



Rescue 50 children drowned daily in Bangladesh

Professor Dr Edris Alam

Chief Executive

Disaster and Development Organization (DADO)

Chattogram, Bangladesh

Phone: +8801711230855

E-mail: dadoinfoines@gmail.com

Web: <http://www.dadobd.org/>

Neglected National Crisis: Child Drowning a Leading Killer

Presentation Outline

- Child drowning burden: key facts
- Drowning is Preventable!
- ABC's of Drowning Prevention
- Strengthening public awareness using strategic communications
- Child Drowning: Myths and Facts
- DADO initiatives for drowning prevention
- Community engagement strategies



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About Disaster and Development Organization (DADO)

Established in 2008, the Disaster and Development organization (DADO) is an independent, non-profit Organization. DADO's work is guided by three foundational principles:

1. Prioritizing initiatives that benefit the most disadvantaged populations.
2. Extending our reach to remote and inaccessible regions.
3. Operating in areas that are highly vulnerable to disaster risks.

Legitimacy

Registered with NGO Affairs Bureau, the Government of Bangladesh

Mission

Our interventions prioritize disadvantaged populations, reach remote regions, and operate in areas vulnerable to disaster risks where supports from government, traditional NGOs and private sectors are limited.



Drowning Burden: Key Facts

- The **3rd leading cause** of unintentional injury death worldwide (7-8%)
- 300, 000 annual drowning deaths worldwide, 822 per day
- The highest drowning rates are among **children 1–4 years**
- One of the top 5 causes of death for people aged 1–14 years
- Australia: leading cause of unintentional injury death in children aged 1–3 years.
- The US: the second leading cause of unintentional injury death in children aged 1–14 years
- **95% of child injuries occur in low-income and middle-income countries.**
- Bangladesh: drowning accounts for **43%** of all deaths in children aged 1–4 years
- Males are especially at risk of drowning, with twice the overall mortality rate of females



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Child Drowning: Key Facts in Bangladesh

- Bangladesh is a greatest delta where water bodies (i.e., pond, ditch, canal, lake, and river) within each 2-3 kms.
- Every year approximately **18,268** children (0-17 years) died from drownings causing **50** per day
- Drowning as the highest cause of deaths in children aged 1–17 years, higher than victims from pneumonia, malnutrition and diarrhea combined
- 80% of drowning among children below 5 years occurred in ponds within 20 metres of the family home
- Lack of child supervision and inability to swim are considered major reasons for child deaths
- Children under 5 years of age, mother being illiterate, and being of lower socio-economic status



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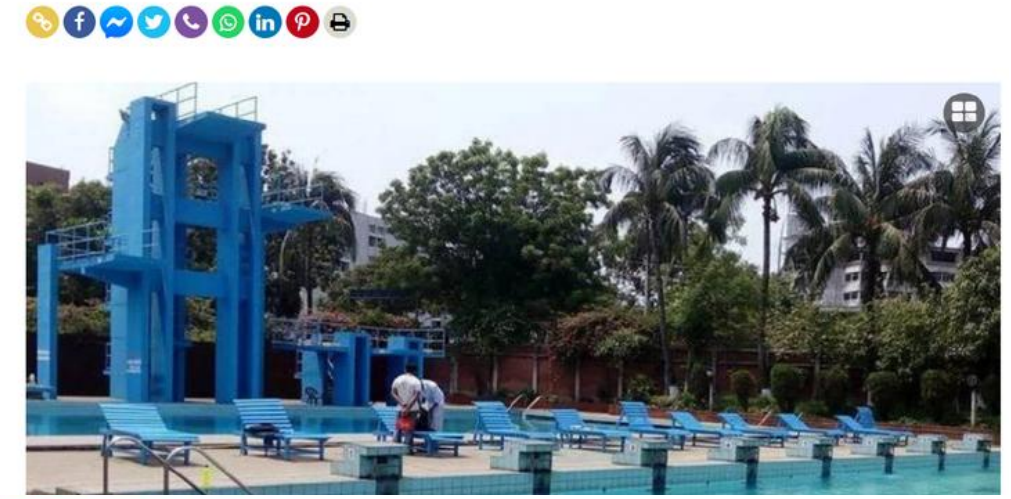
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Drowning: No Age-Sex, Income and Professional Barrier

