

Protecting Children and Youth:

Canada speaks out on preventing traumatic spine
and head injuries in amateur hockey



Rick Hansen Institute
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Preliminary Report

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Protecting Children and Youth: Canada speaks out on preventing traumatic spine and head injuries in amateur hockey

The **Rick Hansen Institute**, in partnership with **ThinkFirst** (a national non-profit dedicated to preventing brain and spinal cord injuries) and the **Canadian Paediatric Society**, engaged **Angus Reid Public Opinion** to conduct a survey on public support for changes in minor hockey to reduce the incidence of serious head, neck, back and spine injuries among Canadian youth. There is now compelling scientific evidence that children are at higher risk for head and neck injuries such as concussions and spinal cord injuries, when body checking is allowed. With support from the Canadian public, including the parents of hockey players, the Rick Hansen Institute is calling for steps to reduce head trauma for those under the age of 14. By doing so, sports-related injuries will be dramatically reduced and will save Canada's health care system millions of dollars in treatment and rehab care.

The Rick Hansen Institute is a Canadian-based not-for-profit organization with the goal of creating a world without paralysis after spinal cord injury. It works towards this goal by accelerating research and translating clinical findings into practical solutions to develop new treatments, improve care and reduce the cost burden on the Canadian health care system. To learn more about the Institute, please visit www.rickhanseninstitute.org.

Methodology: From February 22 to February 26, 2013, Angus Reid Public Opinion conducted an online survey among 2,017 Canadian adults who are Angus Reid Forum panelists. The survey included three distinct representative samples: a sample of 1,013 randomly selected Canadian adults, a sample of 502 parents of children who currently play hockey in a team as part of extracurricular activities, and a sample of 502 adults who regularly attend, listen to or watch hockey. The margin of error—which measures sampling variability—is +/- 3.1% for the sample of Canadian adults, and +/- 4.5% for the samples of parents and fans. The national results have been statistically weighted according to the most current education, age, gender and region Census data to ensure samples representative of the entire adult population of Canada. Discrepancies in or between totals are due to rounding.

Throughout this report, the samples are described as:

- **Canadians:** 1,013 randomly selected Canadian adults
- **Parents:** 502 randomly selected Canadian parents of children who currently play hockey in a team as part of extracurricular activities
- **Fans:** 502 randomly selected Canadian adults who regularly attend, listen to or watch hockey

QUESTIONS AND RESULTS

Which of the following sports, if any, do you feel carry a significant risk of head, neck and brain injuries? Please select all that apply.

	Canadians	Parents	Fans
Hockey	87%	83%	92%
Football	82%	83%	86%
Boxing	82%	75%	83%
Skiing / Snowboarding	74%	75%	70%
Rugby	61%	67%	62%
Mixed Martial Arts	60%	55%	63%
Horseback Riding	53%	54%	47%
Mountain Biking	48%	49%	47%
Lacrosse	31%	48%	30%
Soccer	28%	25%	24%
Basketball	14%	10%	11%
Baseball	14%	9%	10%
None of these	2%	2%	0%
Not sure	1%	1%	1%

The perceived danger of injury is above 80% for hockey among both Canadians and Parents, and reaches 92% among Fans.

