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of the
Legislative Assembly of Manitoba

STANDING COMMITTEE
on
STATUTORY REGULATIONS
and
ORDERS

31-32 Elizabeth II

Chairman
Mr. Peter Fox
Constituency of Concordia



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MANITOBA LEGISLATIVE ASSEMBLY
Thirty-Second Legislature

Members, Constituencies and Political Affiliation

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LEGISLATIVE ASSEMBLY OF MANITOBA
THE STANDING COMMITTEE ON STATUTORY REGULATIONS AND ORDERS

Thursday, 28 July, 1983

TIME — 10:00 a.m.

LOCATION — Winnipeg

CHAIRMAN — Mr. Peter Fox (Concordia)

ATTENDANCE — QUORUM - 6

Members of the committee present:

Hon. Mr. Uskiw, Messrs. Fox, Harper, Kovnats,
Lecuyer, McKenzie, Mrs. Oleson, Ms. Phillips,
Mr. Orchard.

WITNESSES: Representations were heard on Bill
No. 60 as follows:

Mr. John Martens, Private Citizen;
Mr. R.N. Sharpe, Private Citizen;
Dr. Richard Stanwick, Maternal and Child
Health Coalition;
Elliott Levine, Private Citizen.

MATTERS UNDER DISCUSSION:

Bill No. 60 - An Act to amend The Highway
Traffic Act (2).

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MR. CHAIRMAN: The first presentation is from John
Martens. Present? John Martens?
Mr. Orchard.

MR. D. ORCHARD: It might be appropriate to wait a
couple minutes for the Minister since he is interested
in hearing all the presentations that are here.

MR. CHAIRMAN: I have a quorum, Mr. Orchard. I want
to proceed as fast as we can.

MR. D. ORCHARD: It's unfortunate your quorum is
made up of the entire complement of the Progressive
Conservative Party and not the key member from the
government.

MR. CHAIRMAN: Proceed, Mr. Martens.

MR. J. MARTENS: My presentation, I believe the last
word I had from the Minister was that - at least, that
was how I read it in the newspapers - the government
would consider amendments only. They wouldn't budge
on the principle. If the principle is reducing injuries and
fatalities, we're in agreement, but it's the method, I
guess, where we go separate ways.

The people that push for compulsion, they expect
high percentage rates of compliance to be successful.
I think there is - I haven't prepared specific
recommendations as much as pointing in a certain

direction. So I guess all I can do is present what I have
prepared for you.

I don't know, do you have the copies of what I was
going to leave with the - it was being copied this
morning, so I guess it's not quite ready.

MR. CHAIRMAN: That's right.

MR. J. MARTENS: But I have a written submission of
which I have not had copies made. I think I'll spend
most of my time reading, because I . . .

MR. W. MCKENZIE: Are copies being made for the
committee?

MR. J. MARTENS: Yes, they are. I think I will just read,
because I wrote it over twice, and I think I've got
everything down fairly clearly.

Safety "experts," and I've got experts in quotations,
spend years on research as to how injuries can be
reduced in accidents. During the recent safety
conference in Winnipeg, Dr. John States(phonetic) said
that they have now given up on airbags, and are
intending to design safer cars for the future. In my
opinion it's a waste of effort, they've been doing that
for years already. Ninety percent of the problem is
behind the wheel and they tinker - referring to the safety
experts - they tinker with things that have nothing to
do with the prevention of accidents.

The occasional realization that accident prevention
is the best way can never take root with them because
of their view of accidents which is: accidents are bound
to happen. Now that is true, but knowing that means
that it must always remain top priority to prevent
accidents. This blindness to what must always have
priority has been demonstrated again since we have
had the change in government and I'm not blaming
this change to the government as you will note later
on.

Accident injury prevention seems more important
than accident prevention. When you read, or hear, about
an accident the first question is: was he wearing a
helmet; was he buckled in? How it was caused or how
it could have been prevented is hardly mentioned. This
shift in priority has been caused by all those pushing
for compulsion and the list would go all the way down
from the road and safety of Transport Canada, through
the research units, through the Manitoba Medical and
all these organizations.

I discovered in 1978, and 1979, already when I first
became concerned with this issue that they read a lot
of each other's literature so that when you hear a
sentence, or a certain phrase from one group, all of
a sudden it turns up from another group. To me it was
very disturbing to hear that.

In his speech - and I don't think Don is here yet this
morning, Don Scott - Don is his name isn't it? In his
speech of July 7th, Page 4173 of Hansard, Don Scott
lists this year's accidents and how safety devices could

have reduced the injury. But not in one case, at least not that I recall, did he mention the cause of those accidents or how they might have been prevented. He is reflecting the approach of the MMA brief where case after case injuries might have been prevented had they been wearing protective devices. The only way to be sure how it could have been otherwise would be to duplicate those accidents exactly with the restraints or protective devices in place. Now that's impossible, of course that's impossible, but there's always this dwelling on what could have been or what might have been instead of stating the actual cases where the belt actually did something. Now that is done too, but there is so much dwelling on this - what could have been. — (Interjection) — Yes, I'll need it once in a while. In my view, it would be more fruitful to show what protective devices have done in accidents, but at the same time showing how that accident might have been prevented altogether.

I happen to have knowledge of the accident at Arlington and Logan. Don didn't mention this, but the passenger was buckled in. Now, maybe I should describe that accident, or is that accident still before the courts and it should not be discussed? It's a recent accident. The best defence against such an accident happening is to avoid the danger. That means you never drive blind, even though you have the right-of-way. Apparently, that's what happened in this intersection. That car that was hit drove through a green light without seeing the fast approaching car from the right-hand side. In that respect, the accident was preventable, that is, had this driver been aware of that danger. I think this is the trouble with many young and inexperienced drivers; when they have the right-of-way, they go. It is quite likely the other driver shouldn't have been on the road, and I am pretty sure of that.

Let us look directly at what is to be legislated. The lap and shoulder belts are limited in their usefulness by their design and by the way they are installed. No. 1, there is only one shoulder strap, always to the outside. That means on a crash from the opposite side, you could be thrown out of your shoulder strap and once out, you wouldn't get back in again.

No. 2, the lap belt has no crotch support. This means that your lower body could, in severe crashes, slide under the belt. Of course with a crotch support, who would want to buckle up unless you are deliberately driving dangerously?

No. 3, the belts and the seats are mounted separately. In heavy side crashes, it often happens, and this is especially true in the lighter, smaller cars, that seats are torn loose, but the lap belt holds the person in place because it is mounted separately from the seat.

Ralph Nader says that in serious crashes, lap and shoulder straps are no guarantee of safety, and that they are effective in these cases only 33 percent of the time.

Dr. John R. Blackwood of Woodstock, Ontario - and I'm sure some of you are familiar with reference to that name - puts it another way. "The lap and shoulder belts are most useful up to speeds of 35 miles an hour. After 35 miles an hour, the usefulness falls off rapidly." Dr. John Blackwood was Investigating Coroner for 25 years, in 1979, and at the inquest of the accident of 1979 he had some very strong things to say to the Ontario Government. The report I will be reading is the correct report.

I talked to Dr. Blackwood just Sunday afternoon on the telephone and he promised, or told me that he would send me a copy of the inquest plus other related information. The report I will be reading is the correct report. Some other reports contained comments by accident researchers but they were not on the scene until hours later when the bodies had already been cut out of the belts. Some of these colleagues gave Dr. Blackwood a very hard time for the report he made about the accident. I will read the report. I believe it was out of an April 1979 Tribune, and I'm sorry I didn't keep the date. Dr. Blackwood, well I already said this - Dr. Blackwood is sending me a copy of the inquest together with other materials. This is the report.

The headline reads - "Seat Belts Killed Three - M.D." Woodstock, Ontario, Canadian Press. "Three persons killed April 6th, in a head-on collision, on a county road near here, died because they were wearing seat belts, a coroner says. Dr. John Blackwood, Oxford County Coroner, said autopsies performed on the three, shortly after the accident, showed they died of massive abdominal injuries caused by the seat belts. In an interview with the Sentinel Review, Blackwood said he would like to see the Ontario Government sued for its 1975 law making the wearing of seat belts mandatory.

Statistics misleading. Blackwood, a coroner for 25 years, said statistics from the province's Transportation and Communications Ministry, on lives saved by seat belts, are misleading because they are compiled by neurosurgeons who do not go to the accidents. In city traffic accidents seat belts prevent injuries, Blackwood said. On the highway, in a high-speed crash, they couldn't matter less, and I guess sometimes you get lucky and the other way. Blackwood said people have drowned, and burned to death, because they could not get their seats undone. Six persons, all of them in the same car, and all wearing seat belts were killed in the April 6th collision on the county road 12 kilometres west of here during a blizzard. Now, of course, maybe they were travelling too fast.

Abdominal injuries. Blackwood said, autopsies on Mary Joyce Bejant, if that's the correct pronunciation, 47, Doris Forbes, 43, and her daughter, Margaret Forbes, 20, all of nearby Ingersoll, showed they died of abdominal injuries caused by the seat belts. Also killed were Hartwell Bejant, 48 and James Calvert Forbes, 43, who hit the windshield, and William Peter Lubin, 23, of Thamesford, Ontario, who hit the steering wheel. Bejant and Forbes were husbands of two of the women killed. The six were returning to Ingersoll from a bowling outing in Woodstock when the accident occurred.

Blackwood said the three persons, in the other car, who lived, were not wearing seat belts. They are James Harcourt, 26; Don Lamb, 18; and Danny Waters, 22, all of Woodstock. They have been charged with not wearing seat belts, and are to appear in Provincial Traffic Court, May 25th. They lived to see the day, and they are going to be charged for not wearing seat belts.

Open beer in car - Harcourt is also charged with not having a valid driver's licence and with having an open case of beer in the back seat. The Sentinel Review quoted sources as saying that the force of the impact of the two cars colliding was about 160 kilometres per hour, which punched out on the calculator, makes 99 miles an hour combined speed. Now there is a little

bit of crunch effect in each car, so that it wouldn't be the same as one car crashing into a solid obstruction. I have talked to people such as Staff Sergeant - oh I forget his name now - at the RCMP headquarters, Belfry, who was with the research unit previously. He was quite knowledgeable about these things, but anyway, 99 miles an hour.

The car in which the six were killed was a four-door, '76 Oldsmobile Cutlass. I wondered at first if it might have been a small car, but an Oldsmobile is a fairly good-sized car. Passengers in the back seat wore lap belts.

Blackwood blamed 95 percent of highway traffic deaths on impaired drivers. He recently wrote to Dr. H.B. Cotnam, Ontario Chief Coroner, suggesting that blood sample legislation be changed. The law says blood samples cannot be taken from a person without permission. Blackwood said injured drivers are usually not charged with impaired driving, because blood samples are not taken at the scene, but Cotnam's assistant, John Ebbs, said that the province's Legal Services Branch has indicated that the matter is under federal jurisdiction.

The Manitoba Safety Council has started a Seat Belt Survivors Club. They should also open their membership to bona fide survivors of accidents who have survived because they are not belted in. I'm sure mutual sharing could be very beneficial. They could understand the situation a little better. If you believe what the so-called experts say about this myth of survivors, it just goes to show that they are wearing blinders or who knows what.

In 1978 and 1979, when I first started looking into this I just became angry, and then I let that anger turn into determination, and I still have that determination today. The evidence of what I suspected then is mounting.

My opinion on helmets is based on observation only. I see no point in making them mandatory. The one fatal accident I have witnessed so far in my life, happened to be between a motorcycle and a car. It happened many years ago but I remember it as vividly today as though it was yesterday. In that case the helmet would have helped to break his neck more severely. It turned out that man was the leader of a racing troupe, going to the races, single rider, was trapped by a car making a U-turn on a two lane road. The old gentleman stopped when he saw the motorbike coming, started up, stopped, and by that time the motorbike rider had no choice. He did what he could; he showed his expertise; he swung that bike around sideways, skidded on both wheels sideways, but his momentum was too great, and when he hit the car, it was a big Lincoln Coupe, the bike jack-knifed, whiplashed him into the side door, the window was open and he broke his neck on the open window. Now that's only one accident but it just illustrates a point.

My opinion on school buses is also based on observation.

(1) Case No. 47, in the University of Manitoba Accident and Research Unit Annual Report of 1976-77. The school bus driver was known to take chances, and as a result came into collision in a highway intersection with a cab-over flat deck truck carrying a farm tractor. The collision carried both vehicles over the corner of the intersection. The truck driver was temporarily

knocked out and his doors were jammed. His cab was against the school bus door. There were gas fumes around. The school bus driver was also temporarily knocked out. Some children were hurt and passers by helped them out.

The most important thing for the safety of bus passengers is the driver behind the wheel. Since a bus is a heavy vehicle there is quite a bit of built-in safety just by the weight of the vehicle, and with a good driver that danger is minimized an awful lot.

The proponents of compulsion say - education doesn't work so we have to legislate. They have tried mass media campaigns which they call education and they never see it work. I question very seriously if it is really their intention to see it work. In their mind, everything seems so clear that they wonder how anyone else could be so stupid. I think what they call education is designed to fail. Why else would you be repeating something that has failed in the past? In my opinion, high-profile media campaigns are a waste of effort and money, but I challenge this statement that education doesn't work; education does work. Witness the fact that many driver training graduates voluntarily buckle up, and not only driver training graduates. You meet people of all walks of life and all ages who voluntarily decide to buckle up. Education does work through quiet, honest instruction and training.

I say, honest, because the high-profile media campaigns are geared only for compulsion. When these campaigns are geared for compulsion, you are not told the limitation of the safety devices. The ordinary man senses the lack of frankness and the coercion of the high-profile public campaigns.

