

government programs are more likely to be sustainable and scalable.

#### **Methods:**

For the first time to our knowledge for an injury-related issue in India, detailed content review of policy was conducted to identify both policy principles and/or specific government programs that may be leveraged for drowning interventions. The reach, enablers and barriers of these programs were assessed through a systematic literature review. Identified policies and programs were also assessed on how they catered for underserved groups and took into consideration equity.

#### **Results:**

Three programs may be leveraged for drowning interventions: The Integrated Child Development Scheme (ICDS), Self-Help Group (SHG) and Accredited Social Health Activist (ASHA) programs. All three had high coverage and considered underserved groups such as women and rural populations.

#### **Conclusions:**

Programs targeting specific health outcomes should consider interventions outside of the health sector that address social determinants of health. This may enable the program to better align with relevant government agendas and increase sustainability.

#### **Key messages:**

- This is the first systematic analysis of both policy content and execution of government programs to provide comprehensive insights into possible implementation strategies for an injury intervention.
- This methodology may be applied by other researchers identifying sustainable intervention options supported by government policy and/or programs.

## **Opportunities for drowning interventions using existing government policy and programmes in India**

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#### **Background:**

Children living in coastal, rural India face a particularly high risk of drowning due to rurality, presence of open water, lack of accessible health systems and poor infrastructure. No drowning interventions are currently implemented in India. Interventions that build on existing policy targets or