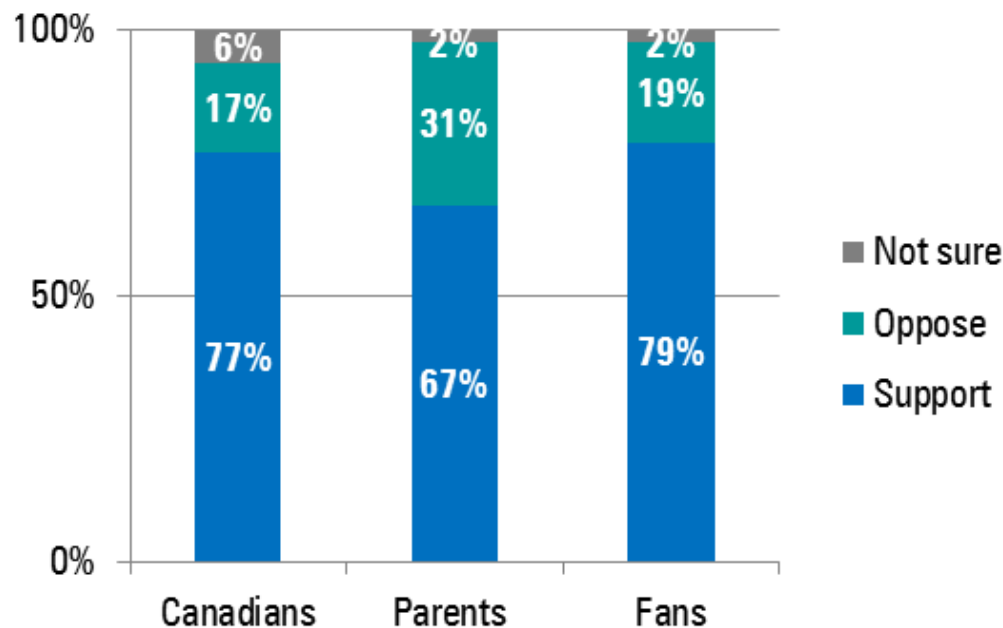
Have you, or someone you know, ever sustained a concussion or serious head, neck, back or brain injury as a result of playing any of the following sports? – *“Yes” listed*

	Canadians	Parents	Fans
Hockey	34%	67%	37%
Skiing / Snowboarding	22%	35%	23%
Football	20%	32%	24%
Horseback Riding	15%	20%	14%
Boxing	12%	13%	10%
Rugby	10%	19%	10%
Mountain Biking	10%	14%	12%
Mixed Martial Arts	9%	9%	8%
Soccer	9%	16%	7%
Baseball	5%	6%	5%
Lacrosse	4%	10%	3%
Basketball	3%	7%	2%

This question sees a big shift from Canadians to parents, from 34% to 67%. There’s a shift—albeit smaller—on other sports, such as Rugby, Football, Lacrosse and Soccer.

More than a third of Fans (37%) know someone who sustained a concussion or serious injury playing hockey.

As you may know, based on medical evidence linking body-checking to increased head, spinal and other injuries, the Canadian Paediatric Society and other groups have recently recommended that the introduction of body-checking in all hockey leagues be delayed until age 15. Thinking about this, would you support or oppose delaying the introduction of body-checking in amateur hockey for players aged 15 and above?



Highest level of support is observed in British Columbia (86%), lowest in Alberta (73%).

No gender gap: support reaches 76% with men and 79% with women.

Two thirds of Parents (67%) and four-in-five Fans (79%) support delaying body-checking.

Thinking specifically about body-checking in hockey, would you agree or disagree with establishing a uniform, national policy that would eliminate body-checking for these age groups?

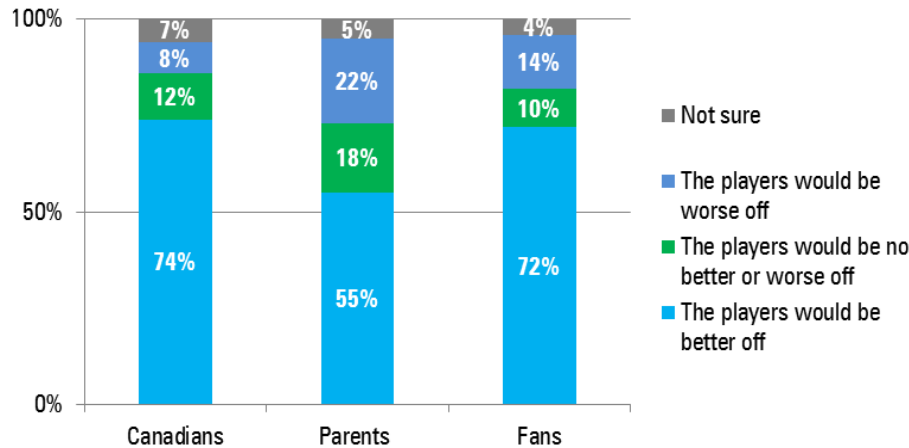
– *“Agree” listed*

	Canadians	Parents	Fans
Peewee (11 to 12 years)	88%	75%	86%
Bantam (13 to 14 years)	82%	62%	79%
Midget (15 to 17 years)	63%	45%	58%

Majorities of Canadians support the national policy, but Parents are not as certain about having it in place for Midget (only 45%, compared to majorities for Peewee and Bantam).

