In reviewing the presented material there are two significant points to be considered:

- The statistical figures and conclusions presented in the study are seriously flawed and inconclusive, as the methodology of the study has serious errors and inconsistencies.
- The Statement's concluding recommendations to limit the starting age for boxing don't take into account the unique community related social role of boxing and its character-forming impact on the inner-city youth in the critical teenage years from 11-18 years.

**The Role Of Boxing In The Formative Teen-Age Years.**

Boxing is generally known as the most "all-around" sport activity, developing all parts of the body and their functions (muscles, lungs, heart), speed, flexibility, strength and endurance. A known additional characteristic of boxing is also its unique feature of developing personal courage, the ability to stay calm and focused under pressure.

However, boxing is also the **ONLY** sport that is readily available to inner-city youth that addresses the critical aspects of the teen-age years of inner city youth, exposed to the danger of developing anti-social tendencies and finding fulfillment in gang-related activities.

- Building positive self-confidence, self-image and self-reliance
- Channeling aggression into a constructive outlet of energy in a well-controlled competitive environment
- Developing a constructive team-spirit, the ability to set individual and sports-team related achievement goals
- Respecting rules and learning courteous and disciplined behaviour.
- Taking responsibility for own actions and results achieved
- Developing an understanding for a healthy lifestyle.

Boxing Clubs and boxing youth programs are typically located and function in inner-city communities, where teen-agers in the critical 11-18 years age range frequently come from low-income and single-parent house-holds, often lack proper guidance and are therefore at high risk of becoming involved in gang activities, as gang membership offers security within the group, self-importance, a form of social support, and community involvement – features that are often lacking in the lives of these young gang members.

Therefore membership in boxing clubs offers a positive self-image building environment, the coaches typically take on the missing roles of the guiding mentor and confidant of these youths.
None of the other sports is so tied into the community and has such a specific character-building and anti-gang mentality building focus as the sport of boxing.

Other sports, such as tennis, hockey, swimming, running are either very costly (tennis, hockey), or just build specific sports skills, without focusing on the personal development of the young athletes. Some actually encourage uncontrolled violence (hockey) or tend to develop an elitist mentality (tennis).

Therefore the function of youth boxing can not be narrowly viewed only from the purely sport-related technical skills, but must by evaluated also from its social community building role.

A sample of a Boxing Club’s Youth related activity is the attached Cabbagetown Boxing Club’s Youth Program.

**The Policy Statement – Flaws and Inconsistencies.**

The use of statistical figures and especially of percentages is inconclusive as the base is constantly shifting and the comparative base figures are mostly not known or are very insignificant compared to the overall population group. Some conclusion in the study can not be proven or contradict the declared purpose of the study

"The overall risk of injury in amateur boxing seems to be lower than in some other collision sports such as football, ice hockey, wrestling, and soccer."

One cited study found:

"... an injury rate of **1.0 injury per 1000 hours of participation for amateur boxers** (15.1–37.1 years of age).

This rate is actually lower than reported high school athlete injury rates of

4.4 per 1000 athlete-exposures in football,
2.5 in wrestling, and
2.4 in soccer."

The aim of the Policy Statements and statistical research focus is the population of young amateur athletes in the age range of 11-18 years.

Yet through-out the whole Statement the study is constantly using in the majority figures that expressly don’t apply to amateur youth boxing:

- "Most injuries in boxing, both amateur (adults?) and professional, occur during competition (57%), compared with training (43%)".

- "One prospective cohort study documented that more than 70% of injuries in amateur (**average age: 23.7 years**) and professional boxers were to the head....".
• "A prospective cohort study of amateur and professional boxers revealed that 33% of all injuries were concussions."

• "...Yet another study of amateur boxers (median age: 22 years) documented that 13% of matches ended because of concussions".

• "...Another source cited a concussion rate in amateur boxing (age not specified) of 0.58 per 100 athlete-exposures,....".

• "Published injury data in amateur boxing (youth and adult participants) do not distinguish injuries according to age, so it is difficult to delineate injuries that specifically affected children and adolescents".

• "The exact incidence of concussion in children and adolescents participating in boxing has not been published, because studies of amateur boxers do not separate data according to age."

Other parts of the Statement are using data and statistical populations in an uncritical way that are contrary even to the most elementary rules of statistical evaluations:

"Between 1918 and 1997 (79 years!), 659 deaths from boxing have occurred, all from catastrophic brain injury"

8.3 death's per year = Over what number of fights and continents – what was the distribution of events by years? What is the percentage of youth from 11 – 18 years?

It is a known fact that in the early years (cca 1918 and on) boxing matches were not as regulated as in the present highly regulated environment.

Without a proper distribution over the years and without taking into consideration the changes in the boxing environment and the increasing safety rules, using such lump-sum figures is meaningless and does not indicate the present situation or any trends.

The study mentions many sport injuries in general and some boxing related percentages without any comparative base numbers (50% of 2 is less than 10% of 100!!) There are no specific numbers reliably relating to youth boxing.

The whole study is very inconclusive and it could have a significantly negative and damaging effect on a community function that supercedes the narrow aspect of just a sports activity.