

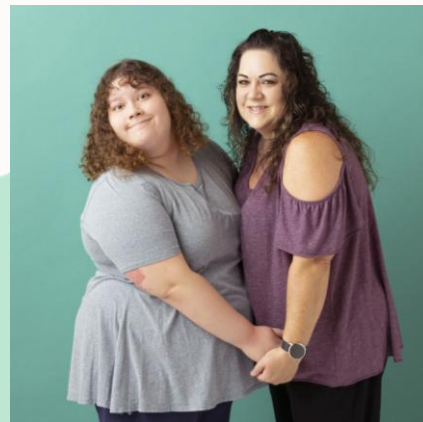
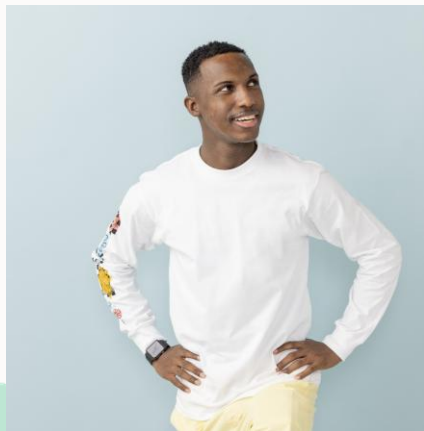


Howard | Montgomery | Anne Arundel



Water Safety and Wandering Prevention

May 2025



Welcome and Introduction of Panelists

- *Heather Brewer*, Aquatics Leader & Instructor, Life Time
- *Gill Brown*, Parent
- *Marlo Lemon*, Parent and Parents Place of MD
- *Emily Watts*, Specialist, 3rd Party Billing, Autism Waiver Coordinator, Baltimore County Public Schools
- *Cheryl White*, Aquatics Director, Brick Bodies and Owner of The Great White Swim Academy, Swim Instructor
- *Amanda Wroten*, Director, Safety on the Spectrum, Autism Society of America

What We'll Cover Today:

- Understanding Wandering/Elopement
- Wandering Prevention Tips and Resources
- What to Do If Your Child Goes Missing
- Water Safety and Adapted Swim Lessons
- Stories Shared by Parents
- Resources
- Q & A



71% of wandering deaths are due to drowning.*

Seven (7) children in Maryland wandered and drowned in 2024.

**subsequent to wandering in children with Autism under the age of 14*



Adorable boy, 5, meets terrible end after security camera caught him skipping away from his Maryland home

Statistics

- People with Autism are 160X more likely to drown than neurotypical peers
- 2012 study found that children with Autism are 4x more likely to wander than their neurotypical siblings
- 74% of elopement occurs from the child's home or someone else's home (stores 40%, schools 29%)
- 49% of children with Autism attempted to elope at least once after age 4
- 50% of parents report receiving no guidance on preventing or addressing elopement

UNDERSTANDING WANDERING/ELOPEMENT





People with Autism and other developmental disabilities are at an increased risk of wandering away from safe supervision.

It's also common for people with Autism to seek out water – such as ponds creeks, lakes, pools and canals.



Wandering can occur under any kind of supervision and in people of all age groups. People with Autism, developmental disabilities and Alzheimer's/Dementia are at an increased risk of injury or death due to wandering.



Those who wander may not communicate with speech or understand the risks and potential dangers involved.



Wandering is a form of communication.

BIOLOGICAL FACTORS: “I have to use the bathroom” or “I’m hungry”

PERSONAL WANT/NEED: “ I forgot my stuffed animal, and I need it.”

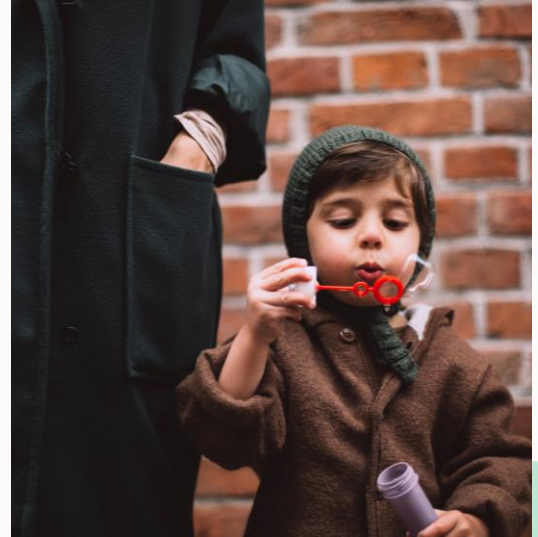
SENSORY SAFETY: “It’s too loud/crowded I need to find a quiet place.”

DYSREGULATION: “I’m having trouble coping and need to leave.”

CURIOSITY: “I want to explore.”

