

Reinventing the Bicycle as an Instrument of Public Health – an Analysis of an Ongoing Reconstruction of Borders Between Sectors and Scales

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Seen from distance modern societies seem to be structured according to well-defined sectors and discrete level of governance. In that perspective, bicycles would be placed as an instrument of mobility in the transport sector, or as a marginalized niche in the contexts of the dominant auto-mobility regime (Geels 2012). By analyzing the motivation behind the development of a new network of cycle-path in the region of Copenhagen we demonstrate how the borders between sectors and scales of governance are unstable and constantly a subject of active redefinition. We explore how bicycling gradually have become more and more important as an instrument of public health in the health sector: bicycling is not only seen as health related by some of the individual cyclist, but also as such by actors within the health sector.

We conclude that role of ongoing ambiguities and contestation over boundaries among socio-technical systems and the micro-political navigations and alignment activities associated which such ongoing boundary contestation has often been overlooked in transition studies. We further argue that urban contexts constitute productive sites for transition processes, because the proximity among a diversity of infrastructure and practices in urban contexts often produces conflict tensions and ambiguities that brings the boundaries among different socio-technical systems into question.

The empirical basis for argument is studies of the development of bicycling in the Copenhagen Region with a special focus on how 1) health issues are addressed by actors within the transport sector when arguing for better bicycle infrastructure and 2) how bicycling are addressed as an instrument of public health in the health sector.

We will explore how a project of super-cycle highway has succeeded in aligning a series of problematics such as health issues due to lack of exercise, congestion in car traffic and slow public transportation. We will see how health is accounted for as a measurable value when arguments for investment in an expanded bicycle infrastructure are constructed.