Reports from Taiwan

Injury Prevention Association established in September 1998

After a year of preparation, the Injury Prevention Association of the Republic of China was established in Taipei in September 1998. The goals of the association are: (1) education about injury prevention and the promotion of injury prevention programs; (2) urging the government to give injury prevention a high priority; (3) establishment of injury related data sets and surveillance systems to enable more thorough research and evaluations about injury; and (4) cooperation with international injury prevention groups. Research about injury prevention and the promotion of injury prevention programs in Taiwan are still in their infancy. We hope...
Youth boxing in some Australian jurisdictions

Youth boxing, and to a lesser extent boxing in general, became the subject of renewed controversy in late 1998 after a Queensland boxing competition involving young girls. The NSW Minister for Sport failed in her attempt to convince the Council of Sport Ministers for an Australia-wide ban on boxing for children under 14 years. Health and safety groups, including the Federal Health Minister, have long advocated a ban on boxing. The failure of sports ministers to act drew strong condemnation from groups such as the Australian Medical Association (web site domeino.ama.com.au, 20 November 1998). NSW subsequently acted to ban all boxing for children under 14 years of age. Media reports indicate a ban is likely in Queensland.

Professor John Pearn, a Brisbane paediatrician, called for an absolute ban on underage boxing in an August 1998 article in the Journal of Paediatrics and Child Health. In the press coverage of the issue he suggested that placing the head entirely out of bounds would make the sport more challenging but safer for participants. Noting past controversy about other rule changes he said that in 1938 when the rules were changed everyone said it was the end of boxing—who will go if you can't watch someone being hit in the testicles—but the rules were changed everyone said it was much safer then simple. 

Whitty continued, “The effects of speed are highly complex and felt beyond the vital area of road safety. To create a comprehensive and successful speed policy we need to see how it affects the economy, how much it will reduce vehicle emissions and improve peoples’ quality of life. Only by taking account of all these elements will effective speed management help develop a successful integrated transport system”.

So the government's enthusiasm for road safety is apparently tempered by all manner of other considerations that will exert an unpredictable influence on the outcome of the review. Because the subject is “highly complex”, the necessary radical policy shift to reduce traffic speed is a depressingly remote prospect. Antispeed lobbyists—including the injury prevention community in the UK—cannot afford to relax.

The review will be completed towards the end of 1999. Send your views as soon as you can on the potentially lifesaving benefits to both pedestrians (especially children and the elderly) and drivers of reducing traffic speed to the Transport Minister, Eland House, Bressenden Place, London SW1E 5DU, UK.

Letters to the editor

Kids in the back seat: Brazil’’s strides in enforcing its new traffic law

EDITOR,—Primary care pediatrics like myself, who are often asked to lecture on child and adolescent auto safety promotion to both peers and lay people, naturally have their attention drawn to phrases like the one so meticulously devised and carried out by Braver et al for the solid information they provide.

This article provides very useful data demonstrating, among other issues of interest, the lower risk of children in the rear seat sustaining injuries, whether or not the car is equipped with a passenger-side airbag, even though a greater risk reduction could be demonstrated for vehicles having such device. This particularly concerns us, safety promoters of the so-called less industrialized countries, who will not see either legal requirement for, or generalized adoption of, dual airbags in our vehicles for the foreseeable future. Thus, as aptly stated in a recent Mohan editorial, although the international exchange of scientific principles and experiences is essential, we must count on a long period of trying to convince people to put kids in the back seat through measures in our own countries.

However, what prompted this letter was the fact that Braver et al cite only European, North American, and Australian data on banning children from front seats. However none of the places mentioned require compulsory rear seat positioning for every child, irrespective of their being restrained, perhaps the only exception being the state of Louisiana. As in other international comparisons that have appeared in Injury Prevention, there is an utter lack of South American data, which is nevertheless quite understandable, given the scarcity of our statistics. Injury Prevention has already mentioned the new Brazilian traffic code, a stringent national law that went into effect at the beginning of 1998, and which has led to a noticeable decline in traffic deaths and in the country’s major cities. According to the new code, the use of a safety seat belt is mandatory for all occupants, in any sitting position, traveling in any type of vehicle. Children aged 10 and younger are required to travel in the back seat and use a safety belt or equivalent restraining device, unless the vehicle has only a front seat, or the number of occupants under 10 exceeds the seating capacity of the rear seat, in which situation the tallest children should occupy the front seat and use the proper safety belt. The code also states that none of the above exceptions apply to school buses or any kind of paid child transportation vehicle.

