 12% of CS3 users
are from a BME background\(^{29}\). However, earlier research into the target market, based on the
ethnicity of the areas in which the routes are located, suggested that around 42% of CS3 users and
25% of CS7 should be BMEs\(^ {30}\).

Though there is some anecdotal evidence to suggest that participation levels in 2010 showed an
increase on previous years in Greater London, official Sky Ride Local data confirms the low levels of
participation of BME groups in organised cycling activities\(^{31}\).

Without specific initiatives to tackle the barriers amongst BME and deprived communities, there is a
risk that the profile of cyclists in London will be skewed towards white, professional males and the
challenging cycling targets will not be realised.

What initiatives could work?

Sustrans’ Active Travel recently worked to encourage people in the most deprived areas of Luton to
walk and cycle. The project involved cycle skills training for young people, women and other groups,
free bike loan and bike maintenance workshops. The programme was effective in engaging BMEs:
almost one in three Luton residents have a BME background and 38% of participants were BMEs\(^ {32}\).

Recent experience in Bradford found that if the barriers that prevent some ethnic groups from cycling
are addressed, higher levels of BME participation can be realised. Of four Sky Ride Local events
specifically targeted to the Asian community, 121 participants took part, and 70% stated that they
would definitely participate in cycling again (50% of participants were new to cycling).

As bike ownership was one of the greatest barriers to participation, participants were provided with
free bike and helmet hire. To avoid issues of social stigma, the rides were planned on traffic-free
routes away from the local community, with free transport to/from the start/finish point. Given that
communities are often suspicious of initiatives led by people outside the community, Bradford Youth
Service was closely involved in setting up the rides and ride leaders (men and women) were recruited
from the BME communities (some were Youth Service employees). This ensured that they were seen
as ‘role models’, already respected by the community. The registration process took place face to
face as many participants did not have internet access.

Tuition and coaching played a key role. Cycling training was also provided in advance of ride day to
those who required it (mainly women and girls). With five ride leaders deployed on each ride, they
were able to provide additional support and encouragement during the rides. This ensured that all
who wanted to were able to participate. Cycling in a controlled group environment was felt to be
particularly important for women, as it promotes safety, socialising and builds confidence.

A focus on having fun and building confidence has been effective in breaking down the barriers to
cycling in hard to reach communities in Hackney\(^ {33}\). Family cycle clubs were set up so the whole
family could learn to cycle (using pool bikes) in a relaxed and informal environment. Trainers and
mechanics were recruited from the local area (familiar faces) and participants found ‘buddies’ for
additional support. All who completed the course received a free (recycled) bike and lock.

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\(^{28}\) TfL (2010) *Travel in London 3*. It is noted that many users are not London residents

\(^{29}\) TfL (2010) *Travel in London 3*


\(^{31}\) British Cycling & Sporting Equals (2010) *British Cycling Tackling Inequalities*

\(^{32}\) Information provided by Sustrans (by email)

\(^{33}\) Information provided by STA bikes (by email/phone) [www.stabikes.org.uk](http://www.stabikes.org.uk)
Flexibility was key in a year long active travel initiative in Tower Hamlets\textsuperscript{34} which included a programme of women’s cycle training using free loan bikes. Activities were replicated at a number of different times each week. The in-house cycle instructor was able to get to know the residents over time and was able to respond to last minute cancellations, and having a female Bengali-speaking cycle instructor proved invaluable. Participation in cycling has been sustained following completion of the initiative. Women are able to borrow pool bikes and at least two of the women who learnt to cycle have become cycle instructors, leading regular cycle rides from a community centre and continuing the women’s cycling group that was established during the project.

An emphasis on leisure rather than utility cycling has also proved to be more effective. While people in deprived communities may not be keen on active transport as a means of getting around, many have expressed an interest in participating for leisure, perhaps outside the local area\textsuperscript{35}. TfL research\textsuperscript{36} confirms the importance of framing cycling as a pastime for the whole family (60\% of those in the Young Couples and Families agree that “cycling is a family activity”). This group makes an above average proportion of potentially cyclable education trips, and indeed a quarter of the potentially cyclable trips are made by children aged 5–19 (10\% are made by those aged 5–9).

