

1982 INTERIM
CHILD RESTRAINT
DEVICES
(ANCHORAGE
FAIRBANKS
HEARINGS)

Senate Health, Education and Social Services Committee
Hearing on Mandatory Child Restraint Devices
December 10 and 11, 1982
Anchorage and Fairbanks, Alaska

December 10, 1982, Anchorage
1-5pm and 7-9pm

The meeting was called to order at 1:25 p.m. in the Anchorage Legislative Information Office Conference Room by Senator Charlie Parr, Chairman. Present were Senator Mike Colletta and Senator-elect Joe Josephson and members of the public.

The Committee first viewed a 10 minute video tape provided by the Dept. of Public Safety on the use of child restraint devices. The film showed anthropomorphic dummies in simulated car crashes with and without child restraint devices (CRDs).

Dr. Clinton Lillibridge gave an extensive presentation on the need for the use of child restraint devices and the need for a mandatory child restraint law. He pointed out that, nationally, deaths from car accidents was the leading killer of children. He explained that, in an adult, the head constitutes 10% of the body weight but in a child this figure is 25%; therefore, in car accidents, the child is thrown head first. He spoke of unrestrained children not only being hurt in car accidents but being the cause of them by distracting the driver or grabbing the steering wheel. Dr. Lillibridge related to the Committee that many states currently have mandatory CRD laws and Tennessee, which had the first one, has seen a significant decrease in deaths of children under four years old. He then distributed a document put together by the Child Passenger Safety Association in Alaska which states the desirable elements in legislation which would make the use of child restraint devices mandatory in Alaska (attached). Senator Josephson raised a question concerning why there was the clause in most of the CRD laws which stated that infractions do not constitute contributory negligence. Dr. Lillibridge was not sure exactly why this clause was in the other laws.

Ellen Moore, Department of Public Safety, Highway Safety and Planning Agency, testified in favor of a mandatory child restraint law. She pointed out that currently there were three CRD loaner programs in Alaska: one in Anchorage, Juneau and Sitka. The Anchorage program was operated by the Cook Inlet Native Association and the ones in Juneau and Sitka were state programs using federal money. She stated that the programs were flourishing and were limited only by the number of CRDs that the funds could buy.

Kathy Wolgemuth representing the Alaska State Troopers testified that the State Troopers were in support of a mandatory child restraint law. Senator Parr said that it was important that the Troopers would be able to enforce such a law.

Mike Baldwin from the National Highway Traffic Safety Administration testified before the Committee. He pointed out that Alaska had been a leader in many traffic safety laws and this was an opportune time to continue with that record. He stated that nationally, drunk driving and safety belt/CRD use were two major highway safety problems which needed attention. He stated that in Tennessee, after the passage of the child restraint law, there was a 50% drop in injuries in 1978 and 75% in 1979. He stressed the preventive aspect of the use of CRDs; 80% of all children are immunized against childhood diseases but only 7% ride restrained.

Roxann Lamar spoke in favor of a mandatory child restraint law. As an interested parent, she had sent for information concerning CRDs. She pointed out that as of Jan. 1, 1981, all devices must pass car crash tests and that standard shoulder straps could be dangerous because they cross a young child across the neck and not the body.

Michele Flynn from the Cook Inlet Native Association testified in favor of the use of CRDs. She explained the aspects of the Anchorage CRD loaner program which was for area Natives and was funded by the BIA.

Tynne Johnson-Joseph, Allen Bailey, Peggy MacInnis, and Carmen Fisher each appeared before the Committee and testified in favor of a mandatory child restraint law.

Lesley Morrosey, Ginny Komath, Rae Scully, Carolyn Crouch, Maureen Merchant, members of the Anchorage Medical Society Auxiliary, all testified in support of a mandatory child restraint law. They explained that they were initiated a loaner program for the Anchorage area. It was pointed out that education and the law must go hand-in-hand. Ms. Scully, a nurse, pointed out that children do not have a well developed sinus system which in an adult will act as a cushion when the face is struck; therefore, children will usually die when thrown head first in an accident. Ms. Crouch stated that she had worked with a CRD loaner program in North Carolina. She pointed out that with 340 births occurring each month in Anchorage, the 500 seats, which cost the program \$12,500, would not be adequate to cover the need.

Dr. David Spance, Division of Public Health, Juneau, testified in favor of a law which would make use of child restraint devices mandatory. He stated that the legislation would make excellent public policy because it would cost the State less money for rehabilitation of severely handicapped children resulting from car accidents.

Carl Logan from Providence Hospital stated that the hospital was looking into whether or not insurance companies would pick up the cost of a CRD as part of the delivery costs.

At 5 p.m., the meeting was adjourned until 7 p.m. that evening.

The meeting was called to order at 7:10 p.m. by Senator Parr. No other members were present. Senator-elect Josephson had been called away on an emergency during the afternoon session.

Peggy Wilson, past-President of the Child Birth Education Association of Anchorage, a member of the Regional Health Planning Agency, President of the Alaska Child Passenger Safety Association testified in favor of a mandatory restraint law. She spoke of the educational programs throughout the state but that they were very fragmented. The AK Child Passenger Safety Association was holding a statewide teleconference in March to discuss the history, use, legislation and various programs concerning CRDs. She also read a letter to her from Mothers Against Drunk Drivers (MADD) endorsing the Associations efforts to promote CRDs.

Dr. Morris Horning spoke in favor of mandatory legislation. He pointed out that data shows that educational programs alone are not effective; every time a state passes a law making the use of CRDs mandatory, the rate of serious injury and death to children is greatly reduced. He also did not think that the law should exclude the parent from negligence.

In addition, Karen Decker, Alice Samuelson, Barbara Bonk, Marge Muzzoll, Dr. James Nesbitt, Dr. Ed Crouch and Dr. James Scully all gave testimony in favor of mandatory use of child restraint devices.

The meeting was adjourned at 8:40 p.m.

December 11, 1982, Fairbanks
10am-noon and 1-3

The meeting was called to order by Senator Parr, Chairman.

Senator Parr gave a brief introduction concerning the results of the Anchorage hearing and a short summary of the testimony.

Sheree Dohner, a public health nurse, and JoAnn Beonier, from the Northern Alaska Health Resource Association, testified together. Both were in favor of a law making mandatory the use of child restraint devices.

Ms. Dohner stated that, as a public health nurse, she tried to give educational information to her patients but there was a need for a program which will make child restraint devices available for low income families. She believed that insurance companies and medicaid should make payments for CRDs. She stated that a group was starting a stipend CRD program for low income families and the group was working toward a loaner program.

Ms. Beonier stated that the group was affiliated with the Alaska Child Passenger Safety Association and even though they did not receive funding from the State for a CRD loaner program, they did receive material from the Highway Safety Planning Agency. She said that the Fairbanks group was attempting to get funds from private donations for the stipend CRD program.

They agreed that there were some unique aspects of Alaskan life styles that should be addressed when this legislation was discussed in the Legislature, e.g. the fact that so many families have pickups without adequate numbers of seat belts. They stated that there would have to be some limitations in the law such as excluding taxis and buses but said that a law was definitely needed to get more people to use CRDs and reduce the death/injury rate among children. There could also be a "ripple effect" with more adults using their seat belts and children growing up into adults who would use seat belts.

Ms. Dohner and Ms. Beonier then showed several short films on the effectiveness of using a seat belt and CRDs.

There was no other testimony offered in the morning.

The meeting was called back to order at 2:07 pm. Senator Parr and Representative-elect Mike Davis were present.

Dr. Rex Rundquist, a pediatrician, offered testimony in support of a mandatory child restraint law. He suggested that such a law pertain to children the ages of 0-4 or 5 years and have a fine which could be waived if a CRD was purchased.

The meeting was adjourned at 2:15 p.m.

WITNESS REGISTER
 Senate Health, Education and Social Services Committee
 Hearing on Mandatory Child Restraint Devices
 December 10 and 11, 1982
 Anchorage and Fairbanks, Alaska

Anchorage, AK--December 10, 1982

*Brenda Rodgers	3011 Sanctuary, Eagle River	99577	694-3392
Ellen Moore	Pouch N, Juneau	99811	464-4375
Lynne Johnson-Joseph	4850 Bryn Mawr, Anch.	99504	338-0465
Kathy Wolgemuth	P.O. Box 6188, Anch.	99502	269-5654
Dr. Clinton Lillibridge	4001 Dale, Suite 213, Anch.	99504	279-8571
Mike Baldwin	3140 Federal Bldg, Seattle, wash.	98174 (206)	442-5934
Roxann Lamar	7510 Papa Circle, Anch.	99502	349-5670
Michele Flynn	670 W. Fireweed Lane	99503	265-1232
Allen M. Bailey	310 K St., Suite 503	99501	279-6546
Peggy MacInnis	9460 Jade	99502	243-2755
Carmen Fisher	3017 Alder Circle	99504	279-7264
Lorrie Horning	2047 Duke Drive	99504	276-8776
Marie Doyle	1400 Garden Street	99508	272-7773
Carolyn Crouch	SRA Box 2003	99507	344-9879
Lesley Morresey	(no information given)		
Rae Scully	SRA 45	99507	349-2047
Ginny Kamath	(no information given)		
Karen Guthrie	9530 Albatross Dr	99502	243-7766
Peggy Wilson	SCIPD, 1135 W. 8th Ave. #1	99501	278-3631
*Steve Heimel	KTNX Radio, Tudor Rd.	99507	277-0591
Maureen Merchant	SRA 2532	99507	349-2047
David Spence, M.D.	Pouch H-060, Juneau	99811	465-3100
Barbara Bonk	4156 Checkmate (Humana Hospital)		264-1332
Marge Muzzoll	3320 Well Circle	99507	337-6004
James Nesbitt, M.D.	4001 Dale Street	99504	279-8571
Ed Crouch, M.D.	(no information given)		
James Scully, M.D.	(no information given)		
Karen Decker	7601 Lotus Dr.	99502	243-7181
Alice Samuelson	9231 Atelier Dr.	99507	333-5601
Morris Horning, M.D.	3710 E. 20th, Anch.	99504	276-8776

* Did not offer testimony

WITNESS REGISTER
Senate Health, Education and Social Services Committee
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Fairbanks, AK—December 11, 1982

Sheree Dohner	P.O. Box 81724, College	99708	479-0406
JoAnn Beonier	S.R. 20239, Fairbanks	99701	455-6402
*Lucille H. Longs	P.O. Box 73282, Fairbanks	99707	452-4641
*Jack H. Caldwell	P.O. Box 2616, Fairbanks	99707	456-5988
Rex W. Rundquist, M.D.	1633 Market Street, Fairbanks	99701	456-1963

* Did not offer testimony

CHILD PASSENGER SAFETY ASSOCIATION

Elements Desirable for Legislation

Every driver (parent, car pool driver, people from out of state. It is not the responsibility of the car rental agency, or taxicab driver, bus driver, etc.).

Transporting a child.

Under age five.

Any child unable to sit unaided shall be properly restrained in a child restraint system which meets the federally approved standards prescribed in 49 CFR 571.213. (This covers infants without specifying a specific age or level of development or weight. This is to make it easy for the enforcing officers to make that judgment).

Child must be properly secured according to the manufacturer's recommendation.

Any child who is able to sit unaided but under the age of five and transported in the front seat must be properly restrained in a child restraint system which meets the federal standards prescribed in 49 CFR 571.213.

Any child who is able to sit unaided but under the age of five transported in the rear seat must be properly restrained in a child restraint system which meets the federal standards prescribed in 49 CFR 571.213.

Children shall be carried only in seats intended for passengers.

Within the State of Alaska (statute not limited just to streets, highways, roads, byways, but off-road use as well, which is even more dangerous).

Infractions do not constitute contributory negligence. Infractions are not admissible as evidence.

Seats must be properly installed.

People violating this statute are guilty of an infraction and assessed two points per occurrence (not per child).

Violators of this section shall be fined not to exceed \$60.) A person found in violation of this section may, instead of paying the fine, submit proof of purchase subsequent to the violation or rental for not less than one year of an approved infant or child restraint system to the court. This shall be acceptable only for the first violation and if the acquisition of the restraint was subsequent to the violation. This option applies only to the first offense.

Exemptions to this statute include mass transit vehicles, school bus, taxi.

Children unable to use safety belts or child passenger restraints because of physical or mental handicaps. In this instance they shall be secured in their own specially designed apparatus.

Motorcycle, moped, other vehicles not required to be equipped with seat belts. Transport in a vehicle in which all seat belts are occupied but extra passengers are being carried. Emergency vehicles during an emergency.

DOCUMENTATION OF EFFECTIVENESS

TENNESSEE

User Rates for Children Under Four

1977 pre-law	9%
1978 (with law)	20%
1980 (with law)	29%

Deaths

pre-law	20-25/year
1980	14
1981	10 (only 1 fatality was in a child who was in an approved child restraint system)

Health Cost Containment

E.R. visit for car accident	\$50
Hospitalization	\$7-10,000
Funeral	\$2,000

MASSACHUSETTS

<u>Usage of Seat Restraints</u>	<u>Education Only (1979)</u>	<u>Mandatory Use Laws (1980)</u>
Age 1 year	41%	70%
2 years	22%	49%
3 years	12%	40%

Estimated savings to the family

\$1,100-\$55,000 per injury

TABLE 1

AVERAGE STATE COSTS PER HIGHWAY FATALITY AND INJURY

<u>COST COMPONENT</u>	<u>FATALITY</u>	<u>PERMANENT & TOTAL DISABILITY</u>	<u>PARTIAL DISABILITY</u>	<u>NO PERMANENT DISABILITY</u>
Lost State Taxes	\$11,000 ^(A)	\$4500 ^(C)	\$900 ^(C)	140 ^(D)
Police Agencies	160	70	70	20
Legal and Court Costs	400	290	200	50
Probation Offices	115	115	115	115
Coroners/Medical Examiners	180	-	-	-
Motor Vehicle Departments	15	15	15	5
Hospital/Medical Costs (Borne by State)	35	900	350	60
Public Welfare Overhead	435	435	435	435
Rehabilitation	-	485	240	-
TOTAL	\$12,340	\$6,810	\$2,325	\$825

- (A) Based on loss of 10 years income
 (B) Based on loss of 4 years income
 (C) Based on loss of 10 months income
 (D) Based on loss of 45 days income

Sources: 1975 Societal Costs of Motor Vehicle Accidents, National Highway Traffic Safety Administration (DOT-HT-802-119), 1976.

Wuerdemann, H.G., Joksch, H.C., National Indirect Costs of Motor Vehicle Accidents (Vol. 1)
 Federal Highway Administration (DOT-FH-11-7773), 1973.

Joseph C. March, et al., Financial Consequences of Serious Injury, Highway Safety Research
 Institute, University of Michigan (UM-HSRI-77-27), 1977.

To: Name	<i>Senator Charles Parr</i>	Title	<i>Senator Parr</i>	Date	<i>12.16.82</i>	Org/Rtg Symbol	
Remarks:	<i>950 Cowles St. Room 224 Fairbanks Alaska 99701</i>						
<input checked="" type="checkbox"/> Per Your Request <input type="checkbox"/> For Your Information <input type="checkbox"/> Per Our Conversation <input type="checkbox"/> Note and Return <input type="checkbox"/> Discuss With Me <input type="checkbox"/> For Your Approval <input type="checkbox"/> For Your Signature <input type="checkbox"/> Comment <input type="checkbox"/> Take Appropriate Action <input type="checkbox"/> Please Answer <input type="checkbox"/> Prepare Reply For Signature Of	<i>Senator Parr,</i> It was a pleasure to have the opportunity to testify before your committee. attached is a copy of the second page of the National Highway Transportation Safety Board press release <i>Mike Saldini 206.442.5934</i>						
From: Name	<i>Eric E. Nell, Regional Administrator</i>	Telephone	<i>206.442.5934</i>	Org/Rtg Symbol			

- 2 -

The Board has been very encouraged by what can be achieved by such programs. Tennessee, the first state to undertake a broad-scale child passenger safety program, including mandatory use of child safety seats, reports impressive results. Since Tennessee began implementing its program nearly 5 years ago, child safety seat usage rates have tripled and crash fatalities to children in the age group affected by the law have been cut by more than 50 percent. Before the 1977 law, fatalities to child passengers averaged 20 to 25 annually. That number was reduced to 10 in 1981, and the fatality figures reported for the first 9 months of 1982 were 5.

In addition to recommending legislation, the Board urged the Governors to develop a statewide child passenger safety program to encourage compliance and to enhance the effectiveness of the law. According to the Board, this program should include visible and aggressive enforcement, public education and information activities, sufficient public and/or private loan or similar activities to assure the availability of seats for all members of the community, and an ongoing evaluation to analyze and improve child passenger safety policies.

Goldman stated that the Board's recommendation for mandatory use of child safety seats is only the Board's first step in its overall program to enhance child passenger protection. According to Goldman, the Board is continuing to conduct in-depth investigations of crashes involving young children and early next year will initiate a series of regional hearings across the nation to examine child passenger safety issues. The first of these regional hearings will be held in Dallas, Texas in January.

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Press Contact: Barbara Dixon
(202) 302-6600



December 14, 1982

Senator Charlie Parr, Chairman
Senate HESS Committee
950 Cowles, Room 224
Fairbanks, Alaska 99701

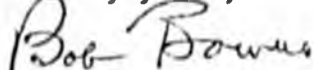
Dear Charlie:

As head of agency concerned about the welfare of children, I would like to support legislation mandating the use of child restraining devices in motor vehicles.

A few years ago friends of mine suffered the loss of their two-year old daughter when the family car had a head-on crash and the child was catapulted through the windshield. If the child had been restrained, she would still be alive.

I wholeheartedly support mandatory use of child restraining devices in motor vehicles and hope that you will be able to get legislation through the legislature this year.

Sincerely yours,


Robert D. Bowers
Executive Director

RDB:dw

PERTINENT MEDICAL INFORMATION (continued)

Gastrointestinal:

5. Mr. [REDACTED] states that since his accident, he has noticed some gradual problems with indigestion.

Phantom Pain:

6. Mr. [REDACTED] has episodes of phantom pain which apparently last two to three minutes when they occur, however, he has not required extensive treatment for management of the phantom pain.

In attempting to develop an estimate of Mr. [REDACTED] anticipated expenses, the following information was used:

- 1) Date of birth 9/27/56;
- 2) date of accident 2/29/76;
- 3) life expectancy determined from age 20 is 52.37 years with a time lapse of 6.59 years; and
- 4) total medical expenditures for the first 5 years = \$227,054.30.

Based on a review of case histories of individuals who have experienced catastrophic injuries, it appears that it requires 5 years to stabilize with the highest expenditures occurring within the first 5 years after the injury. The next 15 years the individual remains fairly stable with primary maintenance costs estimated at 25% of the 5 year cost. This 15 year stationary period appears to be rather constant despite the different age groups. Following the 15 year period of stabilization, deterioration continues (in Mr. [REDACTED] case, an approximate additional 5.78 years) at which time medical expenses accelerate to 50 to 100% of initial costs.

RE: [REDACTED]

September 10, 1982
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Date of Report: September 10, 1982
SUMMARY OF MEDICAL EXPENSES
Date of Billing: September 13, 1982

1st 5 years: \$227,054.30

Following 15 years:
25% of 1st 5 year cost \$ 55,763.58
Annually x 15 years
\$851,453.70

Last 6 years:
3 yrs @ 50% of 1st 5 years \$113,752.15
3 yrs @ 100% of 1st 5 years \$227,054.30
TOTAL \$340,806.45

Medical Costs:

1st 15 years = \$851,453.70
Last 6 years = \$340,806.45
Total anticipated expenses \$1,192,260.15 (in 1982)

In summary, the above figure of \$1,191,260.15 is based on the premise that Mr. [REDACTED] has multiple problems and has a tendency to seek out medical expert advice, and is most likely not going to make any effort to contain medical costs.

Submitted by,

Virginia M. Collins, R.N.
Rehabilitation Consultant

VMC:lj

Medical science, through improved pediatric care and immunization, has unquestionably reduced the risk of childhood disease. And yet, children's lives are still threatened. Today, after the first critical days of life, a child is more likely to die or be crippled in an automobile crash than from any of the once dreaded childhood diseases.

Crashes are the leading cause of death for American children. This year alone, more than 1000 children under five will be killed. Sixty thousand other children will be injured, ten thousand of them severely. And many others will be hurt, not in crashes, but when the car they're riding in simply brakes hard or swerves to avoid an accident.

While the statistics are disturbing, the real tragedy is that most of these deaths and injuries are unnecessary. They could be prevented if parents protected their children in restraint systems, just as they now immunize them against the threat of childhood disease. Unfortunately, less than 10 percent of all children riding in cars are protected by child restraint systems.

Why restraints are needed.

Children are particularly susceptible to crash forces. In a 30 mph crash, an unrestrained child will strike the dashboard, often head-first, with the equivalent velocity of a fall from the top of a three-story building. The alternative, of course, is a restraint system. For adults and older children, that means seat belts. For infants and young children, specially designed restraint systems provide life-saving protection.

To demonstrate just how effective they can be, here are summaries of real accidents in which child restraints provided excellent protection. In all of these cases, the child very likely would have been killed without a restraint.

Actual cases.*

A 1968 Chevy II Nova traveling at 55 mph collided head-on with a 1973 Camaro that had strayed into the lane of oncoming traffic. The two lap-belted adults in the front seat suffered multiple fractures and lacerations from contacts with the steering wheel, the instrument panel and the side doors. A seven-month-old baby, who was harnessed in a properly secured rear-facing infant restraint positioned in the center of the front seat was uninjured.

A 1977 Toyota Corolla, traveling at 35 mph, ran into the side of a 1979 Chevrolet Corvette which slid out of control and into its path. The driver of the Toyota, who was wearing a seat belt, struck the windshield with his head. An unbelted adult in the back seat was thrown forward between the two front seats into the dashboard and windshield. Both adults were seriously injured. Two small children in the car, who were restrained in child seats, were virtually uninjured. A one-year-old riding in the front seat in a rear-facing infant restraint received a facial cut

*From a study conducted by the Highway Safety Research Institute for the Insurance Institute for Highway Safety.

KIDS IN CARS

A SAFETY PRIMER

from flying glass. A two-year-old in a child restraint in the back seat suffered only a cut on the face and a sprained arm, even though his restraint shoulder straps were not fastened.

A 1976 Cadillac left the roadway, struck a mailbox and a road sign, and crashed head-on into a large tree. The unrestrained driver suffered massive chest and abdominal injuries and died. A two-month-old baby riding in a rear-facing infant restraint in the center of the front seat was uninjured.

After a minor collision between two passenger cars on an icy roadway, both cars were struck by a tractor semi-trailer going 45 mph that was unable to stop due to road conditions. One of the cars was occupied by two unbelted adults in the front seat, both of whom suffered major injuries. A two-year-old child was riding in the left rear seat — the same side the truck crashed into. He was in a forward-facing child seat secured by a lap belt. Even though the restraint harness was not properly fastened, the child was protected from injuries, except for a few facial scratches.

Restraint systems for infants.

All children need protection in cars, but infants require special care, beginning with their first ride home from the hospital. From birth to about 8-9 months (17-20 pounds), new-borns need a carrier which cradles the child in a semi-reclined position. Designed to face the rear of the car, infant carriers or convertible safety seats hold the child securely in a special harness that prevents ejection. In this position, crash forces are distributed across the infant's relatively strong back.

Infant carriers must be secured to the car, preferably on a rear seat, by a standard lap seat belt. Some parents are uncomfortable placing a baby in the back seat facing the rear where they cannot see the child. Since the rear-facing infant carrier is designed to protect a child's head from the dashboard and windshield, the front seat is a suitable alternative.

Two kinds of infant carriers are available. The first is designed for infants only. And, once outgrown, it must be replaced by a child safety seat. The second is a convertible carrier. With a few simple adjustments, this type con-

verts to an upright safety seat for toddlers. It generally can be used from birth up to about forty pounds. For economic reasons, a convertible may be a wise choice, since there is no need to buy a second seat when the child outgrows the infant mode.

Regardless of your decision, neither type of infant carrier should be confused with the lightweight plastic feeder seats or carriers designed solely for home use.

Restraints for small children.

For toddlers and young children (17-20 pounds), three types of restraints are available. These systems all face forward and are designed for children who can sit up without support.

The safety seat restraint system consists of a seat and harness which is anchored by a seat belt, either fastened around the front of the seat or threaded through the back of the frame. An internal five-point safety harness secures the child in the seat with belts that come over the shoulders, across the upper thighs and up between the legs.

Some models (including some convertible types) require a top tether strap. In the back seat, this strap must be secured to an anchor installed on the rear window shelf or on the cargo area floor behind the rear seat. If used in the front seat, the tether must be secured to a rear seat belt. Correctly used tether straps add extra stability and protection, especially in side collisions. Do not purchase a safety seat that requires a tether strap unless you are willing to install and use it properly.

The shield type of restraint system consists of a padded and slightly flexible impact shield that fits over a child's lap close to the stomach and bends away from the face and chest. It's held in place by an adult lap belt. The "C" shaped shell catches and cushions a child in a crash, evenly distributing impact forces over the child's upper body. This type of restraint has several advantages over other kinds of restraint systems. It's convenient to use because it doesn't require a harness or tether strap and it's easy to get into and out of. Shield restraints generally do not provide as much protection in side collisions, however, and should be used in the center of the rear seat.

The third type of restraint system combines the protective features of an impact shield with the harness, thereby providing the safety features of both designs in one system. For maximum protection, these restraints must be installed and used according to the manufacturer's instructions.

Restraints for older children.

Once a child outgrows a safety seat or shield, usually by age 4 (40 pounds), or when no safety seat is available, an adult lap belt should be used. The belt must be correctly positioned below the abdomen, as low on the child's hips as possible, and adjusted for a snug fit. In the front seat, a shoulder belt should be used in addition to the lap belt, but only if it doesn't cross the child's face or neck.

Raising the child on a specially designed automobile booster seat may help position the shoulder belt correctly. If not, then do not use the booster seat. Instead, use only the lap belt and tuck the shoulder strap behind the child — never under an arm. Booster seats are unsafe and can be very dangerous if used without upper body support. They should never be used with a lap belt alone. For maximum safety, use the special body harness supplied with the booster seat.

An expert's perspective

Aide interviewed Dr. Richard L. Stalnaker, a biomechanicist and noted authority on child restraint systems. Currently, he is a senior research engineer at the Southwest Research Institute in San Antonio.

Dr. Stalnaker has worked at the University of Michigan's Highway Safety Research Institute developing acceleration sled testing standards and has run restraint tests for automakers, the government, Consumers' Union and for several child restraint manufacturers. While working in Europe for Peugeot-Renault, he designed anthropomorphic dummies and developed a child restraint design which is now marketed in Europe.

Stalnaker also has participated in numerous investigations of actual accidents as part of the National Accident Survey. He shared with us the following observations about child restraints.

AIDE: *Dr. Stalnaker, what happens to an unrestrained child in a crash?*

STALNAKER: When a car hits another object, or when you brake suddenly, people in the car keep moving forward at the same speed the car was traveling until something stops them. This means that if you're driving along at 30 mph with an unrestrained child on the front



seat beside you and you brake suddenly, he will continue moving at 30 mph until he hits the dash or windshield. It takes less than a second to travel from a seated position into the dash. During that second, the child generally pivots over, striking the dash head-first. The forces of a crash, or even of severe braking, are so great that you can't grab him quickly enough to keep him from becoming a flying missile. Even if he's on your lap at the time of the crash, you won't be able to hold on to him. And if you're not wearing a seat belt, he'll be crushed between your body and the dash.

AIDE: *We've heard it said that "it's not the crash that kills." What does that mean?*

STALNAKER: That's right. Most passengers in car crashes could survive if they were subjected only to the same forces the car is subjected to. Most injuries and deaths occur because the occupants are subjected to even greater forces of impact. This is because they keep traveling after the car stops and then smash against something which causes them to stop moving in a much shorter distance than that of the car. This subjects them to greater forces than children in particular, can withstand.

AIDE: *What's the solution?*

STALNAKER: The best thing would be to bolt yourself down to the car as tightly as possible. Then you'll stop with the car and not be subjected to the greater forces. Professional car racers know this. They tighten their belts so tight it hurts. And most of the time they walk away from crashes that involve tremendous forces.

AIDE: *What does this mean where child restraints are concerned?*

STALNAKER: It means the child seat itself must be attached as securely and tightly as possible to the car itself. Also, (and this is where many parents make mistakes) the child must be as snugly belted in the seat as he will tolerate. For example, if the restraint has a crotch strap that goes between the legs, that strap should be as short and as close to the child's body as possible. It must be fastened snugly, not loose. If it's loose, Junior will smash into it if there's a crash. He can be quite seriously injured from "collision" with the straps themselves, if they're too loose. It's usually the parents who *think* Junior will be uncomfortable if his restraint straps are tightened properly — Junior won't complain if he's accustomed to always riding that way, provided he's not too big for the seat.

AIDE: *What other mistakes do parents make in the way they use child restraints?*

STALNAKER: Well, not using them at all is the biggest mistake. Any restraint, even if improperly used, is usually better than no restraint at all. But next to that, parents don't attach restraint systems to the car according to the manufacturer's instructions, and they don't belt the child in correctly. It's also a mistake to put a child in a seat that doesn't fit him — one that he has outgrown. But

again, if that's all that's available, it's better than no restraint at all in most crashes. A car's regular seat belts should definitely be used if no other restraint is available. In general, I'd say buy a restraint, use it and always follow the manufacturer's directions.

AIDE: *Are some brands of restraints better than others?*

STALNAKER: All child restraints made in the U.S. after January 1, 1981, have to meet a pretty tough standard. This means they should all give adequate protection if properly used. My advice would be to buy a restraint that's convenient for both parent and child to use. That is, if a seat is too complicated to use or difficult for the child to get into — to the point that it isn't used properly — then buy a kind that's more convenient.

I particularly like the shield-type restraint for toddlers and preschoolers that can be left belted to the car seat at all times because the child can simply crawl into it when he gets in the car.

AIDE: *What is the best place in the car for a child restraint system?*

STALNAKER: In the center of the back seat, provided the restraint can be properly secured to the car in that position. Children are almost always better protected in the back seat. The safest way of all for a child to ride is in the back seat, properly restrained. Of course, if your car doesn't have a back seat, or if you can't get a safety seat that can be properly secured in the back seat of your model car, then you'll have to position the child restraint in the front seat. But don't do it just because you like having the child near you, or because it's easier. Remember, your child is safer in the back seat.

AIDE: *You've had a lot of experience investigating real accidents involving child restraints. What are your conclusions from that experience?*

STALNAKER: Well, I've become convinced that today's child restraint systems provide remarkably good protection for youngsters in crashes. In fact, I've seen many cases where a child restraint system afforded reasonably good crash protection when it had not been properly used. This has led me to believe that the more convenient systems may be the best, just because they're more likely to be used.

Properly used child restraint systems are sometimes called "orphan-makers" because they're so effective. A restrained child will often survive a crash that kills his parents. Of course, that usually happens when the parents were not wearing their own seat belts. So I tell parents to restrain their children in order to save their lives, and then buckle up themselves so they won't make orphans of their children.

For more information.

To order *Don't Risk Your Child's Life*, an instructional pamphlet with a list of safe child restraint systems, send 35¢ and a stamped self-addressed long white envelope to Physicians for Automotive Safety, Communications Dept. USAA, P.O. Box 208, Rye, NY 10580.

Safety Tips

If a tornado warning is issued... this means that a tornado has actually been sighted in your area. The safest place in your home during a tornado is the basement. If you don't have one, take shelter in a bathroom or closet on the lowest level of your home or under a heavy piece of furniture. Stay away from windows. In an office building, go to the lowest floor and take cover in an interior corridor, away from all windows and exterior walls.

The Southwestern Insurance Information Service warns that, above all, you should never try to outmaneuver a tornado in your automobile. "When a tornado hit Wichita Falls, 26 of the 43 persons killed were attempting to flee the tornado in their cars." If you should happen to be in your car as a tornado approaches, get out and take cover in a ditch or depression, the Service advises

Unruly children... Accidents caused by lack of driver control have occurred when the driver turned around to discipline children. Children always should be restrained in a child restraint (or child seat) that meets Federal Safety Standards. A safety belt is adequate if no child seat is available or if the children are older. This primarily is for their safety if there should be a crash, but it also keeps children from interfering with the driver.

If you must discipline young children in the car, don't let go of the wheel and turn around. Pull off the road and switch off the engine before applying whatever discipline is necessary. And make the children fasten their safety belts despite any objections



Child protection... Crash tests conducted by the Insurance Institute for Highway Safety demonstrate the need to properly restrain children for protection in auto accidents, even at slow speeds. The test crashes used popular 1979 model vehicles and test dummies. The filmed results showed:

- An unbelted mother crushing her lap-held baby violently into the instrument panel and windshield of their sedan in a frontal crash of less than 25 mph.
- Unrestrained children ejected from the rear window of a station wagon when it was struck by another station wagon at only 30 mph. One test dummy smashed headfirst onto the pavement.
- Two youngsters, unrestrained, being violently thrown about when the van in which they were riding crashed at less than 25 mph.

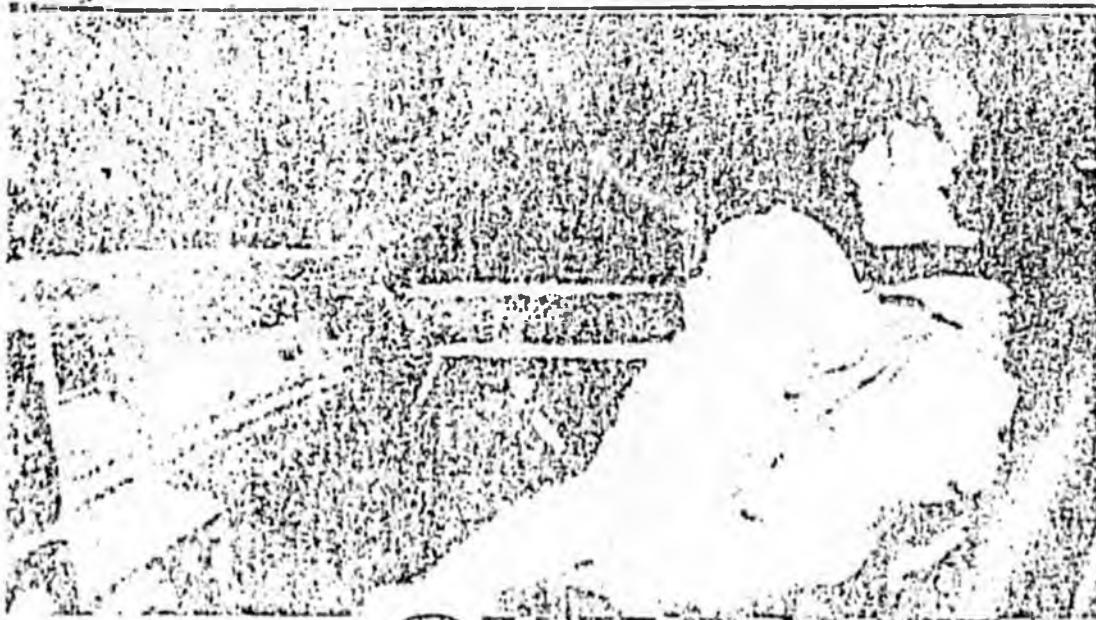
- An unrestrained infant, lying on the front seat beside its mother, hurled forward in a 25 mph crash to smash its face on the radio and air conditioning knobs.

Depending upon their age and size, always buckle children in or place them in properly-anchored child restraint seats.

Now is a good time... to check your home for electrical defects. Here are some electrical checkpoints from the National Fire Protection Association:

1. Look for frayed, cracked insulation and loose connections on lamp, appliance and extension cords, including cords behind furniture or otherwise out of sight. Never attempt repairs like taping over bad insulation. Be safe and replace the cord.
2. If you are running any cords under rugs, get rid of this hazard right away. Traffic and vacuuming will wear cord insulation to the danger point without your noticing it. If you need more outlets have a qualified electrician install them.





CHILDREN

...and parents
...on the wishes
...enforcement and
...are needed

CAR CRASHES



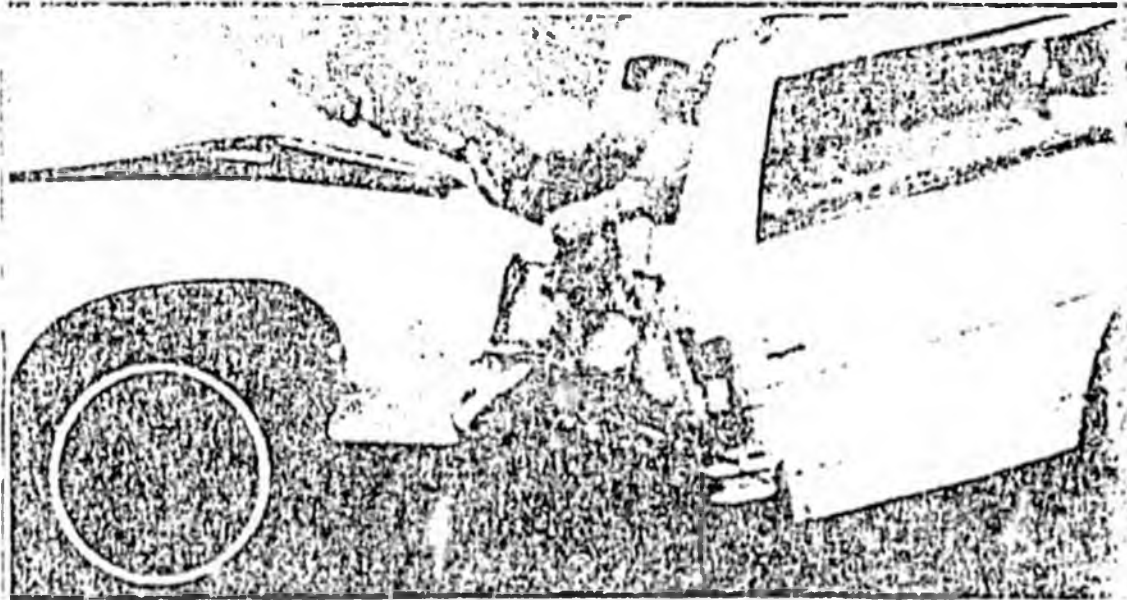
Effective January 1, 1981, a new federal standard for automotive child restraints has been adopted by the Department of Transportation.

This means that all child and infant car-seating devices manufactured after that date must meet more stringent DOT safety tests. Better restraints will give children protection appropriate to

the special risks they take when riding in a motor vehicle will be generally available.

However, the children can benefit from the protection only if adults are educated to use it, and if laws and regulations requiring its use are adopted and enforced at the state and local level.

Insurance people — particularly producers serving the public



Unrestrained child dummies in station wagon are catapulted through rear window.

By William Haddon, Jr. M.D.
President
Insurance Institute for Highway
Safety

Each year nearly 2,000 American children who have not even reached the age of 15 are being killed when motor vehicles in which they are riding crash. Many thousands more are being seriously injured.

They are helpless victims, and most of their deaths and crippling are both preventable and inexcusable. By no measure can the children be held responsible for their pain, suffering and damage.

It is adults, not children, who design and manufacture the vehicles these children crash in — vehicles whose interiors commonly include sharp, hard, hostile structures unnecessarily placed, by the adults who design them, just where a small child's head or body may impact in a collision, vehicles whose doors and windows are designed and made in ways that actually encourage rather than prevent ejection of small (and large) bodies in crashes.

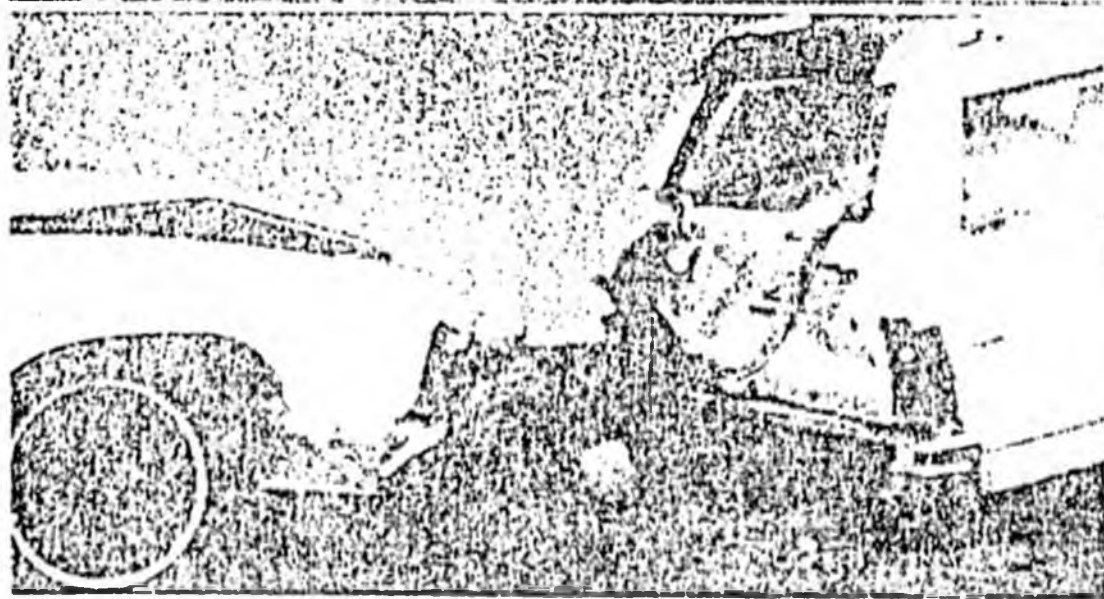
It is adults, not children, who drive or are passengers in the

directly — can play an important part in informing policyholders on the proper use of child restraints, and in making local lawmakers aware of the need for legislation.

The Insurance Institute for Highway Safety is leading the educational campaign on child restraints by releasing, in November and January, public

service television announcements, and by making available publications and films for distribution countrywide.

In the article below, Dr. William Haddon, president of IIHS, describes the hazards which face infant and child motor vehicle passengers, and what needs to be done to protect them.



Then they fell to pavement under wheels of oncoming vehicle. (IIHS photos).

motor vehicles in which the children are transported — and who therefore decide whether or not those children shall be held in place by manual safety belts or child restraints, and whether or not those children shall sit in the more hazardous front seat or the far safer rear seat of the automobile.

That millions of motor vehicle crashes will take place annually in the United States is a certainty, but their all too often hurtful consequences for children need not be. Yet we run the danger as a society of learning to live with child

death, injury and mutilation on the highway — of not knowing how easily much of it could be avoided, of not caring enough to take the simple steps to stop the mayhem.

The lives of infants and small children are shattered in motor vehicle crashes in America each month and year. All too often they are dead or injured because even the most basic available steps were not taken, by adults whose actions could have made a difference, to properly protect the children against crash damage.

In a critically important sense, a

If you would like to join the campaign in your community or through your business or professional organization, you may find useful some of the following materials:

• *Kindness Can Kill and Saving a Child's Life*, two videotaped 30-second announcements for local TV station use. A limited number available from Communications Department, Insurance Institute for Highway Safety, Watergate 600, Washington, D.C. 20037 (202-333-0770).

• *Children and Infants in Car Crashes: Restrained and Unrestrained*. A five minute silent 16-mm. film suitable for showing to PTA's and other groups. Available for free loan on first-come, first-served basis, and for sale (\$80). Also on Super 8 cassettes (\$80) or 3/4-inch videotape cassettes (\$40). Communications Department, IIHS.

• *Child Restraint Systems for Your Automobile*, a brochure containing general information on types and uses of restraints. Available free (up to 50 copies) from Child Restraint Program, National Highway Traffic Safety Administration, Washington, D.C. 20590.

• *Don't Risk Your Child's Life*, a brochure containing comparative shopping information about child restraints. Available at 50 cents for a single copy (enclose stamped SAE), quantity prices on request, from Physicians for Automotive Safety, P.O. Box 208, Rye, N.Y. 10580.

• *Information Packets*, in bulk. For samples, lists and prices, write enclosing a stamped, self-addressed large envelope to Action for Child Transportation Safety, P.O. Box 266, Bothell, WA 98011

travelling motor vehicle is a package in which delicate, breakable human cargo is being shipped. The package often moves at high speed, and its exposure to being smashed against other packages or against rigid roadside obstacles is both well known and predictable.

A motor vehicle crash, even a so-called "minor" one, can be a very violent event. Thus, a car travelling down the road at even the seemingly moderate speed of 25 miles per hour (a typical speed limit in a residential area) carries the potential for releasing, in a crash, forces that can do serious or fatal damage to child occupants if they are not properly packaged.

Children unrestrained

In a direct observation survey conducted by the Institute, *ninety-three percent of children younger than 10 years old were found to be travelling about unrestrained or improperly restrained*. The same survey, of about 5,000 automobiles containing about 8,900 children less than age 10, also reached the following findings:

• Only 433 (about five percent) of the children were wearing safety belts — predominantly lap belts — of any kind. This tiny percentage is especially tragic because several subsequent studies have found that in the absence of specially designed child restraint systems, manual belt systems designed for adults offer protection even for younger children.

• About 560 child restraint systems — car seats, infant carriers, car beds and safety harnesses — were in use

among the 8,900 children. But of these, only 153 — about one in four — were being used correctly. In addition, 105 child restraint systems were observed being completely unused in cars carrying unrestrained children.

- o The picture was slightly better for children whose drivers were safety-belted — 22 percent of these children were properly belted or in a properly used child restraint system, compared to the two percent of children so protected when riding with unbelted drivers. But 78 percent of the children still remained unprotected even in the presence of belt-wearing adults, most of whom were their own parents!

An additional and particularly alarming finding of the survey was that the number of children observed to be travelling about with restraint protection (proper belt or child restraint use) was nearly equalled by the number of children travelling about in one of the most hazardous circumstances possible — in the lap of an adult.

In 1978 the Institute looked at in-depth investigation of 14 cases involving death or serious injury to lap-held children in car crashes. Our study — titled, appropriately, "Warning: In Cars, Parents May Be Hazardous To Their Children's Health" — found that in 10 of 14 investigated crashes in which children on laps were severely injured or killed, "the injuries were reported to be caused or aggravated by contact with other vehicle occupants. The study gave some examples:

A Desirable Child Restraint Law

The Insurance Institute for Highway Safety does not involve itself in the drafting of child restraint or any other type of legislation. However, studies suggest that the elements of an effective child restraint law are these:

- o Children younger than one year old should be required to be transported in an infant carrier which meets Department of Transportation standards.
- o Child passengers who can sit up unassisted in a vehicle should be required to use special child restraint devices or be restrained by car seat belts.
- o Child passengers should be required to ride in the back seat, in restraints, unless other children are already occupying all of the rear seating positions that have seat belts.
- o The holding of children on the laps of adults in vehicles is a hazardous practice which should be prohibited instead of encouraged.
- o Children should be prohibited from ever being carried in the cargo area of any motor vehicle. Children should specifically be banned from the cargo areas of station wagons, trucks, vans and hatchbacks.
- o The driver should be responsible for insuring that children being transported in a motor vehicle are restrained.

From *Children in Crashes*,
IIHS, 1980



This Toyota was struck by a pick-up truck, killing driver.

- A car was struck by another oncoming car that crossed the center line. The unrestrained seven-month old infant, in his mother's lap in the right front seat of the struck car, continued to move forward, as did his unrestrained mother, who crushed him against the instrument panel, with fatal brain injuries the result. (The mother received multiple fractures.)
- An automobile was passed by another and forced off the side of the road, where it travelled along a ditch bottom, striking first a tree stump, and then a tree. A fourteen month old boy travelling in the right rear seat on the lap of an unrestrained 26 year old man was found face down with the adult on top of him, having received a fatal brain injury as well as multiple fractures and lacerations from contact with the back of the front seat and the adult. (The adult holder sustained various injuries including a ruptured spleen and a leg fracture, but survived.)

In this same crash a nine year old passenger in the rear center seat, restrained by a lap belt, was

not injured. This shows that the overall forces on the vehicle were not only well below fatal magnitude, but also below those required to produce injury to a properly crash-packaged infant.

These are graphic illustrations of just how hazardous travelling — and crashing — can be for lap-held infants. And the situation is little better when the child is be-



A 16 month old child restrained in this seat survived the crash.

ing held in the lap of a restrained adult; though a mother or father may feel that their baby is safe in the grasp of adult arms, the fact is that in even low-speed impacts, the strength of those arms is usually insufficient to restrain a small child from being smashed into the instrument panel or windshield.

In another Institute study, tests were conducted to measure the maximum forces that adults can exert to restrain infants in crashes. The tests employed a device for simulating typical crash forces by yanking an infant-sized doll attached to a cable from the arms of men and women who were exerting all of their strength to grasp the doll and prevent it

from moving forward. Based on the inability of these adults to restrain the doll under these conditions, the report concluded that:

"It is possible that many adults would not be able to protect a 6 month old child from impacting the hard structures of the automobile even in low speed crashes. This analysis makes it clear that in moderate or severe crash situations it is not possible for adults to adequately restrain children in their laps by holding on to them. Those adults who attempt to restrain children by holding them in their laps expose the children to undue risk of injury and death."

