

Body Checking In Minor Hockey – Get the Facts

After spending 25 years in minor hockey as a parent, coach, instructor, organizer, NCCP course facilitator, master course conductor, now a grandparent and passionate supporter of youth hockey I have gained a great appreciation of what our game means to us and how much it can affect our lives. I am a true believer that every child in Canada should have the opportunity to participate. There is a controversy raging about “body checking in minor hockey”. About 20 years ago I can remember myself saying we should start checking at a younger age. Today I shudder at this thought. Experience has convinced me otherwise. What we all need to do is get the facts. It is only through having some knowledge that we can deal with this issue. Here are some of the questions and comments that I have heard:

1. Does Body checking really cause an increase in injuries?
2. That’s not how we played when I was a kid
3. What about the players who play house league one year and on a representative team the next?
4. We should start earlier
5. We should train kids better, and then they won’t get hurt.
6. Other sports are just as bad. You can get hurt no matter what you do.
7. My kid will quit.

These are all questions parents ask, and should ask. Parents want answers. Parents want what is best for their children, as they should. Thanks to the Internet, a lot of the answers can be easily found. Go to any search engine and type in something like “body checking youth hockey” or “injury rates minor sport”. Other words and phrase you can try include “concussion” or “sport injuries”. It will not take you too long to find some interesting results. Also try to find out what is happening in other areas of the country and in other countries. Keep asking questions. What you find out may surprise you. Here is some of what I have found.

One of the best sites I found was at “Capital Health Alberta”. They have information sheets, public surveys, research articles and posters. Check out the “info sheet”. It leads you to 16 references on body checking and injuries. Read the “infosheet” and / or check out these references. Some of the studies can be hard reading for some of us, but they do contain a lot of interesting information.

Here is some of what I found out.

Body checking is the primary mechanism of injury in minor hockey players. The evidence shows that body checking accounts for at least 45 per cent of injuries and as much as 86 per cent of injuries.

45%, Emery C, Meeuwisse W. Injury Rates, Risk Factors and Mechanisms of Injury in Minor Hockey. *American Journal of Sport Medicine*, 2006.

86%, Benson BW, Meeuwisse WH. In: Maffuli N, Caine DJ, editors. *Epidemiology of Pediatric Sports Injuries: team sports*, 2005.

Among young hockey players (18 and under) 62 per cent of injuries were a result of checking. Injuries caused by body checks are most common in the 14 to 16 group, after players have been exposed to checking for several years. *Canada Safety Council*

A study took a look at the rate and severity of injuries for 11 year olds following the introduction of body checking at that age level in 2002. The results clearly show that 11 year olds exposed to body checking (Peewee Level) sustained twice the rate of injuries and twice the rate of severe injuries, compared with those not exposed to body checking (Atom Level). *Capital Health*

“Researchers compared injury rates among 28 bodychecking Peewee teams (12–13 years old) and 21 nonbodychecking Peewee teams in Quebec for one season. They found a 12-fold greater fracture rate in the bodychecking leagues.” (In Ontario) “The researchers found a higher proportion of head injuries and fractures in the bodychecking leagues compared with the non-bodychecking leagues among the Atom (10–11 years old), Peewee (12–13 years old) and Bantam (14–15 years old) players.” *Canadian Medical Association Journal* (2006)

Any branch that permits body checking for young children must consider its exposure to legal liability. Checking is inherently dangerous with potentially catastrophic results. Claims for spinal cord injuries and concussions from checking send insurance rates skyrocketing. [Canada Safety Council](#)

Hockey-related injuries among males (age 6 to 17) from 1994 to 2004 from five Ontario hospitals:

8,552 – Total injuries, not including accidental collisions

4,460 – Total injuries attributable to bodychecking (e.g. “cross checked,” “hit from behind,” “elbowed,” “hit into boards”)

268 – Total concussions attributable to bodychecking

2 – Increased odds of bodychecking injury in Atom division (9- to 10-year-olds) after bodychecking allowed

10 – Increased odds of concussion in Atom division after bodychecking allowed

Conclusion

In our study, the odds of injuries, especially injuries to the head and brain, increased when bodychecking was allowed among younger players. The increased odds were noted in the first year of exposure to bodychecking and were sustained during all subsequent years. Players not exposed to bodychecking did not show any changes in rates of injury over time. This study has contributed to the extensive evidence base that bodychecking causes substantial risks of all types of injuries, especially injuries to the head and brain. Although bodychecking can have the effect of intimidating those who receive the bodycheck, there is no evidence that this has any beneficial effect for any player, team, organization or for the sport.

