

5 TIPS

TO HELP YOU SWIM SAFE



SWIMSAFE IN THE
POOL –
Communication with
vulnerable swimmers
at public pools

Pilot Project – Stage 3

Suggested citation

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BACKGROUND

There were 35 unintentional drowning deaths at public swimming pools in Victoria in the past 25 years, or an average of 1.4 deaths per year (Life Saving Victoria [LSV], 2018a). Individuals at greatest risk of drowning in public pools have been identified as weak and non-swimmers. Of these, two key audiences which require a targeted campaign focus are: people from culturally and linguistically diverse (CALD) communities (in particular, international students and those newly arrived to Australia), and people with physical disabilities or pre-existing medical conditions, such as epilepsy, neuromuscular disease or heart disease, including older adults.

Weak and non-swimmers

The Australian Bureau of Statistics (ABS) defines CALD communities mainly by country of birth, language spoken at home other than English and English proficiency (Australian Bureau of Statistics, 1999). In 2017/18, individuals from CALD communities accounted for 35 per cent of fatal drownings across various aquatic environments in Victoria. This reflects a 73 per cent increase when compared to the 10-year average from 2007/08 to 2016/17 (LSV, 2018b). Similarly, between 2005/06 and 2014/15, 28 per cent of individuals that died from drowning in public and commercial swimming pools across Australia were born overseas (Mahony et al, 2018). Drowning risk is reported to be high among people from CALD communities. This is primarily due to a limited awareness of hazards and risks, as well as a lack of aquatic participation and skills and subsequently, lower swimming competency. Pre-existing medical conditions and disabilities are reported to be contributing factors to drowning incidents, as these may influence a person in terms of their swimming ability, awareness, strength, judgement and so on (LSV, 2018b). Older adults need to be particularly aware of the impact of ageing on personal safety in aquatic environments, including reduced levels of fitness, medical conditions, medications and their subsequent impact on swimming ability, and risk of falls.

Public pools provide an ideal setting which allow people to engage with and enjoy aquatic recreation in a controlled environment under lifeguard supervision. However, lifeguards are supervising up to 100 people at a time and therefore cannot be supervising every individual constantly. By making those individuals at higher risk aware of the need to inform pool staff of their potential vulnerabilities, staff can then provide simple information to assist in elevating the awareness of particular hazards and risks and how patrons can self-manage those in order to reduce the likelihood of an injury or drowning and improve safety for more vulnerable swimmers.

Rationale

A Victorian coroner recently recommended that:

1. "Belgravia Leisure Pty Ltd implement a system, not limited to, but which may be in the form of signage, requesting patrons to inform a staff member of their vulnerabilities before entering the water."
2. "Belgravia Leisure Pty Ltd in consultation with Banyule City Council explore the options and means for best communicating with and encouraging patrons who have English language challenges, to inform staff members of their vulnerabilities before entering the water."

These recommendations have implications for the wider aquatic industry; it is recognised that all public pool operators need to be able to better communicate with patrons with certain vulnerabilities and English language challenges. Materials were developed in response to the above-mentioned coronial recommendations, however an evaluation of these resources revealed low levels of recall and uptake. It was identified that prior to any further development of resources further research was required to determine the ideal messages and methods of communicating these messages to the two key audiences: i) CALD communities and ii) those who have a physical disability or pre-existing medical conditions.

Response

In response, a research project was undertaken by Life Saving Victoria (LSV) from May to August 2019, to evaluate the suitability of draft communication resources that were developed for patrons who may be weak or non-swimmers.

The project involved three stages:

1. Stage 1 involved exploratory research into the above objectives.
2. Stage 2 involved concept testing of the submitted communication materials in order to inform the final campaign. This included key message development as well as materials (posters, brochures, banners) ready for print or use with digital media and on websites/ social media.
3. This report summarises the evaluation of Stage 3 of the *Communication with vulnerable swimmers at public pools* campaign, which piloted the communication materials at public pools in Victoria and was re-branded as the *SwimSafe In The Pool* campaign. The LSV Public Training and Pool Safety (PTPS) department engaged LSV's Risk & Research department to conduct the study.

AIM AND OBJECTIVES

The overall goal of the *SwimSafe in the Pool* campaign (referred to hereafter as SwimSafe) was to increase the safety of vulnerable swimmers at public swimming pools, thereby assisting in the reduction of drowning incidents at these venues.

The aim of the evaluation was to test the suite of campaign materials targeting vulnerable swimmers, primarily weak and non-swimmers, but also patrons from: i) CALD communities and ii) those who have disabilities or pre-existing medical conditions, for example older adults.

The key objectives for this pilot project were to determine:

1. The effectiveness of a vulnerable swimmer communication campaign for improving recognition and recall of key communication messages for weak and non-swimmers. Target = 30% of weak and non-swimmers recognise and recall key communication messages.
2. The effectiveness of a vulnerable swimmer communication campaign for improving awareness of water safety and the risk of drowning in a public pool for weak and non-swimmers.
3. The effectiveness of a vulnerable swimmer communication campaign for improving the proportion of weak and non-swimmers that would identify themselves as such to pool staff. Target = 50% of weak and non-swimmers would identify themselves to pool staff.
4. Any barriers and enablers in the use of communication resources to encourage weak and non-swimmers (particularly from CALD communities and those who have a physical disability) to inform a staff member of their vulnerabilities before entering the water.
5. The impact on public swimming pool staff in the use of communication resources for weak and non-swimmers in interacting with patrons.

METHOD

Campaign method

Campaign development

LSV engaged the services of Quantum Market Research to conduct background research to gain greater knowledge regarding weak and non-swimmers, including individuals from CALD communities and those with physical disabilities, to gain an understanding of their aquatic behaviours, awareness, knowledge and key communication channels related to recreating in public pools.

