

# A NOVEL METHOD FOR QUANTIFYING COMFORT IN CHILD PASSENGERS

Julie Brown



**NeuRA**

*Discover. Conquer. Cure.*

**INJURY PREVENTION**

# Background

## Types of errors

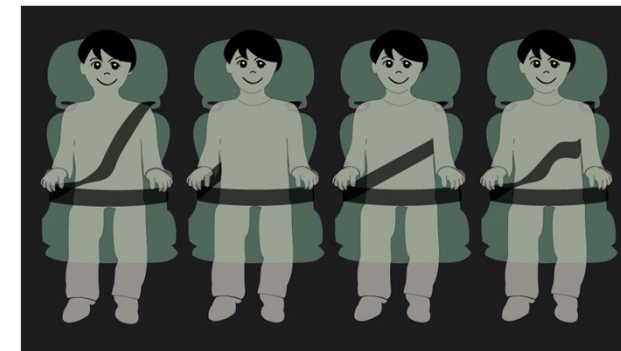
- Errors in way restraint installed in car
- Errors in way child secured within restraint
  - When parent/adults secure child within the restraint
  - **When child interacts with the restraint during journey**
    - *May be related to comfort<sup>1-3</sup>*
    - *Poor restraint fit may cause discomfort → errors in use<sup>4</sup>*

<sup>1</sup>Klinich KD et al. 38th STAPP Car Crash Conference, 1994:245–258

<sup>2</sup>Simpson EM, et al. *Pediatrics*. 2002;110(4):729–736

<sup>3</sup>Osvalder A-L, et al. *IRCOBI* 2013.

<sup>4</sup>Bohman K, et al *Proceedings of the 20th International Technical Conference of the Enhanced Safety of Vehicles, Paris.*; 2007



***Examples of errors in use of a booster seat introduced by a child during a journey***

# Background

- To date no quantitative study of relationship between comfort and errors in use

But how do we study comfort of children in cars?

# Background

## Comfort

- Often considered in design of adult car systems
- Many studies in the literature related to;
  - Vehicle seats e.g.<sup>1-4</sup>
  - Seat belts e.g.<sup>5-6</sup>
- Methods used include surveys, questionnaires and pressures measurements
  - validated methods for studying adult comfort?

<sup>1</sup>Gyi DE & Porter JM *Applied Ergonomics* 1999;30(2):99-107

<sup>2</sup>Kolich M & Tabourn SM *Journal of Occupational Safety and Ergonomics* 2002;8(4):483-496

<sup>3</sup>Kolich M & Tabourn SM *Applied Ergonomics* 2004;47(8):841-863.

<sup>4</sup>Chae S et al *International Conference of Design, User Experience and Usability* 2011:368-375

<sup>5</sup>Balci R et al *Human factors in Automotive Design* 201:53-59

<sup>6</sup>Chen L et al *Human factors in driving, seating and vision* 2003;(SP-1772):131-182

# Background

## Methods used measure comfort of adults in cars

### – Surveys/Questionnaires

- Automotive Seating Discomfort Questionnaire (ASDQ)<sup>1</sup>
- Automotive Seating Comfort Survey<sup>2</sup>
- Body Part Discomfort Chart<sup>3</sup>

### – Pressure mapping

Mixed reports in the literature about how well these measures correlate.

<sup>1</sup>Smith et al , *International Journal of Industrial Ergonomics* 2006;36(2):141–149..

<sup>2</sup>Kolich, *SAE Technical Paper*. 1999.

<sup>3</sup>Gyi and Porter *Applied Ergonomics*. 1999;30(2):99–107.

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### – Surveys/Questionnaires



Actual  
comfort?

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### – Pressure mapping



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*Sensitive to changes in seating condition ?*



Actual comfort?

### – Pressure mapping

*Sensitive to changes in seating condition ?*



Actual comfort?

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<sup>2</sup>Kolich, *SAE Technical Paper*. 1999.

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# Background

## Variations in seating condition

- Seating rig to control 'comfortable' and 'uncomfortable' seating positions
- A well-fitting chair requires both a seat height between 88% and 95% of a student's popliteal height and a depth of between 80% and 95% of the students' buttock-popliteal length<sup>1</sup> → **COMFORTABLE**



<sup>1</sup> Parcels C, et al *Journal of Adolescent Health* 1999;24(4):265-273



# Background

## Methods used measure comfort of children in cars

- Surveys/Questionnaires used previously for comfort<sup>1-2</sup> (& pain<sup>3-6</sup>)
  - *But difficulties obtaining useful self report responses from children from some researchers<sup>1, 3-6</sup>*
- Pressure mapping not previously used
  - But pressure variations an issue in anthropometric mismatch between children & seating conditions<sup>7</sup>
- Video not previously used for comfort
  - But used to study other child behaviour in cars e.g. posture<sup>1-2, 8</sup>

<sup>1</sup>SPettersson I, Osvalder AL *Proceedings of the Nordic Ergonomic Society Conference, Norway 2005* <sup>2</sup> Osvalder AL et al, IRCOBI, Sweden 2013

<sup>3</sup>von Bayer CL et al, *Pain* 2007;127(1-2):140-150 <sup>4</sup>Bieri D et al, *Pain* 1990;41(2):139-150 <sup>5</sup>Craig KD *APS Journal* 1992; 1(3):153-162

<sup>6</sup>Hicks CL et al *Pain* 2001;93(2):173 <sup>7</sup>Parcells C, et al *Journal of Adolescent Health* 1999;24(4):265-273 <sup>8</sup>Foreman et al, *AAAM* 2011;55:3-14

