



New Migrants and Refugee Swimming Programme Evaluation Report

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Evaluation report of health promotion programmes using water and swimming as the medium to improve health and wellbeing for new migrant and refugee communities in Auckland, especially for women.

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Cover photo: WaterSafe Auckland, Whanau Nui programme 2011.

Disclaimer

This evaluation has been developed and carried out by key programme stakeholders, from the organisations above in the absence of funding available to commission an external evaluation. Therefore it is a stakeholder focussed evaluation and whilst measures have been taken to present results objectively, there still may be a potential for bias which has been noted in the limitations section of the report.

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Executive Summary

A culturally appropriate swimming project was developed to address the health and social need of the new migrant community in Auckland particularly for women of Muslim faith. Women's only swimming was piloted in Mt. Roskill in 2004, and has continued since then.

The Muslim Women's Swimming Project has been evaluated three times since its inception in 2005 (Lawrence, 2004; Lawrence, 2005; Marshall, 2007). This is the fourth evaluation report and the purpose is to report on progress since 2007 to ensure that it remains an appropriate and relevant option for the intended audience. Note that there has been a name change from the Muslim Women's Swimming Project to the Women's Swimming Programme to encourage women of all cultures to attend the programme, however the focus does remain on increasing health and well being of migrant and refugee women and those of Muslim faith.

Since 2007, other swimming initiatives for new migrant communities in Auckland have been developed and are included in this evaluation. This evaluation reports on four female only swimming initiatives and one new migrant community swimming project within the Auckland region.

For some communities, mainstream methods of learning water safety and swimming lessons are not appropriate, and participation in water based activity often conflict with cultural and religious values, family commitments and other issues such as cost and transport (Moran & Willcox, 2010). This evaluation addresses those issues and explores how current programmes are assisting communities to overcome these barriers.

Aims and Objectives

All of the swimming projects share the aims and objectives of:

- Increase physical activity and health, with particular focus on new migrants
- Increase mental health and reduce social isolation among new migrants
- To increase social connectedness between people of all cultures (particularly

among women)

- Provide a culturally appropriate and safe environment to learn water familiarisation, confidence and basic swimming skills

Surveys were completed by 150 participants across four swimming programmes targeted to new migrants and refugee communities across Auckland. Additionally focus groups were conducted with participants and programme stakeholders (including instructors, facility staff and community co-ordinators) to gain an overall view of how the programmes are working for all parties involved.

Largely, the results of the evaluation have been very positive. The majority of survey respondents agreed that their health and wellbeing has improved as a result of attending a swimming programme, including physically and mentally. Attending the swimming programmes is a highly social experience for the participants, they enjoy meeting each other and they are motivated to exercise together.

The top three responses for benefits gained from attending the programme were health benefits (26%), keeping fit (25%) and learning swimming and water safety, (17%). Most popular reason for attending swimming programmes were learning swimming and water safety skills, being a women's only night, and for fitness and health reasons.

There was a very high level of satisfaction for the facilities, staff and volunteers across all projects, and participants felt that their needs were being met (e.g. shower curtains and front window covers). The targeted communities appreciate having an option to exercise and swim in a female only environment, and there was a strong desire from those surveyed for more female only venues and days/times. On another note, staff and instructors from three of the five programmes felt that communication and adherence to facility rules could be addressed.

It is evident to see the popularity of swimming programmes for new migrant and refugee communities, especially women, and this has helped with sustainability of the two biggest women's only swimming programmes in Mt. Roskill and Papatoetoe. Recommendations have been made to guide future development of these existing programmes, as well as recommendations for organisations and communities to looking to establish culturally appropriate health promotion interventions.

Development recommendations for the existing swimming programmes include:

- Continuation of Women's Only Swimming Programmes is recommended
- Greater variety of activities at the swimming programmes for example, zumba and gym facilities, weights etc.
- Consider including a nutrition component to increase health outcomes for a holistic health promotion initiative
- Continue using a capacity building model: community involvement; training community leaders to deliver components e.g. water safety, nutrition
- Further cultural awareness and ESOL support should be offered to staff to enable them to adapt their methods to work more comfortably with new migrant, refugee and ESOL communities
- Consult participants about creating a 'participant pool group' to inform and guide programme development to ensure it is appropriate for the target audience attending.
- Swimming lessons need to be offered at all programmes, as many of the women have had no prior experience in the water
- Utilise this captured audience for promoting other relevant health issues, e.g. breast and cervical screening
- Active promotion/marketing of the Swimming Programmes to increase numbers and continue reach into the community
- Continued support to new migrant communities who wish to learn swimming and water safety skills (and do not require separate gender swimming sessions)

Recommendations for new swimming and health programmes for communities include:

- Consider having a variety of activities within the programme for participants, for example: exercise classes and gym facilities
- An ongoing nutrition programme should be offered alongside the physical activity programme to promote a holistic healthy lifestyle
- Have a water safety component in addition to swimming lessons if water-based
- Cultural awareness training should be provided to programme staff and instructors before working with new migrants and refugee communities
- Consider a capacity building model like train-the-trainers to create capacity and empowerment within the community
- Work with community leaders and consult the community to develop an adult learn to swim programme which can be tailored to their specific needs, for

example some communities will require separate gender swimming session whilst others may not (the Burundi community did not require this)

- Keep it fun!

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SECTION 1: BACKGROUND

Literature Review

Over the last few decades, New Zealand, and specifically Auckland, has experienced an influx of migration, particularly from Asian, Middle-Eastern and African countries, resulting in a very culturally and linguistically diverse population (Moran & Willcox, 2010). According to the 2006 census data, 23% of people living in New Zealand were born overseas, compared with only 17% in 1996 (Statistics New Zealand, 2010; Moran & Willcox, 2010). Within the Auckland Region, approximately one third (37%) were born overseas in 2006 (Statistics New Zealand, 2010). The rapid growth of some ethnic groups is further highlighted when comparing 2001-2006 census data within Auckland. The Chinese population had increased by 41%, Indian by 68%, Korean by 62% and Filipino by 53% (Statistics New Zealand, 2010). Additionally, the Middle-Eastern, Latin American and African (MELAA, all grouped together) made up 1.4% of the Auckland population in 2006 (Ministry of Health, 2012). In 2006, 28,637 people in Auckland identify as being MELAA; approximately 14,000 are Middle Eastern, 3000 are Latin American and 11,000 are African. This group is one of the fastest growing population groups and has unique health needs (Statistics New Zealand, 2010). Over half of the African population at the time had been in New Zealand for less than 5 years. Most of the Middle-Eastern population were more settled, being in New Zealand for between 5-19 years. Most Latin American people arrived in New Zealand only in the past decade and made up the smallest population in the MELAA group in the 2006 census (Ministry of Health, 2012). New Zealand also accepts 750 quota refugees annually, with approximately one third being settled in the Auckland region, further adding to the cultural mix.

New migrants and refugees experience a multitude of challenges in their new homes, particularly when shifting from a non-westernised country to a western country such as New Zealand. These include language difficulties, religious differences to supermarket shopping and cooking in a modern kitchen (Guerin, Diirya, Corrigan & Guerin, 2003) and do impact on health outcomes for these people. It is well documented that new migrants from the continents mentioned commonly experience health issues as a result of migration. Sudden decreases in activity and labour intensive work to a much more sedentary lifestyle, paired with a shift from traditional diets to eating new and more processed foods can lead to health issues such as cardiovascular problems, diabetes and mental health problems (Mehta,

2012; Ministry of Health, 2012; Guerin, Diirya, Corrigan & Guerin, 2003).

The recent Health Needs Assessment for Asian people living in the Auckland Region (Mehta, 2012) reports that Indian adults have significantly higher mortality and hospitalisation rates from cardiovascular disease overall and have the highest adult prevalence rate of diabetes than any other ethnic group (excluding Pacific People aged 35 years plus). Africans are following this trend; in 2007 it was found that African people had double the prevalence rate of diabetes compared to Europeans in Auckland (Perumal, 2010). Middle-Eastern adults also show signs of worsening health, in 2007, it was estimated that this population would experience a higher prevalence rate of cardiovascular disease compared to Europeans and Pacific people and also had a significantly higher diabetes prevalence rate than Europeans in Auckland (Perumal, 2010).

To address the unique health needs of migrant and refugee communities in Auckland, there is the Auckland Regional Settlement Strategy Migrant Action Plan. One of the aims is to provide and improve health services for culturally and linguistically diverse populations in Auckland (Department of Labour, 2010). Prevention of cardiovascular disease and diabetes for Asian, South Asian, Middle Eastern, Latin American and African communities is clearly identified and outlined in this strategy (Perumal 2010; Mehta, 2012). Access to health and support services for migrant and refugees in their new country can be very limited and it is often challenging to find appropriate services and facilities that are both culturally and religiously appropriate. It is important to maintain a good physical and psychological health and lead a healthy lifestyle, as it is considered a form of worship for many cultures (Al-Dousari, 2000). A common health intervention addressing diabetes and cardiovascular disease for mainstream communities are physical activity programmes. However new migrants, especially women, appear less likely to engage in any form of physical activity and this is increased if they have limited English language skills (Guerin, Diirya, Corrigan & Guerin, 2003; Di Francesco & Hansen, 2002; Perumal, 2010).

Targeted physical activity programmes in New Zealand and Australia for migrant and refugee women have been successful in addressing physical health, mental health and social isolation (Marshall, 2007; Islamic Women's Association of Queensland, 2003; Di Francesco & Hansen, 2002).

In Hamilton, New Zealand, a physical activity programme was developed for Somali women, in consultation with the Somali community. This included exercise classes in

a community centre already used by the Somali community, trial memberships at a female-only gym, women's walking groups and sports groups. By consulting with the community, programmes and activities incorporated religious and cultural needs, including interpreters for fitness classes, having a room available for praying, and providing a safe, women's only environment to exercise (Guerin, Diirya, Corrigan & Guerin, 2003). There were numerous benefits from this intervention, not only physical health but mental health and reduced isolation for women in the community. It is important to mention that the authors attributed the major success of the Somali women being engaged was that they were able to identify their own needs, and thus develop a programme that was best suited to their requirements and felt like they had ownership of the programme. Similarly, a physical activity programme set up in Queensland, Australia, for Islamic women called *Active Sisters!* included walking groups set up in local suburbs where Islamic families were living, a culturally appropriate swimming programme, bi-lingual mentors and peer support groups for motivation to attend. This programme was set up as a capacity model, with the ultimate goal of training the women as fitness and swimming instructors, to enable and motivate their own communities to engage in physical activity and health options that are appropriate to them (Islamic Women's Association of Queensland Incorporated, 2003).

Women's only swimming programmes have been accepted as an appropriate option to achieve wider health benefits for migrant and refugee women. All of the swimming programmes reviewed include aims and objectives of increasing knowledge and awareness of the benefits of physical activity, providing a culturally appropriate environment, improve mental health, increase capacity of the women, increase access to information and health services for women (Moran & Willcox, 2010; Islamic Women's Association of Queensland Incorporated, 2003; Di Francesco & Hansen, 2002; Migrant Information Centre, 2001; Lawrence, 2004; Marshall, 2007). Other objectives were to teach the safety benefits of learning to swim; increase knowledge and awareness of the public transport system and sustainability of the programme within the community. Barriers to attendance were consistent across all the programmes, being childcare, transport, cost and those addressed in various ways.

The significance of having swimming programmes, compared to other physical activity options is important. Due to cultural and religious values and beliefs, women require a private area to swim in, which greatly restricts a growing population of women from accessing swimming as an exercise and recreation option which is

readily available to everyone else (Migrant Information Centre, 2001). In New Zealand, having access to swimming facilities and learning to swim is extremely vital being a country surrounded by water and water recreation being very much a way of New Zealand culture. The importance of these programmes for both health and safety reasons cannot be underestimated, as drowning is emerging as a major concern for new settler populations in New Zealand with some new groups over-represented in the drowning statistics. In 2011, Asian peoples represent 15% of the annual drowning toll yet comprise only 6% of the national population (Water Safety New Zealand, 2012). From 2007 – 2011 a total of 133 fatal drowning incidents occurred in the Auckland region, 12% were of Asian peoples. With a growing population not born in New Zealand, not growing up around water, the need to provide opportunities for all communities to access facilities and water safety education is paramount.

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Background of Programmes

This section will provide a short description on each programme that has been evaluated as part of this report.

Mt. Roskill Women's Swimming Programme

The Women's Swimming Programme was established in 2004 at Cameron Pools in Mt. Roskill to meet the needs of women from refugee and migrant backgrounds living in Auckland City. The programme aims to increase physical activity and fitness among women, support mental health and wellbeing, support the maintenance of healthy weight, promote and foster the development of environments that support healthy living and foster social connection between women.

It started as a result of the high demand from the Somali community and the Muslim Women's Association. It initially was exclusively for Muslim women, however, since then the programme has been opened up to 'all women'. The swimming programme remains popular with women from all backgrounds and areas of central Auckland.

The programme caters to 80-120 women each night of all ages, from over 14 ethnic groups, living in various locations across the Auckland region. The programme is designed to cater for cultural norms that create barriers to accessing physical activity facilities by the target group.

The aims and objectives of the Women's Swimming Programme are:

- To increase physical activity and fitness among women, including those from Muslim and Refugee communities
- To provide relaxation activities to reduce stress and tension related to resettlement, and to improve mental health
- To maintain a healthy weight throughout life
- To promote and foster the development of environments that support healthy

lifestyles.

- To foster social connectedness between women

The Women's Swimming Programme offers the following activities:

- Lane Swimming
- Swimming Lessons
- Aqua Aerobics
- Spa and Sauna
- Gym facilities (cardio machines only)
- Nutrition education and train-the-trainers
- Health promotion messages

The programme is funded by Procure, which includes a programme coordinator, aqua aerobics instructor, swimming instructor, facility staff. Auckland Regional Public Health Service delivered the nutrition education component. Participants pay \$3.50 per night to attend.

Papatoetoe Ladies Only Swimming Night

The Ladies Only Swimming Night was established 2010 as a result of the high demand from the Muslim Women's Association for a culturally safe environment for women to exercise. It initially was exclusively for Muslim women, however due to low attendance and participation, the programme was opened up to 'all women'. This change revived the programme increasing its reach, spread and participation rates. This swimming programme regularly runs at capacity.

The aims and objectives of the Ladies Only Swimming Programme are:

- Increase activity levels amongst women
- To provide a safe and fun environment that facilitates activity
- To reduce isolation
- To encourage a healthy lifestyle
- To promote positive social sessions
- To promote cultural awareness and interaction

The Ladies Only Swimming Night offers the following activities:

- Lane Swimming
- Aqua Zumba

- Spa and Sauna
- Water Safety Instructor (monthly basis)
- Nutrition workshops (during 2011)

The programme is subsidised by Procure, including facility staff and the aqua aerobic instructor. Participants pay \$2.50 each night to attend the programme, and children under the age of 10 years old are free. The programme is also supported CM Active and WaterSafe Auckland (non-financial).

Young Women's Swimming Night

The Young Women's Swimming Programme was established in 2010 to improve the health of wellbeing of girls aged 12 to 17 years old to through physical activity. The programme addresses the low levels of physical activity among young girls from refugee, refugee-like or migrant backgrounds by creating a culturally appropriate space for young women to be active. This programme takes place at Cameron Pools, Mt Roskill on Saturday evenings. This is the same venue as the Sunday night Women's Swimming Programme.

The aims and objectives of the Young Women's Swimming Programme:

- To increase knowledge and skills of being in water through swimming lessons and water safety lessons
- To increase physical activity levels of young women

The Programme offers the following activities:

- Swimming Instructor
- Water safety training delivered by trained community leaders
- Gym facilities (cardio machines only)

The programme is subsidised by Auckland Council, including facility staff and swimming instructor. Participants pay \$2.50 each night to attend. Procure fund a programme co-ordinator through Umma Trust who is present on the night.

Burundi Community Swimming Project

Burundi community leaders identified the need for their community members and their families to learn to swim. The leaders proactively sought advice and funding through Refugees As Survivors, and a swimming programme was developed for the community for ten weeks during Term two, 2010 with a swim school in Albany.

The programme had such an overwhelming response and willingness to learn from the community that funding was sought for a second round of swimming lessons in term three and four, and were held at Mt. Albert pools.

Between 70 -75 people from the Burundi community including adults and children attended per week. Teaching was by age and level of confidence in water.

Community swimming lessons concluded in December with a day at Long Bay beach.

Since this swimming programme finished, the Burundi community has not been able to secure additional funding to continue swimming lessons.

Other Migrant and Refugee Community Swimming Projects

Ladies Only Swimming sessions were offered to adult students at the Refugee Education for Adults & Families (REAF) programme at Selwyn College, in October 2011 by WaterSafe Auckland.

This was a unique opportunity for the ladies; they had four swimming sessions in a portable pool which was set up for one term at the local primary school. It was completely enclosed under a marquee so the ladies could have a private and safe environment to learn to swim. Two female instructors taught for one and a half hours on a Friday morning over a four week period. Nine ladies in total attended the sessions.

The objectives for the swimming sessions:

- To teach the women basic swimming and water safety skills
- To increase confidence around the water
- To increase awareness of water safety for participants and their families

- To utilise the portable pool for community use.

WaterSafe Auckland has been gifted four full piece swimming outfits designed for the Muslim Community from a Gold Coast company; consisting of loose pants, a long sleeved loose top and a separate hood made of lycra. Some of the participants wore these outfits during the swimming programme and reported them to be comfortable and easy to move in when swimming. Some of the ladies said that they would feel comfortable wearing them in public which was the intention of designing them.

Purpose of Evaluation

The purpose of producing this evaluation report is to report on the outcomes since the last Muslim Women's Swimming evaluations in 2007 and to ensure that the programme is still relevant, appropriate and sustainable for the community.

The other purpose is to report on the outcomes of new swimming initiatives for new migrant communities happening in Auckland. This is a utilization focussed evaluation, with the purpose of utilising the results and outcomes to inform community, stakeholders, funders and other interested parties.

This evaluation is both an outcome and process evaluation. As mentioned, the original Mt. Roskill Women's Only Swimming Programme has been previously evaluated and been running for a sustained period to produce measurable long term outcomes (Lawrence, 2004; Lawrence, 2005; Marshall, 2007). The additional swimming programmes included in this report have only been going for a short period of time and are still in the early stages. Thus it is important to include both impact and outcome evaluation methods to determine if the programmes are achieving the outcomes of increased health and wellbeing. Process evaluation is important to provide justification for how and why particular approaches and activities have been chosen, and is useful in interpreting particular outcomes (Dehar, Casswell & Duigan, 1993). This is especially important for informing the stakeholders of how appropriate,

effective and beneficial these swimming programmes are in improving the health and wellbeing of the target communities.

Key evaluation questions have been devised to measure how well the programme reaching its intended population and achieving the programme aims and objectives.

Process Evaluation:

- Are the programmes reaching the intended audience?
- Are the programmes making any difference in the participants attitudes, knowledge and behaviour towards a healthy lifestyle?

