organisation which guides nationwide swimming instruction and lifesaving issues. FSL co-operates actively with public authorities in water safety issues.

Methods The Master's Degree thesis examined, through 160 near-drowning experiences, what happens to people in drowning situations. The gathered information was then compared to the water safety instructions given by FSL. Thus, the main aim of the study was to utilise the gathered information in the future water safety instructions given by FSL. Another aim was to search for effective ways to enhance drowning-prevention interventions.

Results Even when instructions for water safety are essentially good, people find it difficult to follow them. In a drowning situation there is often an absence of rational thinking when one's life is in danger. This means that it is extremely important to avoid being alone both when in and by the water. Both, the concept of parental responsibility and the constant monitoring of one's own children in and near water, vary greatly and are lacking.

Conclusions Water safety education is challenging. The drowning experience is always tied to a situation, where many things and coincidences affect it. People are not able to follow water safety instructions, neither in a preventative sense nor in the actual emergency situation. People trust their own "common sense" and this isn't always a good thing. Even though the water safety tips are simple, they are not always put into practice in water.

831 ESTABLISHING AN EVIDENCE BASE FOR DROWNING INTERVENTIONS IN THE REPUBLIC OF IRELAND

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Background Drowning fatalities are a significant global health problem, with close to 400,000 people drowning each year worldwide. In the Republic of Ireland (ROI), approximately 135 people drown per annum, the majority of which are preventable incidents. International best practice calls for the use of evidence-based interventions to prevent drowning deaths. This research project aimed to improve the current scope and quality of drowning fatalities data available in Ireland, to facilitate optimal intervention design, and ultimately reduce drowning deaths.

Methods This project consisted of three main stages. The first involved a scoping exercise designed to identify the extent of missing drowning fatality data, achieved by comparing source records for 2012–2013 held by the statutory body Irish Water Safety with official Irish death statistics. Means of increasing fatalities coverage were then investigated, including assessing media reports. Second, new drowning data taxonomies to enhance the detail of the data captured following a fatality were designed, and evaluated during an expert stakeholder workshop. Third, a novel Irish drowning fatalities database using these taxonomies was created for future use.

Results Findings from the first stage indicated that records for 62% of drowning fatalities that occurred in Ireland during 2012–2013 were missing. The use of additional drowning data sources, including access to complimentary fatality records and media reports increased coverage considerably for this period. The proposed taxonomies were evaluated favourably during the workshop, and database uptake has been promising.

Conclusions Drowning fatality data quality and coverage in the ROI can be improved. The new database and taxonomies will

serve as valuable future resources, with the potential to reliably inform prevention strategies and intervention design.

832 EXAMINING COASTAL DROWNING FATALITIES IN THE REPUBLIC OF IRELAND, 2010–2013

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Background On average, 135 people drown in the Republic of Ireland (ROI) every year. There is growing recognition that coastal drowning fatalities in particular are a significant health concern.

In order to inform the design of targeted prevention strategies for coastal areas in the ROI, this research study sought to enhance and augment current coastal drowning fatality records, and produce detailed statistical estimates in relation to these deaths.

Methods A coastal drowning dataset was compiled. To enhance data records, complimentary sources were investigated, including data from the Royal National Lifeboat Institution (RNLI) and media reports. Unique coastal fatality cases were identified by location, name of victim (where possible), date of incident, and/or other identifiers as needed (such as age, gender). The fatality cause was then classified (e.g. due to accident, suspected self-harm etc.), and data analysed.

Results Complimentary data sources improved the scope of initial records from documenting 70 coastal drowning fatalities, to records for 198 that occurred during this time period. Overall, coastal drowning deaths accounted for approximately 39% of all drowning fatalities that occurred in the ROI during 2010–2013. The majority of these were accidental deaths (48%), unspecified incidents (26.3%), due to suspected self-harm (24.7%), natural causes (0.5%) or assault (0.5%). Where gender and age were documented, it was found that males comprised 82% of fatalities ($n = 124$), and that those aged between 30–69 years accounted for 81% ($n = 104$) of coastal drowning deaths.

Conclusions Coastal drowning fatalities accounted for approximately 40% of all drownings that occurred in the ROI during 2010–2013. Findings suggest that coastal drowning interventions should focus on targeting males, and those above 30 years of age.

833 DROWNING PREVENTION AND LIFE SAVING PROGRAM 2012 THAILAND

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Background Worldwide, drowning is the third leading cause of death among children. In Asia it is the first leading cause of death and a major public health threat. The objective of this paper was to develop a drowning prevention program including swimming training, CPR and lifesaving methods for children and to evaluate it. This intervention was provided and evaluated in Thailand where drowning is the first leading cause of death among children.

Methods Thailand where drowning is the first leading cause of death among children. The study used observations, quantitative and qualitative methods. In total 20 children in the age of seven