

## **Effectiveness of a bicycle skills training intervention on increasing bicycling and confidence: a longitudinal quasi-experimental study**

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**This is a PREPRINT of an article published in the Journal of Transport & Health. Please cite the updated published version:  
<https://doi.org/10.1016/j.jth.2019.100577>**

## Abstract

**Background:** Bicycling shows potential for addressing both health and transportation challenges. One strategy to encourage more people to bicycle is skills training courses; however, there is limited evidence for their effectiveness, especially longer-term. We assessed the impact of adult bicycle skills training programs offered in Metro Vancouver, Canada, using a longitudinal, quasi-experimental study design to compare changes in bicycling and confidence over time between course participants and a comparison group.

**Methods:** Bicycle courses delivered by accredited instructors, 2 to 4.5 hours in duration, aimed to increase participant comfort level to ride on residential and urban streets through teaching in-person and on-road traffic handling skills. We collected data in 2016 and 2017 through online questionnaires at baseline, 1, 3, and 12 months post-course, and used mixed models to assess changes.

**Results:** We enrolled 135 course and 43 comparison participants. At baseline, 32 participants reported no bicycling; 18 started bicycling during the study. Adjusted models did not find different trajectories for course and comparison participants for bicycling overall (RR=0.99, 95% CI: 0.96, 1.02) or for any specific purpose (commuting RR=1.03, 95% CI: 0.99, 1.08; errands RR=0.97, 95% CI: 0.93, 1.01; leisure RR=0.96, 95% CI: 0.93, 1.00), or for confidence.

**Conclusion:** Bicycle courses aim to address individual-level barriers to bicycling, such as skills, knowledge, and confidence, but such courses may not be enough to overcome other barriers. Bicycle courses should be combined with environmental and other means of support to achieve greater impact on bicycling.

*Keywords:* bicycle; training; course; participation; evaluation; behaviour change

## 1 **1.0 Background**

2 Active transport (walking, bicycling, and relatedly public transport) has multiple benefits,  
3 including environmental, congestion, and health benefits (Götschi et al., 2016; Zahabi et al.,  
4 2016). For these reasons, increasing the number of people using bicycles for transportation has  
5 become a public health goal. Bicycling behaviours depend on multiple intersecting variables,  
6 such as socio-demographic, attitudinal, and environmental characteristics that vary by trip  
7 purpose and throughout the life course (Buehler and Pucher, 2012; Chatterjee et al., 2013;  
8 Heinen et al., 2010; Willis et al., 2015). Notably, studies have found that safety concerns about  
9 sharing the road with motorized vehicles pose a major barrier in people's decisions about  
10 whether to bicycle (Fishman et al., 2012), as do related aspects such as confidence (Willis et al.,  
11 2015; Xing et al., 2010).

12 Many bicycle skills training courses ("courses") aim to enhance confidence and bicycling skills  
13 through education and opportunities to practice (Hawley and Mackie, 2015; Johnson and  
14 Margolis, 2013; Rissel and Watkins, 2014; Rowe et al., 2016; Telfer et al., 2006; Zander et al.,  
15 2013). Countries with low bicycling prevalence (such as Canada and the US) often lack universal  
16 school-based bicycling education, meaning the majority of the population has never received  
17 formal instruction for bicycling. Courses can address individual-level barriers such as low  
18 confidence, not knowing rules, or insufficient bicycle handling skills (Handy et al., 2014),  
19 although cannot directly modify systemic barriers such as distance, infrastructure, or weather.

20 There are few studies on the effectiveness of bicycle courses for adults (Johnson and Margolis,  
21 2013; Pucher et al., 2010) (Table 1). Table 1 summarizes published literature on adult bicycle  
22 courses from a recent scoping review on pre-post studies (Sersli et al., 2018), supplemented with  
23 evidence derived from different study designs. These ten studies varied in focus, design, and  
24 quality. Women (Hawley and Mackie, 2015; Johnson and Margolis, 2013; Rissel and Watkins,  
25 2014; Telfer et al., 2006; Transport for London, 2017, 2016; van der Kloof et al., 2014) and  
26 people new to bicycling (Hawley and Mackie, 2015; Johnson and Margolis, 2013; Transport for  
27 London, 2017; van der Kloof et al., 2014) were well represented in courses. Outcomes varied:  
28 some studies measured only overall bicycling (Hawley and Mackie, 2015; Rissel and Watkins,  
29 2014; Zander et al., 2013) while others measured bicycling for a specific trip purpose (Bernstein  
30 et al., 2017; Transport for London, 2017, 2016). Follow up periods ranged from immediately  
31 post-course to one or more years, and some studies had large losses to follow up. Only one study  
32 (a trial where 21 participants were given bicycles and participated in a course) had a comparison  
33 group (Bernstein et al., 2017). Three studies were from the same city (London) (Johnson and  
34 Margolis, 2013; Transport for London, 2017, 2016). While the small number and heterogeneity of  
35 studies makes it difficult to draw conclusive statements, the sparse evidence available suggests  
36 that training may encourage bicycling. Results also show that confidence increases after course  
37 participation (Johnson and Margolis, 2013; Rissel and Watkins, 2014; Telfer et al., 2006;  
38 Transport for London, 2017, 2016), as does recreational (leisure) bicycling. Increases in  
39 transportation bicycling uptake have been more modest.

40 Given the need for guidance on effective interventions to encourage bicycling, we partnered with  
41 a bicycle advocacy organization delivering bicycling courses to adults in Metro Vancouver to  
42 assess the impact that courses have on bicycling uptake. Our aim was to compare changes over

43 one year in bicycling overall, in transportation-specific (commuting, errands) and leisure  
 44 bicycling, and in confidence, between course participants and a comparison group.

45 [TABLE 1 here]

## 46 **2.0 Methods**

### 47 **2.1 Setting**

48 Metro Vancouver is comprised of 22 municipalities with diverse urban form and transportation  
 49 infrastructure. Its mild climate is conducive to year-round bicycling. The bicycle route network  
 50 is relatively dense within the city of Vancouver, more so than in the surrounding than its  
 51 surrounding municipalities. Bicycle journey-to-work mode share in Metro Vancouver is 2.3%,  
 52 but 6.1% within the city of Vancouver itself (Statistics Canada, 2017).