Impact & Outcome Evaluation:

- What were the intended outcomes of the swimming projects?
- Have there been any unintended outcomes of the projects?
- What differences in participants health and wellbeing has the swimming projects made?
- How well do the swimming projects address contributing factors to the issues?
(Refer to Logic Model under Situation)

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Logic Model

Overview Swimming Programme – Logic Model

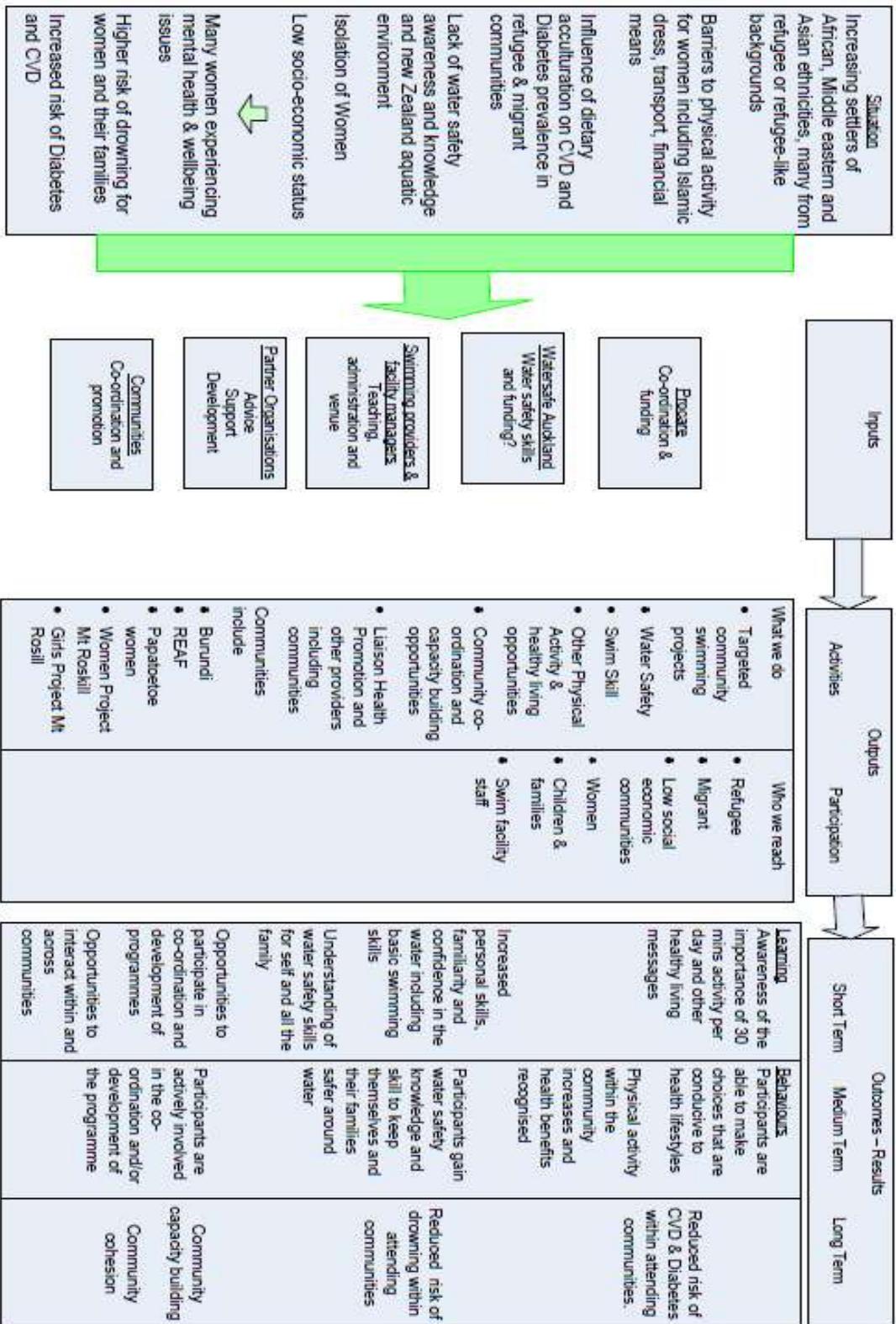


Figure 1: New Migrants and Refugee Swimming Programme Logic Model

SECTION 2: METHODOLOGY

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Methodology

This evaluation took a mixed-methods approach utilising qualitative and quantitative methods including a self-administered survey for participants and key stakeholders, participant focus groups and key stakeholder interviews.

The evaluation collection period took place from July to September 2012 (this took into account cultural fasting period of Ramadan) over one or two evenings at each of the three main swimming programmes. Surveys were conducted with participants of the smaller community swimming programmes at times that were convenient to them.

Survey instruments and measures

A self-completed, anonymous questionnaire was designed containing 60 questions, which were broken down into 5 sections: socio-demographics, health and well-being, water safety, community involvement, programme roll-out.

The same survey was conducted across the three largest women's only swimming programmes and with the Burundi Community swimming project participants for comparison purposes. Due to the low level of English literacy skills of participants in REAF swimming project, only qualitative focus groups were conducted with this group.

Taking into consideration most participants have English as a secondary language, questions were self-assessed using a 5-point scale using the ☺ and ☹ symbols, including ☹☹ *strongly disagree*, ☹ *disagree*, ☺ *no change*, ☺ *agree*, ☺☺ *strongly agree*. Two questions in the health and wellbeing section asked for further explanation about how the programme has influenced their lifestyle. Three questions in the programme roll-out asked to elaborate on understanding of the pool rules, what is working well [in the programme] and what improvements could be made.

Comparative questions in the health and wellbeing section sought information about participants having made healthy lifestyle changes in physical activity, nutrition and awareness of health messages since attending the programme. Two questions in the water safety section asked about increasing swimming skills and water safety awareness as a result of attending the swimming programme.

A separate survey was distributed to key programme service providers which included facility staff, programme instructors and swim teachers. This consisted of 17 questions separated into three sections: administration, practical activities and nutrition component.

Qualitative measures included focus groups and interviews to gain further insight and observation of how these programmes are meeting community needs. Focus groups were conducted with participants and interviews were held with community leaders involved with the programmes. Focus groups covered the following topics: socio-demographics characteristics, health and wellbeing, water safety, community involvement and programme delivery. The focus groups were conducted in English and interpreted when necessary in Arabic and Dari. Interview questions covered knowledge, attitudes and behaviour of the participants towards physical activity, nutrition and healthy lifestyles, mental health and wellbeing, water safety and swimming skills, community cohesion and capacity and programme progress.

Focus groups and interviews were conducted and transcribed by the evaluation team.

Ethics

These programmes are targeting communities that are already vulnerable for various reasons, including new to New Zealand, limited English language skills, experiencing previous trauma and social isolation among other things.

Written consent was collected from all participants who filled in a survey. At Mt. Roskill volunteers were appointed to speak in the various languages (including Somali, Arabic, Farsi and Dari) to explain the purpose of the survey, why it was being collected and emphasising that all the surveys were anonymous. The focus group participants were provided with an information sheet before written consent was gained to record and use their feedback. Again, anonymity and confidentiality was stressed and each of the focus group participants received a 'goodie bag' to thank them for their time and volunteering to being part of the focus group. The focus groups at Mt. Roskill were mainly conducted in English but interpretation was allowed for when necessary in Arabic and Farsi (for the Afghani women). It was emphasised

that the women could change their mind at any time if they did no longer want to be part of the survey and focus group process. Everyone who filled in the surveys went into the draw to win a prize at Mt. Roskill Women's swimming, Youth swimming night and Papatoetoe Ladies Night. The prize draw slip was on a separate piece of paper to their survey responses and extra care was taken to ensure responses were in no way linked to individuals.

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SECTION 3: QUANTITATIVE OUTCOMES

Overview of outcomes from all swimming programmes combined

Demographics

A total of 150 surveys were completed by participants across the four main swimming programmes. Of those, 41% were aged 25-44 years, followed by 21% being 17-24 and 44-64 years of age respectively. The largest ethnic groups attending the swimming programmes are Somali, 32% and Afghani, 18.7%, followed by Indian, 14.7%, and African, 8.7% (including Burundi, Sudanese, Ethiopian, and African non-specified). Ethnicity was self-identified.

Demographic Characteristic		<i>n</i>	%	Total
Ethnicity	Somali	48	32.0	150 100%
	Afghan	28	18.7	
	Fiji Indian/Indian	22	14.7	
	African other	13	8.7	
	Middle East other	6	4.0	
	Asian other	9	6.0	
	European	7	4.7	
	Other	4	2.7	
	Unknown	13	8.7	

Table 1: Ethnicity of survey respondents

Health and Wellbeing

Majority of the participants reported that they have made positive healthy lifestyle changes as a result of participating in the swimming programmes. The positive changes range from increasing their daily physical activity to eating more nutritious food, making healthier food choices, using healthy alternatives while cooking, being mindful when eating and reducing portion sizes.

Survey results also show that participants were motivated to visit their general practitioner (G.P) more regularly while their awareness of other health related programs such as breast, cervical and cardiovascular disease screening had

increased.

When asked about what benefits they have gained from attending the programme, the top three responses were health and wellbeing benefits (23%) fitness and exercise (22%) and swimming (13%).

When asked what prevents them to making positive lifestyle changes, barriers to becoming active included: *lack of time, transport, driving skills, being overweight; lazy; were barriers to becoming active.*

Benefits	<i>n</i>	%
Health and Wellbeing	35	23.3
Fitness & Exercise	33	22.0
Swimming	19	12.7
socialising	7	4.7
relaxing	4	2.7
Improved mental health	3	2.0
Happy/ fun time	8	5.3
weight loss	13	8.7
Women only	3	2.0
Other	6	4.0
Nil response	19	12.7
Total	150	100.0

Table 2: Benefits to participants

Water Safety and Swimming Skills

When asked, 18% of respondents cited learning swimming and water safety skills as a reason that they attend the swimming programmes. Other responses included having a female only environment, exercise and fitness and health reasons.

The water safety and swimming skills questions asked about skills acquisition, confidence in the water, water safety awareness for themselves and children, and skill ability since attending the programme. Over 80% agreed that their swimming skills had increased since attending the programme and over 80% agreed or strongly

agreed that they have an increase awareness of water safety. Eighty three percent of respondents strongly agreed or agreed that they now feel more confident in the water, followed by almost three quarters indicating that they are now more confident looking after children as a result of attending the swimming programme (strongly agree 44%, agree 30%). The skill ability questions specifically asked if they could swim 1 length of a 25 metre swimming pool and if they could float for 1 minute. Three quarters of respondents indicated that they could swim the length of the swimming pool (44% strongly agree, 31% agree) and 78% indicated that they could float for 1 minute (50% strongly agree, 28% agree).

Opinions	Strongly agree/Agree	
	<i>n</i>	%
I am more awareness of water safety as a result of the programme	123	82.0
The programme has increased my swimming skills	123	82.0
The programme has increased my confidence around water	125	83.3
I feel more confident looking after children around water?	110	73.3
I can swim the length of the pool?	113	75.3
I can float for up to 1 minute?	117	78.0

Table 3: Opinions on water safety

Community Involvement

The evaluation has indicated that the success of these swimming programmes is strongly linked to the level of community engagement with the programme beyond that as participants. The Mt. Roskill Women's Swimming Programme has been developed on a community capacity, ownership and partnership model which was emphasised during the key stakeholder interviews.

Involvement of the community from either the initial idea and planning or running/coordinating the programme means significant buy-in from the community of the programme. The survey results clearly demonstrated that 84% of Mt Roskill Women's programme and 85% of Mt Roskill Youth programme agreed that the community had an active role in running the programmes. At Papatoetoe, women being trained as water safety instructors were suggested as a good example of increasing community involvement. The Burundi programme which was community

specific, indicated that the coordination role by the community leaders was a key factor in the success of the programme as reflected by the high level of attendance by the community.

Response from both the Mt Roskill Women’s Swimming Programme and the Young Women’s Swimming programmes indicated high satisfaction and enjoyment of meeting people from other cultures who are attending the programme (84% women’s programme, 76% youth programme). Barriers to crossing the cultures were language and taking the opportunity to meet with friends from their own community. These findings were confirmed by the focus groups at Mt Roskill which identified meeting new people from a variety of countries was a benefit of the programmes

“It is good to have groups from all over Auckland”

Mt. Roskill Women’s participant focus group

However different communities are involved in the programmes to differing levels and this is reflected in uncertainty of community involvement at Papatoetoe, and the women prioritising their opportunity to swim over opportunities to participate in the running of the programme at Mt Roskill. This was in response to a question about the need for a users/participant pool committee. This committee does not exist at any project but may be a way to ensure representation and problem resolution methods for the range of ethnicities using the pool, as well as method of communication from participants to programme coordinators and support agencies.

Opinions	<i>Strongly agree/Agree</i>		<i>Unsure</i>		<i>Strongly disagree/disagree</i>		<i>Nil response</i>	
	<i>n</i>	<i>%</i>	<i>n</i>	<i>%</i>			<i>n</i>	<i>%</i>
The community is actively involved in the running of the programme	126	84.0	14	9.3	4	2.6	6	4.0
There are opportunities for the community to be involved in the development of the programme	127	84.7	13	8.7	2	1.3	8	5.3
I enjoy meeting people from other communities through the programme	125	83.3	15	10.0	4	2.7	6	4.0
I have better understanding of people from other communities through my interactions at the programme	121	80.7	13	8.7	9	6.0	7	4.7
I tend to stick with my own community at the programme	76	50.7	28	18.7	38	25.3	8	5.3

Table 4: Opinions on Community Involvement

Programme Delivery

High satisfaction of the staff, facilities and volunteers was seen across all the projects. Small adaptations to facilities have made a significant difference to the attendee's experience and have made the women felt like their needs were being listened to, for example shower curtains and window covers on the front doors to improve privacy.

Rules including appropriate swimwear were widely known (84% rules, 96% correct swimming clothing) which provides leverage to address an on-going issue from staff about rule breaking and following requests from staff to modify behaviour. By pairing this with cultural communication training for staff and contractors, better communication of these on-going issues could be addressed across the programmes.

Another issue identified by swim instructors was the consistency of attendance at swimming lessons. An emphasis on commitment to water safety and learning to swim may need to be improved alongside the social aspects of the programmes. Coupled with a wish from participants from the women's programmes (Mt Roskill and Papatoetoe) for more out of pool activities such as nutrition, gym and zumba classes, the development of individualised programmes could assist with identifying women's goals and ensuring appropriate attendance and motivation to attend.

Overall the programme delivery model was well accepted by the participants with development ideas coming from the community.

Reasons	<i>n</i>	%
Cost	40	26.7
More activities	4	2.7
Improve facilities	2	1.3
Swimming lessons/instructors	1	.7
More time for programme	12	8.0
More women's only swimming	2	1.3
More healthy lifestyle education	10	6.7
Nothing	21	14.0
Nil response	11	7.3
10	47	31.3
Total	150	100.0

Table 5: What is working well

Reasons	<i>n</i>	%
Cost	5	3.3
More activities offered	24	16.0
Improved facilities	5	3.3
More time for programme/longer hours	20	13.3
More women's only swimming sessions available	8	5.3
Nothing	31	20.7
Other	9	6.0
Nil response	48	32.0
Total	150	100.0

Table 6: What could be improved

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Section 1: General Demographics

Participants were asked a variety of general questions, including: how long they had been attending the programme; how they found out about the programme; where do they travel from; age and ethnicity.

Who is attending the programme?

Almost 50% of the survey respondents are aged between 25-44 years of age. Twenty three percent are 17-24 years old and 23% are 44-64 years old, 6% of respondents were over the age of 65 years old.

As discussed, the programme was set up to primarily meet the needs for women from Middle-Eastern, Asian and African backgrounds of Muslim faith and provide them with culturally appropriate physical activity options. In recent years the programme has welcomed women from other backgrounds to attend the programme, however the highest number of attendees remain from the Somali and Afghani communities (as the programme was originally set up and advocated for by these communities), followed by Indian and Fijian-Indian. Other ethnic groups that have not been recorded previously attending include: *Iranian, Malaysian, Ethiopian, Saudi, African, British-Asian, African-Arab, and Jordanian, Sudanese.*

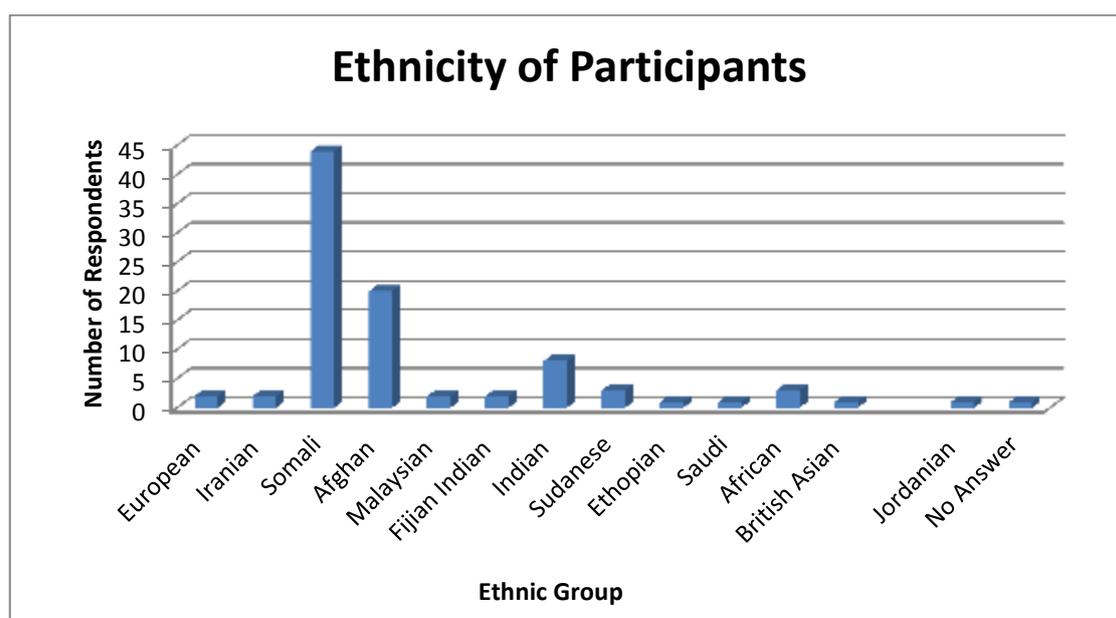


Figure 2 Ethnicity of participants

Programme recruitment and retention

The programme has not been heavily advertised in past years, primarily relying on word-of-mouth within the community and promotion by local general practitioners (G.Ps). More recently, promotion has been in the local paper and through the facility. Results indicate that over half the attendees hear about the programme from friends or family members.

Attendance

Most of the respondents are regular, long term attendees with one third having attended the programme for at least 4 years. One third also had been attending the programme for between 2-3 years. It was pleasing to see that a high number of respondents were new to the programme (for 6 months or less), indicating that the programme is still attracting new members.