# Background

## Video observation methods

- Observation of behaviour & facial expression used in pain measurement
  - Particularly when children too young to provide/understand self report measures<sup>1</sup>
- Video method used previously to study comfort in high chairs
  - A count of ‘fidgeting and stabilisation’ used to measure comfort with and without a footrest<sup>2</sup>

<sup>1</sup>von Bayer CL et al, *Pain* 2007;127(1-2):140-150

<sup>2</sup>Harper et al Ergonomic evaluation of the KinderZeet Child seat in a preschool setting. *Class Project Report 2002:1-18* available at

# Background

- **Discomfort Avoidance Behaviour (DAB) Score**
  - *Inspired by previous work counting fidgeting and stabilisation movements to measure comfort in high chairs<sup>1</sup>*
  - *Discomfort avoidance behaviours e.g.*
    - stretching of neck
    - stretching of back
    - shifting weight
    - leaning forward/backwards or to either side
    - interacting with the sash belt
    - kicking or moving of the legs.

<sup>1</sup> Harper K, et al. Ergonomic Evaluation of the KinderZeet Child Seat in a Preschool Setting. *Class Project Report*. 2002:1–18.

# Aims and Objectives

1. To examine reliability & sensitivity of potential measures of comfort in children aged 4-8 years
  - Survey/questionnaires
  - Pressure mapping
  - DAB method
2. To examine relationship between comfort measured using DAB method and errors in use of booster seats.

# Methods

Part 1: Examined reliability and sensitivity of comfort measures (14 children)

- age mean=5.4 years, height mean=116.1cm, weight mean =20.4kg,

Part 2: Examined the association between DAB and observed errors (Jan 2015-Oct 2016, 15 children)

- age mean=5.6 years, height mean=119cm, weight mean =21.9kg,

## Participants

- Parents/guardians & their children aged 4-8 years
- Parents were >18, Australian residents, routinely transported their child in a car

*Both studies approved by UNSW Human Research Committee*

# Methods –Part 1: Reliability & Sensitivity



Comfort measures compared across 4 seating conditions;

1. Fit – comfortable baseline
2. Fit +footrest – comfortable enhanced
3. Seatbelt high – uncomfortable
4. Long cushion - uncomfortable

# Methods –Part 1: Reliability & Sensitivity

## Seating conditions

1. Fit – comfortable baseline
2. Fit +footrest – comfortable enhanced



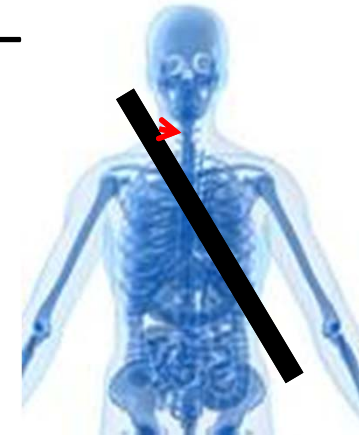
# Methods –Part 1: Reliability & Sensitivity

## Seating conditions

1. Fit – comfortable baseline
2. Fit +footrest – comfortable enhanced



3. Seatbelt high – uncomfortable





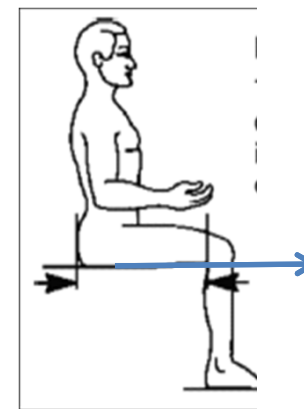
# Methods –Part 1: Reliability & Sensitivity

## Seating conditions

1. Fit – comfortable baseline
2. Fit +footrest – comfortable enhanced



3. Seatbelt high – uncomfortable



Cushion  
10cm > BPL

4. Long cushion - uncomfortable

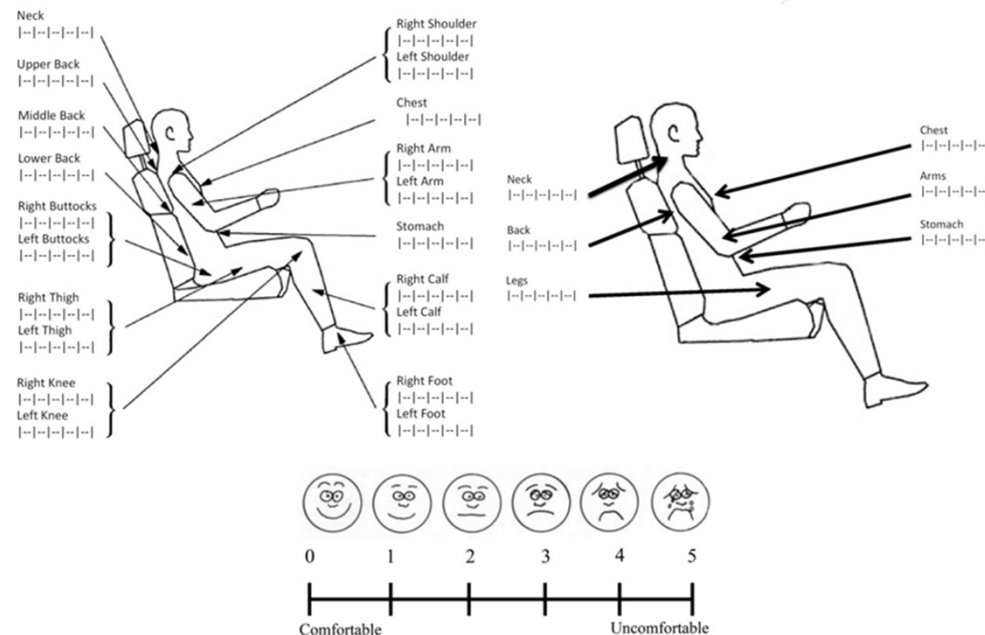
# Methods –Part 1: Reliability & Sensitivity