I also have an opinion on child restraints. I am sure there have been numerous letters to the editor where it is mentioned that the motor vehicle is the largest single contributor to children's fatalities than any single disease. Would anyone want to hazard a guess, or is it not in place to ask a question right now? — (Interjection) — Okay. How does that statement strike you? I'll just put the question.

Now most diseases are under such good control that there are a very low number of deaths from diseases, so in a sense, they are correct. But when you first hear that statement, you think, oh well it could be a terrible number. Well, I'll just give you one figure that I know by memory, and that in 1981 there were a total of four fatalities, but two of them were pedestrians, so that there were a total of two fatalities, children from the age of zero to four in 1981. I checked some other years and the figure fluctuates a little bit up and down from that. I have heard from one of the nurses that apparently last year there were more, but I don't know that figure. We will see that in the stats later. That is from the 1982 book, which I don't have.

This opinion on child restraints will be reflected in this case that I have also taken out of the University of Manitoba Accident Research and Safety Unit Annual Report of 1976-77. It was Case No. 53, the last case in the book. I have written the description down in detail here.

It was a three-vehicle collision at a four-lane highway with a boulevard at a gravel road intersection. A female driver with four adult female passengers and a one-year-old child stopped at the intersection intending to cross. The driver was watching a car on the highway

approaching from her right. When the driver of the car on the highway turned on the right signal light, the first driver, the female driver, waiting at the intersection proceeded to cross the intersection without first looking left and was hit broadside by a five-ton garbage truck. Their combined momentum carried them into the opposing lanes where they collided with the oncoming third car wanting to turn right.

The female driver and three of the adult passengers were killed. The remaining passenger took weeks to recover from her injuries. When the bodies were pulled from the rear seat, the one-year-old child was found on the floor between the seats, completely unhurt.

Now just to illustrate what I saw on Corydon Avenue about three weeks ago, a young couple in a brand-new Volvo - it seemed like a brand-new Volvo - well-dressed, well-to-do couple I would imagine, both neatly buckled in, and between them on the front seat, their small child, also neatly buckled in. At first glance, you could say, beautiful picture. But putting that side by side with what I have just described, in a similar situation that would not be such a beautiful picture.

Of course, the instruction for children is always to put them in the back seat. But what's going to happen if you put a child in the back seat. Are you not going to be able to put adults to one side or the other for fear of a side crash? If you're going to go to the extreme, you would only be able to take two adults in the front or three, I suppose, and only one child in the rear or maybe three children, but no adults.

Well I have just described that partly. Imagine that child strapped into a safety seat between adult passengers in such a heavy side crash. Even with the adults restrained, the child would not likely have survived. As it was, the adult bodies must have served as a cushion on the first heavy impact; that is, for the child. Nor does it seem likely that restraints on the adults would have made any difference for them.

According to the proposed legislation, the mother of the child would have had to join the driver and the other passengers in the front seat, and the child would have had to be in the restraint in the middle of the rear seat alone. Restraints or not, the occupants of the front seat would likely have been killed anyway.

Following the intent of the proposed legislation, two adults who couldn't have come along would have been saved, but the more obvious solution is not better safety devices and cars, but an increased awareness of the dangers of the road. That has to be learned. There are too many variables which the legislation cannot cover. Now I suppose the answer to that would be that it reduces the variables, but there are still lots of variables left. There are variables added on the other side, so it reduces some and adds some. I see too many problems to just step into compulsory legislation the way the bill is now.

An attentive driver would have saved four lives and one severe injury and no property damage. The driver was known to be habitually inattentive. I suppose if some of her passengers knew this, they should have probably helped her to be aware of the danger.

Now my last little presentation is on seat belt related statistics. For years, when statistics have been quoted for fatalities - pardon me, my throat is getting dry again. I haven't done that much speaking in my lifetime, and I always thought that the speakers were just drinking water out of nervousness, but I see the difference.

A MEMBER: It does assist.

MR. J. MARTENS: It certainly does, yes. Maybe it's the nervousness too.

Seat belt related statistics. For years when statistics from motor vehicle accidents have been quoted for fatalities, and injured, it has always been the total figures. These total figures have always been used together with the compulsory promotion of seat belts. Now when you compare total figures province-by-province you get a general picture but not an accurate picture.

For instance, accidents researchers, Transport Canada, the MMA, and various other related groups have been using the round figure of 200 as the average motor vehicle fatalities per year for Manitoba. In fact for Manitoba, from 1977, when the speed limit was reduced, and there was a dramatic reduction in fatalities from 1976-77, when the speed limit was introduced, 'till 1982 is 180. That is the average from 1977-82. But when you break down the total figure to the total motor vehicle fatalities, drivers and passengers only, excluding pedestrians, motor cycle riders and passengers, bicycle riders, and others, the average for Manitoba from 1977-81 is 130. We've been hearing this figure of 200. I'm sure the researchers should have known better and when you use figures like that together with promotion of seat belts I think at least the figures should match.

Let's take a closer look. In 1981 Manitoba had a total of 198 fatalities, higher than average. The motor vehicle stats, the seat belt related stats, reveal that there were actually only 128 fatalities, that is motor vehicle drivers and passengers, lower than average, two lower than average.

A closer look still as figures on Page 31 of the 1981 Manitoba Vehicles Branch Annual Report show, I believe that should be in your possession, reveals that Saskatchewan drivers contributed to nine fatal accidents. That is fatal accidents, that isn't fatalities, I couldn't get a sheet on fatalities, just on fatal accidents; Ontario drivers - one; the rest of Canada - four; the United States - three. Now if we knew how many Manitoba drivers were involved in other places that picture might balance out a little bit.

The other total figures that have been used are the injury figures running from 10,000 to 11,000 per year, that's the total. For the first time that I have seen both the briefs to the present government from the MMA, and the Institute of Transport Engineers Winnipeg, used the figure of 1,100, or 1,111 to be exact, or 10 percent as the seat belt related injuries and that is measured by the Medicare Hospital Claims. These are the serious injuries that require compensation from insurance.

The first indication I had how Manitoba's record compared with other provinces I found in the 1981 Alberta report, Pages 8-14. Now you don't have copies of that, and I don't think it's probably, unless you wish it, I don't think it's probably necessary to have them copied. The charts show the provinces by comparison in miles driven, and by population through the years 1979-81, for three years. On the average it shows Manitoba in the lead in the lowest fatalities and third lowest in injuries. I say on the average because apparently in 1981 Ontario had a lower fatality rate.

But the chart uses total figures, and in order to get seat belt related figures I drew up a questionnaire with

eight preliminary basic questions, as indicated by the letters to the Premier, and the Minister of Highways, dated June 22nd, 29th, and July 21st, all of 1983. In order to get a comparative chart for all of Canada, using seat belt related figures only, I sent this questionnaire, together with the letter of June 22nd, to the Premier, as an explanation of my intent to all the Ministers of Transportation in Canada. I indicated in the 29th letter that it was only to the six large provinces but I later on sent it to the rest excluding the Northwest Territories.

I think that's probably the end of my presentation from here, and that just lists the problems I have with compulsory seat belt legislation.

Maybe I should close off with this. I just made some notes in the bill and they're not specific suggestions at all. Seat belts required by drivers should be instructed in proper use with the limitations understood, and I would include that same phrase with all the other safety devices. You should understand the limitations and the restrictions.

Now I guess that's all I would have to present at this time.

(Please see Appendices 1-5 at end of transcript)

MR. CHAIRMAN: Thank you, Mr. Martens. Any questions?

Mr. Orchard.

MR. D. ORCHARD: Mr. Martens, your objection to the seat-belt legislation stems from the fact that, first of all, you're not convinced that the statistical case has been made showing the positive benefit because Manitoba's accident and fatality record, has been at least as good as a province with seat belt legislation?

MR. J. MARTENS: I don't think I would want to argue that too strongly that the seat belt, that there aren't benefits there, but there is a - and I guess I haven't brought that up which is really one of the main points that I wanted to bring up, there is one better way to prevent injuries and that's not to have accidents at all. I do make mention of that in the letters. The fact that so many of us go through a lifetime without serious accidents, or injuries, to me is proof of that that you can drive safely, that you can drive without accident. It's a matter of choice.

I can remember from Day One that I've been a defensive driver. I've gotten into scrapes twice, and it happened 27 years after I got my licence. They shouldn't have happened. In both cases ironically it was a similar situation to this old gentleman, that this old gentleman caused that motorcycle rider. Now if I'd have been on a motorbike who knows where I'd be today, but as it was we were both on four-wheel vehicles and in both instances because defensive driving was a habit with me, even though I got myself into the jam, I reacted the proper way and what could have been injury accidents turned out into minor property damage. In fact, defensive driving, I would say, is the first defence against accidents.

MR. CHAIRMAN: Mr. Lecuyer.

MR. G. LECUYER: The last statement, Mr. Martens, seems to say - I agree with you that with good driver

education, probably a lot of the accidents wouldn't happen. A lot of the accidents, as you have stated, are caused by human error.

MR. J. MARTENS: Right, preventable human error.

MR. G. LECUYER: I suppose we have to agree that is probably the cause of most accidents but, humans being humans, they will probably continue to have accidents. Won't you agree?

MR. J. MARTENS: I have never repeated that bad year, and I don't intend to. As long as my mind stays clear and the hearing is good and the eyesight is good - I am pretty sure I am not driving with a false sense of security. I think it's just the opposite. I am always aware of the danger, and I think that awareness of danger is a very great factor in safety.

MR. G. LECUYER: But don't you agree, by the same token, that other people may cause you injuries?

MR. J. MARTENS: Right. You shouldn't cross at intersections blind for instance, on a green light or whatever.

MR. G. LECUYER: You gave as an example, for instance, an accident which happened because of someone crossed an intersection on a red light, a case which is still in the courts presently, I think.

MR. J. MARTENS: Yes, I guess it is.

MR. G. LECUYER: I suppose you have to agree that is most definitely a case of human error. Someone was inattentive.

MR. J. MARTENS: I understand there are also - well how much can you talk about this? You can find that out for yourself I suppose, if you look into that accident.

MR. G. LECUYER: I was going to ask you that earlier, but now you seem to not put into question the fact that - you say, we have to teach people, provide them education so that they will drive defensively, be more attentive.

MR. J. MARTENS: Right. No. 1.

MR. G. LECUYER: But in the meantime, accidents will continue to happen. Would you then agree that protective measures such as seat belts will prevent serious injuries, or make them into minor injuries, or reduce the number of fatalities?

MR. J. MARTENS: As I have pointed out, there is evidence there that you can't guarantee that the seat belt will save you. It might even cause the opposite.

MR. G. LECUYER: I suppose we could always find cases where that may be so, but you are pulling a few examples. Of course, no one can be expected to . . .

MR. J. MARTENS: It's an endless story. There are both sides.

MR. G. LECUYER: That's right. That is exactly the point I was going to make. Thank you for making it.

MR. CHAIRMAN: Thank you, Mr. Martens.
Mr. McKenzie.

MR. W. MCKENZIE: Mr. Martens, in this letter of June the 22nd that you wrote to the Premier, you say on the first page here, "Saskatchewan, the province most equal to Manitoba in conditions and population, had in the years 1980 and 1981 a total of 160 more motor vehicle related fatalities than Manitoba." Is that 160 for each of those years, or for both years?

MR. J. MARTENS: That's the total for those two years. There were 90 in one year, and 70 in the other. The year there were 90, apparently, was the year when that busload of returning railroad workers or whoever they were crashed into somebody and burned.

MR. W. MCKENZIE: Thank you, Mr. Chairman.

MR. CHAIRMAN: Thank you, Mr. Martens.
R.N. Sharpe.

MR. R. SHARPE: Mr. Chairman, members of the committee, I know some of the members from my years with the Highway Department. I am now retired. I have been interested in highway safety, I guess, the major part of my life. My first highway job was in 1936 when we were building with horses and scrapers. More recently, our procedures were much better.

Like many people that were involved in the early days in driving, I started driving when I was eight years old on the farm. I have driven just short of 1.5 million miles not kilometres. I've had one serious accident in those years, and that one accident - I am like some of the people that have been mentioned previously, I wouldn't have been here, if I had been wearing a seat belt. The whole left-hand side of my car was removed, both doors and the outside part of the seat. If I had been in it, curtains.

I think those of you who have been around for some years possibly can remember the same thing happened to one of the world-famous golfers, Ben Hogan, years ago when he collided head-on with a Greyhound bus with the same results. He survived.

Anyway, that's just comments, so you would understand that I do have a very definite view on seat-belt legislation.

I am opposed to the compulsion aspect of it, I guess, on two grounds which are related. Approximately 40 years ago, along with many of my contemporaries, I joined the services of this country to preserve our rights to freedom of choice. I still feel very strongly that, unless there is an overriding reason in terms of the good of others, I want the freedom of choice. I don't believe there is any evidence that seat belts, except in a very odd incidence, affect other people besides the person who is or is not wearing one.

The other reason is related to that, because all of the statistics that I've been able to find and look at do not support the idea that legislation reduces accidents or injuries or fatalities. Seat belts, I won't argue with that in some cases, many cases perhaps,

they do minimize injury and are beneficial, but legislation in five other provinces in Canada have not worked.

The theory, of course, of compulsory legislation is very attractive and sounds very plausible. I certainly sympathize with the medical people, doctors who see at first hand what happens when there is an automobile accident. They are right in the thick of it. If statistics would support that they would reduce injuries from an overall standpoint, I think I might be changing my objections to some degree. I still would prefer to have my own choice, even though there was some risk. Life is a risk. Everything about it is a risk, and I don't think the government needs to take all the risk out of living.

