

Curtin University

2019 KEEP WATCH IMPACT EVALUATION COLLABORATION FOR EVIDENCE, RESEARCH & IMPACT IN PUBLIC HEALTH

KEY FINDINGS

KEEP WATCH PROGRAM EVALUATION 2019

OVERVIEW & KEY FINDINGS

Royal Life Saving Society WA (RLSSWA) is funded by the WA Department of Health to coordinate the Keep Watch toddler drowning prevention program. Keep Watch is a state-wide, collaborative health promotion program that aims to reduce the incidence of fatal and non-fatal drowning among children aged 0 to 4 years in Western Australia (WA).

This report presents the findings of an evaluation of the Keep Watch program from July 2017 to June 2019. The evaluation was conducted by the Collaboration for Evidence, Research and Impact in Public Health (CERIPH) at Curtin University, in Perth, Western Australia (WA).

In conjunction with RLSSWA, the CERIPH research team used a suite of tools to evaluate the program. This included: an online and intercept survey; paper-based surveys; Facebook and Google Analytics; and electronic spreadsheets. The evaluation aimed to determine whether the program and its specific strategies were having an impact on awareness, knowledge, attitudes and behaviour of the target groups.

Key findings and considerations for future directions are outlined below.

Campaign

Demographic profile of survey respondents

- As in previous years respondents were predominately female (96.4%), aged between 25 and 44 years (89.7%), located in Perth metropolitan area (62.0%), with a tertiary diploma or university degree (78.3%).
- Most respondents (95.6%) were parents, caring for one or two children.
- At K6, the number of respondents with a significant water source at their residence (47.8%) was similar to previous years (K4 42.1%, K5 53.7%).
- The proportion of respondents from regional areas increased at K6 (K4 17.1%, K5 16.3%, K6 38.0%). This is a deviation from the recruitment protocol (20% sample from regional/remote WA).

Awareness and key messages

• The majority of respondents (84.1%) at K6 recalled child water safety advertising in the past six months, compared to 55.3% at K5 and 78.5% at K4. Television, public swimming pools and Facebook were the most recalled place to have seen, heard or read about water safety at each time-point (K4-K6).

- Unprompted recall of TVC 1 (Distraction) (K5 5.9%, K6 4.4%) and TVC 2 (Pool Gate) (K5 0.0%, K6 1.3%) is low. It is possible that having two campaigns run concurrently is diluting individual TVC recall. However, unprompted recall of the combined campaign, including Keep Watch, TVC 1 and TVC 2 (K5 11.8%, K6 9.1%) is more consistent with values seen for the 'This Much' Campaign (K2 10.0%; K3 16.4%). Worth noting, there was a downward shift in recall of all childhood water safety campaigns at K5 and K6.
- Total awareness of the Keep Watch Campaign increased from K5 (30.5%) to K6 (43.0%)

TVC 1 - Distraction

- Almost half (32.1%) of K6 respondents recognised TVC 1 (Distraction). This was significantly higher than K5 (21.1%). Over three quarters (76.4%) of those who recognised the advert at K6 recalled the key message to supervise children around water.
- At K6, TVC 1 continued to be believable, easy to understand, enjoyable and personally relevant. There was no significant difference between K5 and K6 for any of the advertising diagnostics measured.
- Just under two-thirds (62.4%) of K6 respondents considered doing something as a result of seeing TVC 1 (K5 62.7%). Of those K6 respondents who did think of doing something, around three-quarters (72.2%) said they would supervise their child around water or be more vigilant when doing so (K5 69.2%). An unintended consequence of the TVC 1 has been a proportion of the respondents thinking about enrolling their child in swimming lessons or teaching water safety to their child (K5 19.2%, K6 17.5%).

TVC 2 - Pool Gate

- Almost a quarter (24.7%) of K6 respondents recognised TVC 2 (Pool Gate); significantly higher than at K5 (15.7%). Of those who recognised the advert at K6, more than half (59.9%) recalled the key message to close or secure pool gates, with just under a third (28.9%) recalling the message to maintain, check or fix pool gates.
- At K6, TVC 2 continued to be believable, easy to understand and relevant. There was a significant increase in its ability to grab attention (K5 65.4%, K6 78.4%) and the number of respondents who enjoyed watching it (K5 29.4%, K6 47.1%).
- Around half of respondents at K6 (53.9%) said they would consider doing something as a result of seeing TVC 2 (K5 54.3%). Of those who did think of doing something, around two-thirds (68.9%) said they would ensure gates are closed or working (K5 58.8%).

Keep Watch Program

• There was a significant increase in the number of respondents who recognised the Keep Watch Program (K4 47.5%, K6 60.1%). The recognition mostly came from television, public swimming pools and Facebook.