## Procedure

- Measured stature, weight & buttock-to-popliteal length
- Children correctly restrained in each seating position (10mins)
- Survey administered by research at end of 10mins while child still seated
- 10 min break between trials
- Seating positions randomly ordered
- Child watch TV program of their choice
- Watched 15 inch screen just below eye height, an arms length in front of child

# Methods –Part 1: Reliability & Sensitivity - Surveys

- 2 different tools
  - 20 point comfort/discomfort scale<sup>1</sup> (10 children)
  - 6 point comfort/discomfort scale (4 children)
- Both used a modified FACES pain scale<sup>2-3</sup>



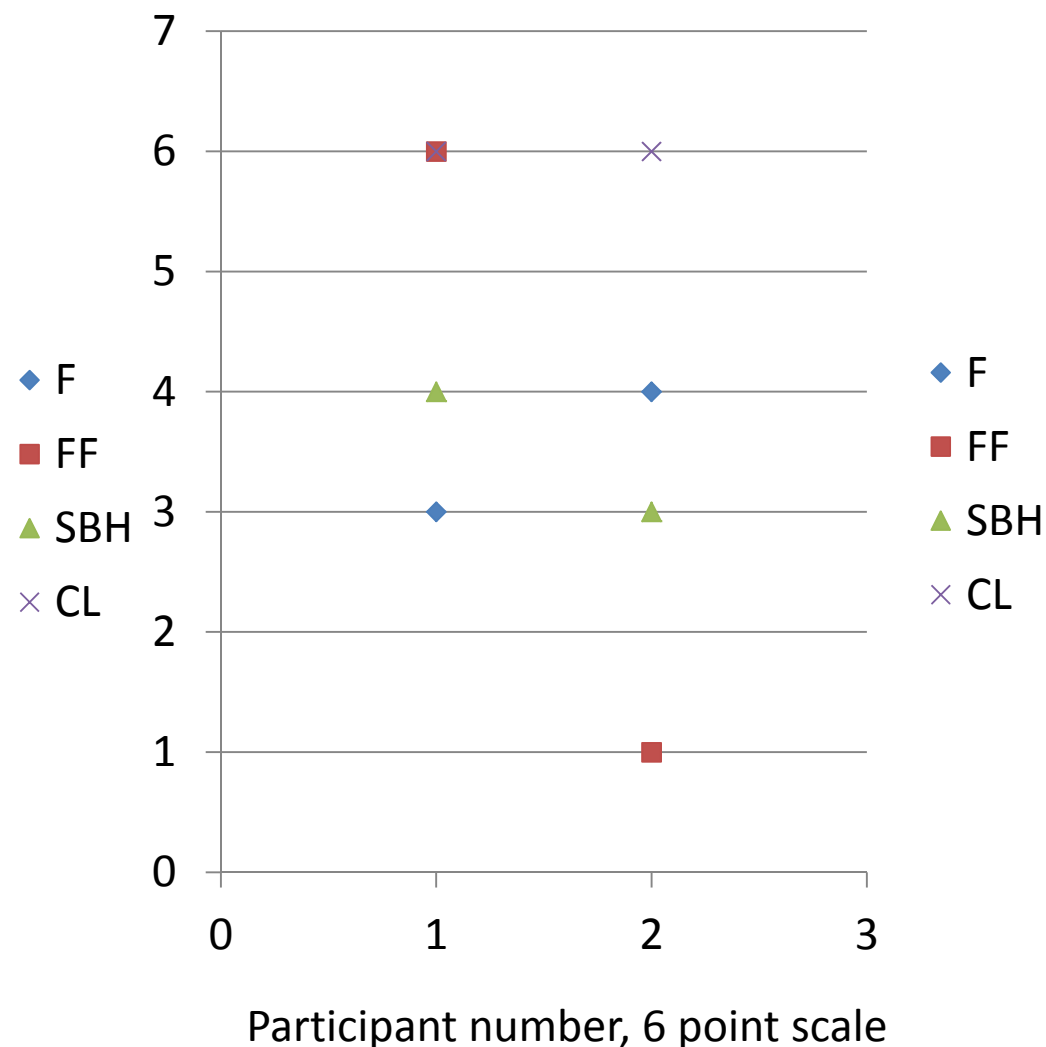
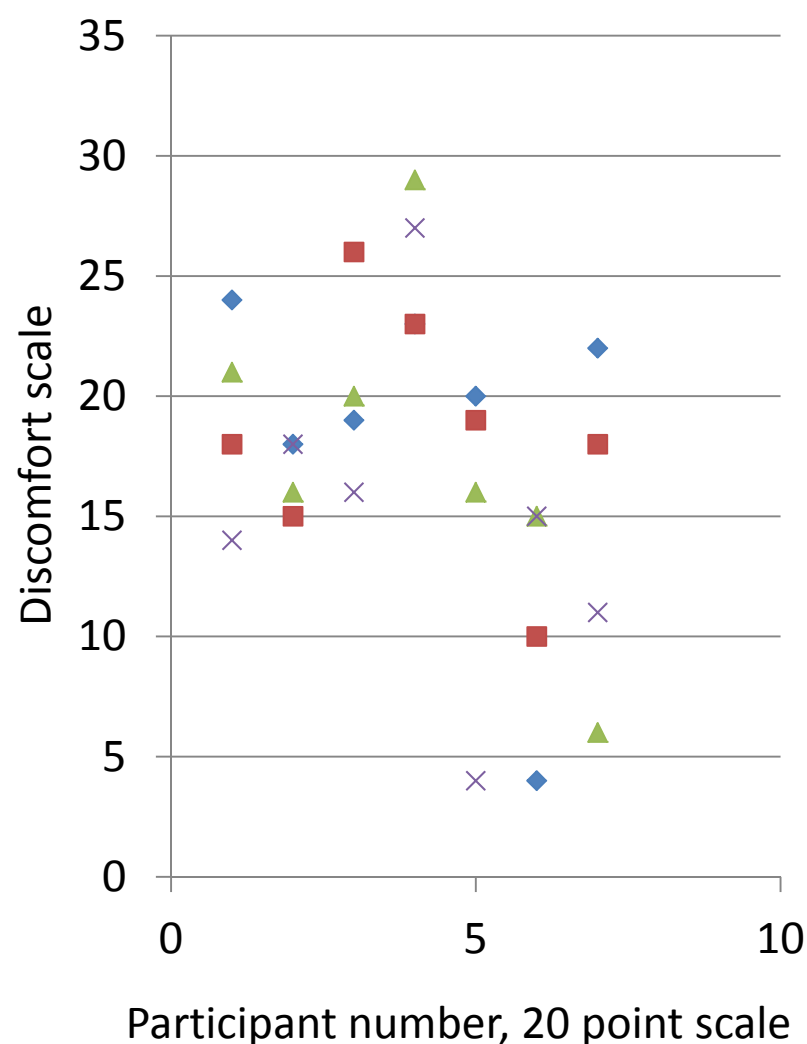
<sup>1</sup>Gyi and Porter 1999

