Statement on Preventing Child Drownings in West Virginia

West Virginia Child Fatality Review Team¹

The death of a child* is a tragic event in a family's life and a great loss to society. Hope and promise for the future are turned to grief and despair. The loss of a child can happen swiftly and silently by drowning. This is all the more tragic, because drownings are always preventable.

The review of numerous child drownings in West Virginia has spurred the **Child Fatality Review Team** (CFRT) to encourage increased diligence with our children to reduce this tragic loss.

How can we prevent the loss of these precious children? An awareness of how quickly and silently a drowning death can occur is needed for all guardians of our children. Most drowning deaths of small children occur when they have been out of sight for a very few minutes. The time it takes to hold short telephone conversation is sufficient time for a child to drown.

A review of five years' of child deaths in West Virginia revealed 23 accidental drownings.¹ Fifteen of the victims were age 7 or younger and 10 were between the ages 1 to 3 years. Seven were aged 15 to 17. Eleven of the 23 deaths occurred in rivers or streams.



More West Virginia children have drowned in rivers and streams than in swimming pools. Several occurred during periods of heavy rain and high water, but few were associated with the major floods that have occurred in West Virginia. Even small intermittent streams create a serious downing hazard when they swell with storm drainage. The creek behind the house where the children play might normally be a few inches deep, but becomes life threatening to a small child when the water rises a few inches and is flowing swiftly. It can quickly sweep a child off its feet and carry them away and/or trap them in debris. Extra diligence to keep children away from streams during periods of high water is required. One child, for example, was lost by being swept into a storm drain.

Streams, rivers and lakes are a major source of water recreation such as swimming, boating, and fishing in West Virginia. Streams tend to be fast flowing with intermittent deep pools. The larger rivers, especially those supporting barge traffic and lakes, are consistently deep. Swift water and deep water both require extreme vigilance when children can access them. All recreational swimming should be supervised by a person trained in lifesaving and water rescue techniques.

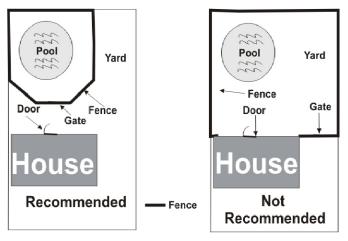


Swimming pools are another source of concern. Most of the deaths in pools occurred in private pools, generally owned by the child's parent or guardian. It is well understood that pools should be fenced to prevent unsupervised use. One trend in fencing, however, that needs to be addressed is using the house as part of the fence. Several of the deaths to young children in West Virginia occurred when they accessed the pool from the house. One crawled through a pet door to enter the area. Fences should be constructed so that access to the pool is the only reason for accessing the pool area. There are alarms that sound a warning when doors are opened. These should be placed on the pool fence gates and also on house doors that open to a pool. Though the CFRT recommends retrofitting gate and door alarms to all doors that access a pool area, there is concern that they would not be as effective on house doors. The nuisance aspect of shutting off the alarm every time a person leaves the house for any reason might lead people to either ignore the alarms or disable the alarms temporarily or permanently.

The following recommendations are given by the Child Fatality Review Team:²

1. Increased supervision of children is required during any period of high water when they have access to a stream or river. Even small streams that may only have intermittent water in them can pose a serious hazard to a small child during and after periods of heavy rain. Children should never be left unattended when they can access rushing water.

2. All pools should have a fence or barrier completely around the pool. The fence or barrier should completely separate the pool from the house. Some of the deaths occurred when toddlers gained access to pools from the house. The pools were fenced, but the fence connected to the house and used the house as part of the enclosure.



 The fence or other barrier should be at least four
(4) feet high. It should have no foot or handholds that could help a young child climb it.

4. Swimming pool fences should be equipped with a gate that restricts access to the pool. A locking device should be included in the gate design. Gates should open from the pool and should be self-closing and self-latching.

5. In instances where homes do have doors that open directly onto the pool area or onto a patio leading to the pool, all doors that give access to a swimming pool should be equipped with an audible alarm that sounds for at least 30 seconds when the door and/or screen are opened. The alarm should be able to be temporarily turned off by an adult for a single opening of the door by using a key pad or switch that is out of a child's reach.

6. For above-ground pools, steps and ladders leading from the ground to the pool should be

secured and locked or removed when the pool is not supervised by an adult.

7. Pools should have wave motion detectors that issue a warning when an object falls into the pool. These devices can sound a warning to a remote location such as inside the home.

8. Gates should have sensors attached that give a warning of unauthorized entry similar to the wave motion detectors.

9. All members of the household with a pool should be trained in CPR. Should submersion occur, the sooner breathing is restored the less potential for lasting injury.

10. Flotation devices and the ability to swim are not a substitute for direct adult supervision of small children.

*Child is defined as a person age 17 and under.

1: CFRT. Child Drownings, CFRT Brief #2

2: Recommendations 2- 8 were adapted from the US Consumer Product Safety Commission. For more information please call their toll-free hotline at 1-800-638-2772 or visit their website at http://www.cpsc.gov

¹The **Child Fatality Review Team** was established by the State Legislature to review potentially preventable child deaths. The team is a multidisciplinary group of professionals whose purpose is to make recommendations on policies and procedures that may reduce the number of child deaths in West Virginia. The Team is coordinated by the Office of Chief Medical Examiner, Bureau for Public Health, Department of Health and Human Resources.

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