

Conference Report

World Conference on Drowning Prevention 2019, Durban, South Africa

Colleen Saunders¹

Division of Emergency Medicine, University of Cape Town, South Africa & Lifesaving South Africa, Durban, South Africa

Rebecca Sindall

Lifesaving South Africa, Durban, South Africa & Nile Swimmers, United Kingdom

Ana Catarina Queiroga

EPIUnit – Instituto de Saúde Pública da Universidade do Porto, International Drowning Researchers' Alliance & International Life Saving Federation Drowning Prevention Commission

Gemma May

Royal National Lifeboat Institution, United Kingdom

Barbara Byers

Lifesaving Society Ontario, Canada

Dan Graham

Nile Swimmers, United Kingdom

Tessa Clemens

Drowning Prevention Research Centre, Canada

Justin Scarr

International Life Saving Federation Drowning Prevention Commission & Royal Life Saving Society, Australia

¹ Please direct all correspondence to: Colleen Saunders, Division of Emergency Medicine, University of Cape Town, South Africa & Lifesaving South Africa, Durban, South Africa; Email: c.saunders@uct.ac.za

INTRODUCTION

The World Conference on Drowning Prevention (WCDP) is a biennial conference hosted on behalf of the International Life Saving Federation (ILS). It aims to bring together international researchers and practitioners in the field of water safety and drowning prevention. WCDP 2019 was co-sponsored by the World Health Organization (WHO) and hosted by Lifesaving South Africa in Durban, South Africa between the 8th and 10th October 2019. This was the first WCDP hosted by an African nation, and the conference theme, "Ubuntu: Growing global drowning prevention capacity", strongly reflected the intent of the hosts to encourage participation of stakeholders from African countries that have been underrepresented at previous WCDP events.

KEYNOTE SESSION HIGHLIGHTS

The first plenary session reflected on the progress of the global drowning prevention effort since the publication of the WHO Global Report on Drowning in 2014 (Global Report on Drowning: Preventing a leading killer, 2014). Dr David Meddings (WHO, Geneva) outlined the challenges and opportunities for advancing global drowning prevention at both the global and local levels. He anticipated the release of further technical guidance by the WHO, and emphasised the importance of building cross-cutting partnerships between stakeholders within the Sustainable Development Framework (Transforming our world: The 2030 agenda for sustainable development, 2015). Dr Olive Kobusingye (Makarere University, Uganda) delivered a powerful keynote entitled Surviving water in Africa: myths, nets, and living on the edge. This reinforced the need for accelerated action and made a strong call for local data that can inform contextually relevant solutions for Africa and other low- and middle-income countries (LMICs). Dr Colleen Saunders (University of Cape Town, South Africa) delivered a presentation framing drowning challenges in South Africa and contrasting drowning risks across their diverse societal and developmental contexts.

The second plenary, facilitated by the ILS Drowning Prevention Commission's chair, Justin Scarr, explored the synergies between the international development sector and drowning prevention, specifically how the drowning prevention sector can enable progress towards achieving the United Nations (UN) Sustainable Development Goals (SDGs). The session panel consisted of Dr Rebecca Sindall (University of KwaZulu-Natal, South Africa), who outlined insights and lessons from the water, sanitation and hygiene sector, with reference to her work in marginalised and informal settlement communities in South Africa; Dr Jagnoor Jagnoor (The George Institute for Global Health, India), who highlighted community vulnerabilities, the value of indigenous knowledge and intersections between the global Disaster Risk Reduction (DRR) and

SDG agendas; Prof Ashley van Niekerk (South African Medical Research Council), who focused on preventing drowning in early childhood, touching on the relationships between the objectives and interventions of early childhood care and the development agenda; and Gemma May (Royal National Lifeboat Institution, United Kingdom), who described the challenges and value of working towards a first-ever UN Resolution on Drowning Prevention.