The principles of proper crash packaging include positioning the contents of the package — whether a porcelain doll in a box

Two adults in this Chevrolet were seriously hurt in head on crash.



• or a small child in a motor vehicle — so as to reduce the likelihood that it will be contacted by hostile interior structures or be ejected from the vehicle package in a collision. The results of an Institute study published in 1977 underscore how critically important

A 7 week old infant riding in this rear seat was seriously injured.

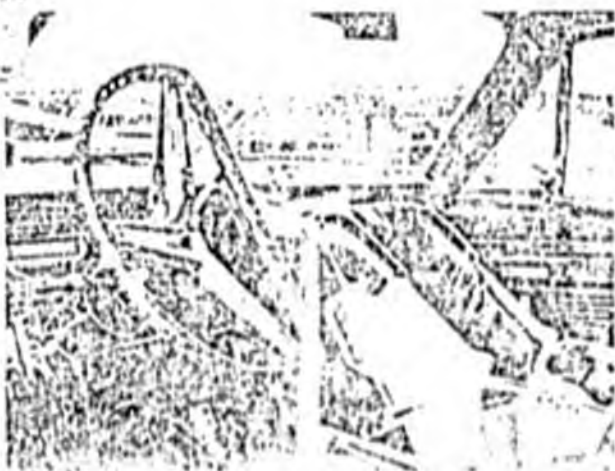
this is for children in car crashes.

The study looked at both the seating positions and the restraint use (or non-use) of all passengers younger than 15 years old involved in reported crashes in North Carolina during 1973 and 1974. The number of such child passengers totalled 26,971 — of whom only 1,946, or seven percent, were reported to have been restrained by a safety belt or child restraint system in the crashes studied. Overall, back seat child occupants were found less likely by far to be killed or injured than front seat occupants: restrained youngsters had a significantly lower death-injury rate by 39 percent in the front seat and 31 percent in the back seat.

Rear seats safest

The highest death-injury rates were for unrestrained youngsters in front seats, followed by unrestrained youngsters in rear seats, then restrained youngsters in front seats, and — with the lowest percentage of death or injury — restrained youngsters in rear seats.

It should come as no surprise that the rear seat is safer for a child in a crash than the front. A child in the front seat runs the risk of contacting and being se-



verely injured by such damage-inducing structures as radio and air conditioning control knobs and instrument panel edges, including those behind the right side of the steering wheel.

Standard inadequate

Federal Motor Vehicle Safety Standard (FMVSS) 201, first issued in 1967, prescribes performance requirements for occupant protection by some interior automobile structures in crashes. In effect, it forbids the presence of hostile, sharp, protruding structures in some of the locations, such as instrument panels, where adult heads and chests are likely to impact in forward crashes, and requires that those areas be covered with energy-absorbing material. But it fails to require the same protection for children, by remaining silent on the performance expected of major vehicle areas that the heads and chests of the infants and small children may strike, even in moderate-speed crashes.

Death rate high

As a recent analysis done for the Institute at Johns Hopkins University has found, the death rate for children in cars is "extremely high" in the first year of life, especially for children less than six months old. The analysis found, based on 1976 data, that children younger than six months had a death rate in cars of 9.1 per 100,000 population, as compared with a rate of 4.8 for one-year olds and even lower rates for children in the 2-12 year old age bracket. "The high death rate in infants may be partly due to a greater likelihood of being in the front seat and/or held in someone's

ADEQUATE CHILD RESTRAINTS

From "Child Restraint Systems For Your Automobile"

National Highway Traffic Safety Administration

For the infant — birth to 12 months old:

Infant carriers or convertible child safety seats are the only types of child restraints recommended for use by babies. In these restraint systems, the baby faces backwards, in a semi-reclining position. The carrier is lined with soft padding, has an internal safety harness to keep the baby in the restraint, and is anchored to the car by the vehicle's safety belt.

There are basically two kinds of infant carriers. The first is designed for infants only. Babies outgrow this kind of seat and must move up to a child safety seat. The second is a convertible carrier. When babies get too big for the infant position, the convertible carriers can be changed into child safety seats which toddlers can continue to use until they're old enough to wear regular safety belts.

WARNING: Do not use flimsy, light weight car beds and plastic feeder seats that are designed only for household use, and not for transporting an infant in an automobile.

For the toddler — 1-4 years old:

Child Safety Seat

This restraint system is designed for children who can sit up without support. It faces forward and is anchored by the vehicle's lap belt, which is either

stened around the front of the seat, or threaded through the neck of the frame. It has a safety harness with two shoulder straps, a lap belt, and a crotch strap. This five-point harness reads the crash forces over the child's shoulders and hips. The crotch strap keeps the hip straps from riding up into the child's delicate abdomen. Some child safety seats also have a "top tether strap" that ties the top of the restraint to the structure of the car. A top tether strap is usually required on child safety seats which have been raised several inches so that the children riding in them can see out the windows.

Protective Shield

This type of child restraint is over the front of the child's padded chest, and is designed to catch and cushion the child in a crash. It is a C-shaped shell with energy-absorbing padding on the upper part of the shield. The shield is anchored to the car by the lap belt which fastens around the front of the shield. In an accident, the shield reads the crash forces evenly over the child's head and upper body.

Child Harness System

This restraint consists of a five-point safety harness with a top tether anchorage strap. It is designed for children who can sit up without support. It faces forward, and is anchored to the car by the vehicle's lap belt and top tether strap. The vehicle's lap belt threads through the top of the harness. The safety harness does not provide side impact protection, and should, whenever possible, be used in the center of the rear seat.

arms; both front seat position and on-lap travel place children at increased risk of being injured or killed," the analysis concluded.

Children are dying and being maimed needlessly and inexorably on our highways. The bloodshed won't go away simply because we wish it would. It will go away, or at least diminish substantially, only if we apply the practical, simple technological answers that have been available in this field for years to better protect people — adults as well as children — in crashes.

Local responsibilities

But for that to happen, there is much to be done, and much responsibility to be assumed by all of us — by state and local governments who can mandate child protection laws, by federal officials who regulate the safety features of motor vehicles and child restraint systems, by the manufacturers who design and build the cars and other motor vehicles that should, but don't, properly package people in crashes, and by parents and other adults who can place children in restraints, but usually do not. There is much to be done, and no honest reason for delay. Children are dying, because adults are not properly doing their job of seeing to it that the new generation gets a healthy start in life, as free from unnecessary death and serious injury as humanly — and humanely — possible. ○

The above article was condensed from testimony presented by Dr. Haddon before a Congressional hearing on Practices and Systems of Infant and Child Automotive Restraints.



President
Seymour Charles, M.D.
Executive Director
Annemarie Shelness

Physicians for Automotive Safety

PAS News

Winter 1981/82

More than four years have passed since Tennessee's child passenger protection law went into effect. This landmark event, for which Dr. Robert Sanders of the Murfreesboro County Health Department deserves the major credit, has resulted in other states following suit. Ten states have statutes on the books already, many others are in the process of considering legislation.

While it cannot be stressed enough that merely enacting a law is not likely to bring about lasting changes in the way children are being transported, the Tennessee experience has shown that educational campaigns, accompanied by police enforcement, can and do.

It now remains to persuade legislators in the remaining 40 states to pass bills the public is able to comply with and that address the problem in an informed manner. In some instances, statutes already on the books would benefit from amendments.

This issue of PAS News tackles the problem of legislation in depth, providing guidelines which will, it is hoped, be helpful.

Consumers Union Rates Child Restraints

The April 1982 issue of Consumer Reports rated children's car safety seats on the basis of convenience -- a rating that has been badly needed. CU's "check-rating" was awarded to the Century 200. The seat has a small abdominal pad joining the shoulder belts together, and requires only a single buckling action, which the majority of parents would find convenient. The seat was also rated high in child comfort.

Seats requiring top anchor straps were rated in the lower category because of the problems top anchor installation entails. The Stroelee Wee Care Seat, check-rated in CU's 1977 ratings, has been relegated to the lower category for that reason. (Experience has shown that the majority of top anchor straps are not used).

CU expanded on a government-funded study carried out by the University of Michigan Highway Safety Research Institute which

gave 32 parents a chance to make a choice from eight different model car seats.

At the end of the experiment, only three parents kept the seats they had first picked. CU contracted with HSRI to include every model seat on the market.

Although PAS raised objections to the check-rating -- doing so we believe, creates an unjustified gulf between the check-rated seats and other "acceptables" -- we are delighted that CU took a more pragmatic approach to child passenger protection. Many safety experts disagreed with CU's 1977 ratings (PAS News Summer 1977).

The enclosed special report from Aide, "How Safe Is Your Car?" is being sent to PAS members, courtesy of United Services Automobile Association.

Car Booster Seats: a Mixed Blessing

At half the price of conventional children's car restraints, booster seats are an attractive buy. Three makes are currently on the market: Century's "Safe-T-Rider" #4760, and #4780, Kolcraft's "Tot-Rider" and Strolee's "Wee Care Booster." Boosters are particularly valuable for the child who has outgrown a car seat, but can be used from the time the child weighs 20 pounds. Properly used, they furnish crash protection in compliance with the federal standard.

What the average consumer does not appear to recognize is that a booster seat is not a satisfactory safety device when used with only the lap belt. The harness, which provides support for the upper torso, is an essential component of the system. (With lap belt only, the government-mandated "misuse" test calls for protection in 20 mph crashes as opposed to 30 mph protection afforded when the seat is used with the harness.)

Although a harness accompanies each seat (the Volvo booster is an exception to be discussed later), it is not attached to the seat; this may be the reason that, more often than not, the harness is not used.

Installation of the harness poses the same problems as installation of top anchor straps, and the non-use incidence is probably similar, also. Since correct use of booster seats is possible only in cars equipped with top anchor brackets, these seats are not suitable for car pool situations.

Instead of using the harness supplied with the seat, the booster may be used with combination lap/shoulder belts. These are present in all front outboard seats of American automobiles manufactured since 1968. In some luxury imports shoulder belts are also provided in rear outboard seats. Raising the child up on a booster makes it possible to use shoulder belts at an earlier age.

A shoulder belt can only be used if it positions across the child's chest and not the face or neck. There are no hard and fast rules concerning the height the child must be to assure a correct fit. It varies from car to car, depending on the location of the anchorage point. Some belts are attached to the door pillar, others along the roof frame. The higher and more

perpendicular the anchorage location, the taller the child will have to be before the belt can be used. Moving the child closer to the center of the vehicle may help improve the fit.

Some stores are unfortunately contributing to misuse by advertising just the seat and not the harness. Several branches of Child World, an East Coast chain, have been advertising the Kolcraft Tot-Rider showing a child seated in the booster, secured with only a lap belt. Parents may not take the time to read the instructions that accompany the seat, warning against such use.

Two factors contribute to increased head excursion when only the lap belt is used: 1) The elevation of the booster; 2) The fact that the lap belt positions across the thighs rather than the pelvis -- a preferred and safer location -- providing, of course, the upper torso restraint is used also.

The Volvo safety seat is in a category by itself. Volvo developed it to enable children to use the lap/shoulder belts which Volvo cars have in both front and rear seats. No harness is provided.

The Volvo booster is higher than the others mentioned and would therefore be particularly dangerous used with only a lap belt. Since the device could not meet the federal "misuse" standard, the manufacturer recommends it for children weighing over 40 pounds. The seat thereby does not fall under the requirements of standard No. 213 for child restraints.

Because of its limited application, the Volvo booster should not be included in listings of recommended restraints.

It should be borne in mind that unless booster seats are used in conjunction with an upper torso restraint, a child would be infinitely safer buckled into a lap belt while sitting on the seat of the car.

GM Out of Car Seat Business

The Infant and the Child Love Seats, previously marketed by General Motors, are now being distributed by Century Products. Hamill Manufacturing Co. which produced the seats for GM, continues to make them for Century.

CHILD PASSENGER PROTECTION

A Guide for State Legislation

Prepared by Annemarie Shelness

Introduction

To date (April, 1982), ten states have enacted laws requiring small children riding in cars to be restrained in special safety seats. (Some states permit use of standard belts as an option to special child restraints). Many more states will be considering similar bills in the near future (Appendix I).

The components of these bills vary considerably. For example, upper age limits range from two to five; belt use is allowed in some states but not in others. There are no sound reasons for these variations.

The inconsistencies and contradictions which exist in the statutes now on the books or about to be voted on have led to confusion on a number of important factors:

- Up to what age should children be protected?
- What is the best means of protection?
- Should belt use be permitted as opposed to special restraints only?
- Should only parents and guardians be made responsible for the child's safety or should the law apply to any person operating the vehicle in which the child is traveling?
- How about parents on public assistance?
- What should be the policy when the number of small children in the family exceeds the number of belts in the vehicle?
- How can the law be enforced?

These and other aspects must be addressed when bills are drafted.

It has become increasingly evident that there is need for a "Model" child passenger protection law to serve as a guide for states to follow. The succeeding pages contain carefully documented recommendations and explanations intended to assist legislators in formulating a sound child passenger protection bill.

The Problem

Motor vehicle accidents rank as the leading cause of death and injury in childhood once the critical early period has passed. In the last decade alone, almost 10,000 children under the age of five lost their lives as passengers in automobiles (1). Of the hundreds of thousands injured, many are left with permanent disabilities, mental and/or physical.

Unrestrained children can also be the cause of accidents by distracting the driver (2). Furthermore, fatal injuries occur as the result of children falling out of cars in non-crash situations (3).

The Remedy

Seat belts have long been recognized as the single, most effective safety device available. It has also been shown that the majority of deaths among children could be prevented and the severity of injuries reduced through the use of appropriate restraining devices (4,5,6).

What experts view as "appropriate" for children will be dealt with later.

How Can Child Restraint Use be Encouraged?

The number of children riding adequately protected is, unfortunately, small (7). While educational programs have been shown to increase protection (8), it is believed that legislation, combined, of course, with public information, brings about the quickest results. In Tennessee, where a child passenger protection law has been in force since 1978, restraint utilization has tripled (9).

Up to What Age Should Protection Be Mandated?

Restraint use should be mandated for all motorists, regardless of age, as has been done in 28 countries or provinces across the world (10).^{*} At the very least, belt use should be required for all minors. The fatalities in the late teens are more than 10 times higher than among children 0-3 (11).

As a matter of political expediency, the emphasis in the U.S. is for the present being placed on protecting the very young. It has been found that legislators are more receptive to mandating protection for small children than for adults or even school-age children. It would seem desirable as well as feasible, however, to include the pre-teen years when parents are still largely in control of their youngsters' activities.

Age four developed as a natural cut-off point because special restraints are the preferred means of protection until then (12,13). It should be borne in mind that some children exceed manufacturers' specified height and/or weight limits even before reaching their fourth birthday. A law that does not allow belt use must therefore specify maximum weight and height limits rather than age alone. For the majority of devices on the market these are 40 pounds and 40 inches, respectively.

^{*}Ironically, children are excluded from these laws. Only Australia and the Canadian province of Saskatchewan now require that children ride restrained. Eight European countries require that children ride in the back seat.

What Are the Objections to Child Restraint Laws?

There are two major problems of which proponents of legislation must be aware. One concerns the expenditure involved in providing restraining devices. This can be a critical issue for low-income families, especially where there are several children under the age of four who would require special restraints.

Difficulties also exist with nursery school car pooling. Securing several children in safety seats is a formidable task if it is to be done correctly. It is therefore not only possible but even probable that many seats would be improperly secured. This applies particularly to those requiring top anchor straps. These seats can only be used in cars equipped with anchor brackets (14). Omitting the use of the top anchor strap greatly reduces the protective potential of these seats.

Allowing the use of lap belts as an alternative to special restraints would eliminate the problems just described, and ensure an acceptable level of protection where in all too many instances none would be provided.

What Is the Best Way of Protecting Young Children?

Ideally, children under the age of four should be using special restraints capable of distributing crash forces over a large area of the body. It is important to note, however, that there is nothing significant about this cut-off age. [Only infants up to 12 months have been shown to be particularly vulnerable in crashes (15).] It simply amounts to the fact that few devices will accommodate children above that age.

While special child restraints represent the "ideal" means of protecting the very young, it is believed that mandating special restraints only will not have the best possible yield in terms of the overall number of children riding effectively protected.

Should State Laws Permit the Use of Seat Belts?

Although special child restraints, providing they are used correctly, are certainly the preferred means of protection up to age four, the answer to the question is an emphatic "yes" (16, 17). Dr. John W. Melvin, Head of the Biomechanics Department, Highway Safety Research Institute, University of Michigan, who conducted in depth investigations of crashes involving small children (5,6), strongly supports a belt option:

"State legislation should permit children over the age of one year to use lap belts in the rear seat if no child restraint is available. There is, however, no suitable alternative to a child restraint for an infant.

The primary objective, of course, is to prevent ejection. National Crash Severity Study (NCSS) data indicate that a fatality is over 50 times more likely to occur if an occupant is ejected than if s/he is not."

There are a number of reasons use of standard seat belts should be permitted as an alternative to special child restraints once the child can sit up unaided:

1) It can by no means be taken for granted that all parents will obey the law. Even in Tennessee, three years after the law went into effect, the compliance rate is only 30 per cent (9). Although this figure represents a highly significant increase of 200 per cent over pre-law days, 70 per cent of Tennessee's small children continue to ride unprotected.

2) All too often children's restraining devices are used improperly. Depending on the manner of misuse, the device will offer reduced protection or possibly none at all.

The misuse rate can be as high as 75 per cent (7), and has been shown to exist even among highly motivated parents (18).

3) Many low-income families and even families in comfortable circumstances, but living in cities, may not own cars. On the few occasions a car is being used, it would certainly be more likely that the child would be buckled into a belt (providing the law permitted this) than that the parent spend in excess of \$40 for a device that will be used only occasionally.

4) Most importantly, the public should not be given the impression that the use of special car seats is unrelated to the function performed by safety belts. Yet this is what publicity for child restraint use is, unfortunately, accomplishing: Once special restraints are no longer used, children can be found riding loose. In fact, often one car will contain a number of children of whom only the little ones are riding protected. Observational studies confirm that restraint use drops sharply after one year of age (7).

Based on many years of experience in promoting child restraint use, PAS does not believe that allowing the use of lap belts would discourage parents from purchasing and using safety seats. These seats are popular because they raise the child up to window height, an important factor in child contentment. Small children sitting on the seat of the vehicle cannot see out.

It is expected, however, that by allowing lap belts as an alternative to child restraints, the overall number of children riding protected would increase. Furthermore, such a belt option could well result in belt use by older children not covered by the law.

Are Not Belts Dangerous for Small Children?

Belts can cause injuries both in children *and* adults, but this occurs only in very severe crashes. Whenever such injuries are reported, it is stressed that unbelted, serious or fatal injuries would have occurred instead (18). It has also been shown that incorrect wearing of belts can be responsible for injuries (19).

Children who are unrestrained almost invariably sustain head injuries which can be fatal or leave them with irreversible brain damage, whereas a fractured pelvis will heal. Spinal injuries are extremely rare.

Belts may be safer even than improperly used child restraints. For example, seats requiring a top anchor strap are often used with the strap left unsecured (20). In 30 m.p.h. sled tests recently conducted at the University of Michigan Highway Safety Research Institute, employing a dummy simulating the physical characteristics of the average three-year-old child, the head excursion in seats that were not tethered was about *four inches greater* than for the lap-belted dummy. (Findings to be published.)

What Is the Reason Seats Are Misused or Not Used at All?

Car "safety" seats have been in use for some 50 years, serving an important if limited safety function (12). Unfortunately, too many parents continue to view these seats as merely a means of confining and supporting the child and providing elevation for a better view out of windows. Once the child needs neither the confinement nor the elevation, these seats are often no longer used.

There is nothing magical about safety restraints. They alone cannot protect the child; parents and guardians have to do their part.

Should Adults Be Permitted to Hold Children on Their Laps?

This practice, which was originally permitted in Tennessee, is far more dangerous than allowing children to ride loose. The weight of the adult, greatly increased by collision forces, would crush the child against the dashboard, windshield or other internal structures (Appendix II). Even if the adult is riding belted, the child would be torn from his/her arms by collision forces (21).

Who Should Be Responsible for the Protection of Children?

The operator of the car in which the children are traveling should be made responsible for their safety. Responsibility should not be limited to parents and legal guardians. Doing so would result in large numbers of children being placed into unnecessary jeopardy while being transported by grandparents and babysitters, or participating in car pools.

What Can Be Done if the Number of Children Exceeds the Number of Belts Available?

This problem can only be solved by making an exemption for such contingencies. Doing so would, however, defeat the whole purpose of the law: Large numbers of children could continue "legally" to be piled into one car or the cargo area of a station wagon.

An exemption should therefore be made only where the number of children *in one family* exceeds the number of belts available.

Should Children Be Required to Ride in the Back Seat?

For an extra margin of protection, the law should specify that lap-belted children, as opposed to those secured in child restraints, ride in the back seat. This is required in some states. (Appendix I).

What Should the Law Specify Concerning Federal Standards?

The law should require that devices used be in compliance with the federal standard applicable at the time of manufacture. This would rule out the use of travel beds, porta cribs, and household feeder and booster chairs which offer no protection at all.

It is not recommended that use be limited to devices manufactured after January 1, 1981, when a revised federal standard went into effect (22). This standard calls for *dynamic* testing of devices as opposed to the *static* tests mandated in 1971. (Static tests were shown not to replicate the violent forces generated in a real-life collision.)

The number of poorly constructed seats, i.e., those only in compliance with the 1971 test requirements still in use is estimated to be relatively small. The majority of manufacturers have produced crash-tested seats for several years now, although not required by law to do so. Forcing parents who already own a crash-tested seat to purchase a new one could be viewed as punitive.

How Can The Law Be Enforced?

Enforcement is, of course, a difficult matter, and entirely up to law enforcement authorities who may not view this as a top priority.

In Tennessee and several other states (Appendix I), the law permits fines to be waived if a parent appears in court with proof that a child restraint has been obtained. If belt use is permitted as an alternative, this course of action would make little sense, and a fine would, presumably, have to be levied.

STATE CHILD RESTRAINT LAWS

Prepared by: Mary Jones, State Relations Department, NVMA — Revised by: Larry A. Etkin, Minnesota Department of Public Safety, March 1982

State/ Begin	Requires	Children	Where Seated(2)	To Use(3)	Vehicle	Exceptions	Penalties	Public Education Campaign	Other Provisions
Calif. 1/1/81 (1)	N/A	Under age 5 Ages 5-15	Not specified Not specified	Approved child restraint Seat restraints	Motor vehicle or combination of vehicle	School buses	Oral warning system must be developed in first year of campaign	Yes. Law is basically a public information and education cam- paign to encourage use of restraints. Study is also mandated and due by 4/1/83	Program may be limited to a pilot project in two cities with a com- bined population of at least 200,000 in at least two counties. Funds appropriated
Florida 7/1/83	Resident parents or legal guardians	Under age 3 4-5	Not specified Not specified	Approved child restraint system Approved child restraint system or seat belt	Passenger cars and pick up trucks	None	\$15 fine or proof of acquisition of system	Yes. Law basically mandates the continuation of existing public information and education campaign.	Failure to use child restraint system shall not be considered contributory negligence.
Kansas 1/1/82	Resident parents or legal guardians	Under age 2	Front seat	Approved child restraint system	Passenger vehicle	Non-resident drivers, drivers of temporary sub- stitute vehicles	Oral warnings	Yes.	Failure to use child restraint system shall not constitute negligence per se.
Maine 9/19/81	N/A	Under age 4	Not specified	Child restraint system or seat belt	Motor vehicle or combination of vehicle	None	Oral warning	Yes. Law is basically a public information and education cam- paign to encourage use of re- straints. Study is also mandated and due by 3/1/83	None.
Mas. 1/1/82	N/A	Under age 5	Not specified	Approved child restraint device or seat belt	Motor vehicle	School buses, commercial vehicle, all other seats with seat belts occupied, vehicle not equipped with seat belts, physically unable to use restraint	Maximum fine of \$25.00 or proof of acquisition of system	No.	Use or non-use of system is inadmissible evidence in court, and does not have any effect on state's insurance surcharge; failure to use child restraint system does not constitute negligence per se.
Michigan 4/1/82	Resident drivers	1-4 1-4 Under age 1	Front seat Back seat Not specified	Approved child restraint system Approved child restraint system or seat belt Approved child restraint system	Motor vehicle	Non-resident drivers, children being nursed, bus and school bus, taxi cab or other vehicle not required to be equipped with seat belts	Maximum fine \$10.00 plus court costs or proof of acquisition of system; points will not be assessed	No	None.
Minnesota 1/1/82	Resident parents or legal guardians	Under age 4	Not specified	Approved child restraint system	Motor vehicle	Non-resident drivers, vehicles not owned by parent or guardian	Hazard warning detailing dangers and advising use of restraints	No.	Law requires parent to equip and install system in vehicle — does not require its use. Non-use of system is inadmissible evidence in court.
Nebraska 6/1/82	Day care providers	Under age 1 Age 1 and older	Not specified Not specified	Approved child restraint system Approved child restraint system or seat belt	Motor vehicles	None	Day care provider guilty of infraction that may cause license revocation or sus- pension. Driver subject to separate penalty up to \$100.00 fine	No	Law is limited to day care pro- viders. It gives legislative weight to what exists as administrative law or rule making in some other states.
New York 4/1/82	Resident drivers	Under age 5	Not specified	Approved child restraint system	Passenger motor vehicle	School buses, non- resident drivers	Maximum fine \$25.00 or proof of acquisition of system	No	Vehicle owner shall not permit use of vehicle unless child passenger are restrained
N.C. 7/1/82	Resident parents	Under age 1 Age 1-2	Not specified Not specified	Approved child restraint system Child restraint system or seat belt	Motor vehicles or a family purpose vehicle	Non-resident drivers, child whose needs are being attended to, all other seats with seat belts are occupied, not required if seated in seat not requiring safety belt	7/1/82 6/30/84 warning ticket. 7/1/84 6/30/85 \$10.00 fine, points will not be assessed	No. Study is mandated from 7/1/82 6/30/85	Legislature not obligated to appro- priate funds to implement. Failure to use child restraint system does not constitute negligence per se.
Rhode Island 7/1/80	Driver	Under age 3	Front and rear seat (as amended 4/3/81)	Approved child restraint system	Motor vehicle	None	Maximum fine of \$15.00 or proof of acquisition of system, recorded on driver record	No	Use or non-use of system is inadmissible evidence in court, failure to use child restraint system does not constitute negligence per se.
Tenn. 1/1/78	Resident parent or legal guardian	Under age 4	Not specified	Approved child restraint system	Motor vehicle	Children being nursed or attended to by mother, vehicle not owned by parents or guardians	\$2.00 \$10.00 fine, no court costs	No	Use or non-use of system is inadmissible evidence in court, failure to use child restraint system does not constitute negligence per se.
Virginia 1/1/83	Parents or legal guardians driving vehicle registered in Virginia	1-3 3-4	Not specified Not specified	Approved child restraint system Approved child restraint system or seat belt if properly fit	Motor vehicles	Public transportation, school buses, farm vehicles and children medically unable or for whom it is not practical to use a restraint or certified by a physician	\$25.00 fine, or \$10.00 fine for exempted child not accompanied by physician's certificate	No.	Statewide in-vehicle seat program is to be established for certified indigent families. Fines for non- compliance are dedicated to pur- chase restraints for the program. Non-use of system is inadmissible evidence in court, and does not constitute negligence per se.
W. Va. 7/8/81	Resident driver	Under age 3 Aged 3-5	Not specified Not specified	Approved child restraint system, car bed or car seat Approved child restraint system, car bed, car seat or seat belt	Passenger automobile, van or pick up truck	Drivers of foreign vehicles	Madness, or, \$10.00 \$20.00 fine or proof of purchase of system	No	Failure to use system does not constitute negligence

N/A = Not applicable. (1) As of 8/1/81, program had not yet begun. (2) Where not specified — we are assuming use is required in both front and rear seats. (3) "Approved" system is a system which meets Federal motor vehicle safety standards.

Many parents believe that the safest and most loving way to transport a small child or infant in a car is in their arms. They are certain that if an accident is about to occur, they will have time and the strength to hold the child and protect him/her from injury. **THIS IS NOT TRUE.** The most dangerous place in a car for a child is on the lap or in the arms of an adult.

Two recent studies clearly illustrate this danger to children.

In a series of tests at the Highway Safety Research Institute in Michigan, male and female adult volunteers were safely fastened to a seat with lap and shoulder belts. Each volunteer held a 17-pound "dummy" which represented the size and weight of a six month old baby. Each was then subjected to simulated 15 and 30 mph impacts. Not one of the volunteers was able to hold onto the "baby." Even knowing the precise moment of impact and using all their strength, the baby was ripped from their arms and slammed into the dashboard.

A second study was sponsored by the Insurance Institute for Highway Safety in Washington, DC. It shows what happens to infants held in the arms of adults who are not using proper restraining devices. In this test, a 1979 4-door Chevy Malibu was driven into a solid barrier at just 24 miles per hour. You will see why the second major cause of death and injury to children in cars is being crushed by unrestrained adults.



Pre-crash position of unbelted mother holding her baby on her lap.



Shows forward movement of mother and child 1/10 second after impact just before slamming into dashboard and windshield.



Mother's body becomes a battering ram, crushing infant into dashboard and shattering windshield (3/20 second after impact).



Shows mother and child as they rebound off windshield and dash (1/2 second after impact).

WHAT SOME PROMINENT SAFETY RESEARCHERS SAY

The Battered Child Syndrome, an injury pattern resulting from parental abuse, has been widely described in the medical literature and the popular press. Yet automotive collisions are the most common cause of injuries in childhood and they have received little attention.

The injury complex should be described as the neglected child syndrome, since ample evidence indicates that a great many of these injuries could readily be reduced or prevented by simple parental action. (From *Injuries to Children in Automobile Collisions*, by A. W. Siegel, A. M. Nahum, and M. R. Appleby, U.C. L.A. School of Medicine.)

ADDITIONAL SAFETY MATERIAL AVAILABLE

Crash testing of child restraints was featured in the August 1972 and March 1975 issues of *Consumer Reports*. Convenience of use and child comfort were rated in the April 1982 issue. Copies are available at your public library or order from Consumers Union, 256 Washington Street, Mount Vernon, NY 10550, price \$1 each.

Questions on car restraints are answered in *The Automotive Safety Belt Fact Book*, obtainable from the Government Printing Office, Washington, DC 20402, price \$1.

For information on child restraint loan programs and community educational activities, write National Highway Traffic Safety Administration, NTS-14, 400 Seventh St. SW, Washington, DC 20590.



Don't Risk Your Child's Life!

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Children Must Ride Buckled Up
Adult's Lap Is Not Safe

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DEATHS AGES 1-14	1 000	2 000	3 000	4 000	5 000
HIGHWAY ACCIDENTS*	[Bar extending past 5000]				4466
CANCER	[Bar at 2505]				2505
CONGENITAL MALFORMATIONS	[Bar at 1859]				1859
DROWNING	[Bar at 1700]				1700
FIRES & BURNS	[Bar at 1260]				1260
PNEUMONIA	[Bar at 793]				793

SOURCE: Accident Facts, 1978 Edition, National Safety Council
*Includes pedestrian and bicycle fatalities

The Highway Epidemic

It is not generally known that traffic accidents are the leading cause of death in childhood once the critical early period has passed, claiming more lives than any disease or other accidental cause.

During the last decade 10,000 children under the age of five were killed as passengers in automobiles. Of the hundreds of thousands injured, many remain permanently disabled, physically and/or mentally.

So many of these tragedies could be prevented if only parents took simple precautions.

Safety Belts Save Lives

Riding "buckled up" greatly reduces the risk of injury and death by preventing car occupants from being flung, with tremendous force, against the windshield, instrument panel, or other parts of the vehicle interior — or out into the roadway.

Contrary to what some people believe, it is far safer to stay inside the vehicle than to be thrown out of it. Even in the event of fire or submersion in water, belts will help reduce the severity of injuries and increase your chances of remaining conscious, thereby making escape more likely.

Being a safe driver yourself is no excuse for you or your children to ride unprotected. Crashes are all too often caused by the carelessness or recklessness of others.

Small Children Need Special Protection

Safety belts do not provide the best protection for the very young. In a severe crash a lap belt could put too much pressure on a small child's hips and abdomen. It is therefore recommended that infants and small children be secured in special safety devices designed to distribute crash forces over a large area of the body.

While every effort should be made to provide such special devices, even small children, once they can sit up unsupported, are far safer buckled into regular seat belts than riding "loose."

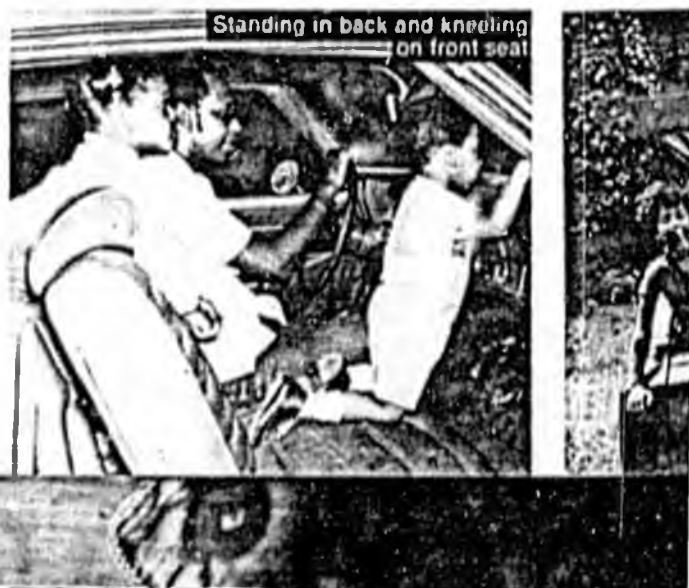
Adult's Arms Are Not Safe

Ordinarily, a parent's arms are a very secure place for a child, but inside a car it is the most hazardous. In a crash your body would crush the child against the dashboard and windshield. Even if you are wearing a lap and shoulder belt yourself, the child would be torn from your grasp by the violent forces of a collision.

Never put a belt around you and a child held on your lap. In an accident your own weight, greatly increased by crash forces, would press the belt deeply into the child's body; this could cause serious or even fatal injuries.

Beginning with the very first car ride — the drive home from the hospital — the baby should be secured in a crash-tested safety device.

These Children Are in Danger



Old-Type Car Seats Are Inadequate

Children's car seats have been in use for more than 40 years. They served a limited safety purpose, providing support and confinement—features helpful in preventing interference with the driver and providing some measure of protection in case the car swerved or stopped suddenly.

The seats also raised the child up to window height for a better view, helping to prevent boredom which can lead to disruptive behavior.

Today's seats do all that and a great deal more: They are designed to prevent serious injuries in case the car is involved in a crash.

New Government Safety Standard In Effect

Although a safety standard for children's car seats has been in force since 1971, the requirements were not nearly strict enough. Many devices on the market during those years did not offer the level of protection your child needs.

The U.S. Department of Transportation has recently upgraded the standard. New regulations went into effect on January 1, 1981. All devices manufactured since that date have to stand up to actual crash tests (known as "dynamic" tests), something the 1971 standard did not require.

While some seats made before 1981 may not be safe, many were crash tested and therefore offer a good level of protection. Information on these older devices is obtainable by writing to the address on the back panel. (Please include a stamped, self-addressed envelope.)

Which Is the Safest Restraint?

The answer is simple: The one you will use properly every time. The life-saving value of even the "safest" seat will be reduced or could be entirely defeated if manufacturer's instructions are not followed to the letter.

A seat secured at the top provides an extra margin of safety. But unless that top anchor strap is correctly installed, your child will be safer in a seat engineered to stay in place without the additional support a top anchor strap provides. (If a seat is sold with a top anchor strap, use of that strap is essential. Do not believe sales persons who tell you otherwise.)

Shopping Guidelines

Remember that a harness, consisting of shoulder straps, a lap belt, and crotch strap is all that is needed for crash protection. Any additional features, while possibly making it easier to use the seat, do not necessarily improve safety performance. Arm rests serve no protective function whatsoever.

Shop carefully. Consider your child's comfort. Make certain that the seat will fit in your car, lap belts are long enough for securing it, and the buckle is not too bulky to slide through the slots. Read the instruction book before you buy. All too often top anchor straps are not shown in store displays so you may not know a seat needs one until you get it home.

In cargo area of station wagon



Using inadequate car seat



The Protection of Older Children

When a child has outgrown a safety restraint (usually by age four or when 40 pounds has been reached), a lap belt is required for protection. The belt must be correctly secured below the abdomen and adjusted for a very snug fit.

In the front seat a shoulder belt should be used in addition to the lap belt, but only if the child is tall enough so the shoulder belt goes across the child's chest — not the neck or face. If the shoulder belt does not fit, place it behind the child, using the lap belt alone. Raising the child up on a special booster seat may help position the shoulder belt correctly (see illustration on right).

A booster seat is not safe used with only a lap belt; support for the upper body is essential. Boosters are sold with their own harnesses for use in the back seat (see reverse side of folder).

How Do Children Like Riding Restrained?

A child used to a safety device from an early age will continue to accept restriction as a matter of course, with only occasional protests. A child who has never been confined may at first resist riding buckled up. A great deal will depend on the parents' determination.

On long trips make frequent stops to give children the chance to romp and let off energy. A baby should be taken out of the carrier and laid flat to allow stretching and kicking. Be sure to pull into a rest area or well off the highway.

Car Booster Seat

A specially designed booster seat helps position the shoulder belt across the child's chest.

Warning: Do not use a booster seat with only a lap belt. Doing so could result in serious injury to the child.



More Tips on Safe Car Travel

- Parents should buckle up for three reasons: 1) to set a good example for their children; 2) for their own protection; and 3) for the protection of their children: unrestrained occupants could injure others who are belted in.
- The back seat is safer than the front. The center back of the vehicle is safer than the sides.
- Two children should not be strapped into one belt. Doing so makes a proper fit impossible.
- A shoulder belt must not be tucked under the arm or be worn without a lap belt by anyone — child or adult.
- A lawn mower, bicycles, luggage or any hard, heavy objects carried unsecured inside the vehicle pose a hazard. The only safe place for cargo is in the trunk or on a roof rack.
- Children should not be allowed to play with pens, pencils, or hard or sharp objects while the car is moving.
- Do not substitute a cushion or household booster for a specially designed car booster seat.
- In some cars the lap portion of the safety belts slides freely through the latch and cannot be locked. Since a child safety device must be firmly secured to the seat of the vehicle, this type of belt requires the use of a special locking clip which is obtainable from the child seat manufacturer.

Riding in open truck



Sitting on adult's lap



Crash-Tested Devices on the Market...

(Required to comply with federal safety standard in effect since January 1, 1981.)

Infant Carriers

Century Infant Love Seat*	Suitable from birth to 20 lbs. (F)
Ford Infant Carrier	Suitable from birth to 20 lbs. (F)
Questor Dyn-O-Mite**	Suitable from birth to 17 lbs. (F)

Toddler Seats

Century Child Love Seat*	18 to 40 lbs; five-point harness. <u>Use of top anchor strap essential.</u> (F)
Ford Tot-Guard	Shield with booster base, secured with lap belt. Ford dealers only. From age 2 up to 50 lbs. (F)

Infant/Toddler Seats

(Convert from rear-facing infant carriers to forward-facing seats for children able to sit up without support.)

Bobby-Mac Champion	Up to 40 lbs; V-shaped harness and snap-on shield. (F)
Deluxe II	Up to 40 lbs; V-shaped harness; shield attached to pivoting frame. (F)
Super	Up to 40 lbs; five-point harness. <u>Requires use of top anchor strap.</u> (B)
Century Products Century 100	Up to 43 lbs; five-point harness. (B)
Century 200	Up to 43 lbs; shoulder straps attached to abdominal pad. (B)
Century 300	Up to 43 lbs; five-point harness and spring-loaded arm rest. (B)
Cosco/Peterson Safe & Easy #313	Up to 40 lbs; five-point harness. (B)
Safe-T-Seat #78**	Up to 40 lbs; five-point harness. (B)
Safe-T-Shield #81	Up to 40 lbs; uses only shield. (F)
Safe & Snug	Up to 40 lbs; harness straps joined to spring-loaded shield. (B)

International Astroseat 9100	Up to 42 lbs; five-point harness. (B)
Kantwet Care Seat	Up to 40 lbs; five-point harness. (B)
One-Step □	Up to 43 lbs; shoulder straps joined to spring-loaded shield. (B)
Kolcraft Hi-Rider**	Up to 40 lbs; five-point harness and optional snap-on shield. (F)
Redi-Rider	Identical seat without shield.
Strobee Wee Care #597 Δ	Up to 40 lbs; five-point harness. <u>Use of top anchor strap essential.</u> (B)
Wee Care #599	Up to 40 lbs; five-point harness and spring-loaded arm rest. <u>Use of top anchor strap essential.</u> (B)
Welsh Co. Travel Tot**	Up to 43 lbs; five-point harness. (B)

Booster Seats

Century Safe-T-Rider* #4760 & #4780	Although booster seats can be used from an earlier age, they are recommended for use after a regular car seat has been outgrown. Must be used with harness — never with lap belt alone. Do not use after mid-point of child's head reaches top of seat back.
Kolcraft Tot-Rider	

*Formerly distributed by General Motors

**Seats manufactured before 1981 not recommended

†Safe-T-Rider booster seats manufactured before Sept. 1980 have defective harnesses. Contact Century for free replacement.

††Safe-T-Seats manufactured before 1980 require use of a top anchor strap.

□ One-Step seats manufactured before 1982 require use of top anchor strap.

Δ Wee Care Seats #597 manufactured before April 1980 are not recommended for use in rear-facing infant position.

(F) — Lap belt is secured around front of seat (see diagram).

(B) — Lap belt threads through the frame in back of seat.

Note: We would be happy to answer questions regarding earlier model seats not listed here, but please enclose a stamped, self-addressed envelope with your letter. Write: PAS, P.O. Box 208, Rye, NY 10580

...and How to Use Them

Infant Carrier



Conventional Car Seat



Protective Shield



Car Booster Seat



Many devices combine the design features shown here.

Infant Carriers, suitable from birth up to 17 or 20 pounds, are designed to face rearward (never forward). The infant rides in a semi-reclining position, secured with a harness. The carrier is strapped to the seat of the vehicle with a lap belt.

Rolled up receiving blankets placed around the baby's head and shoulders will provide support during the early weeks of life.

Conventional Car Seats are suitable for children who are able to sit up by themselves. The child is held in by a harness; the seat is anchored to the vehicle with a lap belt.

Some devices require the lap belt to be threaded through the back where it can remain permanently buckled. Others must be anchored with the belt around the front as shown in the illustration. Whichever way the seat secures, the lap belt must be pulled tight.

A few seats need a top anchor strap to prevent them pitching forward in a crash. If the device is to be used in the front seat of the car, the strap secures the lap belt in the seat behind. This does, however, make one set of rear belts unusable.

If a top anchor device will be used in the back seat (this is the safer location), permanent installation of a bracket is necessary.

In a sedan this involves drilling a hole through solid metal in the rear window ledge. In a station wagon or hatchback, the anchor plate has to be installed way back in the cargo space. Follow manufacturer's instructions. Note that anchor brackets for installation in a second car are obtainable from the child restraint manufacturer.

A strap fastened to the rear of the seat back or straight down to the floor will not hold the seat upright in a severe crash. (Some late model GM cars and Toyotas have predrilled anchorage points; see Car Owner's Manual.)

Protective Shield distributes crash forces by cushioning the child's body on a padded surface. Two of these seats require no harness. In some cases a partial shield is used in combination with a harness (see chart).

Booster Seats are particularly suitable for children who have outgrown conventional car seats. They are intended to be used with the harness that is sold as part of the system or with the vehicle's combination lap/shoulder belt (see "Protection of the Older Child" on the reverse side of this folder).

The booster seat harness requires permanent installation similar to top anchor straps. Booster seats must never be used with only a lap belt.

CHILD PASSENGER SAFETY ASSOCIATION

Elements Desirable for Legislation

Every driver (parent, car pool driver, people from out of state. It is not the responsibility of the car rental agency, or taxicab driver, bus driver, etc.).

Transporting a child.

Under age five.

Any child unable to sit unaided shall be properly restrained in a child restraint system which meets the federally approved standards prescribed in 49 CFR 571.213. (This covers infants without specifying a specific age or level of development or weight. This is to make it easy for the enforcing officers to make that judgment).

Child must be properly secured according to the manufacturer's recommendation.

Any child who is able to sit unaided but under the age of five and transported in the front seat must be properly restrained in a child restraint system which meets the federal standards prescribed in 49 CFR 571.213.

Any child who is able to sit unaided but under the age of five transported in the rear seat must be properly restrained in a child restraint system which meets the federal standards prescribed in 49 CFR 571.213.

Children shall be carried only in seats intended for passengers.

Within the State of Alaska (statute not limited just to streets, highways, roads, byways, but off-road use as well, which is even more dangerous).

Infractions do not constitute contributory negligence. Infractions are not admissible as evidence.

Seats must be properly installed.

People violating this statute are guilty of an infraction and assessed two points per occurrence (not per child).

Violators of this section shall be fined not to exceed \$60. A person found in violation of this section may, instead of paying the fine, submit proof of purchase subsequent to the violation or rental for not less than one year of an approved infant or child restraint system to the court. This shall be acceptable only for the first violation and if the acquisition of the restraint was subsequent to the violation. This option applies only to the first offense.

Exemptions to this statute include mass transit vehicles, school bus, taxi.

Children unable to use safety belts or child passenger restraints because of physical or mental handicaps. In this instance they shall be secured in their own specially designed apparatus.

Motorcycle, moped, other vehicles not required to be equipped with seat belts. Transport in a vehicle in which all seat belts are occupied but extra passengers are being carried. Emergency vehicles during an emergency.

DOCUMENTATION OF EFFECTIVENESS

TENNESSEE

User Rates for Children Under Four

1977 pre-law	9%
1978 (with law)	20%
1980 (with law)	29%

Deaths

pre-law	20-25/year
1980	14
1981	10 (only 1 fatality was in a child who was in an approved child restraint system)

Health Cost Containment

R. visit for car accident	\$50
hospitalization	\$7-10,000
Funeral	\$2,000

MASSACHUSETTS

Usage of Seat Restraints	Education Only (1979)	Mandatory Use Laws (1980)
Age 1 year	41%	70%
2 years	22%	49%
3 years	12%	40%

Estimated savings to the family

\$1,100-\$55,000 per injury

TABLE 1

AVERAGE STATE COSTS PER HIGHWAY FATALITY AND INJURY

<u>COST COMPONENT</u>	<u>FATALITY</u>	<u>PERMANENT & TOTAL DISABILITY</u>	<u>PARTIAL DISABILITY</u>	<u>NO PERMANENT DISABILITY</u>
Lost State Taxes	\$11,000 ^(A)	\$4500 ^(B)	\$900 ^(C)	740 ^(D)
Police Agencies	160	70	70	20
Legal and Court Costs	400	290	200	50
Probation Offices	115	115	115	115
Coroners/Medical Examiners	160	-	-	-
Motor Vehicle Departments	15	15	15	5
Hospital/Medical Costs (Borne by State)	35	900	350	60
Public Welfare Overhead	435	435	435	435
Rehabilitation	-	485	240	-
TOTAL	\$12,340	\$6,810	\$2,325	\$825

(A) Based on loss of 10 years income

(B) Based on loss of 4 years income

(C) Based on loss of 10 months income

(D) Based on loss of 45 days income

Sources: 1975 Societal Costs of Motor Vehicle Accidents, National Highway Traffic Safety Administration (DOT-HT-802-119), 1976.

Wuerdemann, H.G., Joksch, H.C. National Indirect Costs of Motor Vehicle Accidents (Vol. 1) Federal Highway Administration (DOT-FH-11-7773), 1973.

Joseph C. March, et al., Financial Consequences of Serious Injury, Highway Safety Research Institute, University of Michigan (UM-HSRI-77-27), 1977.

What All Adults Can Do To Protect Children In Motor Vehicles Use Restraints

The Issue

More than 1,400 children under 13 years old die and thousands more are injured each year in the United States as motor vehicle passengers. Infants under one year of age have an even higher death rate than older children. The risk of death is particularly high for children under one year of life. In spite of these facts, children riding in automobiles are seldom restrained, and auto manufacturers do not design and construct even their newest vehicles to provide maximum protection for children in the event of a crash.