I have copies of the Bureau of Statistics reports from 1961 to 1976, and copies of Transport Canada data from 1977 to '80. In 1977, Transport Canada took over the compilation of highway traffic statistics from the old Bureau of Statistics.

—(Interjection) — I'll wait for a minute. It wouldn't bother me, but I guess it bothers some of the rest of the people. I just close it out.

A MEMBER: You didn't arrange for the band to accompany your presentation?

MR. R. SHARPE: Well I would rather not comment on that.

MR. CHAIRMAN: Carry on.

MR. R. SHARPE: Okay. Statistics show that the fatality rate in motor vehicle accidents reached the highest level in 1964, when the rate reached 5.4 deaths per 100 million kilometres. Now that particular rate was adjusted, because in those days the rates were calculated for 100 million miles rather than kilometres. But the one I'm quoting is the rate per 100 million kilometres.

Now it has been claimed that seat belt legislation reduced motor vehicle accidents by one-third within the first year. The fact is there's been no such reduction in any of the five provinces who already have legislation. In fact, one of the provinces experienced a 12 percent increase in fatality rates in the first year that they had the seat belt legislation.

In the four-year period, from December 1976 to December 31st, 1980, which is the four years that the Transport Canada has been producing the statistics, and the later ones are not published yet, Manitoba without seat belt legislation showed the highest percentage drop in fatalities of any of the ten Canadian provinces. Manitoba's rate dropped to 0.9 per 100 million kilometres, that's over the four year period; Ontario 0.2; Quebec 0.4; Saskatchewan 0.4; Alberta 0.4; and British Columbia had no drop. 1980, the last year of the available statistics, Manitoba had the second lowest fatality rate in Canada per 100 million vehicle miles, and the lowest rate in Canada, per 100 thousand registered vehicles.

I don't know, but I don't think those statistics show any real need for a legislation on seat belts. I believe that everyone appearing before this committee has been concerned with the same thing - that is the reduction of deaths, and injuries from motor vehicle accidents. The difference lies in the perception of the best solution.

The weakness of seat belt legislation, as a solution to the problem, lies in the fact that a relatively high percentage of drivers involved in fatal accidents are either drunk or impaired, or are drivers without a valid licence.

I'd like to point out that the 1981 report, which Mr. Marten referred to, that is the Department of Highways statistics, show that there was 81 drivers involved in fatal accidents in Manitoba that did not have a valid drivers licence. There was something over, I think it was 800 or 900 of them involved in injury accidents. Now this is a shocking statistic.

If drivers had their licence taken away, or have never had one, surely there's been some laxity in policing their actions and not let them go out and kill more people. There was 242 drivers involved in fatal accidents that year, and out of that 242, there was this 81 that had no driver's licence and 37 were impaired. I strongly suspect that the impaired are only those which they could prove, that there was a lot more of them actually were.

I don't believe that the impaired or the unlicensed drivers are any more likely to obey seat belt legislation than they are the existing laws which they are obviously ignoring. I think the majority of the fatal accidents, in terms of injuries are unlikely to be very much affected by compulsory legislation. Rather than waste time and effort on seat belt legislation, which has proved to be ineffective in other provinces, this government should show some initiative in the field of accident prevention.

There's an old saying from a way back that an ounce of prevention is worth a pound of cure. I'm sure some of you have heard that expression. After some 40 years in the highway field, I believe that prevention of accidents can save more lives and prevent more injuries than any seat belt legislation.

I'd like to comment on that, that there is a lady down in the States - I should mention perhaps that I have been a member of the Highway Research Committee, now the Transportation Research Board of the United States, I've been a member of that since 1957, and I'm still a member, even though I'm retired. This lady actually has been involved in the highway safety for probably some 20-odd years. She's interested in every phase, including injury prevention and injury treatment, and also in the environmental factors or physical factors which involve traffic accidents. Her conclusion after the years she's been very active in this field, she says, "We should be engineering the environment, not engineering behavior." She believes that the answer to all of the operation is to remove as many as possible of the factors which cause accidents, and that includes driver education. This is one of the things that I believe we have the edge on in Manitoba, because from what I've heard and seen, I think our defensive driving course in Manitoba is probably the best in Canada, if not in North America. I think the effort should continue to retain our position and improve it, because there's lots of room for improvement.

The statistics, I don't know whether you have the distribution of these statistics or not, they were xeroxed back at the beginning of the hearings and you probably have them. I also drew up graphs showing the rate of change in the fatality rates in Canada and also in each of the provinces. One of the things that is very noticeable, and I'm not sure what the reason is, unless it's that

seat belts promote some over-confidence in drivers, but since the seat belt legislation came in, the rate of reduction in fatalities has slowed down. Between the high of 5.4 in 1964, and the lowest recorded was 1976, there has been almost a plateau reached, and the drop is very insignificant. And what drop there is, I think can be just as logically credited to the reduction in speed limits which happened about the same time and to the energy crisis which has caused a lot of drivers to slow down just to save gasoline. I don't think the seat belt legislation has accomplished anything.

Manitoba and Ontario in the graphical presentation have had the lowest fatality rate since before 1960. Some years Ontario was lowest, some years Manitoba was lowest, but the two are parallel and - I don't think you can see it from here, you may have those graphs too, but the average for Canada is the black line and the other two are below it, and this has been consistent for 20 years.

Although doctors are definitely sincere in their belief that seat belts can prevent some of this carnage, the statistics would show that it's not working all that well. I am still of the opinion that some of the other speakers have said that education is the best hope for removing any of the injuries that are removable.

I don't think this legislation will do anything in the case of drunk, impaired drivers or unlicensed drivers. I think it is very unlikely that they will pay the slightest bit of attention to that any more than they have to other legislation. However, I think the government could introduce legislation which, if enforced strenuously, could reduce the number of drunken drivers on our highways. I hope that the Federal Government proceeds with their plans to make it legal to take blood samples, so that you can enforce some control of that type of driving.

I have some other information, but I think basically it probably repeats other presentations. I can see no real benefit to inflicting other duplication on the committee.

I might mention that, years ago, I did ride a motorcycle in the years before we had very many paved highways. I did most of my riding on mud and gravel. I did not wear a helmet, because there weren't any. But I did ride a number of miles throughout Manitoba, out to Brandon, Rivers, Hamiota, all the western places mostly. Listening to the motorcyclists, I came to the conclusion that if I was riding a motorcycle today I would not wear a helmet in general. I would wear one at certain times, when I was perhaps driving in particular conditions.

I can remember driving on a hot summer day, and I had problems even without the helmet. The sun beats down on your head. Inside of a helmet, it would just be murder. That's only a personal observation, because it struck me in listening to the motorcyclists, although I haven't driven one for a long time, I still used to enjoy riding around the country.

The only other thing I would like to comment on, Mr. Chairman, is the fact that I am very disappointed that the government, in particular the Premier, has indicated in the press and on TV that he is not going to allow a free vote on this particular legislation. I think this particular government, the NDP Party, has indicated over the years that they believe in freedom of the individual, freedom of choice. In this particular event, they are removing the freedom of choice from their own members in the Legislature. I think this is wrong.

Premier Margaret Thatcher in Great Britain had a controversial piece of legislation in the Capital Punishment Bill over there. In spite of the fact that she's known as the Iron Lady, she gave her members the right to free expression on that bill. I think this is what should be done with the seat belt legislation in Manitoba.

That's all, Mr. Chairman.

MR. CHAIRMAN: Thank you, Mr. Sharpe.
Mr. Orchard.

MR. D. ORCHARD: Thank you, Mr. Chairman. Mr. Sharpe, I don't have copies of those graphs that you presented. I wonder if you might leave those with the Clerk so they can be photostated and part of the records. I can see that those are a pretty accurate compilation of some of the statistics.

MR. R. SHARPE: Unfortunately, I used colour and it doesn't print very well, but I think it will show up eventually anyway.

MR. D. ORCHARD: As long as the various colours are identified in print as well.

MR. R. SHARPE: They're not really, but if there is a problem I'll modify them so they can. But maybe, try them, and see how they look.

MR. D. ORCHARD: Sure. Because those statistics seem to destroy or not lend the weight of argument that the proponents of seat belt legislation would have us believe is there to justify this compulsory safety measure.

Now, Mr. Sharpe, you made an interesting case, and I have to admit that it's the first time it's occurred to me, when you pulled statistics from 1981 which indicated that 81 drivers involved in fatal accidents were driving without valid licences, so they were driving illegally. Then my notes aren't good from there on. In that same year, were there also 37 people impaired?

MR. R. SHARPE: Drunk or impaired. It's in the same report.

MR. D. ORCHARD: Okay, now were the 81 drivers also some of the 37 impaired, or could you add those two figures together?

MR. R. SHARPE: It doesn't say that in the report, but I would strongly suspect that some of them are duplicates. I purposely avoided adding them together for that reason.

MR. D. ORCHARD: Okay, but at a minimum if we go to the statistics provided by the Minister for 1981, we had 168 fatal accidents in that year. Now, if 81 . . .

MR. R. SHARPE: Well, there were 242 drivers involved in those fatal accidents. In other words, some of the accidents involved two drivers.

MR. D. ORCHARD: I appreciate that. So that's why I come right down to the fact that you have got to go by the number of fatal accidents, not the number of

drivers involved, because it might have been a three-car pile-up.

So if you go with the number of accident experiences, almost one-half of those were caused by drivers that are flouting current law that's in place. Here we are passing another law to try to band-aid measure safety in the province when 50 percent of the accidents are a result of drivers flouting a very important law, one that has removed their right to drive on the highways. They shouldn't be there.

Now, the point you made was that you suspect fully that if they are breaking the law in terms of driving without a licence or impaired or a combination thereof, they're certainly not going to wear their seat belts. I agree. I have always made that point, but I have never had anybody, even when I was Highways Minister, dig out that statistic for me. I think that has to be a very important statistic for any government to consider when they're approaching the stage of passing legislation which, statistically, they can't really make a solid case for the benefit of it. I want to thank you very much for bringing up that statistic; that one bears further investigation in other years.

Mr. Sharpe, in developing your graphs - well, no, I won't deal with that, I'll look at the graphs afterwards. Can I ask you whether your prime objection to the compulsory aspect of this legislation is No. 1, it is not statistically valid that it's going to be of great benefit from comparisons with provinces with seat belt legislation; and No. 2, that there are actual circumstances in which the seat belt could enhance your injury or cause your death; and No. 3, that this is a personal safety measure, therefore, it shouldn't be legislated and the individual's right to choose should remain foremost in any legislator's mind?

MR. R. SHARPE: Basically, that's correct, Mr. Orchard. I strongly suspect that there are more cases where the seat belts have a detrimental effect, but there has never been an in-depth investigation or a collection of data showing where seat belts have proved to be detrimental. There are incidents where it has been reported, but practically all of the effort has been by groups trying to prove that seat belts are effective. There has never been a counter-effort to find out what the actual basic percentages are of both sides of the story.

MR. D. ORCHARD: That begs the observation and the question, Mr. Sharpe, do you hold maybe the suspicion - and I don't use that word negatively - that in provinces that have enacted seat belt legislation, it would not be in their best interest to develop statistics to show where seat belts have maimed or killed people? Hence, we have a seeming lack of statistical evidence as to the effectiveness of seat belts as a safety measure in provinces that have enacted the legislation.

MR. R. SHARPE: I think I would suspect more benign neglect than I would intentional covering up of those statistics. I can't really believe that people are not really interested in that problem but, if you have a particular interest, you're looking at facts to support it, not facts the other way.

MR. D. ORCHARD: The other point that you made, Mr. Sharpe, from your graphs is that 1976 was the year

in which there was the greatest reduction in injury and fatalities statistically, and that primarily coincided with the reduction nationally of the speed limits across the country. You would attribute, rather than the accident reduction to seat-belt legislation which was coming in about the same time, but rather to the reduction in speed. You have added the further argument to that, that in general the energy crisis has slowed people up voluntarily, let alone the legislation. Thank you, Mr. Sharpe.

MR. R. SHARPE: I should have made one more comment perhaps, Mr. Chairman, I forgot about. I didn't have it written down, but I thought of it on listening to some of the other speakers more, I guess, on the first night than today.

That is to do with the child restraint. There again, it's a restriction on the freedom of choice of the various families. It again sounds very beautiful, but I had nine children. At least, my wife and I did. If we had had seat belt legislation enforced, we wouldn't have been able to go out to a picnic together. Not only the family but, I would say, at least 50 percent of the time, I had at least two of the neighbour's kids with me. I had a big station wagon. There was never any problem.

I also acted as the chauffeur for hockey teams and football teams and ambulance driver at the community centre, in which case I sometimes had as many as 14 of the bigger boys in the car with all of their equipment on the top of the wagon.

Those perhaps are minor points, but there are a number of families with more than two or three children, not high percentages anymore, but there are a number of them. At the very least, I think there should be some recognition of this in legislation to make an exemption where the number of children exceeds a certain number.

I also have some concern over when I take my grandchildren out for a ride. I have always insisted that the smaller kids are in the back seat and, preferably, standing on the floor in the back seat except on a real long trip. Because on the floor in the back seat, if there is a sudden stop, they are pushed against the back of the seat and not flipped off the seat with their head into it.

You can't really protect them against side impact. If somebody runs into the side of you, you've got a problem. The only thing I can recommend for that is the practice I have used myself for something like almost 60 years, is watch the other guy. I have avoided more accidents that way than enough. I think it is really a truism to say that the accident that doesn't happen doesn't injure anybody, doesn't kill anybody and doesn't cause any property damage.

MR. CHAIRMAN: Mr. Uskiw.

