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## Safety Splash: Pool Safety for Children and Adults

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SAFETY SPLASH:  
POOL SAFETY FOR CHILDREN AND ADULTS

An Undergraduate Honors Thesis  
Submitted in Partial fulfillment of  
University Honors Program Requirements  
University of Nebraska-Lincoln

by  
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## Abstract

This outreach project was made to address the issue of too many children drowning at pools due to a lack of water safety education. The dissemination of pool safety education is imperative to reduce accidental injuries and drownings. The goal of the Safety Splash video and supplemental materials is to provide pool safety education for children and adults. By encouraging conversations between children and adults before going to the pool, there can be an intervention that reduces the risk of injury and drowning once they arrive. Through research, I compiled information to support the effectiveness of a combination video, pamphlet, and activity sheet program. This was grounded in health communication design, which informed the script and shot list of the video. Safety Splash teaches children and adults how to approach playing around water and provides explanations for these guidelines. It outlines common behaviors at the pool which should be avoided and outlines common rules that are standard practice at many pools. This video and program use simple language to appeal to children and a wider audience. This resource is free and accessible via the internet so as to reach as wide an audience as possible.

**Key Words:** Communication, Education, Intervention, Pool, Program, Safety, Video

## Review of Literature

### Introduction

According to the Center for Disease Control, swimming is the most popular recreational activity for children and teens ages 7-17 (U.S. Department of Health & Human Services, 2021). Despite this, only around 20% of the children asked said they planned to get a formal water safety education (American Red Cross, 2015), and sadly, the number of water-related injuries and deaths in children reflects this inattention to water safety.

Too many children die due to accidental drownings at public pools. According to the CDC, drowning is a leading cause of death for children, as exemplified by the 3900 drownings of children recorded each year in the United States. These drownings often occur when there is a lack of caregiver supervision and engagement of hazardous play near water. To prevent drownings, children and caregivers can increase their water safety knowledge by enrolling in swim lessons (U.S. Department of Health & Human Services, 2021). This suggests a real need to enhance the water safety training protocols for both children and adults.

Any effective educational intervention for youth must involve children and their parents or adult caregivers since it is shown that a significant proportion of injuries in children occur due to lack of attention and care from adults (Silva, Fernandes, et al., 2016). In a study conducted in Brazil with a group of 155 mothers, a pre and post-test were recorded to test the effectiveness of a dialogued health intervention teaching caregivers about how to prevent common injuries to children in the home: falls, drownings, and intoxications. It was shown to be statistically significant that after the 30-minute educational intervention the caregivers retained information pertinent to their administration of care in the home to prevent these injuries. It is important to

note that these caregivers did not correctly answer questions on the pre-test about best practices on how to keep children safe, with the correct response to preventing drownings being “Children should always be under adult supervision and not play alone in places with water.” (Silva, Fernandes, et al., 2016) This study suggests that intervention was successful in helping almost all of the women’s responses, so an increase in access to educational materials is a great way to continue to educate people on the ways to prevent injury around water.

Further, Harris and Goodall (2008) found in a data analysis of semi-structured interviews where students, staff, teachers, and parents were questioned about the importance of parental engagement with their children’s learning that the majority of respondents identified parental engagement to be a “good thing.” Students saw parental involvement in their education as emphasizing the value of education, even citing that those who did not have parents who emphasized education performed more poorly in school (Harris & Goodall, 2008). Thus, for the content of the proposed video, it will be important for adult guardians to share involvement in water safety education in order to emphasize the value of being safe around water to prevent injury.

Harris and Goodall (2008) also cited barriers to involvement for families which may be economically disadvantaged, overwhelmed, or less likely to engage with teachers based on social differences. For example, parents were sometimes less comfortable speaking with teachers from a different racial background. This is the primary reason for proposing a video that will be formatted and delivered as an informative video. This video format requires less from the viewers than a full intervention program thereby reducing disruption to busy schedules and it can be made free to access. It could be accessed at any time which would be convenient and would require no subsequent meetings or third-party involvement for the caregiver to engage with the

child. There will be materials provided to guide the caregiver so they can engage with the child however they want while being informed.

An educational video and activity can help children and adults better understand how to behave at public pools to reduce the risk of accidental drowning. I am proposing an accessible educational program aimed at informing children on how to safely play in and around water while simultaneously helping guardians better understand the importance and basics of proper supervision.