A Watery Grave: From Matthew Perry To Sridevi, Stars Who Drowned To Death
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Another Bangladeshi Aussie boy tragically drowned in NSW
January 18, 2025 / Admin



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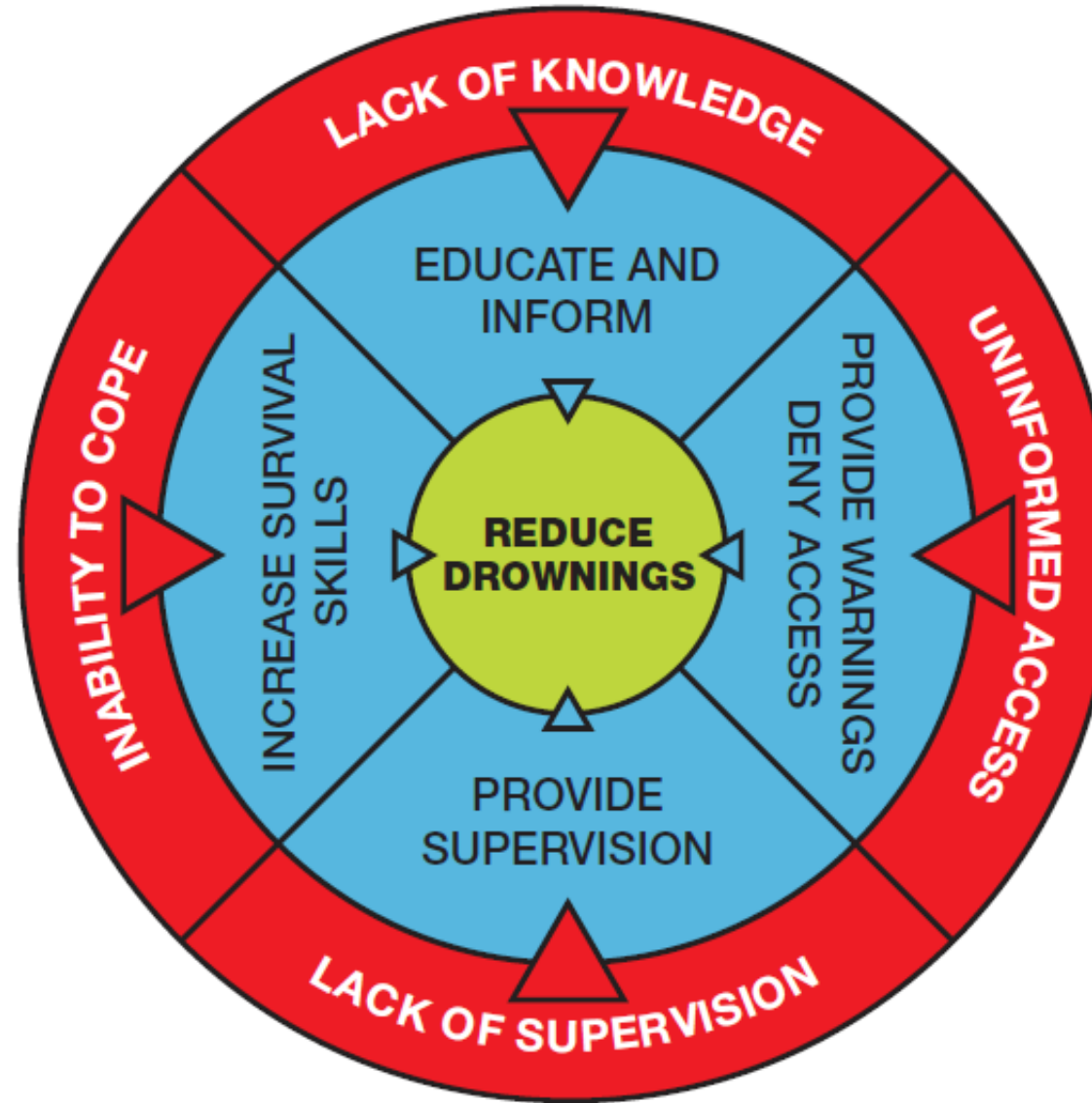
VOLUNTARY COMMITMENTS

