



**Alliance for
Community
Traffic
Safety**

8059 S.W. Cirrus Dr., Beaverton, OR 97008
P/503.643.5620 F/503.643.5680
*Community Traffic Safety Program
Child Safety Seat Resource Center*

New Guidelines for Child Safety Seat Selection



In a new policy published in the April 2011 issue of Pediatrics, the AAP advises parents to keep toddlers in rear-facing car seats until age 2, or until they reach the maximum height and weight for their seat. It also advises that most children will need to ride in a belt-positioning booster seat until they have reached 4'9" tall and are between 8 and 12 years of age.

“Parents often look forward to transitioning from one stage to the next, but these transitions should generally be delayed until they’re necessary, when the child fully outgrows the limits for his or her current stage,” said Dennis Durbin, MD, FAAP, lead author of the policy statement and accompanying technical report.

“A rear-facing child safety seat does a better job of supporting the head, neck and spine of infants and toddlers in a crash, because it distributes the force of the collision over the entire body,” Dr. Durbin said. “For larger children, a forward-facing seat with a harness is safer than a booster, and a belt-positioning booster seat provides better protection than a seat belt alone until the seat belt fits correctly.”

While the rate of deaths in motor vehicle crashes in children under age 16 has decreased substantially – dropping 45 percent between 1997 and 2009 – it is still the leading cause of death for children ages 4 and older. Counting children and teens up to age 21, there are more than 5,000 deaths each year. Fatalities are just the tip of the iceberg; for every fatality, roughly 18 children are hospitalized and more than 400 are injured seriously enough to require medical treatment.

Car Seat Recommendations for Children

- Select a car seat based on your child's age and size, and choose a seat that fits in your vehicle and use it every time.
- Always refer to your specific car seat manufacturer's instructions, read the vehicle owner's manual on how to install the car seat using the seat belt or LATCH system, and check height and weight limits.
- To maximize safety, keep your child in the car seat for as long as possible, as long as the child fits within the manufacturer's height and weight requirements.
- Keep your child in the back seat at least through age 12.

AGE	<div style="margin-bottom: 10px;"> <p>Birth – 12 months</p> <p>Your child under age 1 should always ride in a rear-facing car seat. There are different types of rear-facing car seats. Infant-only seats can only be used rear-facing. Convertible and 3-in-1 car seats typically have higher height and weight limits for the rear-facing position, allowing you to keep your child rear-facing for a longer period of time.</p> </div> <div style="margin-bottom: 10px;"> <p>1 – 3 years</p> <p>Keep your child rear-facing as long as possible. It's the best way to keep him or her safe. Your child should remain in a rear-facing car seat until he or she reaches the top height or weight limit allowed by your car seat's manufacturer. Once your child outgrows the rear-facing car seat, your child is ready to travel in a forward-facing car seat with a harness.</p> </div> <div style="margin-bottom: 10px;"> <p>4 – 7 years</p> <p>Keep your child in a forward-facing car seat with a harness until he or she reaches the top height or weight limit allowed by your car seat's manufacturer. Once your child outgrows the forward-facing car seat with a harness, it's time to travel in a booster seat, but still in the back seat.</p> </div> <div> <p>8 – 12 years</p> <p>Keep your child in a booster seat until he or she is big enough to fit in a seat belt properly. For a seat belt to fit properly the lap belt must lie snugly across the upper thighs, not the stomach. The shoulder belt should lie snug across the shoulder and chest and not cross the neck or face. Remember your child should still ride in the back seat because it's safer there.</p> </div>
DESCRIPTION (RESTRAINT TYPE)	<div style="display: flex; justify-content: space-between; font-size: x-small;"> <div style="width: 22%;"> <p>A REAR-FACING CAR SEAT is the best seat for your young child to use. It has a harness and in a crash, cradles and moves with your child to reduce the stress to the child's fragile neck and spinal cord.</p> </div> <div style="width: 22%;"> <p>A FORWARD-FACING CAR SEAT has a harness and tether that limits your child's forward movement during a crash.</p> </div> <div style="width: 22%;"> <p>A BOOSTER SEAT positions the seat belt so that it fits properly over the stronger parts of your child's body.</p> </div> <div style="width: 22%;"> <p>A SEAT BELT should be across the upper thighs and be snug across the shoulder and chest to restrain the child safely in a crash. It should not rest on the stomach area or across the neck.</p> </div> </div>

www.facebook.com/childpassengersafety
 <http://twitter.com/childsafety>
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“The ‘age 2’ recommendation is not a deadline, but rather a guideline to help parents decide when to make the transition,” Dr. Durbin said. “Smaller children will benefit from



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remaining rear-facing longer, while other children may reach the maximum height or weight before 2 years of age.”

The new guidelines from the American Academy of Pediatrics:

- Infants should remain in rear-facing car seats until they are 2, instead of 1.
- Children should remain in a seat with a five-point safety harness as long as possible (based on weight limits) before moving to a booster seat. Some five-point harnesses have limits as high as 80 pounds.
- Children should use booster seats until they are 4’9” tall, a height most don’t reach until they are between 8 and 12.
- Even when they are tall enough to use only a seat belt, they should sit in the back seat until they are 13.

The NHTSA flyer displayed above describes the 4-Steps of Car Seat Recommendations for Children can be downloaded by [clicking here](#) or by visiting our [Education Materials](#) page.

Source: The April issue of Pediatrics - the peer-reviewed, scientific journal of the American Academy of Pediatrics (AAP). Visit the AAP's Pediatrics website at <http://pediatrics.aappublications.org/>

Suggestions for RV Travel



Traveling safely in a recreational vehicle (RV) can be a challenge. RV’s are rarely ideal for transporting children. For instance, unrestrained passengers as well as luggage are hazards that can fly into each other in a crash. Lack of seating positions with safety belts or seating positions that face rearward or side-facing can create problems. Child Restraint Systems (CRS) should never be installed in vehicle seats that do not face the front of the vehicle.

Here are a few tips to consider:

- Check the driving compartment and driver’s manual to determine vehicle seats appropriate for installing a child restraint system. Unlike Class A’s, the smaller Class B and Class C RV’s are built on a conventional truck or van chassis, so the cockpit shares the structural and safety features of those vehicles.



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- Consider using a trailer instead of an RV. The CRS has a better chance of being properly installed in the conventional vehicle that is towing the trailer.
- If the family is towing a passenger vehicle behind the RV for jaunts around destination areas, consider driving this vehicle separately instead, and transporting children in it.
- Make sure that all occupants stay buckled up while the RV is moving and that there is enough seating to properly accommodate all occupants.

Source: RV Consumer Group. Visit the RV Consumer Group website at <http://www.rv.org/>