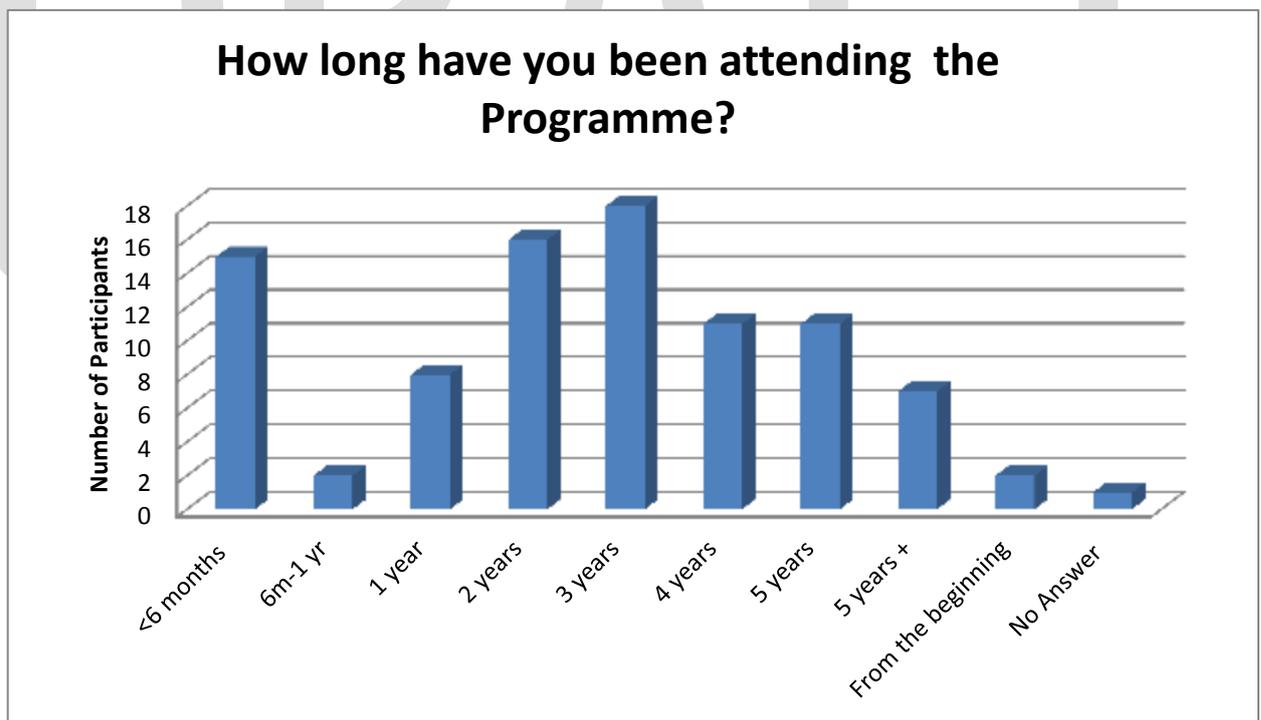


Figure 3: Participants length of attendance

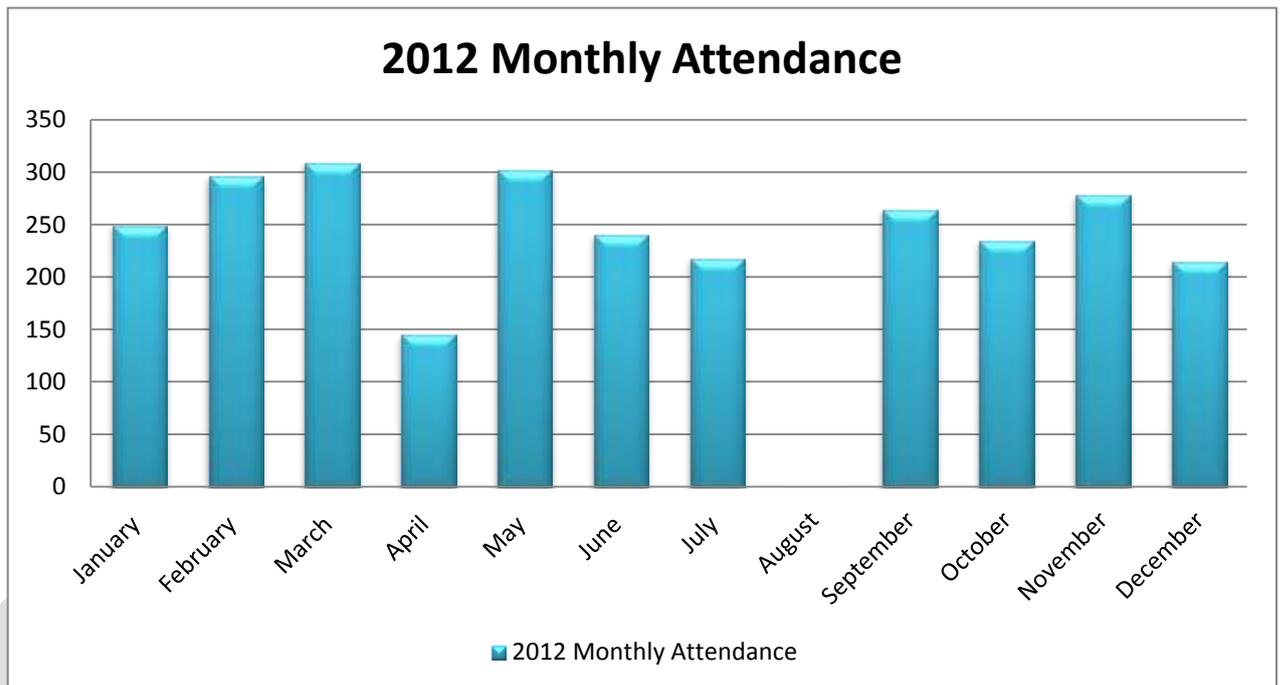


Figure 4: Mt Roskill 2012 Monthly Attendance rates

*August the Programme is closed for Ramadan

Programme reach

Survey respondents are travelling across the central Auckland suburbs area to attend the Sunday night swimming programme. The programme continues to meet the needs of the local community, with the highest numbers of participants from the immediate Mt. Roskill area and other nearby suburbs including *Hillsborough, Lynfield, New Windsor, Blockhouse Bay, Avondale, New Lynn, Mt. Albert, St. Lukes, Mt. Eden, Western Springs, Pt. Chevalier and Waterview*. Other areas people are travelling from are *St. Johns, Auckland City Centre (CBD), Massey, Green Bay, Glen Eden, Henderson and Manuaku*.

Refer to Figure 5: Map of where participants travel from

Health Link

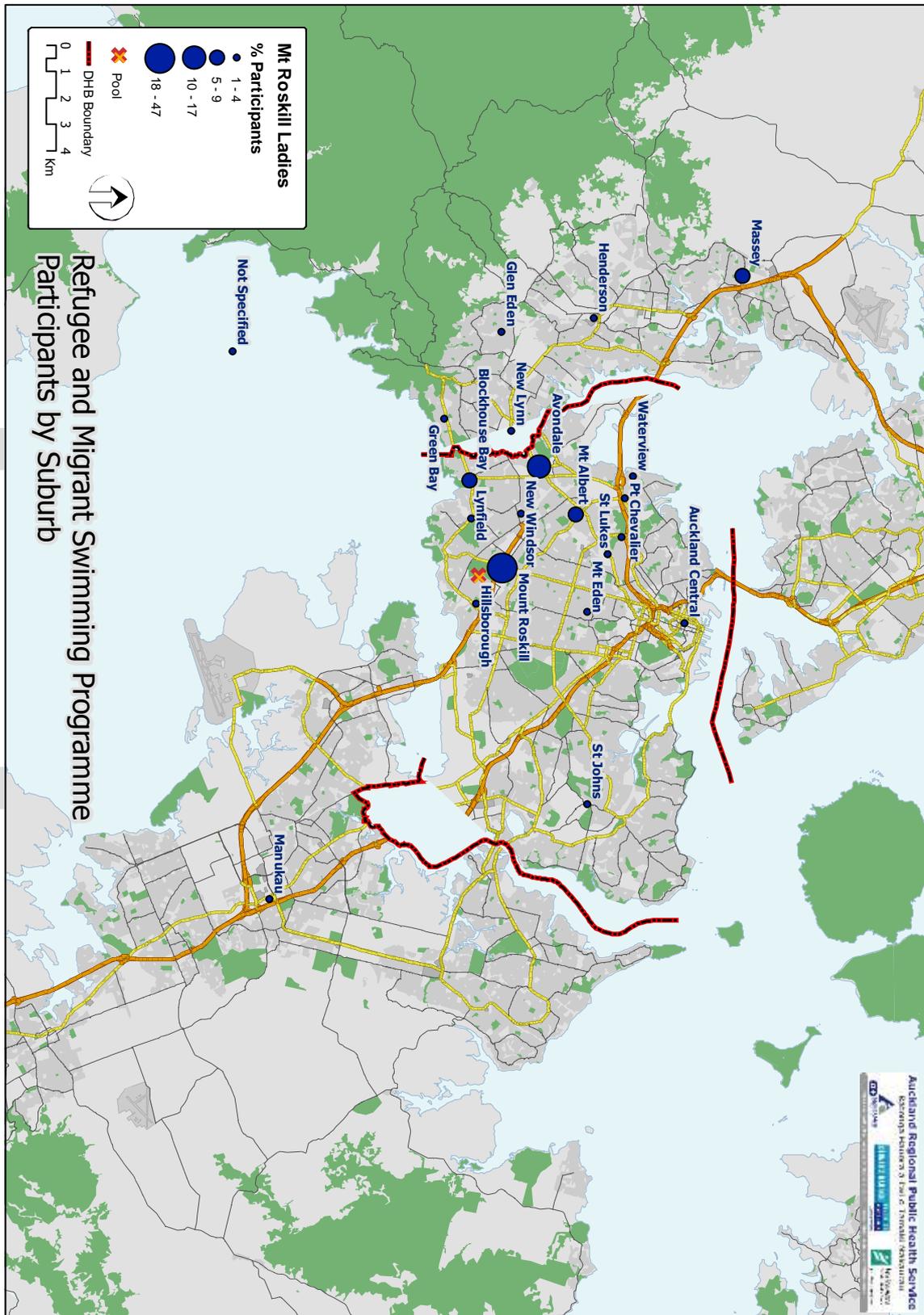
To link the programme with the health objectives, participants were asked if they were registered with a G.P, and if so, which suburb this was in. The majority of survey respondents were registered with a G.P (83%), 3% indicated they were not registered, 12% did not know if they were registered and 2% did not answer the

question. Suburbs where people were registered with a G.P were: *Mt. Roskill, Mt. Eden, Avondale, Auckland CBD, Massey, Pt. Chevalier, Blockhouse Bay, New Lynn, New Windsor and Mangere*. Just over half of the respondents did not answer this question (57%) and five respondents did not know what suburb their G.P was in.

When participants were asked if the programme had increased their motivation to visit their doctor/nurse or health centre more regularly, 77% strongly agreed or agreed and 19% found no change.

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Figure 5: Map of where participants travel from



Section 2: Health and Wellbeing

Personal health and wellbeing

Knowledge

Respondents indicated that their health and wellbeing knowledge has increased with over 90% of respondents agree that they now they knew more about health and wellbeing.

Behaviour

Respondents indicated that their behaviour towards health and wellbeing has improved, with 96% agree that their health and wellbeing has improved by participating in the programme. As the majority of the participants gave a positive response, it can be said that the program has made a positive influence on the participant's health and wellbeing. Those who reported no change may not have been in the programme long or may already make healthy lifestyle choices.

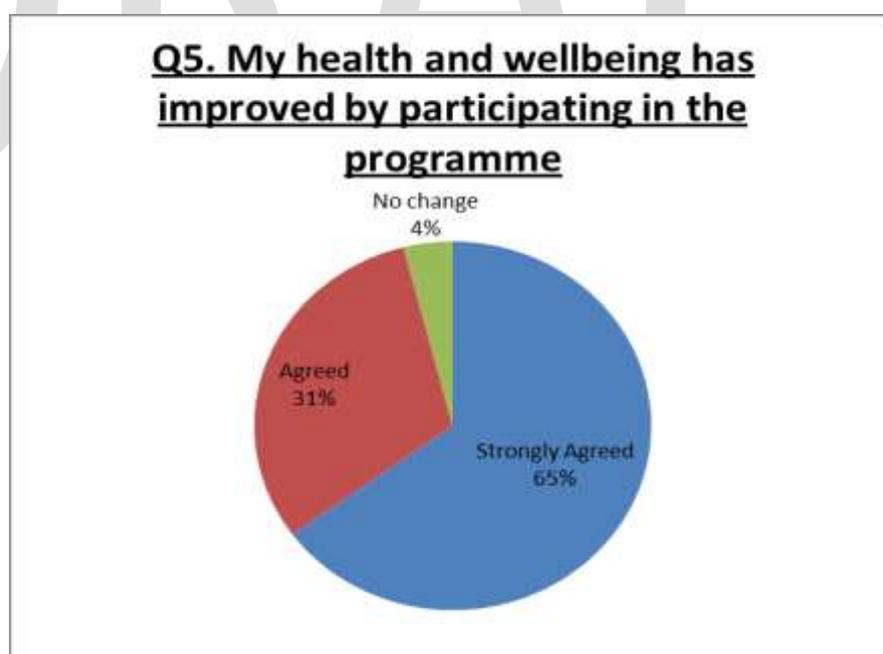


Figure 6: Improvements in health and wellbeing

Physical Activity

Up to 90% of respondents agreed that that physical activity was an important part of a healthy lifestyle. This shows that there was strong engagement from the participants with the programme.

When participants were asked if they do 30 minutes or more of activity most days of the week, 81% agreed. Nineteen percent did not find any change, this could be those who engaged only once per week in the swimming programme and were not active rest of the days.

When participants were asked if their physical activity had increased as a result of participating in the programme, 90% agreed and 10% 'found no change'. From these percentages, the majority of the participants indicated that the program has had a positive impact in influencing participants to become active.

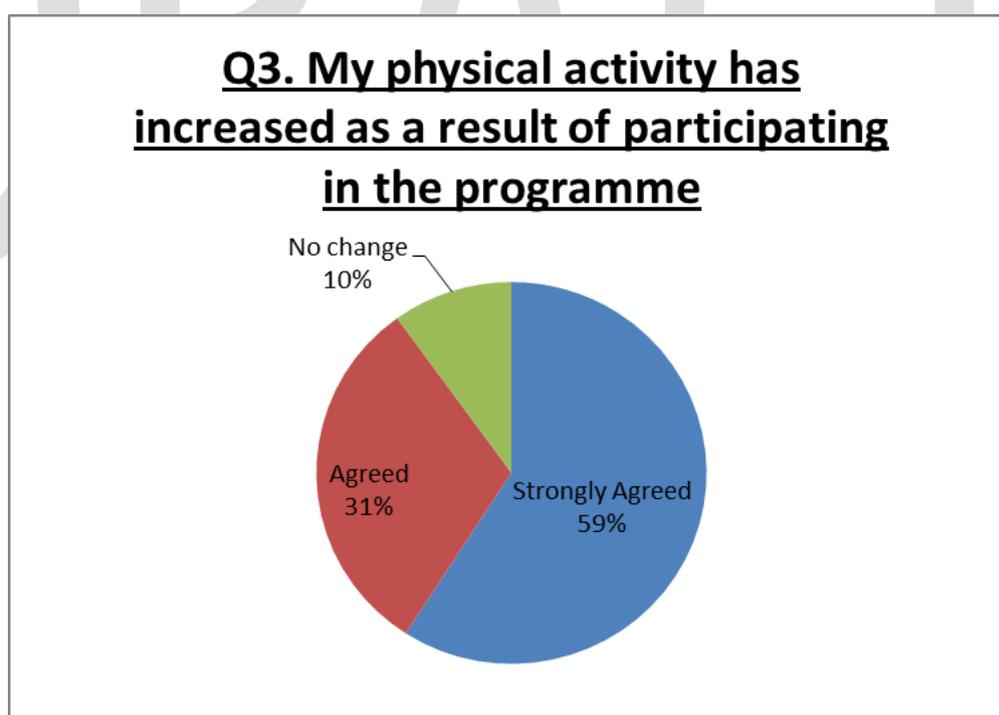


Figure 7: Physical activity improvements

Nutrition

When participants were asked if the program had influenced their food choices, 85% agreed and 15% found no change. The majority of positive responses are a reflection of the nutrition sessions that were held in 2011 to complement the swimming programme.

Majority of respondents indicated that they had changed their eating habits and are now eating healthier, more nutritious foods, making healthy food choices such as increasing fruit and vegetable intake. One respondent cited that the nutrition workshops have helped her control her diabetes.

Recommendation:

An ongoing nutrition programme would be beneficial to run alongside the physical activity programme in promoting a holistic healthy lifestyle.

Lifestyle changes

When participants were asked if they have made lifestyle changes since joining the programme, 90% agreed and 10% found no change. The majority of the respondents were positive about supporting a holistic approach to health.

Additional health promotion messages

When participants were asked if they are more aware of health messages and other health programmes (e.g. breast, cervical and CVD screening) 86% agreed and 11% found no change while 3% disagreed. Despite the fact that this aspect of health maintenance has always been a challenging and sensitive issue, the majority of the responses were positive.

The most common reasons that respondents cited as preventing them from making lifestyle changes included: *Time, too busy, lack of transport (including no drivers license), family commitments, being overweight, work.*

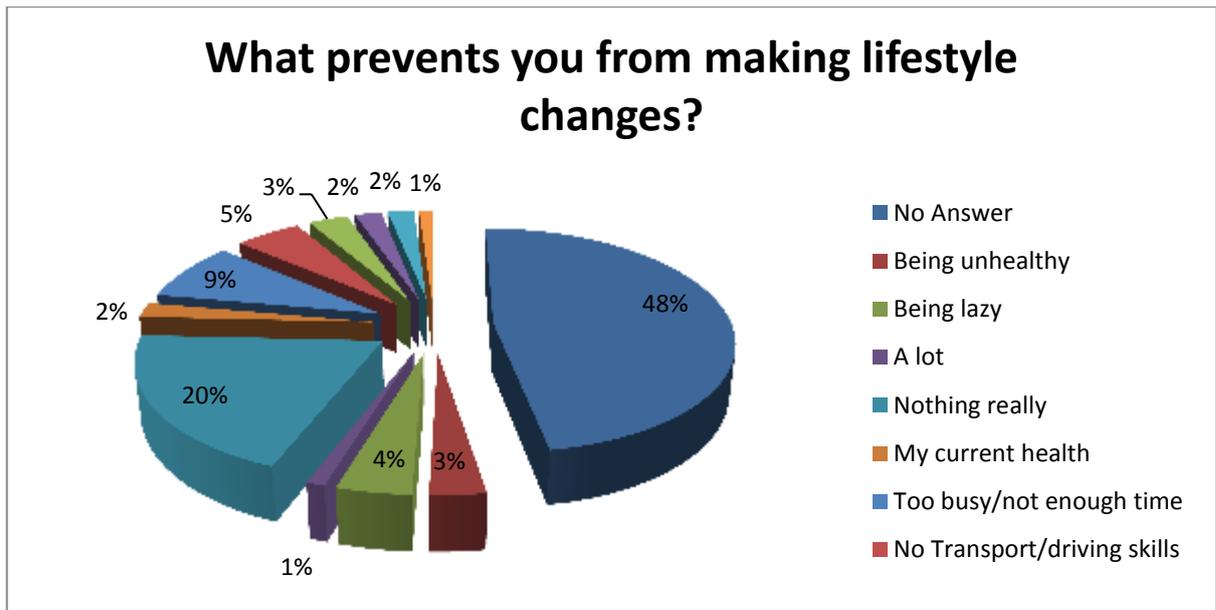


Figure 8: Participant lifestyle changes

Section 3: Water Safety

Awareness, knowledge and skills

Over 80% of the respondents indicated that they are more aware of water safety as a result of attending the programme. Swimming skills appear to be improving as a result of attending the swimming programme:

- 77% of respondents indicating that they can swim 1 length of the swimming pool (25 metres)
- Over 75% of respondents report that they can float for up to 1 minute
- Only 9% indicated that they cannot float for 1 minute
- 8% of respondents report no change in swimming skills. This could be due to being new to the programme and having limited previous water experience or respondents may feel that they already have sufficient swimming skills.

