Special report

The work of the Child Accident Prevention Trust

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In 1983 an article was published in this Journal describing the work of the Child Accident Prevention Trust.¹ Since that time many developments have taken place in the field of child accident prevention. There has been an increased recognition of the role of accidents and injuries in child health and the importance of accident prevention at an international, national, and local level. This has, in part, been a result of work undertaken by the Child Accident Prevention Trust. Much remains to be done, however, and doctors and other health workers involved with children must recognise the part that they can play in reducing this epidemic. Mortality and morbidity from accidents is the largest single problem in the health of children after the first year of life. The aim of this article is to stimulate interest in the problem of accidents in childhood especially among community paediatricians and clinical medical officers. Hospital doctors and general practitioners also have a particular part to play in drawing the attention of appropriate authorities to factors which have led to accidents that may have been preventable (see Annotation in this issue).

The work of the Trust can be divided into four main areas:

- (1) Hosting seminars and scientific meetings to encourage a multidisciplinary approach to the problem of accidents in children.
- (2) The establishment of expert working parties to review and make recommendations on particular accident problems.
- (3) The publication of guidelines on a variety of aspects of accident prevention, for use by professional groups and the general public.
- (4) Liaising with international, national, and local organisations concerned with accidents in childhood.

Meetings and seminars

The Trust aims to offer professionals from a variety of disciplines the opportunity to explore and appreciate their role in child accident prevention. Examples of such meetings held include:

(i) A seminar organised jointly with the Consumer's Association and the Ergonomics Society to explore the role of the British Standards Institution, and its

contribution to child safety.² Speakers included Mr Alex Fletcher, the then Minister of State for Corporate and Consumer Affairs. (ii) A symposium for the medical profession opened by Sir Donald Acheson to provide a forum for doctors to present the results of recent research in child accident prevention.³ (iii) A guest lecture by Professor John H Pearn of the Department of Child Health in Brisbane on various aspects of accident prevention activities in Australia.

Expert working parties

The establishment of working parties enables the Trust to call upon the expertise of a variety of individuals and organisations whose work impinges on child safety with a view to approaching a problem from a multidisciplinary point of view. The Trust has found that this approach is particularly successful for a variety of reasons. Firstly, accidents in childhood are usually the result of factors that are the responsibility of more than one authority; therefore potential methods for prevention may come within the remit of several different professional groups. Secondly, an undertaking by all those whose activities impinge either directly or indirectly on the

safety of children may achieve a more sympathetic climate in which methods for prevention can be implemented. Thirdly, professionals from a variety of disciplines can ensure a fresh approach to a problem.

A working party was convened in 1983 to consider the problem of burn and scald accidents to children. Members included representatives from the Home Office, Department of Trade and Industry, Chief and Assistant Chief Fire Officers Association, as well as an architect, health education officer, and burns specialist. A fully detailed report⁴ and shorter version⁵ have been published; these contain many specific recommendations. These recommendations and the findings of the working party were launched at a seminar at which over 150 safety and health professionals, designers, fire officers, burn specialists, and government officials attended. The Trust is now pursuing the implementation of the recommendations with the appropriate authorities and government departments.

Initial work at the Trust seemed to suggest that the health visitor has a unique part to play in the prevention of childhood accidents. A working party was established by the Trust to explore this role in more depth. Through the working party a two year research programme funded by the then Health Education Council was undertaken with the support of the Health Visitors Association. This research has now been completed⁶ and evidence from this is being used as the basis for health visitor training programmes in child accident prevention.

The Trust's working party on children in cars has been reconvened as a result of recent changes in legislation and design in this area. As part of its work, the working party has undertaken a review of loan schemes for infant car restraints and is providing guidelines for authorities, groups, and individuals wishing to establish schemes. The working party will be producing a report within the next few months, which will include recommendations concerning future legislation in this area.