Triandis' Theory of Interpersonal Behaviour was employed as a theoretical framework for understanding how to encourage at-risk public pool users to identify themselves to pool staff. *Appendix 1* includes a summary as well as excerpts from the report outlining the conditions important for change that are not currently being met. These were used to direct the key messaging and materials for the campaign for both audiences. It was further noted that static posters in isolation cannot fulfil the communication objectives as they are inconsistently observed. In order to trigger and reinforce positive behaviours, the audience needs guidance on how to self-identify. Therefore, an important aspect of the project (similar to the Watch Around Water program) was to provide public pool staff with training.

Staff training

A SwimSafe training manual was developed based on the existing Watch Around Water training manual and was tailored to suit the campaign objectives. Pools were provided with the training manual and accompanying PowerPoint presentation to train staff to aid delivery of the campaign.

The training manual included information on: The background aim and objectives of the campaign; Effective display of campaign materials; Active application information; Steps for successful implementation of the campaign; Staff roles and responsibilities.

Campaign components

The three key components of the SwimSafe campaign, are presented below.



1 Display and communication of SwimSafe campaign

- A patron sees the campaign materials when they enter the facility.
- They decide whether the campaign applies to them.



2 Identification of vulnerable patrons

- Customer service staff may ask a patron if they can swim one length of the pool.
- The patron asks for information on the '5 tips'.



3 Communication of the '5 tips' to patrons

- If applicable, staff describe the '5 tips' to the patron and provide the card/brochure with the '5 tips'.



Evaluation method

Study setting

A convenience sample of public swimming pools in metropolitan Melbourne, Victoria was used for the study. The sample of eight public pools were managed by four organisations (YMCA, Aligned Leisure, Belgravia Leisure and Yarra Leisure), and were matched demographically for control or intervention conditions. The pools were confirmed following discussion with PTPS.

Campaign (intervention)

The intervention was conducted over an 11-week period, with resources installed throughout the four control pools, including the entrance, front desk, change rooms and pool deck. A sample of these resources is shown below.



Sampling method

Participants

The targeted sample size was 100 weak and non-swimmer patrons per pool: 50 pre-campaign and 50 post-campaign. All members of the public (patrons) aged 17 years and over visiting each of the above-mentioned public pools (pools) were able to participate. However, the key target audiences were:

- Weak and non-swimmers: Defined as respondents that described their swimming ability as, “I cannot swim” or “Weak swimmer”, and/or described their floating ability as “I cannot float or swim” or “I can float for less than 1 minute and swim less than one length of a public swimming pool (25 metres)”.
- Target group: Defined as respondents that identified themselves as at least one of the following: a weak or non-swimmer (defined above); aged 65 years or above; from a CALD background (defined above); a person with a physical disability; and/or a person with a long-term health/ medical condition. Whilst not all members of the target group identified themselves as weak or non-swimmers, they possess traits that may put them at greater risk of injury in an aquatic environment. These traits include, physical characteristics and/or a lack of water safety education in country of birth or familiarity with public pool safety in Australia.

Other respondents: Defined as respondents that self-described themselves as “OK”, “good” or “very good” swimmers; and who met all of the following criteria: able to comfortably float and gently swim for 5 minutes or longer; aged 17-64 years; with no physical disability or long-term health/ medical condition; born in Australia and who speak English at home. These respondents were excluded from analysis.

Staff at intervention facilities were also included to gain their feedback following the 11-week campaign.

Measurement

This study included a pre-post survey of patrons across eight public pools - four intervention and four control pools.

- Pre-campaign surveys were conducted prior to the communication materials being placed in pilot study pools (2-16 May 2019).
- Post-campaign surveys were conducted 11 weeks after the communication materials were placed in pilot study pools (1-13 August 2019).

The questionnaire took approximately 5-10 minutes to complete and included a combination of 21 open- and closed-ended questions that were designed to meet the objectives of the campaign. Pre-campaign surveys were collected at each pool over four days (two weekend days and two weekdays) and for two to four hours per day. Trained staff visited the pool at times with typically high visitation numbers to increase the number of responses and at times when members of the target group were most likely to be in attendance). This was repeated post-campaign.

A staff survey and interviews/ focus group sessions were conducted following the intervention in August 2019 at times most convenient for pool staff.

Data analysis

Data was entered via the cvent online survey tool with summary statistical analysis conducted with IBM SPSS 24 and figures produced in Microsoft Excel. Qualitative data from interviews and focus group sessions with staff were transcribed and thematic analysis was conducted.

CAMPAIGN FINDINGS

Overview

Respondent demographics, knowledge and visitation characteristics





















1,272 patrons were surveyed pre- and post-campaign across the eight public pools. Of these, 358 patrons were not classified as being within the target group and were excluded from the analysis. The remaining 914 patrons demonstrated one or more characteristics that placed them within the target audience, including 334 who identified as weak or non-swimmers. Table 1 summarises the study sample by intervention, respondent group and campaign stage among the target audience. The demographics and visitation characteristics for patrons from these groups are described in Table 2.

Patrons demonstrated good knowledge of how to be safe at public pools (Figure 1), and most rated themselves as weak or non-swimmers, with limited swimming and floating competency (Figure 2Figure 3).

