

that the members of the ISCAIP will assist the association in its goal of injury prevention.

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Youth boxing ban 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 domino.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 boxing survived (*The Weekend Australian*, 28–29 Nov 1998, p41). Simon Chapman, a public health advocate from Sydney University, has a slightly more tongue in cheek response, suggesting we make the head out of bounds but allow blows below the belt on the grounds it will increase the public spectacle and reduce the reproductive ability of boxers.

Recommendations of the Australian National Health and Medical Research Council *Report on Boxing Injuries* that professional boxing be prohibited and that amateur boxing be permitted only under strict conditions are available on the web (www.health.gov.au/nhmrc). The American Academy of Pediatrics has its 1997 policy on participation of children and young people in boxing (RE9703) available (www.aap.org/policy).

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UK government reviews traffic speed

The County Surveyors' Society (CSS) may not sound the kind of organisation likely to lead the war against death and injury on the roads. Yet it was at a seminar hosted by the CSS in Birmingham that the UK government announced a major policy initiative that could lead to a breakthrough in efforts to enhance road safety in that country.

The Department of the Environment, Transport and the Regions is, it seems, undertaking a wide ranging review of national speed policy. In launching the review, Transport Minister Lord Whitty said that cutting vehicle speeds "would save lives, cut accidents, lower vehicle emissions and lead to more efficient use of roads".

These words were music to the ears of safety advocates. That sounded like an unambiguous commitment to cut speeds. But politics is never that 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 be complacent.

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.

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LETTERS TO THE EDITOR

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

EDITOR,—Primary care pediatricians 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 studies like the one so meticulously devised and carried out by Braver *et al* for the solid information they provide.¹ 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 a 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,² 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*,³ 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,⁴ 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 injuries 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. Will we succeed 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".⁵ For now, we can just thank *Injury Prevention* for the chance to reach through the language barrier and show some of Brazil's strides towards a safer world.

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- 5 Rivara F. Injury prevention in practice. *Inj Prev* 1998;4:4–5.