<sup>2</sup>Wong and Baker 1988

<sup>3</sup>Borgers et al, 2000, 2004

Subject		1	2	3	4	5	6	7	8	9	10	11	12	13	14
20-point score	F	24	18	19	23	0	0	20	4	22	0	-	-	-	-
	FF	18	15	26	23	1	0	19	10	18	2	-	-	-	-
	SB	21	16	20	29	0	0	16	15	6	2	-	-	-	-
	H	14	18	16	27	8	0	4	15	11	4	-	-	-	-
	CL	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	NS	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6-point score	F	-	-	-	-	-	-	-	-	-	-	3	0	0	4
	FF	-	-	-	-	-	-	-	-	-	-	6	0	0	1
	SB	-	-	-	-	-	-	-	-	-	-	4	0	0	3
	H	-	-	-	-	-	-	-	-	-	-	6	0	0	6
	CL	-	-	-	-	-	-	-	-	-	-	0	0	0	2
	NS	-	-	-	-	-	-	-	-	-	-	0	0	0	2

# Results –Part 1: Reliability & Sensitivity - Surveys

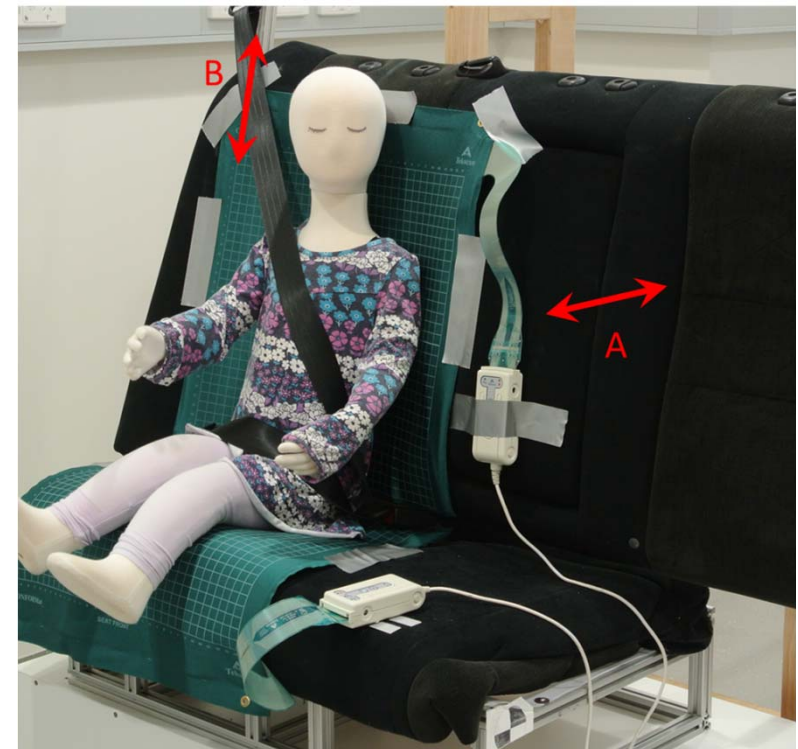


## Results –Part 1: Reliability & Sensitivity - Surveys

- Neither sensitive to changes in seating condition
- Mean differences between conditions very small
- No statistically significant difference

# Methods –Part 1: Reliability & Sensitivity – Pressure mapping

- Tekscan system (5330 CONFORMat)
- Measured for full 10 min duration
- One mat on seat back & one mat on seat cushion
- Measured
  - Change in centre of force ( $\Delta\text{COF}$ )
  - Peak pressure (PP)
  - Average contact area ( $\mu\text{CA}$ )



# Results –Part 1: Reliability & Sensitivity – Pressure mapping

- Some measures were sensitive to some changes in seating condition
- A number of technical difficulties using mats
  - Consistent mat placement for changing cushion length
  - Difficult optimising sensitivity

Condition	$\Delta$ COF	$\mu$ CA	PP
Fit + Footrest	0.03	0.01	0.77
Fit - Seatbelt High	0.28	0.10	0.67
Fit - Cushion Long	0.66	0.00	0.81

