



February 28, 2024

The Honorable Winnie Brinks, Majority Leader  
The Honorable Aric Nesbitt, Minority Leader  
Michigan State Senate  
PO Box 30036  
Lansing, Michigan 48909

Dear Majority Leader Brinks and Minority Leader Nesbitt:

Advocates for Highway and Auto Safety (Advocates), an alliance of consumer, safety, medical, public health and law enforcement groups and insurance companies working together to pass highway and auto safety laws that prevent crashes, save lives, reduce injuries, and contain costs, supports enactment of provisions in House Bill (HB) 4511 to establish protections for child passengers. However, we recommend making a few minor, yet important, modifications to improve the bill and enhance safety of child passengers.

Motor vehicle crashes are a leading cause of death for children in the United States.<sup>i</sup> An average of over three children under age 14 were killed and about 445 were injured every day in traffic crashes in 2021 – amounting to a total of 1,184 fatalities and 162,298 others injured.<sup>ii</sup> Improperly restrained children traveling in vehicles present a serious yet fixable public health problem. Across all age groups, injury risk is lowest (less than two percent) when children are placed in an age-appropriate restraint in the rear seat.<sup>iii</sup> Use of appropriate child passenger safety seats is 47 percent effective in preventing fatalities for ages 1-3 in all crashes, 43 percent effective in preventing fatalities for ages 3-5 in all crashes, and 67 percent effective in preventing serious to critical injuries for ages 5-8 in all crashes.<sup>iv</sup> More than 325 lives were saved in 2017 by restraining children four and younger in passenger vehicles.<sup>v</sup>

HB 4511 will improve the current child passenger safety law by requiring children to be restrained in a rear-facing safety seat until at least age two; children who outgrow a rear-facing safety seat to be secured in a forward-facing child restraint system with a harness until turning five years old; and, children under 13 to be properly restrained in a rear seat. Advocates supports these upgrades which are consistent with best practices identified by the American Academy of Pediatrics (AAP) and others.

However, the bill also includes language to allow these best practices to not be followed based on manufacturer guidelines, “The child has reached the weight or height limit of the rear-facing child restraint system set by the manufacturer” and “The child has reached the weight or height limit of the forward-facing child restraint system set by the manufacturer.” This language should be stricken to ensure that a child is restrained in the proper safety seat and position irrespective of the limitations of the specific safety seat being used. For example, an infant should not be turned forward facing at age one because the safety seat is insufficient to accommodate their size. Many convertible safety seats provide the flexibility to accommodate children rear facing through age three or older, delay transition to a forward-facing safety seat (delaying transitions is an AAP recommendation as well) and keep kids safe.

Additionally, we recommend striking the bill’s booster seat provision. Current law requires eight years old and less than 4 feet 9 inches in height; the bill changes the “and” to an “or” option, i.e., either eight years old or 4 feet 9 inches in height. In its updated guidelines, the AAP identifies the best practice for transitioning out of a booster seat and into a seat belt is “typically when they have reached 4 ft 9 inches in height and are between 8 and 12 y. of age.”<sup>vi</sup> This recommendation is supported by growth charts for the average development of children which find that more than 95 percent of boys and girls are less than 4 feet 9 inches in height at age nine.<sup>vii</sup> Therefore, in the vast majority of cases, the transition from a booster seat to seat belts should occur beyond age eight.

We appreciate your consideration of our recommended safety improvements to HB 4511 and urge swift passage to enhance the safety of our most vulnerable passengers.

Sincerely,

Catherine Chase, President

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- <sup>i</sup> WISQARS, Leading Causes of Death Reports, 1981-2020, 2020, Top 10 leading causes of death, Ages 1 to 14, available at <https://wisqars.cdc.gov/fatal-leading>.
- <sup>ii</sup> Traffic Safety Facts 2021 Data: Children, NHTSA May 2023, DOT HS 813 456, available at <https://crashstats.nhtsa.dot.gov/Api/Public/ViewPublication/813456>.
- <sup>iii</sup> Risk of Child Injury by Seat Row and Restraint Type, 1998-2002, Age 0-12 years, Children's Hospital of Philadelphia, 2014. Available at [https://injury.research.chop.edu/sites/default/files/documents/seat\\_row\\_0.pdf](https://injury.research.chop.edu/sites/default/files/documents/seat_row_0.pdf).
- <sup>iv</sup> Evaluation of Child Restraint System Effectiveness, NHTSA, December 2020, DOT HS 813 047, available at <https://crashstats.nhtsa.dot.gov/Api/Public/ViewPublication/813047>.
- <sup>v</sup> Traffic Safety Facts 2020: A Compilation of Motor Vehicle Crash Data, NHTSA, Oct. 2022, DOT HS 813 375, available at <https://crashstats.nhtsa.dot.gov/Api/Public/ViewPublication/813375>.
- <sup>vi</sup> Durbin D, Hoffman B. Child Passenger Safety. AAP policy statement from Council on Injury Violence and Poison Prevention. Pediatrics. 2018b;142(5):e20182460. Available at <https://doi.org/10.1542/peds.2018-2460>.
- <sup>vii</sup> Clinical Growth Charts, National Center for Health Statistics, Centers for Disease Control, available at [https://www.cdc.gov/growthcharts/clinical\\_charts.htm](https://www.cdc.gov/growthcharts/clinical_charts.htm).