

Bicycle Helmet Law

A Very Brief Public Health Ethics Case

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This short document presents a case study comprising a scenario and accompanying resources for further reading. We originally produced this case for use during a webinar held in October 2015.¹ We have adapted this and other cases and republished them together so that they might be used in combination with the summary versions of ethics frameworks for public health that we have produced to date. They are intended to give public health practitioners some material for practice in ethical deliberation.

Case

Your health authority is partnering with the provincial government to develop a mandatory helmet law for all cyclists. If the law passes, your office will be responsible for an information campaign, a rebate program for helmet purchases, and ongoing research.

Instructions

Through deliberation, please:

- Identify the ethical issues that arise in this case.
- Make a decision about whether your health unit should
 - Approve this law
 - Approve a modified version of the law
 - Reject this law / propose an alternative.
- Give reasons for your decisions.



Figure 1 Cyclists wearing helmets

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Some considerations

- In 2015 :
 - 5 Canadian provinces had laws requiring all cyclists to wear helmets (BC, NB, NS, NL & PE);
 - 3 provinces required only minors to wear helmets (AB, MB & ON);
 - 2 provinces and 3 territories had no bicycle helmet laws (QC, SK, NU, NT & YT).
- Adopting a mandatory helmet law is associated with an increase in helmet wearing (Institut national de santé publique du Québec [INSPQ], 2010; Public Health Ontario [PHO], 2014).
- The more comprehensive the law, the more helmet wearing increases (PHO, 2014).

¹ The PowerPoint and recording of the webinar are available online at: http://www.ncchpp.ca/128/Presentations.ccnpps?id_article=1491



- Combining a mandatory helmet law with education and information increases helmet wearing (PHO, 2014).
- An increase in helmet wearing decreases the number of head injuries, hospitalizations and deaths (INSPQ, 2010; PHO, 2014).
- Subsidies for helmet purchases are cost-effective, and especially so for children (Kopjar & Wickizer, 2000).

Resources and additional reading

Adapted summaries of public health ethics frameworks and cases:

http://www.ncchpp.ca/127/Publications.ccnpps?id_article=1525

A repertoire of ethics frameworks for public health (with links to the documents):

http://www.ncchpp.ca/708/Repertoire_of_Frameworks.ccnpps

Population and Public Health Ethics: Cases from research, policy, and practice

This book brings together 16 cases of ethical issues encountered across a range of public health issues and sectors and presents accompanying analyses by leading experts in public health ethics.

http://www.ncchpp.ca/127/Publications.ccnpps?id_article=720

References

Institut national de santé publique du Québec (INSPQ). (2010). *Mémoire déposé à la Commission des transports et de l'environnement dans le cadre des consultations sur le projet de loi no 71, loi modifiant le Code de la sécurité routière et d'autres dispositions législatives*. Québec: Institut national de santé publique du Québec. Retrieved from: https://www.inspq.gc.ca/pdf/publications/1053_MemoireSecuriteRoutiere.pdf

Kopjar, B. & Wickizer, T. M. (2000). Age gradient in cost-effectiveness of bicycle helmets. *Preventive Medicine*, 30(5), 401-406.

Public Health Ontario/Santé publique Ontario. (2014). *For Better or for Worse? Synthesis of the Evidence on the Impacts of Mandatory Bicycle Helmet Legislation*. Retrieved from: https://www.publichealthontario.ca/en/LearningAndDevelopment/Events/Documents/Mandatory_bike_helmet_legislation_Berenbaum_2014.pdf

Questions or comments?

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