Those who wander are commonly found:

1. In or near water
2. In or near traffic
3. In wooded areas
4. At another residence
5. At preferred stores / restaurants / attractions



IF YOUR CHILD IS MISSING:

- Call 911 Before Searching
- Share your child's diagnosis with the dispatcher
- Share how long your child has been missing
- Search water FIRST! – Pools, Canals, Ponds, Drainage Ditches, Etc.
- Reach out to your network – neighbors, family, friends, school

Samples of Trusted Neighbor, IEP Letter and Emergency ID Sheet



Autism Society

Trusted Neighbor 101

Developing trusting relationships with those in your neighborhood can be helpful as you consider strategies for keeping your loved one with Autism safe. Trusted neighbors, familiar with neighborhood routines and close by in emergencies, serve as valuable resources to help create a sense of community and safety for those with Autism and their caregivers.

After you've identified which neighbors to include in your safety plan, consider talking to the neighbor, sharing your safety concerns, and asking for their help in your safety plan.

Be specific about how you'd like them to help. If a neighbor agrees to help, introduce your loved one to the neighbors and facilitate a familiar relationship as much as possible.

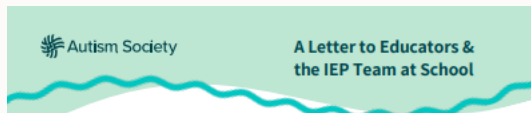
How Neighbors Can Help in a Safety Plan:

- Watch for loved ones leaving their home without a guardian.
- Help search for an individual if they are missing.
- Act as a safe place an individual can go in emergencies.

What Information to Consider Sharing with Trusted Neighbors:

- [Emergency Identification Sheet](#)
- [Wandering Letter](#)
- Tendencies / what is typical for them
- Likes / dislikes
- Sensory information - what is comforting and what can be triggering?
- Who to call if the neighbor sees something concerning or if they see the individual alone without a guardian, or with someone they haven't seen before
- Guidance for ways to interact with individual

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Autism Society

A Letter to Educators & the IEP Team at School

To Whom It May Concern:

_____ NAME _____ has a history of wandering, meaning they may leave a safe area or wander away from a responsible caregiver. _____ NAME _____ may wander for a variety of reasons which are often goal-directed (i.e. communicate or obtain a want/need, seek or avoid sensory input). It is reported that at least 49% of people with Autism will wander at least once in their lifetime. Wandering poses a serious risk of injury or death - especially related to traffic and water-related incidents. Because of these risks, safety precautions and preventative supports are important to be addressed by _____ NAME _____'s IEP and school team.


Leaving _____ NAME _____ unattended puts them at an increased risk for wandering and potentially dangerous circumstances. To keep _____ NAME _____ safe while under your instructional care, there must be appropriate supports in place.

Some safety considerations for team discussion and planning:

- Historical wandering scenarios:**

- Known patterns of wandering:**
 - Why? _____
 - When? _____
 - Where? _____
 - Why, if known? _____
- Precipitating factors (things that may happen immediately before wandering, potentially triggering wandering or signaling that wandering may soon occur):**

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Autism Society

Emergency Identification Sheet

Date: ____/____/____

Personal Identifying Information

Name: _____ DOB: ____/____/____

Physical Description: i.e., 5'10, 150 lbs., brown hair, green eyes, etc.

Identifying marks or scars: _____

Do they wear a locative device? ID bracelets? If no, provide some information _____

PLEASE AN
UPDATED PHOTO
HERE

Emergency Contacts

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

Medical Information

Medical needs or medications: _____

Allergies or dietary restrictions: _____

Other Helpful Considerations

Identify locations the individual is likely to go: Be specific: water/pool/take/ocean, movies, gas station, etc.

What does escalation look like? Crying, running, rocking, aggression, etc.

De-escalation techniques: What has helped in the past? _____

Best way to approach individual: _____

Identify likes: Favorite toys, characters, songs, tv shows, etc.

Identify dislikes/triggers: Things to avoid, fears, sensitivities, noises, lights, helicopters, etc.

Preferred Communication: Speaking/non speaking, visuals, sign language

A safe word or any identifier to indicate to the individual that you are a safe person: _____

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Questions to consider when someone has wandered:

- Do they have a locative device?
- What is most likely to elicit a response from them ?
(a certain song, high-interest, key word, calling their name?)
- Where does the missing person like to go?
- Does the missing person have medical conditions that could pose further risks?