HON. S. USKIW: Mr. Chairman, I don't believe that anyone would want to put the argument forward that education isn't the key to all of these questions. I suppose the division of opinion is whether you go beyond that. That is really what this discussion is all about.

I am somewhat concerned that you're not familiar, thoroughly that is, with the bill itself in its entirety when you mention that in a large family, there is a problem.

The legislation that is before us requires that those seat belts that are in place are the ones to be in use. If you have greater numbers of people in the car than there are seat belts for, then you are not in violation of law. So it is not a constraint on numbers of people. There are other pieces of legislation that determine that. So I don't think that presents a problem.

In your statistics on number of accidents and the percentages of people involved in accidents that were impaired or the number of people that were impaired, that's merely a statistic based on reports, on evidence that has been filed somewhere, I presume.

MR. R. SHARPE: The 37 I have quoted is in your department report for 1980-81.

HON. S. USKIW: Thirty-seven people . . .

MR. R. SHARPE: Were recognized as impaired.

HON. S. USKIW: . . . were impaired, okay. Does that information tell you anything about the accident?

MR. R. SHARPE: No.

HON. S. USKIW: That's the point. Were they the cause of the accident, or were they just involved in an accident caused by other people but, having been on the scene, were charged with impaired driving? You see, that's a refinement that one must do in order to bring any value to a statistic.

MR. R. SHARPE: I think the other statistics over the years, I would suggest that the percentage of drunken drivers involved in accidents is too high to be accidental. But individual accidents, you're quite correct. I have no real detailed information on them.

HON. S. USKIW: You're quite right, Mr. Sharpe. One of the major, in fact the major problem on the road is alcohol-related but, of these 37, I would be interested to know how many of these actually caused the accident.

MR. R. SHARPE: I suppose that information should be in your department files.

HON. S. USKIW: Oh yes, I would think so. I just thought, maybe you had it.

MR. R. SHARPE: I haven't been able to get the detailed information of all of the accident reports.

HON. S. USKIW: Thank you very much.

MR. CHAIRMAN: Mrs. Oleson.

MRS. C. OLESON: Thank you, Mr. Chairman. Mr. Sharpe, I was wondering if you happen to have figures on how many drivers in Manitoba take the defensive driving course. Do you know how many?

MR. R. SHARPE: I'm afraid I don't have it. I have seen it, but I didn't mark it down, and I can't recall.

MRS. C. OLESON: No, I just wondered if you happened to know just what percentage of licensed drivers, and if you have any opinion on how they could be encouraged to take that course. It is a very good course.

MR. R. SHARPE: The only thing I can really suggest on that score is to get the Safety Council to put pressure on various organizations to support maybe their staff, their employees to take it. Maybe the government could take a look at anybody who takes a defensive driving course gets one or two merit points on their driving licence.

MRS. C. OLESON: Yes, I think that's a good idea. Thank you.

MR. W. MCKENZIE: One question, Mr. Chairman, Mr. Sharpe, do you see any problems with some of the highway designs we're getting today at intersections and that as a problem with a lot of accidents? I'm thinking of the one at Russell that was off 16 and 83 there.

MR. R. SHARPE: I would have to say that, over the last 40 years, there has been an awful lot of improvement in highway design, but there are still some very bad intersections in Manitoba. The last few years I was with the department I was in the Director of Planning and Design Section, and we made an effort to look at a number of them. I think every year we have redesigned and reconstructed some of the problem intersections. I'm afraid I would have to admit that there's still a number of them left that are less than desirable.

MR. W. MCKENZIE: Now, just for the record, I recall that Highway 1 between Elie and Winnipeg used to be a death trap and there were a number of fatal accidents. I suppose those standards are in there, or whatever, those lights, and that's been corrected. Now it's considered to be one of the safer parts of that highway.

MR. R. SHARPE: Well, the four-lane divided type of highway, whether it be freeway or just four-lane undivided, has the best accident record of any type of highway in the world. I could have mentioned that, but I think that probably is the reason that Ontario is slightly better than Manitoba. They've got more miles of four-lane divided highway.

HON. S. USKIW: Yes, now that you're on that subject, Mr. Sharpe, and knowing that you've had such great experience in the department, will you offer an opinion, or a guess, just from your memory if you like, of the difference between the four-lane No. 9 Highway to Selkirk in terms of accident ratios to the four-lane divided sections anywhere in the province?

MR. R. SHARPE: I think that there's a report on that particular highway in the files.

HON. S. USKIW: I know there is, but I can't remember the . . .

MR. R. SHARPE: My feeling is that the four-lane undivided highway is probably the most dangerous type

of highway we have in existence today. I think it's really more dangerous than a two-lane highway, because people are more inclined to take chances on the four-lane undivided, and yet there's no protection against head-on collision if somebody strays. I had made recommendations that highway be converted to a four-lane divided highway. In fact, I think you were on the Highway Committee at that time.

HON. S. USKIW: Pardon me?

MR. R. SHARPE: I think you were on the Highway Committee at that time.

HON. S. USKIW: Yes, I think that's right. How old is that study? I'm trying to recall it.

MR. R. SHARPE: Well, it has to be more than four years ago.

HON. S. USKIW: Oh yes, yes it is. Several years, I suppose.

MR. R. SHARPE: I would guess probably six or seven.

HON. S. USKIW: Just on that point, one of the other areas that we have paid a fair amount of attention to, but in my opinion not sufficient is building highways and structures in such a way that modify potential hazard, or their hazardous situation if you like, or position on the highway, thinking in terms of abutments, light standards and things of that nature, that even if one strays off the highway, if one could minimize the number of structures along the side that that in itself would be a major factor in safety.

MR. R. SHARPE: Yes, that is one of the conclusions that the committee I worked with at the Transportation Research Board in Washington came to, is that the roadside obstacles are one of the problems.

In connection with that, I've always been fairly vocally opposed to too many trees on major highways. They look lovely on residential streets, but a tree is actually more dangerous than a hydro pole because green wood won't splinter and break and a hydro pole will. It's a Hobson's choice, but if you hit something don't hit a tree.

MR. CHAIRMAN: Thank you, Mr. Sharpe.
Dr. Richard Stanwick.

DR. R. STANWICK: Mr. Chairman, and the members of the Legislative Assembly.

I would like to speak in favour of infant and child car restraints. One of my, I wouldn't call it an exhibit, I noticed one of the motorcycle helmets, an anti-helmet demonstrator brought a helmet along, and since I'm pushing children, I thought it would be rather cute to bring a child along, however my niece opted for the beach rather than coming down to the committee meeting. I was wondering if the committee would allow a poster to be shown to demonstrate why children are different than adults without obstructing the Press.

The major thing about children, if you look at a two year old, they've basically got an adult-sized head, so

that any picture that scales a child's head down less than that is actually disproportioned. Kids do look peculiar, they've got a rather thin weakly-muscled neck, so they have a great tendency to be prone to whiplash. In addition, do you notice that they all tend to have a rather enlarged abdomen? It looks like they all could go on diets, and that's of course due to the curvature of their spine. They have a high centre of gravity. Their bone structure is rather weak and they have relatively short legs. So that you end up with a missile which is essentially top heavy. As a result children need special protection.

What I would again like to speak in favour of is mandatory infant and child restraints. It's rather interesting that just in the last few days the public was horrified by that train collision in France where four students died, and it made the Journal, the National News, and front page headlines. Yet if four teenagers, as was the case happened last year, were severely injured and two killed in an automobile accident, it made Page 3 of the Winnipeg Free Press, which is better than most, usually it's buried on Page 13. So it's rather interesting that people have become rather blasé about the figures reported about infant and child loss.

The other glamorous bit is, of course, the issue of the child abuse for the very young child. You get that sense of outrage by the public taking advantage of these poor young children. Yet when you get a report of a child dying in an automobile accident, rarely do you get that same sort of outrage. Yet there are devices present that could reduce the carnage by at least 50 percent, and that is the government-approved infant and child car seats.

In fact, perhaps, as I've suggested to the Attorney-General, we might in fact even consider without the legislation that the failure to use these devices, which have been proven to cut down injury and death, is a form of child abuse because as The Child Welfare Act reads, "Abuse means acts of commission or omission on that part of the parent, or person, in whose charge a child is, but which results in injury to the child, but is not necessarily restricted to physical beating, physical assault, sexual abuse, but rather . . ." and I emphasize this " . . . failure to provide reasonable protection from harm for the child." So again we have devices that are available. They have been dynamically tested by the Federal Government and they work.

Unfortunately, 90 percent of parents don't use these devices. I have numerous studies documenting the compliance. Even when the physicians have given the seats away, you get a compliance rate of approximately 13 percent. In legislation you have the wonderful ability of doing more in one bill than all the pediatricians and general practitioners in this province as far as getting parents to use these devices and definitely reducing injury and harm.

As a pediatrician who sits on the Pediatric Death Review Committee for the College of Physicians and Surgeons, every three months I get an opportunity to look at the needless carnage that occurs as a result of children and teenagers being involved in automobile accidents, and some of really frightening statistics come out. Everybody's throwing them around, but one that is often cited and has, as somebody who sees babies delivered into the world, knowing that one in 60, if

current trends continue, will at one point die as a result of an automobile accident, and despite the claims of other people that though you can be a safe driver, the odds are that one in three people will be involved in a serious automobile accident at some point in their lifetime. So that despite being fairly careful, there's still a large proportion of the population that will be at risk of being in an automobile accident.

Again I'm really going to try to focus just on children. The major problem as I pointed out, with kids being top heavy, 60 to 80 percent of the injuries occur to the head and neck because they're basically missiles. As somebody who works a regular shift in the emergency department, and as the neurosurgeons have already testified, those are the worst injuries to treat. Medically that is an area which we're still making great strides in. I salute my neurosurgical colleagues, but on the other hand we can do a lot better job treating a broken leg or perhaps a fractured pelvis than we are putting a broken head together. We're still dealing with a humpty-dumpty type syndrome.

People have commented about the issue of seat belts and child restraints causing injury. Yes, they do. I have seen some of the injuries, bruises and an occasional fracture. But as somebody who receives these patients at the door of the emergency room, if a child is restrained, I know where those injuries have occurred. I can start looking for possible bruise to the spleen. A child that's loose bounces around the car. I don't know where he hit and how hard he hit, so it's a diagnostic dilemma where to start. So you may pick up the broken leg; you may pick up the fractured skull, but again you may miss that ruptured spleen when the child went into the armrest.

So again though, with great respect to the previous speaker, there are numerous papers in the medical literature and in the accident research group who in fact can provide you with copies, telling you the type of injuries associated with seat belts. So that, again, I know what to look for. It is a big mystery when somebody comes in who has bounced around the inside of the car.

I acknowledge that if the collision is great enough, this sort of injury can occur. But the really interesting thing is if you look at where accidents occur. As Mr. Wiley, who is the Safety Manager for Autopac, cited on television yesterday in the safety series, the figures hold true for Manitoba; that over half of accidents occur within five miles of home, and over 80 percent within 30 miles of home. Since the majority of people in this province live in an urban environment, that means at speeds under 30 miles an hour. So we are dealing with situations in which seat belts have been proven to be very effective.

I will be the first to concede that if you're going fast enough, it doesn't matter what the heck you're wearing. It is not going to make any difference, but the majority of the accidents we're dealing with are within the city. In an average week, the accidents coming into the Children's Emergency are from the city, and they are low-speed collisions. But these low-speed collisions can be fatal, because kids are weakly structured. They are top heavy; they get the head injuries. They are the ones that really bear the brunt.

The other thing that really needs to be emphasized, and people kept saying about safe drivers and there

are certain things you can learn about defensive drivers, how to swerve, how to avoid. But the other figure that they seem to ignore is that up to a quarter of accidents that involve children in automobiles occur in non-crash situations. That very swerve may send that child out the window if he's unrestrained.

We have had situations - in fact, there was one I presented to both sides of the House in February, a situation where a mother lost control. She regained control of the car and just slid into the ditch. The child unfortunately was ejected and fell under the wheels of the car. There was no damage to that car in the Autopac claim, yet she lost her baby. There is defensive, careful driving.

Kids bounce around and move around; they go out windows. We are dealing with a different population. The youngster does not have the ability to appreciate the fact that a car is a moving vehicle, often very rapidly, and that if they go out the window they could hurt themselves, or if they play with that knob on the side of the door it can open. No matter how careful a parent can be, these things do happen.

Now the other major concern, of course, is the very young infant. This is some area where people haven't been doing their homework and keeping their statistics up until recently. It turns out that the baby under six months of age is the one that has the greatest risk of dying in an automobile accident in childhood. There is a very simple reason. They are carried in the most dangerous position of all, on mother's lap in the front seat, passenger side. Some of the cynics in the industry call it, using your baby as an air bag, because basically that's what happens.

The forces involved in the collision are absolutely phenomenal, as the members I'm sure have been informed of. A quick analogy is for each 10 miles per hour of speed, it's about the equivalent of one storey. So if one goes out a window at three storeys, that's about the equivalent of a 30-mile per hour crash. This is a rough and dirty analogy, and you're hitting, say, a concrete wall.

Now, if you are carrying a baby on your lap and that baby weighs on average, say, 20 pounds, and you're doing 30 miles per hour, that baby hits the dashboard with a force of approximately 600 pounds. That may kill the baby; it may not. But what really does the baby in is the mother following, say on average, a 100-pound mother times 30 miles per hour; that's 3,000 pounds of force, a ton-and-a-half. It is not surprising not many babies make it.

