

# Child safety seat education needs an extra boost

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Motor vehicle crashes are a leading cause of death among children despite the widespread availability of effective child passenger restraint systems (CPRSs) such as child safety seats. However, even when provided with free CPRSs and education about how to use them properly, many caregivers do not make them a part of their daily routine, according to the authors of a new study published in the *Wisconsin Medical Journal* (Vol. 108, No. 7).

Researchers from The Medical College of Wisconsin in Milwaukee conducted a community-based study in which a certified car seat technician educated caregivers of more than 100 low-income, minority and urban children about how to choose and install the appropriate CPRS based on their child's age, height and weight. In addition to this training, each caregiver was given a CPRS for their child at no cost.

While the rate of appropriate restraint soared to 85 percent soon after receiving the free CPRS and 30-minute training session with a technician, it declined to 65 percent over the next nine months. Older children were less likely to be restrained properly than younger [children](#), suggesting that interventions focused on reaching families with [children](#) before it is time to transition them into a booster seat might be most effective. The underlying reasons why caregivers do not use CPRS in daily routines are not clear, but factors such as difficulties in having multiple caregivers transport the same child in multiple vehicles may play a part. A better understanding of these reasons is important in developing interventions to increase appropriate use of CPRS.

According to the Suzanne Brixey, M.D., assistant professor of pediatrics and lead author of the study, "Interventions that target entire families and reinforce recently learned child-safety behaviors would also be beneficial. Much more needs to be done to assess effective interventions that improve this population's rates of proper, long-term use of CPRS. Interventions may need to include more support of families and communities as they struggle to move on the continuum of behavior change.

Source: Medical College of Wisconsin ([news](#) : [web](#))

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