



Walk Talk

Newsletter of Oxford Pedestrians Association

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Welcome to Newsletter 120



Winter Party January 2017

We all know that exercise is good for us, but what is the best form of exercise? We invited two experts to discuss the relative merits of walking and cycling: Professor Sir Muir Gray, of the University of Oxford's Nuffield Department of Primary Care Health Sciences, and Dr Andy Chivers, recently-retired GP and a cornerstone of Cyclox. Dr Chivers opened the discussion by describing the benefits of any form of exercise, which include reduced blood pressure, body weight, risk of type 2 diabetes and cancer, improved mental health, balance and fitness. The best form of exercise, he proposed, is one that 'you enjoy and will do frequently'. A daily cycle increases life expectancy by around 8 years, and a regular cyclist has the aerobic function of a non-cyclist 10 years younger. A recent British Heart Foundation survey found respondents believed that on average cyclists are 13% more intelligent, and 10% more charitable, than others! He discussed how he had cycled on his doctor's rounds for 25 years and it had led him to certain conclusions about cycling. These were (1) the 'modal shift', (2) 'broadening horizons' and (3) 'hurrying'. Modal shift means that cycling can replace an alternative form of transport and gives you that bit of exercise you wouldn't otherwise have done; what's more, it replaces the whole journey (i.e. is door to door) and the time it takes is predictable, unlike driving. In that sense it is "invisible exercise". It saves money, and reduces air pollution (compared with motor transport). The bike is a 'pack horse' to carry your shopping. 'Broadening horizons' refers to the fact that once you can comfortably cycle 3 miles, then you can manage 5 miles, and so then why not 20? This results in an increase in self confidence. 'Hurrying' results from knowing how long the journey will take and then leaving it just a little bit late. To benefit from exercise you need to be a little breathless, so cycling in a hurry achieves this. But there are some downsides. You need a bike and somewhere to put it. There is some risk of injury (Dr Chivers noted that the accident rate in the Netherlands is 25% of that in the UK, so there is room for improvement here). And cycling does nothing to improve bone strength.

Professor Gray told us that he had been a cyclist all his life (on one occasion, as a junior doctor, even falling asleep on a bike). His interest in exercise and ageing started when he wondered what was happening to us as we aged. Is the ageing that we see actually more a loss of fitness? He described the concept of a 'fitness gap' which may start young as we begin desk-bound jobs in

our 20s. A lot of problems of older people, he suggested, reflect weakness of the quadriceps muscles. We need a large-scale exercise prescription, that could be backed up by pharmacists. It may never be possible to get millions of currently-sedentary people on bikes, so walking is the obvious starting point ('Make walking great again' to adapt a popular phrase of the day). Four million people (in the UK) take pills for type 2 diabetes which Professor Gray has suggested might be retitled 'Walking deficiency syndrome'. He has written a little book, "Dr Gray's Walking Cure", on the topic. Cycling (Professor Gray suggested) is just too efficient for getting from place to place – brisk walking is the ideal form of exercise. Public Health England will be launching a big new enterprise along these lines in March, concentrating on cities.

In the lively discussion that followed, several themes emerged. The need for the 'school run' was questioned. Both walking and (perhaps to a lesser extent) cycling are 'social activities' – you can stop and chat to people, unlike being in a car. Big developers (e.g. Westgate Centre) continue to demand car parking, working against the aim of getting people more active. Walking can help the problem of loneliness, and around 30,000 volunteers now lead regular Health Walks. Professor Gray drew attention to the NHS 'One You' website (<https://www.nhs.uk/oneyou>) which could be used to target exercise delivery. It was also noted that walking itself does not necessarily protect against osteoporosis – we should all get weights and walk round with them, and lift them while watching television.

The talking was accompanied by mulled wine and mince pies, making for an enjoyable and informative evening.

Walking south

*Going South. Manhattan, Walking in the Rain.
Heading for Spring Street in December.*

*Zipped up, hoods up, buttoned up.
The sidewalks are wide. The rain came down in
Chinatown and umbrellas snapped up, a bobbing
smudge of colour with sharp metal ribs at eye
level.*

*We were all at sea in a tide of humans, elbows
out, shoulders hunched, surging forward then
obediently halting at lights, then on in waves.*

*Raindrops and run off trickled down into boots to
cold feet. More rain. More puddles. And deeper.
And wider. More umbrellas.
Turn around if you are able.*

*We have been heading North since we emerged
from the Subway. Shiver, steamed up in
waterproofs and misted up spectacles.
We're going South, heading for Spring Street in
December.*

Bess Mullard

Walks in Oxford <http://www.oxfordwalks.org.uk/> is the result of a collaboration between OxPA, Oxford Civic Society and Oxford Ramblers group. The website was created 3 years ago but continues to receive many visits. The database of walks has recently been updated to include some new walks, and to remove some that are no longer available. The small team behind the website met recently to review progress and plan for the future with Keith Frayn representing OxPA. Feedback from OxPA members would be welcome, either via the website itself or through OxPA.

A More Walkable Oxford. The final draft of our updated version of **A More Walkable Oxford** is near completion. If any member would like to see a copy before it goes to print, please contact Sushila at sushiladhall@gmail.com or ring Oxford 790783 where a message can be left. There will be a copy at our next meeting on February 28th.

More Help Needed!

Without more active input from OxPA members, OxPA will not be able to continue. A very small group are doing all the work and this is unsustainable. We need help with articles for newsletters, accounts, membership, publicity, arranging meetings/speakers, general running around (eg contacting and talking to people, attending consultation events). If you would be willing to offer a couple of hours each month please get in touch with Sushila or Corinne.

Meetings:

February 28 Town Hall 7pm. **BUSES; what is the solution?**

March 28 details to follow

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