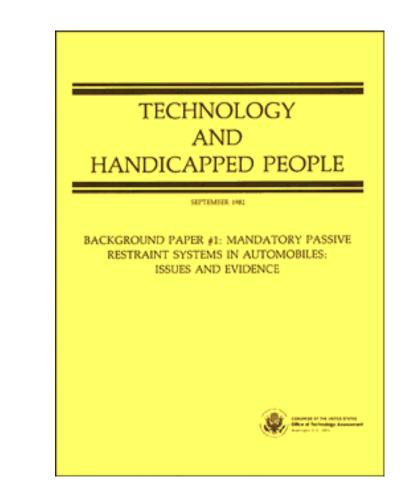
Mandatory Passive Restraint Systems in Automobiles: Issues and Evidence

September 1982

NTIS order #PB83-159822



TECHNOLOGY AND HANDICAPPED PEOPLE

SEPTEMBER 1982

BACKGROUND PAPER #1: MANDATORY PASSIVE RESTRAINT SYSTEMS IN AUTOMOBILES: ISSUES AND EVIDENCE

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OTA Background Papers are documents containing information that supplements formal OTA assessments or is an outcome of internal exploratory planning and evaluation. The material is usually not of immediate policy interest such as is contained in an OTA Report or Technical Memorandum, nor does it present options for Congress to consider.



CONGRESS OF THE UNITED STATES Office of Technology Assessment Washington, D C 20510 Library of Congress Catalog Card Number 82-600546

For sale by the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402

Foreword

Technology exerts a powerful influence over the lives of everyone, making life easier, more fulfilling, but sometimes more painful and frustrating. This is especially true for people with disabilities. The appropriate application of technologies to diminishing the limitations and extending the capabilities of disabled and handicapped persons is one of the prime social and economic goals of public policy.

The Federal Government is deeply involved in programs that affect the development and use of technologies for disabilities. Congress and other institutions have been increasingly interested in how well programs that directly develop technologies and support their use have been performing. The Senate Committee on Labor and Human Resources requested the Office of Technology Assessment (OTA) to conduct a study of technologies for handicapped individuals. That study examined specific factors that affect the research and development, evaluation, diffusion and marketing, delivery, use, and financing of technologies directly related to disabled people. The problems and processes of the development and use of technologies were analyzed in the context of societal allocation of resources and the setting of goals for public policy. The main report of the study Technology **and Handicapped People** was released in May 1982.

This case is background paper #1 of the study. A number of case studies will be published as part of the assessment, and each will be issued separately. The case studies were commissioned by OTA both to provide information on specific technologies and to gain lessons that could be applied to the broader policy aspects of technology and disability.

Drafts of each case study were reviewed by OTA staff; by members of the advisory panel to the overall assessment, chaired by Dr. Daisy Tagliacozzo; by members of the Health Program Advisory Committee, chaired by Dr. Frederick Robbins; and by numerous other experts in medicine, disability policy, Government, economics, public interest and consumer rights, and rehabilitation engineering. We are grateful for their assistance. However, responsibility for the case studies remains with the authors.

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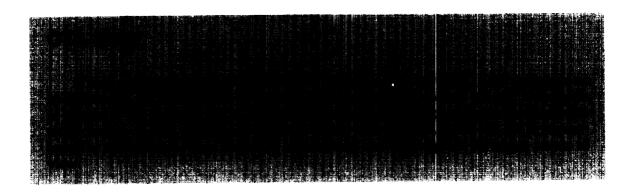
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