More than 90 percent of children in the United States currently ride in motor vehicles without the protection of car seat belts or child restraint systems. Even more startling, some of these children are traveling in cars in which adult drivers and passengers are wearing belts — that is, children are traveling with adults who apparently know the value of restraints but do not provide this protection to children.

Many people carry children on their laps in cars, not realizing that an unrestrained adult will become, in a forward crash, a crushing force against the child's body.

Efforts to increase child restraint use through exhortation, education, legislative action, and child restraint use, and incentives such as the provision of restraint systems at no cost or reduced cost have resulted in small increases in use levels. Yet the vast majority of children in cars are still unrestrained.

This special publication looks at the national public health tragedy of children in crashes and reviews some available countermeasures, including the use of child restraint systems. The first articles describe the special problems for children in motor vehicles — lap travel, hazards in the passenger compartment, etc. — and show what happens to unrestrained children in a crash. Then the various ways children can be better protected in motor vehicles are examined. State laws and federal regulations concerning child restraints are described. A discussion of the benefits, in addition to crash protection, of using child restraints is included. And the elements of a model child restraint law are set forth.

What All Adults Can Do To Protect Children In Motor Vehicles: Use Restraints

- Place children who cannot sit up unassisted in specially designed carriers and be sure the carrier is tightly secured by a seat belt. The child should be snugly fastened in the carrier's harness system.

Use specially designed restraint devices if possible. If you have to use a regular lap belt for a child, pull it tightly across the top of the child's hips. Do not strap two children into one belt, and do not strap a child into a belt with an adult. Tragically, some of the child safety literature suggest that small children should not wear seat belts at all if a special child restraint system is unavailable. But as the best research to date shows, children ages 1-4 are substantially better off with car seat belts than without them. *No child should be unrestrained in a motor vehicle under any circumstances.*

- Put children in restraints in the back seat where they are least likely to be thrown against hostile objects in a crash. The middle of the back seat is the best location.
- Do not let a child sit on the lap of an adult in a motor vehicle. In a crash, adults (even if they are belted) cannot restrain children by holding on to them. Unbelted adults can crush the child against the car's interior (see page 5).
- Keep children out of station wagon, van and pickup truck cargo areas where they cannot be restrained.
- When buying a child or infant restraint, look for one with a permanent label which says: "This child restraint system conforms to all applicable federal motor vehicle safety standards." Do not use a flimsy, lightweight feeder seat or bed that was designed for household use; these were not intended for cars and do not meet the dynamic testing requirements recently established for child restraints (see page 12).

Child restraint devices come in many different sizes and shapes. Not all restraints fit in all cars, so care should be taken to choose a restraint that fits properly in the car in which it will be used. Information about specific models of infant and child restraints can be obtained from several sources. The Physicians for Automotive Safety (PAS) distributes a brochure, *Don't Risk Your Child's Life*, which provides comparative shopping information about restraints. Single copies can be obtained for 50 cents by writing: PAS, 5 Eye Lane, Rye, NY 10580 (include a self-addressed, stamped envelope). Contact PAS for information about the cost of larger quantities of this brochure. For more general information about child restraints, the National Highway Traffic Safety Administration has another brochure, *Child Restraint Systems for Your Automobile*; up to 50 free copies may be obtained by writing to the agency's Child Restraint Program, Washington, DC 20590. Action for Child Transportation Safety (ACTS) has telephone requests for information and materials available in bulk; to obtain samples, lists and charges for these materials, write: ACTS, P. O. Box 266, Bothell, WA 98011 (include a self-addressed, stamped business envelope).

EXAMPLES OF CHILD RESTRAINT LEGISLATION

CHILD RESTRAINT USAGE

Issue

Efforts to gain State child restraint laws have, with one exception, been unsuccessful. Recent surveys have indicated that a vast majority (approximately 93%) of children less than ten years of age travel without any restraints at all. There is a need for increasing the protection of children in passenger vehicles.

Discussion

Studies indicate that children who are unrestrained in passenger vehicles are more likely to be killed or injured in an accident than those who are restrained. Results of one study provide an estimation that if all children under the age of five years were restrained at the time of an accident, a reduction of deaths by 91 percent and injuries by 78 percent might be expected. Seat belts alone do not provide adequate protection for small children, although they are better than letting a child ride unrestrained.

Many manufacturers are testing and marketing dynamically-tested child restraint devices (CRD). Given the commercial availability of CRD's and the presence of adult safety belt systems as standard automobile equipment, it seems that parents have the opportunity to provide effective occupant safety for their children. Because of the availability of such equipment some professionals have expressed the concern that failure to use such protective devices may constitute a form of child abuse.

On January 1, 1978, Tennessee became the first State to have a law establishing safety requirements for child passengers under four years of age. A public information and education program to encourage the use of child restraint devices began at the same time the law went into effect.

Since the passage of the law does not by itself insure a reduction of deaths and injuries to Tennessee children, the NHTSA and the Tennessee Governor's Highway Safety Program jointly established the Child Passenger Safety Program in Tennessee. The purpose of this program is to publicize the law, to educate the people of the State about the importance of CRDs and to evaluate the effectiveness of the law supported by these efforts. The project began October 1, 1977, and is to continue for a 36 month period.

NHTSA Position

States are encouraged to enact legislation to provide special protection for young children. Since young children are especially vulnerable and since their vulnerability can be reduced only by responsible adult action,

each State is encouraged to enact legislation that will, (1) adopt Department of Transportation performance standards (FMVSS 213) for child-passenger protective devices, (2) encourage proper conformance to manufacturers' instruction on proper usage and, (3) require the use of such devices whenever child-passengers are present in a motor vehicle.

At the present time NHTSA does not have a model law addressing child restraints. However, attached are examples of such legislation developed in the States of Washington and Tennessee.

ALTERNATIVE DRAFTS OF A BILL REQUIRING THAT
CHILDREN UNDER THE AGE OF FIVE BE PROPERLY
SECURED IN CHILD PASSENGER RESTRAINT SYSTEMS
WHEN RIDING IN CERTAIN MOTOR VEHICLES

[NOTE: Bracketed material which is not adjacent to other bracketed material may be included or deleted. When there is a series of bracketed phrases, only one of them should be used.]

AN ACT Relating to the regulation of motor vehicles; adding a new section to chapter 46.61 RCW.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. Section 1. There is added to chapter 46.61 RCW a new section to read as follows:

(FIRST ALTERNATIVE)

(1) Every parent or legal guardian of a child under five years of age, when operating (anywhere in the state) his own motor vehicle registered under the provisions of RCW 46.16 in which such child is a passenger, shall have such child properly secured in a child passenger restraint system which is of a type and which is installed in a manner approved by the state commission on equipment. This subsection does not apply to the operation of authorized emergency vehicles in emergency situations.

(2) The state commission on equipment shall adopt standards for the performance, design and installation of passenger restraint systems for children under five years of age and shall approve those systems currently meeting its standards. Approved systems must provide substantial protection for passengers under five years of age from injuries from vehicle crashes or sudden stops, yet be of moderate cost to the public.

(3) The following methods of restraining child passengers do not comply with the requirements of this section:

(a) holding the child in the arms or lap of another passenger,

(b) use of a Type I seat belt assembly, as defined in 49 CFR § 571.209 as of January 1, 1978, by a child under forty pounds or four years of age, or

(c) use of a Type 2 seat belt assembly, as defined in 49 CFR § 571.209 as of January 1, 1978, by a child under fifty-five pounds or four and one-half feet in height.

[(4) Parental immunity from suits by minor children does not extend to actions based on the failure to comply with this section.]

(5) This act shall take effect on

(SECOND ALTERNATIVE)

(1) Every parent or legal guardian of a child under five years of age, when operating [anywhere in the state] any [motor vehicle] [motor vehicle other than] [passenger car] registered under the provisions of RCW 46.16 in which such child is a passenger, shall have such child properly secured in a child passenger restraint system which is of a type and which is installed in a manner approved by the state commission on equipment.

(Here follow subsection (2), (3), (4) and (5) as they appear in the first alternative.)

(THIRD ALTERNATIVE)

(1) Every person, when operating [anywhere in the state] a [motor vehicle] [motor vehicle other than] [passenger car] owned by him and registered under the provisions of RCW 46.16 in

which a child under five years of age is a passenger, shall have such child properly secured in a child passenger restraint system which is of a type and which is installed in a manner approved by the state commission on equipment.

(Here follow subsections (2), (3), (4) and (5) as they appear in the first alternative.)

(FOURTH ALTERNATIVE)

(1) Every person, when operating [anywhere in the state] a [motor vehicle] [motor vehicle other than ...,] [passenger car] registered under the provisions of RCW 46.16 in which a child under five years of age is a passenger, shall have such child properly secured in a child passenger restraint system which is of a type and which is installed in a manner approved by the state commission on equipment.

(Here follow subsection (2), (3), (4) and (5) as they appear in the first alternative.)

(FIFTH ALTERNATIVE)

(1) Every parent or legal guardian of a child under five years of age is responsible for such child's being properly secured in a child passenger restraint system which is of a type and which is installed in a manner approved by the state commission on equipment whenever such child is a passenger in a motor vehicle [operated anywhere in the state/and] registered under the provisions of RCW 46.16 other than an authorized emergency vehicle, auto stage, municipal transit vehicle, other for-hire vehicle, school bus, or private carrier bus.

(Here follow subsections (2), (3), (4) and (5) as they appear in the first alternative.)

(SIXTH ALTERNATIVE)

(This section would most properly be placed in Chapter 46.37 RCW.)

(1) The owner of a motor vehicle registered under the provisions of RCW 46.16 other than ... is responsible for such vehicle being equipped with a child passenger restraint system which is of a type and which is installed in a manner approved by the state commission on equipment whenever the owner has reason to know that a child under five years of age is a passenger in such vehicle [and that such vehicle is being operated anywhere in the state].

(Here follow subsections (2), (4) and (5) as they appear in the first alternative.)

SENATE BILL NO. 1792

by

Henry

AN ACT to require the use of approved child restraint systems for children within certain age and weight limits while they are riding as passengers in motor vehicles on the highways; to regulate the providing, in this state, of safety belts and child restraint systems and the use thereof; to provide for certain exemptions; to place certain responsibilities on drivers transporting children in motor vehicles; to provide for a presumption of negligence; and to provide a penalty for violation of the act.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. The short title of this act shall be known as the "Tennessee Child Passenger Protection Act of 1976."

SECTION 2. DEFINITIONS. As used in this act, unless the context otherwise requires:

(a) "Child restraint system" means any device manufactured to transport children of forty (40) pounds or less in a motor vehicle and which conforms to all applicable federal motor vehicle safety standards.

(b) "Commissioner" means the Commissioner of Safety of this state.

(c) "Department" means the Department of Safety of this state.

(d) "Driver" means every person who drives or is in actual physical control of a motor vehicle.

(e) "Highway" means the entire width between the boundary lines of every way publicly maintained when any part thereof is open to the use of the public for purpose of vehicular traffic.

(f) "Motor vehicle" means any vehicle driven or drawn by mechanical power manufactured primarily for use on the public streets, roads, and highways, except any vehicle operated exclusively on a rail or rails.

(g) "Owner" means a person other than a lienholder having the property in or title to a vehicle, and includes a person entitled to the use and possession of a vehicle subject to a security interest in another person but excludes a lessee under a lease not intended as security.

(h) "Safety belt" means a lap belt, shoulder belt, any any other belt or combination of belts, except those which are physically a part of a child restraint device, installed in motor vehicles to restrain drivers and passengers. It also includes anchorages, buckles, and all other equipment

directly related to operation of safety belts.

(1) "Seating position" means any vehicle interior space intended by the vehicle manufacturer to provide seating accomodation while the vehicle is in motion.

SECTION 3. APPLICATION. The provisions of this act shall apply to privately owned non-commercial motor vehicles operated upon any highway of this state, and shall apply to all motor vehicles used for the transportation on any such highway of children less than four (4) years of age, such as vehicles owned or used by kindergartens, child day care centers, and similar agencies or institutions.

SECTION 4. CHILD RESTRAINT SYSTEM REQUIREMENTS. (a) No person shall install, distribute, have for sale, offer for sale, or sell any safety belt or child restraint system for use in motor vehicles unless it conforms to all applicable federal motor vehicle safety standards. (b) Every owner shall maintain safety belts required by this section in proper condition and in a manner that enables them to be readily used. (c) Every child less than four (4) years of age and forty (40) pounds or less in weight being

transported in a motor vehicle subject to the requirements of this act shall be provided with a child restraint system suitable for the child's size, except as herein provided. (d) Every child less than four (4) years of age and forty (40) pounds or less in weight being transported in a motor vehicle subject to the requirements of this act shall be properly fastened into a child restraint system appropriate for the child's size where a seating position is available which is equipped with a safety belt or other means to secure the device, according to the manufacturer's instructions.

SECTION 5. RESPONSIBILITY OF THE DRIVER FOR CHILD RESTRAINT USE BY CHILDREN. It is the responsibility of the driver transporting children subject to the requirements of this act to ensure that such children are provided with and properly use a child restraint system.

SECTION 6. EXEMPTIONS. The Commissioner may exempt a class of children from Section 4 of this act if he determines and publishes his reasons therefore that use by that class of children of a child restraint system would be impractical by reason of physical unfitness or other medical problem or body size. The driver transporting any child exempted from the requirements of this act

shall carry or have in the motor vehicle a certificate issued by the Department identifying each child's exemption and the reason therefore.

SECTION 7. EFFECT OF NONUSE IN CIVIL LITIGATION. Failure of the driver to ensure that a child restraint system is provided and properly used by every child subject to the requirements of this act shall create a presumption of negligence on the part of the driver.

SECTION 8. PENALTIES. (a) Violation of this act is a misdemeanor, punishable upon conviction thereof by a fine of not less than ten dollars (\$10) nor more than fifty dollars (\$50). (b) Penalties shall not be applied to out-of-state residents whose state of residence does not have a similar law, it being the primary objective of this law to promote safety. However, enforcement officers shall issue warnings and advisories.

SECTION 9. EFFECTIVE DATE. This act shall take effect on July 1, 1976, the public welfare requiring it.



FOR: MIKE BALDWIN, NHTSA

FROM: BOB EVANS, NTSBHQ

National Transportation Safety Board

Washington, D.C. 20594

Safety Information

FOR IMMEDIATE RELEASE: December 7, 1982

SAFETY BOARD URGES MANDATORY LAWS
IN CHILD SAFETY SEAT USE

SB 82-79/3654

The National Transportation Safety Board today urged the Governors and Governors-elect in 31 states, as well as the Mayor of the District of Columbia, to enact legislation requiring the mandatory use of child safety seats for motor vehicle crash protection. Patricia Goldman, Vice Chairman of the Safety Board stated that the Board's action resulted from its findings to date in motor vehicle accident investigations involving young children, as well as statistics demonstrating the effectiveness of child passenger safety programs in those states which have them.

Vice Chairman Goldman, noting that motor vehicle accidents are our nation's leading killer andcrippler of young children, stated that mandatory use of safety seats is essential "in order to reduce needless deaths and disfigurement of innocent children." More than 1,300 children were killed over the last two years, and over 10,000 seriously injured or permanently disabled during the same two-year period. Goldman stated that these statistics "are particularly tragic when you consider that an estimated 90 percent of the fatalities and a great majority of the injuries could have been prevented by the proper use of safety seats."

The Board's recommendation letters urged Governors in those states that do not presently have mandatory child passenger protection laws on the books, to "include in your 1983 legislative program, legislation to require use of child safety seats from infancy through age 4 to reduce the likelihood of death, disability or disfigurement in motor vehicle crashes."

A growing number of states have found that just as state health laws are appropriate to require immunization of children against life-threatening and crippling diseases, young children must be "immunized" by legislation against the consequences of crashes -- which kill and cripple more children in this country than any major disease. To date, 23 states have enacted child passenger safety laws and 19 of those laws include provisions requiring use of child safety seats by the general public.

- note -

**NATIONAL TRANSPORTATION SAFETY BOARD
WASHINGTON, D.C.**

ISSUED: December 7, 1982

Forwarded to:

Honorable Bill Sheffield
Governor-Elect of Alaska
Transition Office
Plaza 201 East Third Avenue
Anchorage, Alaska 99501

SAFETY RECOMMENDATION(S)

H-82-59 and -60

The National Transportation Safety Board recommends that you include in your 1983 legislative program a requirement for the mandatory use of child safety seats for the protection of young children riding in motor vehicles and that you adopt a Statewide child passenger safety program. The Safety Board believes, as a result of its findings in accident investigations and its review of the experience of States which have enacted such legislation and undertaken such a program, that these measures can be used effectively to bring about a significant reduction in deaths and injuries to young children involved in motor vehicle accidents.

Motor vehicle accidents are the leading killer andcrippler of children in this country. Children from infancy through age 4 are especially vulnerable to death, disability, and disfigurement, even in minor crashes. In the last 2 years, infants and toddlers through age 4 who were riding in motor vehicles were killed in crashes at a rate of 1 every 13 hours. More than 1,300 were killed during these 2 years, and over 10,000 were seriously injured or permanently disabled. The most tragic aspect of these losses is that they are needless; an estimated 90 percent of the fatalities and the great majority of the injuries could have been prevented by the proper use of child safety seats.

As part of a study of child motor vehicle passenger protection, the Safety Board is conducting a concerted program of in-depth investigations of crashes involving children from infancy through age 4. Enclosed for your information are brief summaries of three accidents. These accidents illustrate crash risks to children unprotected by child safety seats, including the risk of ejection, the danger to children riding in the laps of adults and, in one case, the dramatic difference in crash consequences for two children in the same vehicle, one protected by a child safety seat and one unrestrained. We also are investigating four other crashes in which infants between the ages of 3 weeks and 1 year, who were protected by child safety seats, escaped unharmed (or in one case, with minor injury) when adult occupants in the same vehicle were killed or seriously injured. Other investigations in progress include cases in which young children who were unprotected by child safety seats received facial or other injuries in minor accidents where other restrained or unrestrained vehicle occupants were uninjured.

3654

Motor vehicle accidents are now being recognized as a major public health problem and a proper subject of public health policy. A growing number of States have found that just as State health laws are appropriate to require immunization of children against life-threatening and crippling diseases, young children must be "immunized" by legislation against the consequences of crashes--which kill and cripple more children in this country than any major disease. To date, 23 States have enacted child passenger safety laws, and in 19 of these States the laws include provisions requiring use of child safety seats by the general public. While these laws vary to some extent from State to State, they are consistent in their basic philosophy that new and more effective public programs are needed to deal with this serious safety problem.

The best example to illustrate what can be achieved by such a program is the experience of Tennessee, the first State to undertake a broad-scale child passenger safety program including a law requiring the use of child safety seats. The results now being reported are impressive: since Tennessee began implementing its program in 1978, child safety seat usage rates have tripled and crash fatalities of children in the age group affected by the law have been cut by more than 50 percent. Before the 1977 law, fatalities of child passengers averaged 20 to 25 annually. That number was reduced to 10 in 1981, and the number of fatalities reported for the first 9 months of 1982 was 5. The experience reported in Tennessee indicates that this kind of program can significantly reduce child passenger fatalities in crashes. A brief description of some of the activities undertaken in Tennessee, which have been found valuable there and elsewhere, is enclosed for your information.

The Safety Board believes that in addition to enacting a law requiring use of child safety seats, each State should develop a program of activities to encourage compliance and enhance the effectiveness of the law. These activities should include visible and aggressive enforcement; dissemination to the public of information to assure that the requirements are fully understood; education of the public (both adults and children) to explain the problem and the need for crash protection, as well as to emphasize the importance of proper use of child safety seats; sufficient public and/or private child safety seat loan programs or similar activities to assure the availability of seats in the community and to meet the special needs of low-income families (families with two or more children in the affected age group), who would otherwise be unable to comply with the law; and ongoing evaluation of such activities to analyze and measure the results and identify the need for action to further improve child passenger safety policies and programs.

Given the magnitude of the child passenger safety problem and the number of fatalities and injuries that are being incurred by children not protected by child safety seats in crashes, the Safety Board strongly encourages and supports the adoption of public policies and programs which have been demonstrated to be effective in reducing these tragic losses.

Therefore, the National Transportation Safety Board recommends that the Governor-elect of Alaska, as you prepare for your transition into office:

include in your 1983 legislative program, legislation to require use of child safety seats for child passengers from infancy through age 4 to reduce the likelihood of death, disability, or disfigurement in motor vehicle crashes. (Class II, Priority Action) (H-82-59)

Develop a Statewide child passenger safety program including aggressive enforcement of laws requiring use of child safety seats, public information and education programs on their need and proper use, child safety seat loan or similar programs, and ongoing evaluation of such activities. (Class II, Priority Action) (H-82-60)

The National Transportation Safety Board is an independent Federal agency with the statutory responsibility "... to promote transportation safety by conducting independent accident investigations and by formulating safety improvement recommendations." (P.L. 93-633). The Safety Board is vitally interested in any actions taken as a result of its safety recommendations. Therefore, we would appreciate a response from you regarding action taken or contemplated with respect to the recommendations in this letter.

BURNETT, Chairman, GOLDMAN, Vice Chairman, and McADAMS, BURSLEY, and ENGEN, Members, concurred in these recommendations.


By **Jim Burnett**
Chairman

Enclosures: 1. NTSB Investigations
 2. Program in Tennessee

**NATIONAL TRANSPORTATION SAFETY BOARD
WASHINGTON, D.C. 20594**

**Investigations of Accidents Resulting in Death
To Unrestrained Children From Infancy through Age Four**

NTSB Investigation No. NYC82HCR02

About 1 p.m. on June 28, 1982, a Volkswagen sedan that was traveling on Columbia Street in Reusselner, New York, began a left turn into the parking lot of a restaurant and was struck on the right side by a motorcycle. The Volkswagen was occupied by two children in the rear seat, both about 2 years old, and their mothers in the front. One mother (the driver) was uninjured, and the other received a small cut on the right arm. One child, who was riding in a child safety seat, received minor lacerations from flying glass. The child riding next to her who was not protected by a child safety seat died of multiple injuries including a broken neck. The investigation resulted in a preliminary finding that if that child also had been protected by a child safety seat, he probably also would have survived.

NTSB Investigation No. NYC82HCR03

About 12:30 a.m. on July 26, 1982, near Madlox, Maryland, a Chevrolet sedan was traveling on State Route 238 when the vehicle failed to negotiate a curve and went off the side of the road. The vehicle sideswiped a utility pole, went down a shallow embankment and overturned in a soybean field. The vehicle was occupied by a young married couple and their 2-year old daughter, who were returning home after a visit to the child's grandmother. The parents, although not restrained by seatbelts, received only minor injuries in the accident and were not hospitalized. The 2-year-old girl, however, who was sleeping in the rear seat and was not protected by a child safety seat, was thrown from the vehicle and died of massive skull injuries. The investigation resulted in a preliminary finding that the child probably would have survived if she had been protected by proper use of a child safety seat.

NTSB Investigation No. NYC82HCR05

About 5:15 p.m. on July 27, 1982, a Dodge sedan traveling on State Route 417 near Addison, New York, crossed the yellow centerline and collided head-on with a Ford sedan. The Dodge was occupied by three adults and two infants, all of whom were in the front seat unrestrained by either seatbelts or child safety seats. The infants, ages 5 months and 15 months, were each riding in the lap of one of their parents. They were crushed into the dashboard by the weight of their parents' bodies and died of massive skull injuries. The parents and the driver of the Dodge survived with minor injuries. The investigation resulted in a preliminary finding that the two infants probably also would have survived if they had been protected by proper use of child safety seats.

Examples of Child Passenger Safety Activities in Tennessee

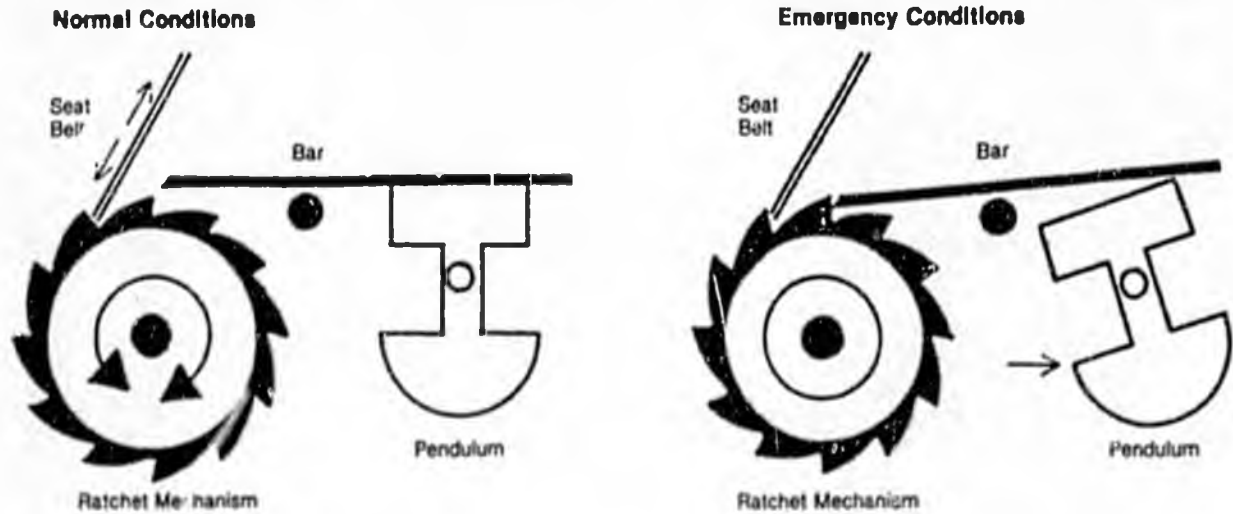
When Tennessee enacted a law in 1977 requiring the use of child safety seats, a variety of means were used to encourage compliance with the law. ^{1/} The University of Tennessee was awarded a grant to develop and implement a 3-year program of public information, education, and evaluation which included use of 750,000 brochures, highway billboards, television and radio public service announcements, articles and features in some 700 newspapers, in-service training programs for police, seed dollars for child safety seat loan programs, and periodic statewide surveys to monitor usage rates.

Innovative, positive enforcement initiatives by the Tennessee Department of Safety have included the placement of child safety seats in all 800 trooper cruisers to be loaned to ticketed violators of the law with the understanding that if a parent provides proof of purchase of a child safety seat, the trooper will petition the court to suspend the fine and court costs. This innovative enforcement program creates a positive public perception of the officer issuing a citation and is considered one of the most effective public relations programs conducted by the Tennessee Highway Patrol. In addition, by 1982 child safety seat loan programs had been established in 75 County Health Departments.

As a result of Tennessee's successful experience, the same or similar kinds of activities are being undertaken by 22 other States to require or encourage proper protection for young children against death and injury in crashes.

^{1/} Dr. Robert S. Sanders, M.D., "Legislative Approach to Auto Safety: the Tennessee Experience," in Ross Roundtable, Ross Laboratories, Columbus, Ohio, January 1982.

The Safety Belt: How It Works



Under normal conditions, the pendulum and bar are in their rest positions. The reel, which holds the belt, is free to rotate. As the occupant moves forward the belt moves unrestrained with the occupant.

Under emergency conditions, such as in a collision, the pendulum moves forward under the force of the impact causing the bar to engage the ratchet. The reel and seat belt now lock in place and the occupant is held firmly in place.



Infant Carriers

Up until they weigh about twenty pounds, newborns require a carrier which is a tub-shaped bed that cradles the child in a semi-erect position. The infant is held securely in the carrier by means of a harness. Infant carriers are designed to face the rear of the car and must be secured to the seat by the adult belts already in the car. Accident data shows that the rear seat is generally safer than the front seat. However, many parents alone in the car with their baby but uncomfortable placing an infant in the rear seat facing to the rear where they cannot see the child. Since the rear-facing infant carrier is designed to protect the baby's head from the dashboard and windshield, the front seat is a suitable alternative. It is most important, however, that infant carriers never be used facing the front of the car. For a very small infant, it may be more comfortable to roll up small blankets or towels and place them inside the carrier at the sides of the infant's body.

Types of Safety Seats

Child safety seats come in several shapes and sizes because different stages of a small child's development require different types of protection. So parents have several considerations to keep in mind when purchasing a safety seat. There is no "best" seat. The important thing is to find the seat that best suits you, your child, and your car. Be sure that the safety seat you choose will fit the seat belts in your car's. Insist on the right to return the seat if it does not fit.

Booster Seats



A new type of seat currently being marketed is the automobile booster seat. Booster seats are designed primarily to fill the gap between when a child outgrows the standard child safety seat and when the child can use the adult belt only and still see out the window. Some models can also be used for smaller children, as small as twenty pounds, and all can be used for children up to about sixty-five pounds. It is extremely important to note that booster seats should only be used with proper torso support, either by using the lap and shoulder belt, or for maximum safety, by using the body harness supplied with the booster seat in the rear seat. The body harness is secured in the same manner as a standard top tether strap. A booster seat without proper torso support is less effective than using the adult lap belt without the booster.

Convertible Models

Some models of infant carriers convert to child seats so that they can be used from birth until the child weighs about forty pounds. For economic reasons, a convertible model may be a sound choice, since there is no need to buy a car seat when the child outgrows the infant mode.



Attached to Rear Seat Belt



Attached to Rear Seat Belt



Attached to Rear Window Shelf

If you decide to buy a convertible model, there are several points to consider. Some infant seats that convert to child seats require a top tether strap that must be secured to the rear seat belt if used in the front seat (see diagram). To use this type of seat in the rear seat requires that a hole be drilled in the rear window shelf, or cargo area of station wagon or hatchback. Correctly used tether straps add extra stability in a crash and less head movement in a crash. However, if you do not intend to properly anchor the tether strap every time you place the seat in the car, do not buy this type of seat. There are convertible models that do not require a tether strap.

Toddler Seats

For children who weigh more than twenty pounds and can sit up by themselves, there are two types of child seats. The shield type consists of a seat with a padded and slightly flexible impact shield that comes up close to the child's stomach and then bends away from the face and chest. The safety seat itself is held securely in place by an adult lap belt which is fastened around the shield. An advantage of this type of restraint is that parents do not have any harnesses or buckles to deal with. Children can learn to climb in behind some shield models with the seat already secured in place. However, children can also climb out of the shield while the car is moving, therefore, this type should only be used with well-behaved and disciplined children.



Shield

The harness type secures the child to the safety seat with a two-part belt system. This type of seat may be more complicated to use than the shield type but they are harder for an active child to wiggle out of and may allow for more freedom of movement within the seat. Some of the newer models of safety seats secure the child with a combination of shield and harness.

It is important to note whether or not the seat you choose requires a top tether strap that must be secured to a rear seat belt or the window shell behind the rear seat (or cargo area of station wagon or hatchback). Again, if you do not intend to anchor the tether strap every time you place the seat in a car, choose a model that does not require a top tether.



Harness



Adult Safety Belts

Adult safety belts should be used for children who have outgrown their safety seats or for children who can sit up by themselves when no safety seat is available. The belt should be snug and as low as the child's hips as possible. If

the shoulder belt crosses the child's face or neck, the shoulder belt should be placed behind the child's back after the buckle has been fastened. Parents should check to make sure the child's head will not hit the dash in a crash or sudden stop. If this could happen, the child should be placed in the rear seat.

Pilrows or cushions should not be used to boost a child. They can slide out from under the child, allowing him or her to submerge under the lap belt, or allowing the child's head to move so far forward that it strikes the car's interior.



US Department of Transportation
National Highway Traffic Safety Administration

Safety Belt Fact Sheet

The Facts

Approximately 50,000 Fatalities Caused by Motor Vehicle Accidents Annually

- Leading cause of death among people 44 and younger.
- Number 1 cause of on-the-job fatalities.
- Costs the average employer nearly \$120,000 per employee death.
- Comparable to the number of American soldiers killed in Vietnam.
- Two and one half times greater than all fatalities caused by accidents in the home.
- Ten times greater than fatalities caused by all other forms of transportation.
- Equivalent to a 747 passenger jet crashing every day.

Safety Belts Make A Difference

- Approximately 35,000 people die annually in cars, light trucks or vans equipped with safety belts.
- About 50 percent (17,000) of these people could be saved if they wore safety belts.
- Safety belts cut your chances of being killed or seriously maimed in a crash by about 50 percent.
- On any single vehicular trip the chance of an accident is very low, but the possibility of a serious accident on one of the many trips in your lifetime is better than 50 percent. (What percent of your friends have never been in an accident? Ask around . . . the percentage will be low.)
- Three out of four crashes happen within 25 miles of home.
- A common cause of death and injury to children in automobiles is being crushed by adults who are not wearing safety belts. In fact, one out of four serious injuries to passengers is caused by occupants being thrown into each other.
- Drivers wearing safety belts have more control over their car in emergency situations and are therefore more likely to avoid an accident.

The Myths

Myth

"I don't need safety belts because I'm a really good driver. I have excellent reactions."

Fact

"No matter how good a driver you are, you can't control the other car. When another car comes at you, it may be the result of mechanical failure and there's no way to protect yourself against someone else's poor judgement and bad driving."

"I don't want to be trapped in by a safety belt. It's better to be thrown free in an accident."

"Being thrown free is 25 times more dangerous . . . 25 times more lethal. If you're wearing your belt you're far more likely to be conscious after an accident . . . to free yourself and help your passengers. Safety belts can keep you from:

- plunging through the windshield;
- being thrown out the door and hurtled through the air
- scraping along the ground
- being crushed by your own car

In almost any collision, you're better off being held inside the car by safety belts

"If I wear a safety belt, I might be trapped in a burning or submerged car!"

"Less than one-half of one percent of all injury-producing collisions involve fire or submersion. But if fire or submersion does occur, wearing a safety belt can save your life. If you're involved in a crash without your safety belt, you might be stunned or knocked unconscious by striking the interior of the car. Then your chances of getting out of a burning or submerged car would be far less. You're better off wearing a safety belt at all times in a car. With safety belts, you're more likely to be unfazed, alert, and capable of escaping quickly."

"I don't need it. In case of an accident, I can brace myself with my hands."

"At 35 miles per hour, the force of impact on you and your passengers is trivial. There's no way your arms and legs can brace you against that kind of collision. The speed and force are just too great. The force of impact at just 10 mph is equivalent to the force of catching a 200-pound bag of cement from a first story window."

"Most people would be offended if I asked them to put on a seat belt in my car."

"Polls show that the overwhelming majority of passengers would even willingly put their own belts on if only you, the driver, would ask them."

"I just don't believe it will ever happen to me."

"[Everyone of us can expect to be in a crash once every ten years. For one out of 20 of us, it'll be a serious crash. For one out of every 60 children born today, it will be fatal!"]

"Well, I only need to wear them when I have to go on long trips, or at high speeds."

"Eighty percent of deaths and serious injuries occur in cars traveling under 40 miles per hour and 75 percent of deaths or injuries occur less than 25 miles from your home."

"I can touch my head to the dashboard when I'm wearing my seat belt so there's no way it can help me in a car accident."

Safety belts were designed to allow you to move freely in your car. They were also designed with a latching device that locks the safety belt in place if your car should come to a sudden halt. This latching device keeps you from hitting the inside of the car or being ejected. It's there when you need it."

The Human Collision



On impact, the car begins to crush and slow down. The person inside continues to move forward at the same speed the car was traveling.

Within 1/10 of a second, the car has come to a stop, but the person is still moving forward.



1/50 of a second after the car has stopped, the unbelted person slams into the dashboard or windshield. This is the human collision.



With effective safety belts, the person will stop before hitting the steering wheel, dash or windshield.

The car has come to a complete stop within one tenth of a second. However, the unbelted driver is still moving along inside the car at 30 mph. It will take the driver about one-fiftieth of a second more to hit something—say the windshield or the steering wheel. That's the human collision. It happens about 0.02 seconds after the first collision, and belts can make a big difference in determining how serious that second collision is. A lot of people think they are strong enough to brace themselves in a crash. They aren't. At just 30 mph you'd be thrown toward the dash with the same force as if you'd jumped head first off a three-story building. No one's arms are anywhere near strong enough to "catch" himself and break a three-story fall. Safety belts are, though. And that's why people need them, even in a low-speed crash.

How Effective are Safety Belts?

Most people accept the fact that wearing safety belts offers protection in a crash, but too few bother to find out exactly how much protection they can expect. If they asked, they would probably be surprised by the answer. While researchers may differ by a few percentage points either way, average figures coming out of safety belt studies look like this:

- Safety belts cut the number of serious injuries received by 50 percent.
- Safety belts cut fatalities by 60 to 70 percent.

To put these figures in other words, not wearing a safety belt doubles your chance of being hurt seriously in a crash. Serious injuries received in crashes often involve the head or spinal cord. In fact, in the U.S., auto accidents are the number one cause of epilepsy (from head injury) and paraplegia (from damage to the spinal cord). The restraining action of safety belts—especially shoulder belts—helps explain why they so drastically reduce the likelihood of being seriously hurt. Wearing just a lap belt gives you twice as good a chance of living through a crash as you'd have if you wore no belt at all. And using a lap/shoulder belt combination makes your chances of survival three to four times better than they are if you drive beltless. One important note: These improved chances of escaping injury or death thanks to safety belts hold true regardless of speed. Whether you're going 5 mph or 75 mph, you're a lot better off using belts.

The aim of safety belts is to:

- First, minimize whatever benefits come from the First Collision through "riding down." By making the impact of the first collision work on you sooner, belts give you the benefit of increased stopping distance and dissipation of the forces of impact by the car itself.
- Second, minimize the harm of the Second Collision. By taking the forces of impact quickly (but not too quickly), the belts dissipate those forces through a relatively safe medium (the belt itself) instead of through a dangerous medium (glass or steel).

Safety belts help occupants in five ways:

1. There is the "ride down" benefit, in which the belt begins to stop the wearer as the car is stopping.
2. The belt keeps the head and face of the wearer from striking objects like the wheel rim, windshield, interior post, or dashboard.
3. The belt spreads the stopping force widely across the strong parts of the body.
4. Belts prevent vehicle occupants from colliding with each other.
5. Belts help the driver to maintain vehicle control, thus decreasing the possibility of an additional collision.

THE TENNESSEE EXPERIENCE

The National Highway Traffic Safety Administration says its evaluation of the Tennessee law, which became effective January 1, 1978, shows a 50 percent reduction in major injuries and deaths of small children in 1978, and a 75 percent reduction in 1979. Over the two-year period it is estimated there would have been 40 additional major injuries and seven additional deaths without the use of restraint systems.

The Tennessee Child Passenger Protection Act requires parents to protect their children under age four by properly using child restraint systems, or else by assuring that the child is held in the arms of an older passenger in the vehicle. This was the first state law to require passenger restraint of any kind, and despite the major weakness of the so-called "babes in arms" provision, the law has become the focus of a great deal of national attention. The practice of holding a child in the lap is unsafe, because in a crash the child can be crushed between the adult and the dashboard of the car, or torn from the adult's arms by the extreme forces of the crash.

NHTSA and Tennessee participated in a public information campaign to increase public awareness of the law, and in the evaluation of the impact of the legislation. The evaluation included actual observations of child restraint usage in five metropolitan centers and three rural locations in each of five semiannual surveys.

Before the law went into effect the statewide usage rate was only 9.2 percent. At the end of 1978, one year after the law became effective, the statewide average usage rate was 14.4 percent, double the national rate for child seat use. By the end of 1979, the Tennessee rate was 18.7 percent, and higher in some parts of the state. Usage rates have continued to increase in 1980, and are as high as 29 percent in Knoxville and Nashville.

In 1979, the Tennessee State Patrol purchased child restraints to be carried in the trunk of each patrol car. Upon issuing a citation to a parent for non-use of a child seat, the officer loans the family a seat to be returned to court when they pay their fine. If the parents can show proof of purchase of a child restraint system, the officer requests the judge to drop the charge. Since enforcement of the program went into effect, 1,260 citations have been issued by the Tennessee Highway Patrol.

Source: U.S. Department of Transportation, National Highway Traffic Safety Administration, Press Release, October 6, 1980.

GARDEN CITY, N.Y.

NEWSDAY APR 1 1982

EVENING -- 494,993

SUNDAY -- 510,207

A Tenn. restraint law at work

After almost two years under a state-mandated program to protect young children in auto accidents, officials in Tennessee found something lacking—enforcement.

Tennessee was the first state in the country to adopt a law requiring special restraints, or car seats, for young children. The law there requires that children under 4 years old be in child restraints in cars when traveling with parents or legal guardians.

If the children are not in car seats, a ticket is issued to the parent or guardian. The maximum fine is \$10.

The law went into effect Jan. 1, 1978, but, late in 1979, complaints of lax enforcement arose. Twenty months after the law went into effect, state officials dug through records of the state police, who enforce the law on state and interstate roads, but they found that only about 50 citations had been issued.

"Initially, we just assumed that they would start enforcing the law because it was a law," said Sheri Maddux of the Governor's Highway Safety Program.

Robert Sanders, a county health official in Rutherford, Tenn., and a pediatrician who led the fight for the law's adoption, said that the situation changed dramatically under a new commissioner of the state department of safety, Gene Roberts, who took office in 1979.

Roberts, Maddux said, sparked an intensified enforcement effort, and, in just the last four months of 1979, 414 citations were issued. In 1980, the figure climbed to 1,402; and it rose further—to 2,627—last year. All told, through the middle of last month, 4,895 tickets had been issued.

In 1979, 22 children under 4 years old were killed in auto accidents in Tennessee. In 1980, the first full year when the law was being more vigorously enforced, there were 15 such fatalities, and last year there were 10.

"Enforcement is very important to the program," Maddux said. Enforcement and, she added, education.

"The law is not designed to be punitive," Maddux said. When Commissioner Roberts, in charge of the state police, moved enforcement into higher gear, he also asked the courts to drop the charges whenever violators could show that they had acquired a child restraint. Moreover, when a trooper tickets someone under the child restraint law in Tennessee, educational material is given, and a car seat is given, too, on loan. There are 504 cars with troopers who police the roads daily and, for this program, each of those vehicles is stocked with a car seat.

It may be difficult for a trooper to spot the child under 4 who's sitting, with or without a regular seat belt, in a car, said Clyde Willholt, executive officer of

the state safety department in Tennessee. But, he said, "As you ride down streets, you can see children standing up or sitting on a mother's lap. It's very obvious . . . You see what's happening."

Not all troopers were enthusiastic about the law. To some troopers, Sanders said, enforcement of the child-restraint law was just one more thing to do. Also, he said, education of the troopers on child restraints may have been inadequate initially, and he and other pediatricians agreed to help correct that through training sessions.

Roberts added: "Most police don't like to penalize parents." The courts' cooperation in waiving fines if violators showed that they had gotten a car seat was important, he said. With that policy, not mandated by the law, Roberts said, "policemen could feel like protectors of children instead of punishers of parents."

By all accounts, use of child restraints in Tennessee has risen. One survey in Nashville and Knoxville, by the nonprofit Insurance Institute for Highway Safety, found that use of child restraints had risen from 8 per cent in 1977 before the law went into effect to 29 per cent in 1980. Maddux forecast that a more recent and more extensive state survey that is still being tallied will show that use has climbed to about 35 per cent.

In the meantime, use of child car seats in neighboring Kentucky—which has no such law—was 11 per cent in 1977 and only 14 per cent in 1980, according to the insurance group's survey.

Enforcement on roads policed by local agencies rather than by troopers appears to be mixed, Maddux suggested. The state had tried to emphasize the importance of the law to the "locals," but, she said, the effort can hinge on any number of things. "It just depends on how important it is to the chief and whatever."

Roberts said it can be more difficult to prod local police departments to emphasize enforcement when their focus is not traffic control. "Comprehensive police agencies have to answer the burglary calls, the rape calls, the mugging calls. Felonies take priority. In this country, we tend to accept traffic fatalities as something endemic to the culture. I hope that's changing."

Sanders is optimistic, even though many children in Tennessee still ride unbuckled. "It just takes a long time to get this across."

—Gilgoff

IMPROVING CHILDREN'S BEHAVIOR DURING AUTOMOBILE RIDES

by Edward R. Christopherson, Ph.D.

Copyright © 1977 by Edward R. Christopherson. Adapted in part from the book, *Little People: Guidelines for Common Sense Child Rearing* by Edward R. Christopherson, Lawrence, Ks.: H & H Enterprises, 1977.

Practically everyone with a driver's license has pulled up to a red light and seen children in the car next to them jumping up and down, from front seat to back seat, and sticking their heads out of the window. You might even remember seeing a child climb on his parent's shoulders or head while traveling down the street. Some of the more passive things that children like to do in the car are shift the gears (usually to neutral, which results in the engine revving up), turn on the radio, and go through the glove compartment.

How do I know about all of these nice things that children do on car rides? Simple — I'm a parent of a normally active three-year-old. How do I know that other parents have the same problems? Because I've spent some time researching this question.

My attention was initially drawn to children's behavior on car rides because we had three cars — in two of these cars, our son behaved very nicely. He played quietly, talked to us, and looked out of the window. Some of the time he slept (usually just on longer trips). In the other car, which didn't have room for two adults and the special infant car seat, our son did all of the things that we'd seen so many other children do before.

It took some time to figure out that the crucial difference wasn't the car but the presence or absence of the car safety seat. This finally dawned on me when I started using the third car to go get donuts on Sunday mornings, and I transferred the car seat since there wasn't anyone to hold on to my son. Presto — his

behavior in the third car was as good as his behavior in the other two.

Then, since I work at a medical center pediatrics department where research is looked upon favorably, I decided to see if other parents would report findings similar to ours with regard to the car seats. One of my research assistants interviewed 60 mothers at our outpatient clinic and 60 mothers at a private pediatric office. The results of these interviews were remarkable. Most of the mothers did not use safety car seats, even if they had purchased one or received one as a gift. Most of the mothers also reported that their children did stand up in the car, or stick their heads out of the windows, or fool around with the dashboard.

The next step was to have an observer actually ride with mothers on local car trips to observe how children behaved in the car. We placed an ad in the local paper for mothers interested in participating in a research study at \$5 per trip. The response was enthusiastic.

Another one of the research assistants went for 15-minute car rides with these mothers — some had children in car seats (already), and some did not use car seats. The difference between the two groups was startling. The children in car seats, for the most part, behaved just like my son did in his car seat — they played with a toy, conversed or looked out of the window. The children who did not use car seats made our researcher very nervous. They climbed around, stuck their heads out of the window, and generally were very disruptive.

With the help of a small grant from one

of the car seat manufacturers, we were able to offer the mothers who did not use car seats a free car seat and a short course (about 10 minutes) in how to introduce the seat to the child. This short course involved pointing out to the child that it is hard to see out of the windows without standing up, and that with a car seat he/she would be able to look right out the window since he/she would be sitting up so much higher. We also pointed out to the mothers the importance of conversing with their child about things that the child could see, now that he/she was in that car seat. For example, "See that big dog over there." "There's McDonald's! You like to eat at McDonald's, don't you?"

Again, we got the same dramatic results. When children who had not been using car seats started using them, their behavior in the car improved dramatically. The mothers who didn't use car seats and said that they weren't interested in using one, continued to have the same kind of behavior that they'd had throughout the study.

The study was considered to be good enough to be published in *Pediatrics*, the journal of the American Academy of Pediatrics. But much more important is

that instead of the scare tactics which have been used for years to try to get parents to purchase and use car seats (by this I mean the statistics on the number of children injured or killed each year in car accidents), parents can now be assured that almost all children will behave better in the car if they are riding in a car seat every time that they go for a ride in the car. Then, as a side benefit, children will also be much safer in the event that an accident does occur.

As a general rule of thumb, what we're now recommending to parents is that they get an infant car seat to transport the baby home from the hospital and use it for every trip after that. Chances are that if you start your child off in a car seat and use it consistently, 1) he'll behave much better, 2) he'll enjoy the trip much more because you won't be upset about his poor behavior, and 3) he'll be safer if you do have to stop suddenly or if you are in an accident.

Dr. Christopherson is associate professor of pediatrics at the University of Kansas Medical Center and a research associate in the Bureau of Child Research, University of Kansas.

Safety car seats for babies prevent needless injuries

By ELEANOR FLAGLER
Louisville Times Staff Writer

You've seen the happy family pile into the station wagon for a trip to the lake. The kids are scrambling around the back seat. Dad is at the wheel and Mom is cradling the baby in her lap. Off they go, excited and laughing.

Nobody's wearing a seat belt or sitting in a child safety seat. The parents decided the seats were too expensive. Besides, they're too much trouble. The kids wouldn't sit in them anyway.

This family is heading for the statistics ledgers of the state highway department. When the brakes screech and the car skids at that sudden stop — even at low speeds — there's nothing to protect the children.

The parents may be barely jarred when that accident occurs. But children in the back can be knocked around, flying head first toward the dashboard, the windowposts or even out the windows.

And the baby could fly out of his mother's arms, smashing into the dashboard or the windshield.

Automobile accidents have injured or killed many Kentucky and Indiana children, according to traffic research institutes.