SENDAI FRAMEWORK



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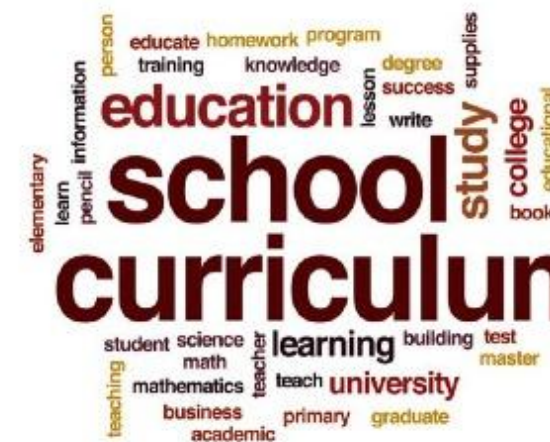
Child Drownings: Key Facts in Bangladesh



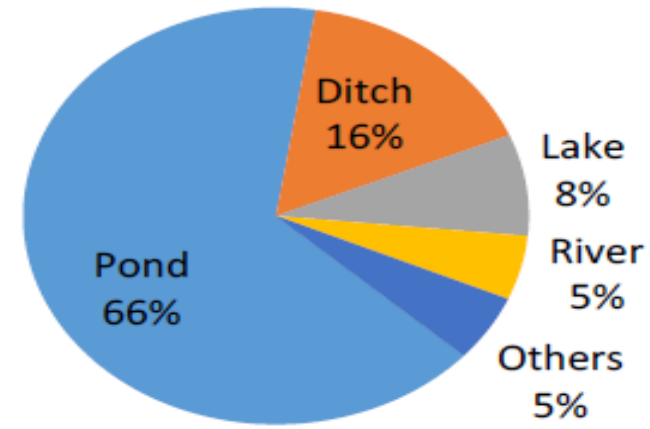
*Drowning Prevention Model
(Adapted from the ILS Drowning Prevention Chain)*



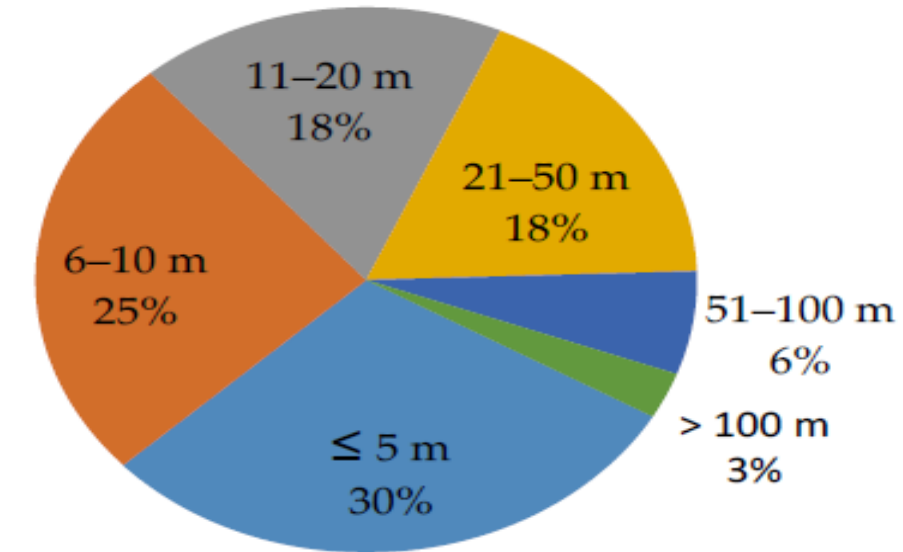
- There is no clear central policy
- Swimming is not part of the school curriculum
- **Many** children can't swim when they leave primary school
- Water safety is not a compulsory part of the curriculum, and is rarely included
- Requiring isolation fencing (four-sided) around swimming pools.
- Ensuring immediate resuscitation.
- Access to open water is plentiful, this is where most drownings occur