### 53 **2.2 Intervention: Adult bicycle skills training courses**

54 In 2016 and 2017, 28 bicycle courses were offered through a bicycling advocacy organization  
 55 during the summer months (late April-early October), in the city of Vancouver (n=23 courses) or  
 56 neighbouring municipalities (n=5). Courses were each between 2 and 4.5 hours in duration,  
 57 consisting of one session, and delivered by accredited instructors with an instructor-student ratio  
 58 of 1:6. Participants registered for courses online and paid a nominal course fee (\$10 to \$45).

59 The bicycle courses were designed to address bicycling in urban environments, including on  
 60 streets shared with cars. Participants were expected to have at least some level of bicycle  
 61 proficiency (courses were advertised “for anyone who can already ride a bike”). Courses  
 62 contained: 1) a theoretical component involving slides, and a learning environment encouraging  
 63 classroom questions; 2) the distribution of written resources (such as municipal bicycling maps);  
 64 and 3) a bicycle riding session involving practice of bicycling technique in traffic-free areas and  
 65 on streets with quiet to moderate traffic.

66 To describe course content we used a taxonomy of Behaviour Change Techniques (BCTs)  
 67 developed by Michie and colleagues (Michie et al., 2013). BCTs can identify the “active  
 68 ingredients” of interventions and were developed to improve the clarity of intervention  
 69 descriptions. Table 2 outlines the BCTs used in courses, including instruction, information,  
 70 opportunities to practice skills, and opportunities to practice skills in progressively more  
 71 complex street environments.

72 In absence of an explicit program theory of how the course leads to changes in confidence and  
 73 bicycling, we mapped the BCTs used in the courses back to the Theoretical Domains Framework  
 74 and corresponding Capability, Opportunity and Motivation-Behaviour (COM-B) system of  
 75 behaviour change (Cane et al., 2015). Both the Theoretical Domains Framework and COM-B  
 76 were developed as resources to guide intervention development. Whereas the Theoretical  
 77 Domains Framework consists of dozens of theoretical constructs from multiple behaviour change  
 78 theories sorted into 14 domains, the COM-B system is even more streamlined, hypothesizing  
 79 behaviour change in terms of psychological and physical capability, physical and social  
 80 opportunity, and reflective and unconscious motivational barriers and enablers (Atkins et al.,  
 81 2017; Cane et al., 2012).

## 82 **TABLE 2 Behaviour change techniques (BCTs) used in bicycle skills training intervention**

BCT #	BCT description	Course content example	Theoretical Domains Framework	Capability, Opportunity and Motivation-Behaviour (COM-B)
4.1	Instruction on how to perform the behaviour	Visual and verbal instruction about observing traffic rules as a bicyclist (e.g., road position, stop signs, left-turns), route-planning, using public transit with bicycle	Knowledge Skills Belief about capability	Capability Capability Motivation
5.1	Information about health consequences	Visual and verbal information about traffic rules as applying to bicyclists, such as bicycling distance from parked cars, vehicular left-turns	Knowledge Belief about consequences	Capability Motivation
6.1	Demonstration of the behaviour	Instructors demonstrate emergency braking, shoulder-checking, hand-signals, vehicular left-turns	Skills Belief about capability	Capability Motivation
8.1	Behavioural practice/rehearsal	In a traffic-free area, participants practice bicycle skills demonstrated by instructors. On streets with quiet/moderate traffic, participants practice bicycle skills such as lane position and/or distance from parked cars, 4-way stops, vehicular left turns.	Skills Belief about capability	Capability Motivation
8.7	Graded tasks	Participants practice bicycle skills in traffic-free areas, then quiet streets, then to progressively more complex street environments with moderate traffic.	Skills Belief about capability	Capability Motivation

### 83 2.3 Study design

84 We used a longitudinal, quasi-experimental study design. We recruited registered participants  
85 through email and in person. Participants were eligible if they were aged 19 or older and had  
86 sufficient English to complete the surveys. They were sent a web link to complete baseline  
87 surveys before or within 6 hours of completing their course. Participants who cancelled or  
88 missed their course were recruited for the comparison group. Comparison participants were  
89 screened to ensure they had not attended other courses that summer. All participants were  
90 offered \$10 gift card compensation for completed questionnaires.

91 Questionnaires included bicycling behaviors and attitudes, neighborhood perceptions, individual  
92 and household demographics, and residential postal code. Data was collected across four time  
93 points: baseline, 1, 3, and 12 months follow up. The Simon Fraser University Research Ethics  
94 Board (2015s0220) granted ethics approval for this study.

### 95 2.4 Measures

#### 96 2.4.1 Outcome: Bicycling

97 We assessed bicycling for three purposes: for commuting (i.e., “to work or school”), for errands  
98 (i.e., “for errands or shopping”), and for leisure (i.e., “outdoors for fun or exercise”). For each  
99 purpose, participants reported how many days in the past month they bicycled, from a set of

100 discrete categories (e.g., 1-3 days in the past month). The midpoint of each range was used to  
101 calculate the number of days of per month. We calculated days of overall bicycling by summing  
102 the days of commuting, errands, and leisure for each participant.

#### 103 *2.4.2 Outcome: Confidence*

104 We used three items for confidence that relate to aspects targeted during the course. Participants  
105 were asked to rate their degree of confidence based on the following: (1) knowing how to ride a  
106 bicycle; (2) bicycling on a street with cars; (3) bicycling on a path away from traffic; (4) using a  
107 map to select a route; (5) bicycling for daily travel; (6) knowing where safe routes are located;  
108 (7) bicycling with things to carry; (8) bicycling in rainy weather; and (9) bicycling with children  
109 For analysis, we categorized the five-point Likert responses as confident (“strongly agree”,  
110 “agree”) or not confident (“neither agree nor disagree”, “disagree,” and “strongly disagree”).