Significance (paired sample t-test ) Seat cushion

Condition	$\Delta$ COF	$\mu$ CA	PP
Fit + Footrest	0.28	0.97	0.92
Fit - Seatbelt High	0.74	0.78	0.56
Fit - Cushion Long	0.50	0.02	0.40

Significance (paired sample t-test ) Seat back

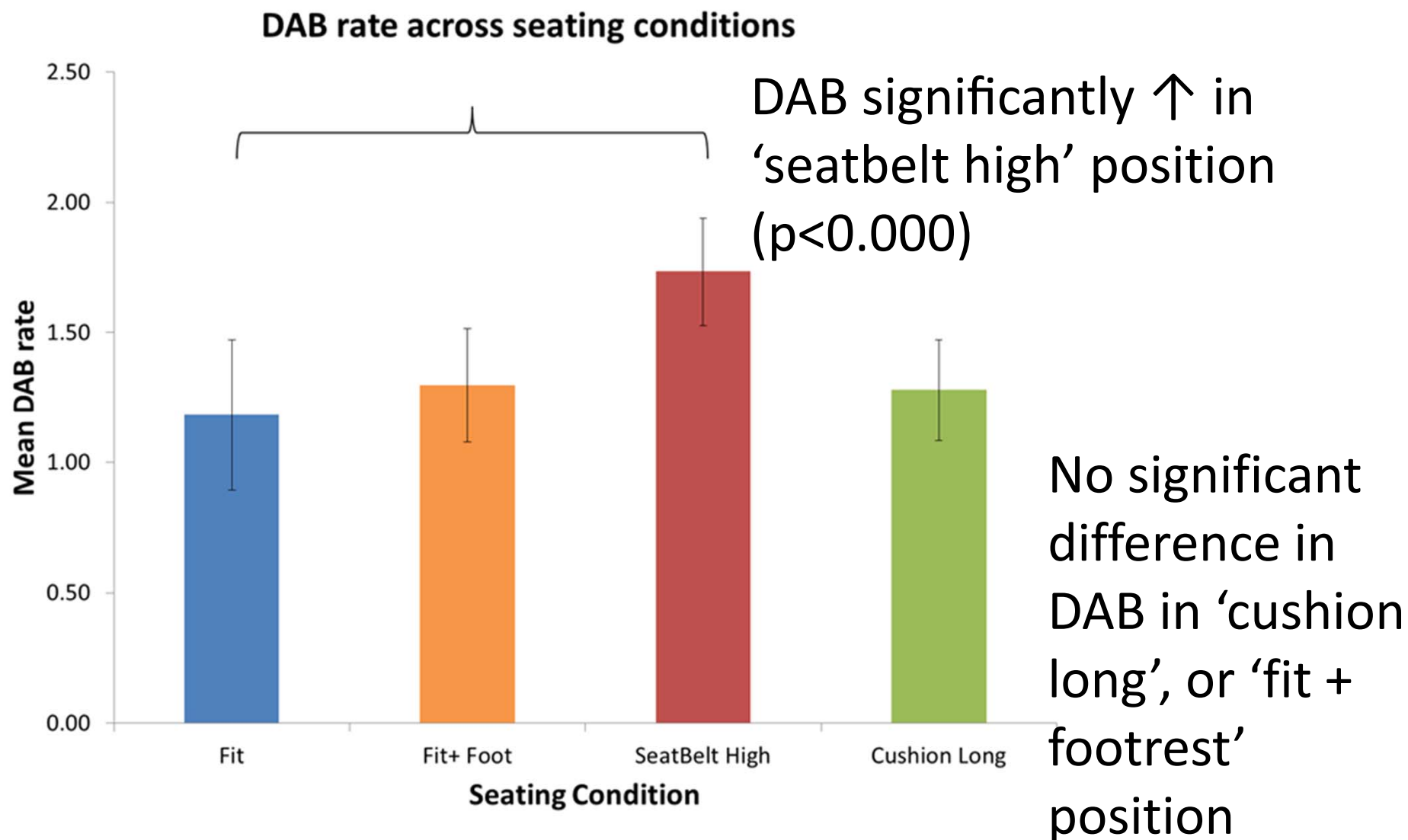


## Methods –Part 1: Reliability & Sensitivity -DAB

- Children filmed in each seating position (10mins)
- 10 min break between trials
- Seating positions randomly ordered
- Video viewed and DAB scored
- 9/14 were scored by two people