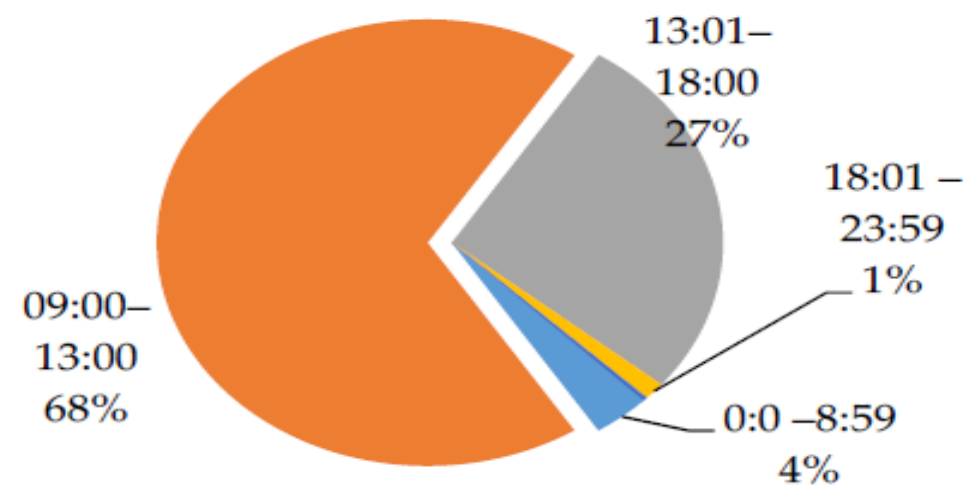
Child Drowning: Key Facts in Bangladesh



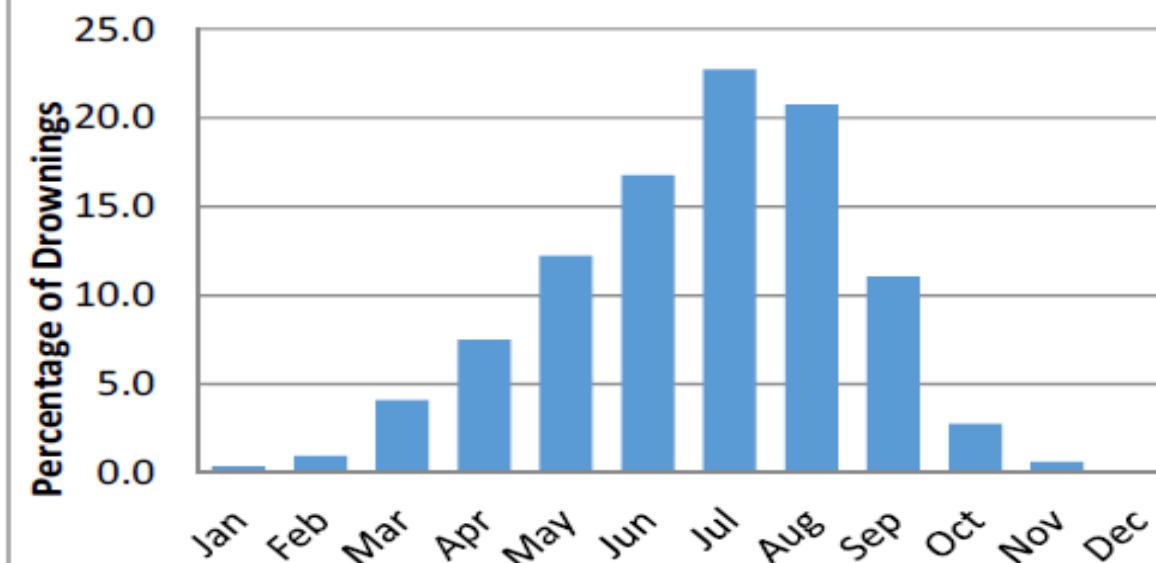
(a) Place of drowning



(b) Distance of water bodies



(c) Timing of drowning



(d) Seasonality of drowning

The Blame Game of Drowning Burdens: Beyond Individual Caregiver Vigilance

The Supervision Myth

Individual Blame

- Historically, child drowning in LMICs like Bangladesh is attributed to individual lapses in caregiver supervision.
- Mothers are frequently criticized for short periods of inattention, transforming deep systemic gaps into a personal moral failing of the parent.

