

## 197 Identifying the strengths and challenges from the perspective of primary caregivers of drowning prevention interventions in Bangladesh

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### Abstract

**Background** Drowning is a major reason of injury globally. In Bangladesh, drowning is the leading cause of deaths among children. The highest rate of drowning was observed in 1–4-year-old children which was 71.7 per 100,000 children/year. Though drowning prevention interventions (day-care centres, playpens, door barriers, safety messaging) have proved effective for aged 2 years and above, they are less effective for newly mobile children aged 6–24 months.

**Objective** This research explored the strengths and challenges of implemented child drowning prevention interventions for children aged 6–24 months from the perspective of their primary caregivers.

**Methods** A qualitative study was undertaken from August-September 2023 in districts in Northern and Southern Bangladesh. A total 15 in-depth interviews were conducted with mothers of children aged 6–24 months. Transcripts and interviewer’s notes were analysed in detail to identify various thematic areas.

**Results** Children were more likely to be protected from drowning at day-care centres with trained caregivers, but mothers were unwilling to leave them there, preferring to keep very young children with them at all times. Defecation and urination were not properly managed at centres for children who were not toilet-trained. Mothers preferred playpens as they could keep their infants near to them and feed them when needed. However, several design issues were identified including the difficulty of keeping playpens clean and lifting children in and out. Vertical bar and corners seemed rough. Platform became filthy and wasn’t easy to wash. Door barriers were installed at day-care centres and some community members-built door barriers in their own homes. While these were largely seen as effective for keeping children safe, in sometimes children could bypass them as they were poorly fitted to the door. Safety messaging sent by SMS acted as reminder to take care of children, but there was often limited or no access to the mobile phone by mothers as other family members would have it.

**Conclusions** Existing interventions have strengths and weaknesses for children aged 6–24 months, demonstrating that interventions need modification based on user feedback to make them more suitable for protecting this age group from drowning risks.

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