### **Health Messaging Design: What it is and why it matters**

Any design of a health behavior intervention has to be effective at both informing its audience on healthy behaviors and at persuading the audience to adopt a change in behavior. For example, informing a population is only effective if the audience is persuaded to change their current behaviors to reflect what they have learned. I am designing this project with the intent to inform children and guardians about behaviors that will result in safer experiences at the pool and persuade parents and children to adopt these behaviors. As a result, it becomes important to understand effective health campaign designs. In order to understand this, I will explore the Health Belief Model and the basics of persuasive messaging.

#### ***Health Belief Model***

The Health Belief Model, which was developed by the U.S. Public Health Service, lays out six facets to health messaging that gauge an effective campaign. It is a psychological model that is used to explain how people's attitudes and behaviors are related to their health beliefs, often with a specific condition or scenario in mind. Thus, it is important for me to anticipate the effect my project has on perceived susceptibility (how likely someone will have an emergency at

a public pool), perceived severity (how severe this incident and its consequences will be), self-efficacy (how much confidence one has in being able to prevent dangerous outcomes), cues to action (any stimuli which trigger the need for a behavioral intervention), perceived barriers (how difficult one thinks preventing dangerous outcomes will be), and perceived benefits (how much someone views these preventative actions as being effective in preventing dangerous outcomes) (Glassman et al., 2018). My aims will be to get children to engage with the material and be able to understand this perceived susceptibility, severity, self-efficacy, cues to action, barriers, and benefits through an activity they can fill out while watching the video. This will serve to reinforce the content of the video for the children to support retention. My goal is to have these children remember important points from throughout the video to which they can refer when at a public pool or around water.

The Health Belief Model has been used in past health campaigns to target the six outcomes I wish to educate my audience on. In a social marketing intervention to prevent drownings among inner-city youth in 2018, there were six different pieces of material (brochure, e-mail, window cling, postcard, Facebook message, and text message) which each targeted a different health belief outcome as listed above. Each of these was shown to make a significant increase in understanding the severity of drowning and how to prevent it (Glassman et al., 2018).

### ***Persuasion***

Another important factor in the creation of properly persuasive health messages is the emotional appeal to the intended population. Feelings of compassion evoked from mixed-emotional appeals had a positive effect on behavioral intentions and social behaviors (Myrick & Oliver, 2018). By integrating storytelling, I'll be able to effectively reach the children

and adult caregivers to feel empathetic to the severity of drowning-related injuries, thus increasing the likelihood of increased safety behavior.

After analyzing health messaging campaigns, Kareklas and colleagues (2015) found that consumers' opinions were shaped by the sponsor as well as the online comments posted by individuals interacting with the campaign. It is important that the message is not perceived as being manipulative in its persuasion or negatively commented on because seeing negative comments may discourage the viewer from trusting the content (Kareklas, Muehling, et al., 2015). I will cite my sources in the video and use ones that are familiar to the public, such as The American Red Cross. The video will come across as non-biased toward any specific population and should encourage all who watch it to recognize that safety is in their hands.

When creating a Public Safety Announcement (PSA) it should be a pro-health-oriented design. There are two main approaches: adoption of positive behaviors and cessation of negative behaviors. The adoption of positive behaviors (gain frame) was more effective when targeting proactive measures that assist in an individual's maintenance of their health and reduction in the onset of illness. The negative (loss frame) was more effective in increasing detection behaviors that search for the prevention of an illness. However, it was found that children under the ages of 8 or 9 had no attitude change from the PSA, and there was no change in their intention to adopt or cease the behavior (Wyllie, Baxter, et al., 2015). It will be more effective for me to use gain frame arguments when talking about behaviors that children are learning about, such as the availability of swim lessons, swimming with a buddy, and asking adults questions. I will employ a negative frame when discussing the risks of bad behavior at the pool, such as running or incorrect use of the slide.

### ***Cultural Grounding***

Cultural grounding argues that health interventions must be derived from a given culture and emphasize a narrative approach. This is known as Narrative Engagement Theory, where culturally grounded narrative strategies for achieving goals are emphasized. The most commonly used strategies were negative consequence appeals and identity appeals. The former focuses on how the act of using substances portrays a negative or undesirable social image and the latter focuses on the positive personal attributes associated with non-use (Krieger, Coveleski, et al., 2013). This gives me some direct lenses through which I can present my argument using the appeals that are most effective. I will be translating them from drug prevention to water safety measures that children and adults need to take at any public pool.

Successful education interventions should be culturally grounded within research about a target population's time and needs. It was found that interpersonal discussion increased deeper message understanding for the population while simultaneously spreading it beyond the exposed population (Leavy, Crawford, et al., 2016). Encouraging conversations with other children and adults should be an effective way to improve the message reception.