These figures include only children who were passengers in cars — not those struck by motorists.

✓ In Kentucky, 20 children under the age of 4 died and 1,350 suffered serious injuries in automobile accidents in 1978.

✓ In Indiana, 60 children under 4 were killed — 40 of them 1 year old or younger — and 1,180 were injured in 1978.

✓ Nationwide, about 800 children under 4 were killed and 100,000 suffered serious injuries.

In accidents, sometimes the injuries

are simple bumps on the noggin. But many times, it's a lot worse: Cracked skulls, ruptured spleens and livers and fractured thigh bones are common, says Dr. Mary Smith, co-director of the emergency room at Louisville's Children's Hospital.

Traffic safety experts say most of these tragedies could have been avoided if everyone in the car had been properly strapped in.

For adults and larger children, they say, this means a seat belt. For children 4 and under, it means a crash-tested child safety seat properly installed.

Rob McBride is director of the child-restraint program at the Traffic Safety Institute at Eastern Kentucky University. He says the great majority of children injured or killed in automobile accidents weren't wearing any kind of restraint.

Nurleigh Seaver, social-science-program specialist at the National Highway Traffic Safety Administration, says properly used safety seats could save the lives of 90 percent of those babies killed and prevent 70 percent of the injuries.

McBride says only a tiny fraction of parents — about 3.5 percent — have properly installed, crash-tested baby restraints in their vehicles. Earlier this year, a team of researchers observed 1,000 children in Jefferson and Fayette counties riding in cars. Of these, 7 percent were in approved safety seats. But only half of those were properly used.

Why don't parents use them? The reasons are many, according to McBride and others.

One is the price tag. They range from \$15 to \$57 in stores in this area. Many parents don't want to pay that.

One local dealer kept a \$42 quality model for more than two years. Finally

it was sold at a reduced price. The dealer no longer carries the seats.

He explained: "There are very few people who think their kid's worth \$42. That's a sobering thought."

Others note that most parents don't use seat belts themselves. Why would they for their children?

The Tennessee legislature became so concerned with the issue last year that it passed a law requiring motorists to put infants and small children in approved safety seats.

But safety experts question the law's effectiveness. Some say it's a start. Others say it's got so many exceptions it's unwieldy and unenforceable.

Instead of pushing for a law in Kentucky, McBride and others are trying to convince parents to use safety seats voluntarily. A program similar to Kentucky's is proposed for Indiana.

McBride tells parents it's a simple matter of physics: Force = Mass × Acceleration. That means a 20-pound child in a car going 30 m.p.h. will hit the dashboard or windshield at a force of 600 pounds.

Since most parents try to protect their children from other dangers, McBride believes they just don't understand the danger in cars.

McBride's office has printed 60,000 brochures to distribute across the state in doctors' offices, day-care centers, anywhere parents might see them, to tell parents that car accidents kill and maim more children than any other single type of accident or disease.

Also, with the cooperation of the Kentucky safety institute, Jaycee-ettes and other groups are considering establishing a bank of safe child-care seats. The groups would raise the money to buy the seats, then rent or lend them to families. When the child outgrows the seat, the parents turn it in to be rented to another family.

McBride says this program has worked successfully in North Carolina and Michigan. He welcomes community groups anywhere to join in the program. He has plenty of information, posters and pamphlets and will help any group set up the program. He can be reached at 600-622-2236. Or write him at the Traffic Safety Institute, College of Law Enforcement, Eastern Kentucky University, Richmond, Ky. 40475.

Safety Car Seats, cont'd.

Safety Car Seats, cont'd



Staff illustration by Herman Wiederwohl

Crash-tested car seats

Not all infant and child seats on the market have passed simulated crash tests. The following safety seats have performed satisfactorily in such tests and are available in metropolitan Louisville and Southern Indiana department stores, discount department stores, children's specialty shops and automobile dealerships. If they don't have what you want, most will order them.

Name	Manufacturer	Child's Weight	Price
Bobby-Mac 2 in 1	Collier Keyworth	7-35 lbs.	\$30-\$38
Bobby-Mac Deluxe	Collier Keyworth	7-40 lbs.	\$35-\$44
Bobby-Mac Super	Collier Keyworth	7-40 lbs.	\$48
Child Love Seat	General Motors	20-40 lbs.	\$40-\$55
Dyn-O-Mite	Questor Products	7-17 lbs.	\$28
Fitz-All	Questor Products	18-43 lbs.	\$23
Infant Love Seat	General Motors	7-20 lbs.	\$24-\$31
Kantwel Caro Seat #988	Questor Products	7-43 lbs.	\$37
Mopar Infant Seat	Chrysler Corp.	7-21 lbs.	\$15
Mopar Child Seat	Chrysler Corp.	21-60 lbs.	\$21
Safe-T-Seat #78	Peterson	7-40 lbs.	\$42-\$57
Safety Shell #75	Peterson	7-40 lbs.	\$46
Tot-Guard	Ford Motor Co.	20-50 lbs.	\$38
Trav-L Guard	Century Products	7-43 lbs.	\$37
Wee Care #597	Strolee	7-43 lbs.	\$48-\$50

Get a crash-tested model and use it properly

By ELEANOR FLAGIER

Louisville Times Staff Writer

Safety experts emphasize two things about child safety seats:

Look for a crash-tested model. Use it properly every time your child gets in the car.

How do you choose one? Right now, it isn't easy. Federal standards for the seats do not require crash-testing and do not insure adequate protection in a crash, according to The Highway Safety Research Center of the University of North Carolina.

That's why, the center says, it's not worth your money to buy a seat that has only passed the federal standards. Instead, the center and another group, Physicians for Automotive Safety, say to buy a model that has performed well in simulated crash tests.

To get complete lists of the effective models and how to use them, write:

✓ Traffic Safety Institute, College of Law Enforcement, Eastern Kentucky University, Richmond, Ky. 40475, for copies of the pamphlet prepared by the North Carolina center.

✓ Physicians for Automotive Safety, Communications Department, P.O. Box 208, Rye, N.Y. 10580. Their pamphlet is more extensive and costs 50 cents. Allow three weeks for delivery.

Which is the best of all? Annemarie Schelness, executive director of the physicians group, says the best is the one you will use properly every time. Unless the manufacturer's instructions are carefully followed, even the "safest" seat won't do much good, she says.

Some seats have more straps to fasten than others. Be realistic about how much you are prepared to do before making a choice, the group's pamphlet says.

It's easy to forget about the web of harnesses and straps when Susie is

squatting. But Burleigh Seaver of the safety administration says parents should stick to it and say, "This car won't go until you're in there." The child will learn to sit still in the seat and will not object."

Besides protecting your child, the seat also prevents him from sticking his head out the window or otherwise distracting you when you're driving — a major cause of accidents, Seaver said.

There are basically three types of seats, although some models combine aspects of several. Also, some models convert from an infant carrier to a child seat.

These are the basics:

✓ The infant carrier, generally for babies 7 to 20 pounds. This is a tub-shaped bed that faces to the rear of the car — never forward. It is secured to the car by the adult seat belt. The baby rides in a nearly upright position and must be strapped in with a harness.

Safety experts say this is the only way your infant should ride in a car, from

the moment you take it home from the hospital.

✓ The child seat, for children more than 20 pounds who can sit up alone. One is the protective shield type. This has a seat with a padded and slightly flexible shield that comes up close to the child's stomach and then bends away from his face and chest.

This is one of the easiest models to use since children can crawl in alone. But it would not be good for children who are overly active and hard to discipline because they can climb out of it. Also, it's not recommended for children with glasses.

Another type of child seat is the traditional car seat. The child is held in by several straps. Both the harness and the carrier are tied to the car with an adult's seat belt. Some models also require a top strap, to be bolted into the steel support of the rear window ledge.

If you choose this model, you MUST use the top strap.

✓ The safety harness, for the larger child. This must be installed in the

center of the back seat, anchored to the rear seat belt and rear framework of the car. It does not provide as much protection as other restraints, but it keeps the child in the center of the back seat, the safest place in the car.



RECEIVED DEC 6 1982



**South Central
Health Planning and Development, Inc.**
1135 West Eighth Avenue • Suite 1 • Anchorage, Alaska 99501
(907) 278-3631

December 3, 1982

TO: Folks Interested in Preventing Child Morbidity/Mortality in Automobiles
FROM: Peggy Wilson, President, Alaska Child Passenger Safety Association
SUBJECT: Legislative Hearing

On Friday, December 10, 1982 from 1:00 - 5:00 p.m. and 7:00 to 9:00 p.m. there will be a hearing sponsored by the Senate Health, Education and Social Services on MANDATORY CHILD CAR RESTRAINT LEGISLATION.

Some information put together by Dr. Clint Lillibridge on the effectiveness of such programs in other states is attached.

Numbers of people showing support for an Alaskan law will be important at this point, so please attend the hearing and express your concerns. Also, please pass the word to interested others and urge them to attend.

Time/Date: Friday, December 10, 1982
1:00 - 5:00, 7:00 - 9:00 p.m.

Location of Hearing:
Legislative Affairs Office, 2nd floor
1024 (or 1016) W. 6th Avenue
Anchorage

Out-of-town people who would like to express their views and encouraged to write:

Senate HESS Committee
950 Cowles Street, #224
Fairbanks, Alaska 99701

MW/cr

ALASKA
CHILD PASSENGER SAFETY ASSOCIATION

Fatal motor accident analysis.

Washington State 1970-1979

39,500 accidents in which children were passengers.

6,300 were restrained; 2 killed. Death rate 0.0317%

33,200 were not restrained; 146 killed. Death rate 0.4397%

The death rate for unrestrained children was 13-fold increased over restrained children.

Twenty per cent of the unrestrained children were being held on an adult's lap but were killed. Nine out of every ten adults holding the child were not killed.

If all of the children had been properly restrained, how many would have died? Twelve, instead of 148.

One hundred thirty six children died needlessly because they were not properly restrained.

Profile of an accident.

The "typical" child who was killed would be a one year old male infant riding in the front seat of a passenger car without a restraint. The driver of the car was the mother, who was also not wearing a seat belt. The accident occurred between 8 a.m. and 3 p.m. within a few miles of home. The mother had not been drinking an alcoholic beverage. There were no defects in the family car that contributed to the accident. The accident occurred during daylight hours on a state route. The weather was clear or overcast and the surface was dry. In summary, the fatal accident involving a young child in Washington State usually occurred under ordinary conditions. (1)

(1) "Fatal Motor Vehicle Accidents of Child Passengers from Birth through 4 Years of Age in Washington State" by Robert G. Scherz, Pediatrics, Vol. 68(4), October 1981, pg. 572-575.

DOCUMENTATION OF EFFECTIVENESS

TENNESSEE

User Rates for Children Under Four

1977 pre-law	9%
1978 (with law)	20%
1980 (with law)	29%

Deaths

pre-law	20-25/year
1980	14
1981	10 (only 1 fatality was in a child who was in an approved child restraint system)

Health Cost Containment

E.R. visit for car accident	\$50
Hospitalization	\$7-10,000
Funeral	\$2,000

MASSACHUSETTS

<u>Usage of Seat Restraints</u>	<u>Education Only (1979)</u>	<u>Mandatory Use Laws (1980)</u>
Age 1 year	41%	70%
2 years	22%	49%
3 years	12%	40%

Estimated savings to the family

\$1,100-\$55,000 per injury

A BILL

For an Act entitled: "An Act relating to child passenger protection."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

* Section 1. AS28.35 is amended by adding a new section to read:

Sec. 28.35.246. CHILD PASSENGER PROTECTION. (a) Every driver transporting a child under the age of five (5) years in a motor vehicle operated on the roadways, streets or highways in this state shall provide for the protection of the child by properly securing each child in accordance with manufacturer's instructions in a child passenger restraining system meeting applicable federal motor vehicle safety standards as follows:

does language mean this bus to be a statute?

(1) Any child unable to sit unaided in a child restraint system which meets the standards prescribed in 49C.F.R.571.213.

should we state primary height rather than, or in relation to age?

(2) Any child able to sit unaided but less than five (5) years of age, when transported in the front seat, in a child restraint system which meets the standards prescribed in 49C.F.R.571.213.

(3) Any child able to sit unaided but less than five (5) years of age, when transported in the rear seat, in a child restraint system which meets the standards prescribed in 49C.F.R.571.213, unless the child is secured by a safety belt provided in the motor vehicle.

(b) This section does not apply if: 1) the motor vehicle being driven is a mass transit vehicle, school bus, taxicab, moped, motorcycle, or other motor vehicle not required to be equipped with safety belts under 13.A.A.C.04.270 or federal law or regulations; 2) all seat belts occupied by passengers.

or bus?

For an Act entitled: "An Act relating to child passenger protection."

Page 2 (c) The Commissioner of Public Safety may exempt a child or class of children from the requirements of this section if the Commissioner of Public Safety determines that the use of the child restraint system required under (a) of this section is impractical because of physical unfitness or a medical problem. The Commissioner of Public Safety may specify alternate means of protection for children exempted under this subsection.

busses??

"body size was included in draft?"

(d) A person who violates this section is guilty of an infraction. Failure to secure the seat system is not to be considered contributory negligence, nor shall such failure to wear said child passenger restraint system be admissible as evidence in the trial of any civil action.

(e) Violators of this section shall be fined \$25.00. A person found in violation of this section may, instead of paying a fine, submit proof of ownership, or rental for not less than one (1) year, of an approved infant or child restraint system to the Court. This shall be acceptable only for first violations and if the acquisition of the restraint system was subsequent to the violation. Subsequent violation within previous 2 years, two points shall be assessed for violation of this section as prescribed under 13A-CO8.210.

is 2 points reasonable?

AK will

****PLEASE NOTE****

THE ORIGINAL FILE CONTAINS AN OVERSIZED DOCUMENT THAT IS UNSUITABLE FOR FILMING. PLEASE REFER TO THE ALASKA STATE ARCHIVES TO VIEW THE ORIGINAL.

POSTER

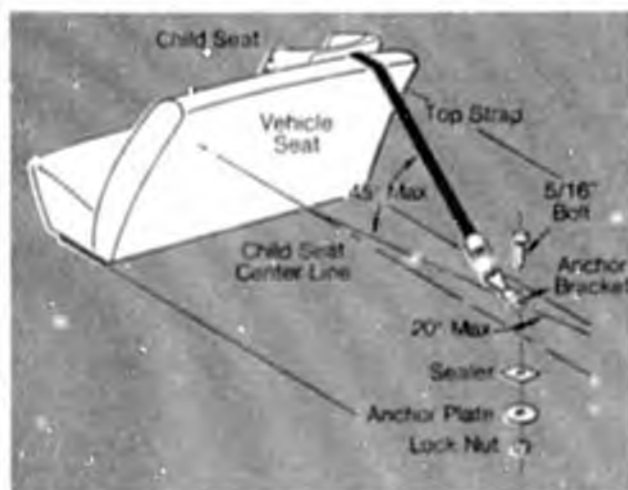
"THE CURE FOR THE GREATEST KILLER
OF CHILDREN"

FOR VANS, HATCHBACKS, STATION WAGONS AND UTILITY TRUCKS

Select a suitable anchor bracket mounting location on the floor of the vehicle. The location must be:

- On a flat metal surface which is a welded-in integral part of the vehicle body. DO NOT attach anchor bracket assembly to folding seat back panels or movable load floors, filler panels, spare tire covers, or any screw-on panels.
- In a position clear of fuel tank, fuel lines, brake lines, exhaust systems, etc.
- In a position where the angle between the Child Seat top strap and the load floor does not exceed 45° (horizontal angle).
- As close to the centerline of the Child Seat as possible, but in no case must the angle between the Child Seat centerline and top strap exceed 20° (side to side angle).

NOTE: If conditions A, B, C, or D cannot be met, do not use the Child Seat in that seating position. Move the Child Seat to another seating position which satisfies conditions A, B, C, or D.



Drill a 5/16" diameter hole through the floor at the selected location.

Assemble and securely tighten the bolt, anchor bracket, anchor plate, (2-1/2" O.D. washer) and the lock nut to the floor using a suitable sealer around the hole. If the hole has been drilled through the floor to the outside of the vehicle, make certain that the hole is properly sealed to prevent exhaust fumes from entering the vehicle.

Child Restraint Systems For Your Automobile



Department of Transportation
National Highway Traffic Safety Administration

Why are child restraints needed?

What kind of restraint systems are available?

How do I select the best restraint for my child?

What is the proper way to use child restraints?

Where can they be purchased?

This booklet answers these questions. The rest is up to parents—to select and obtain the proper restraint, and then to USE IT PROPERLY according to directions.

Why Child Restraints Are Needed

After the critical early weeks of life for the newborn baby, automobile crashes are the leading cause of death for American children. In 1978 alone, 669 children under the age of 5 were killed while riding in cars. Tens of thousands more were seriously injured. The tragedy is that most of those deaths and injuries could have been avoided if parents had taken the time to buckle their children into a proper child restraint system.

To understand why restraints are so important, one must first understand what happens in a crash, or in a sudden panic stop. When a car hits another object and stops suddenly, or when a sudden hard braking action brings it to a fast stop, all occupants in the car continue to move forward at the same speed the car was travelling, until something stops them. Too frequently, that "something" is the steering column, the dash board, the windshield, or some other part of the interior of the car. It is this second collision that causes injuries and death.

In the case of small children, if they are not restrained they literally become flying missiles. It happens so fast, and with such force—even in low speed crashes—that neither the parent nor the child can prevent the child from a violent impact with other passengers or with some hard surface within the car.

The solution to the problem of the second collision is a restraint system. For adults, that means a safety belt, which holds you safely in your seat, away from the car interior. The belt's webbing and the sturdy adult pelvis and rib cage absorb the force of the

collision. But for young children under 5, child restraints are the best solution.

Children need to have the crash forces spread more evenly over their fragile bodies, and that's what child restraints do. They are fastened to the car by the safety belt already in your car, and in a crash they protect children from colliding with the car's interior.

Of course, if no child restraint is available, it is much better to buckle children into regular safety belts than to let them ride free, loose, and unprotected.

Some parents think they can protect infants and young children from being injured by holding them in their laps. They cannot. In a 30 mph crash, for example, a child may be thrown forward with a force equal to 30 times its own weight. If you are wearing a safety belt, the child can be torn from your arms and hurled into the dash or the windshield. If you're not wearing a safety belt, both you and your child will fly forward, with the probability that your child may be crushed between you and the dash. **HOLDING YOUR CHILD IN YOUR LAP IS NOT SAFE.**

Unfortunately, our studies show that most parents do not provide their children with the protection restraints can offer. A recent survey found that only 5 percent of young children were using child restraints.

Whether adults do or do not use safety belts available in cars is a conscious choice. Small children cannot decide for themselves to buckle up. They depend on their parents to protect them from harm, and make that decision for them.

Fortunately, effective child restraint systems that have been crash tested and meet government standards are available. The remainder of this brochure describes the kinds of restraints that are available and how they should be used.

Some Rules To Remember

- Children under 5, or weighing less than 40 pounds, should ride in a child restraint.
- The safest place in the car for a child is in the back seat.
- If no child restraint is available, children should use the car safety belt. This is much safer than riding unrestrained.
- Adults should not hold children on their lap while riding in either the front or back seat. They may cause more injuries by crushing their children against the dash with their own body, or the child may be torn from their arms and thrown against the hard interior of the car. If in the back seat, the

child may be torn from their arms and thrown into the front area of the car, possibly against the hard interior or into another passenger.

- Children should not ride in the luggage compartment of a station wagon or hatchback.
- Hatchbacks should always be kept closed when children are riding in the back seat. If they are left open, the children could be ejected from the car in an accident. Open hatchbacks or tail gate windows also increase the levels of carbon monoxide inside the car from exhaust fumes.

Fringe Benefits

Some days, it seems like there's nothing harder than driving with small kids in the car. Between trying to keep them contented and trying to keep them still, it's almost impossible to keep your mind on the road. That's where child restraints are really helpful. They act just like a good babysitter, keeping your children entertained and under control.

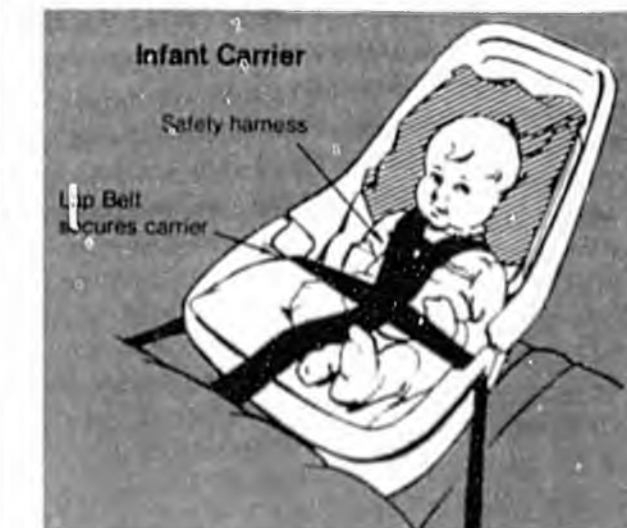
Child restraints can make the ride more fun for children. They're comfortable to ride in, and many of them are designed so they give kids the extra boost they need to see out the windows and feel more a part of what's going on. They are also a very nice place to sleep.

All in all, child restraints are a pretty good deal for everyone. They let you concentrate on driving, while keeping the kids happy and protected.

Alaska Department of Health and Social Services
AK/DHSS/PH-81/81

Types of Restraints Available And How To Use Them

FOR THE INFANT . . . FROM BIRTH TO ABOUT 9-12 MONTHS OF AGE



Infant carriers or convertible child safety seats are the only types of child restraints recommended for use by babies. In these restraint systems, the baby faces backwards, in a semi-reclining position. In an accident, the baby's sturdy back absorbs the crash forces rather than its delicate chest and abdomen. The carrier is lined with soft padding, has an internal safety harness to keep the baby in the restraint, and is anchored to the car by the vehicle's safety belt.

The time to start using the infant carrier is on the baby's very first ride home from the hospital. Parents should anticipate the need for an infant carrier before the baby is born, and buy one early as an essential part of the layette. For newborn babies, a rolled up receiving blanket placed around the head and shoulders will give their head additional support.

Babies should ride in the infant carrier until they can sit up by themselves without support. This usually occurs between 9 and 12 months, or when they weigh about 20 pounds.

There are basically two kinds of infant carriers. The first is designed for infants only. Babies outgrow this kind of seat and must move up to a child safety seat. The second is a convertible carrier. When babies get too big for the infant position, the convertible carriers can be changed into child safety seats which toddlers can continue to use until they're old enough to

wear regular safety belts. More about convertible carriers later.

WARNING: Do not use flimsy, light weight, plastic feeder seats and car beds that are designed only for household use, and not for transporting an infant in an automobile.

FOR THE TODDLER . . . 1-4 YEARS OLD

Three types of restraint systems are recommended. They include the child safety seat, the protective shield, and the safety harness.

Child Safety Seat

This restraint system is designed for children who can sit up without support. It faces forward and is anchored by the vehicle's lap belt, which is either fastened around the front of the seat, or threaded through the back of the frame.



It has a safety harness with two shoulder straps, a lap belt, and a crotch strap. This five-point harness spreads the crash forces over the child's shoulders and hips. The crotch strap keeps the hip straps from riding up into the child's delicate abdomen.



Some child safety seats also have a "top tether strap" that ties the top of the restraint to the structure of the car. A top tether strap is usually required on child safety seats which have been raised several inches so that the children riding in them can see out the win-

dows. When included, the top tether provides additional crash protection, particularly in side collisions. (See the section on anchoring the top tether strap for detailed instructions on fastening the tether strap.)

Protective Shield

This type of child restraint fits over the front of the child's lap and chest, and is designed to catch and cushion the child in a crash.

It is a C-shaped shell with energy-absorbing padding on the upper part of the shield. The shield is anchored to the car by the lap belt which fastens around the front of the shield. In an accident, the shield spreads the crash forces evenly over the child's head and upper body.

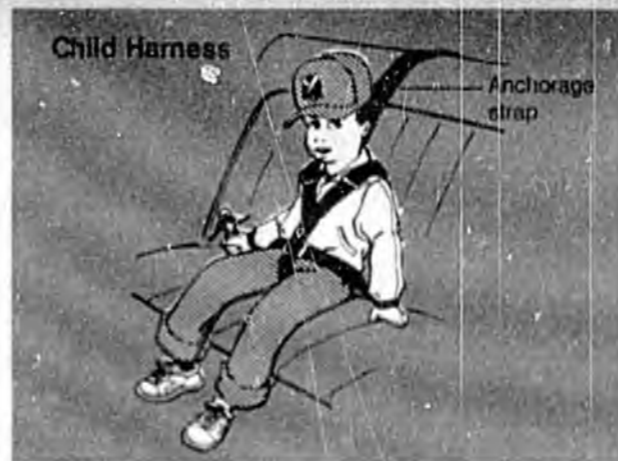


The shield restraint has several advantages over other types of child restraints. It doesn't use a harness, and it doesn't use a top tether strap.

However, the shield generally doesn't provide as much protection in side collisions, and, therefore, should be used in the center seating positions. The shield is also easier to get into and out of, so it may require greater attention to make sure your child stays in the restraint when you're driving.

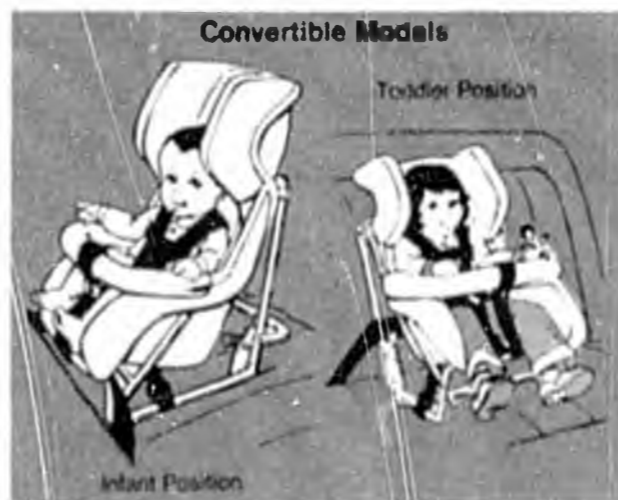
Child Harness System

This restraint consists of a 5-point safety harness with a top tether anchorage strap. It is designed for children who can sit up without support. It faces forward, and is anchored to the car by the vehicle's lap belt and a top tether strap. The vehicle lap belt threads through a loop of the harness behind the child. The safety harness does not provide side impact protection, and should, whenever possible, be used in the center of the rear seat.



The Convertible Seats

Some infant carriers are simply converted safety seats. Changing them from infant carrier to child seat is a fairly simple operation. You move the safety harness from the lower shoulder strap slots to the upper slots; you adjust the tubular frame from the reclining position to the upright position; you turn the seat around so that the child is facing front, and you re-buckle the car safety belt through the seat frame according to the manufacturer's instructions.



Some Reminders

- Be sure to read, follow, and keep the manufacturer's instructions.
- Be sure to attach the child restraint properly to the car with the vehicle's lap belt. On some child safety seats, the lap belt goes through the metal frame of the seat; while in others, it goes around the top of the seat and over the child's lap.

- Be sure to attach the top tether strap, if one is included, for full protection. In order to be effective, the tether strap must be attached securely to either the rear seat belt, the rear shelf, or some other metal anchor point. (See the section on anchoring the tether strap).
- Be sure to properly secure your child in the restraint. Buckle all five parts of the harness together and be sure the harness is not too loose.

Restraint Systems For The Older Child

Regular Vehicle Lap Belts

Children over the age of 4 or 5 and weighing about 40 pounds can be restrained by use of the vehicle lap belt, with the child sitting up-right against the back of the seat. The lap belt should be adjusted snugly so that it will not ride up across the child's abdomen. Again, the safest position is in the rear seat, with the center seating position being safer than the side positions.

Three-Point Restraint System

Depending on the weight and height of the child, the three-point adult belt system may be used. Such use, however, requires a proper fit of the shoulder portion of the belt. That is, it must be positioned firmly across the chest and shoulder and not cutting across the neck, face, or head.

If the three-point belt system must be used and a proper fit of the shoulder belt is not possible, the shoulder belt should be tucked in behind the child, never under the arm or across the chest.

How To Select The Best Restraint For Your Child

A federal law, Federal Motor Vehicle Safety Standard No. 213-80, requires child restraint systems to meet certain strength and performance standards. Not included under the standard are those flimsy, light weight, plastic child feeder seats used in the home, which are not intended for car use.

All auto child restraints manufactured after May 1980 must pass tests which show that they can provide adequate protection for children in actual crashes. Look for a label on the restraint which says "dynamically tested."

There are many different places where you can buy child restraints. They include:

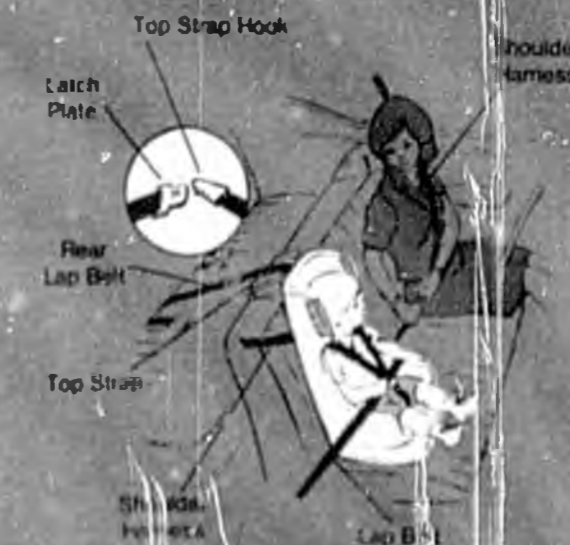
- Retail outlets, including department stores
- Discount centers

- Juvenile furniture and baby needs stores
- Some car dealers
- Some hospital gift shops
- Catalog sales available from large retailers
- Automotive retail and supply dealers

Before you buy a new restraint, try it out in your car. Some restraints don't fit into some cars. There are enough restraints on the market, though, that you should be able to find one that's just right for your car, your child, and your budget.

Anchoring The Top Tether Strap

While the following instructions may be appropriate for many cars, the automobile manufacturer should be able to tell you the best place to anchor a tether strap in your car. We recommend that you contact the manufacturer for this information. You can get the address from your local automobile dealer.



USAGE INSTRUCTIONS FOR FRONT SEAT INSTALLATIONS

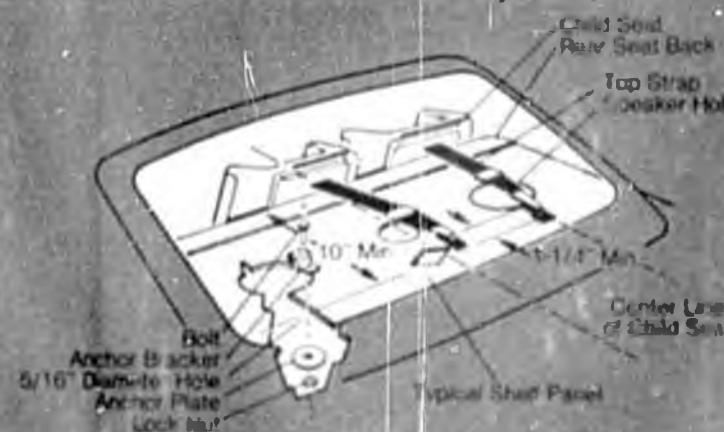
Latch the top strap hook onto the rear seat lap belt latch plate located most directly behind the child seat and SECURELY TIGHTEN THE TOP STRAP. If there is no lap belt latch plate within 10" of being directly behind the child seat, do not use the child seat in that position.

Some communities have rental or recycling programs where you can rent an infant or child safety seat for a short period of time, instead of buying one. In other programs, your outgrown child restraint can be recycled and rented for another young child to use. Contact your local highway safety or health department to determine if such a program exists in your area.

USAGE INSTRUCTIONS FOR REAR SEAT INSTALLATIONS

Select a suitable anchor bracket mounting location on the filler panel. The location must be:

- 12" solid metal at least 1-1/4" away from any large holes in the metal portion of the filler panel. (speaker holes, defogger holes, etc.)
- Far enough behind the child seat to allow the top strap to be securely tightened. (Approximately ten (10) inches or more behind the child seat back.)
- As close to the centerline of the Child Seat as possible, but in no case more than two inches to the outside or six inches to the inside of the Child Seat centerline. If this condition can not be met, then do not use the Child Seat in that position.



From inside your car's trunk, drill a 5/16" diameter hole up through the metal filler and trim panel at the selected mounting location. Care must be taken not to hit the rear window with the tip of the drill as this could cause the rear window to shatter. Assemble and securely tight on the bolt, anchor bracket, anchor plate (2 1/2" O.D. washer) and the lock nut to the metal filler panel and trim as shown.

WHICH RESTRAINT IS BEST...

For My Child ?

For My Car ?



No one model of car seat ("child restraint") can be recommended to all parents. Among those listed as dynamically tested, each has its advantages and disadvantages. Selection of a child restraint (CR) that will suit to your needs and car can only be made by reading the directions and trying any model under consideration in your car(s), keeping in mind your answers to the following questions. Choosing carefully will help make daily use easier for you and your child.

1. How large is the child who will be using the CR?
(weight, height, broadness of shoulders?)
2. What size car do you normally use and what are its features?
 - a. Will the CR fit in the rear passenger compartment? Some convertible models (infant/child) are very long in the infant position.
 - b. Do the vehicle seat belts extend far enough to properly secure the CR? Even some large cars have short belts.
 - c. Are the vehicle seat backs too short to provide good whiplash protection by themselves?
 - d. Is the vehicle seat belt buckle positioned in a convenient place on the CR when it is fastened as snugly as possible?
 - e. If your car has scooped out bucket seats, will the CR base fit onto them securely?
 - f. If your car is old, does it have front seats with backs which do not lock in position? If so, a CR should only be used in the rear seat.
 - g. Does your car have safety belts, front and rear? All CRs need to be fastened with an auto belt. Lap belts can be installed quite easily.
 - h. Does your car have belts which cannot be tightened around the CR to hold it in place (emergency-locking inertial reels)? A "locking clip" can be obtained from auto dealers to enable you to keep a lap/shoulder belt of this type snug around the CR. At present, there is no adequate way to keep a lap belt of this type tight around the CR.
3. Can you, and are you willing to drill a hole for an anchor plate to which a top anchor strap can be clipped? CRs with such anchor straps need an available rear safety belt or an anchor plate bolted behind the rear seat.
 - a. Can an anchor plate be properly located in your vehicle? It can be difficult or even impossible in vehicles other than sedans.
 - b. If you have bucket seats with integral head rests, it may be difficult to keep an anchor strap from clipping off if CR is used in that seat.
4. How often will you want to move the CR from one vehicle to another? Some are more complicated to move than others. CRs with anchor straps need a means of attachment in every car in which they are used.

5. How many people ordinarily ride in your car? Which locations are available for your child's CR? Some CRs offer more side protection than others, some require more room, some are more comfortable to sit next to than others. Anchor straps from CR used in front are attached to a rear lap belt, making it useless for another passenger.
6. How motivated are you and those others who will be transporting your child to fasten and unfasten the various buckles necessary for proper use of the CR? Does the CR require buckling and adjusting the auto seat belt every time you use it? Some CRs are easier to use correctly than others.
7. Can you maintain consistent discipline needed to keep your child in the CR? Some children are more active than others, and some CRs are easier to get out of than others.
8. How important is out-of-car vision for your child? Some CRs seat the child low, others high (usually the models with anchor straps). Some vehicles have very low rear passenger seats with small windows, others are high with large windows. How willing are you to provide attention and entertainment for your child in the car?
9. Does your child often fall asleep in the car, or do you take many long trips during which sleeping is important? Some CRs give side or front head support while others don't.
10. How much are you willing and able to spend? Would you prefer to buy an infant CR and purchase a child-sized one later or buy a combination CR which may be awkward to convert? Have you time to look for a second-hand CR? Is an infant CR available for rental or on loan from a friend? Would you resell your CR when done with it, and thereby recoup some of its cost, or use it for your next child?
11. How portable must your seat be? Is it important to you that it can be converted to a stroller, high-chair, reclining seat or out-of-car carrier (with or without extra-cost bits) when not in use in the car, or would you prefer to leave it always in the car, ready to go?
12. How readily available is the CR which seems to best fit your needs? Do you have time to order it from the manufacturer if it isn't available in the local stores?

These questions prepared by Action for Child Transportation Safety in collaboration with Michigan Office of Highway Safety Planning.

ACTION FOR CHILD TRANSPORTATION SAFETY

1000 ... of ... , Bethell, WA 98011

CHILD RESTRAINTS AVAILABLE IN THE ANCHORAGE AREA

SEARS STORE - ANCHORAGE 279-4422

Strolee Wee Care	Use from 8lbs. to 40 lbs.	Tether strap required	\$69.99
Bobby Mac	Use from 7 lbs. to 40 lbs.	No tether required	\$61.99
High Rider	Use from birth to toddler	Tether strap required	\$77.99
Century 300	Use from 7 lbs. to 40 lbs.	No tether required	\$69.99
Safe-T-Rider (toddler)	From 20-65 lbs. (1-10 yrs.)	Use with lap and shoulder belt while in the front seat only. Tether required for use in the rear seat.	\$47.99

SEARS CATALOG 279-3451

Strolee Wee Care	Use from 8 lbs. to 40 lbs.	Tether strap required	\$59.99
One Step	Use from 8 lbs. to 43 lbs.	No tether required	\$49.99
Bobby Mac Champion	Use from 7lbs. to 40 lbs.	No tether required	\$49.99
Safe-T-Rider (toddler)	Use from 20-65 lbs. (1-10 yrs.)	see above	\$42.99
Century 300	Use from 7 lbs. to 40 lbs.	No tether required	\$59.99

PAY & SAVE - ANCHORAGE

Safe-T-Rider (toddler)	Use from 20-65 lbs.	see above	\$69.95
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(Each Pay-N-Save offers one or more types of seats. The charge would be nearly the same at all stores - \$69.95 - consult the Directory for phone numbers.)

FRED MEYER STORE - ANCHORAGE 277-2611

Cocso-Peterson - Safe-T-Shield	Use from birth to 40 lbs.	No tether required	\$94.99
Safe-N-Snug			
Strolee Wee Care	Use from 8 lbs. to 40 lbs.	Tether strap required	\$64.99

MONTGOMERY WARD STORE - ANCHORAGE 279-4444

Strolee Wee Care	Use from 8 lbs. to 40 lbs.	Tether strap required	\$59.99
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MONTGOMERY WARD CATALOG 279-4466

Bobby Mac Champion	Use from 7lbs. to 40 lbs.	No tether required	\$49.00
Strolee Wee Care	Use from 8 lbs. to 40 lbs.	Tether strap required	\$52.00
Safe-T-Rider	Use from 20-65 lbs. (1 to 10 yrs)	see above	\$40.00

J.C. PENNY STORE - ANCHORAGE 279-5656

Bobby Mac Deluxe	Use from birth to 40 lbs.	No tether required	\$59.99
Strolee Wee Care	Use from 8 lbs. to 40 lbs.	Tether strap required	\$62.99

J.C. PENNY CATALOG 277-5661

Hi-Rider	Use from birth to 40 lbs.	No tether required	\$52.99
One Step	Use from 8 lbs. to 43 lbs.	No tether required	\$51.99
Bobby Mac Champion	Use from 7 lbs. to 40 lbs.	No tether required	\$47.99
Bobby Mac w/shield	Use from birth to 20 lbs.		\$56.00
Bobby Mac Conversion Kit (to convert seat to highchair & stroller)			
Stroller Kit			\$39.99
High Chair Kit			\$31.99

Strolee Wee Care Use from 8 lbs. to 40 lbs. No tether required \$59.99
 Bobby Mac Champion Use from 7 lbs. to 40 lbs. No tether required \$49.99

(This list was compiled as of June 17, 1982. Prices subject to change)

COMMON MISTAKES PARENTS MAKE WITH CHILD RESTRAINTS

1. Bundling infant in blankets before placing in child restraint (CR). This makes correct positioning of shoulder harness impossible.
2. Incorrectly placing infant in CR facing frontwards. Baby must ride backwards until he or she can sit up well and weighs 17-20 lbs., when a toddler CR (forward facing) can be used. If the driver must supervise the baby, place the CR in the front seat, facing rearward.
3. Reclining an infant CR with adjustable tilt feature too far down. This could permit the child to be forced out head first by frontal impact. Check manufacturer's instructions for safe degree of tilt.
4. Failing to secure the CR with auto belt. If lap belt does not fit around CR or through its frame, try another seating position in car. A seat belt extender can lengthen the belt. If these do not work, use a different model which should be fitted in the car before purchase.
5. Neglecting to use the harness. This could allow child to be thrown out of CR. (Several shield-type CRs do not use harnesses, but one—"Bobby-Mac"—uses both together.)
6. Failing to use harness on CR with a U-shaped padded armrest. The armrest is a cosmetic feature and will not protect the child in any way. It is a very hazardous object for an un-harnessed child to be thrown against.
7. Leaving harness or anchor straps loosely fastened. This allows the child to experience a very severe jolt during a collision, because webbing is not stretched to absorb impact.
8. Neglecting to fasten top anchor strap. This allows the CR to pivot forward in a frontal crash. It may not be fastened because of parental apathy, unawareness of the anchor's function, unwillingness to bolt anchor plate into car, or uncertainty of how to affix the anchor.
9. Letting children ride loose if they complain or climb out of CR. This commonly happens when children are between 9 and 24 months, when they are becoming mobile and resist being confined. They can and must be taught that the CR is their place in the car. For most children, the parent can accomplish this in a few days or weeks by stopping the car whenever their behavior is intolerable and letting them know that the parent won't start again until they settle down. Firmness and demonstration that everyone else in the car is also restrained will help. Letting the child ride loose a few times will only make buckling up harder next time. Parent must be reassured that child can and will learn, and that the resistance is a passing phase. Making frequent stops during long trips will help, along with entertainment (singing with parent, favorite music on tape cassette, soft small toys).
10. Reclining a forward-facing CR. Child CRs are safer used in upright position, if adjustable. Reclining position is a selling point for manufacturers. Children learn to sleep in upright CR very easily.
11. Failing to double straps back through buckles. Strap buckles of harness and anchor strap are often incompletely threaded, so they could pull out unnoticed.

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National Safety Council

Office of Federal Affairs
1705 DeSales Street, N.W.
Washington, D.C. 20036
(202) 293-2270

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Contact: Chuck Hurley, Executive Director, or Nancy Berk, Policy Analyst

POLICY UPDATE

HIGHWAY SAFETY

OCTOBER 1982

CHILD RESTRAINT LAWS AND PENDING LEGISLATION

STATE	DESCRIPTION
ALABAMA S24	All children less than 3yrs old must be in c.r. when riding in m.v. registered in state. Fine not to exceed \$10. Effective 7/1/82.
CALIF. SB537	All children less than 4yrs old or weighing less than 40lbs must be in C.R. when riding in m.v. weighing less than 600lbs, registered in state and operated by parent/l.g. If parent/l.g. is not driving, safety belt may be substituted. Driver subject to fine if parent not in car, otherwise parent whether driving or not driving is subject to fine. Ticket waived upon acquisition on seat if first offense. \$50 fine for 2nd offense, additional \$50 for subsequent offenses up to maximum of \$200. Signed by Governor 9/8/82. Effective 1/1/83.
CONN. S42	All children less than 4yrs old must be in c.r. when riding in passenger m.v. in the state. Safety belt may be substituted for children between 1-4yrs if riding in back seat only. Exemption for R.V.'s, trucks weighing over 1 ton. Fine \$15-100, waived upon acquisition and installation of seat. Effective 10/1/82.
DELAWARE HB154	All children less than 4yrs old must be in c.r. when riding in m.v. owned/operated by resident parent/l.g. \$25 fine waived upon acquisition of c.r. Effective 6/2/82. Fine effective 8/2/82. State-wide loaner program in place.
FLORIDA HB289	All children less than 6yrs old must be in c.r. when riding in passenger m.v. or pick-up truck registered in Florida and owned/operated by parent/l.g. Safety belt may be substituted for children from 4 to 6yrs. \$15 fine, waived upon proof of purchase. Effective 7/1/83.
ILLINOIS HB608	<p>All children less than 5yrs old must be in c.r. when riding in m.v. or r.v. owned and operated by resident parent/l.g. First offense in \$25, subsequent offenses \$50. (c.r. means any device approved by U.S. DOT designed to restrain, seat or position child. If child is over 40lbs this would mean safety belts are an acceptable restraint)</p> <p>Passed House, Senate in June 1982. Sent to Governor who amendatory vetoed the bill. The legislature will meet in late November to either override the veto or concur with the Governor's changes. The Governor's version is as follows:</p> <p>Beginning July 1, 1983 all children less than 2yrs old must be in c.r. when riding in passenger m.v. owned/operated by resident parent/l.g. Exception for attending to personal needs of the child. If the child is between the ages of 4-6yrs, they must be in child restraint or safety belt. Beginning July 1, 1984 children between the ages of 2-4yrs must ride protected in a c.r. as well. First offense will be warning violation only, subsequent offenses will be maximum \$25 fine.</p>
KANSAS HB2208	All children less than 2yrs must be in c.r. when riding in front seat of passenger m.v. owned/operated by parent/l.g. Oral warning only. Sec. of Transportation to develop program of public information. Effective 1/1/82.