The other tragic situation, and this is what really got me interested in the whole area of safety, is seeing a baby on the way to her christening being placed carefully on the front seat so they wouldn't crush the dress. The father avoided an accident; he slammed on the brakes. A fellow went through a red light. He was defensive driving, but in slamming on the brakes that child continued forward at 30 miles per hour right into the radio knobs. I have seen three children with radio knobs in their head. Two of them were fatal. Again, the car wasn't injured, and two radio knobs lost, not a great Autopac claim, but again a situation where the children, again being top-heavy, go headfirst, the worst area, into the inside of the car.

If you look at the manufacturer's standards, dashboards are designed for adults. All those wonderful

knobs do not take into consideration children at all. If you look hard at height, that if you go into the dashboard, you won't run into them, but children will. They don't vote, so again the auto manufacturers feel they won't influence the Federal Government.

So we are dealing with a situation where children are prone to injury in the worst possible areas, the head and the neck. The real enigma is that often these tragedies occur in non-crash situations. But we do know that infant and child car seats do reduce the carnage by 50 percent.

I noticed that one of the speakers cited Saskatchewan. Well, when they enacted their infant and child car seat law, in the 18 months following - I don't have any more recent statistics - they did not have a single child die in an infant or child car seat. They have got the equivalent of a rogue's gallery of mangled car seats, cracked and split and bent, but the kids all survived. So these devices do work in practical situations. The Saskatchewan Traffic Safety Board have done a great service by keeping these devices to show the public that children can survive, and they can survive quite nicely.

One of the arguments that I keep hearing is, of course, well, I never used it with my kids. Of course, one of the important things is that seat belts, and particularly for children, is a relatively new idea. It wasn't until 1960 that you got your first study to show that maybe we should think about packaging children differently. It wasn't until the early '70s that we got effective devices. Then the public became quite cynical because, in fact, there were some devices which weren't safe, which is even one of the worst things that can happen in prevention. You preach it, and then you give an individual a device that in fact turns out to be dangerous. So the public has a right to be fairly skeptical, or at least developed a bit of skepticism because of the devices that were first put on the market. So that again we are dealing with a situation that is relatively new.

One of the issues that was raised by the first speaker who presented to this committee, and I'm sure you all remember the speech by Mr. Green about the issue of, well, how can you ever get a four-year-old to sit in a seat and keep the lap belt on? It's really interesting that a number of American scientists have decided to look at behaviour in cars. This fellow, Kristofferson (phonetic) didn't use scientific investigation, he used the parents to rate children's behaviour.

Using a research assistant to take down the parents' impressions of the behaviour, children who are unrestrained in cars are in fact distractions and misbehaving over 90 percent of the time, as judged by the parents. When they used a group of parents who used seat belts rating their children's behaviour, children misbehaved 5 percent of the time. When they convinced parents who didn't restrain their child previously to put them in belts, behaviour miraculously rose to over 90 percent.

I have personally seen a number of circumstances in the children's casualty where parents have gone through red lights while they're slapping their kid. "Get 'ahem'" - and the next thing they know, they're in an accident. I mean, a kid bouncing around, pulling the visor down, knocking your rearview, pulling on the gear shift, I mean, how can one drive? I mean, you'd think the parents would just lock - parents often talk, geez,

I would like to lock the little "ahem" up, but in fact they have an opportunity of safely package them, so that they don't disrupt the driver. I mean, everybody keeps talking about how they want to avoid collisions. One of the best ways is to keep kids in a safety device and keep them so they won't be distracted.

One of the nice things about the infant and child car seats, and now with the additional booster seats, kids can see. They have a panoramic view. It's the best view in the whole house; that is one of the things.

As far as the other issue about compliance goes is if children start in car seats right from Day One they become unhappy when they're not in car seats. As I say using anecdotes from practice, and personal experience, that kids who are used to infant and child car restraints and booster seats get very unhappy when they're not in them. They ask for them.

Occasionally you'll the two year old testing but again you ask a mother - would you allow him to turn on the elements of the stove, I mean would you allow them to play with a lawnmower? They say - well of course not. You see but car seats are a safety feature. You've got to lay down the law. If it's important enough, you just set up a couple of scenarios where you start on the way to somewhere favorite for the child, the child undoes his belt, you say put it up or we don't go anywhere. They refuse and you say - okay we're going home, and you go home. It's amazing how quickly the two-year-olds learn whose the boss.

Again parents would not knuckle under for the lawnmower, and they wouldn't knuckle under for playing with matches, and they shouldn't knuckle for infant and child car restraints and it works.

Now there are a few other issues that seem to come up and this actually came up when I presented this to my colleagues, and you think a bunch of doctors sitting around on rounds, one of the, I won't mention the profession, but one of the most lucrative pediatric subspecialists put her hand up and said, you know those things cost money. I said, yes. A few people, you know, snickered of course that this person would ruin it in five minutes what those car seats cost but you put it in perspective. A child car seat costs equivalent of approximately two fill-ups of gas. A deluxe model of the child car seat costs you less than it would cost you to tune your car up in the spring or the fall. Or for perhaps a set of fancy wheel covers or a set of new floor mats.

The problem is that I guess some people still fall below that margin where they can see that as a necessity. Fortunately do have some groups in town like the Jaycettes, and it's a bit of a commercial, but they do rent infant carriers to parents at a nominal fee. It's just over a dollar a month. They get a deposit back. But I've spoken to them and they're concerned because they've got a waiting list already and they only have a limited number of volunteers. They could see perhaps serving to assist the legislators as much as they possibly can because they totally endorse the idea but they have a terrible feeling they're just going to be swamped.

Now there are other places where they've instituted hospital-based programs where the children go home in the infant car seats. Again, loaner programs have been set up at St. Luke's in North Dakota, and there are many places in the United States where, Vermont for example, all the hospitals provide. They use a

program called SEAT - what else - but where they've co-ordinated the hospitals and all the children go home in infant car seats. But the major problem is that the car seats are usually only good to about nine to 12 months of age, and then you've got to graduate to a child car seat. Those are more expensive than infant car seats and there are no voluntary agencies available.

Now when I spoke to both sides of the House I did mention that I was looking at different avenues as to sort of soften the blow because I can appreciate, my primary practice is in the Children's Clinic right in the core area. That would be a fairly substantial burden. Now perhaps for some we could alleviate it but there are a lot of people who aren't that well off.

Ironically, I'm sure that some of our members who know Mr. Lalonde, or have had the opportunity to speak with him, knew at one time he was our Health Minister, and wrote what was considered a very enlightened treatise on health called - A New Perspective on the Health of Canadians. In his book he actually says in Chapter 12, for improving the health he said one of the things would be for the Federal Government to do would be "Assistance to the provinces in promoting the acceptance by the public of regulations passed pursuant to provincial legislation making compulsory the wearing of seat belts in motor vehicles."

I wrote to him and said - gee, you know, that's a really nice gesture. Children, to comply with the law, will have to be packaged in devices costing \$60 to \$90 which can be a rather considerable outlay. However he has a unique opportunity, as Minister of Finance to, in fact enact a recommendation he made. Well, Mr. Lalonde I guess when one changes portfolio, as not being somebody in politics, has totally reversed his stance and said that he feels that this would set a potentially dangerous precedent in that, he commends the idea however, the tax deduction in respect to such expenses, it must be recognized that to do so would provide a precedent for other interests to follow. In other words people who have devices that can reduce injury, and death by 50 percent might also be clamoring for a tax deduction.

It's rather ironic, as Health he was quite concerned what happens to his fellow Canadians but as Finance Minister he seems to be a little more cynical about reducing this death and injury. So what he does, of course, as I'm sure anybody in provincial politics knows, he turns Health back to the province and said that perhaps the incentive for using child restraint devices would be, in fact, the incentive provided by the provinces "Punishment by law rather than a tax incentive." So unfortunately he's put the ball right back into all the provinces' court. I'm sure this is a familiar game with you but I was rather disappointed in somebody who has preached assistance to the provinces. — (Interjection) — No thanks, I think I can last. — (Interjection) — Well, not being familiar I was very disappointed in Mr. Lalonde.

Now there are voluntary groups in this city who I think may respond to the challenge in part. But there has been scenerios, some of them private health insurance plans, in which a physician writes a prescription for an infant, or a child car restraint, that's considered the equivalent of our pharmacare deduction. I would be glad, I'd be willing to take on a case of writers cramp if, in fact, by just writing your prescription

I could be insured that the parents in my practice, and anybody else who would be willing to come forward, would ask for it and I would gladly fill that sort of prescription. And that, in fact, it could be deducted from, for example, pharmacare expenses.

Now the major benefit of that is that everybody would be eligible. The only problem is that that's going to cost money. The question is - what price do we put on a child's head? I guess that's what it partially boils down to. So as I say I've tried a little bit, in this small humble way, to see if I can move our Federal Ministers, but I've written to Madame Begin who may have a softer spot for children, but I don't hold out too much promise on that and perhaps appeal to you to find some sort of innovative means of softening the financial blow of these. In fact, it could serve as a very positive incentive showing you as the government that supports us wants to protect its children by putting this into place.

There are other groups, there are other areas, of course, where there is concern and that is the day care groups. I've spoken to a number of them and they have some concerns about particular legislation.

It's interesting, just last year in Toronto, the Etobicoke School Division, which is the richest, as you know, in Toronto put seat belts in all their vans and buses. Again it went through without any difficulty. The day care people are in a rather different position where they're actually taking money from people to take care of their children, and if they're not transporting them properly they run a great risk. Some of them were very sensitive to the needs of the children. Others of them I guess were in it a little bit more from a business sense, and found it impractical, and said they'd have to cut down on the number of trips.

But again most vehicles, if they've got a seating capacity for 27, provide 27 belts, and I imagine that the legislators would perhaps consult with their experts as to which would be the best way to mass transport these children. I think that again some innovation is going to be required. I certainly don't want to put day care people out of business. It's terrific what they do but it's just that they're transporting children not sardines and you just don't pack them in.

I also believe that the Highway Traffic Act actually specifies the number people allowed per vehicle, so that in some ways they may in fact be breaching the law already if they pack them in too tight.

But it's certainly an area of concern, and one that again I don't have any ready answers but the potential for a disaster, should they be excluded, if again somebody, a drunk hits a minibus. I actually had the opportunity of seeing a 5 mph collision with a Miniskool bus, and the waiting room was filled with 18 screaming two year olds. It was enough to give you an Exedrin headache No. 107. And fortunately it was 5 mph but there were scrapes and bumps and bruises.

There have been studies that have fatalities with a lower rate of collision so it's a major concern. I'm not sure whether it's been adequately addressed in the bill but certainly again as legislators perhaps you can see some way of addressing that particular issue.

I have one more point, without belabouring, and it would be the issue of exemptions. This was raised by, I think, a number of people - what do you do when you're hauling your grandson around? You don't have

the car seat, because some of them do use a tether bolt. You have to unclip it, and unless you have a bolt in the back of your car, you can't really move the seat from one car to the other. Some grandparents do do that. They just get a bolt put in the back of their car and when they are transporting their niece, nephew, grandson, granddaughter, they just take the seat and just clip it back into their car.

Alternatively what Saskatchewan has done, they obviously anticipated these sorts of exemptions, that for the child who is normally in a car seat; i.e., over 12 months of age, if you're going to package them - and I agreed with the previous speaker that the best place is in the back seat, but it's in the middle of the back seat with a lap belt on. It is not perfect, but it's a lot safer than standing up, because again with a swerve you don't always get hit dead on. The possibility of being fired out the window is also very likely again, plus the child can be a distraction.

So again, the Saskatchewan model of belting the kid up - I mean again, what happens if you're taking the children to the pool and you have got three-year-olds which technically might or might not fit into the criteria. There again, by having some reasonable exemptions, that if it's not your car and you are transporting somebody . . . the situation is drawn, say, if you're taking a child to hospital, can you imagine being stopped because you don't have the child belted in properly, or you don't have him in a car seat?

An infant seat, those are a lot more portable, particularly if you just buy the plain old infant seat. It's a great way to bundle the kid up before you put them in the car in the wintertime. You bundle them up in the car seat, and then you just put the belt through. It's very easy. A lot of the times you transfer the baby with the car seat. That's much less of a problem.

It's that older age group, I think, is going to cause a little bit of problems. I think again, as gleaned from Saskatchewan's experience, let them make the mistakes. This one, I think, they scored okay on by picking the middle of the back seat with a lap belt.

The other issue, in having spoken to a few, the last one is the law enforcement people. One of the things they don't like about laws particularly is that again you are just penalizing people. Tennessee has one of, I think, the most enlightened approaches. Their highway patrol, the equivalent to our RCMP and perhaps even our city police - what they do in Tennessee if they stop somebody who is carrying an infant inappropriately or a child who should be in a car seat, they have one in their trunk. What they do is they issue a citation along with the car seat. So they put the kid in the seat, properly strap him in, and give the parents a citation. The parents have 14 days to appear at a magistrate with proof that they have purchased a baby seat or a car seat, and then the fine is waived. The police think it's great, because they are doing something positive, because 99 percent of people go ahead and buy the seats, and they are not being seen as the heavies. So that for children, in particular, it's a great P.R. move on their part, and they heartily endorse this sort of concept, so again they can be educators.

Now just a last word on education, I totally endorse the education, but it's got to be coupled with action. In this case, I think, mandatory action might help. It is interesting that the previous speaker mentioned Britain.

Actually, I cite Britain as an example, because the whole country has to use seat belts. It was Mrs. Thatcher who brought it in, and she didn't allow a free vote. It was the Conservatives that brought in seat belts in Britain, and they should be taking full credit for it. It wasn't a free vote, as it was in capital punishment. So that, in fact, we use Britain as an example or a whole country like Australia who has gone to seat belts; where health in that respect is a federal issue, rather than provincial. I ended up on Britain, but in a slightly different light.

I think that I have just about said enough, and would invite any questions if the distinguished panel members have any.