#### 111 *2.4.3 Primary variables*

112 To assess the effect of the course over time, we treated time as a continuous variable (0, 1, 3, 12  
113 months). We used a treatment variable to indicate if participants were in the intervention  
114 (attended the course) or comparison group (signed up but did not attend the course). The  
115 interaction term (time\*treatment) was our primary coefficient of interest, as it indicates the  
116 differential change across time in bicycling for intervention and comparison participants.

#### 117 *2.4.4 Covariates*

118 Demographic information was collected at baseline. Participants were asked to report their  
119 gender, age, education, ethnicity, number of years lived in Canada, income, and number of  
120 children under 17 years in the household. Additional information was collected at each  
121 measurement period, including access to a bicycle, access to a motor vehicle, employment and  
122 student status, and residential postal code. In models we included the following covariates: age  
123 (< 40 years versus  $\geq$  40 years); city (Vancouver, other); Bike Score<sup>®</sup> (a composite measure based  
124 density of bike lanes, hilliness, destinations, and road connectivity) (Winters et al., 2016)) at  
125 home residence. We also include seasonality, as participants enrolled in courses throughout the  
126 summer months, meaning that those who enrolled in a bicycle course in August or later had their  
127 1 and/or 3 month follow up measures during or after October, when the weather in Metro  
128 Vancouver becomes cooler and rainier. To control for seasonality, we used the season of the  
129 course (“April-July” or “August-October”).

### 130 **2.5 Statistical analyses**

131 We used descriptive statistics to present demographic characteristics of the treatment groups at  
132 baseline, and we assessed differences in factors related to bicycling between treatment groups  
133 using t-tests for continuous variables and chi-square analyses for categorical variables. To  
134 control for initial group differences, we included characteristics that were significant at  $p < 0.05$  as  
135 covariates in our adjusted model, plus gender.

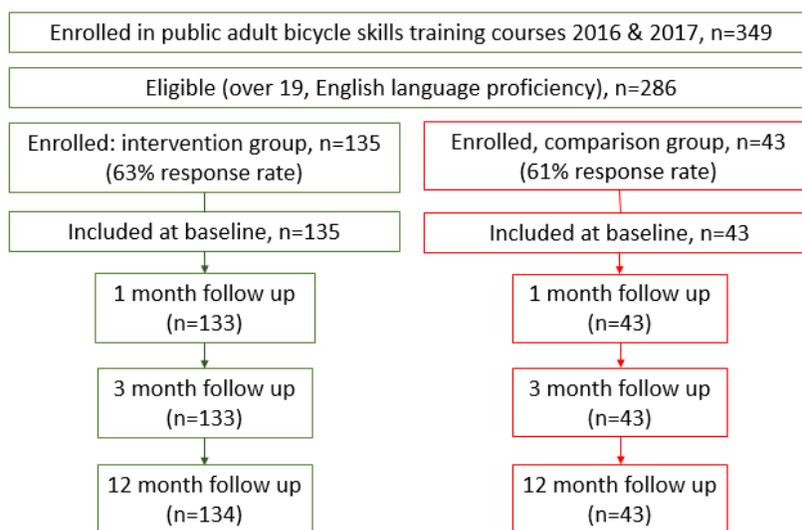
136 To account for dependence of multiple measures and variability between individuals we used  
137 mixed effects modelling where the four observations (0, 1, 3, 12 months) were nested within  
138 participants, and participant treated as a random effect. We used negative binomial mixed  
139 models to assess changes in bicycling (days per month) and logistic mixed models to assess  
140 changes in confidence over time.

141 To select parsimonious models, we used a multi-phase process. We started with an unconditional  
 142 model without explanatory variables. We next introduced the primary variables (time, treatment)  
 143 for a two-way interaction of time by treatment group, and then added covariates to adjust the  
 144 model. We determined the optimal random effects structure by using maximum likelihood  
 145 estimation to fit and compare unconditional, base, and adjusted models, using Akaike's  
 146 information criterion (AIC) to identify the best-fitting models. We also used AIC to compare  
 147 models fit with Poisson and negative binomial distributions. All statistical analyses were  
 148 conducted using R studio 1.1.447 using the glmmTMB and lme4 packages (Bates et al., 2014;  
 149 Magnusson et al., 2017).

## 150 **3.0 Results**

### 151 **3.1 Sample characteristics**

152 During the 2016 and 2017 season, 349 people registered in 28 adult bicycle training courses  
 153 (Figure 1). Of 286 eligible students, 178 enrolled in our study (response rate 62%). Table 3  
 154 shows participant demographics at baseline. The majority of participants were women,  
 155 university-educated, had access to cars, and were living in households without children. Of the  
 156 178 participants, 135 (76%) were in the intervention group and 43 (24%) in the comparison  
 157 group. Loss to follow up over 12 months was low (<1%) with no loss in the comparison group.  
 158 Baseline differences between the intervention and comparison groups were age, city of  
 159 residence, and season of study enrollment.



160  
 161 **FIGURE 1 Summary of recruitment process**

### 162 **3.2 Changes in bicycling participation, frequency, and confidence**

163 We examined the proportion of participants not bicycling at baseline (Table 3). At baseline, 18%  
 164 (32/178) of participants reported zero days of bicycling in the past month. Of these, 18 (13  
 165 intervention, 5 comparison) started bicycling during the study, whereas 14 (7 intervention, 7  
 166 comparison) did not bicycle at all during the entire study duration. When we examined bicycling  
 167 by trip purpose at baseline, 57% (90/157) participants reported zero days of bicycling for  
 168 commuting; 53.9% (96/178) for errands; 32% (57/178) for leisure. When participants did use

169 bicycles for commuting, they did so often: the majority (70% or 47/67) commute bicycled more  
170 than once per week at baseline.

171 We examined proportion of participants that said they felt confident for each of the nine  
172 confidence measures (Table 3). At baseline, there were no significant differences between  
173 intervention and comparison groups. Most of participants reported feeling confident knowing to  
174 ride a bicycle (97%) and riding a bicycle safely on a path away from traffic (92%). Participants  
175 were least confident travelling by bicycle with things to carry (39%), in rainy weather (31%), or  
176 with children (15%).