Overwhelming Demands

- Caregivers—predominantly women—are responsible for concurrent tasks: fetching clean water, collecting fuel, agricultural work, and preparing food.
- When natural water bodies lie meters from rural doorsteps, continuous line-of-sight supervision is physically impossible to sustain.

The Structural Reality

- This narrow perspective totally overlooks a complex web of environmental, ecological, and economic hazards.
- Child safety cannot be isolated from natural geography, domestic workloads, and the systemic absence of communal protection.

16h

Average Workday of a Rural Mother

Child drowning: a complex system issue

Multifactorial Dynamics

- Drowning is fundamentally a complex, multifactorial system issue formed by non-linear interactions across environmental, familial, and political dimensions.
- When overall state facilities, tracking systems, and early-childhood infrastructure are severely fragmented, focusing purely on household vigilance becomes an ineffective policy response.



1. Environment

Persistent proximity to natural hazards like ponds, canals, ditches, and temporary floodwaters, compounded by a lack of basic safety barriers near the household.



2. Labor & Gender

Severe demands on maternal time due to domestic, survival, and financial workloads. No formal daycare systems leaves children exposed during peak chore hours (9am - 1pm).



3. Institutional Gaps

Severely fragmented state protective frameworks, limited access to swim-safe education, and lack of persistent public investments in community-level crèches.

Shifting the Paradigm

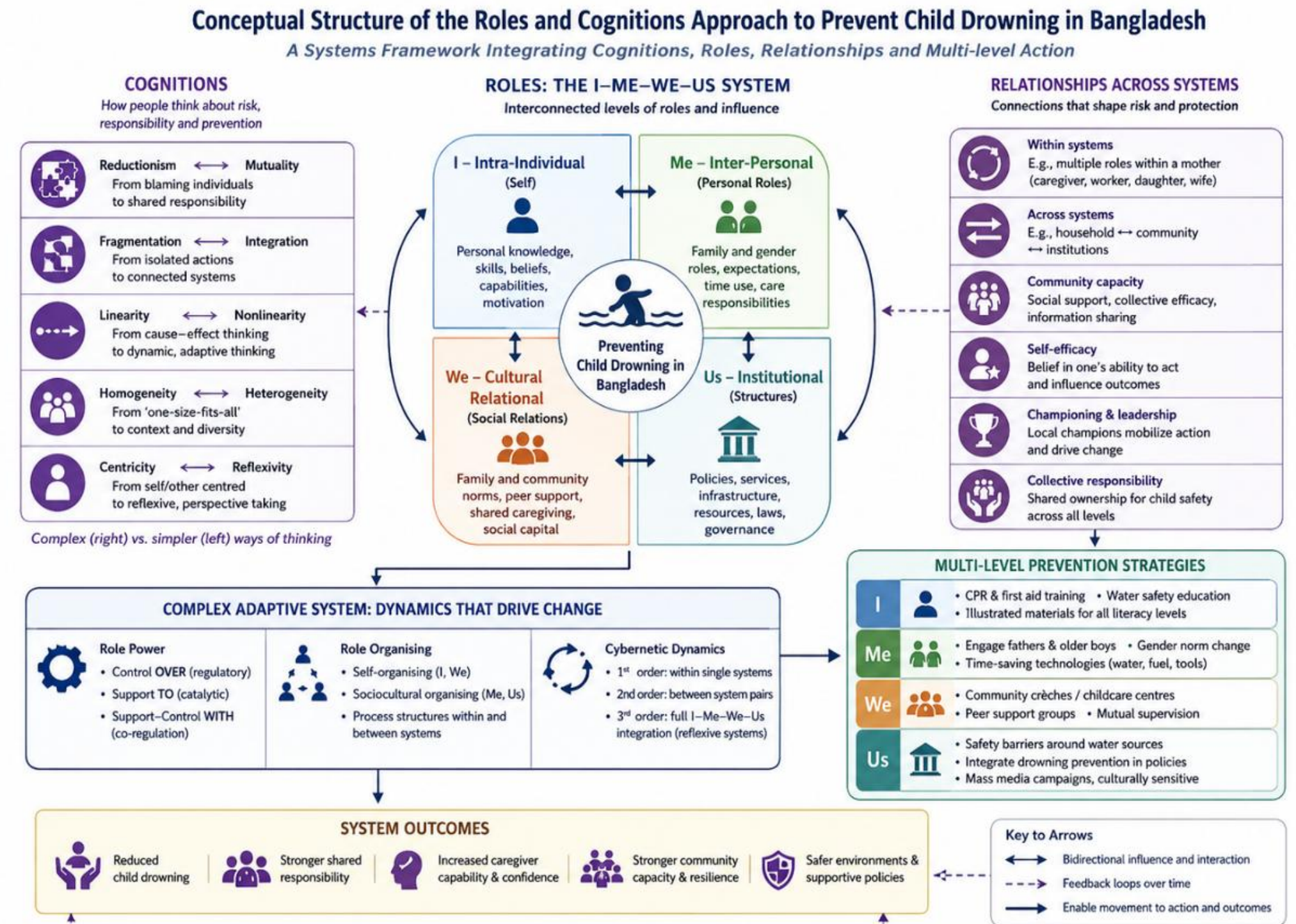
"Drowning prevention is a public service and structural right, not a private household failure."