Table 1 Survey responses by intervention type, respondent group and campaign stage

| Intervention | Respondent group | Stage | | Total |
|----------------------------------|-----------------------------------|----------------------------|--------------------------------|-------|
| | | Pre-campaign (May 2019) | Post-campaign (August 2019) | |
| Intervention pools (campaign) | <i>Weak and non-swimmers only</i> | 54 | 89 | 143 |
| | <i>Target group only</i> | 188 | 240 | 428 |
| Control pools (no campaign) | <i>Weak and non-swimmers only</i> | 94 | 97 | 191 |
| | <i>Target group only</i> | 259 | 227 | 486 |

Table 2 Weak and non-swimmer and target group respondent demographics and visitation frequency

| | Weak and non-swimmers (334) | Target group (914) |
|---|--|---|
| Gender |  69% (229)  30% (99) |  61% (554)  38% (346) |
| Age range (two most common ranges) |  35% (116) >=65 years  29% (97) 35-44 years |  37% (340) >=65 years  28% (225) 35-44 years |
| Country of birth |  33% (110)  57% (190) Other countries |  37% (338)  47% (431) Other countries |
| Language spoken at home |  ENGLISH 38% (128)  OTHER 58% (192) |  ENGLISH 49% (445)  OTHER 49% (447) |
| Frequency of visit |  69% (231) (Weekly)  16% (54) (Only for child's lesson) |  71% (653) (Weekly)  12% (112) (Only for child's lesson) |

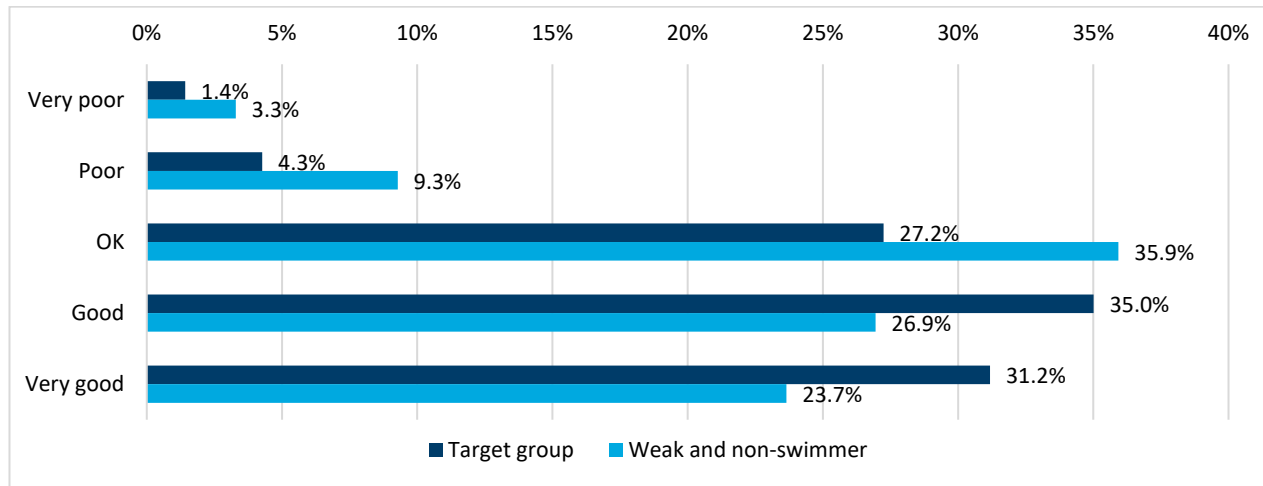


Figure 1- Self-reported knowledge on how to be safe at public pools by weak and non-swimmer and target group

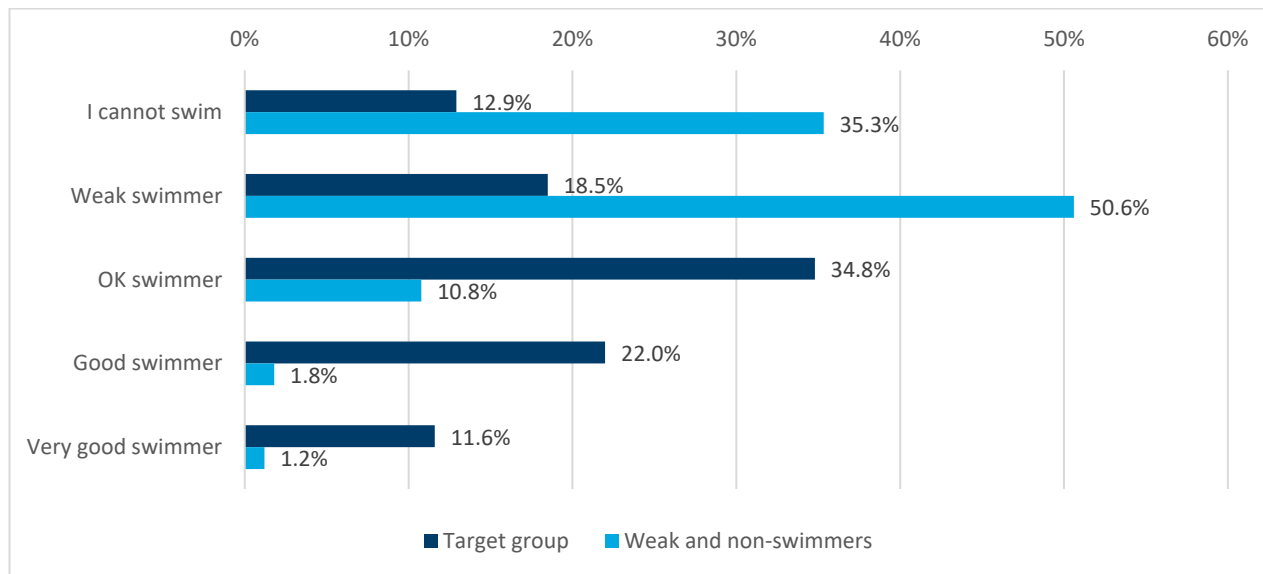


Figure 2- Self-reported estimates of swimming competency by weak and non-swimmers target group