MR. CHAIRMAN: Thank you, Dr. Stanwick.
Ms. Phillips.

MS. M. PHILLIPS: Thank you, Dr. Stanwick. I thoroughly agree with your analysis, both about child's behaviour, their physique, and the need to have them buckled up, and certainly parents' responsibility for keeping children safe in those situations.

I was wondering if you were aware that in our Community Child Day Care Standards Act, we have a section which deals with transportation of day care children requiring that they be in appropriate age-related restraints.

DR. R. STANWICK: That's interesting. I spoke to, I guess, the west of the river day care groups and nobody mentioned that when I gave my presentation.

MS. M. PHILLIPS: That particular act covers transportation for day care centres. Of course, there's children being transported from Sunday schools, etc., etc., that wouldn't be covered by this legislation. I take it you're suggesting that that's specifically added.

DR. R. STANWICK: Some people would say because that's an exemption they'd feel very uncomfortable perhaps transporting children to a picnic. Again, that if they are properly belted in, again preferably in the back seat, that it's not as good as perhaps the infant or child car seat, but again there are lots of test situations they've used - anthropomorphic dummies exactly weighted like the children. They may bloody their noses on their knees, which wouldn't happen in a car seat, but again I can treat a bloody nose I'm sure as most of the committee members can. It really doesn't need much medical expertise. The bruises on the pelvis, again, children recover quickly. You recover a lot quicker from perhaps a bruised pelvis than a brain contusion.

MR. CHAIRMAN: Mr. Orchard.

MR. D. ORCHARD: Dr. Stanwick, you had some concerns about the day care transportation and children's transportation in general. Now, do you see a problem in the legislation where it specifies that all children under the age of five must use a child restraint system. Seat belts are not theoretically legal according to the writing of the legislation.

Now, you've addressed that, but I would ask the question then that if children, say at the age of three

and four, at which age some go to day care centres, would you see the necessity to have this child restraint legislation include the requirement of all children using a child restraint system form and not seat belts?

DR. R. STANWICK: Are you saying in day care scenarios?

MR. D. ORCHARD: Or even a function of a day care centre where they're going out to the zoo?

DR. R. STANWICK: Again, I think this is an area where perhaps you might be better as far as picking the tradeoffs. Ideally, one would like to see all children transported in infant or child car seats. Up to the age of five, it may necessitate the use of what's called booster seats, which allow the child to sit up high and that they can actually wear the lap belt as well as the belt across the hips.

Which groups you exempt, I think is going to be something that perhaps, as legislators, you can decide which would impose the least economic hardship. There's always pros and cons for anything. There's no sweeping mandate that all children at all times will be in car seats isn't, I think, realistic. There are situations where again an adequately anchored lap belt will reduce injuries substantially. It won't be as effective, but again I'm not sure whether in fact we could ever expect all the public at all times to have their kids in these seats. It is desirable most of the time the children spend in travel with their parents. In day care scenarios, I guess five days a week - that would be what 10 trips times say 50 - that's 500 trips in the vehicles. I'm not sure whether in fact the day care people would take the car seat that's owned by the parents and put it in their own vehicle. I'm not sure, not being an expert in the dynamics or the makeup of a van, whether in fact that would even be feasible. Again, one has to look at working within the limitations of the system. I certainly wouldn't want to again do away with day care, but rather look for some sort of reasonable compromise, and lap belts do work for the older children.

The transport of the child under 12 months, that again you can use the infant seat and you hook it through the belt, and again the child is rearward facing, and that usually alleviates that situation. It's a gray area. I don't think there's any hard and fast rules. I would prefer to have the child restrained in some fashion, rather than saying, well, it's no good and we can't make it work.

MR. D. ORCHARD: Children, by the time they attain the age of five, vary greatly in size. The United States have quite a variety of child restraint legislation. Some states are three years old, some are less than four years old and less than 40 pounds, etc. etc. Do you believe that if the government proceeds with child restraint requirement, as required in the act, that the age of five years should be amended to reflect physical differences in children at the age of five?

DR. R. STANWICK: In fact, the Traffic Safety Committee asked me to consult of their safety brochure that they're preparing as part of the regulations. Now, this is one part where I think that some of the cutoffs that have

been suggested, for example, for infant restraints, they say 20 pounds. The trouble is that 50 percent of the population before nine months of age weigh more than that and yet they really need the protection of a rearward facing one because their head and their neck isn't strong enough. So that again, with the regulations, part of it should take into consideration the neuro-muscular development of the child. Preferably, you'd say around 20 pounds and preferably not before 12 months of age; so again, if a child is 23 pounds they are still relatively protected. The same thing goes for the child restraint system, where in fact if you use a requirement by age or even by weight, about 40 percent of the population, because some kids are skinny and some kids are heavier than others, in fact, there are some individuals at 40 pounds whose head will be way up above the top of the car seat and be in danger of whiplash by the very device that's meant to protect him.

Those children should be graduated into booster seats, so what you have to do again is part of it is going to be on the part of the profession, they're going to have to make it more of a challenge. You know, everybody pressuring the legislators, but it's well known that health professionals don't spend that much of the time counselling about these devices. I mean we've been partially negligent. California studies have shown 3 percent of physicians actually, at the time of the study in 1977, were counselling about it. In Winnipeg, again, you look and you ask your colleagues and you say, gee, you know, sometimes I forget. Part of it is going to be ours to interpret the use of these devices. I mean if we're going to be taking care of well baby care and well child care, the thing you should do is finger us and say, hey, you guys better make sure you interpret this right for your patients. We can't blame everything on you and then make you responsible for it. I think part of it would be co-operation with the medical group; nurses, physicians, anybody else who's involved in this to make sure these devices are used appropriately. So that again, you're right, a child at perhaps three or four may be way too big, already too tall and too heavy for those devices and they should be in a booster seat. So part of it's going to be interpretation.

MR. D. ORCHARD: Then, the other problem, the child restraint age or requirement of five years, there are children which go to regular school at age of five. According to this legislation, they should be in a child-restraint system which presumably would be in a school bus which is exempted entirely.

DR. R. STANWICK: Yes, that's a concern again. The definitive study has not been done on behaviour on school buses. I've cited those ones on cars. It would be very interesting to know what would happen, for example, Toronto's got the natural experiment where they've got some of their buses with the children belted in, and you always get the cartoons about the driver hassling the kids, etc. It may do away with the source of humour, but it may make life a lot easier for the bus driver.

I know that I listened to a lady that presented from the country who was very concerned about it. Again, we've been fortunate in Manitoba not having had any really serious school bus accident, but I personally would

favour - and this is my personal opinion - some sort of restraints in school buses as well. Part of it is why should a child be belted up until age four? Some of the kids, in fact, get very upset when they first get into a bus. There are some advantages who have never travelled in our transit system, but then they're thrust into a situation where they're in a moving vehicle without a belt, and they get upset. They start searching for it and they feel very uncomfortable. In some ways - again, this is my personal concern - is that the children can differentiate between what the rules are in the home and what the rules are in the school, but in keeping compliance up.

I can just see some of the arguments. They'll be marshalling with their parents and saying, well, how come I don't have to use it on the school bus and I have to belt with I drive with you? Aren't you as good a driver as the school bus driver? Of course, it could be a source of friction. Ideally, kids should be packaged as long as possible.

As I say, this is my own personal opinion on it. I've looked at school bus safety, but not in the depth I would be able to say that I'm commenting with any great expertise.

MR. D. ORCHARD: Well, I guess the point that was made by the lady who you listened to, as we all did the other night, and I suppose this same point could be, no doubt, made for children going to and from day care centres who are under the age of five is that they probably spend a greater amount of time in school buses going back and forth from either day care or school than they do in their own personal vehicle. The parents can be fined in the personal vehicle but that the government theoretically promoting safety has exempted the school bus aspect of it.

DR. R. STANWICK: I'm concerned, but as I say, if I was going to make a presentation on it I should have done a little bit more homework on it, as most of the opinions on the school bus are personal rather than based on previous study.

MR. CHAIRMAN: Thank you, Dr. Stanwick.
Mr. McKenzie.

MR. W. MCKENZIE: Doctor, I'm hung up on it. I have not many problems with the child restraint part of the legislation before, but I'm hung up on seat belts and helmets, that compulsory aspect of it.

Mr. Sharpe just spoke here a few moments ago, and he said the four-year period, '77-'81, Manitoba without a hint of compulsory seat belt legislation showed the highest percentage drop in the fatality rate of any of the 10 provinces of Canada. Would you care to comment, or do you support that?

DR. R. STANWICK: There are certain trends as far as the dropoff in the death rates on the highways, and as was pointed out by the previous speaker, one of the major things was of course the issue of the reduced speed limit, which had tremendous impact, particularly the American trends.

One of the things as far as pushing safety in the automobile that I think it's a multi-faceted approach

that certainly is cracking down on drunk drivers. I totally agree with good education, but one of the, shall we say, bricks in the whole wall of trying to reduce this terrible loss on our highways, I believe is seat belts; it does have an effect. I don't want to steal you of the thunder of the accident research group, because they've done a lot more into it looking at the effects of seat belts on specific collisions, but again I see, as a member of the Pediatric Death Review Committee, instances, I mean one of the big fears that everybody has is that they're going to be trapped in a car and drowned. Well, last year we had a kid who the mother lost control - I feel sorry on fingering the mothers - but it was a situation with the car, they lost control, flipped over into a ditch, and then out. The child was thrown out into the ditch and drowned. The mother walked away, she was wearing her seat belt yet. That was really an amazing thing.

I see these one by one as they go through. We review each death in this province, and the ones that can be listed as preventable is about 50 percent if they were wearing appropriate belts. If you get hit by a cement truck and you're sitting at the corner thing, it doesn't matter. Unfortunately, a lot of these are single-car vehicle, or else they were situations, there are low-speed collisions and they didn't need to happen. I certainly agree that seat belts are not the answer, and I agree with many of the things that were said by other speakers, more education, tougher on drunks, but I believe that one of the planks could be seat belts and helmets.

With the helmets - without being cynical about it - you'd hate to see Manitoba, one of the major exports of this province being kidneys, if we don't get a helmet legislation. I've seen where they worked. Again, I agree with the bikers in certain situations where they can be a problem, but I've also seen where they've worked. Seeing the people coming right in, I got a slightly different bias. Actually, I'd like to have much quieter evenings when I work Casualty. I'm basically I guess lazy and would rather not see these people coming in.

MR. W. McKENZIE: So you don't support that sentiment then of Mr. Sharpe?

DR. R. STANWICK: No, I don't. I support the fact we've got a dropoff, but again you'd have to do a very careful analysis as to all the factors. Again, why can't we be the perfect province? If we're dropping, why don't we keep on dropping? He said a plateau, maybe we can start having a downslide if we get this legislation.

Again, the other thing is, and I would emphasize it and it would be an evaluation component - get the accident research unit to see what happens, and then keep monitoring these situations.

MR. W. McKENZIE: Well, we have the other problems of Canada to model. They have the . . .

DR. R. STANWICK: They have. Saskatchewan's got lots of information on it.

MR. W. McKENZIE: Can I ask you then, Mr. Sharpe made another statement, he said Manitoba has the second lowest fatality rate in Canada per 100 million

vehicle kilometres, and had the lowest fatality rate in Canada per 1,000 registered motor vehicles. Do you support that statement?

DR. R. STANWICK: I can't argue with it. I would have to again defer to my colleagues in the Accident Research Unit. I have no reason to doubt him, but again why not improve upon it? I think it's great, but we have the proof that these devices, as I say, the area I can feel most comfortable with is infant kids, and you get another 50 percent, and that's what I'm arguing for, so that we can even make that figure look better and people can start coming here and saying, what are you doing right? I have no qualms with that.

MR. W. McKENZIE: One last question. You represent the Maternal and Child Health Coalition. How many people are there in that organization?

DR. R. STANWICK: With consultants it's probably - they've got most of the pediatric department, a lot of the university. Again, it was a group of individuals, I'd say there's maybe a dozen people who headed the various committees, people such as Dr. Allan Cameron who heads up the Rehabilitation Centre and Mrs. Agnes Hall who is the head, but she had, for example, asked myself and many other people who are interested in traffic safety to look at the specific proposition, Proposition 38, I think. It sounds like an American situation, but look at what we can do to reduce the morbidity and mortality amongst children. One of the biggest things is infant and child car restraint. So, she got myself and interested people to tackle that proposition. On our group, just the sub-group for No. 38, there were maybe a dozen working towards it.

On the other hand, the entire department of pediatrics totally endorses what I'm saying, and the MMA have come out in favour of it. So, again, it's more than just six of us who are perhaps are working under the auspices of the Coalition, but the Department of Pediatrics and the Manitoba Pediatric Society when presented with this totally agreed.

MR. W. McKENZIE: Thank you, Mr. Chairman.

MR. CHAIRMAN: Thank you, Dr. Stanwick.

The committee has about 16 or 17 minutes left. Shall we take one more to see whether we can get done?

Phil Zubrycki. Would you step up to the microphone and let us know what you want to tell us?

MR. P. ZUBRYCKI: Would it be all right if Mr. Elliott Levine spoke instead of me? He can't finish in 15 minutes, that's that only problem.

MR. CHAIRMAN: Could you finish in 20 minutes?

MR. E. LEVINE: It would depend whether you had any questions. I can try and be quick.

MR. CHAIRMAN: Let's try you.

MR. P. ZUBRYCKI: Thank you very much, Sir.

MR. A. KOVNATS: Mr. Chairman, would there be any conflict in stopping at 12:30 and then coming back and finishing, answering some questions?

MR. E. LEVINE: No, I could do that. If you want to stop in 15 minutes, I could comply with that.