Guidelines for professionals

After the award to the Trust of the Consumer's Association Silver Jubilee prize in 1985 the Trust produced a booklet aimed at health visitors and mothers setting out the types of safety equipment currently available on the market.⁷ The booklet aimed to provide them with independent advice on the range and type of safety equipment available for children under the age of 5 years. An indication of the equipments' suitability and effectiveness was also given. The booklets were distributed through

local health education units and are currently being reprinted.

Work at the Trust had suggested that some quarter of a million children each year are treated in hospital as a result of an accident caused by factors related to the design of houses. It seemed that many of these accidents were directly linked to bad or inappropriate architectural design, and that very simple design changes could eliminate many of these. Research was undertaken to establish what particular features in the house were causing the major accidents and injuries, and what changes could be made by architects, designers, and house-builders to reduce the problem. The result was a set of guidelines published by the Trust aimed at architects, designers, and commissioning agencies suggesting simple and inexpensive design changes that could be made in new and rehabilitated housing to avoid such accidents reoccurring.⁸ These guidelines have now been widely distributed with the help of the National House Building Council and the Department of the Environment and have been very well received.

Research

The Trust undertakes research for a variety of organisations and government departments, in particular, the Department of Trade and Industry (DTI). Much of the research is in response to accident problems brought to the Trust's attention by government departments, health and medical professionals, and a variety of other organisations.

Several cases of suspected child abuse brought forward allegations that brain damage was caused by the over-violent oscillation of the babies in bouncing cradles. The DTI commissioned the Trust to undertake research to ascertain the forces and accelerations that might be produced through the use of bouncing cradles. The work was undertaken for the Trust by Dr PF Millington of the Department of Bioengineering at the University of Strathclyde.⁹ This research showed that the forces and accelerations associated with the use of bouncing cradles were extremely unlikely to produce brain damage. These results have been particularly important in terms of their medicolegal implications.

After the death of a number of schoolchildren because of the impaction of inhaled pen caps below the larynx research was undertaken, at the request of the DTI, on behalf of the Trust by Mr DB Mathias, ear, nose, and throat surgeon at the Royal Victoria Infirmary, Newcastle upon Tyne in association with the Newcastle University Department of Mechanical Engineering. The research investigated the cross sectional area of an airway that would

allow sufficient flow of air through it to keep a child alive.¹⁰ The results have seen the development by a number of leading pen manufacturers of a safer pen top that will allow a child to breathe even if inhaled.

The European Commission is currently supporting the Trust in the establishment of an ergonomics data bank of information relating to children. This work, being undertaken at Nottingham University, will bring together known information and data on detailed aspects of the physical size, weight, performance, development, perception, and behaviour of children of different ages. Such a comprehensive collection will be of use to manufacturers and designers of children's goods and safety equipment.

Inquiries and information service

The Trust's Resource Centre located in its London office offers a comprehensive library and information service on all aspects of children's accidents and their prevention. This service is aimed principally at professionals and researchers in the field, and it is widely used by the media and government departments.

Contacts with other organisations

The Trust's role as an independent scientific advisory body necessitates close cooperation with a number of other organisations concerned with children's safety. In particular, the Trust works closely with the British Standards Institution and the Health Education Authority. Many common areas of concern are shared with the Royal Society for the Prevention of Accidents (RoSPA), and the Trust continues to work closely with that organisation.

In order to encourage the establishment of local child accident prevention groups, a two day workshop was held recently on Policy Development in

child accident prevention, to which some 40 organisations sent representatives. Internationally, the Trust has developed close contacts with the European Economic Commission, the World Health Organisation, the International Standards Organisation, and the European Consumers Product Safety Association, as well as with organisations and colleagues in Australia, New Zealand, Canada, and the United States. It has recently been nominated as the United Kingdom representative in a joint examination of the problem with the Soviet Union, and in April it was a cohost with Swedish colleagues of an international meeting in Stockholm.

It is hoped that these various activities illustrate the strength and vigour of this growing organisation.

References

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