Resolving the crisis requires addressing the Social Determinants of Health (SDOH).

By replacing individual blame with collective, state-supported protective strategies—such as institutional daycare programs and physical village infrastructure—we can save thousands of vulnerable lives.

Drowning Analysis through Cognitions and Roles Framework

- *Cognitions and Roles framework* conceptualises risk as distributed across four interconnected levels: *individual (I)*, *personal (Me)*, *relational (We)*, and *institutional (Us)*.
- Rather than locating risk solely with individuals, it highlights how relationships and structures at each level shape exposure to harm and capacity for prevention.
- Fully understanding child drowning demands scrutiny of how caregiving roles, cultural expectations, and institutional structures interact within and between these system levels.





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Drowning is Preventable

Four Strategies of drowning prevention interventions:

1. Promote multi-sectoral collaboration
2. Strengthening public awareness using strategic communications
3. Establish a national water safety (drowning) plan
4. Research: advance drowning prevention through data collection and well-designed studies

Six interventions for drowning prevention :

1. Baby-care/day care
2. Installing barriers
3. Teach school-age children
4. Flood risks and other hazards
5. Train bystanders in safe
6. Set and enforce safe boating, shipping and ferry regulations



ABC's of Drowning Prevention

- **A** is for Adult Supervision
- **B** is for Barriers
- **C** is for CPR & Classes





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A is for Adult Supervision



- Supervision during non-water activities
- Children drown without a sound
- **66%** of children who drowned in ponds were not expected to be in or around water so **know where your children are at all times.**
- Supervision during water activities
- Children should be watched by a responsible adult **100% of the time** they are in or near the water.
- Empty all tubs, buckets, containers, kiddie pools immediately after use and turn them upside down

B is for Barriers

- The only proven effective barrier is a 5 feet tall non-climbable fence with self-closing, self-latching gates that completely encloses the pool.
- Secondary barriers include alarms and pool & spa covers
- Playpen
- Install, inspect and always use barriers



C is for CPR & Classes

- Provide all children and adults in your family in swim lessons and water safety training
- Untrained people tend to help others in danger, even in extreme circumstances, and can place themselves at risk of drowning
- Training allows people to act more safely when performing a rescue





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Strengthening public awareness using strategic communications

- **Public awareness** campaigns targeting the general population and decision makers, and **behavior change campaigns** aimed at specific communities or risk groups



Written/Print/Email



Broadcast Media



Social Media



Child Drowning: Myths and Facts

Role playing exercise



Fallacy: A False Idea





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Child Drowning: Myths and Facts

- **Myth:** *“It can’t happen to me. I’m a good parent.”*
- **Fact:** All parents whose children have drowned felt this way. No one believes a drowning could happen to their child or the children under their care. Without layers of protection, no child is safe from the tragedy of drowning.