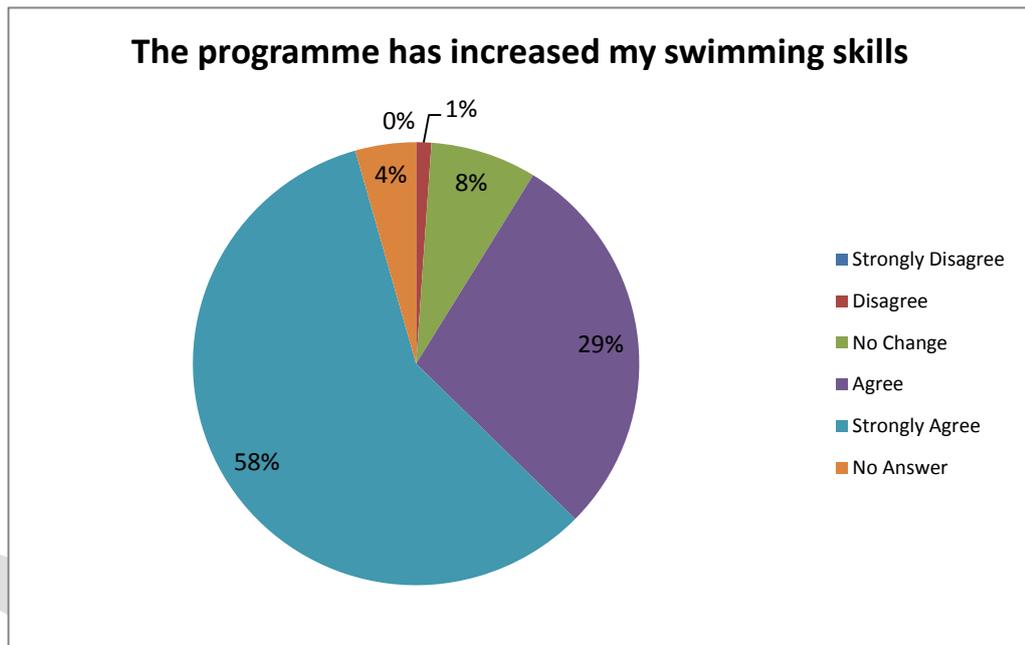


Figure 9: Improvement in swimming skills

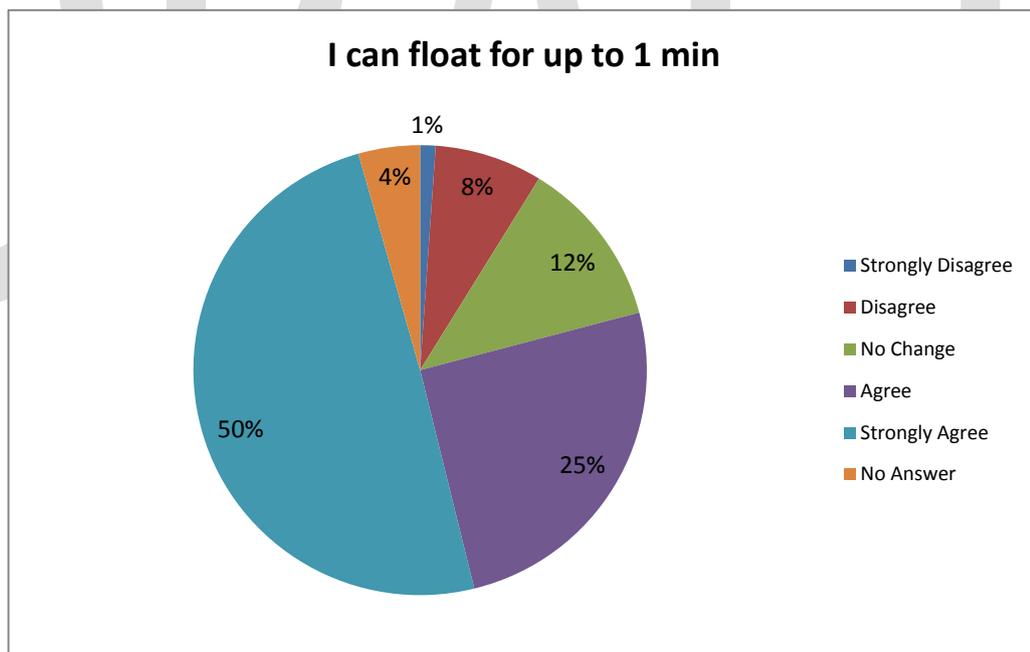


Figure 10: Participants floating ability

Over 90% of respondents agreed that attending the programme has increased their confidence around water. In addition, 83% had increased their confidence in looking after their children around water.

These results indicate that the attendees to Mt. Roskill are steadily increasing their

swimming skills and ability, which in turn increases confidence in the water. This is positively impacting on their family with respondents reporting that they are more aware of water safety and have gained confidence and skills to look after their families when around the aquatic environment.

Section 4: Community Involvement and Development

The Swimming Programme was developed with members from the community. There is a partners committee and a programme co-ordinator that oversees the volunteers and instructor-trainers from the community.

The survey results indicate that 84% of attendees of the Mt Roskill programme feel strongly that the community are involved in the running and development of the programme. The group interviews demonstrated that there is not a clear consensus on the need for a participant group to enable further development, with some communities interested in taking on further roles whilst others preferring to prioritise attending as participants only.

Cross Cultural Interaction

In addition, the programme has increased contact between communities and this has created enjoyment and a greater understanding. Language barriers are cited as reasons why communities do not always mix with approximately 30% of women regularly mixing with members from other communities and 44% remaining in their own cultural groups.

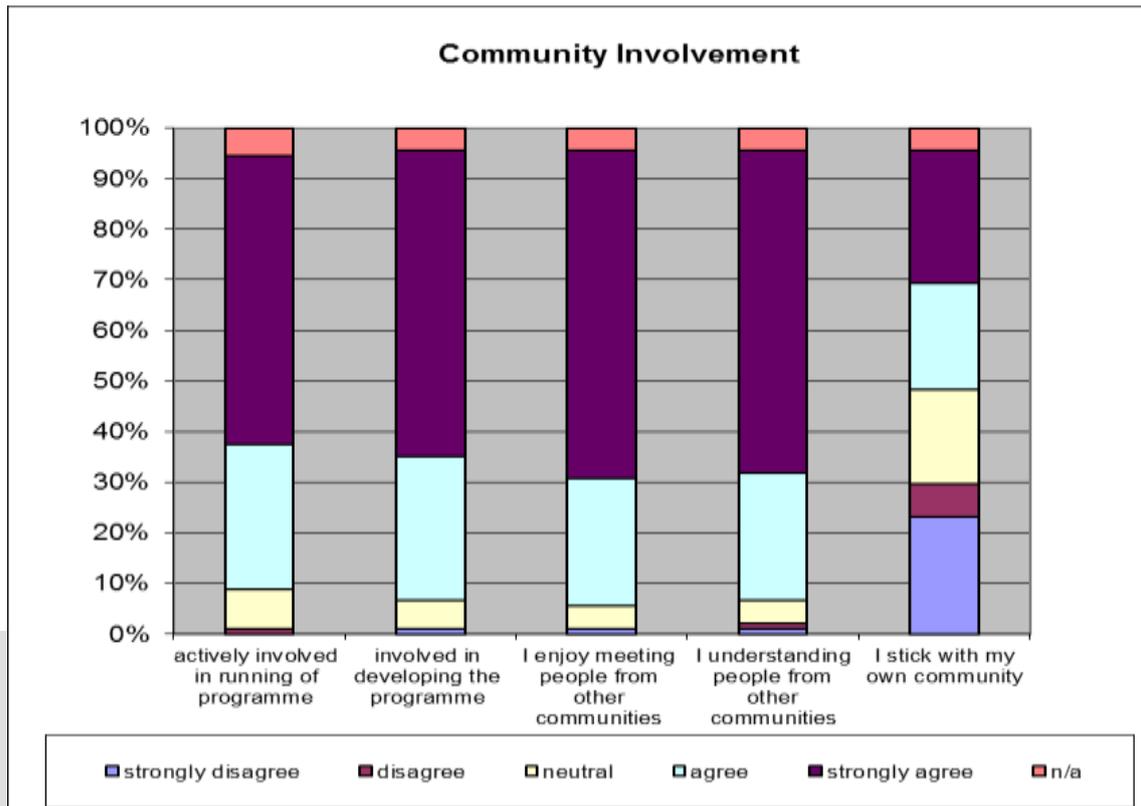


Figure 11: Community involvement

Section 5: Programme Roll-out

In general the women attending the programme are very happy with all the staff, including facility staff and programme volunteers.

The women are generally satisfied with the facilities. The kitchen scored lower but there was little if any use of the kitchen facilities on site at Cameron Pools.

Respondents clearly demonstrated that they are aware of the rules with 84% of respondents were aware of the pool rules and 96% respondents correctly identified appropriate clothing. Knowledge of clothes and rules is not an issue with the women. The staff survey and interviews demonstrated that in general the women interacted well with each other and the pool staff. The main area of disagreement was following the pool rules and respecting the staff when requesting them to do so and keeping to these requests.

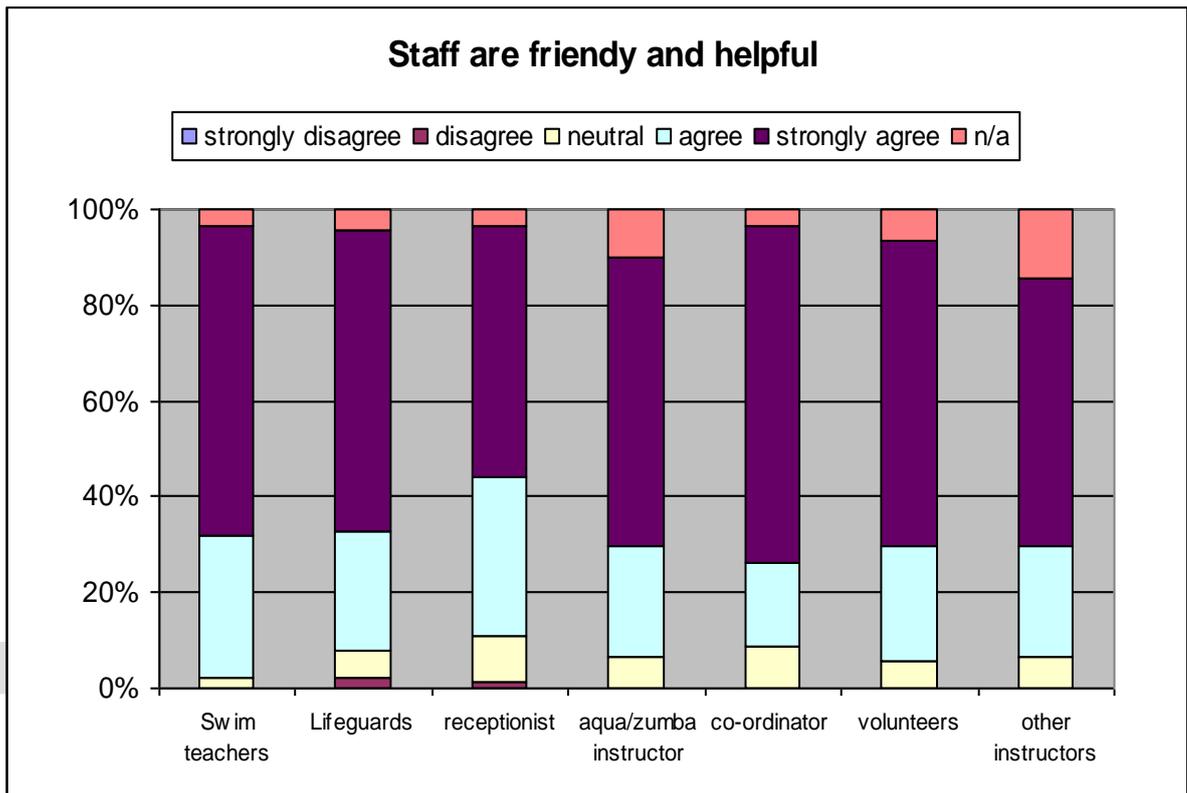


Figure 12: Satisfaction with facility staff

Rules identified by staff as regularly broken are:

- Lane allocations (slow, med, and fast) are generally ignored.
- Not hanging off the lane ropes
- Correct attire in the pool or leaving the pool not correctly attired

Manners were also raised, further exploration is needed to establish if this is cultural and language misunderstandings or disrespecting staff or authority by the participants.

Solutions suggested include:

- Reinforcing the rules on entry
- Enforcing an exclusion or other consequence for repeat offenders
- Revised pool rules in printed language that they understand and ideas for dealing with English as a second language (ESOL)

Responses to satisfaction of cost of the programme (\$3.50) were possibly due to the recent cost increase and may reflect the importance of appropriate and clear communication to the participants. It is the belief of the committee that the

programme demonstrates good value for money.

Overall, the vast majority of responses from the women indicated that they were happy with the programme.

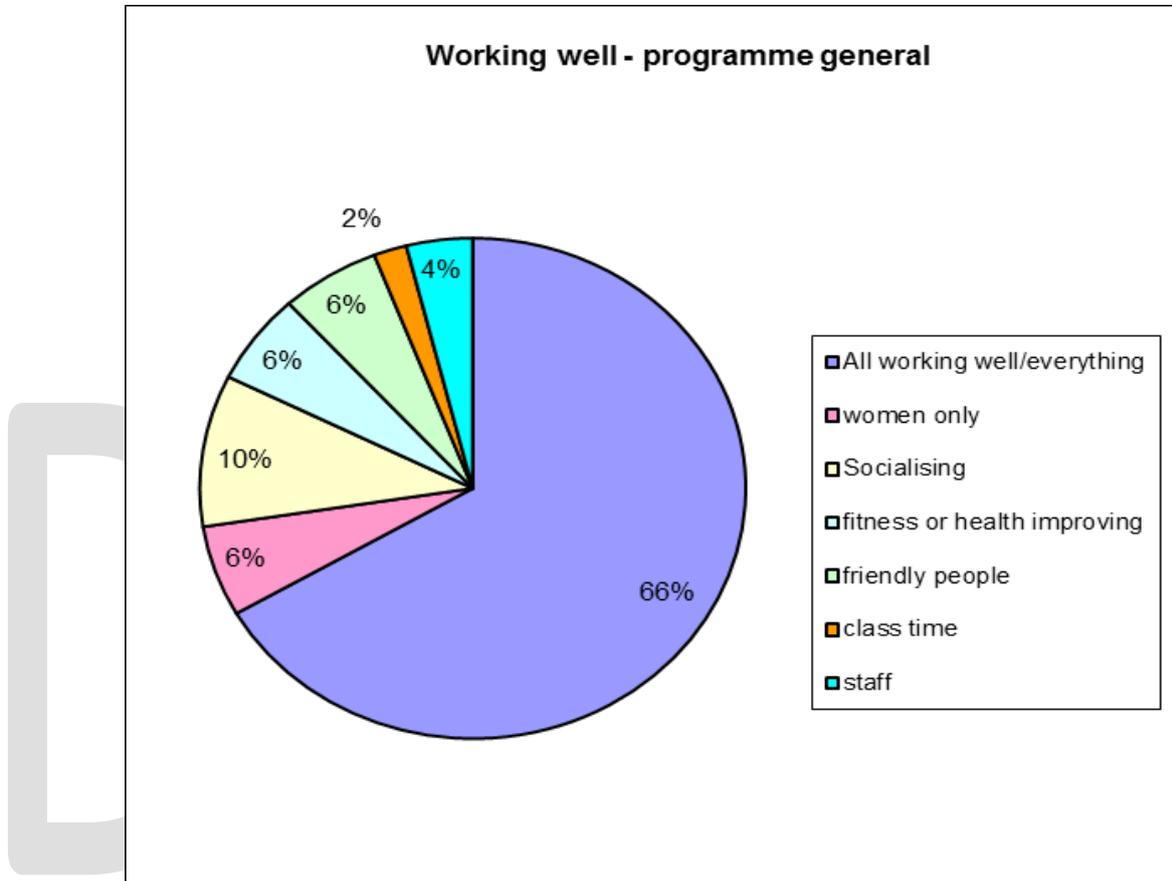


Figure 13: What is working well in the Mt. Roskill programme

Conclusion

The Mt. Roskill Women's Only Swimming Programme is providing the participants with opportunities to access a female only environment that is socially welcoming and encouraging for accessing exercise. The women appreciated upgrades to the changing area and access to childcare. The spa facility is extremely popular. Staff suggested that more activities be offered for the ladies, including aerobics/gym classes and the weights room, in addition to other water activities.

In general the staff felt that the participants confidence and ability were improved through the swimming programme activities. There was some disagreement around the level of physical activity due to the use of the spa as a popular choice.

“Activity not so much because a lot of women just sit around in the spa” Mt Roskill staff member

“It may not come across as women do a lot of exercise ... 15-20mins then into the spa but for many women it’s a start from never doing any exercise.” Mt Roskill instructor

Suggestions put forward by staff and participants include:

- New activities demonstrated in the large pool so others can see and become interested
- A more 1-2-1 personalised/individual approach could be developed to get real engagement and progress
- Allow participants to have a say in what new activities they are interested in

Future Development Suggestions:

- Re-introduction of a water safety programme through a capacity building model working with interested women to delivery water safety.
- Additional activities be offered within the programme to add variety for participants, for example: zumba classes and weights area.
- Further cultural awareness and ESOL support should be offered to staff to enable them to adapt their methods to work more comfortably with this unique group of women. One staff member identified that her mainstream classes seemed more organised and structured which she preferred.
- That any future changes to the programme should have an accompanying communication plan.
- Investigate the role and make up of a participant group to inform programme development and create lines of communication with all participants.

Recommendations for other programmes:

- If facilities are appropriate, consider offering a variety of activities alongside swimming such as aerobics, zumba classes and have a variety of gym facilities

available

- An on-going nutrition programme should be offered alongside the physical activity programme to promote a holistic healthy lifestyle
- Have a water safety component in addition to swimming lessons
- Consider creating a 'programme committee' consisting of participants and staff to inform programme development, create expectations and positive communication between staff and participants.
- Cultural awareness training should be provided to programme staff and instructors before working with new migrants and refugee communities.

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Papatoetoe Ladies Only Swimming Night

Females Only Night

Attention ladies! This is your chance to take a dip with only women around. All ages welcome.

When: Every Sunday starting 7-8.30pm

Where: Papatoetoe Centennial Pools
Sutton Crescent, Papatoetoe

Cost: \$2 per person
Under 10s Free

www.manukauleisure.co.nz

ProCARE HEALTH LIMITED

CM ACTIVE PUSH & PLAY

Manukau Leisure

Thanks to Papatoetoe Centennial Pools for use of this flyer

Section 1: General Demographics

Who is attending the Programme?

Most of the survey respondents were aged between 17-24 years old and 25-44 years old (39% each), followed by 45-64 years old (23%). Only 15% of respondents were less than 16 years of age and no respondents were 65 years and older (Figure 12).

The majority of respondents self-identified as Indian, followed by Afghan and Fijian-Indian. Other ethnic groups attending the programme include Cambodian, Russian, Turkish, Syrian, and New Zealander.

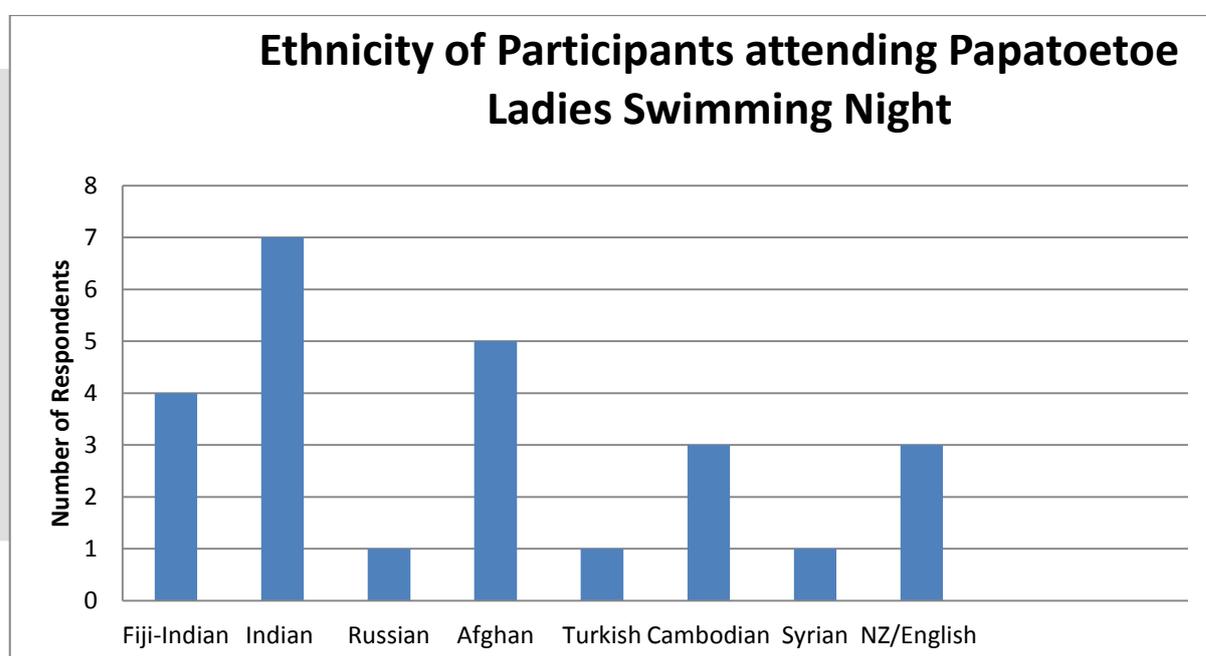


Figure 14: Ethnicity of participants attending Papatoetoe Ladies Night

Programme recruitment and retention

- 75% of respondents had heard about the programme from friends and family
- 10% had heard about the programme by an advertisement
- 10% from the Muslim Sports Association

Attendance

Length of attendance to the programme had a wide spread and varied from less than

6 months up to 3 years. Thirty five percent of the respondents had been attending for less than 6 months, followed by 32% attending for 1 year. This highlighted that the programme is attracting new members but has long standing members continuing to attend.