MR. A. KOVNATS: If we concluded at 12:30, this gentleman would be allowed to come back and complete his presentation and answer some questions at our next meeting.

MR. CHAIRMAN: Okay.

MR. E. LEVINE: Fair enough. I'm not a native Manitoban and my field is not statistics. However, I do have background in some engineering and while philosophy is my main field, I feel that social philosophers have an obligation to attempt to, at times, be relevant.

When I moved to this province 18 years ago, Professor David Owens, a lovely gentleman who is no longer among the living, told me an anecdote that made a great deal of impression upon me. I think it has some relevance, and I hope I'm not insulting anyone, these are Davy's words and Davy's characters, Mike and Patty, and I don't wish to offend any of Irish descent. But it seems that Patty was on his knees under a lamppost in his uppers and Mike came along and said, "Patty, what are you doing?" He said, "I'm looking for a fiver I lost." Mike said, "Well, I'll help you." After half an hour he said, "Patty, we're not finding anything. Are you sure you lost the fiver? Where did you lose it?" And Patty pointed, he said, "Over there." Mike said, "But we're looking at the wrong place." "You damn fool, you can't find anything in the dark."

With all due respect, and I realize that the Manitoba researchers, looking at corpses for their profession day in and day out, have a real problem. I told that story because I really think it puts some relevance into the data. They're looking at corpses from a province that doesn't belt up. In private discussion with them, they inform me that it's not 6.8 percent, but it's as low as 4 percent compliance rate. It's likely that 4 percent is of people who are normally safer than the average driver, because they're voluntarily belting up.

So, we have corpses from a population that is virtually completely beltless, and then we find out that last year 40 of those corpses, if we would have had 100 percent belt participation rate, would have survived. The likelihood is that a 50 percent participation rate is reasonable to expect, given the Canadian North American experience. That means, potentially 20 savings. My question then is: against what? That's a gross figure, and I'm told 20 net, because you've only got a 1,000 to 1 chance of a belt doing damage.

Now I will, I believe, develop some statistics to suggest to you that the best case that they could make is it's 1 to 1, but the researchers who work in this province were of the belief, without being aware of the Ontario or Saskatchewan comparable groups where they did have belts, they believed it wasn't 1 to 1, wasn't 2 to 1, wasn't 5 to 1, 10 to 1, 100 to 1, 1,000 to 1, the belief is that if you can identify someone who had been helped by a belt, that's a net gain.

Look, I didn't want to come here. My background was, I asked the Minister for the data that would justify us bringing in the belts, because if a case would be made, I didn't want to waste my time and I'd belt up.

I was amazed at the horrendously - sloppy, is the polite word to use for it - sloppy use of data by those people who were attempting to justify seat belts. Again, in private conversations - and I don't want to jeopardize anyone or identify them - but in conversation with researchers, they admit to me that there is no statistical case that can be made. These are the people who are dealing with the data professionally. They tell me no statistical case can be made for belts.

This recalled to me a problem I had a few years ago when I had occasion to be talking to national research people in Ottawa. This was before Canada blew a couple of billion dollars on Challenger and Dash 7. They told me privately they had blown it. A year before those planes were certified, they knew they were junk, but the Canadian taxpayer didn't, and the Canadian taxpayer blew about 80 percent of the budget after these researchers knew that they had given the government dishonest advice. However, they would not go back on their advice to government, because as I was told, my first obligation is to feed my family. If I tell the truth, I'm fired. I have some difficulty accepting whole cloth, everything that comes out of Ottawa by way of statistics. I'm told by other researchers it holds for other departments.

The Department of Transport brought in compulsory flotation devices a few years back. I believed in them. I tried wearing one on a sailboat. No one who races sailboats or sail dinghies in Manitoba wears the devices that were approved several years ago. They were damn dangerous. They were likely to cause the boat to be flipped over. They made you incapable of manoeuvring to self rescue a boat. With illegal devices, a competent crew could tip right bail and have a boat going at full speed in a matter of seconds. With approved compulsory lifesaving devices, you had to wait for a rescue boat, and if you couldn't get a rescue boat to you, you wash off across the lake. No one who sailed a boat wore approved devices when they first came in and no one drowned. A lot of people drowned in motorboating accidents with approved devices available.

You'll excuse me if I'm somewhat suspicious of reports that come out of Ottawa telling me that they've got a safety device that's going to save my life. I've tested some of these devices. I've talked to some of these researchers. I know the level of integrity. I know the problems they're under. I mean if my feeding of my family required me to agree with my political master, I don't know how I would respond to that temptation. I'm lucky, so far I have tenure, we're not in British Columbia and I can say my piece.

I would like at this point to refer to some statistics. I know you've probably got indigestion from statistics. I know that Sid Green thinks that we should just talk principles, but I recognize that if an overwhelming case could be made for statistics, if when the MMA says you can cut your accident rate by four times, one quarter is likely to be injured if you're belted up, that would be enough to convince me to belt up. When they told me that I said, boy, if they're right, I'll belt up. But I know doctors at one time were prescribing thalidomide and I thought, okay, it's my life on the line. I'll take their word for starters and then I'll examine the statistics and I propose to present you with the numbers that convinced the MMA that you're four times as safe to

be belted up. I will show you the jurisdiction they got it from, and I will show you that they've got 60 percent of the hospital population who've been injured, identified as wearing belts, when they went into the hospital. They're in the hospital because they were in an accident and they were wearing belts. That should you make you a little suspicious that some of these figures are getting juggled.

Now geographic shift, there is an east to west shift in North America and Canada tends to parallel to mirror North America. On the east coast U.S., if you only report kills per 100,000 population, you're about 10 percent better in the east coast and about 10 percent worse in the west. As you go east to west, you get worse. For example, Minnesota kills 24 per 100,000; North Dakota, 30; Saskatchewan does its bit, it looks like North Dakota, but we aren't doing our . . . forgo the rhetoric. We're not as bad as Minnesota; Saskatchewan is as bad as North Dakota. We on that particular indicator are more like Ontario; Ontario, of course, is far worse on that indicator than New York. Ontario has compulsory belts and is worse than New York. We are better than the American counterpart; Ontario is worse. The only reason it doesn't show up that we're particularly good is because our net is similar to Ontario. But there is an east to west shift and the reason why that is important is when we look at Saskatchewan, in the year that Saskatchewan belted up, they managed to increase their kills from 263 to 295. Now that's explained the way it is because they keep their statistics differently that year and there were some snowstorms. But we're asked to believe that the decrease that you can attribute to belts, that should've showed up in scores of people not getting killed when they brought in belts, in fact, showed up as scores of extra kills.

Now, surely no one really believes that Saskatchewan was burying people in the ditch in the wintertime and not reporting them as getting killed, and that's how come the first year that they had belts they killed almost 300 people. You're asked to believe that the 263 really didn't exist and it was really more like 400 the year before, but they hid that extra 100 somewhere. Now no one seriously believes that. It happens that Saskatchewan belted up without lowering the speed limit and they had 32 more kills at a time when Manitoba was going down.

I know the doctors who have looked for the statistics, they told us last night that we can manage in Manitoba to kill 200 people a year over a 10-year period, as if it was stable. We killed 213 about 12 years ago, but we now killed 168 the last full year. I understand that last year the reports are going to come out as about 155. We, in fact, embarrassingly enough to the people who want belts, have been improving our safety record as the gentlemen said. He pointed out we now, per million miles travel, are the safest in Canada. We have been out-performing others without belts.

I raise the absurd question to you, might it be the case that Saskatchewan appears to be more dangerous than us because they're belted up? Might it be the case that Ontario does not appear to be as good as it should be because it's belted up? The case, I would submit, makes me very uncomfortable about belts. I must admit, I started off saying, hey, it looks like belts are a good thing, I will examine them. The same as I said, it looks like life preservers that are officially approved are good things, I will examine them.

Unfortunately - now I still, by the way - I have official life preservers in my boat. If people want to wear them they can. Under certain circumstance, I require people to wear them. I require my children to use non-approved devices when they're in sailboats and canoes simply because they are superior to approved ones, but that's another matter. There's this geographical shift and that accounts for some of the peculiarity when we look at Canada; there is a velocity shift. Human collision, Canada - this is published by our Federal Government. They identify a three-mile, at highway speeds, a three-mile-per-hour reduction in speed limit will generate 20 percent injury reduction - no, a five mile an hour will generate 20 percent injury reduction, 30 percent fatality reduction. We know Ontario brought in speed reduction at the same time that they brought in compulsory belts. They did not reduce their kills by 30 percent.

At the same time, the automobile fleet has been getting safer, the cars collapse around the safety cage for the passengers inside and the interior of the cars are smoother. The cars also are weighing a little less so when you hit pedestrians, you're a little less likely to kill them. So the best case you can make for belts is that the automobile fleet has not been becoming more dangerous. The speed limit reduction should account for a greater reduction in kills than we've been seeing. Then the suspicion arises that might it be the case that the belts on net are marginally more dangerous and that's why we're not getting the full effects of the speed legislation that we would've expected. Is that why Manitoba appears to be doing what it's doing?

Those questions make me feel very very uncomfortable about saying that belts are net safe. They look like there is a very good possibility. I'm not saying that the argument is clear cut, but I think that it looks as if the best case that can be made in favour of belts is all you're going to do and I say it in all sincerity, you're going to shift about 20 percent of the kills from one group to another. Twenty out of every 100 people killed in automobiles are going to be killed because they wear belts and there's going to be a matching 20 that you're going to save because they wore belts. But that's making a number of assumptions that at this point I am not prepared to make. If you don't make all the assumptions in favour of belts, it looks as if belts are killing net more people than they're saving. This frightens me.

If you want the Human Collision Canada, it was mailed to me by Mr. Uskiw and if you want to see the copy that he mailed to me, I'll make it available to you. Belt use, Transport Canada T.P. 2436; Ontario '79-'82. They used about 50 percent of shoulder belts that were available on a weighted overall average.

Researchers in Manitoba agree with me that a 50 percent belt utilization rate is ballparking about what you'd expect. I mention this because Ontario in a report that I will refer to later, Ontario Motor Vehicles Accident Facts 1981 reports over 80 percent belt use. We've got a number of reports that identify Ontario as using 50 percent belts. The status of seat belt usage Ontario in May of '77, I.R. 68, northwestern Ontario; near Manitoba border, 32.5 percent usage; Metro Toronto, 51. Overall average in the province fluctuating 45 to 50 percent; another study on expressway use, 47.5 percent. If you round it off and expect over the years you're averaging 50 percent; that's about the usage.

Ontario reports over 80 percent belt utilization in '80-'81. The reason they do that is because they've got all the people in hospital who were identified as wearing belts. The only way they can say that belts were safe, if they say that all sorts of people were wearing belts because if you stick with the actual counts, we have another Ontario report, Ontario Expressway Seat Belt Study I.R. 65 in 1978, it does not trust driver reports, and it doesn't trust driver reports because drivers tend to perhaps be untruthful when a police officer says, oh, you were in an accident. By the way, Sir, were you wearing a belt? You know it's illegal if you weren't. When they actually counted, they found 50 percent utilization, but they're prepared to identify - do you want me to stop?

MR. CHAIRMAN: Yes, it is 12:30. I understand you said you couldn't come back.

MR. E. LEVINE: My family's already been postponed. If you're going to Sunday, I'm going to be in trouble, but if you're sitting today or tomorrow, I'll return.

MR. CHAIRMAN: We shall sit tomorrow at 2:00 p.m. We expect that to happen; it has to be cleared by the House.

MR. E. LEVINE: At what time would I know? Two o'clock today?

HON. S. USKIW: No later than 3:00 p.m.

MR. E. LEVINE: Is there someone I could phone to find out?

APPENDIX 1

Sanford, Manitoba
June 22nd, 1983

JOHN MARTENS

The Honourable Howard R. Pawley
Premier
Province of Manitoba
Legislative Building
Winnipeg, Manitoba
R3C 0V8

Dear Sir:

At the June 16th News Conference, you admitted that you are having a hard time selling Manitobans on mandatory seat belt legislation. Haven't you wondered why this is so? Don't you know that up to 95% of us go through a lifetime without being in a serious motor vehicle accident? Do you suppose this happens just by chance?

How were you and who persuaded you to throw in the compulsory package? Do you know that over many years, through different administrations, Manitoba has had the lowest fatality rate of all the large provinces from British Columbia to Quebec? And in the last number of years the third lowest injury rate? Saskatchewan, the province most equal to Manitoba in conditions and population, had in the years 1980 and 1981 a total of 160 more motor vehicle related fatalities than Manitoba. The facts can be found in the annual Motor Vehicle Reports. On pages 1927 and 1929 of Hansard, April 20, 1983, we find some preliminary figures for 1982. It shows that Manitoba achieved the lowest fatality rate ever and quite likely the lowest of all provinces in Canada. This has happened in a province with the reputed lowest seat belt use in Canada. How does that add up?

.../2

- 2 -

It has been said that for 1982 the recession must have played a part. It is probable, but why not give credit where credit is due. I am sure that some credit must go to the drivers, the law enforcement, the driver training, the licensing and to all those concerned with doing their part towards safe driving. If we neglect any one of these priorities, safe driving starts to break down. The main causes of serious accidents are easily identifiable. Up to 90% of all accidents can be traced to driver fault. Driver fault, basically, is taking chances or greater than what you can handle or what the conditions allow. We should continue to direct our full attention, determination and effort toward accident prevention.

