

Motor Vehicle-Related Injury Prevention: Use of Child Safety Seats, Distribution and Education Programs

Task Force Finding

Intervention Definition

Through distribution and education programs, approved child safety seats are given, lent, or rented at low cost to parents. All programs also include educational components of varying intensities. These programs target parents and other caregivers who might need assistance in acquiring a safety seat because of financial hardship or poor understanding of the importance of using child safety seats.

Task Force Finding (June 1998)*

Distribution and education programs are strongly recommended on the basis that they increase child safety seat use when implemented (1) in a range of settings; (2) in a variety of population subgroups; and (3) as loan, rental, or giveaway programs. In addition, one study indicated a reduction in injury insurance claims among a population provided with safety seats by an automobile insurance company. No harms or other potential benefits were reported and no qualifying economic information was identified from the literature.

An important implementation issue regarding distribution and education programs has arisen since the studies in this review were conducted. Because the integrity of child safety seats can be compromised in a crash, seats returned to a distribution and education program should not be lent to others because there can be no guarantee that they were not involved in a crash. Therefore, when implementing child safety seat distribution and education programs, only new, unused seats should be provided to all recipients.

*From the following publication:

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).

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

Suggested citation:

The Community Preventive Service Task Force (CPSTF). *Motor Vehicle-Related Injury Prevention: Use of Child Safety Seats, Distribution and Education Programs*. The Community Guide [www.thecommunityguide.org]. The Community Preventive Service Task Force, Atlanta, Georgia, 1998. <https://doi.org/10.15620/cdc/164238>