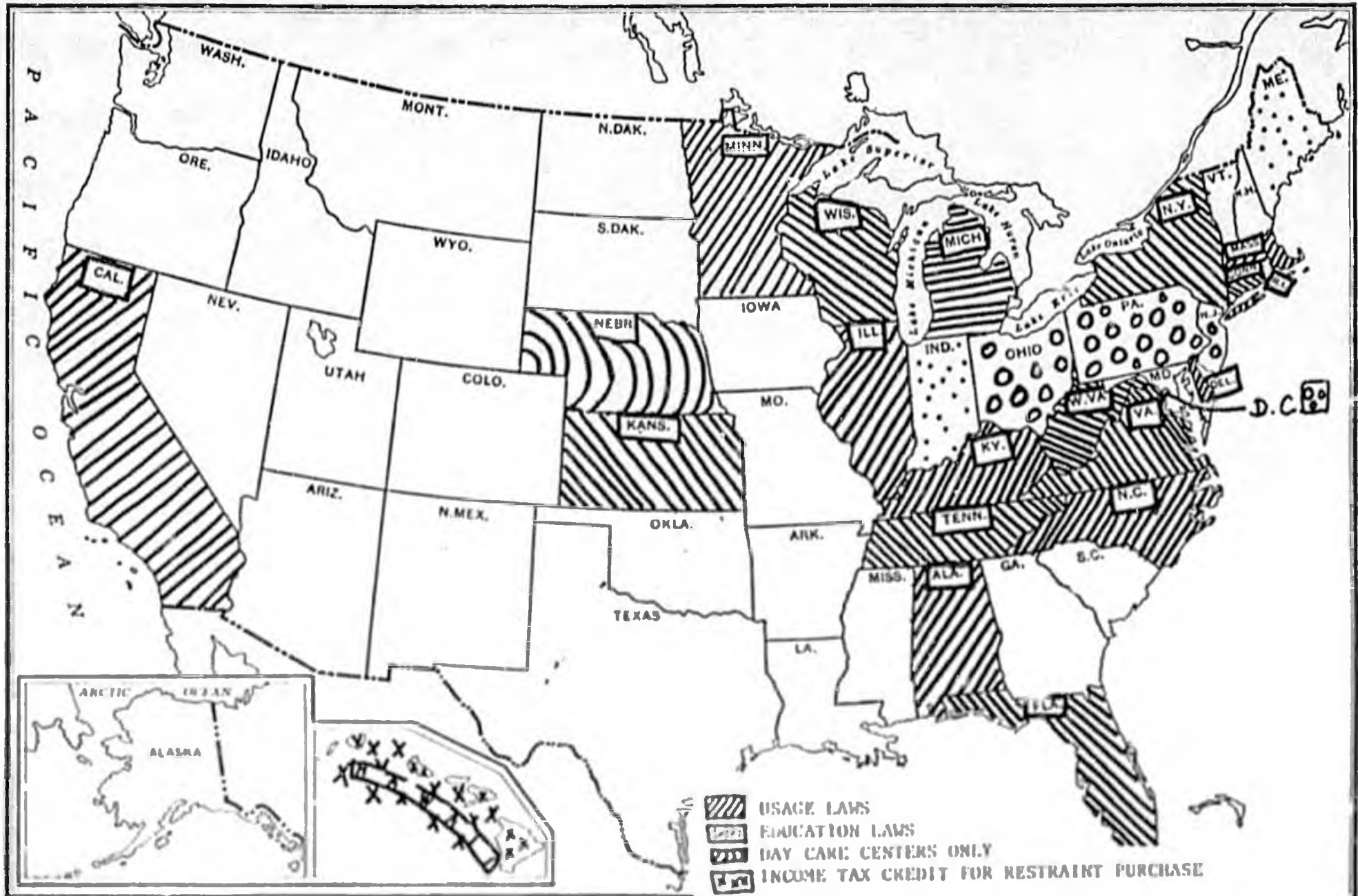
STATE	DESCRIPTION
KENTUCKY SB2	All children less than 40 inches tall must be in c.r. when riding in m.v. owned/operated by parent/l.g. No fine. Effective 7/15/82.
MASS. HB7162	All children less than 5yrs old must be in c.r. or safety belts when riding in m.v. Exemption for taxis, vehicles not equipped with safety belts, if all other seating positions equipped with safety belts are occupied, or if child is physically unable to use restraints. Fine not to exceed \$25, waived upon proof of acquisition. Effective 1/1/82.
MICHIGAN SB115	All children less than 4yrs old must be in c.r. when riding in m.v. operated by resident driver. From 1-4yrs, safety belt may be substituted if riding in back seat. Exemption for nursing mothers. Fine not to exceed \$15, waived upon proof of acquisition. Effective 4/1/82.
MINNESOTA SF263	All children less than 4yrs old must be in c.r. when riding in m.v. owned/operated by parents/l.g. No fine, hazard warning only. Effective 1/1/82.
NEBRASKA LB69	Any person furnishing child care must use c.r. when transporting all children less than 1yr old. Seat belt can be substituted for children over 1yr old. No upper age limit. Driver subject to fine and Child Care Center subject to license (to furnish child care) suspension/revocation. Effective 7/17/82.
NEW YORK S3639 Amend. S8679	Originally all children less than 5yrs old must be c.r. when riding in passenger m.v. registered in state. Amended this past session to children less than 4yrs old in c.r. and 4-5yrs olds in c.r. or safety belts. Also amended to remove emergency vehicles from compliance. Fine of not more than \$25, waived upon proof of purchase or rental of seat. Effective 4/1/82.
NORTH CAROLINA HB893	All children less than 2yrs old must be in c.r. when riding in m.v. registered in state and owned/operated by parent/l.g. Between 1-2yrs, safety belt may be substituted. Exemption if child is occupying seat where safety belts not required, and while attending to personal needs of child. Warning ticket from 7/1/82 to 6/30/84, thereafter \$10 fine. UNC-HSRC will conduct effectiveness study. Effective 7/1/82 to 6/30/85.
RHODE ISLAND H5730	All children less than 3yrs must be in c.r. when riding in front seat of m.v. \$15 fine. Effective 7/1/80. Amended to include back seat. Fine waived upon proof of purchase. Effective 4/81.
TENNESSEE HB300	All children less than 4yrs old must be in c.r. or held in arms of older passenger when riding in m.v. owned/operated by parent/l.g. Exemption for trucks, r.v.'s. \$2-10 fine. Effective 1/1/78. Amended to exclude being held in the arms except when mother is attending to needs of child. Effective 4/1/81.
VIRGINIA HB413	All children less than 4yrs old must be in c.r. when riding in m.v. registered in state and owned/operated by parent/l.g. Between ages of 3-4, safety belt may be substituted. \$25 fine waived upon proof of acquisition or for financial inability. Fine money earmarked for state loaner program. Effective 1/1/83.
WEST VIRGINIA HB517	All children less than 5yrs old must be c.r. when riding in m.v. registered in state. Safety belt can be substituted for 3-4yr olds. \$10-20 fine waived upon proof of purchase. Effective 7/10/81.
WISCONSIN AB600	All children less than 2yrs old must be in c.r. when riding in m.v. owned/operated by parent/l.g. From 2yrs-4yrs, safety belt may be substituted. Fine if child is under 2yrs is \$30-75. Fine if child is between 2-4yrs, \$10-25; if 2nd offense within 3yrs, \$25-200. Effective 12/1/82. No fine until 5/1/82.






STATE	DESCRIPTION
CALIF. A1198	Sec. of Business/Transportation to conduct education program on restraint use by children less than 15yrs.old. Hazard warnings given to people operating m.v. with unrestrained children. Fresno County chosen for pilot survey. Effect. 9/80-1/83.
INDIANA SB88	Dept. of Highways shall develop and implement information program on use of c.r. Effective 9/1/82 to 9/1/84.
MAINE H1560	Commissioner of Public Safety shall develop/implement program to increase restraint use for children. Hazard warning given if vehicle stopped for another reason and unrestrained children are observed. Study of usage rates to be undertaken. Effect. 7/1/81 to 6/8/83.
HAWAII HB2742	\$25. income tax credit for purchase of c.r. Signed by Gov. 7/27/82. Retroactive impact 1/1/82.

PENDING LEGISLATION

STATE	DESCRIPTION	STATUS
NEW JERSEY A851	All children less than 5yrs must be in c.r. when riding in m.v. in N.J. From 18mths to 5yrs, safety belt may be substituted in rear seat only. Exemption if number of children exceeds number of available belts, all unrestrained children must be in rear seat. \$10-15 fine, waived upon proof of acquisition.	Intro. by Assembly-women Garvin. Passed Assembly 47-15 on 6/15/82. In Senate Committee.
SB1322	All children less than 4yrs must be in c.r. when riding in m.v. in N.J. From 12mths-4yrs, safety belt may be substituted in rear seat only. \$25-50 fine waived upon proof of acquisition.	Intro by Sen. Bassano. Will not move due to internal politics.
OHIO HB605	All children less than 4yrs or weighing less than 40lbs must be in c.r. when traveling in m.v. owned/operated by parent/l.g. or day care center. If riding in m.v. other than those listed above but driven by resident of state, less than 1yr olds must be in c.r. From 1-4yrs, safety belts may be substituted. Exemptions for taxis and life-threatening situations. \$10 fine waived upon acquisition of seat.	Intro. by Rep Fisher Passed House 3/82. Passed Senate Comm. 8-1 but unable to get floor vote until Nov
PENN. SB592	All children less than 4yrs old or 40lbs must be in c.r. when riding in m.v. equipped with safety belts and registered in state. \$25 fine, waived upon proof of acquisition.	Intro. By Sen Cekan. Passed Senate 38-10 10/81. Passed House Comm., amended on floor and sent to 2nd Comm. Poor chance.
WASH. D.C. 4-434	All children less than 6yrs old must be c.r. when riding in m.v. registered in D.C. From 3-6yrs, safety belt may be substituted. Exemption if # of children in one family exceed # of seating positions, all available belts must be used. \$25 fine waivable for 1st offense only upon proof of acquisition of seat by either parent or driver.	Intro. by Councilman Ray. 3/82. Hearing 7/15/82. Committee mark-up expected 10/6. Full vote near end of October.
MICHIGAN HB5567	Safety belt legislation-All drivers and front seat passengers must wear safety belt. Civil violation. \$25 fine.	Intro. by Rep. Hollister 3/82. Vote not likely until 11/82.

CHILD RESTRAINT LAWS AND PENDING LEGISLATION



-  USAGE LAWS
-  EDUCATION LAWS
-  DAY CARE CENTERS ONLY
-  INCOME TAX CREDIT FOR RESTRAINT PURCHASE
-  PENDING LEGISLATION

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UNIVERSITY OF COLORADO LAW REVIEW

MEMORIAL TO JUSTICE BRONKHORST
Edward J. Kane

DEPARTMENT OF LAW AND PUBLIC AFFAIRS
AMERICAN BAR ASSOCIATION
Volume 7, Number 1

A RELATIVISTIC CONCEPTION OF
LEGAL THEORY
Roger W. W. W.

LEGISLATING AND JUDICIAL REVIEW
Michael J. Maggioni

THE LEGAL THEORY OF
CONSTITUTIONAL LAW
George H. Ford

COMMENTS

FORCE AND WILL: AN EXPLORATION OF THE USE
OF SPECIAL MASTERS TO IMPLEMENT JUDICIAL
DECREES

CHILD SAFETY IN AUTOMOBILES: MANDATORY
RESEATING

UNITARY AND DIRECT ACTION: A DEFENSE
OF A CONCEPT

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CHILD SAFETY IN AUTOMOBILES: MANDATORY RESTRAINT-USE LAWS

Automobile safety is an issue of long-standing concern, but only recently has special attention been focused on the safety needs of young children, to whom cars pose one of the largest public health threats in the country.¹ This threat would be greatly diminished if each pre-school aged child were properly secured in a child restraint device (CRD) each time he or she traveled in a motor vehicle.

A CRD is a car seat, padded shell, or harness which is designed to protect infants and young children in the event of an accident, and which is usually secured in place by a vehicle's existing lap belts.² These devices are fairly inexpensive and readily available, yet they are rarely used. In fact, a leading study found that less than ten percent of children transported in motor vehicles were adequately protected against the possibility of injury.³

A growing awareness of this public health problem has resulted in passage of legislation mandating the use of CRDs in two states⁴ and proposed legislation in twenty-eight others.⁵ This Comment will examine the laws mandating the use of CRDs and the legal issues which may arise from them. The efficacy of the various statutes will be analyzed as well as their constitutional validity under state police powers. An evaluation of the potential impact of CRD laws on auto-

1. See text accompanying notes 6-8 *infra*.

2. Some CRDs are designed solely for use by infants while others protect only toddlers capable of sitting alone. Many restraint devices are convertible and can be used from birth until the child weighs more than forty to fifty pounds, at four or five years of age. For a complete description and evaluation of many of the CRDs marketed today, see MICHIGAN'S MOTOR VEHICLE OCCUPANT PROTECTION PROGRAM, MICHIGAN TRAFFIC SAFETY INFORMATION COUNCIL, A DETAILED REVIEW OF CURRENTLY MARKETED INFANT AND CHILD RESTRAINTS (1979); *Child Restraint Systems*, 42 CONSUMER REPORTS 314 (1977).

3. See Williams, *Observed Child Restraint Use in Automobiles*, 130 AM. J. DISEASES OF CHILDREN 1311 (1976).

4. CRD-use laws are in effect in Tennessee and Rhode Island. See notes 33 and 41 *infra*.

5. Child restraint bills have been proposed in the following states: Alabama, Arizona, California, Colorado, Connecticut, Delaware, Hawaii, Illinois, Louisiana, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nebraska, New Hampshire, New Jersey, New York, North Carolina, North Dakota, Ohio, Oregon, South Dakota, Virginia, Washington, West Virginia, and Wisconsin. See ACTION FOR CHILD TRANSPORTATION SAFETY, SUMMARY OF PROPOSED CHILD RESTRAINT LEGISLATION AND ALTERNATIVE MODEL LAWS (1979, updated May, 1980) [hereinafter cited as ACTS].

mobile accident litigation will follow. Before turning to those issues, however, the problem to which CRD laws are addressed will be more fully described.

THE PROBLEM

Motor vehicle accidents cause death and injury to more children than any other single cause, including childhood diseases.⁶ In 1979 alone, 1159 children under the age of five died, and at least fifty times that number were injured, in such accidents in the United States.⁷ Colorado contributed fourteen fatalities and 835 recorded injuries to that toll.⁸ These high numbers are due primarily to two factors: the physical characteristics of young children and the positions they usually occupy as unrestrained passengers in motor vehicles.

The unique center of gravity and small size of young children make them particularly vulnerable to serious injuries in automobile crashes.⁹ A child's head makes up a great proportion of his overall body weight, and this, coupled with an inability to brace himself with his short arms and legs, greatly increases the likelihood that he will be propelled head-first in the direction of any impact point. The result is a high incidence of head injuries and related deaths among accident victims in this age group.¹⁰ In fact, such injuries can occur even in the absence of an actual accident when an unsecured child is thrown against the automobile's interior by a sudden swerve or application of the brakes.¹¹ Larger and heavier passengers, on the other hand, are less likely to be shifted by abrupt driving maneuvers.

The physical characteristics of very young children also tend to

6. Automobile accidents are the leading cause of death and serious injury for all children beyond one month of age. See Shelness & Charles, *Children as Passengers in Automobiles: The Neglected Minority on the Nation's Highways*, 56 *PEDIATRICS* 271 (1975).

7. DEPARTMENT OF TRANSPORTATION, NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION (NHTSA), *HIGHWAY SAFETY 1979: REPORT ON ACTIVITIES UNDER THE HIGHWAY SAFETY ACT OF 1966* (1980). This report contains only death statistics. Injury statistics are not published but are kept on file by NHTSA. The National Electronic Injury Surveillance System file kept at NHTSA shows that 60,408 pre-schoolers injured by motor vehicles were transported to emergency rooms in 1979. Telephone interview with Grace Hazard, data retrieval specialist, National Center for Statistics and Analysis, NHTSA, Sept. 16, 1980.

8. MOTOR VEHICLE DIV., COLO. DEP'T OF REV., *STANDARD SUMMARY OF MOTOR VEHICLE TRAFFIC ACCIDENTS* (1979).

9. See Karwacki & Baker, *Children in Motor Vehicles: Never Too Young to Die*, 242 *J. AM. MED. ASSOC.* 2848 (1979); Alter, *Unsafe at Any Age? Children and Car Safety*, *PARENT'S MAGAZINE* Feb. 1979, reprinted in *INSURANCE INSTITUTE FOR HIGHWAY SAFETY (IIHS) STATUS REPORT 8* (Mar. 19, 1979).

10. Karwacki & Baker, *supra* note 9.

11. Alter, *supra* note 9, at 9.

and the forward-moving weight of the person holding him.¹⁸ This same crushing action can occur when a seatbelt is fastened around both the adult and the child on his lap. In a collision, the weight of the adult is forced against the child penned in the seatbelt with him, and the probability of serious abdominal injury to the child is greatly increased.¹⁹

The final variation of on-lap travel is a seatbelted adult holding an unrestrained child on his lap. In this position, the adult does not crush the child in an accident, but is powerless in most cases to prevent other harm to the child, for even the smallest infant weighs the equivalent of several hundred pounds at the instant of impact, and is likely to be torn from even the strongest of human arms.²⁰ In short, holding a child can never be an adequate safety alternative to the use of an appropriate restraint device.

The need for CRDs will not be obviated by the automatic restraint systems which federal legislation will require on all new cars by 1984.²¹ While manufacturers will be able to satisfy the requirements by providing either automatic seatbelts or airbags in their vehicles, neither option is fully adequate for child safety needs. Automatic seatbelts designed for average sized adults will not offer even minimal protection to infants. Airbags, on the other hand, will diminish the threat to children riding in the front seat, but present legislation does not require airbag installation for the protection of rear seat passengers, a class composed largely of children.²² Furthermore, airbags will provide little protection in side- and rear-impact collisions and rollovers.²³

Finally, unlike a CRD, an airbag would not play a role in preventing the occurrence of an accident. A study conducted at the University of North Carolina concluded that more than two hundred

18. *Id.* at 3.

19. *Id.* at 4.

20. The force that a child will exert upon impact can be roughly calculated by multiplying the child's weight and the vehicle's speed together. For instance, a fifteen pound infant will exert a force of three hundred pounds in a twenty mile per hour collision. See HHS, *An Evaluation of Adult Clasping Strength for Restraining Lap-Held Infants*, discussed in HHS STATUS REPORT 6 (Mar. 19, 1979).

21. Automatic restraint systems are being phased in over several years with large cars being targeted first. All new cars will have to meet the requirement by the 1984 model year. 49 C.F.R. § 371.204 (1979).

22. One survey found that about seventy percent of the nearly 9000 children observed in motor vehicles were riding in the back seat. Riksinger & Williams, *Evaluation of Programs Designed to Increase the Protection of Children in Cars*, 62 PEDIATRICS 280, 286 (1978).

23. See Comment, *Occupant Protection in Automobiles*, 27 AM. U. L. REV. 635 (1978) for a thorough discussion of automatic restraint systems.

of that state's traffic accidents in 1977 were caused by unrestrained children who had distracted the driver of the vehicle in which they were riding. Children who fell off the seat or interfered with the operation of the motor vehicle were, in many instances, found to have been the direct cause of a crash.²⁴

All of the problems discussed above would be greatly alleviated by the use of CRDs. Experts in the field generally agree that the number of children killed and injured in automobile accidents would be minimized—some claim by as much as ninety percent—if CRDs were consistently and properly used.²⁵ Yet recent data shows that only seven percent of the children riding on the nation's roads are adequately secured for protection against possible harm.²⁶ Parents who wear their own seatbelts while transporting their children have been found to use child restraints more than any other group. Yet even in that situation, only twenty-two percent of the passenger children were secured by a CRD or seatbelt.²⁷ The great number of children harmed, coupled with the low voluntary usage rate of adequate restraints, has led to a growing interest in a statutory solution to this public health problem.

THE STATUTES

The field of automobile safety is one which legislators enter with trepidation. Traditional public hostility toward regulation of individual driving habits has led to a reluctance to impose safety requirements on individual drivers. Public sentiment was so strong against the federally mandated seatbelt-ignition interlock system,²⁸ for example, that Congress was forced to repeal the measure less than a

24. This study was summarized in MICHIGAN ASSOCIATION FOR TRAFFIC SAFETY, FORMATS, *Child Passenger Safety News* (Feb. 1980).

25. A study of crashes done in Washington state by Dr. Robert G. Scherz, for example, concludes that "[t]he difference between deaths and disabling injuries between the restrained and unrestrained pre-school children was highly significant. If all of the children in the 0-5 age group had been restrained at the time of the accident, then the . . . deaths may have been reduced from 124 to 13 (down 90%) and disabling injuries reduced from 716 to 238."

Alter, *supra* note 9, at 10.

The reduction in injuries in the Washington study is about 33%, a rate very similar to that obtained by analyzing accidents involving children under fifteen years of age in North Carolina. The North Carolina study found that "[u]se of restraints reduced the injury rate by 39% in the front seat and by 31% in back." Williams & Zador, *supra* note 16, at 10.

26. Williams, *supra* note 3.

27. *Id.* at 1314.

28. The seatbelt-ignition interlock system prevented a vehicle's engine from being started until seatbelts were buckled. An annoying buzzer sounded if seatbelts were unfastened while the seat was occupied.

year after it went into effect.²⁹ This public hostility explains the absence of mandatory seatbelt-use laws in any of the states.

The somewhat warmer reception given to CRD-use laws in state legislatures is undoubtedly due to the age of those who would benefit from such legislation. Because infants and young children are completely dependent on others for their well-being, state law has historically provided for their health and safety when those charged with their care fail adequately to do so.³⁰ The effectiveness and practicality of extending state protection to children as automobile passengers will be evaluated by examining the various CRD statutes which have been proposed.

The Existing Laws

Two states have succeeded in passing CRD legislation: Tennessee³¹ and Rhode Island.³² The pioneering Tennessee statute, which went into effect at the beginning of 1978, requires that all children under the age of four be secured in a CRD when riding in a vehicle owned and operated by their parents.³³ Exemptions are allowed for children riding on other passengers' laps, and for children riding in recreational vans and certain trucks.³⁴ The penalty for breaking this law is a moderate fine; and proof of the violation cannot be raised in civil suits for negligence.³⁵

29. 15 U.S.C. § 1410b(b)(1)(B) (1976).

30. See text accompanying notes 83-92 *infra*.

31. TENN. CODE ANN. § 55-9-214(b) (1980).

32. R. I. GEN. LAWS § 31-22-22 (1980).

33. TENN. CODE ANN. § 55-9-214 (1980):

(b) Effective January 1, 1978, every parent or legal guardian of a child under the age of four (4) years residing in this state shall be responsible, when transporting his child in a motor vehicle owned by that parent or guardian operated on the roadways, streets or highways of this state, for providing for the protection of his child and properly using a child passenger restraint system meeting federal motor vehicle safety standards, or assuring that such child is held in the arms of an older person riding as a passenger in the motor vehicle. Provided that the term "motor vehicle" as used in this paragraph shall not apply to recreational vehicles of the truck or van type. Provided further that the term "motor vehicle" as used in this paragraph shall not apply to trucks having a tonnage rating of one (1) ton or more. Provided that in no event shall failure to wear a child passenger restraint system be considered a contributory negligence, nor shall such failure to wear said child passenger restraint system be admissible as evidence in the trial of any civil action.

(c) Violation of any provision of this section is hereby declared a misdemeanor and anyone convicted of any such violation shall be fined . . . not less than two dollars (\$2.00) nor more than ten dollars (\$10.00) for each violation of subsection (b) of this section.

34. *Id.*

35. *Id.*

From a safety standpoint, the most controversial provision of this law is the so-called "bates-in-arms" exemption.³⁶ Holding a child in a passenger's arms has been shown to be an entirely inadequate substitute for the use of a restraint,³⁷ and there is hope among the original sponsors of the Tennessee law that this exemption will be repealed at some future date.³⁸ Unfortunately, similar provisions were included in bills introduced in four other states.³⁹

has been
repealed

A second aspect of the Tennessee law which may lessen its effectiveness is that it applies only to parents who are transporting their own children. Although the majority of children less than four years old are likely to be driven by a parent whenever they ride in a vehicle, the provision may nevertheless lead to enforcement problems. Since most children carry no identification, the temptation for any parent or guardian to simply assert that he is, for example, the child's uncle or babysitter when stopped for a possible violation is evident. A police officer faced with such a statement would in many cases lack probable cause to go forward and issue a citation.⁴⁰

Tennessee's final exempting provision, which excludes trucks and vans from the law's application, was probably viewed as a practical necessity because of the limited seating which is available in those vehicles. The addition of a further provision requiring that restraints be used if seating were available would strengthen the protective purpose of the law while still acknowledging those practical concerns.

A CRD-use law with quite different provisions went into effect in Rhode Island in July of 1980.⁴¹ Unlike the Tennessee statute, this

36. The exemption allowed for children who ride on another passenger's lap was added as an amendment by one of the bill's opponents. He argued that the happiest day of his daughter's life was when she brought her new baby home from the hospital in her arms and that the law would deny this pleasure to other new mothers. It was feared that the law would not be passed if the exemption were removed. R. Sanders, *Effective Intervention With State Legislatures* (paper presented at the Child Passenger Safety Conference, U. of Tenn. Transp. Center, May 10, 1978, available from Action for Child Transportation Safety).

37. See text accompanying notes 17-20 *supra*.

38. Sanders, *supra* note 36.

39. This language was included in bills introduced in Illinois, Louisiana, New Hampshire, and New Jersey, none of which passed. ACTS, *supra* note 5.

40. Probable cause exists when the facts and circumstances within the officer's knowledge are sufficient in themselves to warrant a belief by a man of reasonable caution that an offense has been committed. *Brinegar v. United States*, 338 U.S. 160, 175-76 (1949). More than mere suspicion is required. *Henry v. United States*, 361 U.S. 98, 101 (1959).

41. R. I. GEN. LAWS § 31-22-22 (1980):

Child Passenger Restraint Systems. Any person transporting a child three (3) years of age or under in the front seat of a motor vehicle operated on the roadways, streets or highways of this state, will provide for the protection of the child and

law applies to all persons driving in Rhode Island and therefore avoids the potential enforcement problems posed by a "parents-only" provision. The unique feature of Rhode Island's law is that it requires CRD use by children under the age of four only while they are riding in the front seat of a vehicle.⁴³ The law thus addresses the most hazardous practices of unrestrained, or on-lap, front seat travel, but fails to provide protection for the majority of child passengers: those who ride in the back seat.⁴⁴ A more stringent bill, to be introduced in the South Dakota legislature,⁴⁵ would provide the added protection. That bill would require that children ride in the back seat *and* be secured in the vehicle's available seatbelts whenever possible. Should it be necessary for a child to be transported in the front seat, a restraint device appropriate for the child's age and size, such as is required in Rhode Island, would have to be used.

Pending Legislation: Some Further Options

The majority of CRD legislation introduced in other states is similar to the Tennessee law, but without the "babes-in-arms" exemption.⁴⁶ These statutes typically would require that a parent who is driving his own vehicle must have his young children secured in CRDs. The protected class of children is most often limited to those younger than four years, or alternatively, to those who weigh less than forty pounds.⁴⁷ These age and weight limitations provide convenient lines for the legislators to draw, since they encompass the class

properly use a child passenger restraint system approved by the United States Department of Transportation under Federal Standard 213, provided that in no event [shall] failure to wear a child passenger restraint system be considered as contributory negligence, nor [shall] such failure to wear said child passenger restraint system be admissible as evidence in the trial of any civil action.

Any person deemed to be in violation of this section shall be issued a citation with a fine of fifteen (\$15.00) dollars and it will be recorded on said person's driving record within the rules and regulations governing Section 31-43.

42. *Id.*

43. While one study found that a "back seat location reduced the injury rate by 28% among unrestrained child passengers and by 18% among restrained children," it further concluded that restrained children are safer than those who are unrestrained, regardless of their position in a vehicle. Williams & Zador, *supra* note 16, at 71.

44. The South Dakota proposal is described in ACTS, *supra* note 5.

45. Arizona H.B. 2418 (defeated in committee); Colorado H.B. 1440 (defeated in the House); Michigan substitute for H.B. 5327; Minnesota H.B. 156 and S.B. 274; Nebraska Leg. B. 79; North Carolina H.B. 1018 (defeated); North Dakota H.B. 1490 (defeated); Oregon H.B. 2667 (defeated in the House); Washington H.B. 199 and S.B. 2895 (withdrawn by sponsor); Wisconsin Asmb. B. 747. The sponsors of many of the defeated bills plan to reintroduce their respective proposals, ACTS, *supra* note 5.

46. *Id.*

of passengers for whom CRDs are typically designed.⁴⁷ Also, by drafting legislation concerned with CRD use only, legislators can minimize the political and public opposition which would accompany a more far-reaching restraint-use law.

The four year age limit is not universal, however. California has a bill pending which would encourage the use of appropriate restraint systems for all children under the age of sixteen.⁴⁸ This bill is designed primarily to educate the public and would allow law enforcement officers to issue verbal hazard warnings, but not citations, to non-complying motorists. Other age variations are found in the South Dakota legislation mentioned above,⁴⁹ which would apply to children up to thirteen years of age, and in a Maryland bill which would require restraint use for the protection of children who are less than eight.⁵⁰

Proposed CRD laws also vary in their determination of who will be responsible for complying with their respective terms. As noted, the majority would hold only parents or legal guardians liable for the failure to use restraint devices. Statutes with broader coverage usually are written to apply to all resident drivers,⁵¹ or to the drivers of all vehicles which are registered in the enacting state.⁵² One novel variation is the New York proposal,⁵³ which would impose a penalty on both the driver of a vehicle in which an unrestrained child was riding, and the vehicle owner who knowingly permitted a child to be transported in that manner.

Other provisions which may be incorporated into some proposed statutes include a ban on carrying passengers in the cargo areas of hatchbacks, station wagons, and pickup trucks,⁵⁴ and on the practice of buckling one seatbelt around two people.⁵⁵ One exemption under consideration in some states allows children with medical problems

47. See note 2 *supra*.

48. California Asmb. B. 1198, ACTS, *supra* note 5.

49. See note 44 and accompanying text *supra*.

50. Maryland H.B. 33, ACTS, *supra* note 5.

51. See, e.g., Maryland H.B. 33, ACTS, *supra* note 5.

52. See, e.g., Colorado H.B. 1440, ACTS, *supra* note 5.

53. New York S.B. 2623, ACTS, *supra* note 5.

54. See, e.g., Massachusetts S.B. 1269 which would prohibit the carrying of passengers in open trucks. ACTS, *supra* note 5. This particular provision has been enacted by city ordinance in Ogden, Utah. This five year old law forbids persons from riding in any portion of a motor vehicle not designed or intended for use by passengers. It further makes it illegal to operate a motor vehicle while any person is standing on the vehicle's seats. MICHIGAN ASSOCIATION FOR TRAFFIC SAFETY, FORMATS, *Child Passenger Safety News* 4 (Apr. 1980).

55. See, e.g., Maryland H.B. 33; Washington H.B. 199 and S.B. 2895, ACTS, *supra* note 5.

which may make the use of a CRD impossible, to travel without being secured in such a device.⁵⁶ To avoid possible abuse of this provision, a doctor's certificate of exemption would be required by some statutes.⁵⁷

In combining any of these provisions into a workable child restraint law, the interest in maximizing safety should be balanced against considerations of fairness and practicality. The statutes must be flexible. For example, a large family that can afford only a small car with inadequate seating for all family members should not be subject to a penalty each time they venture onto the public roads. A law which requires the use of CRDs for available seating and which further requires all unrestrained children to ride in the back seat might best accommodate both safety concerns and tight family budgets.

Flexibility and compromise is also necessary in striking a reasonable balance between the strictness of a restraint law's provisions and the determination of who will be subject to the law's terms. For example, a requirement that CRDs be obtained and used would be less controversial under a law that applies only to parents and legal guardians, rather than to all in-state drivers. Conversely, statutes which apply to all drivers might require only that the vehicle's available seatbelts be used for the protection of children. Under a law of the latter type, parents could still be encouraged to obtain CRDs by other means, such as by allowing a tax credit as an incentive for their purchase. The tax credit incentive is presently under consideration in some states.⁵⁸

Costs and Enforcement

The burden which would be imposed on members of the public by requiring them to obtain CRDs should not be viewed as an insurmountable problem. The cost of these devices, generally between twenty and forty-five dollars,⁵⁹ is not unreasonable when it is consid-

56. Members of Action for Child Transportation Safety find exemptions for "physical or medical" reasons unacceptable and argue that children unable to sit in the typical car seat style CRD — because of a bulky cast or perhaps some birth defect — are nevertheless entitled to protection. They suggest larger shield or harness type restraints as alternatives. ACTS, *supra* note 5. See also L. Schneider, J. Melvin, C.E. Cowney, *Impact Sled Test Evaluation of Restraint Systems Used in Transportation of Handicapped Children* (paper presented to the Society of Automotive Engineers, Detroit 1979) discussed in IIHS STATUS REPORT 5 (Mar. 19, 1979).

57. See, e.g., Colorado H.B. 1440; Massachusetts S.B. 1097, ACTS, *supra* note 5.

58. See, e.g., Michigan S.B. 394, ACTS, *supra* note 5.

59. See note 2 *supra*.

ered that a CRD provides up to four years of protection and that each CRD can be re-used by several children. The price of the device could simply be considered, along with license plates, safety inspections, and insurance, as one of the costs of owning and operating a motor vehicle.

On the other hand, CRD legislation would probably receive greater public acceptance if it were accompanied by programs designed to minimize the cost of compliance. Legislative efforts toward this end could include the tax credit mentioned above and, possibly, Medicaid coverage of CRD purchases for the poor. It has been suggested that Medicaid payments for CRDs could be justified under the same theory that applies to childhood vaccinations—that such devices constitute effective preventive medicine.⁶⁰

As an alternative to government help, many innovative private programs offer means of keeping compliance costs down. Examples include CRD rental programs which have been successfully established in several parts of the country, as well as programs which offer used restraint devices for sale at minimal cost.⁶¹ A different approach has been implemented by one insurance company which provides CRDs to its insured families without charge, thereby spreading the cost of the devices among all of its policy holders.⁶² Thus, several possibilities exist in both the government and private sectors which could minimize the financial burden imposed by CRD-use laws.

A final concern about the practicality of these statutes centers on the enforcement problems that they may present, although these problems appear to be no greater than those which accompany many other traffic regulations. As in the case of driving without a valid license, which is against the law⁶³ but usually goes undetected, CRD violations might often be found only after the driver of the car is stopped for another infraction. More likely, an officer would simply

60. Action for Child Transportation Safety is among those groups exploring the possibility of Medicaid payments for CRD purchases. Allowing such payments was urged by the safety coordinator of a pediatric preventive medicine program in testimony before the House Commerce Subcommittee on Oversight and Investigation. *IIHS STATUS REPORT 7* (May 17, 1979).

61. Several such programs are described in *Child Passenger Safety News*, *supra* note 24.

62. Robert E. Vanderbeck, president of the League General Insurance Companies of Southfield, Michigan told the House Commerce Subcommittee on Oversight and Investigation that "[t]he program . . . makes economic sense and we believe will be cost effective — it will pay for itself through reduced claims." *IIHS STATUS REPORT 6* (May 17, 1979).

63. See, e.g., *COLU. REV. STAT. § 42-2-101* (1973).

notice a child standing on the seat of a vehicle or riding on another person's lap and then pull that vehicle over in order to issue a ticket to the driver. Children traveling in dangerous positions are often visible to other motorists on the road and no extraordinary surveillance techniques would be needed by police charged with halting that practice.

THE POLICE POWER

Each state possesses authority to pass laws which protect the health, safety, or welfare of the public.⁶⁴ This authority is an inherent aspect of the state's sovereignty and is known as its police power.⁶⁵ In determining the validity of any legislation passed pursuant to this power, courts typically employ a two-step analysis. Such a law will be upheld if it furthers a legitimate state objective and if the means employed to attain it are reasonably related to that end.⁶⁶

A Legitimate Objective

An appropriate state objective has been held to be any one which promotes or protects the public welfare.⁶⁷ This definition is elastic enough to encompass the wide variety of laws which are enacted in response to changing public needs. The shift from an agrarian to an industrial society, for example, created the need for regulations such as workmen's safety, pure food, and urban housing and sanitation laws.⁶⁸ More recently, the public welfare concept has been expanded to include rent control laws,⁶⁹ anti-deceptive credit practice laws,⁷⁰ and anti-billboard and landmark preservation statutes

64. See *Berman v. Parker*, 348 U.S. 26, 32 (1954); *East New York Bank v. Hahn*, 326 U.S. 230, 232 (1945); *Nebbia v. New York*, 291 U.S. 502, 523 (1934); *License Cases*, 46 U.S. (5 How.) 504, 583 (1847).

65. The term "police power" appears to have been first used by Justice Marshall in *Brown v. Maryland*, 25 U.S. (12 Wh.) 419, 433 (1827). It is a residuary power, one which was retained by the states after certain enumerated powers had been transferred to the new federal government.

66. "To justify the state in . . . interposing its authority in behalf of the public, it must appear, first, that the interests of the public . . . require such interference; and, second, that the means are reasonably necessary for the accomplishment of the purpose, and not unduly oppressive upon individuals." *Goldblatt v. Hempstead*, 369 U.S. 590, 594-95 (1962) quoting *Lawton v. Steele*, 152 U.S. 133, 137 (1894).

67. See, e.g., *In re Interrogatories of the Governor*, 97 Colo. 587, 595, 52 P.2d 663, 667 (1933) which notes that this power is as "broad as the public welfare."

68. See *Morissette v. United States*, 342 U.S. 246, 253-54 (1952).

69. *Hutton Park Gardens v. West Orange Town Council*, 68 N.J. 543, 350 A.2d 1 (1973).

70. *Birkenfield v. City of Berkeley*, 17 Cal.3d 129, 50 P.2d 1001, 130 Cal. Rptr. 465 (1976).

designed to protect the aesthetic features of an area.⁷¹

Regulations such as these can be viewed as an attempt to redress an unequal balance of power. When members of the public are faced with some threat with which they cannot deal on an individual level, the constitutional niche known as the police power has enabled the state to attempt to protect their well-being by regulating the conduct of those who do have the power and ability to mitigate the potential harm. Thus, the acts of the employer, the manufacturer, and the polluter may be regulated for the benefit of the worker, the consumer, and the public at large.

The CRD statutes fit easily into this pattern. In passing these laws, states are seeking to protect a particularly powerless class of people by regulating the behavior of those in the best position to minimize the risk to that class. Insofar as they seek to promote safety, these statutes are at the core of the police power doctrine.⁷²

Highway Regulations. Specifically, CRD legislation is addressed to the problem of highway safety, an area in which the states have extensively exercised their rule-making powers.⁷³ Since the arrival of the automobile, both drivers and vehicles have been subjected to a variety of statutory requirements designed to protect the driving and riding public. In evaluating the validity of CRD laws as highway safety regulations, a useful analogy can be drawn from the motorcycle helmet laws which, like CRD laws, mandated the use of specialized equipment.

The controversial helmet laws, which swept the country approximately a decade ago, were sustained as valid police power legislation by the overwhelming majority of courts which faced the issue.⁷⁴ The Colorado Supreme Court's discussion in the case of *Love v. Bell*⁷⁵ is typical of many of these opinions. As with most of the courts across the country which addressed the problem, the Colorado

71. *Penn Central Transp. Co. v. New York*, 438 U.S. 104, 129 (1978); *John Donnelly & Sons v. Mallar*, 453 F. Supp. 1272 (S.D. Me. 1978).

72. *Kelley v. Johnson*, 425 U.S. 238, 247 (1976).

73. *South Carolina Highway Dep't v. Barnwell Bros.*, 303 U.S. 177 (1938); *Bibb v. Navajo Freight Lines*, 359 U.S. 520 (1959); *People v. Brown*, 174 Colo. 513, 485 P.2d 500 (1971); *Zaba v. Motor Vehicle Div.*, 183 Colo. 335, 516 P.2d 634 (1973).

74. Helmet statutes were struck down in only two of the thirty-three states in which they were challenged: Illinois, *People v. Fries*, 42 Ill.2d 446, 250 N.E.2d 149 (1969) and Michigan, *American Motorcycle Association v. Davids*, 11 Mich. App. 351, 158 N.W.2d 72 (1968). The Michigan Supreme Court upheld a very similar municipal law several years later in *City of Adrian v. Poucher*, 398 Mich. 316, 247 N.W.2d 798 (1976). The helmet cases are collected in 32 A.L.R.3d 1270.

75. 171 Colo. 27, 465 P.2d 118 (1970).

court studiously avoided the most salient issue which grew out of the helmet legislation, the issue of whether mandatory self-protection and of regulating a person for his own good was a valid state objective.⁷⁶ Instead, the court sought to find some benefit which the helmet statutes provided to other highway users in order to sustain the law. It found one such benefit in the economic area, noting the "laws may be passed within the police power to protect the public from financial loss."⁷⁷ In drawing upon a record which showed a higher frequency of serious head injuries and deaths among bare-headed riders than among those who wore helmets, the court ruled that the law protected the public's financial health since it prevented motorists involved in accidents with motorcycles "from being required to respond in damages more heavily than might be the case if the motorcycle driver and passenger were wearing helmets."⁷⁸ Other courts also employed the "financial health" argument and cited increased public medical and welfare costs which would have to be paid to disabled cyclists, as well as higher insurance rates.⁷⁹

Most of the helmet law opinions did not rest solely on this economic protection analysis, but also sought some connection between helmets and the public's physical well-being. Many courts found such a connection in the "flying debris" theory, which is based upon the hypothesis that an unprotected cyclist might be struck in the head by loose gravel or other objects thrown up by passing vehicles, thereby causing the cyclist to lose control and possibly cause an accident.⁸⁰ The courts were unswayed by the argument that such a chain of events had never been known to have occurred.

If CRDs are substituted for helmets in the analysis above, the reasoning employed in the typical helmet case not only remains valid but is, in fact, strengthened. As with helmets, CRDs offer the potential for mitigating physical, and therefore, financial damages resulting from highway accidents. More importantly, a CRD law would not leave a court having to strain for a "loose gravel" rationale in

76. Few courts were willing to ground their opinions on the self-protecting aspect of helmet legislation. Two cases which did discuss this issue were *People v. Carmichael*, 30 Misc. 2d 388, 288 N.Y.S.2d 931 (1968) (state has an interest in preserving strong, healthy citizens) and *State v. Mels*, 103 N.J. Super. 353, 247 A.2d 176 (1968) (state has an interest in protecting people from their own carelessness).

77. 171 Colo. at 33, 465 P.2d at 121.

78. 171 Colo. at 33, 465 P.2d at 121-22.

79. See, e.g., *State v. Anderson*, 3 N.C. App. 124, 164 S.E.2d 48 (1968), *aff'd*, 275 N.C. 168, 166 S.E.2d 49 (1969).

80. See 171 Colo. at 33-34, 465 P.2d at 122 and the cases cited therein.

searching for a connection between the regulation and the physical safety of non-regulated members of the public. In contrast to the helmet law discussions on this point, the potential beneficiaries of CRD legislation are not hypothetical; their existence is clearly documented in the "0-4 years" column of each state's accident reports.

The mandatory helmet statutes are perhaps on the periphery of valid police legislation. They raise the difficult problem of the extent to which an individual can be regulated for his own good. Shifting political attitudes on just this point have resulted in the repeal of helmet laws in twenty-eight of the forty-nine states which originally enacted them.⁸¹ The notion of protecting a person against himself is not a factor in CRD legislation, however, for in requiring the use of child restraints the state is attempting to protect those too young to make rational choices in their own best interest. In this vein, it is interesting to note that of those states which repealed helmet laws, nearly two-thirds reenacted such legislation applicable only to minors.⁸²

Pa- is Patriae. The state's interest in the well-being of its youth of ancient origin. Plato believed that the good of the state as a whole justified the regulation of child-rearing practices.⁸³ His pupil, Aristotle, differed on this point, suggesting that regulations were necessary only to protect the interests of the individual child.⁸⁴ These two theories have survived to the present and are often meshed with a third concern, an interest in preserving the family structure as the basic unit in society.⁸⁵

81. California is the only state never to have enacted helmet legislation. A summary of the recent status of helmet laws in this country, including dates of enactment, repeal and pending legislation is compiled in ILLIS STATUS REPORT 5-8 (Apr. 30, 1979).

82. *Id.*

83. PLATO, REPUBLIC Bk. V (E. Hamilton & H. Cairns, eds., THE COLLECTED DIALOGUES OF PLATO 1961, at 698-707), mentioned in *Meyer v. Nebraska*, 262 U.S. 390, 401-2 (1923).

84. ARISTOTLE, POLITICS 32-33 discussed in Kleinfield, *The Balance of Power Among Infants, Their Parents and the State*, 4 FAM. L. Q. 410-412 (1970).

85. See text accompanying notes 105-08, *infra*. An example of the interweaving of these ideals is the preamble to the Colorado Children's Code, C.U.M. REV. STAT. § 19-1-102 (1973): The general assembly declares that the purposes of this title are:

- (a) To secure for each child subject to these provisions such care and guidance, preferably in his own home, as will best serve his welfare and the interests of society;
- (b) To preserve and strengthen family ties whenever possible, including improvement of home environment;
- (c) To remove a child from the custody of his parents only when his welfare and safety or the protection of the public would otherwise be endangered; and
- (d) To secure for any child removed from the custody of his parents the necessary

The Platonic theory was mentioned more often in early cases dealing with child-related legislation than it is today. For instance, in sustaining the state's compulsory schooling law, the Colorado Supreme Court in 1927 stated flatly that "[t]he state, for its own protection, may require children to be educated. This needs no citation."⁸⁶ This "good-of-the-state" approach is also reflected in statutory provisions, such as those which override parental objections to immunization whenever a community is threatened with an epidemic.⁸⁷

Statutes usually demonstrate a more Aristotelian concern for the welfare of individual children, rather than for the state as a whole. Examples are child abuse laws,⁸⁸ child labor laws,⁸⁹ and those mandating specific medical procedures to prevent blindness⁹⁰ and mental retardation⁹¹ in newborns. The "child protection" rationale is also cited frequently by state courts since the United States Supreme Court has stated that "[t]he well-being of its children is of course a subject within the State's constitutional power to regulate. . . ."⁹²

Although CRD legislation arguably benefits the state as a whole by preserving the health of future productive citizens and by reducing the number of those who might require long-term public aid because of automobile injuries, its primary purpose is to prevent needless harm from being inflicted upon young children. This latter goal is an entirely appropriate one, as has previously been shown. The question that remains is whether requiring individual drivers to obtain and use child restraints is a reasonable method of attaining that objective.

care, guidance, and discipline to assist him in becoming a responsible and productive member of society.

86. *Yellmer v. Stanley*, 81 Colo. 276, 280, 255 P. 610, 613 (1927).

87. See, e.g., COLO. REV. STAT. §§ 25-4-303 to -305 (1973) & Supp. 1978.

88. See, e.g., COLO. REV. STAT. §§ 19-10-101 to -115 (1973) which deal with reporting abuse, and COLO. REV. STAT. § 18-5-401 (1973) & Supp. 1979) describing the crime of child abuse.

89. See, e.g., COLO. REV. STAT. §§ 8-12-101 to -117 (1973) & Supp. 1979), the Colorado Youth Employment Opportunity Act of 1971, which details the types of employment that youths of various ages may engage in.

90. See, e.g., COLO. REV. STAT. §§ 25-4-303 to -305 (1973), requiring that the eyes of all newborns be treated with a prophylaxis within one hour of birth.

91. See, e.g., COLO. REV. STAT. § 25-4-801 (1973): "The general assembly declares that, as a matter of public policy of this state and in the interest of public health, every newborn infant should be tested for phenylketonuria and other metabolic defects in order to prevent mental retardation resulting therefrom. . . ."

92. *Ginsberg v. New York*, 390 U.S. 629, 639 (1968).

Reasonable Means

The legislature is given wide discretion in implementing its goals, and a presumption of validity attaches to each statute it enacts.⁹³ In order to rebut this presumption, an opponent must prove that a law, when applied, violates some provision of the state or federal constitution,⁹⁴ or that the law does not reasonably relate to the state's objective in passing it.⁹⁵ The question of its "reasonableness" is, in fact, the central issue in any challenge to a police power regulation.⁹⁶

Most statutes promulgated under the police power seek to protect public welfare by regulating conduct in the manufacturing and professional sectors. Individual behavior may also legitimately be regulated so long as the burden imposed does not infringe on a fundamental right.⁹⁷ A mere showing "that in its operation a police measure may increase their labor, decrease the value of their property or otherwise inconvenience individuals" will not suffice to render a law void.⁹⁸ Securing a child in a CRD before each automobile trip may at times be inconvenient, but the question of concern to a reviewing court would be whether a law mandating that action infringes upon a fundamental right.

An opponent of CRD legislation could claim that any one of several rights are infringed upon by such a law: the right to parental autonomy⁹⁹ and privacy;¹⁰⁰ the right to equal protection under the

93. *Kelly v. Johnson*, 425 U.S. 238 (1976); *Day-White Lighting, Inc. v. Missouri*, 342 U.S. 421, 423 (1952); *Prince v. Massachusetts*, 321 U.S. 158, 168-70 (1944).

94. *Day-White Lighting, Inc. v. Missouri*, 342 U.S. 421 (1952); *Jackson v. Massachusetts*, 197 U.S. 11, 25 (1905); *City of El Paso v. Simmons*, 379 U.S. 497, 508-09, *rehearing denied*, 380 U.S. 926 (1964).

95. See *Paris Adult Theatre I v. Slayton*, 413 U.S. 49 (1973); *NAACP v. Alabama*, 377 U.S. 288 (1964); *Goldblatt v. Town of Hempstead*, 369 U.S. 590 (1962).

96. "The legislature may devise reasonable schemes for regulations of activities which affect the health and safety of the public." *People ex rel. Dunbar v. Kagul*, 179 Colo. 394, 399, 501 P.2d 728, 740 (1973) (emphasis in original).

97. Fundamental rights are those rights "implicit" in the concept of ordered liberty." *Palko v. Connecticut*, 302 U.S. 319, 325 (1937).

98. *In re Interrogatories of the Governor*, 97 Colo. 387, 396, 52 P.2d 643, 647 (1935). One example of a law which puts the burden of compliance on individuals is Colo. Rev. Stat. § 33-31-153 (1973) & Supp. 1979. This law makes it the duty of a boat owner or operator — not of the boat manufacturer — to provide an adequate life preserver for each person on board.

99. Parental rights are afforded constitutional protection against unwarranted or unreasonable interference by the state. *Planned Parenthood v. Danforth*, 428 U.S. 52, 73 (1976); *Wisconsin v. Yoder*, 406 U.S. 205 (1972); *Meyer v. Nebraska*, 262 U.S. 390 (1923). See also *Smith v. Organization of Foster Families*, 431 U.S. 816, 843-44 (1977); *Ginsberg v. New York*, 390 U.S. 629, 639 (1964).

law;¹⁰¹ and the right to free and unrestricted travel between the states.¹⁰² The last claim can be quickly dispensed with by once again analogizing to the helmet cases, which consistently held that the right to travel was not unreasonably restricted by requiring motorcyclists to obtain and use a relatively inexpensive piece of safety equipment.¹⁰³ This right was not infringed even though the helmet statutes were written to apply to all, and not just resident, motorcyclists travelling on the enacting state's roads.¹⁰⁴ The CRD laws are not as broad as the helmet statutes since they typically apply only to resident parents or to those driving vehicles registered in the enacting state. Non-resident tourists therefore would not be subject to the law's provisions.