The final plenary session explored two personal stories of survival against the odds, framed by a deeper investigation of the science of survival and the solutions that emerge from traumatic incidents. South African Paralympian and "Shark Boy", Achmat Hassiem, had the audience engrossed in a tale of the day he was attacked by a White Shark and his subsequent impact on shark conservation and drowning prevention. Sarah Waries then outlined the work of the South African NGO, Shark Spotters, highlighting the value of novel and locally relevant programmes in solving local problems. Brett Archibald (South Africa) told of his 36 hours lost at sea after he fell from a surf charter boat in the waters off Indonesia. To provide a scientific rationale for stories of survival like Brett's, Prof Mike Tipton (University of Portsmouth, United Kingdom) delivered a standout presentation about the survival hierarchy and its implications for prevention, search and rescue.

THEMATIC FOCUS AREAS

The conference programme covered five themes emerging from ongoing efforts to address the key issues highlighted in the 2014 WHO Global Report on Drowning (Global Report on Drowning: Preventing a leading killer, 2014). The first theme focused on Situational assessments for informed prevention. Many presentations pointed out the need for better data, noting that drowning is often under-reported, with large gaps in data across geographic and demographic areas. The need to capture the right data for informed policy and programme implementation was well recognised in this focus area and throughout the conference programme. There were renewed calls for high-quality data from LMICs, particularly in Africa, to inform contextually relevant interventions. Clemens, Oporia, Kobusingye et al. presented elegant findings from a phased approach to estimating the burden of drowning in Uganda and highlighted the value and challenges of combining multiple sources of information at a local level, in the absence of formal surveillance programmes. In addition to calls for better surveillance, the need for the appropriate dissemination of research results was consistently stressed. Improved communication and the translation of evidence for greater impact with those best positioned to inform prevention is necessary for evidence-based practice. Looking forward to WCDP 2021 in Colombo, Sri Lanka, this theme is expected to focus on community-level studies that identify barriers to the implementation of research-based interventions;

studies focused on drowning behaviour to increase understanding of the psychological processes underpinning decisions and attitudes towards aquatic risks; studies that focus on drowning survivors, including the welfare and resilience of rescuers, family and friends of those impacted by non-fatal drowning; and a greater emphasis on empowering partnerships between local communities, practitioners and researchers.

The second theme revolved around establishing, defining and evaluating *Effective interventions*. A highlight from these sessions was the increasing use of evidence in designing prevention interventions, including problem identification, establishing the need for an intervention, and changes in attitudes and intended behaviour among target groups. A noteworthy observation was the increasing use of social media as a cost-effective, targeted tool for prevention campaigns, enabling organisations and policy makers to launch interventions and receive rapid feedback from the target groups. In addition, it was encouraging to observe the increasing focus on multi-stakeholder approaches, with multiple partners and stakeholders at the local and national level building engagement and commitment to programme goals. Looking forward to WCDP 2021, this theme is expected to focus on identifying research methodologies that will demonstrate that an intervention was effective beyond increasing awareness, in that it shifted attitudes and brought about changes in intended behaviour; sharing examples of how an effective intervention can lead to community or organisational change; and developing stronger partnerships between the academic and drowning prevention practitioner communities that lead to new ideas, new perspectives and more effective programmes.

The pragmatic theme describing *Strategies for supporting sustainable prevention efforts* emphasised the need and opportunity for multi-sectoral collaboration and intersectionality, globally, nationally and locally; the importance of delivering the right message to the right people in the right format; and the need for evaluation to be embedded in a robust programme design from the outset. It was heartening to see increased recognition of the drowning burden in South Africa with the presentation, by researchers from the South African Medical Research Council, of the first provincial strategy for water safety and drowning prevention for the Western Cape. This was followed by calls for similar projects across the country and a commitment by local delegates to form a national drowning prevention and water safety coalition. In 2021, we hope to hear greater discussion of drowning prevention programme failures and shortcomings, which may benefit and improve future programme design; increased recognition of working through differing gender and culture lenses, as it relates to programme impact and sustainability; and the impact of working through other sectors to achieve drowning prevention.