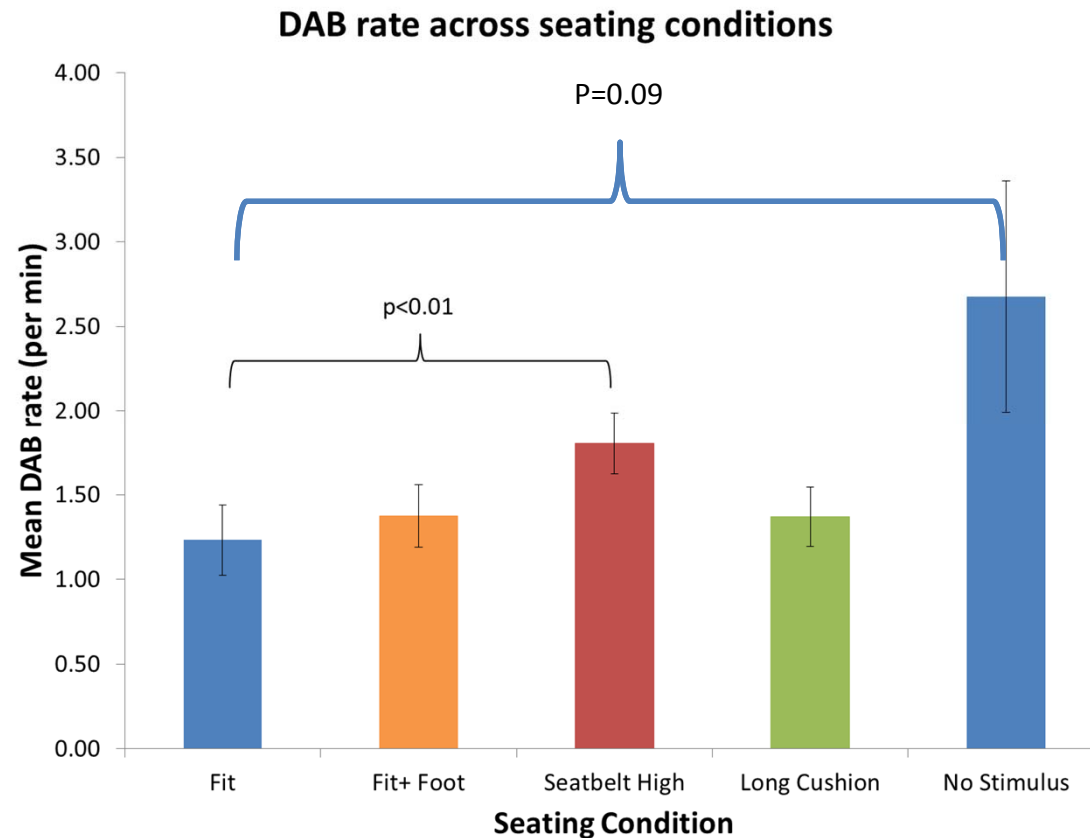
$$\text{DAB} = \frac{\text{Total Discomfort Avoidance Behaviour Instances}}{\text{Video Length (Minutes)}}$$

# Results- Part 1: Reliability & Sensitivity



# Methods –Part 1: Reliability & Sensitivity - stimulus

- 4 trials undertaken with video stimulus removed
- Fit condition minus the video



# Methods –Part 2: DAB & Errors in use

Booster 1: Low back integrated booster



Booster 2: High back add-on booster

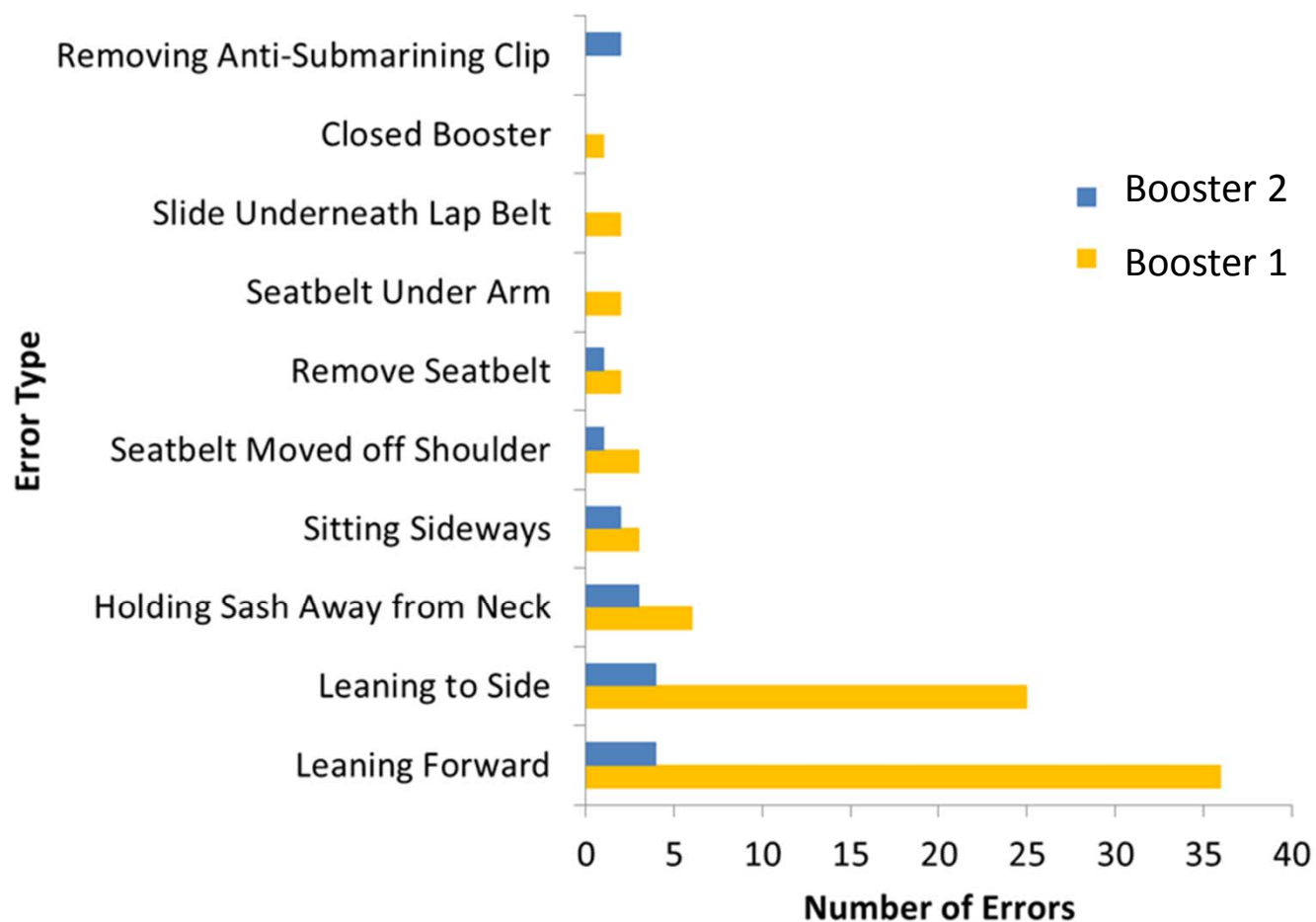


Volvo V50 test buck

## Methods –Part 2: DAB & Errors in use

- Child restrained in each booster for 10 mins with 10 min break between
- Child video recorded
- Video viewed and DAB scored
- 5/15 scored by 2<sup>nd</sup> rater