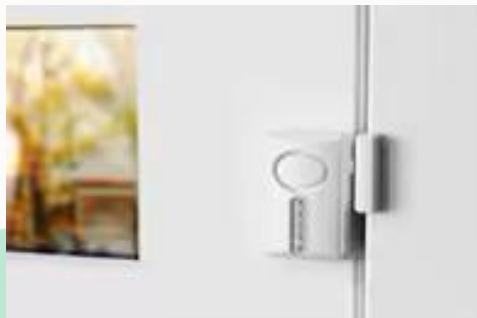
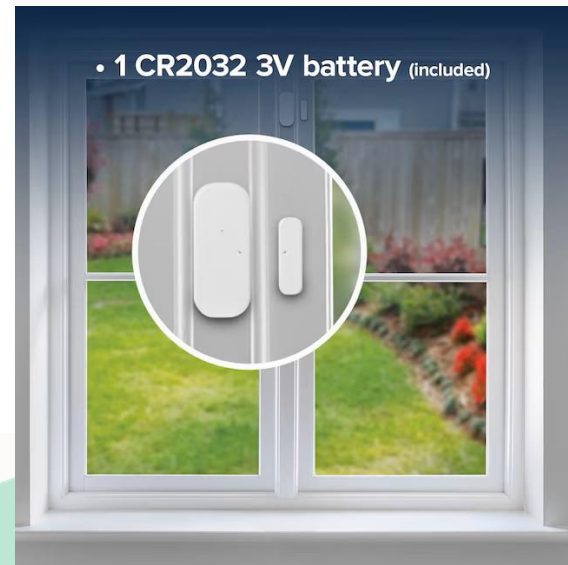
Other Considerations

- Be mindful of things that may act as a deterrent or scare the individual such as loud noises, helicopters, drones, megaphones, crowds, etc.
- Get to know your local law enforcement before an emergency
- If a loved one goes missing, it will help them know how to approach them
- Share an informational sheet about your loved one and keep it up-to-date

Proactive Tips to Secure the Home and Surrounding Area

- Install door alarms on each door/window
- Install pool fences with self-latching doors around pools and bodies of water
- Identify all bodies of water in close proximity to the home
- Talk to trusted neighbors about a loved one who wanders
- Have a safety plan
 - Call 911
 - Check all surrounding water
 - Enlist the help of neighbors, friends, caregivers
 - Go to known areas of interest

Examples of Door/Window Chimes and Locks



More Considerations

- Support communication needs
- Ensure access to effective communications and ways to communicate
 - basic needs/wants, express distress, request help
- Monitor the individual for changes in behavior, changes of favorite spots or interests
- Learn about locative technology to decide if GPS/tracking is right for your family

Is a GPS Tracking Device Right for Your Child?



PROS:

- Can provide real-time location updates
- May help address safety concerns – wandering, bullying, bus transportation
- Some have emergency buttons that can alert designated contacts and provide location info
- Can relieve anxiety for parents and caregivers

CONS:

- Ethical questions about the child's right to privacy and misuse of data
- Can lead to a false sense of security and trust
- May impede independence with constant tracking and monitoring
- Devices may cause distress -- sensory input, physical presence
- May not always be reliable (batteries can die, signal issue, user error)
- Efforts may be better spent on swimming lessons, wandering prevention'
- Consider other tools – visual aids, communication, building awareness

Let's Hear From Parents:

- Gill Brown
 - Marlo Lemon
- 

Marlo's Why



WATER SAFETY

Supervision and Planning are the Keys!



Being drawn to water is normal for the special needs/autism community. The fascination of water can cause them to disregard safety. The following tips can be used to assist with water safety practices.

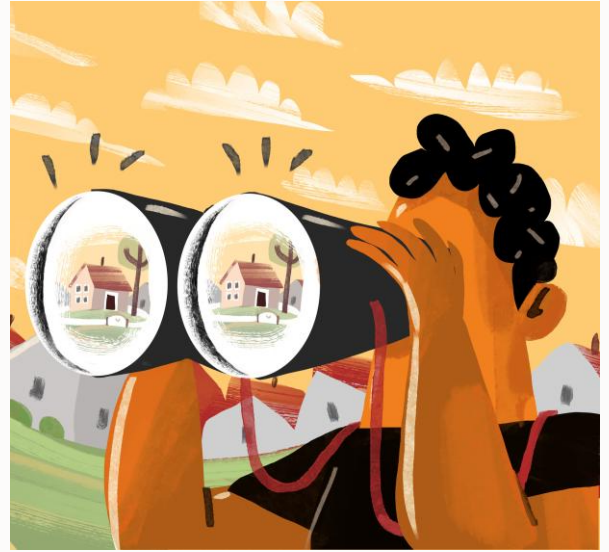
Vigilance:

- Being vigilant when around any body of water is critical, especially with the autistic and special needs community.
- Given their heightened sensory seeking behaviors, caregivers should be hyper vigilant and focus on repeated and extended submersion, holding breath and drinking an excessive amount of water.



Water Watchers

When you're near a body of water, designate someone to watch it. This should be done in shifts to reduce distractibility and fatigue, with the best practice to be no more than 30-minute windows at a time. A Water Watcher should have something to distinguish that they are the current water watcher -- a special hat, lanyard, whistle, or something else so that everyone knows who is supervising the water.