Parental Autonomy and Privacy. The allocation of power between parent and state in making decisions concerning the best interests of the child is always a sensitive issue. Supreme Court cases have "consistently recognized that the parents' claim to authority in their own household to direct the rearing of their children is basic in the structure of our society."¹⁰⁵ Indeed, the integrity of the family unit has found protection in the Due Process¹⁰⁶ and Equal Protection¹⁰⁷ Clauses of the fourteenth amendment and in the ninth amendment.¹⁰⁸

Despite this high regard for the family unit, laws which restrict parental autonomy in order to further the welfare of children are usually sustained. Such laws are struck down only if they are arbitrary and capricious. For example, a law attempting to promote good citizenship by banning the teaching of foreign languages in elementary schools was struck down in *Meyer v. Nebraska* on these grounds.¹⁰⁹ Similarly, if the state's objective in passing the law is not sufficiently compelling to overcome a parental objection based on a

100. Fundamental rights include the "right of personal privacy, or a guarantee of certain areas or zones of privacy." *Roe v. Wade*, 410 U.S. 113, 152 (1973). The source of this right is not specifically defined, but is derived from the first, third, fourth, fifth, and ninth amendments, the penultimate of the Bill of Rights, and the guarantee of liberty in the fourteenth amendment. *Griswold v. Connecticut*, 381 U.S. 479, 481-83 (1965).

101. U.S. Const. amend. XIV.

102. The states may not enact rules and regulations which unreasonably burden the right to travel freely between the states. *Shapiro v. Thompson*, 394 U.S. 618 (1969).

103. See, e.g., *Love v. Bell*, 171 Colo. 27, 36, 465 P.2d 118, 123 (1970).

104. See, e.g., *Conn. Rev. Stat. § 42-4-231* (1973) (repealed 1977).

105. *Ginsberg v. New York*, 390 U.S. 629, 639 (1968).

106. *Meyer v. Nebraska*, 262 U.S. 390, 399 (1923).

107. *Shiner v. Oklahoma*, 316 U.S. 535, 541 (1942).

108. *Griswold v. Connecticut*, 381 U.S. 479, 496 (1965) (Goldberg, J., concurring).

109. 262 U.S. 390 (1923).

freedom of religion claim it will be held void.¹¹⁰

CRD statutes could not be invalidated under either theory. These laws are narrowly drawn, requiring the use of an effective, readily available device designed specifically for the purpose of protecting children in motor vehicles, and are therefore not vulnerable to charges of arbitrariness or caprice. Nor could these laws, which are essentially traffic safety regulations, conceivably be subject to any objections based on religious grounds. In short, the statement that it is "fundamental . . . that parental rights must yield to the interest and welfare of the child"¹¹¹ would appear to be particularly uncontroversial when applied to the issue of highway safety.

Parental rights are based to a large extent on the broader claim of a right to privacy—the "right to be let alone."¹¹² This broader right itself is not unreasonably infringed upon by traffic regulations, as aptly pointed out by the Wisconsin Supreme Court:

There is no place where any such right to be let alone would be less assertible than on a modern highway. . . . When one ventures onto such a highway, he must be expected and required to conform to public safety regulations and controls, including some that would neither have been necessary nor reasonable in the era of horse-drawn vehicles.¹¹³

Equal Protection. CRD statutes distinguish between children less than four years old and all other highway users. If a court were convinced that no rational basis existed for this distinction, it could void such legislation on the ground that it denies the public equal protection under the law. A statutory discrimination will not be invalidated, however, if any state of facts reasonably can be conceived to justify it.¹¹⁴

When reviewing CRD legislation, a court could rely on several supporting factors to sustain the legislature's classification. A court could find that members of the statutorily created class of children four years of age or younger face a greater risk of injury or death than do others in accident situations, are incapable of making ra-

110. *Wisconsin v. Yoder*, 406 U.S. 205 (1972).

111. *Stjerneholen v. Mazaheri*, 180 Colo. 352, 356, 506 P.2d 155, 157 (1973). See also *Fulton v. Mertenaca*, 129 Colo. 125, 267 P.2d 658 (1954); *Graham v. Francis*, 83 Colo. 346, 265 P. 690 (1928).

112. *Olmstead v. United States*, 277 U.S. 438, 478 (1928) (Brandeis, J., dissenting).

113. *Bianous v. Karna*, 42 Wis. 2d 42, 55, 165 N.W.2d 377, 384 (1969), *appeal dismissed*, 395 U.S. 709 (1969).

114. *Dandridge v. Williams*, 397 U.S. 471, 485 (1970), *rehearing denied*, 398 U.S. 914 (1970).

tional choices to further their self-preservation, and are not afforded the same degree of protection by existing safety belts as are older passengers for whom such belts are designed.¹¹⁵ Furthermore, although all legislatively imposed age restrictions are arbitrary to some extent, the class delineated by CRD legislation is not unreasonable since it corresponds to that class for which CRDs are designed and manufactured.¹¹⁶ These factors could support a finding that a state of facts sufficient to justify the statutory distinction exists.

Finally, it should be noted that although all automobile passengers could benefit by mandatory seatbelt laws, the fact that such laws have not been enacted is insufficient to void CRD laws under the Equal Protection Clause. A law will not be invalidated for violating that Clause merely because the legislature has not "comprehensively remedied all problems at once—it is entitled to proceed one step at a time."¹¹⁷

In sum, CRD legislation is valid under both the "ends" and the "means" prongs of the police powers analysis. The state is operating in traditional areas when it seeks further highway and child safety, and no fundamental rights are threatened when the state mandates the use of appropriate equipment in attempting to attain that safety objective.

CIVIL PROCEEDINGS

Aside from the constitutional issues, the legal ramifications which could attend CRD legislation in certain civil cases remain to be examined.¹¹⁸ Although the only two CRD laws currently in force expressly provide that a breach of their respective terms may not be

115. See text accompanying notes 9-25 *supra*.

116. See note 2 *supra*.

117. *Bushnell v. Sapp*, 194 Colo. 273, 280, 571 P.2d 1100, 1104 (1977).

118. CRD statutes could also have an impact on certain criminal proceedings, particularly vehicular homicide and vehicular assault cases. Drunk driving typically is a misdemeanor, but if death to another results, it may be filed as vehicular homicide, a felony. If a drunk driver collides with a vehicle in which an unsecured child is riding and the collision results in the death of that child, a decision to file a felony charge against the drunk driver may pose problems. In Colorado, for example, such a charge can be brought only against a person whose wrongful acts were the "sole proximate cause" of a highway death. *Goodell v. People*, 137 Colo. 507, 509, 327 P.2d 279, 280 (1958). If the child would not have died had he been properly secured in a CRD, then the failure to use that device would be another proximate cause of his death. Hence, felony charges could not be lodged against the drunk motorist.

The problem is not merely a speculative one, for prosecutors in Michigan have contacted state highway officials to seek advice on this particular issue. Telephone interview with David Shinn, Driver and Vehicle Admin., Mich. Dep't of State, July 1980.

raised in any civil action,¹¹⁹ future enacting states may pass such laws without this limitation. The discussion below evaluates the impact which a CRD statute without a "no liability" clause could have in negligence lawsuits.

Civil Liability

Negligence per se. In the absence of CRD legislation, a suit for negligence brought on behalf of a child injured in an automobile accident against the child's driver would face serious obstacles. Typically, in order to support a negligence claim, the burden is on the plaintiff to establish by a preponderance of the evidence that the defendant owed him a certain standard of care, that the standard was breached, and that the breach was a cause of the harm suffered.¹²⁰ Without a CRD law in force the plaintiff's burden on the question of "standard of care" would be substantial. He would have to assume the burden of educating and persuading six or twelve peers from the community on the practicality and wisdom of CRDs. The fact that the community as a whole has shown little inclination to use child restraints indicates the size of the plaintiff's task in proving this element of the case.

Were a CRD-use law in existence, however, the mere fact of its enactment would greatly lessen the plaintiff's burden. In passing that law, the legislature would have established in specific language the appropriate standard of care which was owed by the defendant, and that question would be removed from the jury's consideration.¹²¹ In other words, the plaintiff could show that the defendant acted negligently simply by showing that the defendant breached the statute. The only further burden the plaintiff would have in this negligence *per se* claim would be to show a causal link between the harm suffered and the negligent act or omission.¹²²

As previously shown,¹²³ proof of causation should not be difficult, particularly if the child's injuries resulted from his ejection from the vehicle, or from his collision with some portion of its inte-

119. See notes 33 and 61 *supra*.

120. See cases cited in W. PROSSER, HANDBOOK OF THE LAW OF TORTS 143 (4th ed. 1971).

121. See, e.g., *Martin v. Herzog*, 228 N.Y. 164, 126 N.E. 814 (1920); *Konow v. Southern Pacific*, 105 Ariz. 386, 465 P.2d 366 (1970); *Zerby v. Warren*, 297 Minn. 134, 210 N.W.2d 58 (1973); *Stahl v. Cooper*, 117 Colo. 458, 190 P.2d 891 (1948).

122. See, e.g., *Plains Transport of Kansas v. Baldwin*, 217 Kan. 2, 535 P.2d 865 (1975); *Frell v. Thomas*, 80 Wash. 2d 117, 491 P.2d 1285 (1971); *Hamilton v. Gravinaky*, 26 Colo. App. 408, 474 P.2d 185 (1970), *modified*, 174 Colo. 206, 483 P.2d 365 (1971).

123. See text accompanying notes 10-25 *supra*.

rior. The issue of failure to use a CRD would be irrelevant in only a small percentage of negligence suits, where such factors as excessive speed or gross disproportionality in the size of the vehicles involved would have rendered any restraint system useless.¹²⁴

Joint Liability. If an unrestrained child were injured in an accident caused by a second automobile,¹²⁵ compensation could be sought from the drivers of both vehicles involved. Joint tort liability is imposed on those whose independent acts or omissions combine to cause a single injury to a third person.¹²⁷ It is the contribution to the harm suffered and not to the cause of the accident itself which determines liability in such cases. The otherwise blameless driver who failed to secure the child would share responsibility with the accident-causing driver for the injuries which the child sustained.

If a suit were brought only against the driver of the second vehicle, that defendant could bring the child's driver into the action as a third party defendant "who is or may be liable to him for all or part of the plaintiff's claim against him."¹²⁷ This impleading action can be accomplished in any state which has adopted the Uniform Contribution Among Tortfeasors Act¹²⁸ and procedural rules which facilitate joinder.¹²⁹

By bringing the child's driver into the suit the defendant at-

124. An analysis of Maryland accident reports for the years 1973 through 1977 showed that only one of the thirty-eight pre-schoolers killed during that time was properly secured in a restraint device. That fatality was the result of a collision between the child's car and a tractor trailer. Karwacki & Baker, *supra* note 9, at 2849.

125. The Maryland study found that,

[a]lmost ninety percent of all children less than ten years old and half of the older children were killed in multiple vehicle crashes. The majority of the multiple vehicle crashes appeared to have been initiated by vehicles other than those in which the children were killed (for example, by vehicles that crossed into the wrong lane or failed to yield right of way). . . .

Id. at 2850.

126. *Dunham v. Kampman*, 37 Colo. App. 233, 547 P.2d 263 (1975), *aff'd*, 192 Colo. 448, 560 P.2d 91 (1977).

127. COLO. R. CIV. PRO. 14.

128. COLO. REV. STAT. §§ 13-50.5-101 to -106 (1973 & Supp. 1979). This statute reads in part:

(1) Except as otherwise provided in this article, where two or more persons become jointly or severally liable in tort for the same injury to person or property or for the same wrongful death, there is a right of contribution among them even though judgement has not been recovered against all or any of them.

(2) The right of contribution exists only in favor of a tortfeasor who has paid more than his pro rata share of the common liability, and his total recovery is limited to the amount paid by him in excess of his pro rata share. No tortfeasor is compelled to make contribution beyond his own pro rata share of the entire liability.

129. *See, e.g.*, COLO. R. CIV. PRO. 14.

tempts to shift some of the responsibility for the harm done to the injured child to that third party, but no doctrine would provide this original defendant with complete immunity from liability. Contributory or comparative negligence statutes which limit or totally bar the payment of compensation to a plaintiff would be inapplicable to CRD related lawsuits. Those statutes apply only when the plaintiff has been shown to have contributed to his injuries by his own careless actions.¹³⁰ A pre-school aged child is, in many states, legally incapable of negligence,¹³¹ and his failure to look out for his own safety cannot be raised as a defense in any suit in which that child is a plaintiff.¹³²

Nor can the defendant obtain complete immunity from liability by claiming contributory negligence due to the carelessness of a plaintiff child's parents. The "doctrine that the negligence of the parents of a child of tender years shall be imputed to the child" was dismissed in one early case as "not only unsound, but absurd and inhuman,"¹³³ and that doctrine is universally rejected today.

The child's driver, on the other hand, stands a better chance of claiming immunity if he is brought into the negligence case as a third party defendant. If he is unrelated to the plaintiff he can seek to avoid liability under any guest statutes which exist in that state. These laws, which are no longer as prevalent as they once were, prevent a person from suing his "host" driver for any injuries sustained while riding as a non-paying passenger in that driver's vehicle.¹³⁴ The laws have been justified in part by an "assumption of the risk" type of theory and for that reason have often been held inapplicable to young children.¹³⁵ The child's driver has a much better chance of claiming immunity, and therefore of imposing the full cost of compensating the child on any other defendants, if he is the plaintiff

130. See, e.g., COLO. REV. STAT. § 13-21-111 (1973 & Supp. 1979). The Colorado court has made it clear that "[t]he comparative negligence statute is inapplicable where no negligence on the part of the plaintiff can be proven." *Dunham v. Kampman*, 37 Colo. App. 233, 236, 547 P.2d 263, 266 (1975), *aff'd*, 192 Colo. 448, 560 P.2d 91 (1977).

131. See, e.g., *Lewis v. Buchsitz*, 156 Colo. 46, 396 P.2d 933 (1964) (children of "very tender years" are incapable of negligence and assume no risks).

132. See, e.g., *Majors v. J.C. Penney Co.*, 31 Colo. App. 368, 506 P.2d 399 (1973) (six year old child incapable of contributory negligence).

133. *Denver City Tramway Co. v. Brown*, 57 Colo. 484, 493, 143 P. 364, 368 (1914). See also W. PROSSER, HANDBOOK OF THE LAW OF TORTS 490 (4th ed. 1971).

134. See *Brown v. Merlo*, 8 Cal. 3d 855, 506 P.2d 212, 106 Cal. Rptr. 388 (1973).

135. See, e.g., *Burhan v. Witbeck*, 373 Mich. 253, 134 N.W.2d 225 (1965); *Wood v. Morris*, 109 Ga. App. 148, 135 S.E.2d 484 (1964); *Green v. Jones*, 136 Colo. 512, 319 P.2d 1081 (1957).

such lawsuits will tend to preserve family harmony.¹⁴² In any CRD related action, the plaintiff would necessarily be a very young child, incapable of maliciously plaguing his parents with lawsuits. The decision to bring a suit on his behalf will most likely be made by the child's parents, with an awareness that their liability insurer will be the true defendant. Under those circumstances, commencing an action is not evidence of a family's internal strife, but rather of the "provident management of its affairs."¹⁴³

The invalidity of the first two arguments, which ignore the existence of liability insurance, must be conceded before credence can be given to the third argument: allowing children to sue their parents will lead to widespread collusion and fraud against insurance companies.¹⁴⁴ A trust in the jury system and its ability to distinguish between valid and fraudulent claims is the first step which must be taken to reject the argument. The courts have consistently reaffirmed that trust and have relied on juries to prevent injustice to insurance companies in automobile cases between husbands and wives¹⁴⁵ and between close friends.¹⁴⁶ No readily apparent reason exists for refusing to extend that trust to cases involving a parent and child.¹⁴⁷ Indeed, an attempt by a parent to defraud an insurance company in a case which centered on the lack of CRD use would be quite difficult. Because of his age, the plaintiff could not be an active participant in the scheme and could not be counted on to convincingly fake a non-existent harm.

The strongest reason for abrogating parental immunity, at least under the limited circumstances of a CRD law, is largely unrelated

142. The family harmony argument originated in *Roller v. Roller*, 37 Wash. 242, 79 P. 788 (1905), a much maligned case in which a daughter was prevented from bringing a civil action for rape against her father based on the family harmony theory.

143. *Badigan v. Badigan*, 9 N.Y.2d 472, 479, 174 N.E.2d 718, 723, 215 N.Y.S.2d 35, 41 (1961) (Fuld, J., dissenting).

144. See *Windauer v. O'Connor*, 13 Ariz. App. 442, 477 P.2d 1157 (1971), modified, 107 Ariz. 267, 485 P.2d 561 (1971); *Bremmecke v. Kilschick*, 336 S.W.2d 68 (Mo. 1960); *Small v. Rockfield*, 66 N.J. 231, 333 A.2d 335 (1974).

145. See, e.g., *Raim v. Rains*, 97 Colo. 19, 46 P.2d 740 (1935) (abrogated interspousal immunity in the context of an automobile negligence case).

146. See, e.g., *Johnson v. Hasett*, 217 N.W.2d 771 (N.D. 1974) in which the court noted the "good sense of the juries" as a protection against fraud in the absence of a guest statute.

147. In abrogating parental immunity, one court stated: "Even assuming that a few fraudulent and collusive claims will slip through judges and juries (and there is no empirical [sic] evidence that the assumption is valid) we believe that this price would not be too great since the alternative is to continue a prophylactic rule which indiscriminately bars all claims." *Francis v. A.P.A. Transp. Corp.*, 56 N.J. 500, 505, 267 A.2d 490, 493 (1970).

American
Academy of
Pediatrics



Alaska
Chapter

Chairman
Marian T. Witt, M.D.
3300 Providence Drive
Anchorage, 99504
907/279-6481

August 25, 1982

Senator Charles Parr
Chairman
Senate Health, Education,
and Social Services Committee
950 Cowles
Suite 224
Fairbanks, AK 99701

Dear Senator Parr:

Child Auto Safety Legislation

Background. The number one cause of death and of injury for children in the United States is accidents. The majority of these are automobile-related. Nine other states have enacted legislation requiring children under age five to be appropriately restrained. In those states, the death rate and the injury rates were reduced greatly. Programs for public education and awareness had little impact in protecting the children, however. Most significantly, the cost to the state for treatment and for rehabilitation of these injured children was significantly reduced.

Request. Please hold a hearing regarding introduction of legislation to protect these helpless Alaskans in automobiles.

Sincerely,

A handwritten signature in cursive script that reads "Clinton B. Lillibridge M.D.".

Clinton B. Lillibridge, M.D.
State Chairman
American Academy of Pediatrics

Chairman
Legislative Committee
Alaska Child Auto Safety Association

CL:sh

950 Cowles, Rm 224
Fairbanks, AK 99701
(907) 452-5392

August 30, 1982

Clinton B. Lillibridge, M.D.
State Chairman
American Academy of Pediatrics
3300 Providence Drive
Anchorage, AK 99504

Dear Mr. Lillibridge:

Thank you for your letter of Aug. 25, 1982. Can you tell me which states have passed the child restraint legislation you refer to?

Sincerely,

Charles H. Parr

CHIP:cmk



ALASKA CHAPTER
American Academy of Pediatrics

September 29, 1982

CHAIRMAN
MARIAN T. WITT, M.D.
3300 PROVIDENCE DRIVE
ANCHORAGE, ALASKA 99504

Senator Charles H. Parr
950 Cowles, Room 224
Fairbanks, AK 99701

Dear Senator Parr:

I was away at Academy meetings in Chicago when your letter arrived. At that meeting, I learned that now twenty-two states have child restraint legislation signed into law and an additional five have legislation pending. A brief description and list of the states is enclosed. In addition, an article from the University of Colorado Law Review is enclosed which explains much of the background and should be helpful to the committee.

In addition, I have the text of statutes passed by several states and some explanatory comments by their proponents. Again this is enclosed and I hope you will find it useful.

Sincerely,

A handwritten signature in cursive script that reads "Clinton B. Lillibridge".

Clinton B. Lillibridge, M.D.
Alaska State Chairman
4001 Dale Street, Suite 213
Anchorage, AK 99508

CL:sh

SIGN - IN SHEET

FILL-IN THE INFORMATION BELOW.

PLEASE PRINT

Senate Health, Education and Social Services Committee
Public Hearing on Child Restraint Devices
December 10, 1982
Anchorage, Alaska

NAME (please print)	ADDRESS	ZIP CODE	PHONE #
Polacoma			
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Peggy MacInnis ✓	4400 Jade	99502	243-2755
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Maui Clark ✓	1450 Garden St	99508	272-7773
Cardyne Clouch ✓	SRD Dr 2003	99507	344-9879
Lesley Morrison ✓			
Rae Sully ✓			
Jimmy Kamath ✓			
Karen Guthrie	9530 Albatross Dr. Morning Day ↑	99502	243-7766
- Evening HEARING -			
John Decker ✓	7601 LOTUS DR.	99502	243-7181
Alice Samuelson ✓	9231 Atelier Dr	99507	333-5601
Peggy Wilson ✓	2247 Vandalia Cir	99504	279-9246
MORRIS HORNUNG, MD ✓	3710 E. 20th ANCH. AK	"	276-8776

Fairbanks Dec 11, 1982
10:30 AM

000-START

001 - Senator Parr

op. service introduction
in favor of ^{mand.} CRD

car accidents mjr. cause of Death

can significantly reduce deaths or injury
Public Health Nurse - ^{try to an} do educational
program.

80% of children are immunized but only
7% are restrained in a car

need to have car seats available for low income
families

Need money for learner programs: ed. program

Insurance Co. ^{medicaid} should make CRD's

Fbks starting a stipend program for low income
families on a sliding scale & eligibility
requirements

working toward a learner program

liability ^{may be} ~~is~~ problem absence of litigation

116-

Informal group affiliated w/ AK Child Passenger Safety

Trying to get \$ from other than public
funds ^{group?}

Need to have a back-up system
for low income families, but not
necessarily from the public

Pick-ups - many times it's difficult to
fit car seats

0-5
Cumber some to include taxis & buses
Any vehicle w/ children

What about when the car seat is not properly installed

Sherry fine w/ waiver

Seat substitution if child above ^{a certain weight} 40 lbs

100 - ~~side~~ and in the back seat

Buses

More time spent in buses

Pipple effect

077 Mtg. Adjourned until 1pm

~~1:20~~ ~~re~~-called the meeting to order

2:07

179 Dr. Rundquist ^{Pediatrician} - in support of

infant, & Toddlers ^{0-40 lbs} are the group
not protected & need safety seats

Fine which is dropped if you
bring a CD

CHILD RESTRAINT LAWS (MAY 7, 1982)

STATE	DESCRIPTION	STATUS
ALABAMA S24	All children less than 3yrs old must be in C.R. when riding in m.v. registered in state. Fine not to exceed \$10.00	Signed by Gov. 4/30/82 Effective 7/1/82.
CONN. S42	All children less than 4yrs old must be in C.R. when riding in passenger m.v. in the state. Safety belt may be substituted for children between 1-4yrs if riding in the back seat only. Exemption for R.V.'s, trucks weighing over 1 ton. Fine \$15-100, waived upon acquisition & installation of seat.	Effective 10/1/82.
FLORIDA SB289	All children less than 6yrs old must be in C.R. when riding in passenger m.v. or pick-up truck registered in Florida and owned/operated by parent/legal guardian. Safety belt may be substituted for children 4-5 yrs. seat belt may be substituted. \$15 fine, waivable upon proof of purchase.	Signed by Gov. early 4/82. Effective 7/1/83.
KANSAS HB2208	All children less than 2yrs must be in C.R. when riding in front seat of passenger m.v. owned/operated by parent/legal guardian. Oral warning only. Sec. of Transportation to develop program of public information.	Signed by Gov. 4/81. Effective 1/1/82.
KENTUCKY SB2	All children less than 40 inches tall must be in C.R. when riding in m.v. owned/operated by parents/legal guardian. No fine.	Signed by Gov. early April 82. Effective 7/15/82.
MASS. HB7162	All children less than 5yrs old must be in C.R. or safety belt when riding in m.v. Exemption for taxis, vehicle not equipped with safety belts, if all other seating positions equipped with safety belts are occupied, or if child is physically unable to use restraints. Fine not to exceed \$25, waived upon proof of purchase.	Signed by Gov. 12/23/81 Effective 1/1/82.
MICHIGAN SB115	All children less than 4yrs. old must be in C.R. when riding in m.v. operated by resident driver. From 1-4yrs, safety belt may be substituted if riding in back seat. Exemption for nursing mothers. Fine not to exceed \$15 waived upon proof of acquisition.	Signed by Gov. 7/17/81. Effective 4/1/82.
MINNESOTA SP263	All children less than 4yrs old must be in C.R. when riding in m.v. owned/operated by parents/l.g. No fine, hazard warning only.	Signed by Gov. 4/28/81. Effective 1/1/82.
NEW YORK S3639 Amend. S8679	Originally all children less than 3yrs old must be in C.R. when riding in passenger motor vehicle registered in state. Amended this past session to children less than 4yrs old in C.R. and 4 to 5yrs old in C.R. or seat belt. Also amended to remove emergency vehicles from compliance. Fine of not more than \$25, waived upon proof of purchase or rental of seat.	Initially signed by Gov. 7/7/81. Effective 4/1/82.

<p>NORTH CAROLINA HB93</p>	<p>All children less than 2yrs old must be C.R. when riding in m.v. registered in state and owned/operated by parent/l.g. Between 1-2yrs. old, safety belt may be substituted. Exemption if child is occupying seat where safety belts are not required, and while attending to personal needs of the child. Warning ticket from 7/1/82 to 6/30/84. Thereafter \$10 fine. UNC-BSRC will conduct effectiveness study.</p>	<p>Signed by Gov. 7/81. Effective 7/1/82 to 6/30/85.</p>
<p>RHODE ISLAND RS730</p>	<p>All children less than 3yrs old must be in C.R. when riding in front seat of m.v. \$15 fine. Amended to include back seat. Fine waived upon proof of purchase.</p>	<p>Orig. law effective 7/1/80. Amend. effect April 1981.</p>
<p>TENNESSEE KB300</p>	<p>All children less than 4yrs old must either be in C.R. or held in the arms of older passenger when riding in m.v. owned/operated by parents/l.g. Exemption for trucks, r.v.'s. \$2-10 fine. Amended to exclude being held in arms except when mother is attending to needs of child.</p>	<p>Orig. law effective 1/1/78. Amendment effective 4/1/81.</p>
<p>VIRGINIA HB413</p>	<p>All children less than 4yrs old must be in C.R. when riding in m.v. registered in state and owned/operated by parent/l.g. Between ages of 3-4yrs safety belt may be substituted. \$25 fine waived upon proof of acquisition or for financial inability. Fine money earmarked for state loaner program.</p>	<p>Signed by Gov. 4/12/82 Effective 1/1/83</p>
<p>WEST VIRGINIA HB517</p>	<p>All children less than 3yrs old must be in C.R. when riding in m.v. registered in State. Safety belt can be substituted for 3 and 4yrs. olds. \$10-20 fine waived upon proof of purchase.</p>	<p>Effective 7/10/81.</p>
<p>WISCONSIN AB400</p>	<p>All children less than 2yrs old must be in C.R. when riding in m.v. owned/operated by parent or l.g. From 2yrs to 4yrs safety belt may be substituted. Fine if child is under 2yrs old is \$30-75. Fine if child is between 2-4yrs old is \$10-25 and if second offense within three years \$25-200.</p>	<p>Signed by Gov. 5/1/82. Effective 12/1/82 with no fine. Fine provision effective 5/1/82.</p>
<p>NEBRASKA LB49</p>	<p>Any person furnishing child care must use C.R. when transporting all children less than 1yr old. Seat belt can be substituted for children over 1yr old. No upper age limit. Driver subject to fine and Child Care Center subject to license (to furnish child care) suspension/revocation.</p>	<p>Signed by Gov. 3/19/82. Effective 7/17/82.</p>
<p>CALIF. A1198</p>	<p>Sec. of Business/Transportation to conduct education program about importance of restraint use for children less than 13yrs. old. Hazard Warnings given to people operating m.v. with unrestrained children. Fresno County area chosen for pilot survey.</p>	<p>Signed by Gov. 9/80. Effective 9/80-1/83.</p>
<p>INDIANA SB88</p>	<p>Dept. of Highways shall develop and implement information program on use of C.R.</p>	<p>Effective 9/1/82. to 9/1/84.</p>

MAINE H1560	Commissioner of Pub. Safety shall develop/implement program to increase restraint use of children. Hazard Warnings given if vehicle stopped for another reason and unrestrained children are observed. Study of usage rates to be undertaken.	Signed by Gov. 6/9/81. Effective 7/1/81 to 6/80/83.
HAWAII HB2742	\$25.00 income tax credit for purchase of child restraints.	Passed both Houses, 4/28/82. Gov. has 45 days to sign.
DELAWARE HB154	All children less than 4 yrs. old must be in C.R. when riding in m.v. owned/operated by resident parent/l.g. \$25 fine waived upon acquisition of C.R.	Passed both Houses, 6/25/82.
ILLINOIS HB608	All children less than 5 yrs. old must be in C.R. when riding in m.v. or r.v. owned/operated by resident parent/l.g. First offense is \$25. Subsequent offenses \$50. (C.R. means any device approved by U.S. DOT designed to restrain, seat or position child. If child is over 40 lbs., this would mean safety belts are an acceptable restraint)	Passed both Houses, 6/25/82. Gov. has 45 days to sign.

CHILD RESTRAINT LEGISLATION STILL PENDING (JULY, 1982)

STATE	DESCRIPTION	STATUS
CALIF. SBS37	All children less than 4 yrs. old or weighing less than 40 lbs. must be in C.R. when traveling in m.v. or truck weighing less than 6,001 lbs. registered in California and operated by parent/l.g. If child is not riding w/ parents, must be in C.R. or rear seat safety belt. No fine but must appear in court for violation unless economic impossibility and no loaner program near by can be demonstrated, or upon acquisition of C.R. within 30 days. No retailer may sell or install C.R. not in conformance with federal safety standard.	Intro. by Sen. Senate 1/18/82. Passed first Assembly Comm. Picked up 12 co-authors. In Ways and Means Comm. may be reported out around May 10.
NEW JERSEY S_____	Will be Intro. by Sen. Bassano (member Trans. Comm.). Provides protection for children less than 16 yrs. old when riding in m.v. in N.J. If under 1 year old, must be in C.R. From 1 to 4 yrs., safety belt may be substituted in rear seat only. From 4 to 16 yrs. must wear seat belt in all seating positions. \$25-50 fine.	May be Intro. week of May 10th. Current Bassano bill S1163 contains child-crusher amendment and will be withdrawn.
S1182	Intro. by Sen. Laskin. Has similar child crusher amendment as S1163 and will also be withdrawn.	
ABS1	Assemblywoman Garvin. All children less than 4 yrs. old must be in C.R. when riding in m.v. owned/operated by resident parent/l.g. Fine of \$10-25.	Intro. 2/22/82. In Committee on Jud. Law, Public Safety & Defense.

<p>HIO H605</p>	<p>All children less than 4yrs old or weighing less than 40lbs must be in C.R. when traveling in m.v. owned/operated by resident parent/l.g. or day care center. If riding in m.v. other than those listed above but driven by resident of state, less than 1yr must be in C.R. From 1-4yrs, safety belt may be substituted. Exemptions for taxis, and life-threatening emergencies. \$10 fine waived upon acquisition of seat.</p>	<p>Intro. by Rep. Fisher. Passed House, 3/3/82. Has run into trouble in Senate. In Senate Agriculture Commerce and Labor Committee.</p>
<p>OKLAHOMA H1612</p>	<p>All children less than 5yrs old must be in C.R. when riding in passenger m.v. operated by resident of state. Safety belt may be substituted between ages of 4 and 5 yrs. No fine, warning only. A tax credit will be allowed for total purchase price of C.R.</p>	<p>Intro. by Rep. Brown, et al. Passed House on 3/4/82. Passed Senate in amended form: children less than 3yrs only and no warning notice, and allowing tax credit only for people claiming at least 1 minor dependant. In Joint Conference Committee now.</p>
<p>PENN. S592</p>	<p>All children less than 4yrs old or 40lbs must be in C.R. when riding in m.v. equipped with safety belts and registered in state. \$25 fine, waived upon proof of acquisition.</p>	<p>Intro. by Sen. Gekas. Passed Senate 38-10 in early Oct. 1981. Passed House Committee, amended on floor of and recommitted to 2nd House Committee Action not likely.</p>
<p>WASHINGTON D.C.</p>	<p>All children less than 5yrs old must be in C.R. when riding in m.v. From 3-5yrs old, safety belt may be substituted. \$25 fine for first offense, \$50 for subsequent offenses.</p>	<p>Intro. by Councilman Ray in mid-March.</p>

A B I L L

To amend section 4507.40 and to enact sections 1.14

4511.81 and 5747.054 of the Revised Code to 1.15

require persons transporting a child under four 1.16

years of age in certain types of motor vehicles 1.17

to utilize a child restraint system, and to 1.18

provide a tax credit to persons who purchase a 1.19

child restraint system.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO: 1.21

Section 1. That section 4507.40 be amended and sections 1.23

4511.81 and 5747.054 of the Revised Code be enacted to read as 1.24

follows:

Sec. 4507.40. (A) Every county court judge, mayor, and 1.26

clerk of a court of record shall keep a full record of every case 1.28

in which a person is charged with any violation of sections

4511.01 to 4511.771, 4511.81, 4511.99, and 4513.01 to 4513.36 of 1.30

the Revised Code, or of any other law or ordinance regulating the 1.31

operation of vehicles, streetcars, and trackless trolleys on 1.32

highways or streets.

(b) Within ten days after the conviction or forfeiture of 1.33

bail of a person upon a charge of violating any of such sections 1.34

or other law or ordinance regulating the operation of vehicles, 1.35

streetcars, and trackless trolleys on highways or streets, the 1.36

county court judge, mayor, or clerk shall prepare and immediately 2.1

forward to the Bureau of Motor Vehicles an abstract of the court 2.2

record covering the case in which the person was convicted or 2.3

forfeited bail, which abstract shall be certified by the person 2.4

required to prepare the same to be true and correct. 2.5

(c) The abstract shall be made upon a form approved and 2.6
 furnished by the bureau and shall include the name and address of 2.8
 the party charged, the number of his operator's or chauffeur's
 license, the registration number of the vehicle involved, the 2.9
 nature of the offense, the date of the offense, the date of 2.10
 hearing, the plea, the judgment, or whether bail forfeited, and 2.11
 the amount of the fine or forfeiture. 2.12

(d) Every court of record shall also forward a like report 2.13
 to the bureau upon the conviction of any person of homicide by 2.14
 vehicle or other felony in the commission of which a vehicle was 2.16
 used.

(e) The failure, refusal, or neglect of the officer to 2.17
 comply with this section constitutes misconduct in office and is 2.19
 ground for removal therefrom.

(f) The bureau shall record within ten days and keep all 2.20
 abstracts received under this section at its main office and 2.21
 shall maintain records of convictions and bond forfeitures for 2.22
 any violation of law or ordinance regulating the operation of 2.23
 vehicles, streetcars, and trackless trolleys on highways and 2.24
 streets, except as to parking a motor vehicle. 2.25

(g) Every court of record or mayor's court before which a 2.27
 person is charged with a violation for which points are 2.28
 chargeable by this section, shall assess and transcribe to the 2.29
 abstract of conviction report, furnished by the bureau, the 2.30
 number of points chargeable by this section in the correct space 2.31
 assigned on the reporting form. The points shall be assessed 2.32
 based on the following formula:

(1) Violation of section 4507.38 or 4507.39 of the Revised 2.34
 Code or any ordinance prohibiting the operation of a motor 2.35
 vehicle while the operator's license is under suspension or 2.36
 revocation 6 points 3.1

(2) Violation of section 2913.03 of the Revised Code, 3.2
 except the provisions relating to use or operation of an aircraft 3.3
 or motorboat, or any ordinance prohibiting the operation of a 3.4

(3) Aggravated vehicular homicide or vehicular homicide, when either involves the operation of a vehicle, streetcar, or trackless trolley on a highway or street	6 points	3.6
(4) Violation of section 4511.19 of the Revised Code or any ordinance prohibiting the operation of a motor vehicle while under the influence of alcohol or drugs	6 points	3.7
(5) Violation of section 4549.02 or 4549.021 of the Revised Code or any ordinance requiring the driver of a vehicle to stop and disclose identity at the scene of an accident.....	6 points	3.8
(6) Violation of section 4511.02 of the Revised Code or any ordinance prohibiting the willful fleeing or eluding of a police officer	6 points	3.9
(7) Any crime punishable as a felony under the motor vehicle laws of this state, or any other felony in the commission of which a motor vehicle was used	6 points	3.10
(8) Operating a motor vehicle in violation of a restriction imposed by a registrar	2 points	3.11
(9) Violation of section 4511.251 of the Revised Code or any ordinance prohibiting drag racing	6 points	3.12
(10) Violation of section 4511.20 of the Revised Code or any ordinance prohibiting the reckless operation of a motor vehicle	4 points	3.13
(11) Violation of any law or ordinance pertaining to speed	2 points	3.14
(12) All other moving violations pertaining to the operation of motor vehicles reported under this section except any violations under Chapter 5577. of the Revised Code	2 points	3.15
(13) VIOLATION OF SECTION 4511.81 OF THE REVISED CODE	2 POINTS	3.16
(14) Upon receiving notification from the proper court, the bureau shall delete any points entered for bond forfeiture in the event the driver is acquitted of the offense for which he posted bond.		3.17
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(1) In the event a person is convicted of, or forfeits 4.6
 bail for two or more offenses, arising out of the same facts, and 4.7
 points are chargeable for each of the offenses, points shall be 4.8
 charged for only the conviction or bond forfeiture for which the 4.10
 greater number of points is chargeable, and if the number of
 points chargeable for each offense is equal, only one offense 4.12
 shall be recorded and points charged therefor.

(2) Whenever the points charged against any person exceed 4.13
 five, the registrar shall forward to the person at his last known 4.15
 address, via regular mail, a warning letter listing the reported 4.16
 violations, along with the number of points charged for each, and 4.17
 outlining the suspension provision of this section.

(3) When, upon determination of the registrar, any person 4.19
 has charged against him a total of not less than twelve points 4.20
 within a period of two years from the date of the first
 conviction within the two-year period, the registrar shall notify 4.22
 the person by registered mail to the licensee's last known 4.23
 address, that his driver's license shall be suspended for six
 months effective on the twentieth day after mailing the notice 4.24
 unless the licensee files a petition in the municipal court or 4.25
 the county court, or in case such person is under the age of 4.26
 eighteen years to the juvenile court, in whose jurisdiction such 4.27
 person resides, agreeing to pay the cost of the proceedings and 4.28
 alleging that the licensee can show cause why his driving 4.29
 privileges should not be suspended for a period of six months. 4.30

(4) (any) (1) EXCEPT AS PROVIDED IN DIVISION (1) (2) OF 4.32
 THIS SECTION, ANY person who has charged against him more than 4.33
 five and not more than eleven points, may, for the purpose of 4.34
 obtaining a deletion of two points from his driving record, 4.35
 enroll for one time only in a course of remedial driving
 instruction, as approved by the director of highway safety. SUCH 5.1
 COURSE SHALL INCLUDE THE SHOWING OF A FILM ON THE EFFECTS OF A 5.2
 COLLISION ON A CHILD NOT RIDING IN A CHILD RESTRAINT SYSTEM
 DURING AN ACCIDENT. Such deletion, subject to successful 5.4

completion of an approved remedial driving course, shall be 5.5
approved by the registrar of motor vehicles. 5.6

141. ANY PERSON WHO HAS CHARGED AGAINST HIM TWO POINTS FOR 5.8
VIOLATION OF SECTION 4511.81 OF THE REVISED CODE, MAY, FOR THE 5.9
PURPOSE OF OBTAINING A DELETION OF THOSE TWO POINTS FROM HIS
DRIVING RECORD, EITHER ENROLL IN AN APPROVED COURSE OF REMEDIAL 5.10
DRIVING INSTRUCTION AS PROVIDED IN DIVISION (L) (1) OF THIS 5.11
SECTION OR PURCHASE A CHILD RESTRAINT SYSTEM THAT MEETS FEDERAL 5.12
MOTOR VEHICLE SAFETY STANDARDS AS PROVIDED IN SECTION 4511.81 OF 5.13
THE REVISED CODE. SUBJECT TO SUCCESSFUL COMPLETION OF THE COURSE 5.14
OF REMEDIAL DRIVING INSTRUCTION OR PRESENTATION OF SUCH EVIDENCE 5.15
OF PURCHASE OF A CHILD RESTRAINT SYSTEM AS THE REGISTRAR REQUIRES 5.16
BY RULE, THE DELETION OF THE TWO POINTS FROM THE PERSON'S DRIVING 5.17
RECORD SHALL BE APPROVED BY THE REGISTRAR. 5.18

(u) When the driving privileges of any person are 5.19
suspended by any trial judge of any court of record pursuant to 5.21
section 4507.16 of the Revised Code, and points are charged
against the person under this section for the offense which 5.22
resulted in the suspension, that period of suspension shall be 5.24
credited against the time of any subsequent suspension under this 5.25
section for which the points were considered in making the
subsequent suspension. 5.26

(v) The registrar shall upon written request of a licensee 5.27
petitioning under division (A) of this section, furnish the 5.28
licensee a copy of the registrar's record of the convictions and 5.29
bond forfeitures of the person certified by the registrar. This 5.30
record shall include the name, address, and birthdate of the 5.31
person so charged; the number of his operator's or chauffeur's 5.32
license, the name of the court in which each conviction or bail 5.33
forfeiture took place; the nature of the offense; the date of 5.34
hearing; the number of points charged against each conviction or 5.35
bail forfeiture; and such other information as the registrar of 6.1
motor vehicles may deem necessary. When the record includes not 6.2
less than twelve points charged against the person within a two- 6.3
year period, it is prima-facie evidence that the person is a 6.4

repeat traffic offender and his driving privilege shall be suspended as provided in this section. 6.5

At hearing the matter and determining whether the person has shown cause why his driving privileges should not be suspended, the court shall decide the issue upon the record certified by the registrar and such additional relevant, competent, and material evidence as either the registrar or the person whose license is sought to be suspended submits. 6.6
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At such proceedings the registrar shall be represented by the prosecuting attorney of the county in which the person resides if the petition is filed in the county court, except where the petitioner is a resident of a city or village within the jurisdiction of a county court in which case the city director of law or village solicitor shall represent the registrar. If the petition is filed in the municipal court, the registrar shall be represented as provided in section 1901.34 of the Revised Code. 6.12
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If the court finds from the evidence submitted that the person has failed to show cause why his driving privileges should not be suspended then the court shall assess the cost of the proceeding against the person and shall impose the suspension provided in division (K) of this section or withhold the suspension, or part thereof, and provide such conditions or probation as the court deems proper. If the court finds that the person has shown cause why his driving privileges should not be suspended the cost of the proceedings shall be paid out of the county treasury or the county in which the proceedings were held. 6.20
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Any person whose license is suspended under this section is not entitled to apply for or receive a new license during the effective date of the suspension. 6.32
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Upon termination of any suspension or other penalty imposed under this section involving surrender of a license or permit and upon request of the person whose license or permit was so suspended or surrendered, the registrar shall return the license 6.34
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section 4507.41 of the Revised Code have been met.

Any person whose license or permit or privilege to operate a motor vehicle has been suspended as a repeat traffic offender under this section and who during such suspension drives any motor vehicle upon any highway is guilty of a misdemeanor of the first degree, and no court shall suspend the first three days of any such sentence.

(O) The privilege of driving a motor vehicle on the highways or streets of this state, given to nonresidents under section 4507.04 of the Revised Code, shall be subject to suspension by the registrar.

Sec. 4511.81. (A) WHEN ANY CHILD WHO IS LESS THAN FOUR YEARS OF AGE OR WEIGHS LESS THAN FORTY POUNDS IS BEING TRANSPORTED IN A MOTOR VEHICLE OWNED BY HIS PARENT OR LEGAL GUARDIAN AND REGISTERED IN THIS STATE, AND THE MOTOR VEHICLE IS REQUIRED BY THE UNITED STATES DEPARTMENT OF TRANSPORTATION TO BE EQUIPPED WITH SEAT BELTS AT THE TIME OF MANUFACTURE OR ASSEMBLY, THE OPERATOR OF THE MOTOR VEHICLE SHALL HAVE THE CHILD PROPERLY SECURED IN ACCORDANCE WITH THE MANUFACTURER'S INSTRUCTIONS IN A CHILD RESTRAINT SYSTEM THAT MEETS FEDERAL MOTOR VEHICLE SAFETY STANDARDS.

(B) WHEN ANY CHILD WHO IS LESS THAN ONE YEAR OF AGE IS BEING TRANSPORTED IN A MOTOR VEHICLE AS PROVIDED IN DIVISION (A) OF THIS SECTION THAT IS NOT OWNED BY HIS PARENT OR LEGAL GUARDIAN, THE OPERATOR OF THE MOTOR VEHICLE SHALL HAVE THE CHILD PROPERLY SECURED IN ACCORDANCE WITH THE MANUFACTURER'S INSTRUCTIONS IN A CHILD RESTRAINT SYSTEM THAT MEETS FEDERAL MOTOR VEHICLE SAFETY STANDARDS.

(C) WHEN ANY CHILD WHO IS ONE YEAR OF AGE OR OLDER BUT LESS THAN FOUR YEARS OF AGE IS BEING TRANSPORTED IN A MOTOR VEHICLE AS PROVIDED IN DIVISION (A) OF THIS SECTION THAT IS NOT OWNED BY HIS PARENT OR LEGAL GUARDIAN, AND A CHILD RESTRAINT SYSTEM IS NOT AVAILABLE, THE OPERATOR OF THE MOTOR VEHICLE SHALL HAVE THE CHILD PROPERLY SECURED IN A SEAT BELT.

(2) WHEN ANY CHILD AS PROVIDED IN DIVISION (A) OF THIS SECTION IS BEING TRANSPORTED IN A MOTOR VEHICLE THAT IS REGISTERED IN THIS STATE AND IS OWNED, LEASED, OR RENTED BY A NURSERY SCHOOL, KINDERGARTEN, OR DAY-CARE CENTER, THE OPERATOR OF THE MOTOR VEHICLE SHALL HAVE THE CHILD PROPERLY SECURED IN ACCORDANCE WITH THE MANUFACTURER'S INSTRUCTIONS IN A CHILD RESTRAINT SYSTEM THAT MEETS FEDERAL MOTOR VEHICLE SAFETY STANDARDS.

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(2) THE DIRECTOR OF HIGHWAY SAFETY SHALL ADOPT SUCH RULES AS ARE NECESSARY TO CARRY OUT THIS SECTION.

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(2) FAILURE TO SECURE A CHILD IN A CHILD RESTRAINT SYSTEM IS NOT NEGLIGENCE IMPUTABLE TO THE CHILD, NOR IS SUCH FAILURE ADMISSIBLE AS EVIDENCE IN ANY CIVIL ACTION INVOLVING THE RIGHTS OF THE CHILD AGAINST ANY OTHER PERSON ALLEGEDLY LIABLE FOR INJURIES TO THE CHILD.

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(2) ANY PERSON WHO VIOLATES THIS SECTION SHALL BE ASSESSED TWO POINTS AS PROVIDED UNDER SECTION 4507.40 OF THE REVISED CODE. NO FINE MAY BE IMPOSED FOR A VIOLATION OF THIS SECTION, EXCEPT THAT COURT COSTS MAY BE IMPOSED.

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SEC. 5747.054. IN ADDITION TO ALL OTHER CREDITS ALLOWED UNDER THIS CHAPTER, THERE SHALL BE ALLOWED AS A CREDIT AGAINST THE TAX IMPOSED BY SECTION 5747.02 OF THE REVISED CODE, A CREDIT FOR EACH CHILD RESTRAINT SYSTEM, AS PROVIDED IN SECTION 4511.01 OF THE REVISED CODE, PURCHASED BY THE TAXPAYER DURING THE TAXABLE YEAR. THE AMOUNT OF THE CREDIT ALLOWED FOR EACH SUCH PURCHASE SHALL EQUAL THE LESSER OF FIVE DOLLARS OR TEN PER CENT OF THE AMOUNT EXPENDED FOR THE CHILD RESTRAINT SYSTEM, PLUS THE COST, IF ANY, OF INSTALLATION. THE TAX COMMISSIONER MAY REQUIRE A TAXPAYER TO FURNISH ANY INFORMATION NECESSARY TO SUPPORT A CLAIM FOR CREDIT UNDER THIS SECTION, INCLUDING A COPY OF THE RECEIPT FOR THE PURCHASE OF THE CHILD RESTRAINT SYSTEM, AND NO CREDIT SHALL BE ALLOWED UNLESS SUCH INFORMATION IS PROVIDED.

