CONSUMER PRODUCT SAFETY COMMISSION

Vision

Unintentional injuries are the number one cause of death in children one to 19, and the fifth leading cause of death for newborns and infants under one. Pediatricians look to the guidance of the Consumer Product Safety Commission (CPSC) in communicating to parents the safety of the thousands of consumer products under the agency’s jurisdiction, including cribs, strollers, and toys. The CPSC’s work is important to safeguarding the nation’s children and adolescents and has led to a significant decline in injury and death over the last 40 years. For example, a ban on drop-side cribs in 2011 helped to prevent needless infant deaths. As the Commission notes, injury and damage by consumer products cost the United States more than $1 trillion on an annual basis. The next administration must ensure that the CPSC has the support and funding needed to maintain and enforce the strongest possible safety standards and to place child health and safety at the forefront of everything it does.

Recommended Administrative Actions

Keep children safe in their cribs. Crib bumpers have no place in a safe sleep environment and it is past time for the CPSC to strengthen its safe sleep messaging by banning this product. There is no evidence that bumper pads prevent injuries, and there is evidence that they increase the potential risk of suffocation, strangulation, or entrapment. The lack of a CPSC ban on crib bumpers sends a mixed signal to caregivers, and should be rectified immediately. Such a ban would be in keeping with the rest of the CPSC’s safe sleep work, as well.

Protect children from nicotine poisoning. Coming in a variety of bright colors and in flavors like cotton candy and ‘gummy bear,’ liquid nicotine refills used in e-cigarettes have found their way into the hands of children across the country, causing serious and even deadly health consequences. Liquid nicotine is a highly toxic substance when it is ingested or absorbed through the skin but, until recently, liquid nicotine containers did not have to use child-resistant packaging. The Child Nicotine Poisoning Prevention Act directed the CPSC to implement a regulation requiring child-resistant packaging on liquid nicotine refill containers, and the CPSC put this requirement into effect in July 2016. The CPSC must fully implement and robustly enforce this safety packaging requirement.

Assess efforts to keep laundry detergent packets out of children’s hands. Brightly-colored, highly-concentrated liquid laundry detergent packets are uniquely hazardous to children and exposures to these dangerous products are rising. Child exposures to the brightly colored packets jumped 17 percent from 2013 to 2014, and children who ingest laundry detergent packets are five to 23 times more likely to be hospitalized and eight to 23 times more likely to have a serious medical outcome than children exposed to other detergent types. CPSC must enact strong standards on laundry package safety to prevent child poisonings. In addition, the Commission must ensure that the standards’ follow-up and monitoring efforts include public health surveillance tracking of the number of children poisoned by the packets, in order to assess the standards’ effectiveness. If the ASTM standard does not do enough to protect children from laundry packet hazards, the CPSC should create a mandatory standard to make these packets child-resistant, as it has with many other hazardous cleaning materials.

Safeguard children from the dangers of window covering cords. Window covering cords present an avoidable home hazard. Since 1991 more than 175 infants and children have died from accidentally strangling in window cords. Infants placed in cribs near a window may reach out, grab the dangling pull cord, pull it into the crib, and become entangled. Toddlers playing on a bed near a window cord are also at risk of becoming entangled. Restraints that secure these items to the wall can make all the difference in preventing children from being injured or killed in tip-over accidents. The most effective solution, however, is for the CPSC to strengthen the stability performance requirements in the relevant safety standards. Doing so may require a mandatory standard from CPSC to ensure that all manufacturers comply and that all consumers have an opportunity to keep their children safe from this hazard.

Prevent furniture and TV tip-over injuries and deaths. A study in the October 2009 issue of the journal Clinical Pediatrics found that 40 children were taken to U.S. emergency departments each day because of injuries involving furniture tipping over. Like furniture tip-overs, TV tip-overs can also result in horrific injuries or even death. A July 2013 Pediatrics article found that between 1990 and 2011, an estimated 380,885 patients under 18 were treated in emergency departments for a TV-related injury; this equals an average of 17,313 children a year, or two children every hour. Restraints that secure these items to the wall can make all the difference in preventing children from being injured or killed in tip-over accidents. The most effective solution, however, is for the CPSC to strengthen the stability performance requirements in the relevant safety standards. Doing so may require a mandatory standard from CPSC to ensure that all manufacturers comply and that all consumers have an opportunity to keep their children safe from this hazard.

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Recommended Congressional Actions

Cease efforts to obstruct safety regulation of recreational off-highway vehicles. No child under the age of 16 should operate a recreational off-highway vehicle (ROV). Children should not even be passengers in ROVs, as safe methods of securing children in these vehicles have not been established. The CPSC has attempted to regulate ROVs, but Congress has continued to insert unnecessary study requirements into statutes as a way to slow regulation. These efforts must stop.

Funding Priorities

Overall agency budget and staffing. The CPSC continues to do a tremendous amount with relatively few resources. The agency’s current budget ($125 million) must be increased, and the additional funds used to hire child health experts in all departments within the agency.

About this Document

This document is an excerpt from Blueprint for Children: How the Next President Can Build a Foundation for a Healthy Future (http://aap.org/blueprint), which was produced by the American Academy of Pediatrics in September 2016 and has also been endorsed by the following organizations: the Academic Pediatric Association, the American Pediatric Society, America’s Promise Alliance, the Association of Medical School Pediatric Department Chairs, Family Voices, the National Association of Pediatric Nurse Practitioners, the Pediatric Policy Council, the Society for Adolescent Health and Medicine, the Society for Pediatric Research and ZERO TO THREE.