Sessions discussing *Advancements in rescue and resuscitation* highlighted a growing understanding of the sector's role in disaster risk reduction (DRR), with a need to focus not only on flood rescue, but also on prevention and mitigation through changes in human actions and decision-making. There was increased recognition that the transfer of knowledge and skills from high-income to LMIC settings is not an easy process, nor automatic pathway. In addition, the continued development of the WHO Non-fatal Drowning Framework, with the expectation of imminent piloting and testing, was encouraging. In 2021, we expect to see more studies that explore education, teaching methods and approaches to increase the effectiveness of training; increasing use of technology and analytics to improve the efficiency and effectiveness of rescue services and guide resourcing; and increased collaboration within and across rescue agencies and the communities they serve.

The last theme explored areas of alignment between *Drowning prevention and the development agenda*. This theme saw a strong focus on Africa, with a growing recognition that solutions that prevent drowning in high-income countries or Asian LMICs may not be relevant in Africa. There was an increased focus on drowning as a social justice issue, with strong links to DRR and the early childhood development sectors, and recognition that the Sendai Framework and SDGs have areas of commonality with drowning prevention. Lastly, there was a call to embrace diversity as a strength of the sector, especially when working with communities where technical expertise may be less important than local context. In 2021, we expect to see increased recognition of the breadth of drowning prevention, particularly in the area of risk reduction; increased links to international agendas; and increased use of participatory research designs in intervention development *with* communities and not *for* communities.

ENCOURAGING DIVERSE PARTICIPATION

The costs of attending an international conference can be prohibitively expensive for many people working on drowning prevention in LMICs (Arend & Bruijns, 2019). As over 90% of global drownings take place in LMICs, there is considerable value in having individuals from these countries attend the conference in order to share their knowledge of the contexts in which drowning happens in LMICs. With the assistance of key funding partners, the WCDP 2019 therefore adopted the peer-sponsorship programme, SupaDel, developed by the African Federation for Emergency Medicine (http://www.afjem.com/supadel.html) to support the participation of delegates from low-resource settings. This saw the sponsorship of 13 delegates from LMICs to attend the conference fully funded by fellow participants and contributing sponsors. The model was well received, and we encourage conference organisers to build it into their conference planning from an early stage.

LOOKING TO THE FUTURE

Reflecting on the legacy of WCDP 2017 (Vancouver, Canada), there are continued efforts within the sector to understand, advocate for and mitigate drowning risk for migrants and refugees, and sustained efforts in research and advocacy for non-fatal drowning stemming directly from the 2017 conference. As we look forward to 2021, we hope that WCDP 2019 will leave a legacy of Ubuntu within the sector as our delegates strive to:

- 1. Accelerate action to prevent drowning locally South Africa can be seen as a microcosm of the diverse societal and developmental contexts in which drowning occurs globally. Effective drowning prevention requires locally relevant solutions, based on community-level data.
- Collaborate with DRR partners Drowning prevention, at its heart, is risk reduction, and there is a need
 for greater collaboration between drowning prevention organisations and the wider DRR sector. The
 advocacy embodied in the work towards a UN Declaration on Drowning recognises the disastrous scale
 of drowning globally.
- 3. Co-produce knowledge with the communities we aim to protect Respecting the value of indigenous knowledge and the inclusion of the most at-risk communities in developing the drowning prevention interventions that work for them, will help build resilient communities.

ACKNOWLEDGEMENTS

The authors wish to acknowledge the contributions of the local organising committee, volunteer abstract reviewers, as well as thematic chairs who were unable to travel to the conference (Dr Amy Peden, Dr Jenny Blitvich, Dr Peter Wernicki) for their contributions to a successful academic programme.

REFERENCES

Arend, M. E., & Bruijns, S. R. (2019). Disparity in conference registration cost for delegates from low- and middle-income backgrounds. *African Journal of Emergency Medicine*, 9(3), 156-161. doi:10.1016/j.afjem.2019.01.016

Global Report on Drowning: Preventing a leading killer. (2014). Geneva, Switzerland: World Health Organization.

Transforming our world: The 2030 agenda for sustainable development. (2015). United Nations.