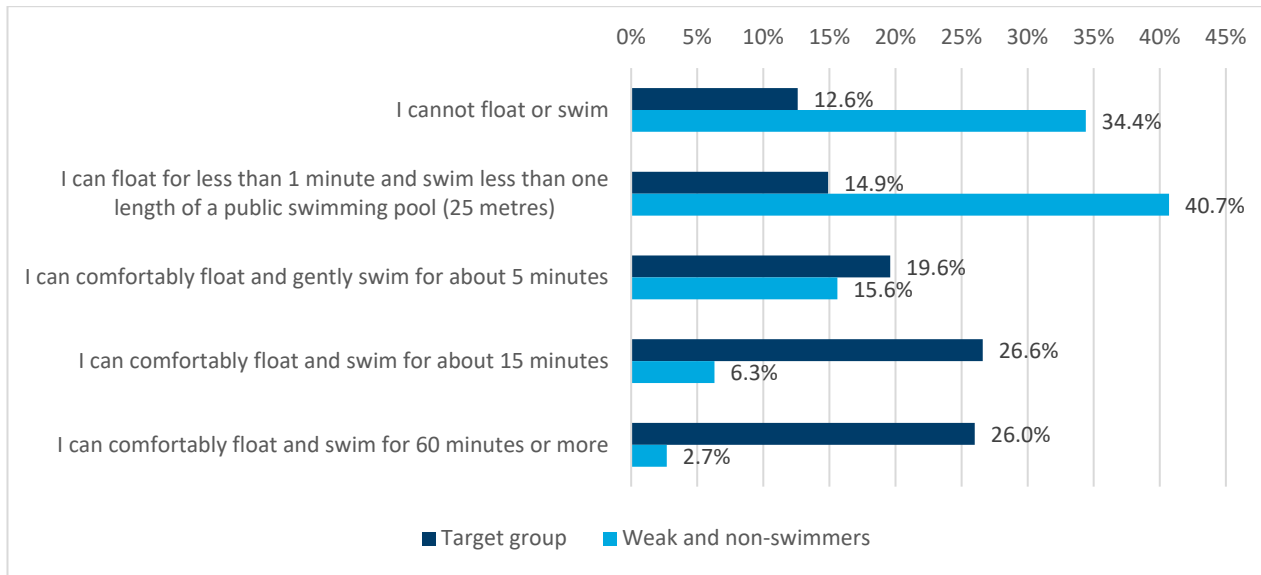


Figure 3- Self-reported estimates of swimming and floating competency by weak and non-swimmers and target group



Objective 1 Recognition and recall of key communication messages

Objective 1 measured the effectiveness of the vulnerable swimmer communication campaign for improving recognition and recall of key communication messages for weak and non-swimmers.

Unprompted recall

Unprompted, almost one-third (30.0%, 37) of patrons within the target group recalled the specific SwimSafe campaign, including over one-quarter (26.0%, 13) of weak and non-swimmers (Table 3).

Prompted recall

To determine prompted recall of the materials that had been displayed in each of the four intervention pools over the duration of the campaign (in the form of posters, banners, brochures and electronic notices), respondents were shown a sample of campaign materials.

When prompted, three-quarters (75.8%, 182) of patrons from the target group and two-thirds (69.7%, 62) of weak and non-swimmers recalled seeing the SwimSafe materials at the pool post-campaign (Table 3). This is substantially higher than pre-campaign recall (below 20 per cent) and compared to control facilities (below 29 per cent as demonstrated in Figure 4).

Table 3 Post-campaign unprompted and prompted recall of SwimSafe materials for intervention pools

| | Weak and non-swimmers | Target group |
|---|-----------------------|--------------|
| Unprompted recall | | |
| Proportion who recalled seeing any water safety information around the pool in the past 12 months | 57.3% (51) | 62.5% (150) |
| Unprompted recall of SwimSafe materials | 26.0% (13) | 30.0% (37) |
| Target achieved (30% recall) | No | Yes |
| Prompted recall | | |
| Prompted recall of SwimSafe materials | 69.7% (62) | 75.8% (182) |
| Target achieved (30% recall) | Yes | Yes |

