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AIRBAG DEACTIVATION: IMPLICATIONS FOR MOTORISTS AND AUTO INSURERS

A new rule on airbag deactivation is expected from the National Highway Traffic Safety Administration (NHTSA) within the next few weeks. NHTSA has proposed permitting dealers and repair shops to deactivate the airbags of any owner who requests it, a change from current policy requiring case-by-case approval and granting of requests only with medical justification. If a more permissive deactivation policy is adopted, the method could be either disconnection or retrofitting airbags with on/off switches.

This proposal has aroused controversy. Automakers, dealers, and airbag suppliers in particular have vigorously opposed more permissive deactivation. Plus there has been a lot of misleading media coverage. For example, many reporters have equated more permissive deactivation with widespread deactivation, when clearly the two are not the same. The Institute is unaware of any group that supports widespread deactivation.

Who's at Risk?

In controversial matters such as these, especially when there's so much misleading information in the media, it's useful to review the relevant research. What it shows is that most of the problems have involved unbelted adults and children. Among belted drivers, only a very small number are potentially at risk of serious injury from inflating airbags. They are at risk not because of their gender, height, or age but because of their driving positions. Anyone very close to, or on top of, an airbag as it first begins to deploy is at risk. This includes predominantly unbelted drivers, but research by the Institute, NHTSA, and Transport Canada shows that a belted driver whose driving position puts the chest closer than 10 inches from the steering wheel also can be at risk. Simply using a safety belt and sitting 10 or more inches away from the steering wheel virtually eliminates the risk.

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The Insurance Institute for Highway Safety and the Highway Loss Data Institute are independent, nonprofit scientific and educational organizations dedicated to reducing the losses — deaths, injuries, and property damage — from crashes on the nation's highways. This work is wholly supported by automobile insurers.

On the passenger side, the key to risk also is position. Adults who buckle up and sit back virtually eliminate any risk, but the situation is more complicated for infants and children. Babies in rear-facing restraints should never be placed in front seats with active passenger airbags. Older children aren't at risk if the seat is all the way back, they are properly restrained, and they sit back in the seat. Sitting back is important. A belted child leaning forward to fiddle with radio dials, for example, can be at risk because the head could be close to the airbag. Riding in back is safer with or without airbags.

Although rear seating is beneficial for infants and children, there are a few circumstances when youngsters may need to ride in the front seats of airbag-equipped vehicles. An example is when an infant requires constant medical monitoring or when there are more children than there are back seats with proper restraints. For the few adults and children who cannot position themselves to avoid the risk, airbag deactivation might make sense.

Implications for Insurers

The decision to permit airbag disconnection or on/off switches involves consequences for insurers who offer premium discounts for airbags. Such discounts for airbag-equipped cars shouldn't apply to vehicles with disconnected airbags. But how will insurers know if the airbags in any given vehicle are operable? And should a discount apply to vehicles with on/off switches?

Whatever deactivation policy NHTSA adopts, it should be aimed at the more than 60 million cars already equipped with airbags because the risks will be greatly reduced in 1998 and later models. Most of these cars will have depowered airbags (that is, airbags with less powerful inflators), so sitting closer to the steering wheel than 10 inches will pose a smaller risk to drivers than before. On the passenger side, the risks for infants and children will be reduced but not eliminated. More advanced airbag systems will dramatically reduce the risks and should eliminate the need for deactivation, but this technology still is several years away from widespread use.

There's no doubt that airbags are saving lives and preventing serious injuries every day, and whichever way NHTSA decides to go on deactivation — permissive or only with government permission — it will be a tragedy if the result is widespread deactivation. The Institute is ready to release appropriate print and video materials to discourage widespread deactivation shortly after NHTSA announces its decision.

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