# Results- Part 2:DAB & Errors in use



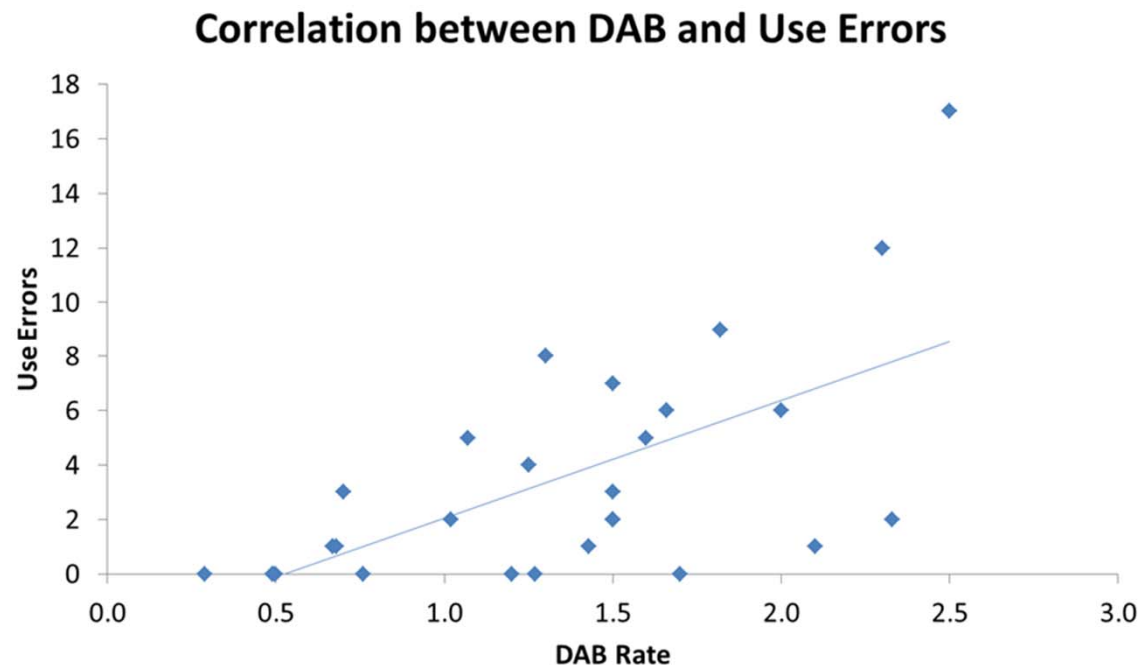
Booster 1



Booster 2

## Results- Part 2:DAB & Errors in use

- General estimating equations to conduct linear regression
- Increases in DAB were correlated with increases in child-induced errors
- Significant even when controlling for restraint type, age & height
- ICC remained high



Errors in use =  $3.89 \times \text{DAB} - 2.18$ ,  $p < 0.0001$

Also significant relationships between errors and;

- Restraint type,  $p = 0.002$
- Height,  $p = 0.045$

## Main findings

- DAB score was sensitive to discomfort induced by changes in shoulder belt position
- DAB score appears reliable between different raters
- As discomfort ↑ (as measured by DAB), number of child-induced errors ↑
- Comfort experienced by children is important for correct use of restraints

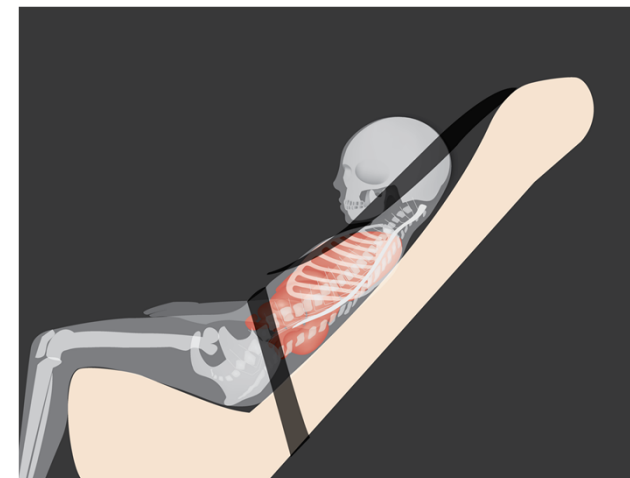


## Discussion – DAB Score

- Sensitivity trials assumed comfort is maximised by a good ergonomic match based on work by Parcels et al<sup>1</sup>
- Expected DAB ↑ with ‘cushion long’
- Limitation of DAB
- Maybe improved by including time out of position and/or some posture score



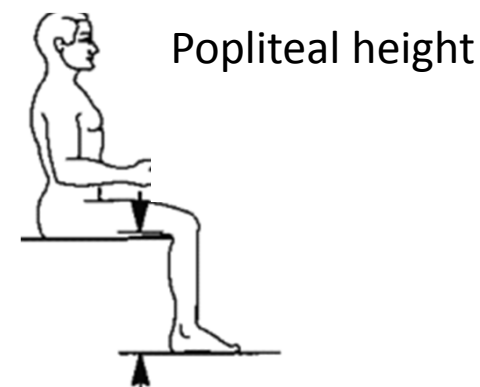
DAB Score=1



<sup>1</sup> Parcels C, et al *Journal of Adolescent Health*. 1999;24(4):265–273

## Discussion – DAB Score

- Expected DAB ↓ with ‘footrest’
- “a seat height between 88% and 95% of a student’s popliteal height”<sup>1</sup>
- We allowed child to choose
- Didn’t control well
- But did see a difference in  $\Delta\text{COF}$

