Prices and affordability in child restraint seats in Japan

We were pleased to see the excellent article on child and family safety device affordability by country income level by Hendrie et al (2004).1 International research has shown that the use of child restraint seats (CRS) significantly reduces the risk and severity of injuries resulting from motor vehicle crashes. In the USA proper use of CRS is estimated to prevent approximately 53 000 injuries and 500 fatalities among children under 5 years.2 This conclusion is supported by one systematic review.3 Consequently, CRS laws and enhanced enforcement programs are “strongly recommended” interventions. In contrast, in Japan the public health significance of motor vehicle injuries among children has not been adequately appreciated. This is despite the fact that from 1991 to 2002 there were 3582 motor vehicle crash related fatalities and 552 794 injuries involving children aged 0–5 years.4 There are several reasons for the lack of CRS use among Japanese. Compared with saliaries of North American and European families, the Japanese average family income is higher. Nevertheless, the majority of parents perceive prices of CRS as comparatively higher than in other countries. A CRS in Japan is costly—approximately US$250–400. Thus government subsidies would be necessary to increase affordability and motivation to use by parents. This process would be expensive, but when measured against public health benefits it is clearly worthwhile.5 Arguably, a moral obligation exists to offer subsidies that give all children a fair chance of surviving to adulthood.6 One example of the efficacy of subsidies was seen in 1982–84 when the Swedish government introduced a child seat lending scheme. This resulted in 67% of children using car seats on short trips and 75% on long trips and to a subsequent decrease in MV injuries.7

In other motorized countries, CRS use is widely prevalent and child passenger safety has long been a priority. In contrast, Japanese policy makers and parents are not fully aware of the safety benefits of CRS. A survey carried out by the Japan Automobile Federation in 1998 revealed that only 8.5% of parents used CRS.5 Similarly, a recent national observational survey jointly conducted by the National Police Agency (NPA) and Japan Automobile Federation (JAF) found that seven out of 10 CRS were loosely fitted.8 Greenberg-Seth et al demonstrated that a community based intervention quickly increases proper CRS use but that further improvements are greatest in high income areas.9 Education and enforcement are commonly proposed for injury control but few such activities have been initiated in Japan. We suggest that navigator education campaigns be initiated and properly evaluated to monitor changes in CRS safety awareness and use.

Logistic regression was used to calculate the odds of childhood RTIs in each quintile of TDS, compared with TDS, over these five time periods. Separate analyses were performed by sex and for children injured as pedestrians or vehicle passengers. Tests for interaction were used to investigate any changes in TDS variations in childhood RTIs over time.

Results

Of 14 146 recorded RTIs to children, 11 194 (79.1%) children were pedestrians (not cyclists) or vehicle passengers at the time of the injury. Full data were available for 10 542 injuries (94.2%), including 6684 (64.9%) pedestrian injuries and 6035 (57.2%) boys. Overall rates of RTIs decreased progressively over time in all groups (see http://www.injuryprevention.com/supplemental for table 1). Rates of pedestrian, but not passenger, RTIs were consistently greater in boys than girls. Trends in the odds of boys and girls being injured as pedestrians were present in each time period according to quintiles of TDS with children from more deprived areas having a greater chance of being injured than those from more affluent areas. The opposite trend was seen in girls injured as vehicle passengers in the earliest time period with no trend in the later two time periods. Although the gradient in pedestrian RTIs according to TDS showed a decrease over time in both boys and girls, this only reached conventional levels of statistical significance in girls (p<0.001 in girls, p=0.069 in boys). In contrast, there was an increase in the gradient of passenger RTIs according to TDS quintiles over time in girls (p=0.001 in girls, p=0.247 in boys). However, this represents a reduction in an originally negative gradient rather than an increasing positive gradient (see fig 1).

Discussion

We have found strong socioeconomic inequalities in traffic-related pedestrian RTIs in children living in the Northeast of England but also evidence that these gradients have decreased over the last 15 years. There was no evidence of persistent socioeconomic inequalities in childhood RTI in vehicle passengers. Although not all accidents occurring on public roads will be reported to the police,6 it is likely that STATS19 information is available for most RTI involving vehicles. These data also allowed us to investigate the full range of childhood RTI and not just those brought to medical attention—a process that may, itself, be socioeconomically patterned. The use of 1991 census data for denominator analysis was provided consistency in our measure of socioeconomic position.