Fallacy: A False Idea





Child Drowning: Myths and Facts

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- **Myth:** “*Elder siblings are taking care of my child. Many people are around me.*”
- **Fact:** Many children died whilst being take care of elder siblings. Children died in rural Bangladesh even though they were living with many houses with full of people together. You are the main responsible person for your child



Fallacy: A False Idea





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Child Drowning: Myths and Facts

- **Myth:** *“My child is safe because he has swimming lessons.”*
- **Fact:** When a child fell into water bodies alone, he may not behave the same way he does in a swimming lesson because no one is there to rescue him, to tell him to swim or behave in a certain manner.



Fallacy: A False Idea





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Child Drowning: Myths and Facts

- **Myth:** *“My child is safe because he’s inside the house with me.”*
- **Fact:** Don’t assume your child is safe because you last saw him napping or playing. Toddlers move fast. Unless the child is within your direct sight, there is the possibility that he might be in the water.



Fallacy: A False Idea





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Child Drowning: Myths and Facts

- **Myth:** *“I’ll hear my child if he’s in trouble.”*
- **Fact:** Drowning is a silent event. Drowning children don’t splash, cry, or call out for help. Kids drown without a sound.



Fallacy: A False Idea





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DADO has initiated the following drowning prevention interventions

- Courtyard meeting for awareness generation
- Increase the number of CPR provider from each village
- Provide playpen for poor family
- Provide swimming skills
- Develop barrier to water bodies
- Establish childcare center in high poverty prone rural areas
- Social Media campaign
- Nationwide awareness and training campaigns

মতামত

সম্পাদকীয় কলাম চিঠি প্রতিক্রিয়া সাক্ষাৎকার সারণ

৯৯ > মতামত

পানিতে ডুবে শিশুমৃত্যু: একটি অবহেলিত জাতীয় সংকট

প্রফেসর ড. মো. ইদ্রিস আলম

প্রকাশ : ২০ জুলাই ২০২৩, ০৫:০০



YOU can be a role player saving children lives

- Start by sharing knowledge gain with your family members
- Check if children are safe from drownings at your home
- Share knowledge and experience with families, friends, neighbors and relatives
- Share the issue when you gossip with friends
- Family visit for awareness generation
- Conduct courtyard meetings in the neighborhood Develop barrier to water bodies
- Do as much as social media campaign and encourage others to do the same
- Provide playpen for poor families
- Provide swimming skills (Child can start swimming from the age of 3-4 years)
- Getting CPR training from YouTube and certified providers
- Helping form youth campaign committee at your village
- Establishing childcare center in high poverty prone rural areas
- Assist in research and development activities to change policy



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Giving to Disaster and Development Organization

Amount	Impact
\$10	Support a child to attend community childcare Centre
\$25	Provides first-aid training for one caregiver
\$30	Supports the daily operations of a new community childcare center (for 10 kids)
\$50	Funds a community awareness workshop for an entire village (115 people)
\$75	Funds first-aid training for two caregivers
\$100	Funds a community awareness workshop for two villages (230 people)
\$150	Provides first-aid training for six caregivers
\$250	Funds a community awareness workshop for five villages (575 people)
\$375	Funds first-aid training for fifteen caregivers
\$450	Supports the operations of a new community childcare center for fifteen days.
\$500	Funds a community awareness workshop for ten villages (1150 people)
\$900	Supports the monthly operations of a new community childcare center
\$1000	Funds to establish a new community childcare center (for ten kids)