The importance of skills' analysis

By focusing more on the idea of increased injury susceptibility at particular ages, accident proneness is made more acceptable because the possibility of change is implicit in the course of development. It also encourages a search for explanations of such phases in development, and from these are borne useful intervention measures. Analysis of the skill component involved in road crossing behaviour is a good example. In one study children were instructed in a real road environment close to their schools to choose 'the safest' crossing sites and routes to a specified destination. Children 5 to 7 years old were very poor at identifying unsafe road crossing sites compared with older children, and their judgments relied exclusively on cars they could see nearby. Blind spots, obscuring obstacles, or complex junctions were not recognized as dangerous and they invariably chose the most direct route, rather than make a safer detour. Substantial improvements were subsequently achieved in the training programme because the requisite skills had been identified. Far from such skills being dependent on maturational factors, as is often assumed in road safety research, development was accelerated through a training procedure that aimed at providing the children with appropriate experience from which to learn for themselves.

So finally, yes, by all means let press ahead with passive measures and legislation, where appropriate, but in doing so we should not neglect the search for causes of injury. Statistical approaches are essentially descriptive, whereas psychological approaches generate testable hypotheses with regard to the behaviour or personality of 'repeaters'. (Parents and children) will continue to believe that some children have more injuries than others. It is our job to demonstrate that such fatalism should be set aside.

editor of this journal said in casual conversation that it was ironic, given my criticism of the concept,1,3 and the conclusions in my early papers on psychosocial factors and childhood injury,3-5 that my research has been used by others to support the notion of accident proneness. So what did the authors of the classic papers conclude?

In contrast to his 1971 paper, Matheny explored the prevention implications of his 1988 research findings. He correctly pointed out there are practical and economic limits to what can be achieved in modifying unsafe aspects of our physical environment. He went on to argue that it is undoubtedly the case that a focus on the individual has been effective in modifying behaviours such as smoking, diet, and exercise.8 On this basis he made the following statement in discussing high risk parents and households: ‘Our impression of these families is that they are less assertive or energetic in dealing with many aspects of family life, including the guidance of children. For these families, a more assertive stance may have to be taken by health professionals if one expects the parents to budge from the status quo’ (p59). As with other areas of health, such an approach is unlikely to be very successful because the caregivers of children most at risk are less amenable to the health promotion messages and less able to implement desirable changes in behaviour.

Given that there are limits on the funds that can be expended on making physical environments safer there is nevertheless merit in identifying individuals in high risk social situations. For example, assume children in large, single parent, low income families, living in low standard rental housing are at elevated risk of scalds from tap water. Injury prevention funds, however, should be directed at improving their hot water system either directly or indirectly by promoting laws which require rental accommodation to meet hot waters safety standards rather than focusing on the behaviour of potential victims and their caregivers.

'Accident proneness': statistical and practical significance.

J. D. Langley

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