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THE SUM OF THE CREDITS ALLOWED BY THIS SECTION SHALL NOT EXCEED THE TAX OTHERWISE DUE AFTER APPLICATION OF ALL OTHER

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NO PERSON SHALL KNOWINGLY MAKE A FALSE STATEMENT FOR THE	8.35
PURPOSE OF OBTAINING A CREDIT UNDER THIS SECTION.	8.36
Section 2. That existing section 4507.40 of the Revised	9.1
Code is hereby repealed.	9.2
Section 3. Sections 1 and 2 of this act shall take effect	9.3
January 1, 1982.	9.4

H. 246 By Turnham
2/3/81
RFD Highway Safety



SUMMARY: This bill requires that children under the age of four use a passenger restraint system in certain instances, and to provide penalties for violation of this act.

A B I L L
T O B E E N T I T L E D
A N A C T

To require that children under the age of four use a passenger restraint system in certain instances; to provide penalties for violation of the act.

BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

Section 1. Every parent or legal guardian of a child under the age of four (4) years residing in this state shall be responsible, when transporting his child in a motor vehicle owned by that parent or guardian operated on the roadways, streets or highways of this state, for providing for the protection of his child and properly using a child passenger restraint system meeting federal motor vehicle safety standards, or assuring that such child is held in the arms of an older person riding as a passenger in the motor vehicle.

Provided that the term "motor vehicle" as used in this act shall not apply to recreational vehicles of the truck or van type. Provided further that the term "motor vehicle" as used in this act shall not apply to trucks having a tonnage rating of one ton or more.

Provided that in no event shall failure to wear a child passenger restraint system be considered as contributory

negligence, nor shall such failure to wear said child passenger restraint system be admissible as evidence in the trial of any civil action.

Section 2. Any person violating the provisions of this act shall be guilty of a violation as defined by Section 13A-5-3, Code of Alabama 1975 and may be fined not less than \$2.00 nor more than \$10.00 for each offense.

Section 3. All laws or parts of laws which conflict with this act are hereby repealed.

Section 4. The provisions of this act are severable. If any part of this act is declared invalid or unconstitutional, such declaration shall not affect the part which remains.

Section 5. This act shall become effective immediately upon its passage and approval by the Governor, or upon its otherwise becoming a law.

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BY Messrs. Carey and Whittle and Representatives Grisham and
Simmons

1 AN ACT

2 To amend Subpart L of Part IV of Chapter 1 of Title 32 of the Louisiana
3 Revised Statutes of 1950, by adding thereto a new Section to be
4 designated as R.S. 32:295, to require use of passenger restraint
5 systems for children under the age of four years who are passengers
6 in motor vehicles owned by the parent or guardian, to provide
7 penalties for violations, and otherwise to provide with respect
8 thereto.

9 Be it enacted by the Legislature of Louisiana:

10 Section 1. Section 295 of Title 32 the Louisiana Revised
11 Statutes of 1950 is hereby enacted to read as follows:

12 §295. Use of passenger restraint systems for children
13 under age four

14 A. Every parent or legal guardian of a child under the age
15 of four years residing in this state shall be responsible, when
16 transporting that child in a motor vehicle owned by the parent
17 or guardian operated on the roadways, streets, or highways of
18 this state, for providing for the protection of that child and
19 properly using a child passenger restraint system meeting federal
20 motor vehicle safety standards. In no event shall failure to wear
21 a child passenger restraint system be considered as negligence, nor
22 shall such failure to wear said child passenger restraint system be
23 admissible as evidence in the trial of any civil action.

24 B. Whoever violates this Section shall be fined not more than

Section 3. Any person violating the provisions of this act shall be issued a written warning, a copy of which will be forwarded to the Drivers License Division of the Department of Public Safety, and the Director, at his discretion, may award point(s) against that person's driver's license record. The second and subsequent offenses shall be a violation as defined by Section 11A-5-3 Code of Alabama 1975 and may be fined not more than ten dollars for each offense.

Section 4. All laws or parts of laws which conflict with this act are hereby repealed.

Section 5. The provisions of this act are severable. If any part of this act is declared invalid or unconstitutional, such declaration shall not affect the part which remains.

Section 6. This act shall become effective within sixty days after its passage and approval by the Governor.

STATE OF MICHIGAN
81ST LEGISLATURE
REGULAR SESSION OF 1981



Public Act 117 of 1981

AN ACT to amend section 907 of Act No. 300 of the Public Acts of 1949, entitled as amended "An act to provide for the registration, titling, sale, transfer, and regulation of vehicles operated upon the public highways of this state or any other place open to the general public and distressed vehicles; to provide for the licensing of dealers; to provide for the examination, licensing, and control of operators and chauffeurs; to provide for the giving of proof of financial responsibility and security by owners and operators of vehicles; to provide for the imposition, levy, and collection of specific taxes on vehicles, and the levy and collection of sales and use taxes, license fees, and permit fees; to provide for the regulation and use of streets and highways; to provide for the creation of a Michigan department of state publications fund; to provide penalties and sanctions for a violation of this act; to provide for civil liability of owners and operators of vehicles and service of process on residents and nonresidents; to provide for the enforcement of this act; and to repeal all other acts or parts of acts inconsistent with this act or contrary to this act," as amended by Act No. 439 of the Public Acts of 1960, being section 257 507 of the Compiled Laws of 1970, and to add section 710d.

The People of the State of Michigan enact:

Section 1. Section 907 of Act No. 300 of the Public Acts of 1949, as amended by Act No. 439 of the Public Acts of 1960, being section 257 507 of the Compiled Laws of 1970, is amended and section 710d is added to read as follows:

Sec. 710d. (1) Except as provided in this section, or as otherwise provided by law, a rule promulgated pursuant to Act No. 300 of the Public Acts of 1949, as amended, being sections 24 301 to 24 313 of the Michigan Compiled Laws, or federal regulation, each driver transporting a child in a motor vehicle shall properly secure such child in a child restraint system as follows:

(a) Any child less than 1 year of age in a child restraint system which meets the standards prescribed in 49 C.F.R. 371.213.

(b) Any child 1 year of age but less than 2 years of age, when transported in the front seat, in a child restraint system which meets the standards prescribed in 49 C.F.R. 371.213.

(c) Any child 1 year of age or more but less than 2 years of age, when transported in the rear seat, in a child restraint system which meets the standards prescribed in 49 C.F.R. 371.213, unless the child is secured by a safety belt provided on the motor vehicle.

(2) This section does not apply to a nonresident driver transporting a child in this state or to any child being carried.

(3) This section does not apply if the motor vehicle being driven is a bus, school bus, taxicab, airport ambulance, or other motor vehicle not required to be equipped with safety belts under section 710b or federal law or regulations.

(4) A person who violates this section is responsible for a civil infraction.

(5) Points shall not be assessed under section 306a for a violation of this section. An abstract prepared under section 712 shall not be submitted to the secretary of state regarding a violation of this section.

(6) The secretary of state may exempt by rule promulgated pursuant to Act No. 300 of the Public Acts of 1949, as amended, a class of children from the requirements of this section if the secretary of state determines that the use of the child restraint system required under subsection (1) is impractical because of physical infirmity, a medical problem, or body size. The secretary of state may specify alternate means of protection for a child from exempted under this subsection.

Sec. 907. (1) A violation of this act or a local ordinance substantially corresponding to a provision of this act, which is designated a civil infraction shall not be considered a less included offense of a personal offense.

(2) If a person is determined pursuant to section 24 301 to be responsible or responsible with explanation for a civil infraction under this act or a local ordinance substantially corresponding to a provision of this act the judge before whom such case is brought may under the provisions of section 24 301 of the act not more than \$100.00 and costs as provided in subsection 2. For a violation of section 100d, the civil fine or local order this subsection shall not exceed \$5.00. A suspension may be granted for payment of a

civil fine and costs to be made within a specified period of time or in specified installments, but in the absence of permission being included in the order or judgment, the civil fine and costs shall be payable immediately.

(3) If a civil fine is ordered to be paid under subsection (2), the judge, referee, or magistrate shall summarily tax and determine the costs of the action, which shall not be limited to the costs taxable in ordinary civil actions, and may include all expenses, direct and indirect, to which the plaintiff has been put in connection with the civil infraction, up to the entry of judgment. Except in a civil infraction for a parking violation, costs of not less than \$5.00 shall be ordered. Costs shall not be ordered in excess of \$100.00. Except as otherwise provided by law, costs shall be payable to the general fund of the plaintiff.

(4) In addition to a civil fine and costs ordered under subsection (2), the judge, referee, or magistrate may order the person to attend and complete a program of treatment, education, or rehabilitation.

(5) A referee or district court magistrate shall impose the sanctions permitted under subsections (2) and (4) only to the extent expressly authorized respectively by the chief judge of the recorder's court of the city of Detroit—traffic and ordinance division or by the chief judge, presiding judge, or only judge of the district court district.

(6) The recorder's court of the city of Detroit—traffic and ordinance division, each district of the district court, and each municipal court may establish a schedule of civil fines and costs to be imposed for civil infractions which occur within the respective city or district. If a schedule is established, it shall be prominently posted and readily available for public inspection. A schedule need not include all violations which are designated by law or ordinance as civil infractions. A schedule may exclude costs on the basis of a defendant's prior record of civil infractions or traffic offenses, or a combination of civil infractions and traffic offenses.

(7) The state court administrator shall annually publish and distribute to each district and court a recommended range of civil fines and costs for first-time civil infractions. This recommendation shall not be binding upon the courts having jurisdiction over civil infractions but is intended to act as a normative guide for judges, referees, and magistrates and a basis for public evaluation of disparities in the imposition of civil fines and costs throughout the state.

(8) If a person has received a civil infraction citation for defective safety equipment on a vehicle pursuant to section 682, the court shall waive a civil fine and costs upon receipt of certification by a law enforcement agency that repair of the defective equipment was made before the appearance date on the citation.

(9) If a person has received a civil infraction citation pursuant to section 228 for failure to produce evidence that a motor vehicle is insured under chapter 31 of Act No. 218 of the Public Acts of 1960, as amended, the court shall waive a civil fine and costs upon receipt of certification by a law enforcement agency that the defendant, before the appearance date on the citation, has produced evidence that the vehicle was insured on the date of issuance of the citation as required.

(10) A default in the payment of a civil fine or costs ordered under subsection (2) or an installment of the fine or costs may be collected by a means authorized for the enforcement of a judgment under chapter 60 of Act No. 236 of the Public Acts of 1961, as amended, being sections 600-601 to 600-605 of the Michigan Compiled Laws, or under chapter 60 of Act No. 236 of the Public Acts of 1961, as amended, being sections 600-606 to 600-607 of the Michigan Compiled Laws.

(11) If a person fails to comply with an order or judgment issued pursuant to this section, within the time prescribed by the court, the driver's license of that person shall be suspended pursuant to section 321a until full compliance with that order or judgment occurs. In addition to this suspension, the court may also proceed under section 906.

(12) The court shall waive any civil fine or cost against a person who received a civil infraction citation for a violation of section 708d if the person, before the appearance date on the citation, supplies the court with evidence of acquisition, purchase, or rental of a child seating system meeting the requirements of section 708d.

Section 2. This act does not shall take effect April 1, 1982.

STATE OF MICHIGAN



WILLIAM D. WOODWARD - GOVERNOR

DEPARTMENT OF STATE POLICE

OFFICE OF HIGHWAY SAFETY PLANNING

7500 HARBOR DRIVE, SHERBORN OFFICE BUILDING

LANSING, MICHIGAN 48213

PHONE (313) 321-1942

**American
Academy of
Pediatrics**



Michigan Chapter

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13821 1300

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1012 East 13 Mile Road
Suite 206
Farmington, 48093
13791 6070

February 5, 1982

Clinton B. Lillibridge, M.D.
Marion T. Witt, M.D.
3300 Providence Drive
Anchorage, Alaska 99504

Dear Clinton and Marion:

I am responding to your letter regarding child automobile restraint legislation. As you know, we were successful in helping to obtain passage of Michigan's first child passenger restraint law in June 1981. I have several thoughts to share with you as to how this was accomplished. In addition, I will be enclosing a copy of our law and point out the strong points and what we might write differently next time.

In 1980, a freshman member of the Michigan House of Representatives was somehow convinced that he should introduce a bill which would require the use of a car passenger safety seat by all children riding in Michigan automobiles. The law was brought before the House of Representatives and amazingly enough passed by an overwhelming majority of something like 75 to 10. This bill reached the floor of the Michigan House on the day before the Easter recess and I suspect that this kind of timing had much to do with its overwhelming passage. Unfortunately, when the law reached the Senate, it was defeated by a vote of 19 to 15. The objections that we heard were probably similar to the objections that have been heard all over the country by those who oppose such legislation. The main objection to the law was that it violated the rights of parents to transport their children in any manner that they wish. We argued subsequently that this law ignored the child's right to live and pointed out that the child was certainly not in a position, at age four or less to make an intelligent decision about how it might be most safe to be transported in an automobile. In addition, the counter argument to the violation of individual rights is that the citizens of the state are entitled to be protected from this unnecessary and preventable waste of tax money, for it was shown that a child who was injured in an automobile accident very likely would be picked by a state-supported vehicle, taken to a hospital, which again received state funds and if the child was unfortunate to be left paraplegic, would require taxpayer monies for the rest of its life to help provide support for this child. Thus, we argue citizens are entitled to resist unnecessary use of their tax money, which is indeed preventable. As you know, 90% of all car crash fatal accidents would have been prevented had the child been wearing a car passenger safety seat or seat belt.

In 1981, we really became much more well-organized in our efforts to get a law passed in Michigan. To begin with, the law came out of the

Clinton B. Lillibridge, M.D.

Marion T. Witt, M.D.

Page Two

Senate, which is our senior legislative body as opposed to the house. Secondly, we were able to obtain a bipartisan group of four senators, two Democrats and two Republicans to introduce the law in the Senate. This, I would strongly recommend to you gentlemen. Having it bipartisan and having it come from the senior house, and especially from senior members in the Senate, made a tremendous difference this time. Additionally, we really became much more well-organized in our lobbying efforts. A coalition was formed made up of members of the Michigan Chapter of the American Academy of Pediatrics, as well as including people from all areas of the community. We were able to obtain cooperation from automobile dealers, automobile manufacturers, AAA, certain insurance companies, as well as other interested parties, including a group of women who were organized throughout the state in the day care nursery school segment of our population. These women proved to be invaluable in terms of their lobbying efforts. They apparently had had past experience impacting on the state legislature and were very helpful in influencing the vote to go in a positive direction.

May I suggest that you also have a petition drawn up and circulated among pediatricians throughout the state of Alaska for their patients' parents to sign, urging legislators to vote in support of mandatory car restraint legislation. The legislators certainly listen to the people in their district and again, we felt that these petitions circulated by pediatricians were very helpful. Additionally, individual pediatricians should try to contact their legislators to convince them of the importance of car restraint legislation.

The weak points in the Michigan law have to do with two things in my opinion. First, I don't think there should be an exemption for a baby who is being breastfed on its mother's lap. Secondly, although studies by Susan Baker, et al out of the University of Maryland have shown that infants over the age of 12 months are safely transported in a back seat of a car in a seat belt, I am, in my own mind, not convinced that this is true. I wished that we had been able to avoid that hitch in our legislation, but as you'll find, there has to be some give and take in dealing with the state legislators.

I would be happy to help you in your goal of obtaining child car passenger restraint legislation in Alaska. Please feel free to call or write if there is anything else I can do.

Sincerely yours,



Marshall J. Blundy, M.D.

Alternate Chapter Chairman

Michigan Chapter, American Academy of Pediatrics

MJB:nw

American
Academy of
Pediatrics



January 28, 1982

Clinton B. Lillibridge, M. D.
Alternate Chairman, Alaska Chapter
American Academy of Pediatrics
4001 Dale Street
Suite 213
Anchorage, Alaska

Rhode Island Chapter

Chairman
Henry B. Freye, M.D.
7 Wells Street
Westerly, 02891
401/596-2242

Alternate Chairman
John E. Farley, Jr., M.D.
343 Willett Avenue
Riverside, 02915
401/433-3473

Secretary
Alfred Toselli, M.D.
293 Governor Street
Providence, 02908
401/421-5126

Treasurer
Mario Vigilani, M.D.
1525 Atwood Avenue
Johnston, 02919
401/274-2910

EXECUTIVE COMMITTEE

Roger W. Ashley, M.D.
Tower Hill Road
Wakefield, 02879
401/789-6402

Edwin N. Forman, M.D.
Rhode Island Hospital
Providence, 02902
401/277-5171

Betty B. Mathieu, M.D.
255 Waterman Street
Providence, 02906
401/521-3231

Joseph R. Pettier, M.D.
929 Main Street
Warwick, 02886
401/737-4262

Dear Clint,

I am sending you the following:

- 1) copies of bill #1 and its subsequent revision
- 2) a broad recommendation of the Insurance Institute for Highway Safety, ie, a model bill
- 3) a random of bills and their provisions

There is an angle on rear seat seat belt use in the infant who can sit unsupported. There was a hassle between IIHS and Physicians for Automotive Safety re this which appeared to me to be a power struggle.

Dave Shinn told me that the idea is this: No question that infants who cannot sit up should be in restraints. Back seat safer than front seat. Any age when can sit unsupported is a second best situation to be restrained by seat belts but this is better than nothing. Carrier restraints are best for all ages to an age when you can no longer convince a child to stay there.

Points to appeal to with parents are: Children can see better and they stay in one place and don't distract the driver.

This segment of a law may be the most difficult to sell to legislators and you do the best you can.

Surveys are still being done but we know injuries have gone down and deaths have not occurred. Usage has gone up and most parents are quite aware of the law and the reasons for the law. A loaner system is in planning stages.

Police were apparently only charging when there was an accident but lately are monitoring.

The strong point I think, is the revision of the original law which gives parents time to purchase one and also inclusion of the back seat.

American
Academy of
Pediatrics



Rhode Island Chapter

Chairman
Henry B. Freye, M.D.
7 Wells Street
Westerly, 02891
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929 Main Street
Warwick, 02886
401/737-4262

C. B. Lillibridge, M. D.

- 2 -

January 28, 1982

I'm not so sure about the provision applying the penalties to drivers who are passing through the state. I think that would only be effective if motorists were notified before they came into the state about that provision.

We think we have the best law at present and do not think we will revise it.

See you in September.

Sincerely yours,

John E. Farley, Jr., M. D.
Alternate Chairman

JEF/mg
Encs.

P.S. I originated both bills.

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 1981

A N A C T

REQUIRING THAT CHILDREN ~~FOUR (4)~~ *THREE* YEARS OF AGE OR UNDER USE CHILD PASSENGER RESTRAINT SYSTEMS

Introduced By: Representatives Connors, Durand, Carciari and Boyle

Date Introduced: March 4, 1981

Referred To: Joint Committee on Highway Safety

It is enacted by the General Assembly as follows:

1 SECTION 1. Section 31-22-22 of the General Laws in Chapter
2 31-22 entitled "Miscellaneous Rules" is hereby amended to read as
3 follows:

4 31-22-22. Child Passenger Restraint Systems. -- Any person
5 transporting a child ~~three-(3)~~ *Three (3)* ~~four-(4)~~ years of age or under in
6 the front or back seat of a motor vehicle operated on the road-
7 ways, streets or highways of this state, will provide for the
8 protection of the child and properly use a child passenger
9 restraint system approved by the United States Department of
10 Transportation under Federal Standard 213, provided that in no
11 event shall failure to wear a child passenger restraint system be
12 considered as contributory negligence, nor such failure to wear
13 said child passenger restraint system be admissible as evidence
14 in the trial of any civil action.

1 Any person deemed to be in violation of this section shall
2 be issued a citation, with a fine of fifteen (\$15.00) dollars and
3 ~~it will be recorded on said person's driving record within the~~
4 ~~rules and regulations governing Section 31-43.~~ If said cited
5 person presents proof of purchase of a federally approved child
6 restraint system under Standard 213 to the issuing police depart-
7 ment within seven (7) days of issuance, said department shall
8 void the violation. If said individual fails to present proof of
9 purchase, he or she shall be required to appear for a hearing
10 with a minimum fine of fifteen (\$15) dollars, and it will be
11 recorded on said person's driving record within the rules and
12 regulations governing Section 31-43.

13 SECTION 2. This act shall take effect upon passage.

LMS20/OD

An Effective Child Restraint Law

The Insurance Institute for Highway Safety does not involve itself in the drafting of child restraint or any other type of legislation. However, the Institute has looked comprehensively at the problem of child death and injury in motor vehicle crashes, as well as at attempts to increase restraint use by both mandatory and voluntary means. These studies, and evaluations of the Tennessee and Rhode Island laws, suggest that the elements of an effective child restraint law are these:

- Children younger than one year old should be required to be transported in an infant carrier which meets Department of Transportation standards.
- Child passengers who can sit up unassisted in a vehicle should be required to use special child restraint devices or be restrained by car seat belts.
- Child passengers should be required to ride in the back seat, in restraints, unless other children are already occupying all of the rear seating positions that have seat belts. Children should ride in the front seat only when there are not enough seating positions with restraints in the rear.
- The holding of children on the laps of adults in vehicles is a hazardous practice which should be prohibited instead of encouraged.
- Children should be prohibited from ever being carried in the cargo area of any motor vehicle. Children should specifically be banned from the cargo areas of station wagons, trucks, vans and hatchbacks.
- The driver should be responsible for insuring that children being transported in a motor vehicle are restrained according to the law. Drivers of recreational vehicles and trucks, as well as cars, should be covered.

EXPLANATION

OF

AN ACT
REQUIRING THAT CHILDREN FOUR (4)
YEARS OF AGE OR UNDER USE CHILD
PASSENGER RESTRAINT SYSTEMS

1 This act would increase the age for mandatory child
2 restraint usage from three (3) years of age to four (4) years of
3 age and extends mandatory usage to the rear seat. Additionally,
4 this act would provide that any individual cited could have the
5 option of having the violation voided upon presentation of proof
6 of purchase of a federally approved child restraint system to the
7 issuing police department. This could be opted for in lieu of an
8 administrative hearing and a fine of fifteen (\$15) dollars.

9 This act shall take effect upon passage.

LMS20/OD

Child Auto Safety

MASSACHUSETTS CHILD PASSENGER SAFETY RESOURCE CENTER NEWS UPDATE

Dr. Alfred L. Frechette
Public Health Commissioner

Edward J. King
Governor

William T. Hogan Jr.
Secretary of Human Services

Department of Public Health

Division of Preventive Medicine

September 1981

Introduction

Child Passenger Safety is the concern of many groups and individuals across Massachusetts. Because of the efforts of nurses, physicians, health educators, and community volunteers, more children are riding safely than ever before. The number of hospitals, for instance, with education programs for new parents, has grown from a handful in 1976, to virtually 100 percent. This success has brought with it an increasing need for communication among child passenger safety advocates to coordinate and share resources.

Therefore, the Child Passenger Safety Resource Center is publishing this informational bulletin, to be sent periodically to key contact persons throughout Massachusetts, to report significant state and national news in child passenger safety. The Update will not be a regularly scheduled newsletter, but a bulletin, appearing several times a year to report important developments. Please keep the Child Passenger Safety Resource Center abreast of your activities, problems and solutions, so that we may act as a clearing house and others may benefit from your experience.

Child Passenger Safety Directory

National Highway Traffic Safety Administration (NHTSA)

Federal agency which provides leadership and funding for all highway safety programs

Administrator: Raymond Peck

408 7th Street, SW

Washington, D.C. 20590

(302) 426-2120

Toll-Free Hotline for Consumer Information: (800) 424-9393

National Highway Traffic Safety Administration (NHTSA) Region I, New England

Director: John J. Connors

Massachusetts Program Coordinator: John McCaffrey

55 Broadway

Cambridge, Massachusetts 02142

(617) 494-2690

Governor's Highway Safety Bureau (GHSB)

State agency which administers NHTSA programs, including the Child Passenger Safety Resource Center

Acting Director: Paul McHugh

CPSHC Program Coordinator: Joseph Hagan

100 Charles River Park

Boston, Massachusetts 02114

(617) 727-5074

(continued on 2)



□ Passed ✕ Failed () Pending ⊞ Education Program

CHILD PASSENGER SAFETY LEGISLATION

Many state legislatures recognize the need for legislation requiring the use of car seats or safety belts. The map illustrates the current status of this legislation nationwide.

Massachusetts Child Passenger Safety Act

For the past two decades, motor vehicle accidents have been the number one cause of death and serious injury to children. In the early 1970's, crashworthy car seats were developed that could prevent 60 to 90 percent of these tragedies. Private organizations, Physicians for Automotive Safety and Action for Child Transportation Safety, pioneered in child passenger safety education. They were joined gradually by state agencies and various departments of the federal government. The Massachusetts Child Auto Safety program was initiated in 1976 by the Department of Public Health's newly created Division of Preventive Medicine.

By 1979 most states were developing child passenger safety programs. These educational efforts were recognized as extremely valuable but not sufficient to overcome the problem: a very low rate of car seat and safety belt usage. In 1978, largely through the efforts of a dedicated parliamentarian, Tennessee enacted its historic Child Passenger Protection Act, requiring parents to protect children up to age four in car seats. In 1980, Rhode Island followed suit.

In 1981, influenced by reports of success of the Tennessee and Rhode Island laws, six more states passed child passenger safety laws (see map). Massachusetts will do so by the month to do so this fall. After a public hearing where strong bipartisan support was given to the seven bills submitted by Representative Hermann, Representative White (for the Registry of Motor Vehicles), Senators Hackman, Hall, Pollard and Timilty and Lieutenant Governor O'Neil, a composite bill H 6798 was reported out of the Public Safety Committee favorably.

(continued on 2)

Directory (continued)

Child Passenger Safety Resource Center (CPSRC)
Three-year program administered through the Massachusetts Department of Public Health, Division of Preventive Medicine. Services offered include technical information, education programs and multi-media materials for professionals and consumers.

Director: Pat Bartoszesky
Assistant Director: Dennis Sterzin
800 Washington Street, Room 705
Boston, Massachusetts 02111
(617) 727-2882

Child Auto Passenger Safety Advisory Board

Since 1976, a committee of dedicated health professionals, educators, consumer advocates, government representatives, who have participated in the development of the Massachusetts statewide child auto passenger safety program. Meetings are held quarterly at 600 Washington Street, Boston.

Co-Chairmen: Thomas Lynch, Paul Schreiber, M.D.
Membership list and more information are available from CPSRC.

HIGHLIGHTS OF FEDERAL MOTOR VEHICLE SAFETY STANDARD 213-80

- ALL devices intended to restrain children in cars must be DYNAMICALLY TESTED in a simulated 30 mph crash test.
• The device must retain its structural integrity and must retain the childlike dummy with certain limits.
• Each device must pass a 20 mph "misuse" test, for example, without the tether anchored or with only the armrest in place to restrain the dummy.
• Harness buckles must require a 12-pound force to open them. Thus children will find them more difficult to open, but adults can do so easily in an emergency.
• Labeling is improved and more visible and instructions must be contained in an affixed pouch or slot on the device.

Mass. Child Passenger Safety Act (continued)

As a result of lengthy budget discussions, the bill remained in the House when the legislature recessed for vacation. Immediately after reconvening, however, the House passed H 6798 with minor language changes which made the provisions of the bill clearer and gave it a new number H

7102 (see box). Advocates should now contact their Representatives to express appreciation, and State Senators asking them to approve the bill with the same speed, so it may be sent to the Governor for signing.

Naturally many questions arise concerning the legislation. Several common queries are addressed here and a major public information effort will be begun as soon as the law is signed to prepare the public for its implementation.

- Q. Can the police really enforce such a law?
A. The Tennessee experience has been very successful. The police who were skeptical at first have become the law's staunchest supporters. It is easy to determine if children are buckled-up or not. Police welcome this as a way to keep children from causing accidents by distracting the driver. In fact, both the State Police and the Massachusetts Chiefs of Police Association testified in support of the bill and are cooperating in planning training sessions for police.
Q. Is this not too great a hardship for poor parents who may have to buy two or three cars?
A. This is a question that has been asked in the past and therefore certain alternatives are provided. Parents will definitely need a safety seat for an infant, but more than a dozen hospital or community based programs offer infant carriers for free loan or low cost rental. When a child is able to sit up unaided, the driver may use a safety seat or a properly adjusted seat belt to protect the child. This choice allows the use of a seat belt (1) for children who are young but who may weigh more than the limit for a car seat, and (2) in situations when the car seat normally used is not available. A car seat offers more protection to a young child, but it is crucial that all drivers know the importance of using a seat belt rather than placing a child in the back seat.
Q. Why does this law stop at age five? Don't older children need the same protection?
A. All the parent legislators are willing to contribute the weight of infants and young children who are totally unable to protect themselves. After the 5 months of a law for the youngest group of children have been demonstrated, it is very likely that the public will seek to extend the law to cover other children. This year both representatives and female leaders engaged upon their child passenger safety laws.

HOUSE No. 7162

Enacted by the House, on review of the House of Representatives, on the 10th day of September, 1980, the bill passed by the House on the 10th day of September 11.

The Commonwealth of Massachusetts

In the Year of the Founding the Second and Eighty-Ninth

An Act to amend chapter 26B of the General Laws, relative to child passenger seats.

Enacted by the Senate and House of Representatives in conference on the 10th day of September, 1980.

SECTION 1. Section 7 of chapter 26B of the General Laws is hereby amended by inserting after the definition of "Child" the following definition:
"Child passenger restraint", a device manufactured for the purpose of restraining children under five years of age in a motor vehicle equipped with seat belts in accordance with the provisions of this chapter and approved by the Federal Motor Vehicle Safety Standard 213.

SECTION 2. Section 7 of chapter 26B is hereby further amended by

- 1. inserting after section 7 of the following words:
2. Section 26B. The child restraint five years of age shall not be permitted in any motor vehicle on any way which will allow it to
3. wearing a safety belt which is properly adjusted and secured on
4. unless such child is properly buckled and secured by a child
5. passenger restraint as defined in section one.
6. The provisions of the section shall not apply to any child
7. who is (1) riding in a passenger in a motor vehicle in which all
8. child passenger restraints are child seats or child passenger
9. restraints as approved by other passengers who are being used
10. restraints, (2) riding in a passenger in a motor vehicle used to
11. transport passengers for hire, (3) riding in a passenger in a motor
12. vehicle not equipped with seat belts in accordance with the
13. provisions of this chapter, (4) riding in a passenger in a motor
14. vehicle with child passenger restraint, the operator of a motor
15. vehicle who violates the provisions of the paragraph shall be
16. subject to a fine of not more than twenty-five dollars, provided
17. however, that such fine may be waived upon satisfactory proof
18. being presented to the court that the defendant has purchased a
19. child passenger restraint as defined in section one.
20. A violation of the section shall not be considered unless any
21. measurements to be contributing to negligence can be shown to
22. not a violation to be liable in any civil action.

SECTION 3. The first paragraph of section 26B of chapter 26B of the General Laws, relative to chapter 26B of chapter 26B, shall be amended to read as follows:
26B. It is the policy of the Commonwealth to encourage the use of child passenger restraints in motor vehicles.
26B.1. Any child under five years of age shall not be permitted in any motor vehicle on any way which will allow it to
26B.2. Any child under five years of age shall not be permitted in any motor vehicle on any way which will allow it to
26B.3. Any child under five years of age shall not be permitted in any motor vehicle on any way which will allow it to
26B.4. Any child under five years of age shall not be permitted in any motor vehicle on any way which will allow it to
26B.5. Any child under five years of age shall not be permitted in any motor vehicle on any way which will allow it to

SECTION 4. This act shall take effect on January first, 1981.

Passed



GODDARD MEDICAL ASSOCIATES, P.C.

ONE PEARL STREET, BROCKTON, MASSACHUSETTS 02401 • 617-586-3600

January 20, 1982

Surgery

Werrin R. Nicholson, M.D.
Paul A. Sargl, M.D.

Obstetrics and Gynecology

Earl P. Gelman, M.D.
Donald G. Shroy, M.D.
Arthur J. Heyman, M.D.
Jeffrey M. Good, M.D.

Family Practice

Michael C. Randon, M.D.
Michael L. Dem, M.D.

Internal Medicine

Ronald P. Caputo, M.D.
Jeremiah P. McDonnell, M.D.
Stanley J. Mazurka, M.D.
Andrew A. Nowak, M.D.
Paul R. Conic, M.D.

Gastroenterology

Fredrick V. F. Ng, M.D.

Pediatrics

Philip A. Hourigan, M.D.
Richard H. King, M.D.
Paul C. Schreiber, M.D.
Steven A. Fels, M.D.

Orthopedic Surgery

Edward R. Mulaly, M.D.
Arthur P. Carlson, M.D.

Psychiatry

Joseph M. Fust, Ph.D.
Joseph T. Draine, M.D.

Pathological Services

Laboratory Services

Executive Director

Robert C. Crozier, C.P.A.

Marian T. Witt, M.D.
3300 Providence Drive
Anchorage, Alaska 99504

Dear Dr. Witt:

Thank you very much for your interest in Massachusetts Child Passenger Protection Law. I believe a copy has been sent to you already by Dr. Pendleton.

We feel that the Massachusetts law has eliminated some of the weaknesses in other legislation which incidently other states have been able to correct after passage and public acceptance of a flawed law. Ideally we would like all children to be covered by mandatory car restraints. Age five was chosen as a reasonable cutoff because this covered the age during which available carseats were most effective and seatbelts first become a reasonable alternative. Permitting children under five to ride in seatbelts is a weakness but far superior to riding unrestrained.

Incidently, our Bill was a number of years in the pushing and not an irresistable sweep through the legislature. Two important items in convincing the legislators were that a violation would not constitute a "moving violation" with implications toward license suspension or insurance penalties and that the failure to use a proper restraint would not be considered contributory negligence.

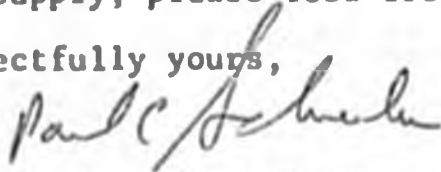
Our success came I believe because of a broad based coalition of advocates working on publicity and personal legislative contact over a long period of time. I think that David Shin at the Academy's main office could provide further aid for your efforts and I am also passing your request on to Pat Bartoshefsky who has worked tirelessly for many years as a private citizen

Page 2
January 20, 1982

and state worker to promote child automotive safety and this particular bill.

Good luck to you and if there is any other information I can supply, please feel free to call upon me.

Respectfully yours,



Paul C. Schreiber, M.D.

Chairman: Accident Prevention Committee

PCS:cg

Mass. Chapter AAP

HOUSE No. 7162

Substituted by the House, on motion of Mr. White of Worcester, for a bill with the same title (House, No. 6728) and passed by the House to be engrossed. September 15.

The Commonwealth of Massachusetts

In the Year One Thousand Nine Hundred and Eighty-One.

AN ACT REQUIRING THE USE OF CHILD PASSENGER RESTRAINTS IN AUTOMOBILES.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

SECTION 1. Section 1 of chapter 90 of the General Laws is hereby amended by inserting after the definition of "Certified inspector" the following definition: —

"Child passenger restraint", a device manufactured for the purpose of transporting children under five years of age in a motor vehicle equipped with seat belts in accordance with the provisions of federal laws and regulations, and approved by the United States Department of Transportation pursuant to Federal Motor Vehicle Safety Standard #213.

SECTION 2. Said chapter 90 is hereby further amended by inserting after section 72 the following section: —

Section 7AA. No child less than five years of age shall ride as a passenger in any motor vehicle on any way unless said child is wearing a safety belt which is properly adjusted and fastened or unless such child is properly fastened and secured by a child passenger restraint as defined in section one.

The provisions of this section shall not apply to any such child who is riding as a passenger in a motor vehicle in which all seating positions equipped with safety belts or child passenger

restraints are occupied by other passengers who are using said restraints; (2) riding as a passenger in a motor vehicle used to transport passengers for hire; (3) riding as a passenger in a motor vehicle not equipped with safety belts; (4) physically unable to use safety belts or child passenger restraints. Any operator of a motor vehicle who violates the provisions of this paragraph shall be subject to a fine of not more than twenty-five dollars; provided, however, that such fine may be waived upon satisfactory proof being presented to the court that the defendant has purchased a child passenger restraint as defined in section one.

A violation of this section shall not be considered under any circumstances to be contributory negligence nor shall evidence of such a violation be admissible in any civil action.

SECTION 3. The first paragraph of section 113P of chapter 175 of the General Laws, as appearing in section 18 of chapter 266 of the acts of 1976, is hereby amended by striking out clause (r) and inserting in place thereof the following clause: —

(r) Twenty-five dollars — speeding and other moving traffic violations but excluding operating without possession of a license or registration or operating a motor vehicle in violation of section seven AA of chapter ninety and such other exclusions as provided by the commissioner.

SECTION 4. This act shall take effect on January first, nineteen hundred and eighty-two.

**American
Academy of
Pediatrics**



**Louisiana Chapter
5825 Airline Hwy.
Baton Rouge, LA 70805**

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Larry J. Hebert, M.D.
Baton Rouge, LA
Alternate Chairman
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Jefferson
John Moore, M.D.
Jefferson
Herbert Rothschil, M.D.
James Reynolds, M.D.
Judi Gates, M.D.
Orleans

January 26, 1982

Marian T. Witt, M. D.
3300 Providence Drive
Anchorage, Alaska 99504

Dear Dr. Witt:

Enclosed is a copy of the law we introduced during 1980 and 1981 Louisiana legislatures. Unfortunately, it failed. We did successfully get it onto the Senate floor.

I don't think we can change any of it so it can pass. Our legislature opposes it in general terms of "control of lives" instead of letting people decide their future.

We are planning to try again this year. Please send me a copy of your proposed law.

Sincerely,

Larry J. Hebert, M. D.
Chairman

THE PEDIATRIC CLINIC

888 TARA BOULEVARD

(904) 926-4400

BARON HOUSE, LAURENS 20008

JOHN RAY POWERS, M.D.
DAVID W. VAN GELDER, M.D.
BEN F. THOMPSON, JR., M.D.
GLENN G. GIBSON, M.D.
WALLACE H. DUNLAP, M.D.
THOMAS B. NEFLIN, M.D.

JAMES L. STEPHENS, M.D.
CONSULTANT IN PEDIATRICS


January 19, 1982

Marian T. Witt, M.D.
Chairman
Alaska Chapter
American Academy of Pediatrics
3300 Providence Drive
Anchorage, Alaska 99504

Dear Dr. Witt:

Thank you for your letter about child restraints legislation. Unfortunately we were not successful in obtaining final passage of our intended legislation so must start over again next year also. I am not sure what is the most successful approach to use but I ~~lean towards a bill that is educational~~ instead of punitive or perhaps a bill that would require the parent to show proof of purchase in order to satisfy a fine requirement.

Sincerely,

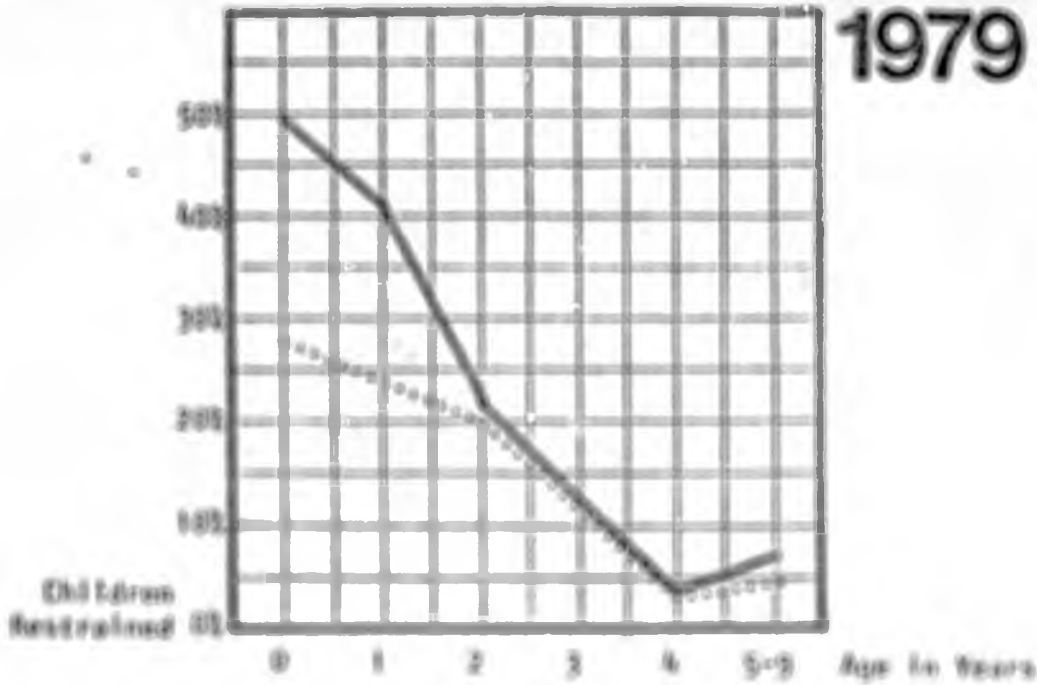


Wallace H. Dunlap, M.D.

KHD/vc

Observed Child Restraint Usage in Massachusetts

1979



— Safe Devices
 Age Appropriate Safe Devices

1980

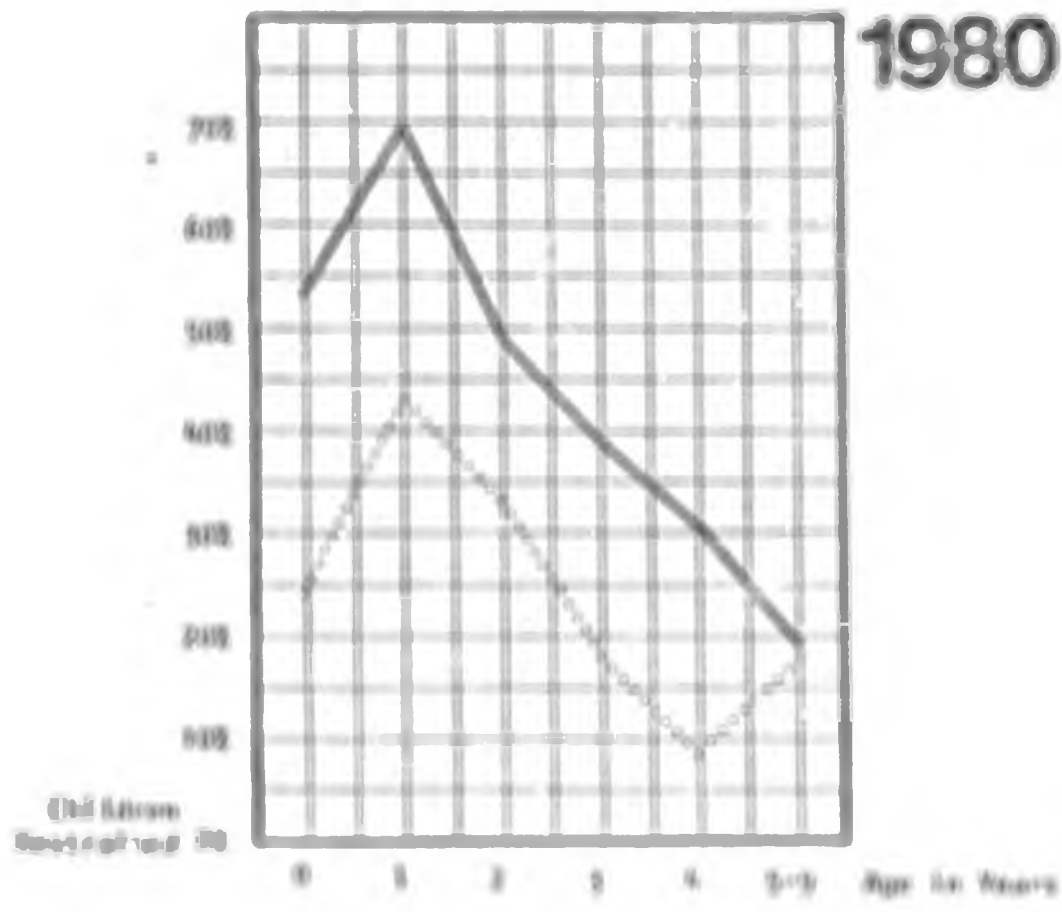


TABLE 1

AVERAGE STATE COSTS PER HIGHWAY FATALITY AND INJURY

<u>COST COMPONENT</u>	<u>FATALITY</u>	<u>PERMANENT & TOTAL DISABILITY</u>	<u>PARTIAL DISABILITY</u>	<u>NC PERMANENT DISABILITY</u>
Lost State Taxes	\$11,000 ^(A)	\$4500 ^(B)	\$900 ^(C)	140 ^(D)
Police Agencies	160	70	70	20
Legal and Court Costs	400	230	200	50
Probation Offices	115	115	115	115
Coroners/Medical Examiners	180	-	-	-
Motor Vehicle Departments	15	15	15	5
Hospital/Medical Costs (Same by State)	35	900	350	60
Public Welfare Overhead	435	435	435	435
Rehabilitation	-	485	240	-
TOTAL	\$12,340	\$6,910	\$2,245	\$625

- (A) Based on loss of 10 years income
 (B) Based on loss of 4 years income
 (C) Based on loss of 10 months income
 (D) Based on loss of 45 days income

Source: 1975 Societal Costs of Motor Vehicle Accidents, National Highway Traffic Safety Administration (DOT-HS-800-119), 1976.

Wortman, H.G., Joshi, H.C., National Indirect Costs of Motor Vehicle Accidents (Vol. 1), Federal Highway Administration (DOT-HS-11-7773), 1973.

Joseph C. March, et al., Financial Consequences of Serious Injury, Highway Safety Research Institute, University of Michigan (UM-ISR-77-27), 1977.



Alfred L. Froschets, M.D., M.P.H.
Commissioner

The Commonwealth of Massachusetts

Department of Public Health

600 Washington Street

Boston 02111

Analysis of H7162 "An Act Requiring the Use of Child Passenger/Restraints in Automobiles"

GOALS:

- An increase in car seat and seat belt use from under 20% to 70-80%.
- A dramatic reduction in death and injury to child passengers under the age of five.

DEFINITION:

"Child passenger restraint" is the technical name for a child safety seat or "car seat" manufactured according to federal regulations. Devices which do not fulfill the requirements of H7162 include: household infant carriers, car beds or portacribs, homemade booster cushions or pillows.

SUMMARY:

-All children up to age five riding in a motor vehicle must be protected by a properly adjusted child safety seat or seat belt.

Examples include:

- Vehicles not equipped with seat belts.
- Vehicles with all seat belts and not used in use.
- Children riding in "vehicle free areas" (beaches, amusement parks, etc.)
- Children physically unable to use any mode of seat belt.

The bill may not be subject to point of order and jurisdiction to proceed.

IMPLEMENTATION:

-This bill has been successfully introduced and is being carried and H7162 has passed from first to second reading and is now in the House of Representatives. All necessary and proper provisions have been made.

NOTE:

-There is no appropriation for child passenger safety to be funded by the operating budget of the Department of Public Health and Human Services.

3
Sec. 2. 23 V.S.A. § 1258 is added to read:

§ 1258. CHILD RESTRAINT SYSTEM

(a) Every parent or legal guardian operating a motor vehicle registered in this state on a public highway in which his or her child under the age of three years is a passenger, shall properly secure the child in an infant or child passenger restraining system of a type approved by the commissioner.

(b) Violators of this section shall be fined \$10.00. A person found in violation of this section may, instead of paying a fine, submit proof of ownership, or rental for not less than one year, of an approved infant or child restraint system to the traffic ticket center. This shall be acceptable only for first violations and if the acquisition of the restraint system was subsequent to the violation. No points shall be assessed for violations of this section.

Sec. 3. EFFECTIVE DATE

This act shall apply to children born on or after January 1, 1982.

THE COMMONWEALTH OF MASSACHUSETTS

Advance Copy

1981

Acts and Resolves

MICHAEL JOSEPH CONNOLLY, State Secretary

Chap. 680. AN ACT REQUIRING THE USE OF CHILD PASSENGER RESTRAINTS IN CERTAIN MOTOR VEHICLES.

Be it enacted, etc., as follows:

SECTION 1. Section 1 of chapter 90 of the General Laws is hereby amended by inserting after the definition of "Certified inspector" inserted by section 1 of chapter 761 of the acts of 1979, the following definition:-

"Child passenger restraint", a device manufactured for the purpose of transporting children under five years of age in a motor vehicle equipped with seat belts in accordance with the provisions of federal laws and regulations, and approved by the United States Department of Transportation pursuant to Federal Motor Vehicle Safety Standard, inserted by section 4 of chapter 761 of the acts of 1979, Number 213.

SECTION 2. Said chapter 90 is hereby further amended by inserting after section 72 the following section:-

Section 7AA. No child less than five years of age shall ride as a passenger in said motor vehicle on any way unless said child is wearing a safety belt which is properly adjusted and fastened or unless such child is properly fastened and secured by a child passenger restraint as defined in section one.

