

Making the difficult task of transporting a child with special needs safer

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A new study by researchers from the Automotive Safety Program at Riley Hospital for Children and Indiana University School of Medicine published online July 13, 2009 in the journal *Pediatrics* reports that the parents of children with special health care needs are doing a good job with the selection of the appropriate child car seat but still need help in using it correctly.

The study, one of the first to look at how children with special needs are transported by their parents and to compare this behavior with American Academy of Pediatrics guidelines, offers advice on making transport safer for the child and less stressful for both the child and the parent.

Transporting a child with special needs can be difficult, especially for a parent who must do so without the help of another adult.

"Having a child with special needs can be stressful, but traveling with a child with special needs can be especially stressful. But the best way to decrease transportation stress is to know that you have put the child into the right type of car seat, that the seat is properly installed and that the child is positioned correctly," said the study's first author, Joseph O'Neil, M.D., M.P.H., Indiana University School of Medicine associate professor of pediatrics and a Riley Hospital pediatrician.

The survey of 275 drivers transporting children with special needs in their vehicles found that 82 percent had secured their children in car seats appropriate for their size, weight and condition, although the



majority had at least one misuse. The researchers found such misuses as installation of the car seat in the vehicle's front seat rather than rear seat and utilization of front facing seats when weight and height dictated that the child should have faced to the rear. They also reported that 20 percent of the children would have benefited from additional bodypositioning support.

"Like all kids, children with special needs have medical and dental appointments and many other reasons to go out into the community, so mobility is important. But it's essential that they get there safely," said Dr. O'Neil.

"The parents of children with special needs need to know that help is available from a growing number of physical and occupational therapists trained as child passenger safety technicians. Assistance and information can be found at <u>www.preventinjury.org</u> or <u>www.nhtsa.gov</u>, the website of the National Highway Transportation Safety Administration," said Dr. O'Neil.

One of the biggest problems, the researchers found, was that only 8 percent of the drivers they surveyed had properly secured medical equipment including oxygen tanks, monitors, ventilators, and suctioning devices. In the event of a traffic crash these essentials could become dangerous projectiles. To address this safety hazard, Dr. O'Neil and colleagues have designed a device to secure them. A patent is pending on the specialized equipment carrier for which the Riley Hospital physicians are seeking funding to produce and market.

Children with special needs often require assistance while in the car. The American Academy of Pediatrics recommends having an adult in the vehicle's back seat to monitor the child so the driver doesn't have to reach around to assist the child while driving. Dr. O'Neil noted that most kids are transported by one adult, as was the case of 70 percent of those



in this study.

"We understand that most drivers are the only adult in the car with their child, but we also know it's not optimal. The driver needs to focus on driving, so we recommend pulling over and parking rather than reaching around to assist the child. The safety of the <u>child</u> is always more important than arriving on time," he said.

Source: Indiana University (<u>news</u> : <u>web</u>)

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