Most Fans are in favour of implementing a policy for all three groups.

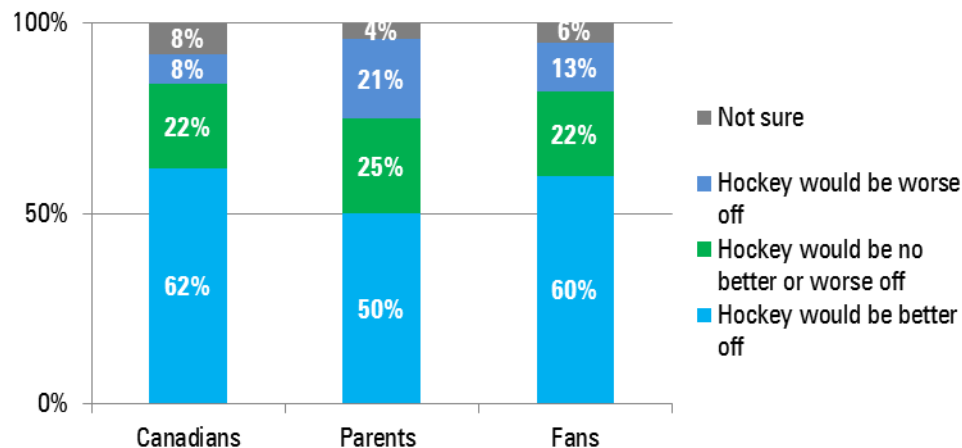
In your view, what impact, if any, would eliminating body-checking for players younger than 15 have on the players themselves?



Most Canadians, Parents and Fans think players will be better off.

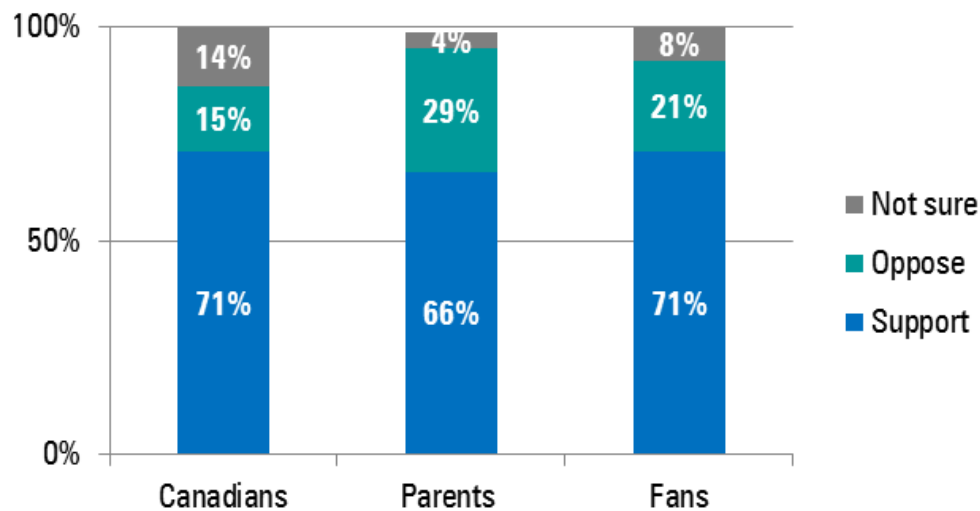
While the idea of the directive having a detrimental effect reaches 22% among parents, it is still significantly lower than the proportion who see benefits.

In your view, what impact, if any, would eliminating body-checking for players younger than 15 would have on hockey?



Similar situation, with most Canadians and Fans—as well as half of Parents—thinking the game will be better off.