The provisions of this section shall not apply to any such child who is: (1) riding as a passenger in a motor vehicle in which all seating positions equipped with safety belts or child passenger restraints are occupied by other passengers who are using said restraints; (2) riding as a passenger in a motor vehicle used to transport passengers for hire; (3) riding as a passenger in a motor vehicle not equipped with safety belts; (4) physically unable to use safety belts or child passenger restraints. Any operator of a motor vehicle who violates the provisions of this section shall be subject to a fine of not more than twenty-five dollars; provided, however, that such fine may be waived if the court is satisfied that the defendant has purchased a child passenger restraint as defined in section one.

A violation of this section shall not be used as evidence of contributory negligence in any civil action.

SECTION 3. The first paragraph of section 112P of chapter 17B of the General Laws, as appearing in section 18 of chapter 206 of the acts of 1976, is hereby amended by striking out clause (c) and inserting in place thereof the following clause:-

(c) Twenty-five dollars - speeding and other moving traffic violations but excluding operating without possession of a license or registration or operating a motor vehicle in violation of section seven AA of chapter ninety and such other exclusions as provided by the commissioner.

SECTION 4. This act shall take effect on January first, nineteen hundred and eighty-two.

Approved December 23, 1981.

MASSACHUSETTS CHILD PASSENGER SAFETY LAW

In explaining the new Massachusetts Child Passenger Safety Law, we have reacted to those who feel that such legislation is unnecessary, that education alone should be pursued, as well as to advocates who feel that the law should be even stronger. We will present our rationale for the various provisions point by point and will suggest where the law might have been written differently.

The main argument for Child Passenger Safety legislation is that the level of car seat/seat belt usage achievable by education alone is unacceptably low. A car seat/seat belt law is itself a form of education, with an added dimension of association with other highway regulations, such as limiting speed or stopping at red lights.

At all stages, from the public hearing to final vote, it helps to have statistics to back-up arguments for the legislation.

We used, for example, data from two statewide observation studies, performed by college student volunteers, to determine "current" car seat/seat belt usage levels. (Table 1) We then projected a level that we hope can be reached by education reinforced by legislation. We are aiming for 60-65 percent usage.

We used injury data and projections from the National Highway Traffic Safety Administration (Table 2), as well as data from the book The Incidence and Economic Costs of Major Health Impairments by Mortality and Years of Disability and savings to the state from injuries and deaths prevented. We also used reports of the effectiveness of car seat/seat belt legislation which had been passed in Connecticut and Rhode Island.

In December 1980, seven different sponsors submitted child car seat/seat belt bills. Our law, as finally passed, represents a composite or compromise of these based on political, as well as logical considerations. The bill submitted by our Lt. Governor, for example, had the most radical proposal, a tax credit for car seat purchase. This did not withstand our current preoccupation with reducing state spending.

We were fortunate to have the age of children covered by the law be set at five years rather than two, three or four. We feel that this will help us persuade most parents to "graduate" their children from car seats to seat belts. The seat belt option underlines the important principle that when a car seat is not available, even a very young child should use a seat belt rather than ride loose.

Obviously, we should have stipulated that seat belt use is possible only for children able to sit unaided, but we feel that this is not a major problem, that drivers would not attempt to place an infant in a seat belt. When we able to re-write the bill, we would use the phrase "able to sit unaided" rather than set an arbitrary age for moving from infant carrier to child car seat/seat belt. It takes into account different rates of growth and requires the police officer of the area to try to determine the age of the child.

We were very happy to be able to have the bill apply to all drivers rather than just parents or guardians. Police will naturally use discretion in stopping cars with out-of-state license plates, but this provision enables them to avoid any young child being transported in a hazardous manner.

The exemption of "children for hire" was allowed because we found that operators from out of state were likely to be the most likely to transport children in hazardous manner. The bill also provides that children for hire are not to be transported in a hazardous manner. We do hope to see more and more children transported in a hazardous manner by parents, guardians, and other persons.

Children in cars not equipped with seat belts are exempted because we greatly feared that the bill would be defeated if it required people with older cars to have belts installed. We know that the supply of older cars will decrease. It is illegal in Massachusetts to remove seat belts from cars and we do not expect that people will do so simply to escape obeying the Child Passenger Safety Law.

In a similar vein, we did not want to put ourselves in the position of mandating that families with too few belts in their cars buy larger cars; hence, the exemption for drivers of vehicles with all belts in use. This exemption is criticized on the grounds that it permits the carpooling of too many children at a time. Given that we could not find a compromise suitable for accommodating both situations, we chose to favor the route that would seem least likely to penalize or antagonize low-income parents.

The exemption for children unable to use belts due to physical condition (handicap) or an emergency situation, is self-explanatory. We just received a sample Britax Handicapped Child Seat and hope to work with agencies who serve children with special needs.

Unsurprisingly, we have had complaints both that the fine is too high and that it is too low. The staff of the Joint Public Safety Committee, which drafted the compromise bill, was adamant in inserting the exemption from an insurance surcharge as essential for winning passage. Exemplary violation as grounds for negligence is based on the same matters.

As of the beginning of February, we have given priority to public safety and safety officers special workshops on the new law. We are not sure of what other steps we should take. We are sure that the law will be enforced. The public should be aware of the law. If we were to have the law, we should probably clarify that the purpose of the exemption is to encourage the use of seat belts and to reduce the number of children in cars with too few belts. The goal is to encourage

He also did not specify whether a driver carrying two or more unrestrained children under the age of five would be fined for each child or in toto for the trip. States drafting legislation should determine exactly which office or agency will rule on such ambiguities. Also, people not involved with the issue should read the proposed bill and be asked as many questions as possible so as to try to resolve potential conflicts or political problems. Some of the police at the workshops objected to the waiver because it requires them to use too much time going to court and seems to weaken the law unduly. On the other hand, the waiver does seem to have been a strong selling point for the law in Tennessee. We will have to wait and see how this unrolls here.

④
The University of Vermont

COLLEGE OF MEDICINE DEPARTMENT OF PEDIATRICS
GREEN BUILDING BURLINGTON VERMONT 05405
802/856 2296



May 12, 1981

Fred Holmes, M.D.
114 Fairfield Street
St. Albans, Vermont 05478

Dear Fred:

As promised, this letter summarizes my thoughts about our campaign to pass child restraint legislation.

Obviously, initially I was greatly disappointed, but I now feel that our effort, in itself, was useful and will have long-term benefits that are yet to become apparent.

I think we made two major mistakes. The first was that we did not get an accurate vote count before the final vote. If we knew that it was going to be defeated, it would have been preferable to have it sent back to committee so that we could continue to work on it next year. We did attempt to determine the likelihood of passage; however, the Lt. Governor suggested about a week before the final vote that it would be hard to vote against the bill, and she thought there was a good chance of passage. In addition, the Democratic floor leader in the House, about a week before the final vote, also thought there were enough votes for passage. In addition, the day before the final vote it was approved 70-65. However, we were not prepared for the high pressure counter-campaign tactics that would force 10 Representatives to change their votes.

The second major mistake was that we did not get bipartisan support. You may recall about a year ago when the highway epidemic was on the front page of the newspapers with the highest highway fatality rates in years, Lt. Governor Rubin set up a committee to investigate the problem. After hearing of this, the Governor became terribly upset that the Lt. Governor had moved into the problem ahead of him, so he set up his own committee and presented government agencies from cooperating voluntarily with the Lt. Governor. In a sense, it was a year ago that our efforts may have been doomed. At that time the highway epidemic became a partisan rather than a bipartisan problem. A representative of the Governor's Highway Safety Program, Barbara Schmalzer, who is also the secretary of Vermont NHTA, did contact then Secretary of Transportation William

Fred Holmes, M.D.

May 17 1981

Page 2

In January 1981 to determine the Governor's position on the child restraint bill. Crisman said there was no problem with the bill, and so we thought we had surprisingly the tacit approval of the Governor. As you now know, this turned out to be a big mistake and a big problem for us.

I had not really intended to promote the car seat bill during this legislative session. I did not think we were adequately prepared since we hadn't developed a massive media campaign, and we did not have an extensive network throughout the state. Nonetheless, at the encouragement of the Lt. Governor and subsequently, of course, with passage of the bill by the Senate, there was reason to believe it might be passed this legislative session.

In preparing for our next campaign for child passenger legislation, I suggest we make improvements in the following ways.

1) We need a broader network of constituents which is better organized in each county and has more constituents in each county. Our network this year consisted largely of volunteers of the car seat rental program developed through Vermont SIAI. Unfortunately, most of those programs had just started and we did not have time to develop an effective network around the car seat rental program.

2) We need greater involvement and more organized involvement of the pediatricians in the State. I must say that quite a few pediatricians became involved throughout the State and were effective. In the future, I think it would be effective to send a list of Senator and Representative names, addresses and phone numbers to each pediatrician. It may be useful at future chapter meetings to have practice sessions in calling legislators. It would also be helpful to have fact sheets about each issue distributed to each pediatrician as well as a copy of the bill in its most recent or advanced form.

3) I think we need a lobbyist, someone who can spend a lot of time talking to representatives and pushing our program.

4) It would be helpful to send an e-mail early in the legislative session to each Representative and Senator. A letter from the funding signed by Academy officials prior to or at the start of the legislative session would be useful. It would be useful in

Fred Holmes, M.D.
May 12, 1981
Page 3

the future during campaigns for office to ask candidates to state their position on issues relevant to the Academy. In addition, in the next year, it may be helpful to send letters to Representatives reminding them of our continued desire for a child restraint bill, perhaps including copies of newspaper clippings reporting preventable infant fatalities.

5) Work with the Vermont State Medical Society getting support from them through resolutions and perhaps using their lobbyist.

6) Initiate legislation in both the House and the Senate simultaneously at the start of the year. Get strong, experienced leaders in each House to carry the banner and gather support.

We did have a number of strengths in this campaign. We had a good voice machine to send out our argument. Furthermore, we were fortunate in having the contact and support of Dr. Bob Sanders, the pediatrician in Tennessee, who provided us with good arguments, a lot of ammunition, and graphic materials to make our points. I think our fact sheets were well-presented, dramatic and succinct.

In addition, we do have a nucleus of a network which was effective in dealing with the smaller Senate, but was inadequate to effectively campaign against the larger House. I think it's important in the future to have one person assigned as a leader who can oversee all the activities, process the feedback and orchestrate the distribution of materials and telephone calling.

I feel I learned a lot in my first political effort. One thing I learned is that logical or factual arguments are not as good as emotional arguments which are not as good as constituents ringing telephones, and ringing telephones, and ringing telephones. I also learned that the telephone and the voice machine are our secret weapons.

As you know, I greatly appreciated your support and enjoyed working with you and other pediatricians who were willing to pick up the phone to argue with a legislator. I look forward to having all of us work together again, and with success.

Best wishes,

Yours truly,

Jack Callahan, M.D.

Vermont SEAT

Seatbelts Eliminate Automobile Tragedies

133 State Street
Montpelier, Vermont 05602
(802) 828-2665

1 February 1982

Marion T. Witt, M.D.
3300 Providence Drive
Anchorage Alaska 99504

Dear Doctor Witt:

Dick Markewicz has asked me to respond to your letter regarding our experience with attempts to pass a child restraint bill in Vermont. As he indicated, although we got a bill passed by the Vermont Senate it was narrowly defeated by the House on the last day of the legislature.

For your assistance I have enclosed the following: 1) a proposed model law for mandated car seat usage that I developed at a conference with Doctor Bob Sanders in Tennessee, 2) the Vermont Child Restraint Bill as it was introduced to the Senate, 3) the Vermont Child Restraint Bill as it was passed by the Senate and defeated by the House, 4) a copy of a letter to Fred Holmes that summarizes our efforts in 1981, 5) a summary of the Tennessee Child Passenger Protection Act prepared by Bob Sanders. In addition I have also enclosed some materials that we circulated to legislators.

An update of child restraint legislation in the United States summarizing the bills passed in nine states appears in the summer-fall 1981 issue of the newsletter of Physicians for Automotive Safety, 50 Union Avenue, Irvington, New Jersey 07111. You can see from that summary that each state legislature is willing to reinvent the wheel and that wheels come in a variety of sizes, shapes, and forms. Most workers in this area feel that any wheel is better than no wheel at all and compromise is a usual part of political necessity.

We plan to try again in Vermont in the next legislative session beginning in 1983. Our best wishes to you in Alaska.

Yours truly,

Dick

Richard D. Colletti, M.D.
President & Chairman
Accident Prevention Committee
Vermont Chapter
American Academy of Pediatrics

cc: Richard Markewicz, M.D.
Timber Lane, So. Burlington, VT



Seatbelts Eliminate Automobile Tragedies

133 State Street
Montpelier, Vermont 05602
(802) 828-2665

**The Vermont Child Passenger Protection Act
Protects Children's Rights Without Violating Parental Rights**

1. Driving on a public road is a privilege, not a right, subject to state regulation.
2. The child is not chattel. Parents are required to provide for the health and safety of their children ("parentis patriae").
Examples: immunizations, children can't be left home alone unsupervised.
3. Car seats help keep the family together by reducing the stress of injury, disability, financial loss or death.
4. Cost is not excessive, and car seats are available. There is precedent for legislated costs including driver's license, car registration, semiannual car inspections, snow tires; immunizations; smoke detectors. The public is responsible for rescuing, treating, and rehabilitating injured children, and, if there is a permanent disability, of providing life-long support. With this responsibility goes the right to attempt injury reduction.
5. Children do not have the knowledge or ability to protect themselves.
6. The Act would not increase parental liability. A child could not sue a parent. Parents would still be eligible for insurance and other protection.
7. Children unrestrained in cars cause accidents by distracting the driver. The Vermont Child Passenger Protection Act will also protect occupants of other cars from collisions.

SEAT

Seatbelts Eliminate Automobile Tragedies

Montpelier, Vermont 05602

(802) 828-2665

The Vermont Child Passenger Protection Act Car Seat Cost and Availability

1. Rental of infant car seats
Use 9-12 months, cost 55¢ to \$1 per month
2. Purchase toddler car seat
Use 2-3 years, cost as little as \$18.95
3. Seat belts already installed in cars
Are acceptable for infants 20 lbs. or more
Cost: none
4. Passage of a law would stimulate development of toddler car seat rental program, possibly through hospital rental programs, volunteer groups, church organizations, the Health Department, police programs, and Vermont SEAT.
5. Vermont SEAT will stimulate and promote programs to assist individuals and ensure universal availability.
6. Car seat costs are comparable to or less than the cost of:
immunizations
snow tires or chains
car radio
smoke detector
a tank full of gas per year
driver's license - car inspections per year
auto insurance
7. The cost of not using a car seat can be disastrously high.

1

PROPOSED MODEL LAW FOR MANDATED
CAR SEAT USAGE

A. Model Law

SECTION 1. Every driver transporting a child under the age of five (5) years in a motor vehicle registered in this state and operated on the roadways, streets or highways of this state, shall provide for the protection of the child by properly using a child passenger restraining system meeting applicable federal motor vehicle safety standards. Provided that in no event shall failure to wear a child passenger restraint system be considered as contributory negligence, nor shall such failure to wear said child passenger restraint system be admissible as evidence in the trial of any civil action.

SECTION 2. A person found to be in violation of Section 1 shall be subject to a civil fine not to exceed \$25.

SECTION 3. The bill will take effect 180 days after enactment.

B. Common Objections

This model law was developed at the International Research Seminar on Public Policy Issues in Child Passenger Safety, Nashville, Tennessee, September 7-10, 1980. It is recognized that each state passing a mandatory car seat usage law will most likely modify the model law to satisfy its own social, economic and political needs. As a result each state law may be different. However, certain objections will occur commonly and may be anticipated:

- o Grandpa can't take his grandchild for a ride in his car without a car seat.
- o Taxi drivers will be required to transport children in car seats. Who will provide the car seat, the parent or taxi driver?
- o Day care providers will be required to transport children in car seats. Who will provide the car seat, the parent or day care provider?
- o Are bus drivers and ambulance drivers exempt?

- o What about a poor family with three children under 5? How can they afford 3 car seats?
- o How can handicapped children ride in car seats?
- o What about the large 3 year old who has outgrown the car seat and is large enough to use a lap belt?

C. Counterarguments and Compromises

None of these objections are insurmountable. They may be dealt with by either (a) arguing that the cost or inconvenience of complying with the law is outweighed by the benefits, or (b) by rewording the law to compromise with the objectors without sacrificing passage of a satisfactory law.

For example, the first 4 objections can be dealt with satisfactorily by rewording the law as follows:

"Every parent or legal guardian transporting his or her child under the age of five (5) years..."

This change in wording exempts grandpa, day care providers, and taxi, bus or ambulance drivers. However, if you would like to pass a law that includes grandpa (and other relatives or friends) and day care providers, changing the words "motor vehicle" to "passenger vehicle" will, in some states, exempt taxi, bus and ambulance drivers but not the others. On the other hand "passenger vehicle" does not include vans or pick-up trucks, which, in some states, are the sole or primary vehicle for up to 20% of families.

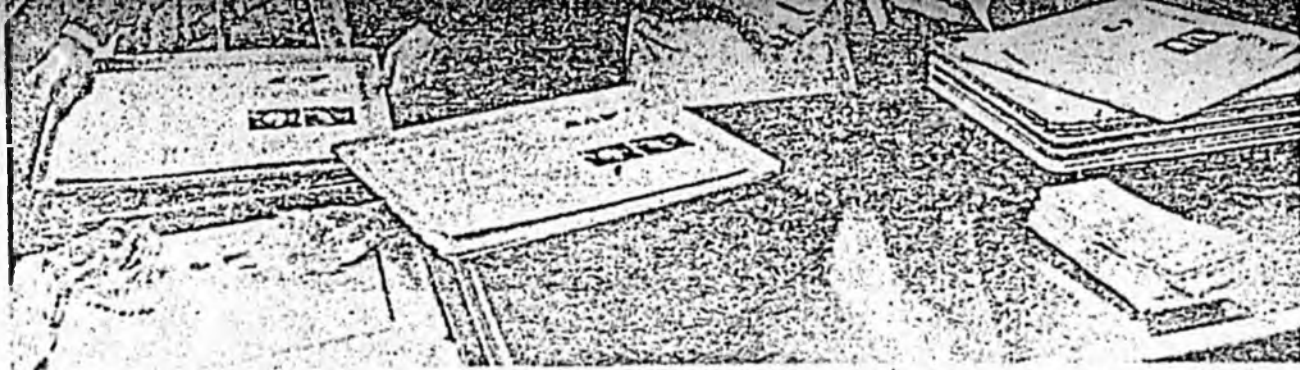
The inability of low income families to afford car seats can be counter-argued as follows:

- o It has not been a problem in Tennessee for 3 years.
- o Inexpensive car seat loaner programs are (or can be made) available.
- o Anyone who can afford to buy a car, auto insurance, gasoline, oil, maintenance and repairs, can afford a car seat.
- o Anyone who can afford the other necessities of raising a child can afford a car seat.
- o The state can develop a system of rebate or economic incentive for low income families.

Alternatively, the model law can be rewritten to allow infants 1-4 years old to ride in the back seat secured with a lap belt. Since all cars manufactured since 1968 come with lap belts, this law would obviate an additional expense. Unfortunately, a lap belt is not as safe as a car seat, and this version of compromise legislation would discourage parents who could afford a car seat from purchasing one.

Most or all handicapped children can ride in car seats. Individual exceptions can be exempted by rules or regulations developed by the State Safety Commissioner and should not be included in the law.

A large 3 year old, too large to fit in a car seat, secured by a lap belt instead, will not attract the attention of a law enforcer, so it is not a moot point. Rules and regulations developed by the State Safety Commissioner can exempt this type of child passenger.



DNJ photo by Rick Mansfield

PREPARING 'SAFETY TRAYS' — Stones River Medical Auxiliary members and Rutherford Hospital cafeteria worker Kay Spry, center, place new child safety placemats on breakfast trays for new mothers. At left is Mrs. Charles Goodman, health projects chairman for the Auxiliary, and at right, Mrs. Pat Sanders, local and state auxiliary safety chairman.

6A — News Journal, Murfreesboro, Tenn., Sun., Jan. 10, 1982

Placemats will offer child safety reminder

By Pat Malson
News Journal Staff Writer

Local child safety supporters apparently weren't completely satisfied when Tennessee became the first state to enact child auto safety laws. And it wasn't quite enough when the "child-crusher" amendment to that law was finally repealed last year.

Safety education programs, lobbying and endless campaigns for child safety restraint devices haven't been enough to satisfy them, either.

Now they have taken another step — an unusual one this time — toward fastening safety seat buckles on every Tennessee child who rides in an automobile.

Through a program begun this week at Rutherford Hospital, new mothers will have facts about the child safety law and safety devices staring them in the face — literally — by way of unique placemats that will be placed on their breakfast trays.

"It's just another way to try to get across to mothers the importance of obtaining and using child safety restraint devices," said Pat Sanders,

state safety chairman for the Tennessee Medical Association Auxiliary and safety chairman for the Stones River Medical Auxiliary, sponsor of the project. She is married to Dr. Robert Sanders, head of the Rutherford County Health Department, who has gained national attention for his spearheading of the child safety legislation campaigns.

The idea for the unique placemats originated with Jelle Beazley, president of the state auxiliary, and has been funded by donations from a group of local obstetricians.

"I was really surprised when I saw it, especially the pictures," said one new mother, Michelle Starkey, who encountered the placemats Wednesday. She gave birth to new daughter, Meagan, this week.

As of Wednesday, Mrs. Starkey and other mothers on the maternity ward at Rutherford Hospital have received the mats along with breakfast.

The mats are informational — and perhaps a little shocking — in addition to consumer information about where and what kinds of child safety seats to

obtain, the mats show a graphic simulated photograph of an infant catapulted from its mother's arms through a windshield.

"That would be enough to make me go out and get one, if I didn't have one already," said Mrs. Starkey, who said she was to receive a seat as a gift.

"I think a lot of mothers don't know about the laws, and what can happen in an accident," the new mother said. "The mats are really a good thing."

Dr. Sanders said the mats promote the American Academy of Pediatrics' campaign, "First Ride, Safe Ride."

"'First Ride, Safe Ride' is a national education campaign that promotes using the seats from the time babies go home from the hospital," said Sanders.

Sanders said the American Medical Association recently gave its official endorsement to encourage the promotion of child legislation in all states.

A spot check done in Murfreesboro last fall showed that roughly 25 percent of parents are using child restraint devices, but, Sanders said, though that shows an increase from when the law was passed, "it still means that 75 percent of children who should be in safety seats are riding around essentially unprotected."

Dr. Terry Witt, a local obstetrician who was responsible for appealing to other obstetricians to fund the placemat project, said the placemats "are a good way of distributing information about child safety."

"I think all obstetricians were in favor of the use of child restraints," said Witt. "We think this project is going to be a real plus in getting mothers to know about the seats."

Remove the Flaw

A traffic accident near Kelso community last summer claimed the lives of a mother, grandmother and a young boy.

A sister of the boy suffered only minor injuries. She was seated in a safety restraint device of the type required by Tennessee law.

The trooper who investigated the wreck and the father of the child said they believed the safety seat kept her from serious injury, perhaps death.

Legislation requiring such seats for children under four years of age was passed by the State Legislature in 1977 and Tennessee became the first state in the nation to enact such a law.

State highway patrolmen believe the statistics speak eloquently in support of the law: Last year, 13 children under the age of four were killed in accidents involving cars in which they were riding in this state. Only one of those children was seated in a safety seat, and the investigating officer said it was improperly installed.

Tennessee's law is a good one, then, one supported by most adults. But officers and many doctors believe it has a major flaw. Children being held by an adult are not required to be in one of the safety seats.

The folly of this exemption is realized by anyone ever involved in an accident or even knowledgeable of what tests have shown about the manner in which people are thrown about in vehicles during impact.

During such impacts, children more often than not are thrown against the car dash or window or elsewhere and crushed by the adult holding them.

In reality, a child may be in more danger if held by an adult than if riding unattended.

The exemption to the law was in the form of an amendment deemed necessary to assure passage of any restraint law at all.

Now, backed up by statistics, those favoring

the law will attempt during the upcoming session of the General Assembly to have the exemption removed — to make it necessary for all children under the age of four years to be seated in one of the safety devices.

Those supporting dropping the amendment include the Tennessee Chapter of the American Academy of Pediatrics — made up of doctors who know first hand the safety potential involved.

Dr. William Young, a Fayetteville pediatrician, is one of the doctors strongly supporting the law change, realizing that by attempting to change the law, there is risk that the state could wind up with no law at all. Those in support of doing away with the exemption clause believe the great benefit that would result is worth the risk.

Dr. Young knows of a little girl who a short time ago suffered a skull fracture in a "tender-tender" accident. That child was being held by an adult.

The concerned doctors are to be applauded for their efforts to have the amendment done away with — thereby making children safer when riding in vehicles.

We can think of no valid reason why anyone would be opposed to such a law.

As Dr. Young pointed out, adults have the ability to decide for themselves whether they want to use the seat belts that study after study show saves lives.

Children less than four years of age do not have this ability, so it is incumbent upon adults to afford them as much safety as possible.

About the only complaint we have heard about Tennessee's law is the expense involved in purchasing the seats.

Again like Dr. Young, we believe that those who can afford to own and operate cars at all, certainly can afford the concern for child safety.

* EDITORIAL *

ELK VALLEY TIMES

Fayetteville, Tennessee

January, 1981

Suggested amendment to S 94

Take out all after the enacting clause and substitute in lieu thereof:

Sec. 1.23 VSA §1258 is added to read:

§ 1258. CHILD RESTRAINT SYSTEM

(a) Every parent or legal guardian transporting a child under the age of five years in a motor vehicle registered and operated in this state shall properly secure the child in an infant or child passenger restraining system of a type approved by the commissioner. Failure to wear an infant or child passenger restraint system shall not be considered as contributory negligence or as admissible evidence in any court.

(b) A violation of this section shall be punishable in accordance with the provisions set forth in chapter 23 of this title. A person found in violation of this section may, instead of paying a fine, submit proof of ownership, or rental for not less than one year, of an approved infant or child restraint system to the traffic ticket center. The proof of acquisition shall state the owner's or lessee's and seller's or renter's name and address and shall be acceptable only for first violations and if the acquisition of the restraint system was subsequent to the violation.

Sec. 2. EFFECTIVE DATE

This act shall take effect December 31, 1981.

Distributed at the request of Rep. John Bragg

VANDERBILT UNIVERSITY



NASHVILLE, TENNESSEE 37232

TELEPHONE (615) 322-7311

Department of Pediatrics • School of Medicine • Direct phone 322-3377

February 23, 1981

*↓ to all
bipartisans*

The Honorable John Bragg
House of Representatives
Room 33, Legislative Plaza
Nashville, Tennessee 37219

Dear Mr. Bragg,

We, as members of the Pediatric Housestaff at Children's Hospital of Vanderbilt University, have been following with interest the progress of the "Child Crusher" amendment. We strongly support this amendment, and believe that its success will help enhance the health of children in Tennessee.

We are aware of and sympathetic with the viewpoints of opponents of the bill. Issues such as too much government involvement in people's affairs are popular these days. Nevertheless, we feel we must protect the rights of children who cannot voice their opinions effectively, and who obviously are unaware of the dangers involved in automobile travel today.

Because accidents, especially automobile crashes, are the leading cause of death in children in the United States, we strongly encourage parents to have their children ride in car seats. This education is started before a baby leaves the hospital and is reinforced every time the parents bring their child for a checkup. Many parents, however, continue to not have their children in adequate safety devices.

We believe that passing a law in Tennessee requiring all children to be in their car seats will be one of the most effective ways to educate the public, and at a minimum of state expense.

We hope, for our own sakes, that the amendment passes. One of the most difficult experiences in the practice of pediatrics is to tell parents that their child has died. It is especially difficult when you know the previously-healthy child's death could have been avoided by an adequate child restraint device.

Sincerely,

Rickey Lynn Williams, M.D.

Rickey Lynn Williams, M.D.
Chief Resident in Pediatrics

RLW/saw

Enclosure



FACT SHEET

"The Care of Human and Happiness, and Their Destruction, is First and Only Legitimate Object of Government."

Thomas Jefferson

Regarding HB 102 (Bragg); SB 26 (Henry)

To remove the "child-crusher" clause from the Tennessee Child Passenger Protection Act of 1977 (HB 100) by deleting the wording: "or assuring that such child is held in the arms of an older person riding as a passenger in the motor vehicle."

- Since implementation of the above act in January, 1978, 54 children under age 4 have been killed as automobile passenger. Of these, 10 have been either ejected out of the arms of older passengers or, more commonly, crushed against the dash by that older passenger, usually a parent, in whose arms the child was legally riding. These ejection and crushing forces are enormous and usually fatal or very damaging to the young child. Such a deadly requirement should not be a part of this "safety" law.
- Removal of the "child-crusher" amendment is supported by the Tennessee Medical Association, the Tennessee Pediatric Society, the TMA Auxiliary, Tennessee Department of Safety, Tennessee Chapter of AAA, and the Tennessee Hospital Association.

Dividends of the Tennessee Child Auto Safety Law: 1978-1980

1. Usage rates have tripled from (pre-law) 9% to 29% (April, 1980).
2. Enforcement initiatives by the Department of Safety have been well received and projected the state trooper to the public as a caring child safety advocate. This innovative program has attracted national interest and was featured on the Cronkite CBS Evening News June 16, 1980.
3. None of the 54 children killed were in a child safety seat except for one Memphis baby, riding in a Honda crushed by a large truck. There are many documented and gratifying reports that death and injury are being prevented among children packaged in child safety seats. Deaths before the law averaged 20-25 per year; this has been reduced to 14 children killed in 1980.
4. Loaner Programs to provide child safety seats at reduced costs to low-income children have been established in a number of health departments and hospitals (Memphis-Shelby County Health Department, Chattanooga-Hamilton County Health Department, Jackson County Health Department, Rutherford County Health Department; Nashville General Hospital, Knoxville Jaycees). Similar loaner programs in county health departments statewide is a 1981 goal. In addition, the Tennessee Highway Patrol has a program of recycling used car seats; and, many civic organizations have been actively supporting child passenger safety and loaner programs.
5. Health Cost Containment issue: As usage rates increase, injuries will be reduced. Compare the cost of a child safety seat (\$20-\$40) to the initial cost of an emergency room visit (\$100).

SENATE BILL NO. 4548

State of Washington
47th Legislature
1982 Regular Session

By Senators Haley, Charnley, Hemstad
and Bluechel

Read first time January 15, 1982, and referred to JUDICIARY COMMITTEE.

1 AN ACT Relating to motor vehicles; adding a new section to
2 chapter 46.37 RCW; adding a new section to chapter 46.61
3 RCW; and prescribing penalties.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. Sec. 1. There is added to chapter 46.37
6 RCW a new section to read as follows:

7 By October 1, 1982, the state commission on equipment
8 shall adopt standards for the performance, design, and
9 installation of passenger restraint systems for children less
10 than five years old and shall approve those systems which meet
11 its standards. Approved systems must provide substantial
12 protection for passengers less than five years old from injuries
13 caused by vehicle crashes or sudden stops, yet be of moderate
14 cost to the public.

15 NEW SECTION. Sec. 2. There is added to chapter 46.61
16 RCW a new section to read as follows:

17 (1) After December 31, 1982, the parent or legal
18 guardian of a child less than five years old, when the parent or
19 legal guardian is operating anywhere in the state his or her own
20 motor vehicle registered under chapter 48.16 RCW, in which the
21 child is a passenger, shall have such child properly secured in
22 a child passenger restraint system which is of a type and which
23 is installed in a manner approved by the state commission on
24 equipment.

25 (2) During the period from January 1, 1983 to July 1,
26 1983, a person violating subsection (1) of this section shall be
27 issued a written warning of the violation. After July 1, 1983,
28 a person violating subsection (1) of this section shall be

Sec. 2

1 issued a notice of traffic infraction under chapter 46.63 RCW.
2 If the person to whom the notice was issued presents proof of
3 purchase of an approved child passenger restraint system within
4 seven days to the jurisdiction issuing the notice, the
5 jurisdiction shall dismiss the notice of traffic infraction. If
6 the person fails to present such proof of purchase within the
7 time required, he shall be subject to a penalty assessment of
8 not less than thirty dollars.

9 (3) Failure to comply with the requirements of this
10 section shall not constitute negligence by a parent or legal
11 guardian, nor shall failure to use a child restraint system be
12 admissible as evidence of negligence in any civil action.

13 NEW SECTION. Sec. 3. If any provision of this act or
14 its application to any person or circumstance is held invalid,
15 the remainder of the act or the application of the provision to
16 other persons or circumstances is not affected.

ALABAMA NEUROLOGICAL CLINIC

ADULT NEUROLOGY

Hamp H. Greene, M.D.

Stephen R. Bryan, M.D.

W. Joseph Leuschke, M.D.

2119 E. South Blvd., Suite 120
Montgomery, Alabama 36199-3501
205/281-7280

1013 Felix Road
Selma, Alabama 36701
205/872-4277

PEDIATRIC NEUROLOGY

Richard V. Colan, M.D.

January 22, 1982

Marian T. Witt, M.D.
Clinton B. Lillibridge, M.D.
c/o Alaska Chapter
American Academy of Pediatrics
3300 Providence Drive
Anchorage, AK 99504

Dear Doctors Witt & Lillibridge,

Thank you for your inquiry of January 12, 1982, concerning our efforts in young child automobile restraint legislation. We continue in the effort at this time to pass such a bill. As you are probably aware, Tennessee was the first state to pass such legislation several years ago and 8 states have followed suit. *→ now 11.*

This is the third legislative session in which we have worked on this bill. The initial ones were written to require approved restraint devices in all children under the age of 4. Failure to use such a device was punishable by a fine of from \$10.00 to \$15.00. There were considerations regarding refunding this fine when an appropriate device was purchased or use was demonstrated. To avoid opposition from schools and daycare centers, buses were specifically exempted.

This particular approach was bottled up in committee. As one of our legislators said, "I will not vote on the floor on a bill which will either criminalize my constituents or cause me to vote to kill babies." This was a rather dramatic way of saying the same thing that many other legislators felt about the bill. In addition, there was very little appreciation for the usefulness of these devices or the risks of transporting an unrestrained child.

Our next move was to begin putting in "First-Ride Safe-Ride" hospital based infant restraint loaner programs around various communities. These would be begun after convincing local pediatricians and hospital administrators with appropriate fanfare in the local media. The hospitals were extremely happy with the positive effect this had on their own images and the enthusiasm of the obstetric classes. Pediatricians were similarly pleased. Our object in these programs was basically to educate constituents so that they would not specifically oppose the bill and also to educate our legislators. In addition, efforts were made in an organized fashion to obtain support from civic groups, insurance companies, the American Hospital Association, A.M.A., etc.

The bill was rewritten and a copy is enclosed. Instead of being punitive, it simply gives points on the driver's license. This

PAGE#2

January 22, 1982

RE: INFANT RESTRAINT LEGISLATION

erases opposition regarding "criminalization" of constituents. In addition, it gives a perfectly valid reason for an enforcement official to stop and "educate" the individual with a nonrestrained child.

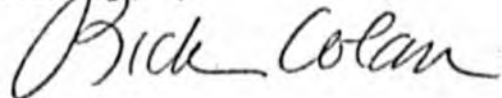
The single most effective tool in convincing audiences, legislators, committee, and other groups, has been the movie, "Children in Car Crashes". This is a silent film which shows unrestrained dummies colliding with the windshield, dashboard, etc., in test crashes. This is very graphic and convinces people without a great deal of explanation.

Probably the best law that currently exist has been developed in Tennessee. I refer you to the January 15, 1982, issue of American Medical News for a full account of that process. Very good points regarding legislative action are brought up in that particular article.

Our legislators continue to resist the idea of this bill as "over regulatory". However we will continue to try to get it through, if not this year, then in subsequent legislative sessions.

Thank you for your inquiry. If I can be of any assistance to you in your efforts in this area, please do not hesitate to contact me.

Sincerely,



Richard V. Colan, M.D.
Legislative Affairs Committee
Chairman,
American Academy of Pediatrics
Alabama Chapter

RVC/tw
Enclosure

TENNESSEE CHILD PASSENGER PROTECTION LAW

59-930. Safety belts and child passenger restraint systems required - Violations - Penalties. - (a) It shall be unlawful for any person to buy, sell, lease, trade or transfer from or to Tennessee residents, at retail, an automobile which is manufactured or assembled commencing with the 1964 models, unless such automobile is equipped with safety belts installed for use in the left front and right front seats thereof. All such safety belts shall be of such type and be installed in a manner approved by the Department of Safety of the State of Tennessee. The department shall establish specifications and requirements of approved types of safety belts and attachments. The department will accept, as approved, all seat belt installations and the belt and anchor meeting the specifications of the Society of Automotive Engineers. Provided that in no event shall failure to wear seat belts be considered as contributory negligence, nor shall such failure to wear said seat belt be considered in mitigation of damages on the trial of any civil action.

(b) Effective January 1, 1978, every parent or legal guardian of a child under the age of four (4) years residing in this state shall be responsible, when transporting his child in a motor vehicle owned by that parent or guardian operated on the roadways, streets or highways of this state, for providing for the protection of his child and properly using a child passenger restraint system meeting federal motor vehicle safety standards; provided, however, nothing in this section shall restrict a mother from removing the child from such system and holding the child when the mother is nursing the child, or attending to its other physiological needs. Provided that the term "motor vehicle" as used in this paragraph shall not apply to recreational vehicles of the truck or van type. Provided further that the term "motor vehicle" as used in this paragraph shall not apply to trucks having a tonnage rating of one (1) ton or more. Provided that in no event shall failure to wear a child passenger restraint system be considered as contributory negligence, nor shall such failure to wear said child passenger restraint system be admissible as evidence in the trial of any civil action.

(c) Violation of any provision of this section is hereby declared a misdemeanor and anyone convicted of any such violation shall be fined not less than twenty-five dollars (\$25.00) nor more than fifty dollars (\$50.00) for each violation of subsection (a) of this section and not less than two dollars (\$2.00) nor more than ten dollars (\$10.00) for each violation of subsection (b) of this section. (c) Provided however that no court costs shall be imposed or assessed against anyone convicted of a violation of this section. (Acts 1963, ch. 102, ^{ss} 1, 2; 1977, ch. 114, ^{ss} 1, 2.)

Amendments. The 1977 amendment designated the former first paragraph as subsection (a), the former second paragraph as subsection (c), added subsection (b) and added the material at the end of subsection (c) following "fifty dollars for each violation".

Effective Dates. Acts 1977, ch. 114, § 3. January 1, 1978.

Law Reviews. Ellithorpe - Adoption of Crashworthiness Via Strict Products Liability (Gail O. Mathes), 4 Memphis State U.L. Rev. 497.

Cited: Ellithorpe V. Ford Motor Company (1973), - Tennessee -, 503 S.W. (2d) 516.

NOTES TO DECISIONS

1. Contributory Negligence.

Failure to wear seat belts does not constitute contributory negligence in Tennessee. Mann v. United States (1968), 294 Fed. Supp. 691.

In wrongful death action where defendant's automobile, after failing to yield right-of-way, struck the decedent's vehicle, an instruction as to possible remote contributory negligence of decedent because of his failure to wear a seat belt was precluded by the proviso in this section that states that a failure to wear seat belt shall not be considered contributory negligence. Stalleup V. Taylor (1970), 62 Tenn. App. 407, 463 S.W. (2d) 416.

CARDEN JOHNSTON, M.D.
Chapter Chairman

DAVID M. MULLINS, M.D.
Alternate Chairman

HOWARD H. BEARMAN, M.D.
Secretary-Treasurer



Alabama Chapter
American Academy of Pediatrics

1601 - 6th Avenue, South
Birmingham, Alabama 35233

January 18, 1982

Clinton B. Lillibridge, M.D.
Alternate Chairman
Alaska Chapter
American Academy of Pediatrics
3300 Providence Drive
Anchorage, Alaska 99504

Dear Clint:

Enclosed is a copy of the Bill that we plan to get passed this legislative session. The strong points of this Bill, to make it politically viable in an election year, are its nonpunitive aspects. The State of Alabama finances its courts through court costs; therefore, we could not have any penalty, no matter how small, that would not relieve the parent of having to pay a significant amount of court costs. However, we are able to award points on a driver's license, and repeated offenders stand to lose their license.

Last year we gave each Senator in the State of Alabama a car seat, which he in turn gave to a child of his choice. This not only created publicity, but more than that, it brought about the involvement of pediatricians in the legislative process. This year we have an active lobbying campaign, which includes the support of the State Medical Association, State Hospital Association, Blue Cross-Blue Shield, and the Alabama Motorists Association.

I look forward to seeing you in Hawaii.

Sincerely,


Carden Johnston, M.D.
Chapter Chairman

CJ/rb

1985-86

SENATE TRANSPORTATION COMMITTEE

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STATE OF ALASKA
THE LEGISLATURE

POUCH V. STATE CAPITOL
JUNEAU, ALASKA 99811
665-3800

LEGISLATIVE AFFAIRS AGENCY

INTER-AGENCY ROUTING SLIP

TO Elizabeth Ziegler, Sen. Coghill's Off

REMARKS:

FROM Jeannie Henry
Legislative Library

DATE 1/14/87

JOHN SPELLMAN
Governor



WILLIAM R. LATHROP
Director

STATE OF WASHINGTON

WASHINGTON TRAFFIC SAFETY COMMISSION

1000 S. Cherry St • Olympia, Washington 98504 • (206) 753-6197

January 19, 1982

The Honorable Don Charnley
Washington State Senate
427 Public Lands Bldg.
Olympia, Washington 98504

Dear Senator Charnley:

Attached is a xeroxed copy of Senate Bill #4548, sponsored by Senators Haley, Charnley and Hemstad. SB 4548 would require that a child under five years of age be properly secured in an approved child passenger restraint system.

At our December 16, 1981 meeting, the Washington Traffic Safety Commission discussed the issue of mandatory child restraint use and the members of the Commission unanimously agreed to support a mandatory child restraint law.

The Commission is acutely aware of the tragic number of deaths and disabling injuries suffered by infants and toddlers as a result of automobile collisions and is aware that the use of child restraint devices will drastically reduce deaths and injuries.

The Commission recognizes educational and informational programs, while helpful, cannot in and of themselves, create the necessary level of restraint usage; therefore, we strongly support the passage of mandatory child restraint legislation, such as that described in SB 4548.

The National Highway Traffic Safety Administration conducted a statewide safety belt study in October, 1981. One thousand persons were questioned regarding use of and attitudes toward occupant restraints. When participants were asked if they agreed or disagreed with the following statement, "The state of Washington should pass a law which requires parents to fasten children under five years of age into approved car seats.", 81% agreed. This certainly seems to indicate public concern and support for mandatory child restraint legislation.

Thank you for your interest and support for this important issue.

Sincerely,

A handwritten signature in cursive script that reads "William R. Lathrop".

William R. Lathrop
Director

WRL:tb

cc: Washington Traffic Safety Commission Members
Technical Advisory Committee Members
Robert Scherz, M.D.

①

15
7-9

CDR - Public Hearing
Dec. 10, 1982
Anchorage, AK

Sen. Parr, Sen. Colletta & Senator-elect Josephson

0:00 ^{12:57pm}

START Sen Parr

0:19

Watched Video TAPE

0:25

Dr. Clint Lillibridge,

Children 39,000 0-5 y old in Alaska 1980 figures
0-19 yrs. 144,000

Child is susceptible because of their anatomy

2:44

Sen Parr - Questions

2:45

Dr. Lillibridge

3:03

Sen. Josephson - Why ^{do} have the infractions ^{do} not constitute contributory negligence

3:45

Sen. Colletta

3:58

Sen. Josephson

3:46

Dr. Lillibridge

4:05

Sen. Josephson

4:19

Sen Parr

4:44

Dr. Lillibridge

4:58

is it the same as motor cycle helmet
3rd party, not old enough to do it on
their own

Children cause accidents - driver distracted
or grabs driver or wheel

Public funds:

4:61

Ms. Moore Highway Safety

Anch, Juneau & Sitka banner program
state run w/ Fed \$
Seed program
through state

Side 2

~~0:00~~

Juneau program flourishing

0:00

Sen. Josephson - is it based on need.

0:04

Ms. Moore -

0:10

Sen. Colletta - including cost of seats in new cars

0:38

Ms. Moore -

061

Lynn Johnson-Joseph -
personal experience
have people who have used seats

090

Wolgemuth - State Troopers
Troopers in support

118

Par - check on making sure Troopers can enforce this
Sen. Colletta - using the pt. system means it will cover state

132

Mike Baldwin - Nat'l Hwy Traffic Safety

Fed. viewpoint

AK has been a leader in many ^{of traffic} laws.

Drunk Driving & Safety belt ^{and} ~~and~~ : 2 mjr ^{hwy} safety problems
which need attention

Novell Larson

Jan 1, 1981 all devices must pass car crash test

Physicians for ~~the~~ Highway

Shoulder strap on a child crosses the neck not body

~~enforce~~

enforceability of law - people will do it anyway
if it is law

law should include all minors

TRPG 2

000

Ms. Larson

020

Dee Parr

044

Michele Flynn Cook ^{???} Inlet Native Pro
Ed & bumper program
164 seats

Give copy back
to
Mason

72
55

Funding came from BIA 200 seats
only can be used by BIA applicants

145 Mr. Baldwin

159 Ms. Moore - Toddler can be used

185 Mr. Bailey - (Inch. Municipal Prosecutor) as a parent
Parents don't really care when it
comes to safety

203 Peggy McBinnis - in support - personal use of CRD

239 Carmen Fisher - in support

319 Morris Anch. Medical Society Auxiliary
loaner program initiated a ~~small~~
CRD in autumn. Peeka Bu

7 Virginia Com. Anch. Med. Soc. Aux. - support
Ed is good but Ed combined w/ leg will be
more effective

458 Ray Sully Anch. Med. Soc. Aux. support leg
& directed toward col and
a very strong law
children lack the cushioning effect of a
well developed sinus system

518 ^{President} Anch. Med. Soc. Aux.
loaner program - non-profit

627 Dunlithbridge spoke for Dr. Doye
case of an unrestrained child in

645 Couch

North Carolina
Was in ~~Tennessee~~ when the bill was passed
worked w/ a loaner program there (500 seats)
AR - 340 births of MD in Arch
want 500 seats \$12,800
distraction

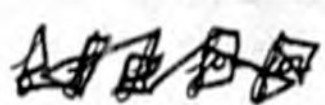
TAB END
000

seat belt legislation required in other countries
infringement on rights ~~agreement~~ doesn't work
public money goes to catastrophic illness loans, etc
the loaner program is the law as complementary

165 Ms. Merchant Med. Aux. - in Support

224

David
Dr. Spence - Div. of Public Health - Tennessee
leg makes excellent public policy
esp. from an econ. viewpoint.
handicapped children program will not have
to take care of ^{as many} handicapped children



370 Cold Hogan - Providence

looking into whether or not insurance Co.
will pick up the cost of a car seat
as part of the cost of delivery



000 San Collette
012 Adjourner

Evening
015 Decker - in favor of ^{mandatory} ~~all~~ son in accident 4 yrs old
Parents control the Child
Children can't initiate the action



074 Alice Samuelson = in favor of mandatory law

should use devices ~~not~~ especially under age of 3 or 4

III Peggy Wilson - Mother
in favor ¹ Past Pres. Child Birth Education Assoc
² Regional Health of Anch Planning Agency
President - AK Child Passenger Safety Assoc.
Based in Anch but reach out to other communities

?? Statewide ~~the~~ Conference in March

History, Use, Legislation

No one's taken the lead - many groups getting together
Preventable nature of deaths & injuries from car accidents

Letter from Mothers Against Drunk Drivers
MADD endorses CRD's

270 Dr. Morris Hording - in favor of CRD

data shows that ed. programs do not work

Relying on people doing what's good doesn't work

Every time a state passes a law mand. CRD, the

rate of serious injury/death is greatly reduced

Risk of the Child

Risk of the Child causing the accident

Public cost for traumatic injury

PREVENTION

If we exclude the parents from negligence, it must be political. We should have it in there.

449 Sam Pan - Contributory Negligence

565 Barbara Bonk - in favor of mand. Law

Humana Pre & post natal

Nursing Assoc. of Obstetrics & Gynecology

Educational of mothers about CRD

Contributory
negligence
comparative

690

Marcy Margol Nurse & wife of Phys.
Pres. of State Med. Aux.

In support of the mand. law

On a limited budget - you should start w/ newborns -
parents of newborns are more approachable 1 yr. old

009

X James Nesbitt - Pediatrician
Strongly in favor

Unique opportunity to legislate better health care

0-4 yrs. old is a good age. People won't

stop after 0-4 but hopefully
it will be higher as old as you can make it

118

Ed Crouch - Ophthalmologist

182

Dr. James Scully - Ear Nose Throat & Plastic Surgery

(Randy Phillips - give copy of back-up)