177 [TABLE 3 here]

178 Table 4 summarizes bicycle behaviours at each time point. Participants in both groups tended to  
179 bicycle most often for commuting (baseline means of 5.1 and 5.0 days/month, respectively), and  
180 least often for errands (2.8 and 2.0 days/month). There were no significant differences in  
181 frequency of commute and errand bicycling between groups at baseline. At one month follow up,  
182 intervention participants increased bicycling after their course for all trip types, whereas  
183 comparison participants experienced no increase. For the confidence outcomes intervention  
184 participants increased confidence more quickly than comparison participants.

185 [TABLE 4 here]

### 186 **3.3 Regression analysis for bicycling and confidence**

187 We used negative binomial mixed models (Table 5) to assess changes in bicycling over time.  
188 Rate ratios represent the percentage change in the number of days bicycled in the previous  
189 month, and the interaction term represents the differential change over time between the  
190 intervention and comparison groups. In the adjusted models for overall bicycling, there were no  
191 significant interaction or main effects indicating there was no change over time in the number of  
192 days per month participants rode bicycles. Likewise, in the adjusted models for commuting and  
193 errands there was no change over time in bicycling to work or for errands. We saw that men had  
194 higher rates of bicycling overall and to work compared to women, and participants living outside  
195 the city of Vancouver had much lower rates of bicycling overall, to work, or using bicycles for  
196 errands. Participants registering for courses later in the season had lower rates of overall  
197 bicycling.

198 For leisure bicycling, the models show that at baseline, intervention participants rode more often  
199 than comparison group members, although the difference was attenuated when adjusted for  
200 gender (RR = 1.75, 95% CI: 1.13, 2.73). Additional tests revealed that intervention participants  
201 significantly increased leisure bicycling between baseline and 1 month follow up (RR = 1.27,  
202 95% CI: 1.05, 1.54), but the overall change between baseline and 12 month follow up was not  
203 significant. Men had higher rates of leisure bicycling compared to women.

204 [TABLE 5 here]

205 We used logistic mixed models (Table 6) to assess changes in confidence for three aspects of  
206 confidence that were targeted during the course. For items, “I can ride a bicycle safely on a street  
207 with cars”, “I can use a map to choose a suitable route for me to bike”, and “I know where safe

208 bike routes are”, the interaction term was not significant, meaning the probability of feeling  
209 confident for any confidence measure did not differ as a function of being in the intervention or  
210 comparison group.

211 [TABLE 6 here]

## 212 **4.0 Discussion**

213 Given the multiple health benefits, increasing bicycle use is desirable from an individual and  
214 societal perspective. This study assessed the impact of a community-based bicycling training  
215 skills program related to increases in bicycling frequency and confidence over one year. We  
216 compared 135 intervention participants with a comparison population and examined the number  
217 of days participants reported using bicycles overall, as well as for commuting, errands, and  
218 leisure. We found that participants bicycled more frequently for commuting than for either  
219 errands or leisure, but the highest participation rates (i.e., if participants bicycled at all) was for  
220 leisure. One year after the course, we did not see increases in bicycling in course participants as  
221 compared to the comparison group. We also examined changes in confidence pertaining to  
222 bicycling on streets with cars, using maps to find routes, or knowing about safe routes, but found  
223 no effect of the program on confidence.

224 Our findings contrast with a handful of studies on adult bicycle courses that have documented  
225 significant increases in bicycling (Bernstein et al., 2017; Johnson and Margolis, 2013) or  
226 confidence (Bernstein et al., 2017; Rissel and Watkins, 2014; Telfer et al., 2006; Transport for  
227 London, 2016). Potential reasons may be differences in course content or duration, participant  
228 demographics, or other contextual factors. It may be that this particular course configuration, a  
229 brief 2 - 4.5 hour mixed classroom/on-road design, was not sufficient to have lasting impacts for  
230 the average participant. Alternatively, it may be the course did not address critical barriers. For  
231 example, the Behaviour Change Techniques that were used in the bicycle course (Table 2)  
232 focused on teaching skills and knowledge. Reviews have suggested effective strategies for the  
233 initiation and maintenance of physical activity include self-regulation techniques such as goal  
234 setting, self-monitoring, action planning, or prompts (Hynynen et al., 2016; Murray et al., 2017),  
235 whereas interventions aiming to change transportation behaviour may need to incorporate  
236 different techniques to actually disrupt behaviour patterns (Arnott et al., 2014). Thus, it may be  
237 that participants who took the course with the intent to bicycle more often need more  
238 opportunities to ride bicycles, in supportive or social settings, to put their new skills into practice.  
239 Research shows that ongoing support is vital for physical activity maintenance (Murray et al.,  
240 2017).

### 241 **4.1 Intervention impact by trip purpose**

242 The majority of course participants were already bicycling – about half were bicycling five or  
243 more days per month. To better understand bicycling behaviours and identify opportunities for  
244 increased active transportation, we captured bicycling for different purposes. This is important  
245 for several reasons. First, the drivers for using a bicycle differ by trip purpose. Commuters and  
246 recreational bicyclists have different characteristics and preferences, and tailored interventions  
247 may be needed to facilitate mode shift (Buehler and Pucher, 2012; Heesch et al., 2014). For  
248 example, for those who feel bicycling with traffic is a barrier, bicycling for work or shopping  
249 may be harder to accomplish than bicycling for leisure. Second, many cities have goals to

250 replace short-distance car trips with active transport modes (City of Vancouver, 2012; Mitra et  
251 al., 2016). Data that distinguishes bicycling for transportation from bicycling for leisure is vital  
252 to assess progress toward this goal. Third, commuting is often a strategic target for mode shift  
253 because it is a repetitive activity and can be potentially incorporated into daily routines (Heinen  
254 et al., 2010), although work trips constitute only ~20% of all travel (Banister et al., 1997).