As you may know, youth hockey leagues in Canada currently combine age groups together (such as Pee wee for 11-12 years, Bantam for 13-14 years and Midget for 15-17 years) thus grouping children of significantly different size and development. Medical experts recommend that children compete against other similar aged children for competition and that leagues are organized by one year increments, to reduce the risk of injury to younger and smaller children in hockey. Thinking about this, do you support or oppose organizing youth hockey leagues in Canada by one year age ranges rather than combining age groups?



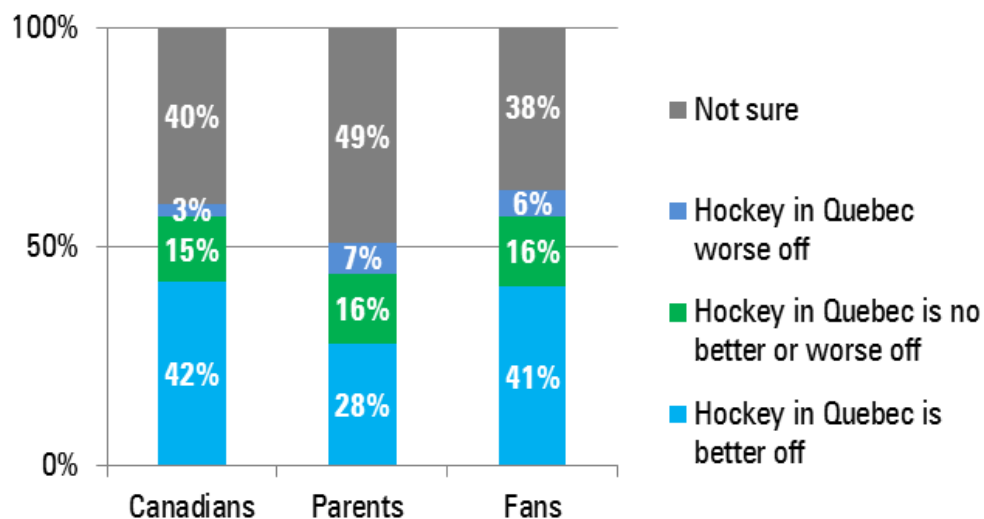
Highest support in Quebec, British Columbia and Atlantic Canada (75%), lowest in Alberta (55%).

75% of women support the change, compared to 67% of men.

Two thirds of Parents (66%) support the change—three-in-ten (29%) disagree.

Seven-in-ten Fans (71%) support the change—one-in-five (21%) disagree.

As you may know, Quebec eliminated body-checking in hockey for all children age 12 and under. From what you have seen, read or heard, what impact, if any, has eliminating body-checking for players younger than 12 has had on hockey in Quebec?



As expected, we have many undecided respondents on this question.

In Quebec (among all Canadians), “better off” is at 59%, “worse off” at 3%.

In Quebec (among Parents), “better off” is at 76%, “worse off” at 9%.

In Quebec (among Fans), “better off” is at 63%, “worse off” at 6%

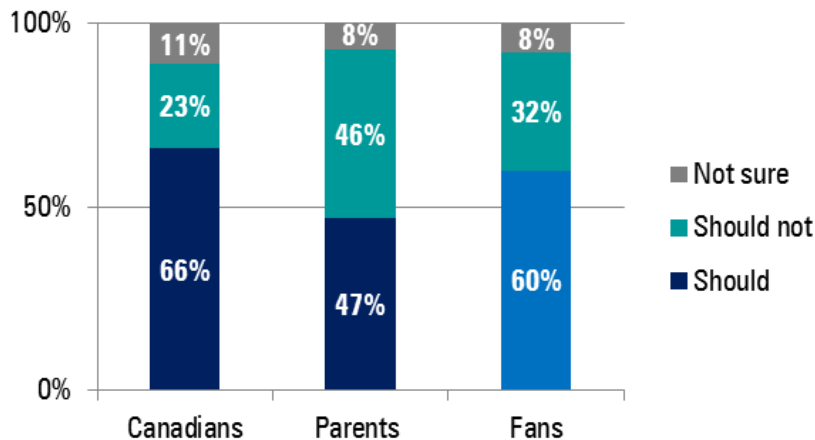
As you may know, studies by medical experts have shown that there is a link between the size (width) of the ice surface and the rate of traumatic brain injuries (concussions). If it meant reducing the rate of traumatic head, neck or back injuries, would you support widening the ice (playing) surface for hockey?