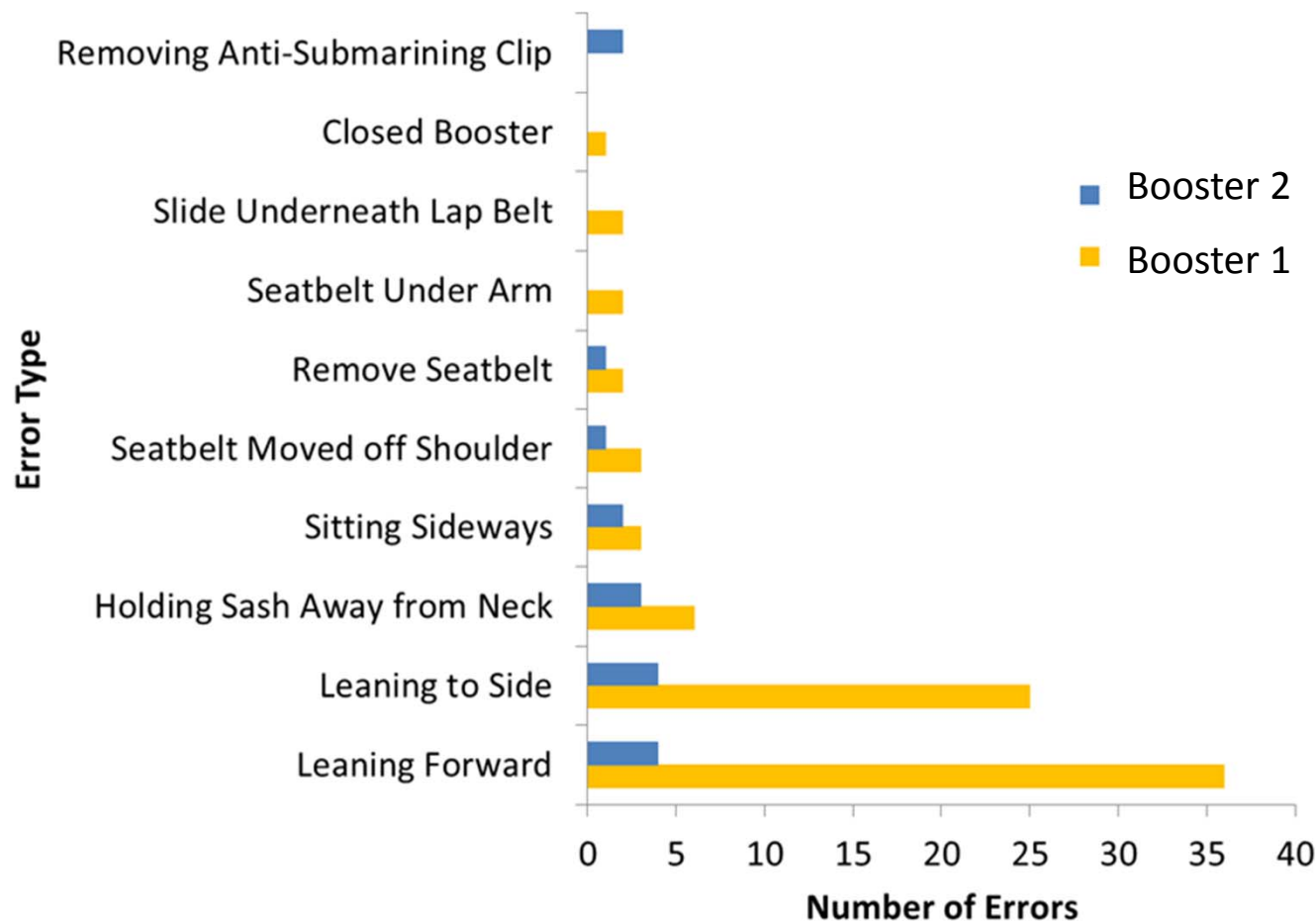


Condition	$\Delta\text{COF}$
Fit + Footrest	0.03



<sup>1</sup> Parcels C, et al *Journal of Adolescent Health*. 1999;24(4):265–273

# Discussion – DAB & Errors in Use



Order was not randomised, all sat for 10mins in Booster 2, then 10 mins in Booster 1

*Caution against drawing conclusions about higher propensity for errors in Booster 1*

# Limitations



- Some extreme motions counted in DAB & as error
- May have artificially strengthened association between DAB & errors

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- Work conducted in laboratory environments
- Needs to be repeated in naturalistic study



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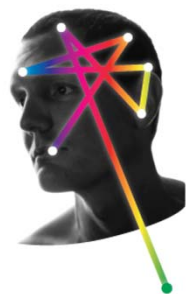
- Some extreme motions counted in DAB & as error
- May have artificially strengthened association between DAB & errors



- Did not account for individual behaviour differences in children
- No problem with repeated measures design
- Using DAB in other study designs may need to account for differences
- Work conducted in laboratory environments
- Needs to be repeated in naturalistic study

# Summary

- DAB score is sensitive to changes in comfort
- Further refinement of DAB may be required
- DAB easier to use than other methods
- Comfort appears likely to be important for minimising child induced errors in use
- Further work being conducted to confirm observations in a naturalistic environment



# NeuRA

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**INJURY PREVENTION**

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