### **Behaviors That Support Pool Safety**

In order to develop an effective educational video and activity, it is important to understand what behaviors support pool safety. Next, it should highlight how caregivers can take charge of their children's safety around water. Finally, it will call for caregivers to emphasize the importance of water safety education to their children.

The video will tell children not to run at the pool, the proper way to go down the slide, what the difference between good play and dangerous play looks like, the role a lifeguard plays at the pool and will teach both parents and children the importance of a Water Watcher and taking precautions before swimming.

### ***Child Safety Behavior***

Children need to engage in safe practices around the pool so that they can best prevent injury and drownings. Children's education on water safety is preventative in the cause of future drownings. These behaviors include walking on the deck and not running, wearing life jackets, swimming in guarded water, swimming with guardian permission, and taking swim lessons (American Red Cross, 2021). Failure to adhere to these guidelines can lead to risky behaviors and are the cause of most drownings and injuries.

According to the World Health Organization's (WHO) Guidelines for safe recreational water environments running poolside can lead to injuries such as fractures, dislocations, cuts, lesions, and other impact injuries. The WHO also states that supervision of patrons can reduce the likelihood of an injury occurring via prevention of the behavior. Pool safety education is a preventative aid in case of common injuries around the pool area, so awareness of the risks associated with the behaviors should reduce the risk of patron injury (World Health Organization, 2006).

The use of lifejackets saves lives in the event of possible drowning because it provides buoyancy if you are a weak or non-swimmer. Their intended use is to keep the head and airways above water to ensure proper breathing (U.S. Coast Guard's Boating Safety Division, 2022). The U.S. Coast Guard has laws put in place for the use of lifejackets in boats in open water, and while there is no law for the use of lifejackets at pools, they are still effective at reducing the likelihood of drowning and death occurring.

Using the American Red Cross as a basis for what behaviors I will be emphasizing be used in the video is justified because as an organization it is based on peer-reviewed scientific research. As an organization, they are the authority in the latest regulations and standards in

response to emergencies in aquatics as well as other health fields. The American Red Cross provides classes to those wishing to become certified as a lifeguard, in CPR, AED, and many others. (American Red Cross, 2020) These certifications are what is required in the U.S.A. to be able to hold a position as a lifeguard.

The American Red Cross is led by the Red Cross Scientific Advisory Council which is comprised of over 50 individuals who are nationally recognized as experts across medical, academic, scientific, and aquatic fields. This council continuously conducts research and peer-reviews its findings to update the information to the latest scientific standards (American Red Cross, 2022).

In addition, the American Red Cross works closely with the U.S. government to carry out a federal charter that outlines its rights and privileges as a non-profit organization. This charter lays out the goals and responsibilities of the Red Cross to uphold human rights agreements, other forms of support, and disaster relief (American Red Cross, 2022). Since the organization is a federal instrumentality it can be trusted as a source of information.

The American Red Cross suggests you be “water competent” if engaging in activities near and in water. This means being educated on water smarts, swimming skills, and helping others. Some of these behaviors are: always swimming with someone else present, knowing your abilities, wearing a Coastguard-approved lifejacket, knowing how to call for help, being able to enter/exit the water properly, knowing what the signs of drowning are, knowing CPR and first aid, and paying close attention to children and weak swimmers when they are near or in the water. The Red Cross also suggests that there are ways to make water safety a priority so as to reduce the chances of children drowning. These include: being a “water watcher”, teaching children to ask permission to enter the water, always swimming in a lifeguarded area, and ensure

that the entire family knows how to swim by enrolling in Red Cross swim classes (American Red Cross, 2022).

Though there are a number of behaviors that children need to adopt in order to keep themselves safe around water, caregivers have a key role to play as well.

### ***Caregiver Safety Behavior***

Inadequate supervision around water was found to be associated with an increased risk of injury to children (Morrongiello, 2005). Quality adult supervision at pools is associated with the prevention of child drownings (World Health Organization, 2006). Supervision in the prevention of child injury is defined as watching and listening to the child's movements as well as the caregiver's readiness to intervene in the event of an emergency. Most adults often do not know what to watch and listen for, and they often do not know how to intervene. This video has been developed to address this problem and will focus on the key things they need to know when supervising their children.