#### 255 *4.1.1 Commuting*

256 Although the bicycle course was not associated with bicycle commuting changes, if participants  
257 commuted by bicycle, it was their most frequent reason for bicycling. As seen elsewhere  
258 (LeVine et al., 2014; Winters et al., 2010), this may arise as commuting involves travel to/from  
259 fixed locations at fairly consistent schedules, facilitating habitual patterns (Kurz et al., 2015;  
260 Stinson and Bhat, 2004). Men bicycled for commuting more often than women, congruent with  
261 well-documented gender differences in bicycling in the US, Canada, Australia, New Zealand,  
262 and UK (Garrard et al., 2012). Living in the city of Vancouver was also found to be a predictor  
263 of bicycle commuting. This could reflect the denser bicycle network found in Vancouver versus  
264 than the surrounding municipalities, as bicycle infrastructure is related to commuting (Pucher et  
265 al., 2012).

#### 266 *4.1.2 Errands*

267 The course was not associated with changes in errand bicycling, and participants tended to  
268 bicycle for errands less frequently than for commuting or leisure. While many of determinants of  
269 bicycling to work and for errands are similar (e.g. density of bicycle network, distance, secure  
270 storage), there are also differences. For example, errand trips may have more complicated trip  
271 chaining and logistics, thus making planning for errand trips harder (Stinson and Bhat, 2004).  
272 While in our sample gender was not related to errand bicycling, previous studies have suggested  
273 that women are more likely to use bicycles for shopping, errands, or visiting people (LeVine et  
274 al., 2014), in line with a trend for women to make more household-related trips.

#### 275 *4.1.3 Leisure*

276 While the course was not associated with longer-term increases in bicycling for leisure, there  
277 was a short-term increase. Furthermore, at baseline, more participants participated in bicycling  
278 for leisure than for any other trip purpose, with two-thirds (68%) reporting bicycling for leisure  
279 in the past month. The popularity of bicycling for leisure has been highlighted previously  
280 (Goodman and Aldred, 2018; Heesch et al., 2014, 2012; Menai et al., 2015). Potential facilitators  
281 of leisure bicycling may be greater flexibility to choose the days, times of day (avoiding busy  
282 road times), or routes, as compared to commuting by bicycle (Heesch et al., 2012). That leisure  
283 bicycling affords greater flexibility and is “unconstrained by space or time” (Boyer, 2018, p.  
284 409), is one potential reason city of residence was not associated with leisure bicycling in our  
285 results. Another possibility is that participants drove to destinations to ride bicycles. Further  
286 investigations, perhaps through qualitative research, may reveal the impact of place on different  
287 types of bicycling, or how those bicycling only for leisure may make transitions to transport or  
288 errand bicycling.

## 289 **4.2 Intervention impact on confidence**

290 The course was not associated with increases in confidence for bicycling on streets with cars,  
291 using maps to find bicycling routes, or knowing the location of safe bicycle routes. Notably,  
292 confidence started quite high; at baseline at least 50% of participants were already confident.

293 Men were more confident on most measures as is consistent with other studies (Heesch et al.,  
294 2012). Also, we observed that confidence increased in both course participants and the  
295 comparison group over the one year follow up. It may be that the comparison group, people who  
296 had registered for a course but not taken it, had been motivated to find other ways to support  
297 their bicycling training. Although we modelled only the three confidence areas targeted by the  
298 course, we asked about nine different aspects of bicycling confidence. At baseline, participants  
299 were least confident travelling by bicycle with things to carry, in rainy weather, or with children.  
300 These are topics practitioners should consider addressing to promote bicycling for utilitarian  
301 purposes.

### 302 **4.3 Implications for policy and practice**

303 Bicycle skills training courses can address individual-level barriers such as low confidence, not  
304 knowing rules, or insufficient bicycle handling skills (Handy et al., 2014), although cannot  
305 directly address systemic barriers such as distance, infrastructure, or weather. On their own,  
306 courses may not be potent enough to overcome systemic barriers to bicycling. For this reason,  
307 experts suggest that bicycle courses may have greatest potential for increasing ridership when  
308 nested within comprehensive packages of integrated and complementary interventions to  
309 encourage bicycling (Johnson and Margolis, 2013; Pucher et al., 2010; Rissel and Watkins,  
310 2014). Physical infrastructure, education programs, and promotional activities need to be  
311 designed to interact with each other to leverage synergies (Pucher et al., 2010). Additionally,  
312 bicycle courses could be combined with social opportunities to engage in bicycling, such as  
313 group rides or follow up sessions involving bicycling on streets. Our findings suggest that  
314 courses facilitate short-term increases in leisure bicycling. The increase in leisure bicycling was  
315 shortly after the intervention, suggesting follow up support for trainees may be helpful to sustain  
316 their bicycling. Bicycling for errands was the least frequent trip purpose and did not increase  
317 over time. If cities hope to encourage bicycling for both commuting and errand trips, then  
318 common barriers need addressing.

### 319 **5.0 Strengths and limitations**

320 Major strengths of this study are its longitudinal quasi-experimental design which enabled us to  
321 assess bicycling trajectories for individuals over time, the high (99%) retention rate, and the  
322 incorporation of a comparison group. Comparison groups are often missing from bicycle  
323 intervention evaluations (Pucher et al., 2010), and to our knowledge this is only the second study  
324 of adult bicycle skills training with a comparison group. To account for the interest in bicycling,  
325 our comparison group consisted of people who enrolled in but did not attend a course. Our  
326 comparison group was smaller than the intervention group, a function of the recruitment method.  
327 A greater sample size overall would be possible with additional years of data collection, beyond  
328 the two seasons used here. The comparison group could expand if eligibility criteria were  
329 relaxed, or if randomization to course timing were possible. To note, people were enrolled  
330 continuously: people who took courses later in the summer were more subject to seasonal effects  
331 in follow up (especially at 3 months), and the comparison group had a greater proportion of late  
332 enrollers. We aimed to address this by controlling for seasonality. Finally, it is likely there were  
333 some overlap between the different “types” of bicycling, especially when trip purposes were  
334 combined.

