



UNITED STATES
CONSUMER PRODUCT SAFETY COMMISSION
4330 EAST WEST HIGHWAY
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STATEMENT OF THE HONORABLE THOMAS H. MOORE
ON THE FINAL RULE FOR INFANT WALKERS UNDER
SECTION 104(b) OF THE CONSUMER PRODUCT SAFETY IMPROVEMENT ACT (CPSIA)
May 26, 2010

I voted today to approve the final rule on infant walkers, more commonly known as baby walkers. This rule makes the voluntary ASTM standard, with improvements developed by our staff, a mandatory consumer product safety standard pursuant to section 104 of the CPSIA. Our agency has been concerned for many years about babies being injured while using walkers.

In 1992, the Commission was petitioned by the Consumer Federation of America, the American Academy of Pediatrics, the Washington Chapter of the American Academy of Pediatrics, Consumers Union and the National Safe Kids Campaign to ban the sale of baby walkers in the United States. In 1993, when the Commission voted to deny that petition, there were 27,000 injuries to babies every year associated with baby walkers. The majority of the injuries were from babies in walkers falling down stairs, many were falls down basement steps. Baby walkers accounted for a higher number of injuries annually than any other type of nursery product. About one-third of the injuries were considered "more severe." These injuries included concussions, burns, fractures and internal organ injuries. On average, two babies died in baby walkers each year between 1989 and 1993.

While the Commission denied the petition, it did not drop the issue, but directed staff to do research to determine whether there were ways to address the hazards associated with baby walkers. One possibility was the Canadian approach. In 1989, a voluntary standard went into effect in Canada that increased the width of baby walkers to preclude their passage through a standard door opening. Manufacturers were not willing to redesign their products for the relatively small Canadian market, so the voluntary standard had the effect of banning baby walkers in Canada (a ban that was formalized by the Canadian government in 2004). The much larger size of the American market, however, meant that performance requirements were more likely to be followed by baby walker manufacturers in the U.S. market. The industry was not prepared to consider performance requirements to address the hazard. When the Commission began a rulemaking proceeding on baby walkers in August of 1994, the American (ASTM) voluntary standard for baby walkers addressed falls down stairs only through a warning label.

The publicity generated by the petition about the high number of injuries to babies in walkers, along with the introduction of stationary activity centers as safer alternatives to baby walkers, led to a decline in traditional walker use that was reflected in the injury statistics even before the Commission began the baby walker rulemaking. However, it was only after the rulemaking was initiated that industry seriously began to address performance requirements for

walkers related to stair falls. The voluntary standard that was published in 1997, with enormous input from our staff, has resulted in a remarkable reduction in baby walker-related injuries.

The Commission terminated its rulemaking proceeding in 2002, after monitoring the effectiveness of and compliance with the voluntary standard and reviewing the most recent baby walker injury statistics. At that time, taking into account an increase in births, the rate of walker injuries had declined 65% from the rate in 1995. Our Office of Compliance was vigilant in monitoring baby walker conformance with the voluntary standard. In 2005, alarmed that there had already been six baby walkers recalls, the Director of the Office of Compliance issued a letter to all manufacturers, importers and retailers of baby walkers, informing them that any walker that did not meet the stair-fall protection would be considered defective and presented a substantial risk of injury to young children and would be recalled from the marketplace. In all, ten baby walkers were recalled between 2001 and 2010 because they did not meet the stair-fall requirements.

The number of injuries related to baby walkers is now down 88% from 1994. However, the majority of the current injuries are still from falls down stairs. I imagine that some of those injuries are from walkers that do not meet the ASTM voluntary standard. Having a mandatory standard will make it much easier to stop noncomplying walkers at the ports before they enter our marketplace. All of the ten recalled walkers mentioned above were imported into this country. I am hopeful that the improvements our staff has recommended to the standard will help to further reduce injuries related to baby walkers.

We will need to continue to monitor the injuries and establish a plan for revisiting the baby walker standard in the future. In 2002, when I voted to terminate the first baby walker rulemaking, I asked the staff to consider whether the standard should include tests for ensuring that friction strips maintain their ability over time to stop a walker. Depending upon the material used, the degradation of the friction strips may not be so much a function of overuse as it is one of aging. For example, rubber dries out and becomes brittle over time. If baby walkers are stored and then handed down in families or sold in the resale market, rubber friction strips could become less effective in stopping the walker as the strips age. Staff looked at the issue of friction strips more in the context of their overuse as opposed to degradation through aging. I hope that the next time we look at the baby walker standard this issue will be reviewed.

I would also like to see a review of the eight pound falling weight that is used to simulate the force a child in a baby walker can generate to move the walker. In the Appendix to ASTM F977-07, it notes that the use of the eight pound weight was based on the testing of only ten children, ranging in age from 6 ½ to 11 months. Since baby walkers are used by older children, and standards tend to protect the children who are most at risk—with this product, the stronger, more mobile children—it would behoove the Commission to review this provision when it revisits this standard in the future to make sure that eight pounds is protective enough for older children using the product.

I also think that we should be attentive to whether manufacturers shift to producing baby walkers without parking brakes in the future. The final rule requires a parking brake performance test for those baby walkers that have this feature, but it does not require the feature.

This testing requirement and the expense associated with it may lead manufacturers to just omit the feature from future production. I agree with some commenters that to have the ability to momentarily immobilize the baby walker adds an important element of safety to the product. I hope that manufacturers do not find the testing requirement, by itself, a disincentive to continuing to produce baby walkers with parking brakes.

Particularly given the time constraints they had to work under, staff has done an impressive job on their review of this standard and I appreciate their hard work and dedication. Most of the injury reduction we have seen in baby walkers over the last fifteen years is due to their talent and perseverance.