Our finding of decreasing inequalities in childhood pedestrian RTIs is at odds with other recent work,2–4 perhaps due to variations in study populations or defining injuries, but does suggest recent success in this area. Further work is needed to confirm the patterns we have found elsewhere in the UK.
Acknowledgements

Many thanks to Steve Jarvis and Philip Lowe who coordinated the collection of the data used in this analysis, Northumbria Police Statistics Department for collection of casualty postcodes throughout the study period, the Transport and Accident Data Unit based at Gateshead Borough Council for provision of STATS19 data, Ruth Wood for helping with data transformation, and Vicky Ryan for providing statistical advice. No specific funding was provided for this analysis.

J Adams, M White, P Heywood
School of Population and Health Sciences, The Medical School, University of Newcastle upon Tyne, Newcastle upon Tyne, UK

Correspondence to: Dr J Adams, School of Population and Health Sciences, The Medical School, University of Newcastle upon Tyne, Newcastle upon Tyne NE2 4HH, UK; j.m.adams@ncl.ac.uk

This study used anonymous data and did not require ethical permission. All authors conceived the idea for this analysis. JA performed the analysis and drafted the manuscript. All authors contributed to interpretation of the data and results. All authors have read and approved the final version.

doi: 10.1136/ip.2004.007823

No special funding was received for the analysis or preparation of this paper.

None of the authors is aware of any competing interests in relation to this manuscript.

Table 1 can be viewed on our website.

References


BOOK REVIEW

Evaluating Gun Policy


The United States has a big problem with gun injuries: it suffers tens of thousands of gun-related deaths and injuries annually; its gun-related death and injury rates dwarf those in other developed nations. The United States also has a big problem with addressing gun deaths and injuries: there is wide public support for many policies aimed at reducing the toll, but little political will to undertake policy changes. Both problems have gotten a bit better in the past decade, but both remain quite serious indeed.

The premise behind Evaluating Gun Policy is that the second problem may diminish in the face of clear information on the effects of policies designed to reduce gun injuries. The editors—both eminent American economic scholars with a longstanding interest in violence and criminology—undertook to summarize current policies related to guns, and to present current assessments of the effectiveness of policies that have been put in place over the past decade or so.

The resulting book is a valuable review and reference, which should be on the shelf of everyone in the United States who works on gun injury reduction and related policy development. It is likely also to be informative for those working on reducing deaths and injuries from small arms and light weapons around the globe and it is a welcome example of a serious examination of injury reduction policy effectiveness, and so relevant to injury prevention efforts everywhere.

The book starts with the editors’ thorough, lucid, and well referenced review of current gun policy in the United States. The book is divided into five sections: Gun Prevalence, Regulating Owners, Restricting Gun Carrying, Facilitating Research, and The Policy Process. Guest contributors are leading scholars in relevant fields. Each chapter is a case study, in many cases with new data analyses, designed to assess the utility of policies of a particular sort by examining how it worked in a particular instance. Clarifying commentaries follow. The result is readable, relevant, and at times riveting.

In chapter 2, Duggan discusses the relationship between gun access and suicide. He uses state level data on rates of suicide and gun ownership. As commenter John Mullany summarizes Duggan’s findings: “…[G]un owners’ suicidal propensities may be shown average, and…instrumental effects may be important.”

Chapter 3, by the editors, explores whether guns in the home deter burglars. The authors conclude that “…[T]here is … a deterrent effect, it may well be swamped by other factors associated with gun prevalence—most likely, it seems to us, that guns are particularly attractive loot.” (p104)

Chapter 4, by Reuter and Mounos, examines the (post-Port Arthur massacre) 1996–97 policy that led to a ban on long guns and a gun buy-back in Australia. They conclude that “[T]he trends are compatible with a conclusion that the ban and buy-back saved lives, but that conclusion cannot be offered with great confidence. But there is absolutely no evidence that the Australian policy innovations had a perverse effect, as has sometimes been claimed.”

Chapter 5, by Vigdor and Mercy, studies the effects of state laws that ban the ownership of guns by domestic abusers. They use a log linear model to assess the impact of laws at the state level and “…cautiously conclude that laws restricting access to firearms by abusers under restraining orders lead to reductions in intimate partner homicides.” In his commentary, Wintemute notes that studies that find no firm evidence of any effect are commonly misconstrued as presenting firm evidence of no effect.