## 335 **6.0 Conclusions**

336 Our research adds to the few studies assessing the impact of bicycle skills training on bicycle  
337 uptake in adults. We did not find increases in overall bicycling or for commuting or errands, nor  
338 was the course associated with increases in confidence, relative to a comparison group. We  
339 found modest increases at one month follow up in leisure bicycling among those who completed  
340 a course, although increased bicycling was not sustained over one year. We encourage future  
341 studies to include multiple follow up time points to study maintenance in behaviour change, and  
342 to include bicycling for different trip purposes. Bicycle infrastructure is a necessary prerequisite  
343 to increase bicycling. Bicycle courses are a part of an overall strategy to increase bicycling, but  
344 they cannot substitute for a safe and attractive bicycling environment.

## 345 **Acknowledgements**

346 We thank A. Albert (Women's Health Research Institute) for statistical mentorship.

## 347 **Funding**

348 SS is supported by Canada Graduate scholarships through the Social Sciences and Humanities  
349 Research Council of Canada. MW is supported by Michael Smith Foundation for Health  
350 Research Scholar Award. This work was done with support from the Social Sciences and  
351 Humanities Research Council of Canada-funded project *Increasing Cycling for Transportation*  
352 *in Canadian Communities: Understanding What Works* (Grant no.496682).

## 353 **Conflict of interest**

354 None

355

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**TABLE 1 Summary of adult bicycle skills training studies**

Author, Year, Country	Publication type	Study design(s); sampling strategy <sup>a</sup> , sample size	Follow up after training	Bicycling frequency measures	Direction of change in bicycle frequency relative to baseline
Bernstein et al., 2017, US	Peer-reviewed publication	Pre-post questionnaire; randomized control trial; pre n=38, 3 month n=26, 5 month n=26	Immediately after program delivery (3 months from baseline); 5 months from baseline	# days/previous week bicycling for 1) commuting, 2) errands, 3) leisure	1) no change 2) increase 3) increase
Hawley & Mackie, 2015, NZ	Evaluation report	Post-intervention retrospective questionnaire; n=86	unclear	# days/month bicycled before course compared to # days/previous month bicycled	Increase
Johnson & Margolis, 2013, UK	Peer-reviewed publication	Pre-post questionnaire; pre n=471, 3 month n=130	3 months	1) # days/previous week bicycling >30 minutes; 2) # days/previous week bicycled to work	1) increase 2) increase
Rissel & Watkins, 2014, AU	Peer-reviewed publication	Pre-post questionnaire; random sampling; pre n=4145, 3 month n=423, 12 month n=125	3 months; 12 months	1) bicycle in previous week (y/n) 2) bicycle in previous month (y/n)	1) increase 2) increase
Rowe et al., 2016, AU	Peer-reviewed publication	Two retrospective interviews (the first shortly after intervention and second a few months later); n=33	3-5 months	Not reported	Not reported
Telfer et al., 2006, AU	Peer-reviewed publication	Pre-post questionnaire and interview; pre n=113, 2 month n=105	2 months	1) # days/previous week bicycling; 2) mins/previous week bicycling; 3) # days/previous week bicycling to work	1) no change 2) increase 3) no change
Transport for London, 2016, UK	Evaluation report	Pre-post questionnaire; pre n=800, 3	3 months; 12 months	# days bicycling for	1) increase 2) increase

		month n=258, 12 month n=101		1) commuting, 2) errands, 3) leisure	3) increase
Transport for London, 2017, UK	Evaluation report	Pre-post questionnaire; pre n=724, 3 month n=220, 12 month n=32	3 months; 12 months	# days bicycling for 1) commuting, 2) errands, 3) leisure	1) increase 2) increase 3) increase
van der Kloof et al., 2014, NL	Peer-reviewed publication	Pre-post questionnaire, n=83  Retrospective interview, n=19	Immediately after program delivery  Unclear; up to 4 years	Not reported  Not reported	Not reported  Not reported
Zander et al., 2013, AU	Peer-reviewed publication	Pre-post interviews; pre n=17, immediately after program delivery n=11	Immediately after program delivery	Meet 2 hr/week bicycling target (y/n)	Increase

<sup>a</sup> Sampling strategy included if described in study

**TABLE 3 Characteristics of intervention and comparison participants at baseline.**

Characteristics at baseline	Intervention (n=135) n (%)	Comparison (n=43) n (%)	P-value a,b
<b>Demographic</b>			
Gender (women)	93 (68.9%)	33 (76.7%)	0.30 <sup>a</sup>
Age (under 40 years old)	59 (43.7%)	27 (62.8%)	0.04 <sup>a</sup>
Education, graduated university	104 (77.0%)	31 (72.1%)	0.60 <sup>a</sup>
Household income			0.80 <sup>a</sup>
Under \$50,000	30 (22.2%)	12 (27.9%)	
\$50,000-\$100,000	52 (38.5%)	15 (34.9%)	
Over \$100,000	22 (16.3%)	8 (18.6%)	
Settlement status			0.50 <sup>a</sup>
In Canada < 5 years	17 (12.6%)	7 (16.3%)	
In Canada > 5 years	50 (37.0%)	12 (27.9%)	
Born in Canada	68 (50.4%)	24 (55.8%)	
Ethnicity/race (self-identify as White)	67 (49.6%)	20 (46.5%)	0.90 <sup>a</sup>
Employment, at least part-time	105 (77.8%)	37 (86.0%)	0.30 <sup>a</sup>
Children <17 at home (yes)	51 (37.8%)	12 (27.9%)	0.30 <sup>a</sup>
Access to bike (yes)	124 (91.9%)	37 (86.0%)	0.40 <sup>a</sup>
Access to car (yes)	106 (78.5%)	34 (79.1%)	1.00 <sup>a</sup>
Bike Score <sup>®</sup> at home residence (mean, SD)	83.5 (19.6)	75.7 (24.8)	0.10 <sup>b</sup>
Residing in Vancouver (yes)	90 (66.7%)	21 (48.8%)	0.05 <sup>a</sup>
Season of study enrollment (April-July)	93 (68.9%)	11 (25.6%)	<0.01 <sup>a</sup>
<b>Bicycle frequency<sup>c</sup></b>			
Bicycled zero days past month, any purpose	20 (14.8%)	12 (27.9%)	0.09 <sup>a</sup>
Bicycled >5 days past month, any purpose	74 (54.8%)	18 (41.9%)	0.02
Bicycled zero days past month, commuting	66 (57.4%)	24 (57.1%)	1.00 <sup>a</sup>
Bicycled >once/week past month, commuting	35 (30.4%)	12 (28.6%)	1.00 <sup>a</sup>
Bicycled zero days past month, errands	68 (50.4%)	28 (65.1%)	0.10 <sup>a</sup>
Bicycled >once/week past month, errands	17 (12.6%)	5 (11.6%)	1.00 <sup>a</sup>
Bicycled zero days past month, leisure	37 (27.4%)	20 (46.5%)	0.03 <sup>a</sup>
Bicycled >once/week past month, leisure	21 (15.6%)	3 (7.0%)	0.20
<b>Confidence</b>			
I know how to ride a bicycle, i.e., balance, steer, stop	129 (95.6%)	43 (100%)	0.40 <sup>a</sup>
I can ride a bicycle safely on a street with cars	70 (51.9%)	19 (44.2%)	0.50 <sup>a</sup>
I can ride a bicycle safely on a path away from traffic	123 (91.1%)	40 (93.0%)	0.90 <sup>a</sup>
I can use a map to choose a suitable route for me to bicycle	99 (73.3%)	32 (74.4%)	1.00 <sup>a</sup>
To ride a bicycle for daily travel would be easy	59 (43.7%)	18 (41.9%)	1.00 <sup>a</sup>
I know where safe bike routes are	76 (56.3%)	23 (53.5%)	0.90 <sup>a</sup>
I can travel by bicycle when I have things to carry	54 (40.0%)	16 (37.2%)	0.90 <sup>a</sup>
I can travel by bicycle in rainy weather	39 (28.9%)	16 (37.2%)	0.30 <sup>a</sup>
I can travel by bicycle when I have children with me	16 (11.9%)	7 (16.3%)	0.70 <sup>a</sup>