Knowledge and attitudes

- At K6, the majority of respondents (85.5%) ranked drowning as the leading cause of death amongst children aged 0 to 4 years (K4 78.6%).
- There was a significant increase in the number of overseas-born respondents who identified drowning as the most likely factor to contribute to death in children under five (K4 73.7%, K6 82.0%). At K6, there was no significant difference between Australian-born and overseas-born respondents who identified drowning as the factor most likely to contribute to death amongst children under 5 years of age (Australian born 86.8%, overseas born 82.0%).
- At K6, the nominated locations where a child aged 0 to 4 years was likely to drown were swimming pools (114.5%), other natural waterways (92.8%) the bath (87.8%), and the beach/ocean (81.9%).
- Unprompted, over 80% of respondents at K6 (83.9%) believed supervision was the most effective way to prevent children aged 0 to 4 years from drowning (K4 84.0%). Those indicating 'supervision within arm's reach' remained consistent (K4 7.2%, K6 9.3%).
- When prompted, almost all respondents at K6 (92.6%) considered having a child within arm's reach to be the most appropriate method of supervision around water. There was no significant difference by country of birth at K6.
- At K6, the most frequently nominated reason suggested by respondents as to why pool barriers could fail to prevent a child under five from drowning included: faulty design or installation of gate (24.4%).
- Results showed a significant difference between K4 and K6 for eight out of the nine attitude and belief statements. Positive change was seen in respondents' beliefs that 'drowning can occur in less than 5 minutes of unattended supervision' (K4 93.0%, K6 99.0%) and 'most childhood drowning can be prevented' (K4 91.7%, K6 95.5%). However, negative changes in beliefs and attitudes were seen for most other statements. Of note, many respondents chose not to answer these questions at K6, with number of responses varying from 603 to 203 for the various statements.

Cardio Pulmonary Resuscitation training

- Most respondents at K6 (85.48%) had participated in formal CPR training, though just over a quarter (26.9%) had undertaken the training within the past year.
- Of those who had **not** undertaken formal CPR training, there was a significant decline in the proportion of respondents who planned to undertake training in the next three months when comparing K6 (50.2%) with K4 (43.5%).
- There was no significant difference in CPR training participation by country of birth (No formal CPR training: Australian born 15.1%, overseas born 14.1%).
- Around two-thirds of respondents at K6 (62.8%) agreed that *'I know child CPR and could perform it in an emergency'*, consistent with K4 findings (66.4%).

Formal water familiarisation classes

• Three quarters of respondents at K6 (74.0%) indicated that *'children in their care had participated in formal water familiarisation programs'* (K4 33.7%). Two thirds (68.3%) nominated *'3 to 6 months of age'* as the best time to commence water familiarisation, similar to results seen at K4 (67.7%).

Injury and drowning prevention stakeholder interviews

- A high level of engagement with the Keep Watch Program was reported by all interviewees (n=6).
- Keep Watch was identified as effective, important, valuable and credible.
- Time and competing priorities were the main barriers to discussing drowning prevention with clients.
- Keep Watch resources were identified as enablers that supported unstructured discussion of drowning prevention with clients. This was especially true for those with CaLD clients.
- High-levels of personal confidence in discussing drowning prevention were reported.
 Those who did not work with an injury prevention focus acknowledged they use the Keep Watch resources to support drowning prevention discussions with their clients.
- A number of opportunities were identified for future drowning prevention planning and service delivery including: keeping messaging up in the winter months; ways to use water play to engage more parents; workshop availability for childhood educators and community centre staff.

FUTURE DIRECTIONS

KEEP WATCH PROGRAM EVALUATION 2019

CONSIDERATIONS FOR FUTURE DIRECTIONS

Based on key findings, there are a number of opportunities and considerations for future iterations of Keep Watch.

Evaluation and Research

- Expand the socio-demographic profile of survey respondents, by aiming to increase the proportion of males and grandparents (increasingly care children around aquatic environments) and those from low socio-economic areas;
- 2. Ensure targets are met with regard to demographic composition to ensure results are comparable between waves.

Working with the primary target group

- 1. Target CPR training particularly for those who have not previously participated and the importance of regularly updating skills;
- Bolster media messages through continued integration with community-wide strategies in order to reinforce positive attitudes and beliefs around drowning prevention in children aged between 0 - 4 years;
- Explore novel opportunities to engage and increase awareness of those from CaLD backgrounds;
- Use complementary social media strategies to support TVC 1 (Distraction) and TVC 2 (Pool Gates) to increase reach and saliency;
- 4. Explore website and digital media functionality to better engage the target audience in metropolitan and regional areas; and
- 5. Real-life stories are well received and should be continued.

Working with the secondary target group

- 1. Continue to provide evidence informed resources and professional development for injury prevention and drowning prevention stakeholders;
- Extend the reach of the program to new settings and/or stakeholders who routinely engage with, and provide care for, children aged 0 to 4 years e.g. family day care and seniors' groups;
- 3. Improve dissemination of RLSSWA evidence and resources to stakeholders who cite lacking an evidence-informed approach to interactions with clients;
- 4. Enhance the variety of channels for the secondary target group to promote water familiarisation to the primary target group;
- 5. Increase the promotion of CPR by the secondary target group particularly to those born overseas and recent arrivals to Australia;

- 6. Reinforce the Keep Watch action areas which are consistent with evidence informed ILSF prevention strategies via education and information, denial of access; provision of supervision, and acquisition of survival skills;
- 7. Provide up-to-date resources for health professionals that reinforce positive attitudes and beliefs and complement media strategies delivered by RLSSWA; and
- 8. Review resource branding to ensure consistent recognition of both the RLSSWA and Keep Watch brand.

Contact

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