

# Motor Vehicle-Related Injury Prevention: Use of Child Safety Seats, Education Programs When Used Alone

# **Task Force Finding**

#### **Intervention Definition**

Education programs provide information and teach skills to parents, children, or professional groups about the use of child safety seats. Information provides the basic foundation for moving people toward behavior change and can enhance skills, thus enabling behavior change. Providing information alone is rarely sufficient for sustained behavior change, but it is a central and necessary component of other interventions, such as community campaigns, distribution programs, and incentive programs.

## Task Force Finding (June 1998)\*

The Task Force identified three qualifying studies that evaluated the effect of perinatal safety seat education programs on parents' later use of the seats for their children, one qualifying study evaluating the effect of a preschool education program on children's safety seat use, and two qualifying studies evaluating the effect of professional education on provider and system performance in health care systems and law enforcement, respectively.

Therefore, on the basis of the (1) small number of available studies, and (2) variability in the interventions evaluated, insufficient evidence exists to assess the effectiveness of education programs alone in increasing child safety seat use.

Task Force on Community Preventive Services. Recommendations to reduce injuries to motor vehicle occupants: increasing child safety seat use, increasing safety belt use, and reducing alcohol-impaired driving. *Am J Prev Med* 2001;21(4S):16–22.

#### **Publications**

Task Force on Community Preventive Services. Motor-vehicle occupant injury: strategies for increasing use of child safety seats, increasing use of safety belts, and reducing alcohol-impaired driving

[www.cdc.gov/mmwr/preview/mmwrhtml/rr5007a1.htm]. *MMWR*. Recommendations and Reports 2001;50(RR07):1-13.

Task Force on Community Preventive Services. Recommendations to reduce injuries to motor vehicle occupants: increasing child safety seat use, increasing safety belt use, and reducing alcohol-impaired driving. *Am J Prev Med* 2001;21(4S):16–22.

Zaza S, Sleet DA, Thompson RS, et al. Reviews of evidence regarding interventions to increase use of child safety seats. Am J Prev Med 2001;21(4S): 31-47.

Task Force on Community Preventive Services. Motor vehicle occupant injuries. In: Zaza S, Briss PA, Harris KW, eds. *The Guide to Community Preventive Services: What Works to Promote Health?* Atlanta (GA): Oxford University Press;2005:329-84 (Out of Print).

<sup>\*</sup>From the following publication:

# Community Preventive Services Task Force

### **Disclaimer**

The findings and conclusions on this page are those of the Community Preventive Services Task Force and do not necessarily represent those of CDC. Task Force evidence-based recommendations are not mandates for compliance or spending. Instead, they provide information and options for decision makers and stakeholders to consider when determining which programs, services, and policies best meet the needs, preferences, available resources, and constraints of their constituents.

Document last updated September 23, 2013