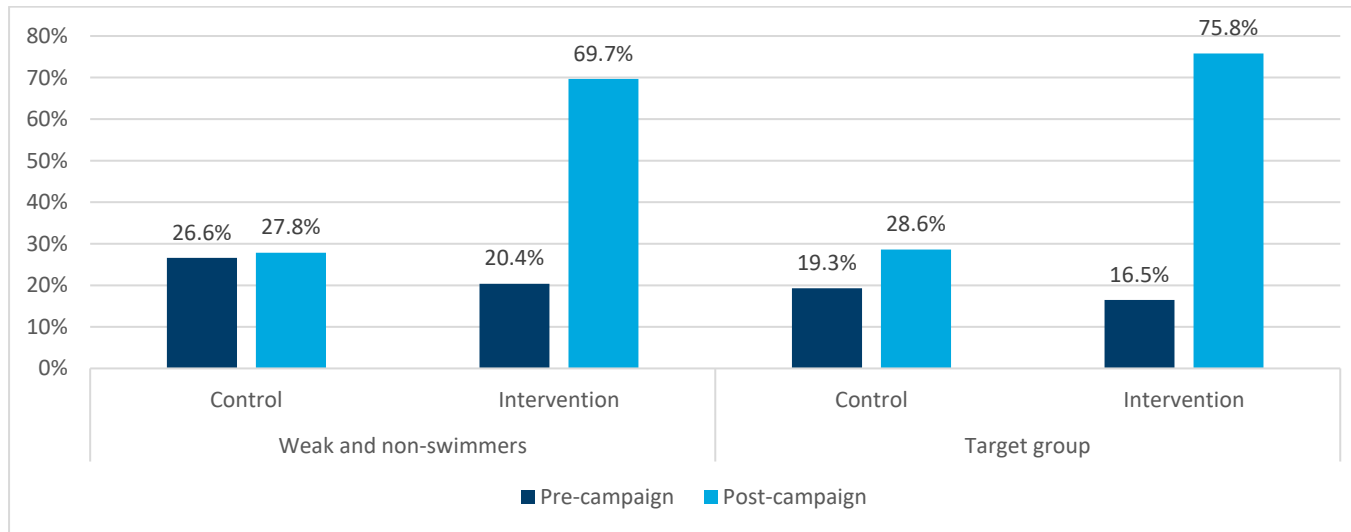


Figure 4- Prompted recall by weak and non-swimmers and target group by intervention type

Recall comparison with previous research

The current study campaign materials (Year 3) saw greater recall than materials produced in a previous study (Year2), as shown in Figure 5.

It is noted that for the current study (Year 3), materials were tested for impact in terms of the key messages and ‘look’ of the campaign. In addition, staff were provided training and resources to assist them with campaign delivery. Conversely, the previous study (Year 2) materials were not tested prior to implementation and the training provided to staff varied.

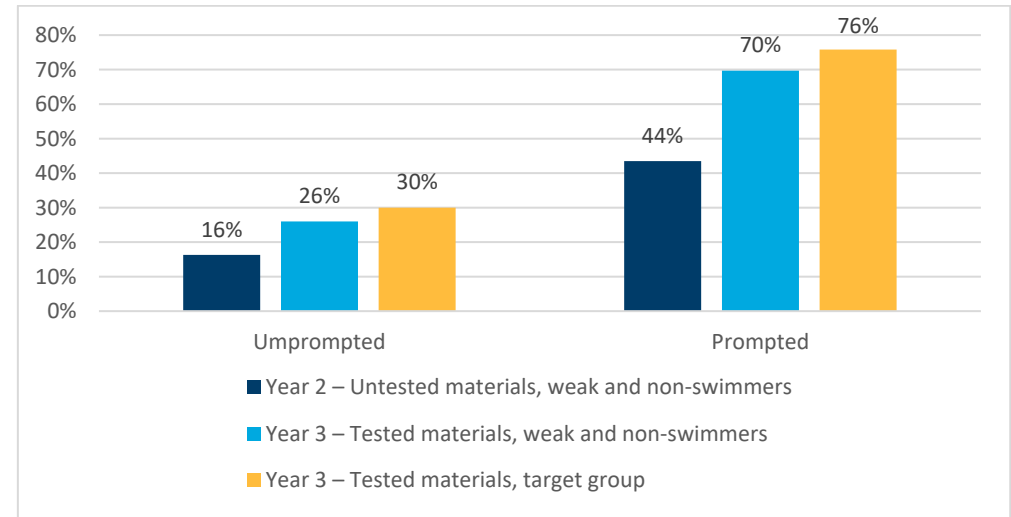


Figure 5- Comparison of campaign recall (unprompted and prompted) for untested (Year 2) vs tested (Year 3) materials

Objective 2 Awareness of water safety

Objective 2 measured the effectiveness of the vulnerable swimmer communication campaign for improving awareness of water safety and the risk of drowning in a public pool for weak and non-swimmers.

Patron feedback

Weak and non-swimmers overall demonstrated lower knowledge of how to be safe at public pools than the broader target group (Table 4). Whilst the campaign had no impact on the self-rated knowledge of public pool safety among the target group, knowledge improved among weak and non-swimmers. Those who reported their knowledge as good or very good increased from 48.1% pre-campaign to 59.6% post-campaign, at intervention pools.

Table 4 Proportion of weak and non-swimmers and target group that self-rated their knowledge of how to be safe at public pools as good or very good, by intervention type.

| | Weak and non-swimmers | | Target group | |
|--------------|-----------------------|---------------|---------------|--------------|
| | Pre-campaign | Post-campaign | Post-campaign | Pre-campaign |
| Control | 45.7% | 48.5% | 62.1% | 64.1% |
| Intervention | 48.1% | 59.6% | 69.2% | 70.2% |

Staff feedback

Of staff surveyed, 62.3% of respondents and most focus group participants agreed that the campaign was successful in improving awareness of water safety and the risk of drowning in a public pool for weak and non-swimmers. A focus group participant who agreed, stated, “A number of patrons were unaware of how to call for help if in difficulty while in the water.”; and a survey respondent commented, “I think it was a good way to spread some awareness and it was a clear method in teaching patrons the risk of certain behaviours.”.

Various reasons were given by those that did not agree that the campaign was successful in improving awareness. The main reason was that resources were provided only in English and not in “...languages of the people who have drowned.” Staff believed that the attention of CALD patrons cannot be captured if campaign materials are limited to just the English language, thereby “severely affecting the ability of the campaign to raise awareness or begin conversations effectively”. Another reason was concern regarding communication to staff about the campaign. One staff member reported that they “haven’t been told anything about this program”. In contrast, staff members from another pool reported being fully aware of the campaign. One person said, “Plenty of information for staff to educate themselves on the campaign.”.

Objective 3 Informing staff

Objective 3 measured the effectiveness of the communication campaign for improving the proportion of weak and non-swimmers that would identify themselves as such to facility staff. Target = 50% of weak and non-swimmers would identify themselves to facility staff.

Patron feedback

The target of 50% of weak and non-swimmers reporting they would identify themselves to facility staff was achieved, with 52.3% (81) of weak and non-swimmers and 51.2% (168) of the target group stating they were likely to tell a staff member or lifeguard that they cannot swim well or are not confident in the water (Table 5).