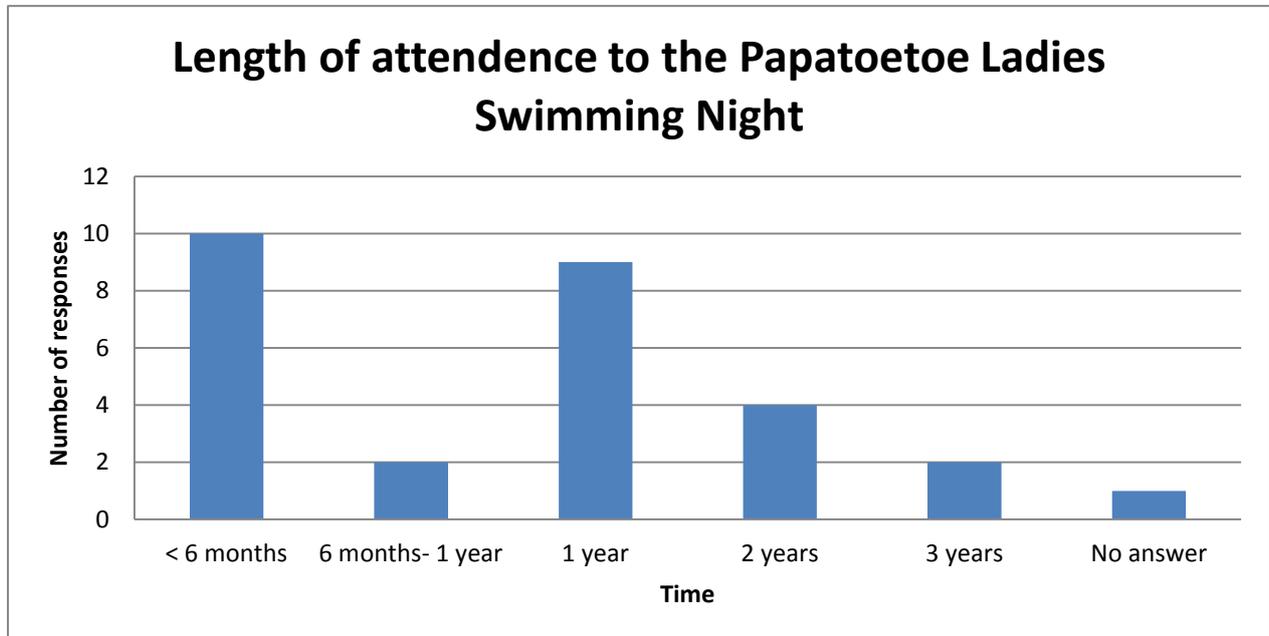
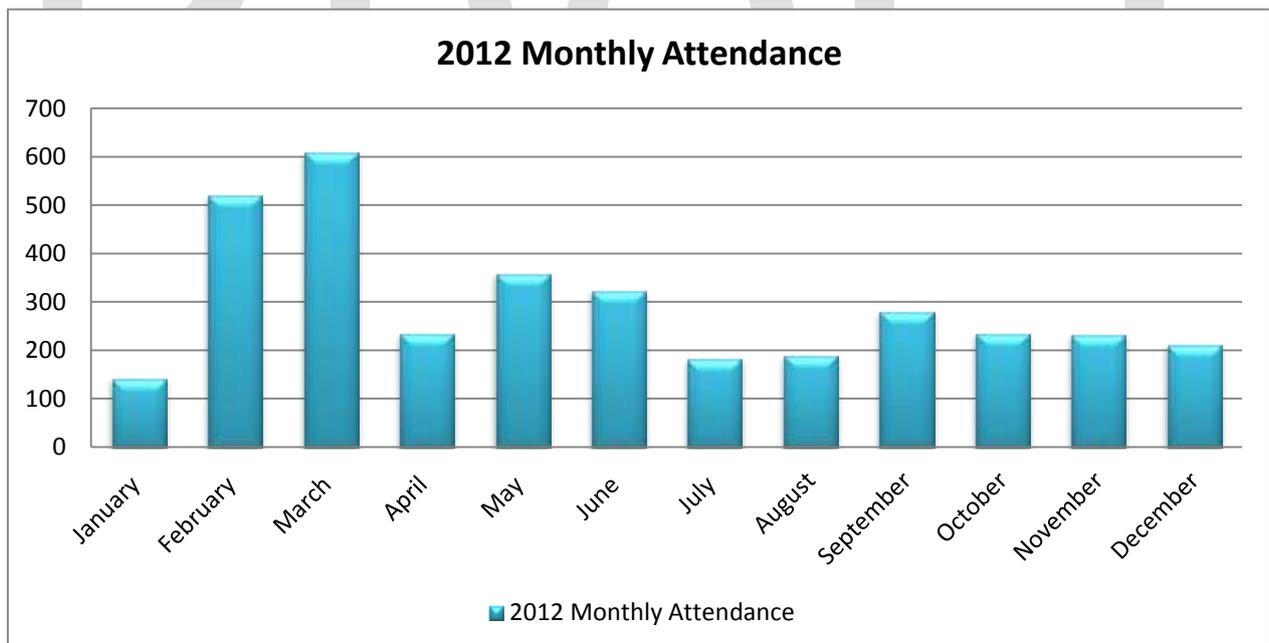


Figure 15: Papatoetoe participant length of attendance

Figure 16: Papatoetoe 2012 Monthly attendance rates (below)



Programme reach

Majority of respondents are travelling from the immediate Papatoetoe area and nearby suburbs including *Manurewa, Mangere, Flatbush, Dannemora and Botany*. A large number of people are coming from Glen Innes, and other areas include: *Greenlane, Panmure, Penrose, Pakuranga, Mt. Wellington, and Papakura*. Refer to Figure 17: Map of where participants travel from

Health Link

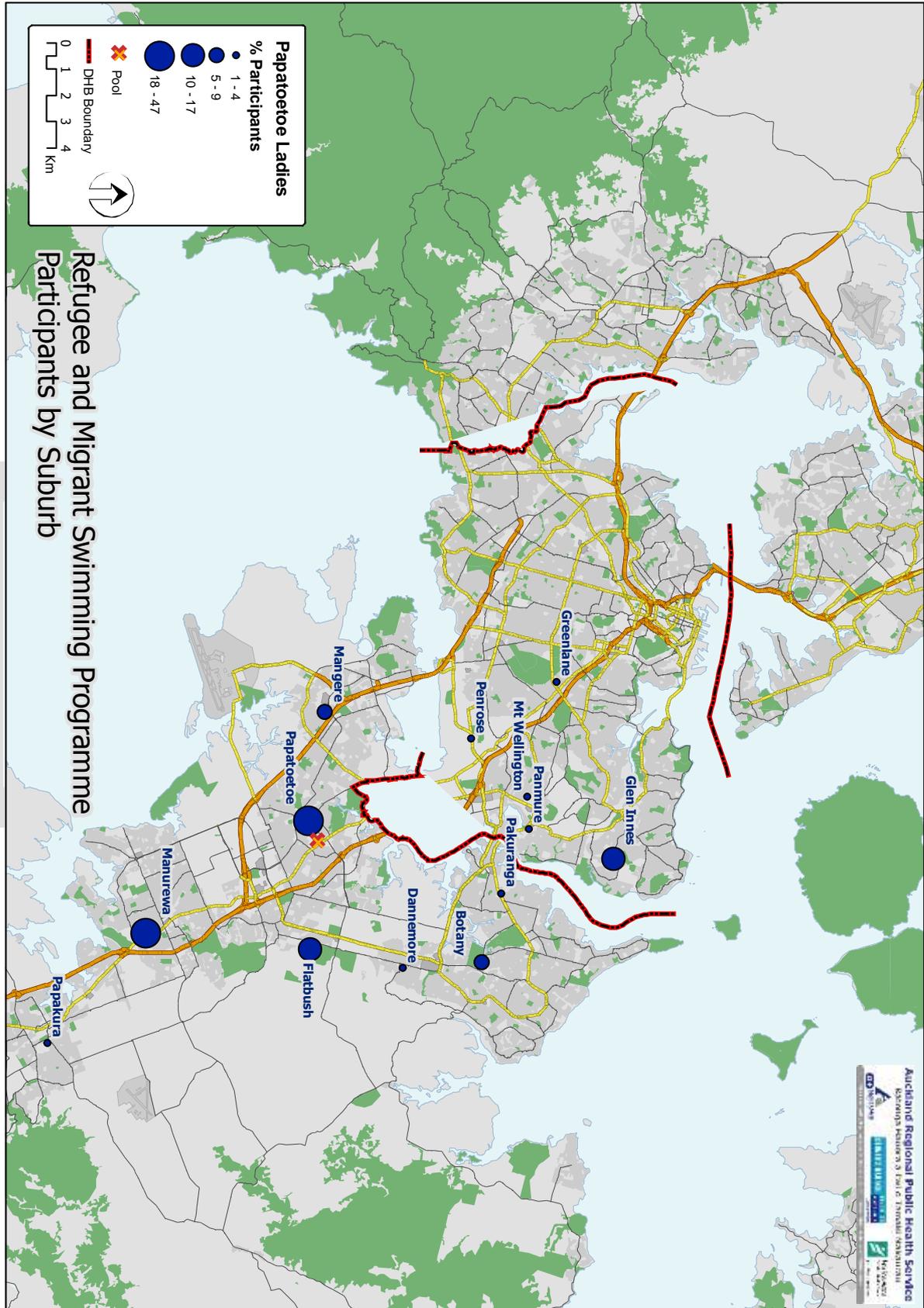
Over 80% of respondents reported being registered at a General Practice (G.P), and the remaining 19% did not know if they were registered. Suburbs which respondents were registered with a G.P included *East Tamaki, Dannemora, Papatoetoe, Greenlane, Otahuhu, Clendon, Weymouth and Manukau*.

When participants were asked if the program had increased their motivation to visit their doctor/nurse or local community health centre more regularly, 46% strongly agreed. About the same amount (43%) found no change, which may indicate the lack of health promotion messaging as part of the Papatoetoe programme.

Recommendation:

Health messages are promoted as part of the swimming programme.

Figure 17: Map of where participants travel from



Section 2: Health and Well-being

Personal Health and Well-being

Knowledge

Respondents indicated that their health and wellbeing knowledge has improved; with 71% of respondents agree that they now know more about health and wellbeing. Almost 30% indicated no change in their health and wellbeing.

Considering majority of the responses were positive, it can be said that the programme had participants thinking about overall health and wellbeing, not only physical activity. For those who found no change it could be interpreted that they were either new to the program or they were attending the program for more social reasons than for health and wellbeing.

Behaviour

Physical health and wellbeing of the respondents appears to have improved as a result of attending the programme, with 78% of respondents indicating that their health and wellbeing had improved by participating in the programme.

As majority of respondents gave a positive response, this indicates that the programme has had a positive influence on the participants health and wellbeing. For those who found no change could be due to being new to the programme or may already consider themselves having a health lifestyle.

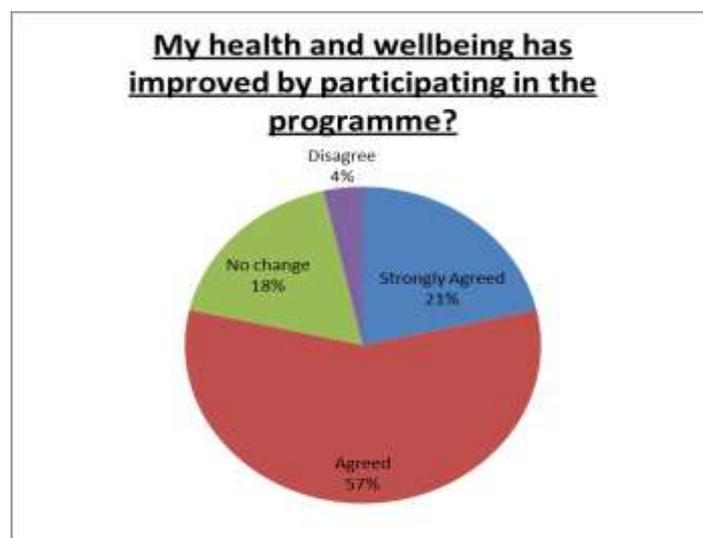


Figure 18: Improvements in health and wellbeing

Physical Activity

Up to 96% of respondents agreed that that physical activity was an important part of a healthy lifestyle. From this it can be seen that there was strong engagement from the participants with the programme.

Over 70% of respondents indicated that they do 30 minutes or more of activity most days. About 17% indicated no change, whilst 7% indicated that they do not do 30 minutes of physical activity most days of the week.

Physical activity had increased as a result of participating in the programme, with 85% of respondents agreeing that their physical activity has improved.

These results indicate that a majority of the participants were in favour that the programme has had a positive impact and is influencing participants to become active.

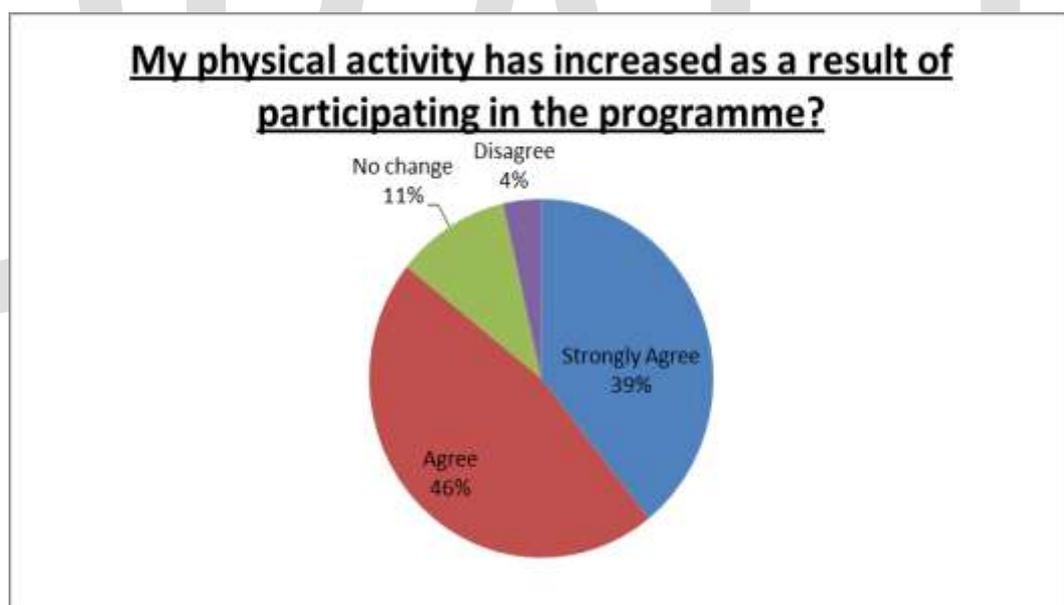


Figure 19: Improvements in physical activity

Nutrition

Half of the respondents agreed that the program had influenced their food choices. Almost the same amount (42%) indicated no change to their food choices as a result of attending the programme. This may be a reflection of the attendance of the nutrition workshops that were held in 2011, paired with the significant number of new

attendance since the workshops were held.

Holding workshops for the participants were a challenge as most people were not able to attend before or after swimming due to other personal commitments.

How people have changed their food choices included: *Healthy food selection, preparation, healthy diet, fat free; eating less fatty food and more healthy food; eating the normal food*

Recommendation:

The nutrition component is re-introduced via a drop-in clinic format (or one-one) rather than workshops

Lifestyle Changes

Respondents appear to be making positive lifestyle changes, with 64% of respondents agreed that they have made lifestyle changes since joining the programme. About one third (32%) reported no change in their lifestyle.

These percentages indicate that the program needs to be encouraging holistic health messages, not only physical activity benefits.

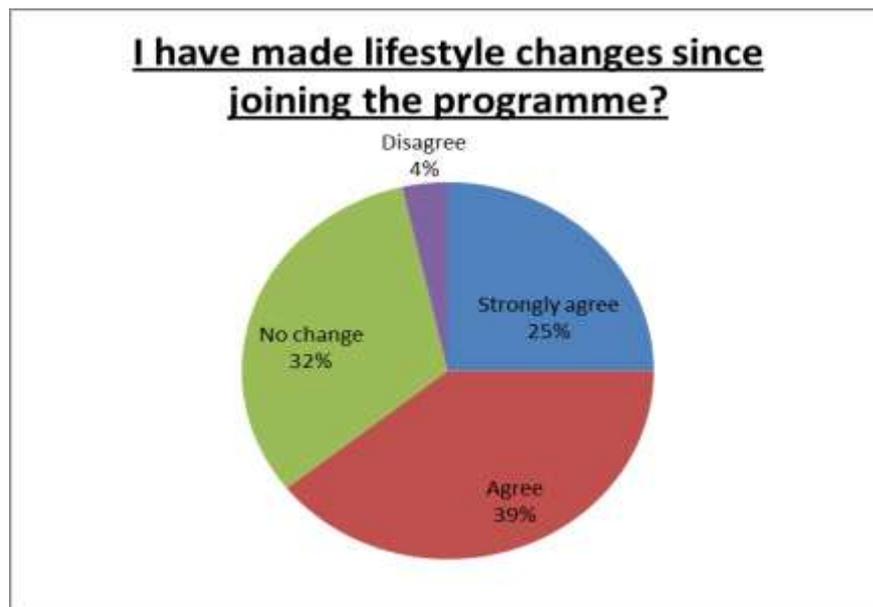


Figure 20: Lifestyle changes

Other health promotion messages

When participants were asked if they are more aware of health messages and other health programmes (e.g. breast, cervical and CVD screening) 54% agreed, 38% found no change whilst 8% disagreed.

When questioned about what is preventing the participants from making lifestyle changes, reasons cited included: *Not much; time, I pursue a healthy lifestyle already; lack of self-confidence ; doing it individually; Not many fitness options; low self-esteem; overweight; need to lose my pregnancy weight; laziness*

From the figures it is clear that the programme has not had much impact on influencing most people in accessing other types of health screening; however it must be noted that there is no active promotion of women's health issues at the Papatoetoe Programme like other swimming programmes.

Section 3: Water Safety

Awareness, knowledge, skills

- 69% of respondents indicated that they are more aware of water safety as a result of attending the programme.
- 25% of respondents indicate that their awareness of water safety knowledge or skills has not been impacted as a result of attending the programme.
- Two thirds of respondents agreed that by attending the programme it has increased their personal swimming skills.
- One third that indicated that there is no change to their swimming skills.
- 65% of respondents indicate that they are more confident in the water as a result of attending the swimming night
- 29% indicated no change in their confidence in the water. This could mean that the respondents are already confident in the water or that it is the opposite and that some participants still do not feel fully comfortable when around water.
- 79% of respondents indicate that they can swim at least 1 length of the swimming pool. There is a limitation with this question, as there is the 25m 'big' pool at Papatoetoe (deeper water and cooler temperature) and the smaller, warmer, 20m learners pool and the question did not specify which pool it was referring to.