Stakeholders such as hockey organizations, insurers, sponsors, the media, parents and players should commit to multifaceted approaches to reduce the risks of injury in ice hockey. In addition to eliminating bodychecking from the sport and changing the rules of the game, educational, legal and financial approaches ought to be introduced to reduce the risk of injury and to correct those factors that contribute to risk and attrition from the sport. [Open Medicine, A peer-reviewed, independent, open-access journal.](#)
[Effect of bodychecking on rate of injuries among minor hockey players](#)

A new study from Hasbro Children's Hospital finds visits to emergency departments for concussions that occurred during organized team sports have increased dramatically over a 10-year period, and appear to be highest in ice hockey and football. The number of sports-related concussions is highest in high school-aged athletes, but the number in younger athletes is significant and rising. The study is published in the September 2010 issue of *Pediatrics* and is now available online ahead of print. [ScienceDaily \(Sep. 13, 2010\)](#)

The number of concussions diagnosed in youth athletes has risen considerably over a recent 10-year period, according to researchers from Hasbro Children's Hospital in Rhode Island.

- Concussion rates were highest as seen in ice hockey and football players. For every 10,000 7- to 11-year-olds playing hockey, 10 suffered concussions. Among football players of that age, the rate was eight concussions. In the comparative 12-to-17 age bracket, those rates jumped to 29 (hockey) and 27 (football).
- Overall, concussions among 14- to 19-year-olds playing organized team sports jumped more than 200 percent from 1997 to 2007, even as participation among 7- to 17-year-olds in the five most popular sports – football, basketball, baseball, soccer, and hockey – decreased by 13 percent.

[Playbook \(August 31, 2010\)](#)

A new study led by a Toronto neurosurgeon dispels the myth that hockey is safer when bodychecking is introduced to younger players. Dr. Michael Cusimano's [study](#) shows that when Hockey Canada introduced bodychecking to Atom-level players in the late '90s, the odds of an Atom player getting a concussion were 10 times greater than before the rules changed. “One of the prevailing thoughts is the earlier you teach kids to give and take a bodycheck, the safer it is,” said the lead researcher. “There is no shred of evidence to support that whatsoever. All you do is expose these kids earlier to risk, and more kids having brain injuries.” [Toronto Star \(March 16, 2011\)](#)

Some other interesting information I have found:

- The "Minor Hockey Alliance of Ontario" does not have body checking in house league.
- Many minor hockey leagues in the "Ontario Minor Hockey Association" have no body checking.
- In some areas private leagues "Toronto Non Contact Hockey League" for example, are starting up to fill the void and apparently are being successful.
- The province of Quebec prohibits body checking until the Bantam level (age 13 to 14 since 2002, age 14 to 15 pre 2002) and restricts body checking to elite level teams. The Quebec International Peeewee Hockey Tournament, is one of the most popular peewee tournaments in the world and is played with no body checking
- USA Hockey is to vote in June at their Annual General Meeting on a rule change to ban body checking until players turn 13. Presently the age is 11.
- The number of hockey players in Canada is somewhere around 570,000. Apparently this number has been fairly consistent in recent years, yet the number of boys playing has been declining. The number of girls playing is offsetting this.
- Hockey Calgary president Perry Cavanagh expects a motion at the annual general meeting in June regarding body checking at the peewee level.

Lets go back to those seven questions and comments

1. Does Body checking really cause an increase in injuries?

Studies show a 45% to 86% increase and further to that there are an overwhelming number of studies showing the same thing. It can no longer be denied.

2. That's not how we played when I was a kid

The Hasbro Children's Hospital study showed a 200% increase in concussion rates over a 10-year period in the five most popular team sports, even as participation decreased by 13 percent. There is a general consensus that the game of hockey has changed. No one seems to be able to pinpoint exactly why. The game is faster, the skill level is higher and there have been major changes in the equipment. Lack of respect is being mentioned a lot. The truth is that injury rates are going up. Howie Meeker was recently quoted as saying "When I played, I was 165 pounds and I was a toughy".