However, of 97 weak and non-swimmer respondents, only one reportedly asked a staff member for tips about staying safe in the water and two told a staff member or lifeguard that they were not feeling confident in the water at the time of their visit. Although the majority of patrons did not approach staff, they did demonstrate increases in water safety knowledge – that they could put their hand up for help (17% to 57%) and to read safety signs (18% to 48%) (Table 5).

Table 5 illustrates specific indicators and action items that were used to evaluate the extent to which campaign targets were met.

Staff feedback

Twenty nine percent of staff survey respondents reported that people from the target group had asked them about the SwimSafe campaign and 68.9% of staff reported that they were not asked about the campaign. Staff who were interviewed felt that the campaign materials served as “a good conversation starter” and prompted patrons to enquire about the campaign. They did not face any difficulties while communicating the 5 Tips to weak and non-swimmers. However, a customer service representative said, “having to explain the initiative when many people are waiting was difficult initially”.

It was also noted that most patrons who asked about the campaign “...wanted to know what the pictures meant”. When the 5 Tips were explained to them, some patrons said the posters were “nice and clear” and others felt that while the materials were good, “it didn’t apply to them”. Staff thought the campaign was essential and stated, “I think having that information at the front was really effective, and informed people about it. Before that we didn’t really have anything and I think if people feel uncomfortable about asking (for assistance) at least there’s signage up and they can read it themselves, and (we can) then ask if they have further questions.”

Staff also thought the timing of the campaign could be improved, as most patrons who use the pool during winter are regular patrons who are already familiar with such safety tips.

Table 5 Changes in intentions, actions and knowledge among weak and non-swimmers and target group, pre- and post-campaign in intervention facilities

| | Pre-campaign | Post-campaign |
|--|--|--|
| Weak and non-swimmers | | |
| Intention Proportion who were likely to tell a staff member or lifeguard that they cannot swim well or are not confident in the water | 51.6% (70) TARGET MET | 51.9% (81) TARGET MET |
| Action Number who spoke to a staff member as a result of seeing campaign materials | 0 of 89 | 3 of 97 |
| Knowledge What have you learned about safety at public pools from these pictures? | That I can put my hand up for help (17%) To read safety signs (18%) To stay within my safe depth (16%) | That I can put my hand up for help (57%) To read safety signs (48%) To stay within my safe depth (37%) |
| Target group | | |
| Intention Proportion who were likely to tell a staff member or lifeguard that they cannot swim well or are not confident in the water | 54.6% (160) TARGET MET | 51.2% (168) TARGET MET |
| Action Number who spoke to a staff member as a result of seeing campaign materials | 3 of 188 | 5 of 227 |
| Knowledge What have you learned about safety at public pools from these pictures? | That I can put my hand up for help (36%) To read safety signs (42%) To stay within my safe depth (16%) | That I can put my hand up for help (70%) To read safety signs (44%) To stay within my safe depth (36%) |

Objective 4 Barriers and enablers

Objective 4 identified barriers and enablers in the use of the campaign materials to encourage weak and non-swimmers to inform a staff member of their vulnerabilities before entering the water.

Patron survey

Overall, although only three weak and non-swimmers approached staff to ask about the campaign or tell them about their vulnerabilities, patrons had a positive response to the campaign, with 83.3% (145) of weak and non-swimmers and 81.4% (358) of the target group stating that they would recommend the campaign to other pools in Victoria.

When patrons were asked about the images of the materials, 25.5% reported that they would not change the content, as “they are easy to understand” and “more than adequate”. A number of patrons had put forth suggestions to improve the materials and a few patrons considered the materials to be redundant.

The most common implications are as follows:

- Change the “Ask me about the 5 Tips” picture to be more reflective of a person speaking to a “staff member or lifeguard”. Most people felt that this picture was similar to the “Put your hand up for help” picture. Patrons were unaware that materials were designed to be lanyards and so were confused about the image, “Ask me for help”, where one patron said, “they don’t clearly state who you can ask for help” and questioned, “who is ‘me’?”.
- Patrons also asserted that the signs must be “in different languages”. One person said, “50 per cent of people here speak other than English” and another patron commented, “Some may be unclear if English is not your first language”.

Staff feedback

Table 6 provides a summary of staff members’ perspectives on barriers and enablers for effective implementation of the campaign.

Table 6 Staff perspectives on barriers and enablers in the use of campaign materials

| BARRIERS | ENABLERS |
|---|--|
| <p>Language barriers</p> <ul style="list-style-type: none"> • “Lack of material in diverse appropriate languages.” <p>Patrons’ willingness to report their swimming ability</p> <ul style="list-style-type: none"> • “People not willing to admit they are bad swimmers.” • “...I think it’s really good, but if you’re not going to get anyone admitting they’re not a good swimmer then it’s still going to be a problem. It’s got to come from the community, they have to own it.” <p>Time management</p> <ul style="list-style-type: none"> • Lifeguards found it challenging to focus on their duty while talking to patrons who wanted “extended discussions around the campaign...” as it was “difficult to have whilst maintaining adequate supervision...”. Some reception staff were more focused on moving patrons through the entry point quickly (especially during busy times), rather than asking about their swimming ability. <p>Excess signage</p> <ul style="list-style-type: none"> • “Information overload with other initiatives going on at the same time.” • “Difficult at our facility due to signage saturation.” <p>Pool management issues</p> <ul style="list-style-type: none"> • Resources not provided by pool management; “I asked for a copy of the tips, but management had not provided any so therefore there just a verbal discussion...” | <p>Training</p> <ul style="list-style-type: none"> • “The training was good.” <p>Campaign materials</p> <ul style="list-style-type: none"> • “Easy to wear lanyards.” • “Colours drew attention to the signage and posters.” • “Multiple visual resources” installed “in a lot of places”. |

Objective 5 Impact on public swimming pool staff

Objective 5 measured the impact on public swimming pool staff in the use of campaign materials for weak and non-swimmers in interacting with patrons.