<sup>a</sup> Chi-square test; <sup>b</sup> Mann Whitney test

<sup>c</sup> Only participants working or attending school (n=157) were included in bicycling for commuting; all participants were included in bicycling for any purpose, errands, and leisure

**TABLE 4 Bicycling frequency and confidence for intervention and comparison groups at baseline and follow up**

Data collection time	Intervention group mean (SD) days/month	Comparison group mean (SD) days/month	P-value <sup>a, c</sup>
Any purpose	Intervention (n=135) <sup>b</sup>	Comparison (n=43) <sup>b</sup>	
Baseline	10.5 (11.9)	9.3 (13.3)	0.20
1 month	12.4 (12.9)	6.7 (10.6)	<0.01
3 months	10.0 (12.0)	5.1 (11.3)	<0.01
12 months	11.3 (12.7)	8.0 (13.1)	0.08
Commuting	Intervention (n=115) <sup>b</sup>	Comparison (n=42) <sup>b</sup>	
Baseline	5.1 (7.7)	5.0 (7.8)	1.00
1 month	6.1 (8.1)	3.5 (6.5)	0.05
3 months	4.8 (7.2)	2.5 (5.8)	0.01
12 months	5.3 (7.4)	3.0 (5.4)	0.10
Errands	Intervention (n=135) <sup>b</sup>	Comparison (n=43) <sup>b</sup>	
Baseline	2.8 (5.2)	2.0 (3.9)	0.20
1 month	3.3 (5.3)	1.3 (2.4)	<0.01
3 months	3.1 (5.4)	1.4 (3.5)	<0.01
12 months	3.0 (5.3)	2.0 (4.6)	0.30
Leisure	Intervention (n=135) <sup>b</sup>	Comparison (n=43) <sup>b</sup>	
Baseline	3.3 (3.8)	2.4 (4.4)	0.04
1 month	4.3 (4.8)	2.1 (3.6)	<0.01
3 months	3.0 (4.4)	1.3 (3.2)	<0.01
12 months	3.7 (4.7)	3.2 (5.1)	0.40
Can ride a bicycle safely on a street with cars	Intervention (n=135) Number, % confident	Comparison (n=43) Number, % confident	
Baseline	70 (51.9%)	19 (44.2%)	0.50
1 month	108 (81.8%)	25 (58.1%)	<0.01
3 months	109 (82.0%)	25 (58.1%)	<0.01
12 month	107 (79.9%)	27 (62.8%)	0.04
Can use a map to choose a suitable route for me to bicycle	Intervention	Comparison	
Baseline (% confident)	99 (73.3%)	32 (74.4%)	1.00
1 month	116 (88.5%)	28 (65.1%)	<0.01
3 months	122 (91.7%)	29 (67.4%)	<0.01
12 month (% confident)	122 (91.7%)	32 (74.4%)	0.01
Know where safe bike routes are	Intervention	Comparison	
Baseline (% confident)	76 (56.3%)	23 (53.5%)	0.90
1 month	108 (81.8%)	24 (55.8%)	<0.01
3 months	113 (85.0%)	22 (51.2%)	<0.01
12 month (% confident)	105 (78.4%)	27 (62.8%)	0.07

<sup>a</sup> Chi-square test; <sup>c</sup> Mann Whitney test

<sup>b</sup> Only participants working or attending school were included in bicycling for commuting; all participants were included in bicycling for errands and leisure

**TABLE 5 Negative binomial random intercept models on impact of a bicycle skills training course over one year for bicycling frequency (days per month)**