- 82% of respondents indicate that they can float for up to 1 minute.

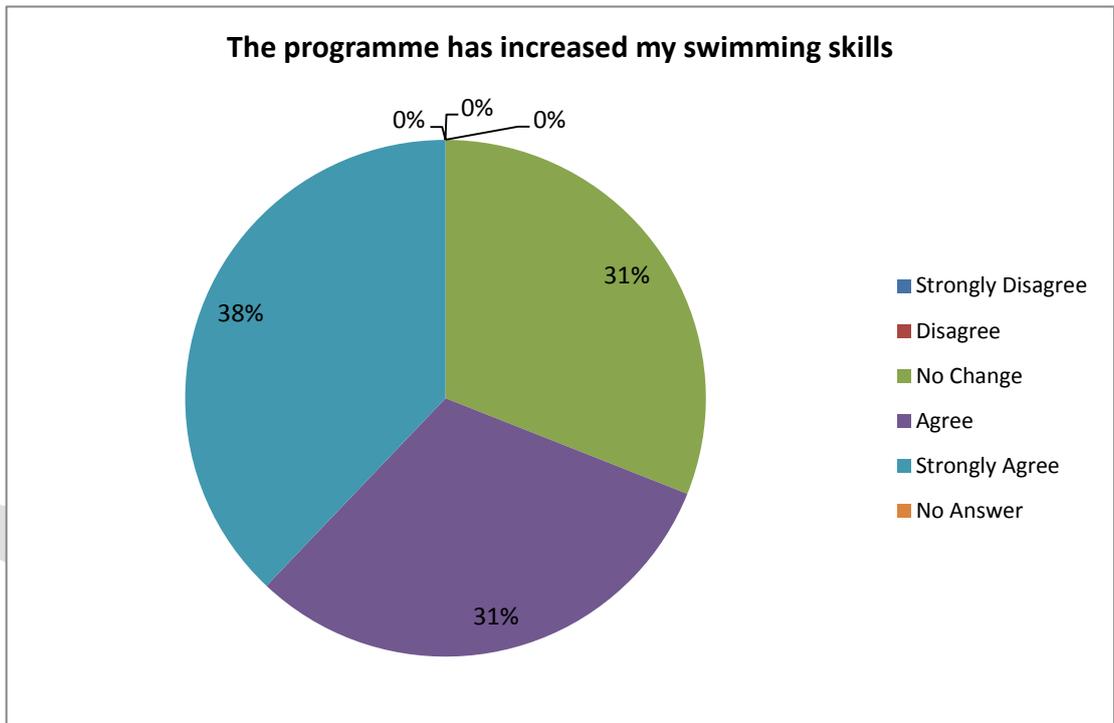


Figure 21: Increase in swimming skills

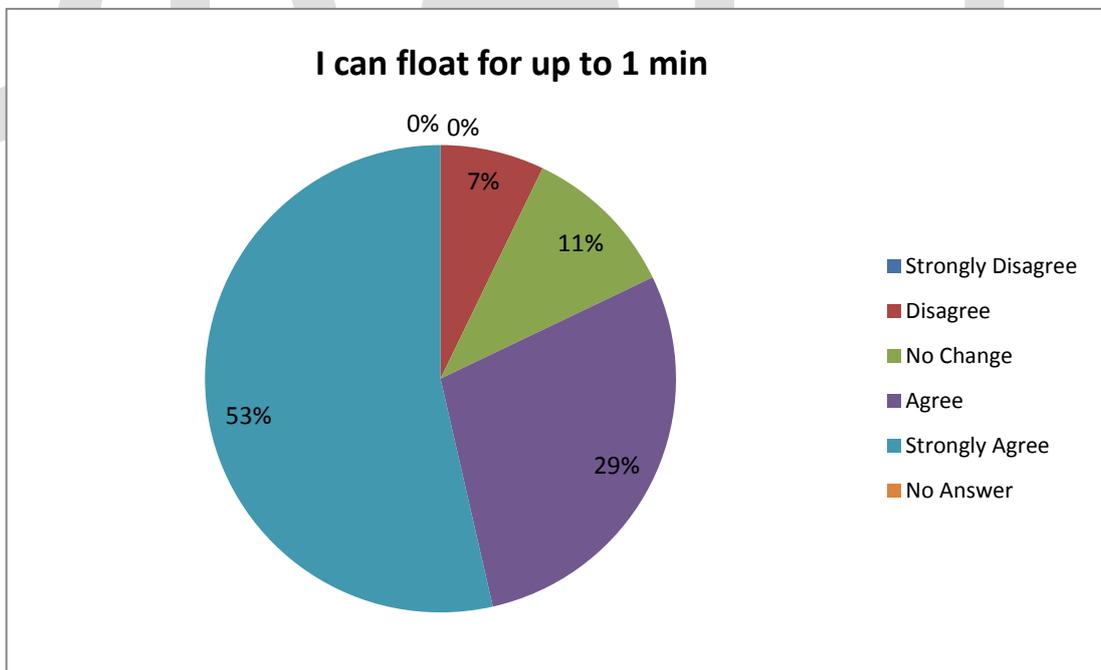


Figure 22: Floating ability

These results indicate that the attendees to Papatoetoe are becoming confident and increasing their basic swimming and water safety skills. It is pleasing to see that the

attendees are learning basic water safety skills despite only one night a month with a water safety instructor present.

The relationship between the third of respondents stating 'no change' in their confidence and skills does correlate to the similar number of recent attendees, indicating that there is a group of women who have not been attending long enough to build up a level of confidence and skills required to feel totally comfortable in the water, or some women may already have existing water safety knowledge and skills.

Recommendations:

The Programme utilises volunteers/trainers from the community (e.g. women attending the programme) as water safety trainers.

Swimming lessons should be offered as part of the programme.

Section 4: Community Involvement and Development

The Ladies Only Swimming Night originated from the community need, driven by the Muslim Women's Sports Association and initially involved community members as co-ordinators and key volunteers. In the early stages there was a volunteer pool committee; however this committee is no longer active.

The survey results indicate that 76% of attendees of this swimming programme agreed that the community are involved in the running the programme. The group interviews demonstrated that there may be a need for a volunteer co-ordinator as participants are unsure who to approach to talk to on the night if problems arise; 86% of participants thought that there were opportunities to develop the programme.

Cross Cultural Interaction

The Ladies Only Swimming Night at Papatoetoe appears to have significantly increased contact between communities, with 71% indicating that they enjoy meeting new people through the programme; in addition 82% indicate that they now have a greater understanding of other communities. However, 52% of women appear to stay within their own community. Further investigation would be useful to determine why

this is.

The group interview was very positive about the interactions of participants on the night, commenting that everyone was very friendly and people talk to each other.

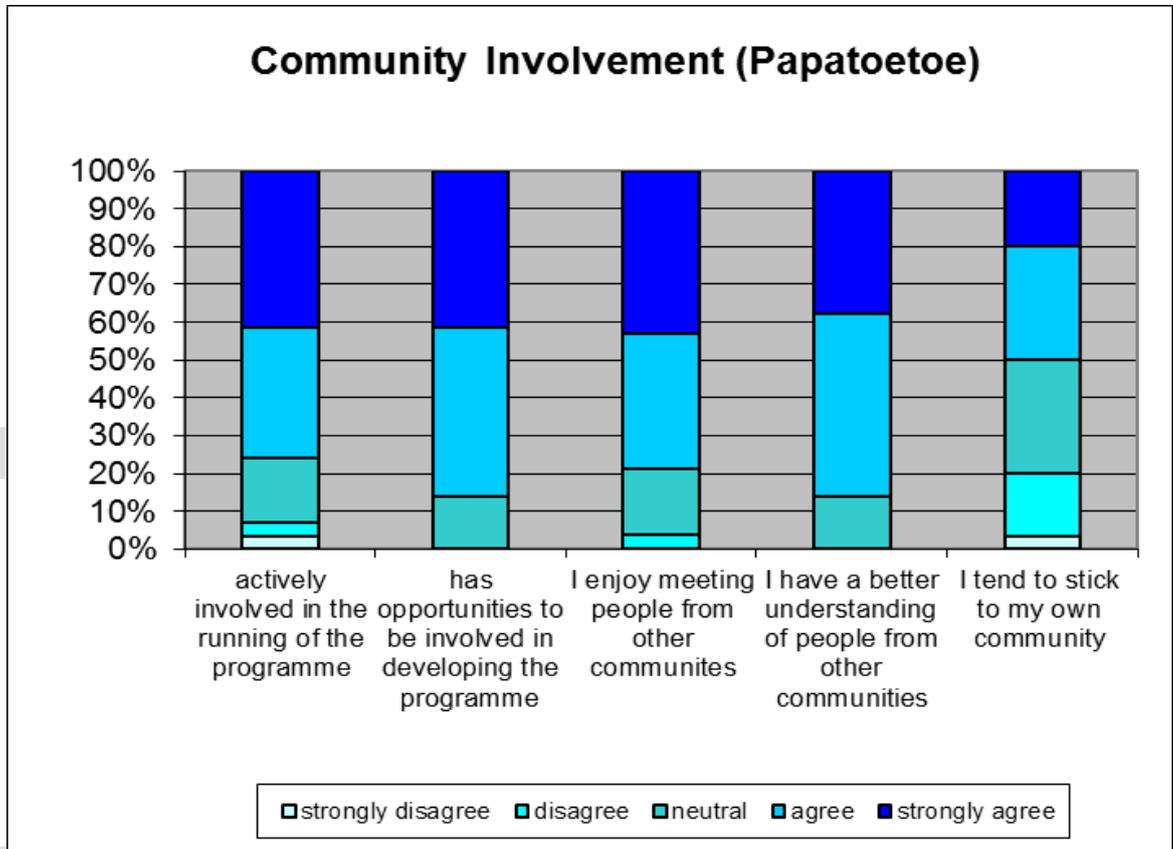


Figure 21: Community Involvement Papatoetoe

Section 5: Programme Roll Out

Papatoetoe staff emphasised the benefits of a women only session for social and comfort elements, they also highlighted water safety and the women becoming teachers of others as important future development aspects for the programme.

Staff were positive about the programme

“It is great to see the ladies having fun whilst exercising” Papatoetoe Staff.

Staff additionally identified that whilst swimming lessons were initially popular at Papatoetoe women were not consistently attending, which resulted in lessons no longer being offered. Other areas for improvement were a wish to do teaching and water safety activities more regularly and providing set times for teaching alongside

the socialising, for example, water safety sessions on a monthly basis means there are always new faces so building on instruction is a challenge.

Similarly to Mt. Roskill, rule breaking and respecting instructors when they address breaches was an issue, despite 90% of the women being aware of pool rules and 90% were aware of what was suitable swimwear. Similar to suggestions as described in the Mt. Roskill section of the evaluation could be implemented at Papatoetoe.

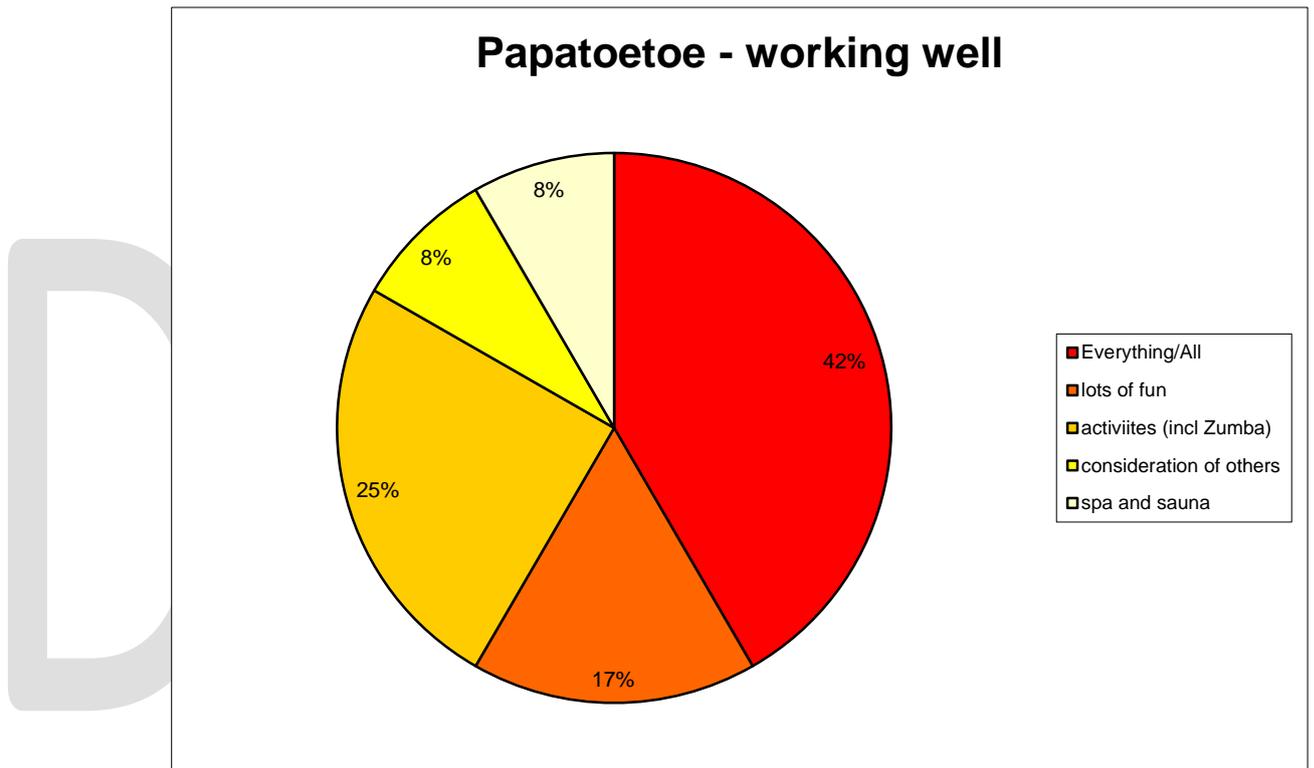


Figure 22: What is working well at Papatoetoe

Conclusion

Papatoetoe Ladies Night has proven very popular within the community and it is attracting a wide range of participants each week. The participants appreciate the opportunity for a female only environment in the South Auckland area that they can enjoy with their family and friends for health and social reasons.

Many participants enjoy swimming with their children and generally the women are conscientious about supervising their children in the pools. This rule is reinforced on

a regular basis.

The spa and sauna facilities are popular with participants, as well as the aqua zumba class. Monthly water safety sessions are utilised, particularly by new attendees however there is a strong desire from the participants for regular learn to swim classes.

Staff on the whole are very enthusiastic and positive about the programme, with instructors making a conscious effort to adapt their teaching methods for this particular group. This has helped create a pleasant and fun environment for Ladies Night.

“My playlist respects the needs of the ladies in its choice of music and exercise routines”

“I have undergone lots of training to make sure I deliver a successful class”

Staff suggested the need for translated guidelines or pool rules to improve communication and reinforce rules such as wearing the correct swimming attire.

The attitude of the staff at Papatoetoe is summed up by a comment from one of the instructors:

“I enjoy the ladies and the fun we have together. I have seen their confidence grow”

Nutrition education was expressed by some participants, despite the overall low response rate to the nutrition questions, indicating that new participants may not be aware that nutrition has previously been part of the programme.

Future Development Suggestions

- Re-introduction of swimming lessons would be of benefit for participants, as many of the women have had no prior experience in the water
- Consider translated pool guidelines to improve communication between staff and participation and maintain appropriate behaviour within the facilities.
- Investigate the feasibility to offer more activity options as part of Ladies Night, such as swimming lessons, water safety, fitness, gym, zumba etc.
- Re-introduce the nutrition education one-one rather than workshops as

previously done.

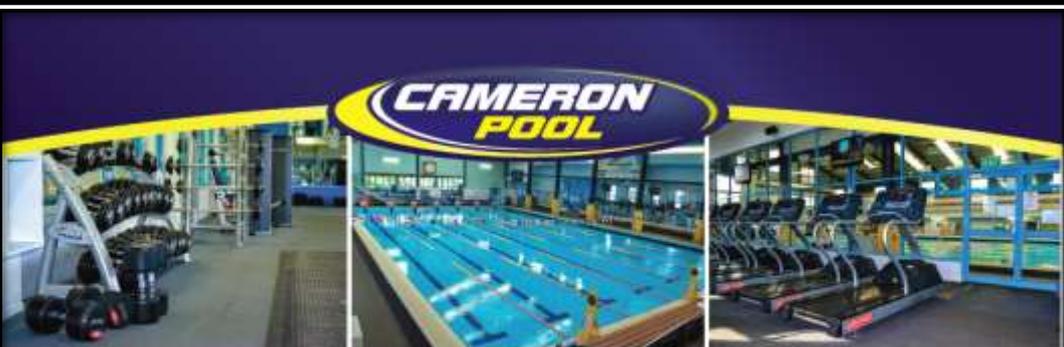
- Utilise this captured audience for promoting other women's health issues, e.g. breast and cervical screening
- Develop a water safety programme for community trainers to increase capacity within the community

Recommendations for other programmes

- Translated pool guidelines developed to improve communication and address appropriate behaviour of participants
- Ensure swimming lessons are part of any water-based programme
- Nutrition education to complement the physical activity component
- Develop a water safety programme for community trainers to increase capacity within the community
- To increase other health promotion messages relevant to the audience e.g. women's health issues

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Thanks to Cameron Pools and Umma Trust for use of this flyer

Section 1: General Demographics

Who is attending the programme?

Most participants of the Young Women's Swimming Programme were between were under the age of 16 years old (76%), followed by 17-24 years (24%).

Ethnicity of those attending include: *Pakistani, Indian, Somali, Afghani, Maori, English/Pakeha.*

Attendance

Of the two years the programme has been running, 43% of respondents had been coming for 1 year, with 19% having attended for 6 months or less.

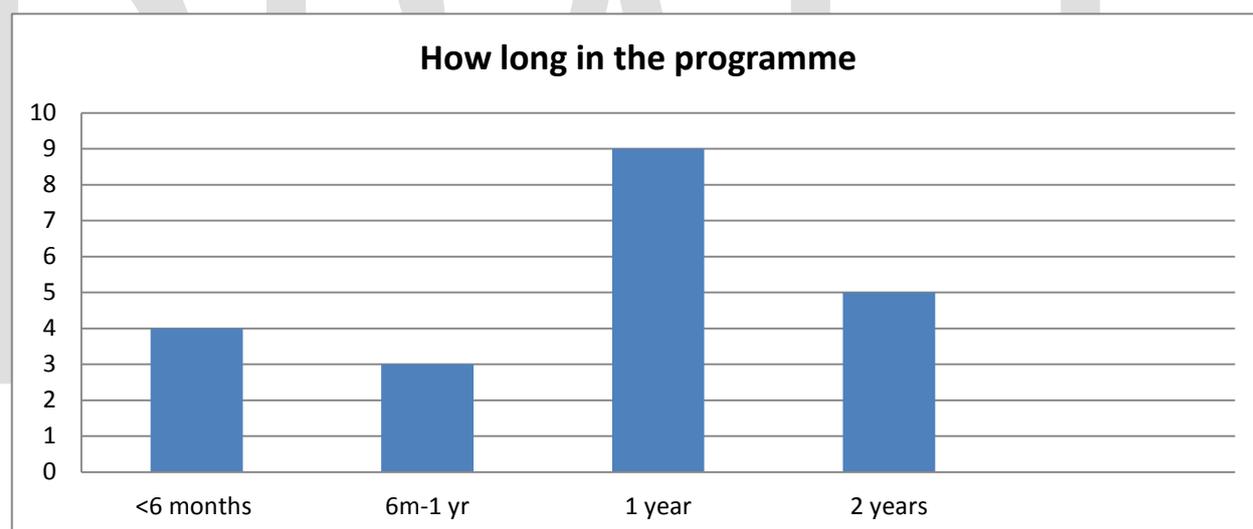


Figure 23: Attendance in the Young Women's Swimming programme

Programme recruitment and retention

Most participants found out about the programme through friends. There has not been significant advertising, and this response was expected but a few respondents found out from the programme flyer.