Staff feedback

- 57.8% of staff surveyed agreed that the campaign had helped them, other pool staff and lifeguards talk about vulnerabilities with patrons.
- Most focus group participants believed the campaign was an “innovative and effective” approach to improve water safety and indicated that they would recommend the campaign to other public pools.
- Table 7 is a summary of why staff agreed and/or disagreed that the campaign materials were helpful in communicating water safety messages to patrons.

“Despite me not needing to point out the 5 Tips for any patrons, having the tips on a lanyard which is with you at all times and having hard copy posters in the centre makes the campaign simple and accessible for everyone.”

Table 7: Reasons why staff agreed and/or disagreed that the campaign materials were helpful in communicating water safety messages to patrons

| AGREE | DISAGREE |
|--|---|
| <ul style="list-style-type: none"> • Staff agreed that the campaign aided communication of water safety messages. A focus group participant stated, “Sometimes basic pool safety... people don’t understand these things, but just simple 5 Tips makes it easier for everyone.” • Some staff members asserted that the campaign materials acted as more of a prompt for staff to initiate dialogue with patrons, rather than encourage patrons to start conversations - “I don’t think it encouraged people to initiate discussions, though it was a useful reference for us to initiate conversations when needed.” • Staff commented on the resource which was most useful in communicating campaign messages, a staff member said, “Lanyards invited questions to CSOs [Customer Service Officers] – makes it easier to talk about.” | <ul style="list-style-type: none"> • Lack of awareness of the campaign among staff and the disregard of campaign materials by management emerged as primary reasons why the campaign did not positively impact some staff. • Although most focus group participants found the placement of campaign materials reasonable, some suggested that the delivery of the campaign was impeded as the materials were not installed around areas where people over 65 years of age attended classes. |

“The signs were really good for kids because it was easily viewable and taught them how to get the attention of lifeguards which I saw an increase in them doing - not necessarily in need of immediate help but did encourage them to practice and feel able to talk us which is really important.”

DISCUSSION

In order to trigger and reinforce positive behaviours the audience needs guidance on how to self-identify. The campaign materials tested indicated positive changes in awareness and recall of messaging. In earlier stages of the research it was noted that static posters in isolation cannot fulfil the communications objectives as they are inconsistently observed. Therefore, an important aspect of the project (similar to the Watch Around Water program) was to provide training for the staff. This was coordinated by LSV's Public Training and Pool Safety (PTPS) team.

The results demonstrated strong campaign recall; therefore, the materials were successful in capturing patrons' attention and improving recognition and recall of key SwimSafe messages. Public pool safety knowledge improved between pre- and post-campaign for weak and non-swimmers, which is also evidence for the effectiveness of the campaign.

The overall success of the campaign materials in capturing patrons' attention and improving recognition and recall of key messages was likely a result of a combination of factors including: evidence about the target audience provided prior to development of the materials, pre-testing the specific materials, and staff training to ensure consistent and informed delivery. Adequate training, concerted efforts to display and interact with the materials and support from management were crucial for successful implementation.

The overarching sentiment from staff was that the campaign was successful in improving awareness of water safety and the risk of drowning in a public pool for weak and non-swimmers, acting as a reminder for patrons to be safe at the facility. Improvements suggested were that CALD patrons would be more inclined to inform a staff member of their vulnerabilities if materials were adapted in several languages applicable to the target group. However, findings from previous research indicated that after 3-6 months of campaign implementation (i.e. reception staff made a concerted effort to find out the swimming ability of every casual patron and lifeguards observed, then approached and engaged with weak and non-swimmers on pool deck), there was a high level of receptivity to the questions and approximately one patron per month advised a staff member they were a weak or non-swimmer – despite materials being untested and in English (LSV, 2018c).

Limitations

Since the method was based on convenience sampling, there is a possibility of bias and sampling errors. For example, public pools with more patrons from the target group might have been excluded due to convenience sampling. The campaign was conducted in autumn and winter months, therefore campaign effectiveness may differ in summer months, when facilities are generally busier with casual patrons.

RECOMMENDATIONS

Two main recommendations emerged from pool staff and patron feedback:

1. Provide training to pool staff about the campaign prior to implementation and to encourage management to supply campaign materials provided by LSV to staff when required.

- “Need management to tell us about this program.”
- “Meeting to create understanding of why we’re doing this and why it needs to be implemented. Staff that don’t have a lifeguard background have no idea how important it is.”

2. Modify campaign materials/ introduce new materials for more effective communication of campaign messages.

- “The lanyards weren’t waterproof, working around water these became damaged very easily.”
 - “Use waterproof lanyard cards in future, it will look a lot nicer than tattered cards that are water damaged.”
 - “Make the signage to go on walls or glass to reduce tripping hazards around pool deck.”
- Further, consider placing materials around the pool deck where weak and non-swimmers and the target group are known to recreate, for example, the aqua aerobics pool.
- “Create content that is accessible to CALD patrons.”. “Information presented in multiple languages.”
 - A focus group participant suggested a recorded message be played over facility PA systems to further assist with implementing the campaign at facilities.

“Good initiative, though more support in its rollout would be good. Also maybe coordinating with swim teachers so they are on board.”

“I think the idea of the campaign is great, the lanyards could do with some material adjustments. Apart from this good work!”