Brazil’s new traffic code is seemingly more advanced and stringent than most similar laws, and great efforts are being made in order to adequately enforce it. A very large and continuous campaign has reached every corner of the country, with a great deal of popular support. Government authorities have issued regulations that transfer the responsibility of direct law enforcement to the municipality level, so as to narrow the focus of control and promote better community involvement in the process. We believe our country has already succeeded in bringing down our gloomy figures of traffic injuries and casualties? According to Fred Rivara in a recent ISCAIP report, “getting a law passed is easy, the difficulty lies in getting it implemented in a way that achieves the desired outcome”. For now, we can just wait through the language barrier and show some of Brazil’s strides towards a safer world.

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Seating positions and children’s risk of dying in motor vehicle crashes

EDITOR,—In an excellent report on the increased risk of injury to child front seat passengers in the event of a motor vehicle crash, authors Braver et al state “In Luxembourg bans infants in rear facing restraints from front seats of vehicles with passenger airbags”1. They continue “Australia requires top tether straps for restraints designed for infants weighing less than 9 kg, which in effect is a requirement for infants to be seated in the rear”.

What the authors did not state, and may not have known, is that Australia requires top tether straps for restraints designed for infants weighing less than 9 kg, and toddler (9–18 kg) restraints. Harnesses, designed for use with or without booster seats for children weighing up to 32 kg, also use a strap fixed to an anchorage point in the back seat. The latter two are forward facing. Although the law does not specify that child passengers cannot ride in the front seat, the anchoring mechanism, fitted in the rear compartment, makes the practice fairly universal, at least for young children. The anchor point is fitted into the vehicle at time of manufacture and every restraint is sold with an anchor bolt ready to fit into place after purchase. Some children do travel in front seats, against recommended practice. Perhaps the time has come for Australia to strengthen its already comprehensive child restraint laws in the light of this very useful research.

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Evaluating a bicycle skills training program for young children

EDITOR,—I have some comments with regard to the article by Macarthur et al on evaluating a bicycle skills training program.1 The CAN-BIKE Festival is the best introduction to bicycle safety that exists. Participants in the festivals are exposed to the issues for safety in a fun and engaging manner. The festival also provides many practical skills through the on-bike skill development. The intent is to encourage participants to go on to further training through the CAN-BIKE I course. No one would expect 90 minutes of instruction, in absence of any reinforcing messages, to turn a young rider into a “safe” rider.

Our society does not yet recognise the need for bicycle skills training. Many parents believe that once their children can balance on a bike they are ready to go. Contrasts this with swimming lessons. Parents recognise that when it comes to water safety their children need lessons every year and that these messages given in training are reinforced outside of lesson time.

The children in the study received their instruction in school and so their parents may or may not have been exposed to the lessons taught. Many parents are not aware of safe cycling rules and so cannot reinforce what their children have been taught.

The festival is an improvement over the traditional “bike rodeo” that tends to focus more on fun as opposed to skill development. The skills presented in the festival can only be mastered if they are practised on a regular basis and built on over time.

I would argue that the CAN-BIKE Festival is a bottom-up approach. This is something a community can take on as its own. Anyone can become an instructor and share their knowledge and skills with others.


Evaluation of a poison prevention lesson for kindergarten and third grade students

EDITOR,—In order to avoid any misunderstanding, standing in the above paper, published last September in Inj Prev, the authors and I would like to clarify items 14–16 in table 2. This table provides information pertaining to the percentage of third grade students with correct post-test responses. The wording of each of these questions begins with Do you know...? It might appear to the reader that the students could simply respond with a yes or no answer to the question. However the students had to name different forms of poisons (14), name the ways that poisons can get into the body (15), and tell how to make their homes safer for little brothers, sisters, and friends (16). In other words a yes/no answer was not acceptable. We would like to clarify the items with post-test items.

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29-30 March 1999, Edinburgh, UK. Safe Solutions: Pathways for the Future. Second European Convention in Safety Promotion and Injury Prevention. This ECOSA convention is designed to maximise the sharing of information and experiences, including evaluating national/local programmes and approaches, legislative and enforcement regimes, the roles of standards and regulations, education and information initiatives. Synergy between disciplines and sectors is at the heart of the convention format—to maximise interchange of ideas and experiences: link scientific theory with practice, relate experiences in key injury areas—violence, sports, work, traffic, products, interpret professional approaches—behavioural and social sciences, engineering, ergonomics, social statistics, public health, analyse instruments of prevention—monitoring programmes, legal intervention, environmental change, education, and public information.