Participants travel from Mt Roskill and the surrounding areas including: *Mt. Albert, Lynfield, Blockhouse Bay, Avondale and Pt. Chevalier and West Auckland.*

Respondents cited swimming/learning to swim and fitness as reasons they continue to attend the swimming programme. They also attend to socialise with friends.

Refer to Figure 24: Map of where participants travel from.

Health Link

Of the 21 respondents, 13 knew they were registered with a general practitioner (G.P), three reported they were not registered and five reported that they did not know. The lack of descriptive data which was disclosed regarding registration with a G.P could be a result of girls under 16 years not having knowledge of these details.

Of those who identified being registered with a G.P, practices were located in *Mt. Roskill, Mt. Eden and Royal Oak*.

When the participants were asked if the programme had increased motivation to visit their doctor/nurse or local community health centre more regularly, 9% agreed 43% reported no change, 48% disagreed or strongly disagreed.

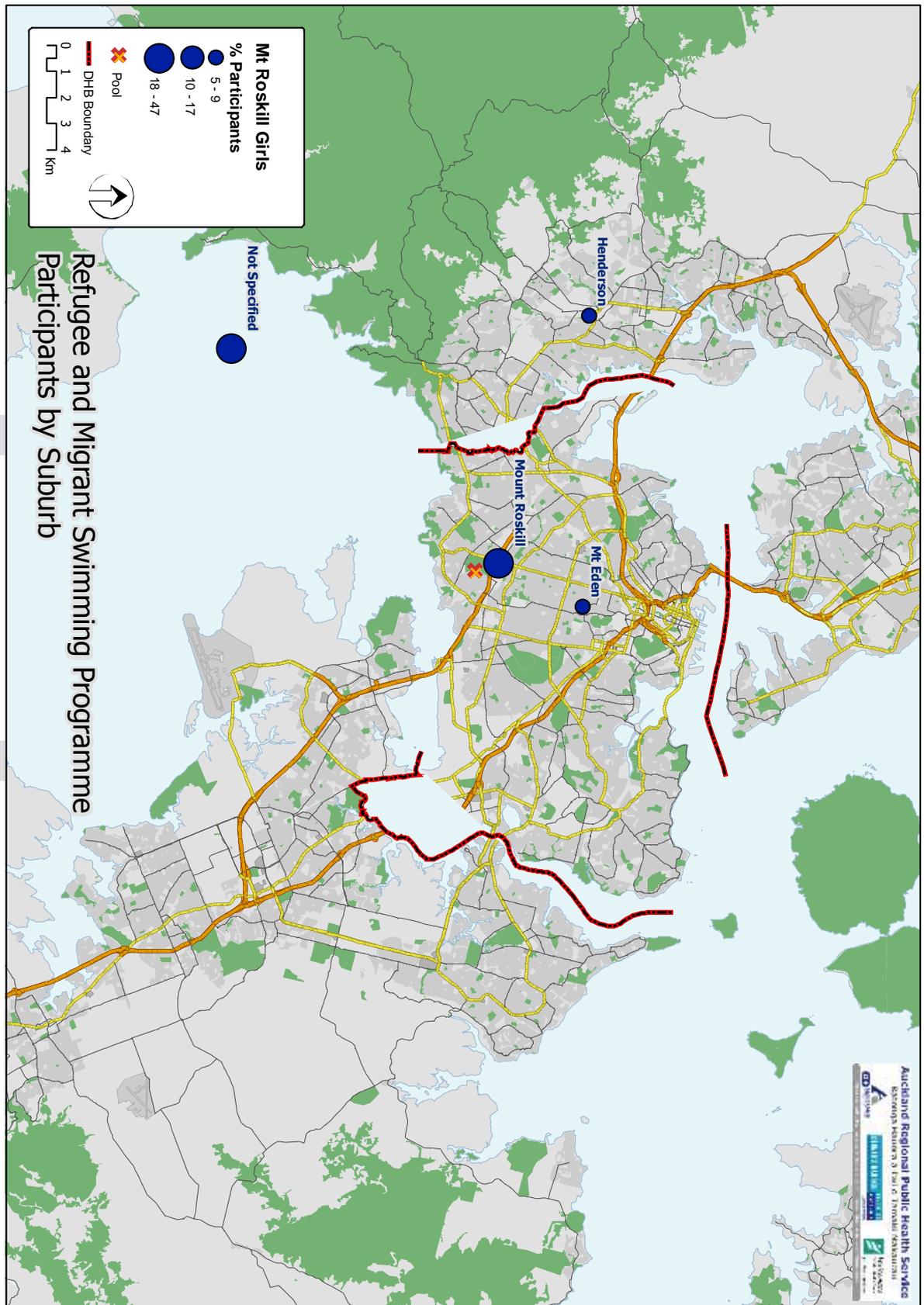
What benefits do you get from the programme?

Benefits of attending the programmes were identified by 31% of respondents. Benefits cited included: *Increased exercise and fitness, swimming/learning to swim and weight loss*

For most of the girls attending, this programme is the only opportunity for them to be physically active.

Refer to Figure 25: Benefits of the Programme, page 57.

Figure 24: Map of where participants travel from



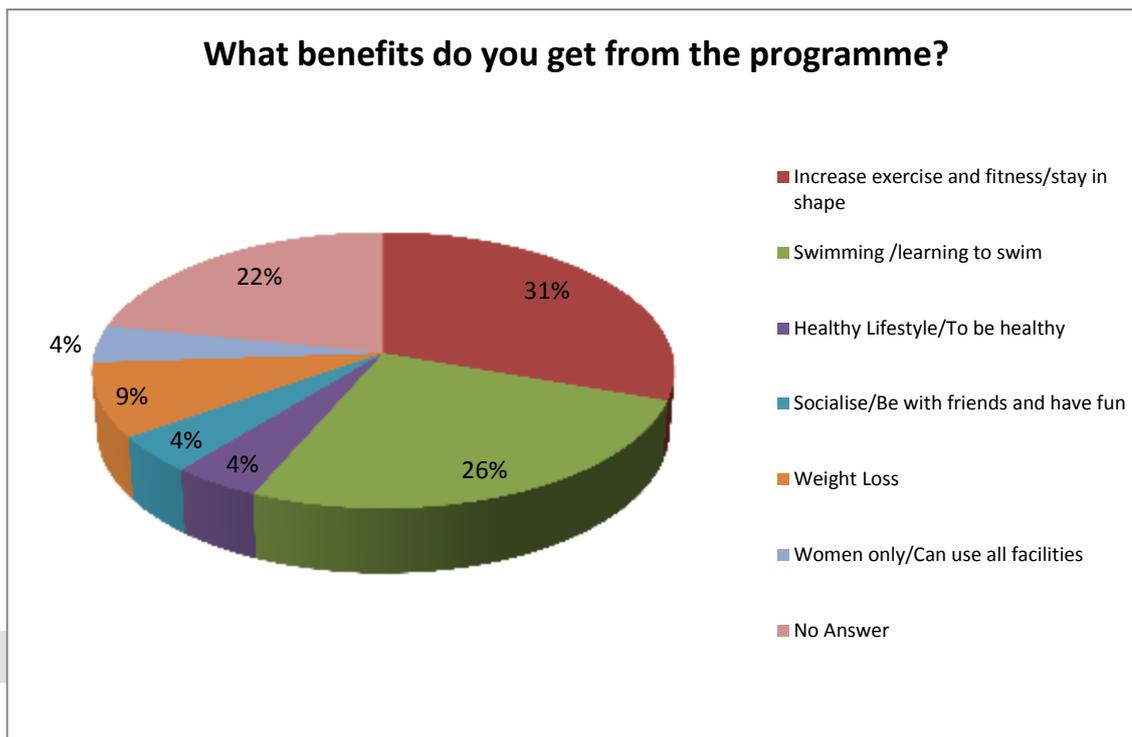


Figure 25: Benefits of the Programme

Section 2: Health & Wellbeing

Personal Health and Wellbeing

Knowledge

- Over half of the respondents strongly agreed (14%) or agreed (48%) that their health and wellbeing knowledge has increased by participating in the programme
- A quarter (24%) indicated no change in health and wellbeing knowledge
- 14% disagree that their knowledge has improved.

Behaviour

- 71% of respondents strongly agreed or agreed that their personal health and wellbeing has improved from participating in the programme
- 9% indicated no change
- 10% disagreed or strongly disagreed that their health and wellbeing has improved.

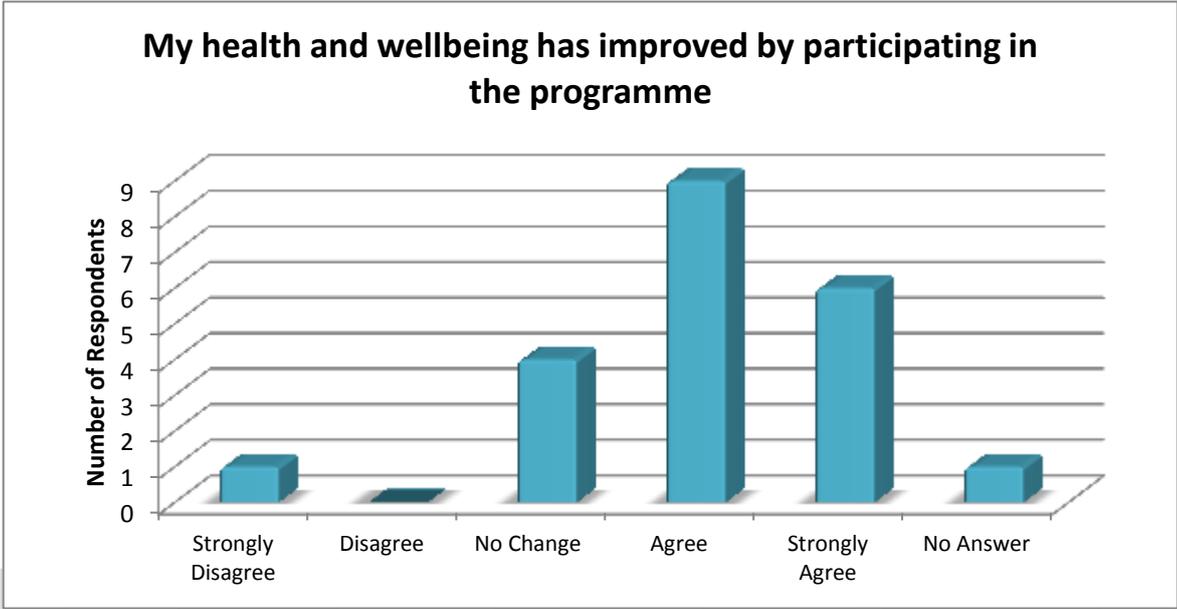


Figure 26: Improvements in health and wellbeing

Physical Activity

Most of the girls stated that they believe that physical activity is an important part of a healthy lifestyle (91% strongly agreed or agreed).

Whilst 76% of the girls strongly agree or agree that they do 30 minutes or more of activity most days, 10% indicated no change, 14% disagreed or strongly disagreed.

When the participants were asked if physical activity has increased as a result of participating in the programme, the results highlighted that 67% strongly agreed or agreed 28% indicated no change, 5% disagreed.

Nutrition

Nutrition questions were not relevant to this programme as no nutrition component offered.

Lifestyle Changes

Survey responses indicated that one third (33%) strongly agreed or agreed that they

had made lifestyle changes since joining the programme. Almost one half of respondents (43%) indicated no change in lifestyle.

When the participants were asked what prevents them from making healthy lifestyle changes 71 % did not answer, 9% said they did not know. Reasons given included: *food choices, family and friends.*

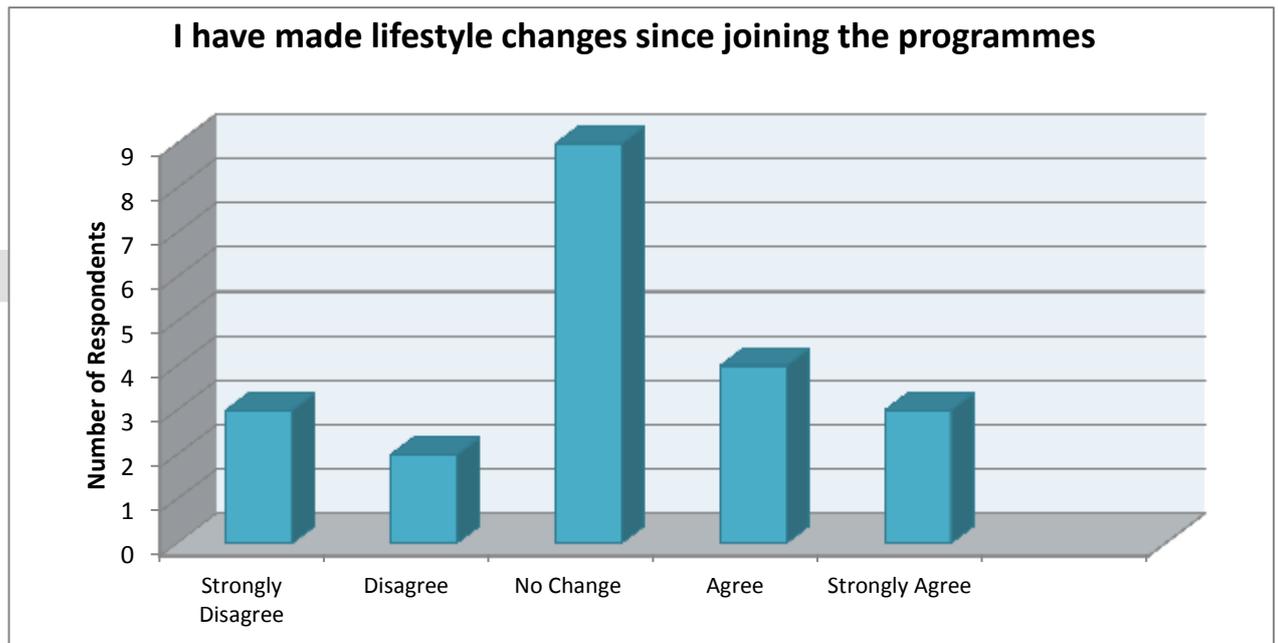


Figure 27: Lifestyle changes since attending the programme

Section3: Water Safety

Awareness, knowledge and skills

Over 60% of the respondents indicated that they are more aware of water safety as a result of attending the programme. Swimming skills appear to be improving as a result of attending the swimming programme:

- 81% of respondents indicated that the programme has increased their swimming skills
- 81% of respondents indicated that they can swim at least 1 length of the swimming pool (25 metres)
- All of respondents report that they could float for up to 1 minute

- 83% of the respondents reported that they now feel more confident around the water
- Just over half (54%) indicated that they feel more confident looking after children around water, however almost one quarter (24%) reported no change.

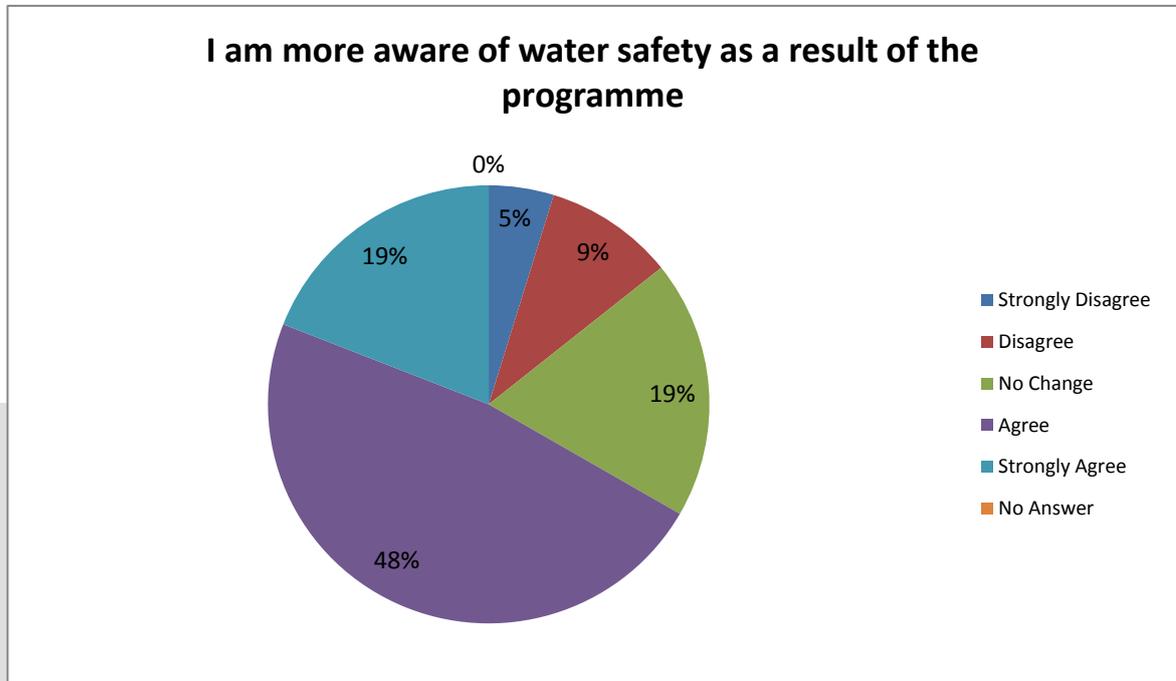


Figure 28: Awareness of water safety

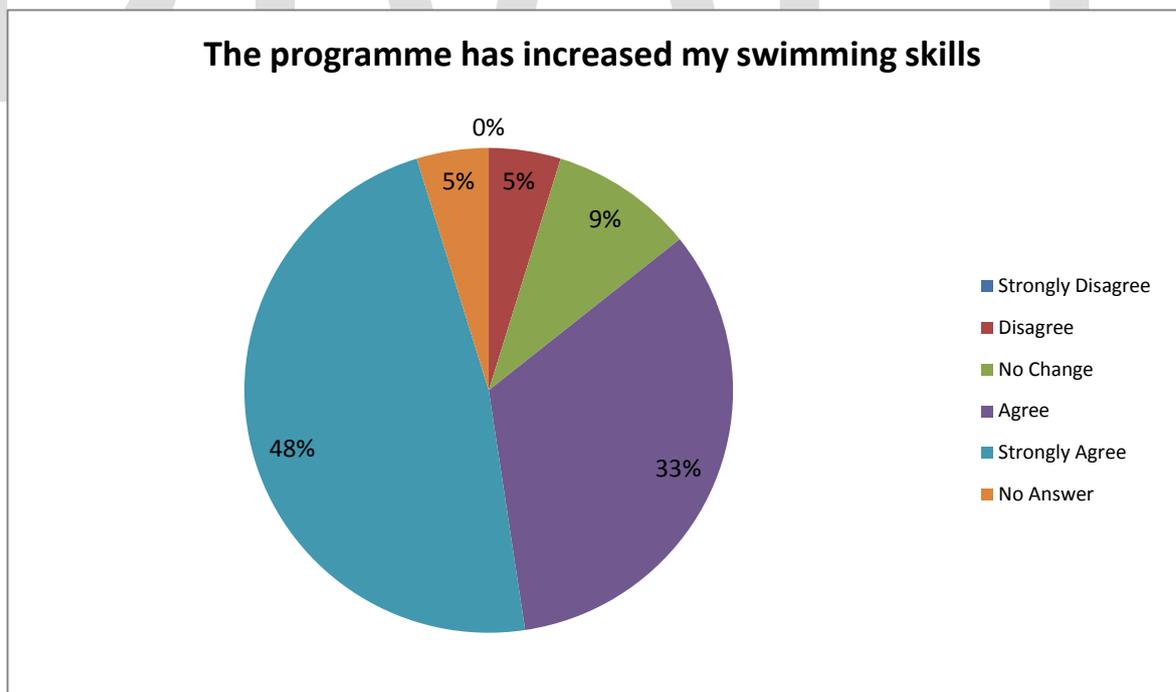


Figure 29: Increase of swimming skills

Section 4: Community Involvement & Development

The Young Women's Swimming Programme originated from the need for females under the age of 18 to access swimming facilities, as the Sunday night programme was for those aged 18 years and older. The programme is overseen by a programme co-ordinator contracted by Umma Trust and is linked to the Women's Swimming Programme. Currently there is no volunteer or participant group under the programme co-ordinator like the Sunday night programme.