“It should be introduced to as many facilities as possible. Teach it to children from swimming instructors, to school teachers.”

“...it is an important missing piece in the industry. If it were as widespread as WAW it would have a greater impact.”

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APPENDIX 1 Summary of findings from the *High-Risk Pool Users Phase One* report by Quantum Market Research

Research

Exploratory research was conducted including, one-on-one interviews at public swimming pools with 12 people from CALD communities and 6 people who have a physical disability. A summary of findings for each audience is outlined below.

CALD audiences

Three interviews each from Chinese, Indian, African and Middle Eastern background. All were born overseas, moved to Australia in the last 5 years and had experience swimming in a public pool and/or would swim in a public pool in future. They were all unable to swim 50 metres or tread water for two minutes.

CALD individuals readily identify themselves as vulnerable in the water, it is not something that causes embarrassment or shame. A lack of confidence leads them to be cautious and actively seek out safety cues (depth of pool, lifeguards, floatation devices). There is a clear desire to feel more comfortable in water and fit in with social norms.

A key barrier to self-identify as at-risk is that public pools are perceived to be inherently safe therefore not triggering a need to be safety conscious. It is out of naivety of their vulnerabilities, rather than being reckless that they fail to consider that they may be at risk. The pool environment is already cluttered with information and static posters often go unnoticed (except those on pool cleanliness due to this being a significant issue in CALD countries of origin). They are looking for direction to adhere to social etiquette such as what to wear and what the steps are involved in visiting a pool. They agree that identifying to staff would make them safer. Furthermore, both a fear of water and nervousness of breaching social etiquette mean that CALD audiences are especially open to advice on their first few visits to a public pool.

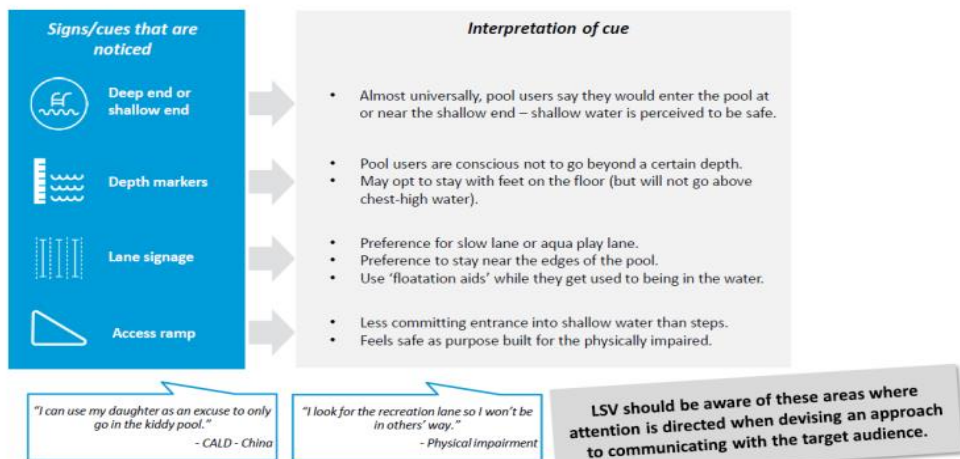
Physically impaired audiences

Six interviews with people who: currently have an illness or injury that permanently impairs their physical mobility; the disability began within the last five years; have experience swimming in a public pool; the disability has affected their ability to swim.

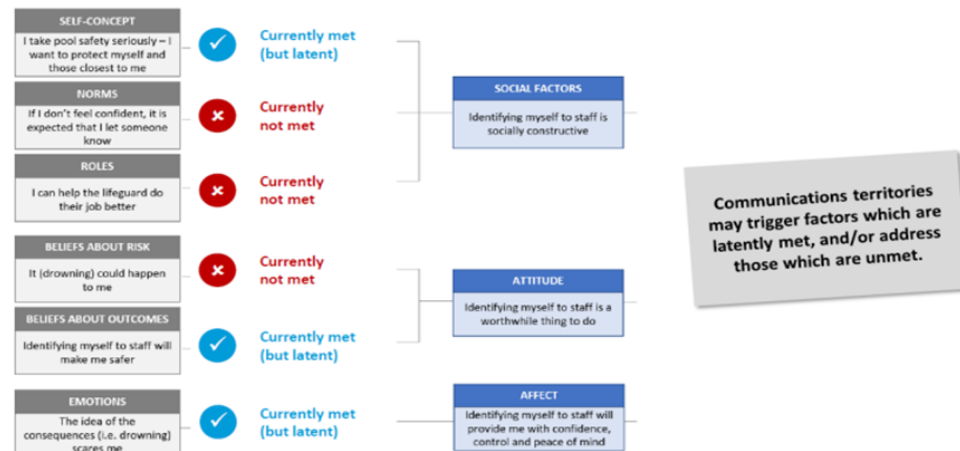
For those with a mid-life physical disability confidence in the pool environment is high due to previous experience however self-esteem is low with a focus on personal insecurities surrounding their disability. There is a conflict between not wanting to stand out and the need to make concessions to their disability. It is in the forefront of their mind that their disability is not visible and that it is often necessary/ desirable to self-identify. Swimming is appealing because it represents an activity that those with physical disabilities are still able to do and which offers health and wellbeing benefits.

Similar to CALD audiences, barriers to self-identify as at-risk include: the perception that public pools are inherently safe, and it is out of naivety of their vulnerabilities that they fail to consider they may be at risk. They are confident in navigating the pool environment from past experience and take personal responsibility and therefore don't think to look for signage. However, they do agree that identifying to staff would make them safer.

Pool users look for specific cues to ascertain the information relevant to them



Conditions important for change that are currently not met centre around social norms, roles and perceptions of risk





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