Further information: Dr Wim Rogmans, ECOSA, PO Box 517169, 1070 AD Amsterdam, The Netherlands (fax: +31 20 511 4510, e-mail: ecosa@consafe.nl)


10–12 May 1999, Brisbane, Australia. Third National Conference on Injury Prevention and Control. The theme will be The Challenge of Integration, with particular focus on relationships between and within research and practice, the continuum of primary, secondary and tertiary prevention, the many sectors involved in the prevention process, and safety promotion and injury control. Further information: Judy Lupton, INTERMEDIA. Convention and Event Management Pty Ltd, 11/97 Castlemaine Street, PO Box 1280, Milton 4064, Australia (e-mail: judylup@ijm.com.au).

11–14 May 1999, Los Angeles, California, USA. UCLA Conference on Public Health and Disaster Relief. Further information: UCLA School of Public Health, Box 951772, Los Angeles, CA 90095, USA (tel: +1 310 794 6646, fax: +1 310 794 1803).


24–27 May 1999, Chongqing, China. 16th World Congress of the International Association of Accident and Traffic Medicine. Further information: Research Institute of Surgery, 10 Changjiang Zhiliu, Daping, Chongquin 400042, China.


26–29 May 1999, Saskatoon, Canada. The First Canadian Conference on Shaken Baby Syndrome. A national collaborative initiative hosted by the Saskatchewan Institute on Prevention of Handicaps. “Awareness, prevention and response—an integrated approach” is the theme of the conference. Further information: SIPH, 1319 Colony Street, Saskatoon, SK S7N 2Z1, Canada (fax: +1 306 655 2511, e-mail: skph@sk.sympatico.ca).

7–9 June 1999, Brussels, Belgium. Second European Road Research Conference. Further information: e-mail: road-res-conf@dg7.cec.be.

18–21 August 1999, State College, Pennsylvania, USA. Playground Safety 1999. The goal of the Second International Conference on Playground Safety is to convene leading scholars, planners, managers, government and industry decision makers, specialists, and advocates of playground safety from around the world. The conference objectives are to identify, integrate, and explore potential resolutions of issues related to children’s play and playground safety in the public sector, school settings, preschool/childcare facilities, commercial enterprises, and at self contained play centers. Conference objectives also include reviewing the status of present national and multinational playground safety standards and building international relationships for networking, for information sharing, and developing compatible change strategies for the future. Further information: Suzanne St Pierre, Conference Secretariat, Conferences and Institutes, Pennsylvania State University, Penn State Conference Center Hotel, University Park, PA 16802-7002, USA (tel: +1 814 863 5100, fax: +1 814 863 5190, e-mail: ConferenceInfo1@cde.psu.edu, website: www.outreach.psu.edu/C&I/PlaygroundSafety).

26–28 August 1999, Reykjavik, Iceland. Third Nordic Safe Community Conference: How Can We Improve Equity in Safety? Further information: Mrs Herdis Storgaard (fax: +354 562 7027, e-mail: herdis@svfi.is).

15–17 September 1999, Helsinki, Finland. Safety ‘99. European Conference on Safety in Modern Society. Organised by the Ministry of Social Affairs and Health, Safety Technology Authority, National Consumer Administration and the Finnish Institute of Occupational Health. The purpose of the conference is to gather together experts to discuss the safety cultures and other current topics related to modern societies. On the basis of the discussions and conclusions drawn, recommendations on the most important safety issues will be given to the European Commission. For this purpose, various approaches will be brought into the discussion and comparisons of their applicability in the EU countries will be made. The scope of the meeting is broad, covering numerous environments from work to home and leisure time, from production to consumer aspects. Further information: Kristiina Kulha, Safety ’99, Finnish Institute of Occupational Health, Topeliuksenkatu 41 a A, FIN-00250 Helsinki, Finland (fax: +358 9 241 3804, e-mail: Kristiina.Kulha@occuphealth.fi, website: www.occuphealth.fi/eng/project/safety99).

5–8 March 2000, New Delhi, India. Fifth World Conference on Injury Prevention and Control. The themes are sharing experiences and blending perspectives. Abstracts by 30 June 1999. Further information: Ms Arati Walia, Confer D-1, Kalindi Colony, New Delhi, 110 065, India (fax: +91 11 684 8343, e-mail: awconfer@del2.vsnl.net.in).

31 May to 2 June 2000, London, UK. Vehicle Safety 2000. A synopsis of papers should arrive no later than 1 April 1999. Further information: Brian Robinson, Institute of Mechanical Engineers, 1 Birdcage Walk, London SW1H 9JJ, UK (tel +44 (0) 171 304 6881, fax: +44 (0) 171 304 6864, e-mail: b_robinson@imeche.org.uk).