Chapter 6, by Cohen and Ludwig, explores the effectiveness of police patrols for illegal handguns. They calculate estimates for the effects of the Pittsburgh program (on shots fired or gunshot injuries) in intervention—as compared to controls—areas and conclude there was a reduction in shots fired and gun injuries. The commentaries observe that this is the latest in a series of studies reaching the conclusion that this is an effective strategy. But they also note that the analytic methods used are not universally accepted.

Chapter 7, by Raphael and Ludwig, considers prison sentence enhancements by studying a famous example in Richmond,
Virginia. The authors conclude that: "...the impressive declines in gun homicide rates in Richmond around the time of Project Exile can be almost entirely explained by the fact that the city had unusually large increases in gun homicide through the mid-1990s...".

In chapter 8, John J. Donohue discusses concealed-carry laws. This policy has been a hot button issue in the United States. The chapter supports the book editors' brief and noteworthy: “Whether the net effect of permissive gun-carry laws is to increase or reduce the burden of crime, there is good reason to believe that it is not large...” (p30) The next section of the book points the way for better research in the future. In chapter 9, Vernick and Hepburn argue for multiple analyses of the same law, with differing (though complementary) methodologies. In chapter 10, Azrael, Barber, Hemenway, and Miller discuss how better data can contribute to better analyses of policy effectiveness by focusing their attention on the emerging National Violent Death Reporting System.

The book concludes with Zimring, the *author* of gun injury prevention in the United States, outlining the history of this work since the 1960s, sketching themes and floating predictions along the way. The substantive criticism I have of the book is that the complex quantitative analyses offered are way too simple. By focusing on one level at a time—usually that of the city or state—the analyses inevitably fail to account for much of the variation in outcome. No case study is approached with methods that explicitly address more than one level of variation at a time. Yet such methods are available. They include, at least, cutting edge hierarchical modelling and bayesian approaches.¹² ¹ I believe that the need for multilevel analysis is the pressing methods issue facing injury prevention—and, indeed, public health—today. The most dire health problems that we now face are at once extremely complex and often also relatively rare in population terms. Efforts to prevent them will need to occur at multiple levels and analyses of effectiveness will need to take this into account...as this book really does not.

I applaud the editors for a *tour de force* application of econometric methods to the daunting task of analyzing the effectiveness of gun policies. The result is a few clear answers (targeted police patrols work; Project Exile does not) and, as important, heightened clarity about the challenges of analyzing policies in this way.

The next book to take these issues on will rely on this foundation and will, I hope, bring new methods to the endeavor.

**CALENDAR**

**Best Practice Risk Assessment in Consumer Safety**

21–22 April 2005. The conference, held in Edinburgh, Scotland, will provide an overview of risk assessment procedures applied in settings that have much in common with consumer safety. The ultimate objective of the conference is to promote best practices for risk assessment based on shared procedures for risk assessment within the EU, including the new members as well as future members, and based also on information sharing with other major trade regions in the world. More information: [http://www.ecosa.org/csi/ecosa2003/ssf/news](http://www.ecosa.org/csi/ecosa2003/ssf/news).

**2005 (US) National Injury Prevention and Control Conference**


**Canadian Multidisciplinary Road Safety Conference**


**19th International Technical Conference on the Enhanced Safety of Vehicles Conference (ESV)**


**14th International Safe Communities Conference**


**1st World Congress on Sports Injury Prevention**

23–25 June 2005, Oslo, Norway. The 1st World Congress on Sports Injury Prevention will provide an overview of how injuries in sports can be effectively prevented. The second announcement and programme are now available on the conference website: [http://www.ostrec.no/congress2005](http://www.ostrec.no/congress2005).

**13th International Conference on Road Safety – Road Safety on Four Continents**

5–7 November 2005, Warsaw, Poland. The conference, which is organized by the National Swedish Road and Transport Research Institute (VTI), with active involvement of GRSP (Global Road Safety Partnership), FERSI (Forum of European Road Safety Research Institutes), TRB (Transportation Research Board), CSIR of South Africa, and ECTRI (European Conferences of Transport Research Institute), will address the transfer of road safety knowledge and implementation, consider whether first world answers fit third world problems; and exchange evaluated good practices. The deadline for paper submissions is 15 April 2005. For more information: [http://www.vti.se/RSC4](http://www.vti.se/RSC4).

**3rd Asian Regional Conference on Safe Communities**


**3rd New Zealand Injury Prevention Conference**


**3rd (Canadian) National Conference on Injury Prevention and Control**


**8th World Conference on Injury Prevention and Safety Promotion**


---

**References**