Routine & Repetition

The use of routine is an advantage. Create safe routines for water play, swimming, and transitions in and out of water. Consistent use of routine will allot you a few extra seconds when needed to avoid a potentially dangerous situation





Routine and Repetition at Home:

Teach your swimmer to verbally request or nonverbally gesture before entering any body of water including the tub.

Rescue Equipment:

All swimmers neurotypical and neurodivergent should understand how to identify and use rescue equipment, including but not limited to life jackets and rescue tubes. Be sure to familiarize everyone with rescue equipment and work to improve ability to touch, hold and identify.



Rescue Equipment Lifejackets:

Be sure to select the right type of life jacket, that will properly assist with your child/adults' unique needs.

- Get child /adult comfortable with wearing jacket in the bathtub first
- Practice wearing at the pool to ensure it is effective
- Be sure that the jacket is not too buoyant to the point they can't control their body. If this happens work on body awareness with them



Purchase a Coast Guard-Approved Life Jacket



Adaptive Swim Lesson Skills:

Should focus on:

- Safe submersion
- Mastering roll overs
- Safety skills like treading, proper entry and exit, what to do if pushed or falling into pool.



Allow extra Time:

Create an extended routine that will delay entry into the water. This can be movements or a favorite song.

Example: Easy movements like “clap your hands, touch your toes, raise your arms and then request to enter pool. For a lengthier delay routine, you can use ‘head, shoulders, knees and toes before they can enter the pool. This will allow time to intervene if they were to proceed to water before you.



Use of Equipment Should Not Be Routine:

Practicing with Equipment is important but should be used as tools to learn, not permanent or necessary each time in water.

Overuse will give a false sense of security. Structure swim time without floats, goggles or vests.





The Wall:

“The wall(side) is safe” should be repeated each time before entering the pool as well as once in the pool. Practice having them hold onto the wall independently for 5 seconds counting out loud.

Minimize Breath Holding:

Autistic swimmers may enjoy this because of the hydrostatic pressure (which increases with depth). The problem comes when done repeatedly with disregard for breathing. Be vigilant and physically intervene to incorporate breaks for above the surface water play.



Excessive Water Drinking:

Some swimmers will love to drink, spit or suck the water. Keep a close eye on the amount and how often they swallow water. If it is ongoing, encourage them to swim on back, bite on appropriate chew toy or engage in top water games




Inform the Lifeguard:

Lifeguards are trained professionals who prioritize aquatic safety. Inform the lifeguard of your child or adults' unique needs or challenges. When arriving to the pool we can say “Lifeguards keep us safe”



Inform Aquatic staff:

Communicate with your pool's aquatic staff your child's/adults' needs:

- Provide a photo of your child/adult and some safety ideas
 - Introduce your child/adult to aquatics director and lifeguards and explain how to best interact with your swimmer
 - If your child has physical limitations and needs to use the pool chairlift, call ahead to ensure it is charged and will be ready when you arrive
- 

Swimwear:

Pools are busy with lots of families and children and lakes and oceans are sometimes dark. A tip is to have your child/adult wear bright colored swimwear, so you can easily identify them. You can also consider having them wear a swim cap or shirt that is bright





Rescue Tube:

Be sure to become familiar with what a rescue tube looks and feels like and identify it as a safety device. You can ask the aquatic staff if there is an extra tube not in use that your child can touch or hold to become familiar. They tend to be slippery when wet so practice each time at the pool is important.

Floating tools:

When you go to the pool practice “take and hold” with any of the many floating devices, such as kickboards, barbells, and noodles. Make a routine of taking the floatation device and propelling to the side each time you go to the pool



Alternative Communication

Many individuals with Autism are non-speaking and communicate in a traditional way. Offer alternative methods of communication:

- Do they have assistive technology?
- Carry a white board and markers
- Use paper and pen
- Sign language is used by some children



Resources

Maryland Autism Coalition

Autism Society Baltimore-Chesapeake

Autism Society of Maryland: <https://autismsocietymd.org/safety/>

Autism Society of America: <https://autismsociety.org/water-and-wandering/>

Pathfinders for Autism: <https://pathfindersforautism.org/articles/safety/water-safety/>

National Autism Association: <https://nationalautismassociation.org/big-red-safety-box/>

Erin's Star: <https://www.erinsstar.org/>

Red Cross: https://www.redcross.org/get-help/how-to-prepare-for-emergencies/types-of-emergencies/water-safety.html?srsId=AfmBOopJxd8BbBE7V-zT5S13_IVmLS4ZsN5Vplsn4CGQd6aAYqpT_cC

Swim Lesson Resources

We are here to help!

Feel free to reach out to our office if you have further questions or would like some guidance.



CONTACT US!

Autism Society Baltimore-Chesapeake
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AUTISM SOCIETY OF AMERICA
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Thank you.