Any marketing strategy must also consider the demographics of the target audience, and it should be noted that the age structure of BME groups differs to that of the White British population. For example, over a third of the Bangladeshi and Pakistani communities are aged under 16 years, compared to 20\% of the White British population\textsuperscript{37}. Furthermore, any initiative must be specifically targeted to a particular audience (e.g. younger people, women, men) as the barriers that deter people from cycling are diverse even within a particular ethnic group.

By tackling specific barriers to cycling in certain BME and deprived communities, there has been definite success in increasing cycling participation. The key challenges are to sustain participation in cycling once specific training initiatives have been concluded and funding streams consumed, and subsequently move BME informal recreational cycling to more frequent utility cycling.

Summary & Conclusions

Many of the barriers that restrict BME groups participating in cycling can be overcome through localised and relatively resource intensive initiatives that include:

- Making cycling more economically accessible through initiatives such as recycled/pool bikes.
- Offering training to provide reassurance to participants that they can cycle.
- Running led group rides in controlled traffic-free environments to emphasise safety, build confidence and encourage socialising.
- Making use of existing groups and networks – building on existing relationships (trust/ role models) to successfully engage with the community and encourage people to ‘try’ cycling.
- Empowering members of the local community to help plan and deliver the initiatives - research demonstrates the benefits of schemes being run by ‘insiders’ and trusted networks of voluntary and community groups that are better placed to ‘broker relationships’\textsuperscript{38}.
- Tailoring flexible programmes that can accommodate home and family commitments, religious duties and cultural events. Cycling activities should also be run in warmer months (May – September), when the weather is more favourable.
- Involving the family – encouraging participants to see cycling as a family activity/hobby.
- Using community languages – recruiting staff with relevant language skills, and involving them in the design of baseline data collection and marketing materials from the very outset.

\textsuperscript{34} Sustrans (2011) Ocean Estate Community Travel Planning: Project Activity Report, provided by email
\textsuperscript{35} Bird, S. (2010) Active transport in deprived communities: why the car is king, International Non-profit and Social Marketing Conference, 15–16 July, Brisbane, Australia
\textsuperscript{36} TfL (2010) Analysis of Cycling Potential
However, interventions that specifically target BME communities and other deprived groups tend to be more resource intensive than standard programmes. For example, delivering the Bradford Sky Ride Local pilot rides cost around £25 per participant, compared to the average of £14 for other Sky Ride Locals. Furthermore, interventions such as those discussed in this note require long term strategic and operational partnerships and investment to be sustained to achieve a step change in participation amongst the BME community. Experience in Tower Hamlets and Hackney demonstrates that while fixed term initiatives do not generally allow for the funding of on-going activities, support, bike maintenance and refresher training need to be maintained to sustain interest in cycling. But where does the funding for this come from?

Some (e.g. Bird 39) question whether disproportionate resources are being allocated towards encouraging behavioural change in deprived groups and whether budgets may be used more efficiently on groups with lower emotional and practical barriers to surmount. But herein lays an ethical dilemma: by targeting the easiest (middle class) groups, are we further marginalising deprived groups?

Given the very localised nature of the initiatives discussed in this note, it is difficult to see whether they could ever work on a larger scale, such as throughout London. Furthermore, it is essential to recognise the differences between various BME groups and not treat the BME community as one homogenous group. Though TfL’s Attitudes to Cycling study found that people from ethnic minority groups were as likely as white residents to say that they ‘find cycling appealing’, earlier research elsewhere in the UK 40 found that cycling is more appealing to some ethnic groups than others.

As the barriers and motivations to cycling are very personal, there is no ‘one size fits all’ approach to encouraging cycling even for a specific ethnic group, and initiatives should therefore be tailored to address the obstacles that currently deter residents from cycling in particular communities. The only means of achieving greater cycling participation amongst deprived groups is to respond to the specific cultural and religious needs in the communities; and for this to happen requires the communities themselves to be involved in the design of any initiatives from the very outset.

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40 Referenced in Bowles Green Ltd (2008) on behalf of Blackburn with Darwen Borough Council and Lancashire County Council, Engaging Ethnic Minority Communities in Cycling