	Canadians	Parents	Fans
Support widening by 5 feet	13%	12%	11%
Support widening by 10 feet	13%	16%	10%
Support widening by 15 feet (Olympic/International sized ice surface)	41%	46%	53%
Oppose widening	7%	8%	8%
Not sure	27%	19%	18%

While short of a majority, an Olympic-size ice surface is the preferred course of action for Canadians and Parents.

Among Fans, more than half (53%) would be content with an Olympic-size ice surface.

In view of the medical evidence linking body checking with injuries, do you think minor hockey associations which do not eliminate body-checking should be held liable for health care and other related costs?



Highest incidence of “should” responses is seen in Quebec (79%), lowest in Alberta (45%).

Respondents aged 55 and over (76%) more likely to side with liability than younger respondents (60% for 35-to-54, 62% for 18-to-34).

There’s an even split among Parents on this question, but Fans lean towards liability by a 2-to-1 margin (60% to 32%).

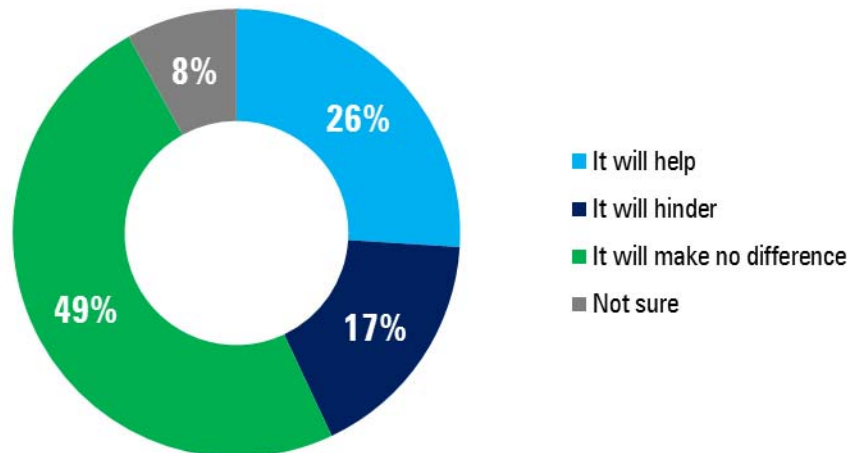
FOR PARENTS ONLY

Have you considered any of the following over the past year? Please select all that apply.

Moving your child into non body-checking leagues hockey	16%
Encouraging your child to play another sport instead of hockey	11%
Pulling your child from hockey	8%
None of these	74%

Three-in-four Parents are not thinking of any measures to deal with their hockey-playing kids, although about one-in-six have considered moving them to non body-checking leagues.

Do you think introducing body checking at a later age will help, hinder or make no difference in your child continuing to remain physically active and playing hockey as an adult?



Only 17% think delaying body-checking will hinder their child—half (49%) believe it will make no difference and one-in-four (26%) think it will be helpful.

Why is your child playing amateur hockey? Please select all that apply.

Hockey is a good source of physical activity	81%
Hockey is the winter sport of choice	61%
My child's friends are playing hockey	50%
Hockey is our national sport	34%
I played hockey as a kid	23%
My child has potential to play professional hockey	7%
None of these	6%

The main motivator for parents is seeing hockey as a good activity source.

Only 7% believe their child has the potential to play professionally.

The Rick Hansen Institute would like to thank ThinkFirst, Dr. Carolyn Emery of the University of Calgary and the Canadian Paediatric Society for their support on the survey; and Angus Reid Public Opinion (www.angus-reid.com) for conducting the survey.

The Institute also thanks the following funders for their financial support: Health Canada, Rick Hansen Foundation, Western Economic Diversification and the governments of BC, Alberta, Saskatchewan, Manitoba, Ontario, New Brunswick, Yukon Territory.

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