Lapses in parental supervision are cited in a significant amount of child drownings. Lifeguards are considered a measure by which to reduce the risk of drownings in aquatic areas. The best practice would be to have continuous adult caregiver supervision in conjunction with lifeguard supervision when at the pool to reduce the chance of accidental drowning. Education on the chance of drowning occurring quickly and quietly is also a preventative measure that increases the quality and quantity of supervision (World Health Organization, 2006).

As a way to prevent a lack of supervision, adults should make it a priority to teach their children to ask permission before going near the water (American Red Cross, 2022).

Caregivers should have quality supervisory practices around water. For any age group, drowning can occur in as little as 20 seconds (Orlowski & Szpilman, 2001). In a 2007 survey

across multiple beaches in New Zealand, caregivers were asked if they believed their children needed close supervision in the water or if supervising from the beach was enough. The number of caregivers who believed their children aged 5 and younger could be watched from the beach was 29%. Another 49% of those with children aged 5-9 said that watching from the beach was fine. The recommended distance for watching children play in water aged 5 and younger is within arm's reach (American Red Cross, 2022). The supervision from beach distance is also too far to prevent other distractions from getting in the way of having a close watch on their children at all times (Moran, 2009). Educational materials need to emphasize quality supervisory practices, such as calling out dangerous behavior, as well as being close by.

These two factors are viewed together and measured over time to see if there is consistency in the monitoring of activities thus judging the attention the child is given (Morrongiello, 2005). It is shown in Morrongiello's research report from 2005 that parents understand that supervision serves as a protective function, yet they believe it should be varied based on various factors such as age, environmental risk, and developmental level. In the case of drownings, caregivers might think their child is an adequate swimmer after swim lessons and thus not watch the child as carefully around water. This will have to be prevented in the video by explaining that any activity around water should be fully supervised no matter what the situation entails because inadequate supervision was determined to be associated with an increased risk of injury (Morrongiello, 2005).

In the event of injury, caregivers need to be educated on the basics of how to respond to a water-related emergency. Adults show a better understanding of proper prevention of injuries in their children after an educational intervention (Silva, Fernandes, et al., 2016). First, while caregivers watch their children in or around water they need to be wary of the warning signs of

water distress: head tilted back in the water, no splashing, gasping, or tired-looking swimming (Roetker, 2019). Second, they should get the child out of the water immediately and call 911. If the child is unresponsive and no heartbeat is detected, CPR needs to be administered until emergency medical services arrive. Knowing how to perform CPR and administering it rapidly in the event of a drowning directly relates to the amount of brain damage sustained from a lack of oxygen while being underwater (Meyer, Theodorou, et al., 2006).

In a study conducted by Moran (2012) parents were questioned about their comfort level in performing cardiopulmonary resuscitation (CPR) on a toddler. One-third of participants said they felt confident, yet only one-fifth correctly identified the proper ratio of chest compressions to rescue breaths. After both interventions were used: an in-person lesson during their child's swim lessons and a home-based intervention video using a practice doll, around four-fifths of parents answered correctly and felt less anxious to perform CPR (Moran, Stanley, et al., 2012). By talking about the use of CPR in the video caregivers will be able to become somewhat familiar with the proper sequence and compressions required in the event of an emergency.

Silva and other researchers conducted an experiment wherein mothers were given a pre-test on knowledge of preventing common childhood injuries, such as drowning. They were then given a 30-minute in-person educational intervention on the prevention of childhood injuries. A post-test showed that the intervention was effective in increasing the knowledge needed to keep their children safe (Silva, Fernandes, et al., 2016). Thus it is important for the information on injury prevention at public pools to be provided to parents both in the video and through supplemental materials.

Many caregivers recognize the importance of making a basic decision to enroll their children in age-appropriate swim lessons to enhance their safety. According to the National

Drowning Prevention Alliance, taking formal swimming lessons can reduce the risk of drowning in children aged 1-4 (Katchmarchi, 2020). Swim lessons are effective at familiarizing children with the water and giving them skills to be able to float for long enough in a dangerous situation to be rescued (Bugeja & Franklin, 2013). Further, enrolling in swim lessons was shown to improve understanding of water safety across all demographics in young children (Glassman, Castor, et al., 2018). This is why in my video I'll emphasize signing up for swim lessons as a way to view water safety as a skill that you can learn. Swim lessons are also a great way for caregivers to engage with their child regularly about water safety and practice watching the child in and around water.

Caregivers need education about the existence of these swim lesson programs so that they can allow their children the in-depth educational opportunity to learn about the proper ways to behave in and around water by professionals.