	<i>Overall</i>		<i>Commuting</i>		<i>Errands</i>		<i>Leisure</i>	
	<b>Base</b>	<b>Adjusted</b>	<b>Base</b>	<b>Adjusted</b>	<b>Base</b>	<b>Adjusted</b>	<b>Base</b>	<b>Adjusted</b>
<b>Fixed Effects</b>	Rate ratio (95% CI)	Rate ratio (95% CI)	Rate ratio (95% CI)	Rate ratio (95% CI)	Rate ratio (95% CI)	Rate ratio (95% CI)	Rate ratio (95% CI)	Rate ratio (95% CI)
Time <sup>a</sup>	1.01 (0.98 – 1.04)	1.01 (0.99 – 1.04)	0.97 (0.93 – 1.01)	0.98 (0.94 – 1.02)	1.02 (0.99 – 1.06)	1.03 (0.99 – 1.07)	1.04 (1.00 – 1.07)	1.04 (1.00 – 1.07)
Treatment: course <sup>b</sup>	<b>2.19</b> <b>(1.42 – 3.39)</b>	1.41 (0.89 – 2.23)	2 (0.89 – 4.48)	1.04 (0.44 – 2.45)	<b>2.69</b> <b>(1.37 – 5.30)</b>	1.66 (0.80 – 3.43)	<b>2.24</b> <b>(1.48 – 3.38)</b>	<b>1.75</b> <b>(1.13 – 2.73)</b>
Time*treatm ent <sup>c</sup>	0.99 (0.96 – 1.01)	0.99 (0.96 – 1.02)	1.03 (0.98 – 1.07)	1.03 (0.99 – 1.08)	0.97 (0.93 – 1.01)	0.97 (0.93 – 1.01)	0.96 (0.93 – 1.00)	0.96 (0.93 – 1.00)
<i>Covariates</i>								
Gender: men <sup>d</sup>		<b>1.82</b> <b>(1.26 – 2.62)</b>		<b>2.93</b> <b>(1.43 – 5.99)</b>		1.62 (0.91 – 2.91)		<b>1.64</b> <b>(1.17 – 2.29)</b>
City: outside Vancouver <sup>e</sup>		<b>0.52</b> <b>(0.38 – 0.71)</b>		<b>0.31</b> <b>(0.17 – 0.54)</b>		<b>0.3</b> <b>(0.18 – 0.50)</b>		0.82 (0.61 – 1.12)
Season: Aug- Oct <sup>f</sup>		<b>0.6</b> <b>(0.41 – 0.86)</b>		0.55 (0.27 – 1.12)		0.67 (0.37 – 1.21)		0.71 (0.51 – 1.00)
Age: over 40 <sup>g</sup>		1.07 (0.76 – 1.51)		0.92 (0.47 – 1.80)		0.95 (0.55 – 1.65)		1.06 (0.77 – 1.46)
<b>Random Effects</b>								
$\tau_{00}$ (Random intercept)	1.17 <sub>ID</sub>	1.00 <sub>ID</sub>	3.82 <sub>ID</sub>	3.37 <sub>ID</sub>	2.47 <sub>ID</sub>	2.27 <sub>ID</sub>	0.80 <sub>ID</sub>	0.73 <sub>ID</sub>
$\sigma^2$ (Residual variance)	20.1	18.61	18.83	17.14	4.21	3.75	3.55	3.52
Observations	712	705	619	617	707	705	707	705

<sup>a</sup> Time (0-12 months); <sup>b</sup> Treatment (comparison is reference); <sup>c</sup> Interaction (time\*comparison is reference); <sup>d</sup> Gender (women is reference); <sup>e</sup> City of residence (Vancouver is reference); <sup>f</sup> Season (April-July is reference); <sup>g</sup> Age (under 40 is reference)

**Table 6 Logistic random intercept models on impact of a bicycle skills training course over one year for odds of being confident**

	<i>I can ride a bicycle safely on a street with cars</i>		<i>I can use a map to choose a suitable route for me to cycle</i>		<i>I know where safe bike routes are</i>	
	<b>Base</b> Odds ratio (95% CI)	<b>Adjusted</b> Odds ratio (95% CI)	<b>Base</b> Odds ratio (95% CI)	<b>Adjusted</b> Odds ratio (95% CI)	<b>Base</b> Odds ratio (95% CI)	<b>Adjusted</b> Odds ratio (95% CI)
<b>Fixed Effects</b>						
Time <sup>a</sup>	<b>1.12 (1.05 – 1.19)</b>	<b>1.12 (1.06 – 1.19)</b>	<b>1.14 (1.05 – 1.24)</b>	<b>1.17 (1.07 – 1.27)</b>	<b>1.07 (1.02 – 1.14)</b>	<b>1.08 (1.02 – 1.15)</b>
Treatment: course <sup>b</sup>	<b>0.27 (0.09 – 0.79)</b>	0.32 (0.10 – 1.00)	<b>0.26 (0.07 – 0.97)</b>	<b>0.38 (0.09 – 1.57)</b>	<b>0.24 (0.08 – 0.68)</b>	<b>0.29 (0.09 – 0.94)</b>
Time*treatment <sup>c</sup>	0.97 (0.87 – 1.09)	0.96 (0.86 – 1.08)	0.91 (0.80 – 1.04)	0.89 (0.78 – 1.02)	0.99 (0.89 – 1.10)	0.99 (0.88 – 1.10)
<i>Covariates</i>						
Gender: men <sup>d</sup>		<b>7.08</b> <b>(2.45 – 20.45)</b>		<b>4.85</b> <b>(1.36 – 17.26)</b>		2.54 (0.92 – 6.98)
City: outside Vancouver <sup>e</sup>		1.41 (0.62 – 3.21)		1.27 (0.47 – 3.49)		0.74 (0.32 – 1.69)
Season: Aug-Oct <sup>f</sup>		0.8 (0.32 – 2.00)		0.77 (0.24 – 2.45)		1.07 (0.41 – 2.75)
Age: over 40 <sup>g</sup>		0.75 (0.32 – 1.80)		2.67 (0.89 – 8.04)		1.73 (0.70 – 4.28)
<b>Random Effects</b>						
$\tau_{00}$ (Random intercept)	3.29	3.29	3.29	3.29	3.29	3.29
$\sigma^2$ (Residual variance)	4.98 <sub>ID</sub>	4.73 <sub>ID</sub>	7.28 <sub>ID</sub>	6.88 <sub>ID</sub>	4.79 <sub>ID</sub>	5.04 <sub>ID</sub>
Observations	705	704	704	703	706	705

<sup>a</sup> Time (0-12 months); <sup>b</sup> Treatment (comparison is reference); <sup>c</sup> Interaction (time\*comparison is reference); <sup>d</sup> Gender (women is reference); <sup>e</sup> City of residence (Vancouver is reference); <sup>f</sup> Season (April-July is reference); <sup>g</sup> Age (under 40 is reference)