We impair our ability to deal with the cause of accidents if we give high priority to something which is not related to accident prevention. In Saskatchewan the collision rate increased by about 10% the year of compulsion; in Ontario, over 3%. This year, 1983, in British Columbia, the doctors are calling for a higher drinking age, not for better seat belts or safer vehicles. Manitoba's accident rate has been coming down slowly but steadily. Let us examine closely and understand why this is so; and let us not close our eyes and our ears to the negative aspects of compulsion.

Surely there is a better way, and I think that better way is very close to home.

Yours truly,

John Martens
Bos 99, Sanford, Manitoba
ROG 2J0
Phone: 736-2723

cc: The Honourable Samuel Uskiw, Minister of Highways and Transportation
The Honourable Sterling Lyon, Leader of the Opposition
Mr. Donald Orchard, M.L.A.
The News Media

APPENDIX 2
John Martens

June 29, 1983

Honourable Samuel Uskie
Minister of Highways & Transportation
203 Legislative Bldg.
Winnipeg, Manitoba
R3C 0V8

Dear Sir,

I believe the enclosed letter will explain my intent.

Can you and would you supply the answers to the following questions covering a period from 1970 - 1982, or the closest equivalent, and as they relate to (a) motor vehicle drivers and passengers and (b) motorcycle drivers and passengers:

- 1) What is the number of active drivers per year? (a) and (b)
- 2) What is the number of suspended drivers per year? (a) and (b)
- 3) What is the number of accidents per year? (a) and (b)
- 4) What is the number of injuries per year? (a) and (b)
- 5) What is the number of serious injuries per year according to hospital claims? Children 0 - 4 years (a) and (b) (a) and (b)
- 6) What is the number of para and quadraplegics per year? (a) and (b)
Children 0 - 4 years (a) and (b)
- 7) What is the number of fatalities per year? (a) and (b)
Children 0 - 4 years (a) and (b)
- 8) What are the main causes of the serious accidents? (a) and (b)

I emphasize again the questions related to (a) motor vehicle drivers and passengers and (b) motorcycle drivers and passengers, excluding pedestrians, bicycle riders and others.

Yours truly,

cc: Hon. Howard R. Pawley
Clayton Manness - MLA, Morris-Macdonald
Ministers of Transportation:
Alberta Ontario
British Columbia Quebec
Saskatchewan

John Martens
Box 99, Sanford
Manitoba R0G 2J0



MANITOBA

APPENDIX 2 A
John Martens:

MINISTER OF HIGHWAYS AND TRANSPORTATION

WINNIPEG, MANITOBA
R3C 0V8

July 8, 1983

Mr. John Martens
Box 99,
Sanford, Manitoba
ROG 2J0

Dear Mr. Martens:

Thank you for your letter of June 22nd, 1983, the original of which was sent to the Honourable Howard R. Pawley, Premier of Manitoba.

From the contents of your letter it is apparent that you have given considerable thought and study to accident statistics and motor related fatalities in Canada over the past two or three years. The comparison you make between Saskatchewan and Manitoba in the years 1980/81, which showed a total of 160 more motor vehicle related fatalities in Saskatchewan than Manitoba is not contested. However, it should be pointed out that these extra deaths were not caused by the use of seat belts or helmets. While it is appreciated that credit for the reduction in accidents must be given to improved driving standards, law enforcement, a higher standard of driver training, and numerous other programs that both promote and achieve better highway safety, all of which have had an effect on accident rates. Nevertheless, accidents still do and still will occur. It is towards the reduction of these quite often avoidable deaths and needless injuries that our seat belt and helmet legislation is aimed.

Our Government does not wish to impose any restrictions on the freedoms and rights of the individual unnecessarily, but at the same time there is a responsibility upon us to make the use of our highways as safe as possible for our citizens.

Thank you for your correspondence on this matter.

Yours very truly,

SAMUEL USKIW

Samuel Uskiw
Minister

c.c. Hon. Premier Pawley
Hon. Sterling Lyon
Mr. D. Orchard, M.L.A.



MANITOBA

APPENDIX 3
John Martens

MINISTER OF HIGHWAYS AND TRANSPORTATION

WINNIPEG MANITOBA
R3C 0V6

July 18, 1983

Mr. John Martens
Box 99,
Sanford, Manitoba
R0G 2J0

Dear Mr. Martens:

In reply to your letter of June 29th, wherein you request certain specific statistics relating to motor vehicles, drivers, motorcyclists and riders, accidents, injuries and fatalities for the years 1970 to 1982 inclusive, forwarded herewith are the figures that you require.

(1)(a) - Active drivers for the years 1970 to 1982 inclusive are as follows:

1970	426,604	1977	547,550
1971	437,340	1978	552,078
1972	475,123	1979	555,663
1973	480,802	1980	564,657
1974	497,899	1981	572,095
1975	512,870	1982	579,813
1976	529,002		

Since the Class Driver Licence System did not come into effect until 1978, figures for licenced motorcyclists are only available from 1978 to 1982 inclusive and are as follows:

1978	26,150	1981	31,703
1979	27,646	1982	33,991
1980	29,613		

Nevertheless, our records indicate that from 1970 to 1982 inclusive, registrations of motorcycles are as follows:

...../2

- 2 -

1970	5,740	1977	13,950
1971	6,850	1978	15,954
1972	6,013	1979	15,653
1973	7,478	1980	16,678
1974	8,585	1981	16,678
1975	9,314	1982	17,461
1976	10,915		

(2) - Number of suspended drivers in all classes for the years 1978 to 1982 inclusive are as follows:

1978	15,087	1981	19,864
1979	16,969	1982	21,087
1980	18,900		

No figures are available prior to 1978.

(3) - Total number of accidents per year. No figures are available prior to 1976, however, the figures for 1976 to 1982 inclusive for all accidents are as follows with the number of injuries in brackets beside the total number of accidents.

1976	37,719 (10,984)	1980	36,964 (10,940)
1977	40,897 (11,434)	1981	37,572 (10,970)
1978	39,080 (11,832)	1982	35,042 (10,299)
1979	40,077 (11,476)		

Of the above figures, the total number of motorcycle accidents for the years 1976 to 1982, and which are included in the above totals are as follows with the figures for injuries in brackets beside the respective numbers.

1976	479 (n/a)	1980	729 (520)
1977	590 (473)	1981	781 (549)
1978	649 (520)	1982	734 (511)
1979	502 (406)		

(4) - This question is answered in the figures given in answer to question #3.

(5) - What is the number of serious injuries per year according to hospital claims? This information is not available from my Department.

(6) - What is the number of para and quadraplegics per year? Such statistics are not maintained by my Department.

.../3

(7) - What is the number of fatalities per year?

	Accidents		Victims	
	Fatal	With Injury	Fatal	Injured
1970	132	6,815	159	9,622
1971	151	6,475	182	9,295
1972	158	8,383	185	12,021
1973	182	8,233	231	11,915
1974	163	7,933	201	11,111
1975	167	7,184	203	10,088
1976	160	7,381	213	10,984
1977	140	7,695	183	11,434
1978	166	8,019	198	11,832
1979	166	7,854	183	11,476
1980	156	7,787	175	10,940
1981	168	7,929	198	10,970
1982	132	7,530	151	10,299

(7)(b) - Number of fatalities to motorcyclists and passengers for the years 1970 to 1982 are given in the same manner as above. It should be noted that these figures are also included in the total numbers of fatal and injury accidents as given in 7(a).

	Accidents		Victims	
	Fatal	With Injury	Fatal	Injured
1970	9	292	9	350
1971	2	273	2	299
1972	8	333	8	386
1973	7	381	6	451
1974	3	295	4	329
1975	7	310	7	340
1976	7	336	7	373
1977	10	386	12	420
1978	12	428	13	473
1979	18	327	19	364
1980	16	433	17	489
1981	17	474	17	548
1982	15	441	16	523

Regarding fatalities and injuries to children 0-4 years, figures prior to 1976 are not available but for 1976 to 1982 inclusive for fatalities to children in this age bracket are as follows, with the figures for motorcycle accidents involving children in this age bracket are quoted in brackets with the other figures.

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	<u>Fatal</u>	<u>Injured</u>
1976	7	249
1977	9	275
1978	5	255
1979	5	229
1980	3	201
1981	4	199
1982	4	172 (1)

(8) - It has not been possible to determine one exact main cause of serious motor vehicle accidents. It should be noted that a serious accident is regarded as an accident involving injury, for the purposes of statistics. There are many causes ranging from road conditions, through to weather conditions, through driver error, etc., and it is not possible to establish one main cause since most accidents result from more than one contributing factor.

Trusting that this is the information that you required.

Yours very truly,

ORIGINAL SIGNED BY
SAMUEL USKIW

Samuel Uskiw
Minister

c.c. Hon. Howard Pawley, Premier
Mr. Clayton Manness, M.L.A.

APPENDIX 4
John Martens

July 21, 1983

Minister of Highways

Dear Mr. Uskiw:

I was pleasantly surprised to receive a reply to my questionnaire so promptly.

Regarding the answers to questions 5 and 6: would it not be easier for you to get the answers than it is for a private individual? Would it not also be proper for your department to know the answers to these questions? The answers to both relate to medicare costs. Both the briefs from the M.M.A and the Institute of Transport Engineers refer to the serious accidents by the hospital claims. They refer to them as the seat belt related injuries. That is the point of the questionnaire: to get seat belt related stats separate from motorcycle, bicycle, pedestrian and others.

In question 7, this distinction was missed. The answers I got are the total number of fatalities. The question is: what are the motor vehicle fatalities - drivers and passengers? I already have the answer to some. In 1981, the total is 198. The total for m.v. drivers and passengers is 128. I believe this same distinction was also missed as it relates to children to 4 years of age in 7(a)(b), both in total fatalities and total injured. In 1981 there were 2 not 4 m.v. related fatalities and 150 injured not 199.

The purpose for question 8 is to turn or to keep our focus on the cause of the accidents and especially focused on those serious accidents which are identified by hospital claims. The one main cause of course, is impaired driving. I find little comfort in buckling us all up while accidents which are preventable continue. If accidents are not preventable, how is it that around 95% of us drive without being in a serious accident in our lifetime?

.../2

- 2 -

The good doctors and nurses are faced with the injured and broken bodies; it does not follow that they have the answer to the problem. The solution which they are demanding does nothing to prevent accidents, in fact, the opposite seems to be true. Accidents are increasing where compulsory use of safety devices was introduced. It is my considered opinion that a false sense of security is created through compulsory use. How can you point out the limitations and the dangers if their use is made compulsory? It is much better if each driver knows the dangers of the road and learns how to avoid those dangers. That is where instruction and training comes in. If the use of safety devices had something to do with accident prevention, I could see legislating their use. Racing drivers will tell you that the standard lap and shoulder belts, while they are the best commercially available today, are better than nothing but, nevertheless, quite inadequate in serious accidents. It is better that the driver knows this. The driver should know the benefits but also the limitations of safety devices. To use or not to use should be personal responsibility.

Again, we impair our ability to deal with the cause of accidents if we give high priority to something which is not related to accident prevention. Accident prevention needs our full attention.

I do appreciate the work that went into answering the questionnaire.

Yours truly,

John Martens

cc: Hon Howard Pawley, Premier
Mr. Clayton Manness, M.L.A.

PRIORITIES OF HIGHWAY SAFETY

APPENDIX 5
John Martens

1. Good drivers: - responsible attitude
- trained and tested
- judged by driving record.
2. Good roads: - properly engineered and maintained
- adequate traffic signs, with special emphasis at intersections, turn-offs and no passing areas.
3. Good vehicles: - maintenance
4. Daily Information on weather and road conditions: - This service by the Dept. of Highways, especially through the radio stations is very commendable indeed and is, no doubt, contributing immeasurably to highway safety.
I think this information service given by the radio stations, T.V. stations and by various service organizations needs to be publicly commended and encouraged.
5. Good legislation: - should have an inbuilt incentive for the driver to gain and maintain a good driving record and should be firm with those whose driving record indicates a hazard to personal and public safety.

Examples: (1) In 1978, in Charleswood, a driver whose licence had been suspended was the cause of a multi-injury accident the day after he received his licence.
The charge - impaired driving
(2) The lowliest traffic sign indicating danger areas should have precedence over such signs as "please wear your seatbelts". The first contributes directly to safety and the second only indirectly. The second may have the law of averages showing a benefit, but is not completely honest because it does not admit the limitations and sometimes the detrimental effects of seat belts.
Honesty, complete information and personal as well as government responsibility should be the criterion of good legislations.
6. Law enforcement: - should be mostly low profile but never lax
7. Yearly reviews and watchful monitoring must be maintained: - where possible, the causes and responsibility of violations and accidents should be evaluated.
- research groups indicate that over 90% of the accidents can be directly traced to driver fault.

My impressions of the year 1978 for Manitoba as they relate to highway safety:

I thought that the relatively high rate of serious death and injury accidents may have been contributed to by what seemed to me an air of uncertainty relating to various aspects of highway safety. It is possible that there was a partial vacuum for a time when policies and priorities were being established and maybe also a partial vacuum in law enforcement.

If the record of highway safety since December of 1978 up to the present time indicates something, I would say that, but for one or two fatalities and very few reported serious injury accidents, there has been a very marked improvement in highway safety. I think the abnormally high rate of fender-bending accidents of January and February are a reflection to a great extent of the weather conditions, and inexperienced drivers.

The safety consciousness has surely been raised and should now be maintained.

We should not forget the high number of head on collisions of 1978, the number of accidents involving fire and water, the increasing number of auto-pedestrian accidents, especially in 1979.

During the 30's, 40's, 50's and early 60's the emphasis was on driver responsibility for highway safety. The emphasis since then, by various research groups, has swung more to vehicle safety. A common sense balance and priority must be maintained.

Question: How does no-fault insurance fit into highway safety?

Respectfully submitted by:

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