Though a crucial part of enhancing water safety, swim lessons can provide some caregivers with a false sense of security about their children's safety in the water. For example, Sandomierski and colleagues (2019) conducted a study in which parents who enrolled their children in swim lessons were asked to participate in a control group or be a part of a program test group. This program was called "S.A.F.E.R. Near Water", it incorporated in-person seminars in another room while the swim lessons took place, as well as posters being put up in the pool facility where all parents would see them. The parents who attended the in-person seminars had a better understanding of the risks their children had around water. One of the main perceived differences between the test and control group was that the control group had a higher rate of believing that swim lessons made the child less likely to need supervision. (Sandomierski, Morrongiello, et al., 2019). Thus, though important to supporting water safety, swim lessons are

not enough on their own. An effective intervention on water safety will inform caregivers they need to continue to supervise their children in the water.

In light of this, another key element of improving pool safety for children is educating guardians on their role in supervising their children at the pool and promoting safety whether or not their children have had swim lessons. It is important for guardians to understand the risks of not properly supervising their children and how quickly an injury can occur so that their behaviors adapt to be safer when their families are around water.

### **Caregiver Role in Improving Children's Retention of Safety Messages**

Caregiver involvement in this educational effort is important not only because they play a significant role in providing the necessary supervision at the pool, but also because they have a significant impact on how well their children learn from intervention. Adults being involved in the child's education can help the child retain the information better and increases the likelihood of behavioral change (Anderson, Lavigne, et al., 2012). By increasing the caregiver's understanding of danger around water, and specifically the risks of a public pool, they might be persuaded to increase their supervision as a means of further protecting their children. It is important to consider including the guardian's education on pool safety so they can help their children learn as well. Adults and children who co-viewed TV programs and pointed out objects or happenings on the screen increased the children's responsiveness to the program (Anderson, Lavigne, et al., 2012). When adults engage with their children's learning, there is a positive effect on their socioemotional well-being and improved behavioral outcomes (pg. 384, 2016).

Given the importance of adult caregivers' engagement with safety protocols, it is vital that any intervention designed to support increased safety is based on the health messaging

designs that are most effective in influencing behavioral changes. Once a health messaging design has been properly established as a tool to persuade viewers to change behavior, the medium within which these arguments are expressed becomes important as a vehicle to spread the information.

### ***Video Design***

Educational television can be effective when properly made, with markers of a successful program being watched by children, comprehensible for children, and having transfer, which is the ability for the skills from the program to be able to be translated to other contexts (Anderson, Lavigne, et al., 2012). Communication competence theory requires one to consider the knowledge, motivation, skills, relationships, and culture of the target population. It was found that using youth in the development of performance media for the training curriculum increased investment in the process and heightened the ecological validity of the intervention (Hecht & Miller-Day, 2007). Thus, it becomes important for the video to include sections of storytelling and scenario role-plays using real children exhibiting positive and negative behaviors at the pool.

Narratives have a special power in unlocking interpretations and influencing thought and behavior (Sunwolf & Frey, 2001). Narrative framework and role-playing scenarios will be used in my video as they have been found to be effective for health messaging and the prevention of certain behaviors (Hecht & Miller-Day 2007). The importance of cultural sensitivity is highlighted by using evidential strategies. These were found to enhance the perceived relevance of a health issue for a group by presenting evidence about how it impacts said group. The “Keeping It Real” campaign showed that a video was an effective medium for drug use prevention among 9th graders, it was created with narratives that the adolescents themselves provided and included discussions and role-playing scenarios (Hecht & Krieger, 2006).

## Conclusion

Through research, I've produced a pool safety educational video with supplemental materials. This research informed my video by discovering which health messaging designs are most effective at persuading individuals to enact behavioral change. Drowning is a significant cause of death worldwide, and educational intervention has been found to be effective at preventing injury and death. Anybody who watches the video, be it an adult or child, is given clear instructions on what is best to do around the water when they are at a pool. The interaction between adults and children is highlighted throughout the video and supplemental materials so as to emphasize the importance of being proactive and holding one another accountable to reduce the risk of injury and death.

Video is an effective framework to contain educational information, and supplemental materials increase the retention of key messages. The video provides ample information to have the viewer conclude that drownings happen quickly and quietly, pools can be dangerous and injuries are caused by water and lack of proper supervision. The video also teaches viewers that knowledge of pool safety can reduce the risk of injury, what lifeguards do at the pool, and other ways to increase pool safety knowledge. Throughout the video, every topic has an explanation so as to increase the likelihood of information retention and create behavioral change in the viewers in order to be safer around the water the next time they go to a pool.

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