3. What about the players who play house league one year and on a representative team the next.

This is a legitimate issue but there are ways to deal with it. First and foremost every player whether on a representative or house league team needs to learn the first three steps to checking. They need to know positioning and angling. They need to know stick checks. They need to know contact and contact confidence. These should be taught to all players from the novice level and up. They should also be reinforced every year. Along with this goes the teaching of how to protect yourself and others. Where is the danger zone and how to go into the boards are essential skills. Hockey is a contact sport and there will always be body contact. Only the fourth step is teaching actual body checking. If players have been taught the first three steps learning the fourth is not that difficult. There is also the affiliated player rule. These "Aps" should be going to some of the team's practices. Larger associations also have "Additional Entry" and / or "Minor" age teams.

4. We should start earlier

The "Open Medicine" review showed a 2 times increase in injury when checking was allowed in the Atom division. They also found a 10 times increase in concussion.

5. We should educate and train better, and then they won't get hurt.

When body checking was allowed in the Atom Division in the Ontario Hockey Federation, the Ontario Minor Hockey Association insisted that every coach who coached one of these teams must have taken the "Teaching Checking" module, even if they would not be normally due to be recertified. Injuries rates still went up. Furthermore the Canada Safety Council states "Injuries caused by body checks are most common in the 14 to 16 group, after players have been exposed to checking for several years".

6. Other sports are just as bad. You can get hurt no matter what you do.

The Hasbro Children's Hospital study shows that of the five most popular sports – football, basketball, baseball, soccer, and hockey, hockey had the highest rate of injury and concussion followed by football.

7. My kid will quit if there is no body checking.

Lets look at what happened in other associations that have recently gone "no body checking". I contacted some associations to get their perspective. Some of the responses I got.

- "Definitely increased our registration numbers. Our older HL teams at Midget/juvie went up from 10-12 teams to 20 teams last season and 22 teams this year. It seems to keep kids playing longer as they get older. Less hurt the next day and less fighting. Be prepared for noise from the vocal minority. But the silent majority will approve and players will return to play if they feel they will less likely to get hurt".
- " adopted non contact in house league quite a few seasons ago. It was well received and our numbers did not change. Stick work increased a little but with the education of our coaches and assistance of the Referees Association, all issues were kept well under control."
- "In 2008-09 we went to no checking in houseleague all divisions. The previous two years we had did this in our combined midget/Juv divisions. We did get some pushback from parents but it really was a more positive reaction with most. We didn't experience a drop in enrollment at all."

I have had several other people state that enrollment in their association went up sometimes dramatically. I have found no association that reported a decline in enrollment. Players, particularly older players often say they will quit. There does sometimes seem to be this "macho" mentality. When it comes right down to it very few do actually quit. "Peer pressure" is often a factor.

What can we do to make minor hockey safer for our players. From my experience and what I have learned over the years there are things we can do better and there are changes that can be made.

1. Education is key. The first group we need to educate is the parents. Most coaching staff members in minor hockey are parents. Most local executive members are made up of parents. Parents, coaches and local executives need to know the steps in teaching checking and when they are appropriate. Then we can concentrate on the players. Skills must be taught to both house league and representative league players. Understanding the difference between "Body Checking" and "Body Contact" is important as is seems most people do not know the difference. What is taught to the players needs to be reinforced by all others.
2. There is no need for body checking in recreational house leagues. Safety and numbers will go up without it. The end goal is for players to continue to play hockey and make it a life long enjoyable activity.
3. We need to seriously look at what age is it appropriate to introduce body checking for our representative teams. At the 11 and 12 year age group there is a wide range of physical size. Some kids have already gone through there "Peak Height Velocity" (PHV); better know as "growth spurt". You can have 60 pound child playing against 160 pound child. Is this appropriate time to introduce body checking? The most important skills in hockey are the fundamental technical skills of skating, passing and shooting. Once body checking is introduced these skills seem to often get neglected.

More than any thing else we need to keep the game in perspective. Why do kids play hockey or any organized sport? Kids want to have fun. Hockey should always be a positive experience. More often than not it is the grown ups who take the fun out of hockey. Hockey offers many rewards. Even if they do not make it to the NHL.

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