However, 85% of respondents feel that the community is actively involved in the running of the programme in some way. Three quarters of respondents (76%) believed that there are opportunities to be involved in the future development of the swimming programme.

Cross Cultural Interaction

As with the other female only swimming programmes, respondents are increasing their understanding and enjoy interacting with the other participants. However, about a third of respondents do not believe that they have increased their understanding of people from other communities (19% disagree, 10% strongly disagree) and two thirds indicated that they tend to stay with their own community during the programme (19% strongly agree, 48% agree).

As the young women's programme specifically targets girls from migrant, refugee and refugee-like backgrounds, there is not the same wide range of ethnic groups attending compared to the Sunday night women's programme which may explain these responses. Staff and volunteers support this, and observe that the girls are inclined to stay in their own peer and social groups.

The high agreement to stick with one's own community could also be due to the fact that there are low numbers in participation.

Section 5: Programme Roll Out

Majority of the respondents were aware of what they could wear in the pool, with 75% naming appropriate clothing they can wear when swimming. Of those who responded to what was working well in the programme, 25% stated swimming lessons, and 14% said everything.

Overall all respondents agreed that the programme staff were friendly and helpful. The strongest suggestions for improvement were cost (17%) and more activities being offered (13%). Half of those surveyed did not answer that question.

Conclusion:

The Young Women's Swimming Programme is providing teenage girls with a safe and fun environment to be physically active in central Auckland. The programme is largely attracting the target population of girls aged 12-17 years old from new migrant and refugee backgrounds, with girls from other backgrounds also utilising the programme. Proactive marketing or promotion of the programme could assist with increasing the number of participants each week, low numbers of participation were mentioned frequently when interpreting results and interviewing the programme co-ordinator, and is a point of concern for sustainability of the programme.

It is clear that the programme is meeting the aims and objectives around physical activity and water skills. Respondents reported an increase in personal health and wellbeing, increased physical activity levels and acknowledged that physical activity is an important aspect to a healthy lifestyle. Swimming and water safety skills appear to be improving as a result of attending the programme, with over 80% reporting an increase in swimming ability, water confidence and learning basic survival skills such floating.

As this swimming programme is still in early stages, there is room for development. Respondents believed that they could be more involved in the running of the programme, perhaps through a 'participant pool group' or organising committee to guide future changes. Suggestions for improvement included additional activities being offered and revised cost of the programme.

Future Development Suggestions:

- Consult participants about creating a 'participant pool group' to inform and guide programme development to ensure it is appropriate for the target audience attending.
- Active promotion/marketing of the Youth Female Swimming Programme to increase numbers.
- Other physical activity options offered.
- Consider offering nutrition and other health promotion messaging to encourage a holistic healthy lifestyle, if the programme coordinator believes it is appropriate for this age group.

Recommendations for other youth programmes:

- Keep it fun!
- Widely promote and advertise the programme
- Consider 'bring a friend for free' or trial nights to encourage people to increase numbers at the beginning
- Have a variety of activities on offer
- Have young people involved in the development and running of the programme to create ownership and empowerment of the target group

Burundi Community Swimming Project



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Section 1: General Demographics

As this swimming project was specifically for the Burundi Community, all participants were of Burundi ethnicity. Survey respondents were between the age of 25-64 years old.

All respondents had attended at least 90% swimming sessions of the available 10 sessions held at Mt. Albert Pools.

The swimming project was lead and promoted by Burundi community leaders. This was reinforced by 90% of respondents agreeing that the community was actively involved in the development and running the programme.

Attendance and Programme Reach

The community travelled mostly from the North Shore and West Auckland which reflects the demographics of where the community lives in Auckland.

The majority of Burundi community attended their swimming programme to learn or improve their swimming. Water safety was a key feature of the Burundi programme and this is reflected in the community's thoughts on confidence and safety and in and around the water.

The respondents also found that it was an enjoyable experience coming together as a community.

Section 2: Health and Wellbeing

For the Burundi community the level of physical activity appears to be good and there has been some lifestyle changes made since the programme. This swimming programme ran at the same time as a Healthy Eating Healthy Living (HEHL) community programme provided by the Auckland Regional Public Health Service which focused on nutrition. This programme complemented the Burundi swimming project.

It is noticeable that very few respondents were aware of other health

messages/programmes especially for screening. This was not a focus for either the HEHL or the Swimming programmes.

All of the respondents were registered with a general practitioner (G.P).

Section 3: Water Safety

A focus for the Burundi programme was water safety messages. The survey indicates that these messages have been taken on-board by the community.

However the community responses around confidence and ability indicate that further swimming lessons and in-water safety practice is required. This differs markedly from the increased ability of respondents from other community swimming programmes. This is further backed up when asked about the benefits of the programme, respondents prioritized confidence and ability in the water.

Recommendation:

Further adult learn to swim classes should be continued with this community.

Consider the possibility of including other refugee-like communities into swimming sessions

Consider separate gender swimming programmes for other communities

Section 4: Community Involvement

The community clearly indicated two main factors for programme success:

- Focus on swimming lessons

This was further reinforced when the main wish for improvement was increased access to swimming and swimming lessons for adults and children.

- The majority of the community were involved either in attending or co-ordinating

This was reinforced by 90% of respondents agreeing that community was actively involved in developing and running the programme.

Section 5: Programme Roll-out

The satisfaction level of the community for both staff and facility demonstrates the popularity of this programme with the Burundi Community.

Conclusion

The Burundi community have less confidence and ability in and around water than other participants of community swimming programmes.

The involvement of community leaders to co-ordinate the programme meant reach was significant within the community and the community felt that they were involved in the development and running of the programme.

The community were willing to travel to the swimming programme.

There is a strong interest to continue swimming for the Burundi community.

Future Development Suggestions for this community

- Further adult learn to swim classes should be continued with this community.
- Consider the possibility of including other refugee background communities into swimming sessions
- Consider separate gender swimming programmes for other communities

Recommendations for organisations working with new migrant communities:

- Work with community leaders and consult the community to develop an adult learn to swim programme which can be tailored to their specific needs, for example some communities will require separate gender swimming session (the Burundi

community did not require this).

Other New Migrant & Refugee Community Swimming Projects



ET



Background:

Ladies Only Swimming Sessions were offered to female students at the Refugee Education for Adults & Families (REAF) programme at Selwyn College, in October 2011 and March 2012.

There were two swimming opportunities provided:

1. Ladies Only, October 2011 for four sessions on a Friday morning (during class time)
2. Mothers and Children, March 2012, five sessions for mothers and children, Monday afternoons (after school)

1. Ladies only, October 2011

Demographics

- Nine Ladies from the REAF programme
- Seven participants were from Afghanistan, one was from Sudan and one from Malaysia
- Seven participants had been in New Zealand for less than five years
- Two had been in New Zealand more than five years
- All participants had children aged between 18 months and 14 years old

Baseline information

This information was a combination of verbal communication and observation from the instructors in the first swimming session.

- Two out of the nine participants had never been in the water before
- One participant had been in the water, but never put her head under the water
- Two participants could demonstrate basic swimming strokes – breaststroke, dog paddle and variation of head-up free style
- One participant previously had six-weeks of swimming lessons at the Papatoetoe Ladies Only Night before they stopped swimming lessons, and wanted to improve.
- All participants go to local beaches with their families – namely Long Bay, Mission Bay and St. Heliers

Outcomes

- All nine participants attended four, one and a half hour swimming sessions offered
- All participants could swim unassisted by the end of four sessions
- All participants said that they now feel more confident to look after their children in the water
- All participants vastly improved their swimming skills
- Participants were able to demonstrate safety and survival skills such as correctly fitting lifejackets, floating in a lifejacket, sculling front and back and swimming with clothes.
- Participants were able to demonstrate swimming with a kickboard, swimming freestyle and backstroke for a distance and duck diving and correct breathing techniques.
- All agreed that it was a good environment to be introduced to the water and learn to swim as it was a safe and happy environment. They were happy with the instructors and time allowed to learn to swim
- All participants expressed that they enjoyed the sessions and it had helped them be more confident when around the water with their families *'Before I was scared'*
- Half of the group now attend the Papatoetoe Ladies Swimming night

[Mothers and Children, March 2012](#)

- Four mothers and their children volunteered to attend
- All mothers had attended the swimming sessions the previous term
- Up to eight children attended, from two years old to 14 years old, with varying swimming experience.

Outcomes:

- Only one family turned up for all of the swimming sessions
- The youngest children (two and three year olds) gained confidence by the last session to be dunked under water without becoming upset
- Three older children could swim four laps non-stop

[Conclusion:](#)

This trial swimming programme utilising the portable pools for community use has been successful. The participants are within a population identified as high risk for drowning. All participants gained valuable skills and knowledge for themselves and their families. The portable pool offered the women an appropriate, safe and accessible option to learn to swim. Four consecutive sessions, approximately six hours swimming time were adequate to gain basic swimming skills and improve confidence in the water. The mother and child option was not as successful, namely the exclusion of mothers in the water with their children and the difficulty on getting to the venue for a full lesson. It appears that the mothers enjoy their own space learning to swim without worrying about their children as well (this is consistent with findings from the Mt. Roskill programme where childcare is provided). On going water safety presentations and support are given to REAF to reinforce the messages.

Recommendations for working with this group of women:

- Encourage women to continue swimming at one of the Women's Only Swimming Programmes around Auckland
- Encourage car-pooling among women to attend the Women's Swimming Programmes together
- Investigate other options for learning to swim for both men and women from this group

Limitations:

- These are one-off sessions depending on the availability of pool space and approval of community use with the school principal
- Women do not always turn up for the lessons making it difficult to justify the resources put into the sessions
- Barriers still exist for these women in accessing the current women's only swimming programmes including transport (Glen Innes is not close to either Papatoetoe or Mt. Roskill), cost and childcare.

SECTION 4: QUALITATIVE OUTCOMES

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Focus Groups

Focus groups were conducted to gain further insight about how the programmes are meeting the needs of the attendees and hear opinions about programme improvement.

Themes of the focus groups:

- Socio-demographics
- Health and wellbeing
- Water safety
- Community Involvement
- Programme Delivery

A. Focus Group 1: Mt. Roskill

Demographics

- Six women, five of Somali ethnicity, one of Afghani ethnicity
- Three women were aged 44-65 years, two women aged between 25-44 years and one women aged 17-24 years old
- Five women had been attending for over two years, one woman for about 18 months
- All women used the swimming lanes, spa and sauna, gym and aqua aerobics
- Only two women had swimming lessons
- Only two women had attended the nutrition workshops

Benefits the focus group participants get from attending the programme included:

“Relaxing, enjoyable environment and I look forward to Sundays to take time out”

“Different variety of cultures and meeting new people”

“Spa keeps me warm. Helps bones and muscles”

“Gym for my fitness”

Health and Wellbeing

There was a general consensus that there are many benefits from attending the swimming programme.

Participants cited changes they have made around physical activity habits since attending the programme:

“Since coming I like doing exercise and want to do more exercise”

“I now walk around the park”

Participants mentioned that their eating habits have become healthier since attending the programme by the following comments:

“Used to feel body ache, since coming [to programme] I feel good, do zumba, changed my eating habits and drink lots of water”

“I eat more fruit and veges; I never used to like eating them”

Participants reported other health benefits of attending the programme, including:

“I know what to do to be healthy”

“Good for Muslim women, culturally and religiously”

“I feel happier”

“I realised that it was not difficult to makes healthy changes”

Water Safety

Participants agreed that by attending the programme it has increased their confidence when in and around the water through the following comments:

“More confident”

“I used to be scared of the water”

“Used to have a phobia of swimming but not anymore, now feel confident and relaxed”

Learning to swim as a result of attending the programme was mentioned by a few of the participants and the wider implications for their families, such as:

“I couldn’t swim at all, now I can swim”

“I can swim with my mum and teach her”

“I know to look after the kids around water, always need to be aware of where people are”

“I was trained in water safety last year with my friends”

Community Involvement

In response to the question **Do you think the community has enough input into the programme**, there were varying responses from the group. Some women recognised that the programme coordinator was available to talk to about changes, others were less positive about being able to provide feedback and have input about changes.

Specific comments from the focus group participants were around time allowed in the pool and the recent price increase:

“I don’t think we have any opportunities to input”

“Times are not consistent; lifeguards get us out early before the time is up”

“Seems that the fees go up, but time has decreased”

“So much to do and not enough time if have to get out early”

The focus group participants agreed that the programme encourages social interaction between different communities attending and that it is a way to make friends.

“Good to have groups from all over Auckland attending”

“I’ve made lots of friends; it’s good to meet new people”

Programme Delivery

The women were asked about their satisfaction with various aspects of the programme including administration, staff and the facilities. General consensus among the group is that administration and reception staff are helpful and nice.

The gym appears to be very popular with the women, and specific comments regarding facilities were about the gym equipment availability:

“Gym good, but maybe there needs to be more time available as it gets very full”

“When gym is full, hard for people who come later because of children etc. because gym gets filled up quickly”

The group agreed that the programme is working well by having a variety of activities available to the women and the childcare option is still being utilised, one focus group participant commented:

“Childcare, very good and yes still is being used by the ladies”

Suggestions for additional classes were put forward by the group:

“In winter, aqua aerobics too cold, but maybe group aerobics in the big room would be good”

“Aerobics/zumba please! Not only in the winter, all the time, it’s nice”

Other areas of improvement suggested by the focus group participants included having a group made of programme participants to formalise input into the programme, and have both Saturday and Sunday open for all ages and open the spa earlier in the winter

“Having a regular pool group that meets monthly, made up of participants to feedback and provide input into the programme”

“Divide the programme into two groups and have Saturday and Sunday available for both mothers and teenagers to attend to enable on trip per family, some families can’t do transport for two nights in a row and someone misses out because girls can’t attend on Sunday”.

“Open spa earlier for people in the winter, big pool is too cold”

“Under 18’s should be allowed into Sunday night programme, as after one hour most of the ladies go into the spa and the big pool is mostly empty so would be good to utilise for the under 18 girls to swim”

“Extra night put on”

B. Focus Group 2: Mt. Roskill

Demographics

- Five women, all Afghani ethnicity
- One woman were aged 44-65 years, four women aged between 25-44 years
- Four women had been attending for over two years, one woman for less than six months
- All women used the swimming lanes and spa and sauna,
- Four women use the gym and swimming lessons
- Three women do the aqua aerobics classes
- Only one women attended the nutrition workshops

Benefits from attending the swimming programme expressed by the second focus group included:

“Stress Free, Exercise, Helps meet our friends, Enjoy swimming”

Health and Wellbeing

The women stated that they now do more exercise and that it is fun; and that by attending the swimming programme they are seeing improvements in their health and wellbeing and this increases motivation to make other healthy changes.

Focus group two participants commented:

“Forces you to exercise and make time to exercise”

“Makes you feel better, it’s fun and I don’t realise that I’m exercising”

“Once the ladies see results, then they start changing other things as well, it makes them motivated”

There were a number of comments regarding the separate sessions for young women under 18 on the Saturday night and over 18 on the Sunday and that it separates families – mother and daughter have to swim on different nights and also separates friends once the girls turn 18 years old.

This is reflected by the comments below:

“Two days of the separate swimming for teenagers and mothers too hard so not good

for family health”

“Don’t allow teenage girls on Sunday but they prefer to come with their parents on Sunday, less likely to come on Saturday”

“Hard for girls when they turn 18 and have younger friends, much smaller group on Saturdays and the girls would swim on Sundays, the socialising aspect is important”

Water Safety

The group agreed that they are more confident around water from attending the swimming programme.

Two participants mentioned that they feel more confident when swimming at the beach and in the different water conditions:

“When I go to the beach I feel I can handle the waves better”

“Able to dive under the waves at the beach”

Community Involvement

The participants of this group were not interested in being part of a pool group or committee, and believed that other women felt the same and only want to swim:

“Don’t think people will be interested in a group, they only want to swim”

The general consensus was that it was a really good that women were coming from all over Auckland to attend.

Programme Delivery

Everyone in the second focus group was happy with administration, staff and facilities, especially the recent instalment of shower curtains in the bathrooms

“Very big thank you for the shower curtains”

“Whole programme really good”

The only improvement the women mentioned was improved communication between

staff and participants, specifically commenting on the lack of communication about the recent price increase:

“Fee increase. Didn’t know that the price had gone up, women turned up with only \$2.50”

“Price increase was not communicated properly”

Participants commented that posters are not a good idea to communicate messages as many people do not take notice of them.

“Posters not a good idea, too many posters at the pool and no-one takes any notice, and some can’t read English properly”

C. Focus Group 3: REAF/ Papatoetoe

These women from REAF did the initial swimming sessions in the portable pool and continued their swimming by attending the Papatoetoe Ladies Swimming Nights. They answered the questions for both programmes.

Demographics

- Two women, of Arabic ethnicity
- Aged 25-44 years
- Attended all four sessions offered in October 2011 in the portable pool
- Both had been attending Papatoetoe for less than six months
- They had swimming lessons as part of the portable pool but not taking lessons at Papatoetoe
- At Papatoetoe they both use the swimming lanes, spa and sauna and learner pool

Benefits the participants mentioned from attending the swimming programmes included:

“Swimming is good and the sauna is good for my body”

“I like learning how to swim and it is good for my body;

“Exercise in the pool is fun. It was good to start in the small pool (portable pool) then go to the bigger pool [at Papatoetoe]”

Health and Wellbeing

Both ladies agreed that they now do more exercise since doing their initial swimming in the portable pool and feel healthier for it.

Comments from the ladies included:

“I am now doing more exercise”

“Before I couldn’t put my head under, hard to breathe, now I feel more healthy being able to swim”

“I relax and it is fun being with other ladies”

“[The ladies swimming] is safe and fun”

Water Safety

For these women it was very clear that participating in the swimming programmes had increased their own confidence in the water and had increased awareness of water safety for their families when around water.

One woman said that she had enrolled her children in swimming lessons after learning herself.

“After swimming with the small pool (portable pool) and learning how to swim, enrolled children in swimming lessons”

Other comments included:

“I felt much better [not scared] when we went on the beach trip”

“Before [doing swimming I was] very scared with my children at the beach”

“Children swim at the pools and I watch them”

Community Involvement

The women had only recently started attending the Papatoetoe Ladies Only Swimming Night at the time of the focus group interview. They did not know if there was anyone to talk to or ask questions about the programme. They were happy with social interaction between the women and commented that everyone was friendly:

“Yes, all ladies talk to each other and are friendly”

Programme Delivery

Both women appeared very happy with all aspects of the programme at Papatoetoe. They appreciated the opportunity to first learn swimming in a smaller pool with a small group of ladies before attending the ‘big’ programme. Cost was not an issue for the ladies in the focus group; their suggestions for improvement were swimming lessons and longer time duration.

“Papatoetoe – happy with everything, cost \$12 for 6 sessions good, [time] too short, how to learn swimming”

“Portable Pool- everything! Easy to learn and safe, happy with teachers, good, long sessions, needs next level after learning basics”

D. Focus Group 4 Mt. Roskill Pool Committee, September 2012

Two female, One male pool committee members.

Background:

All committee members interviewed had been involved with the swimming programme since its inception eight years ago.

Physical Activity Awareness and Behaviour

The committee members agreed that the programme has been promoted through a variety of ways within the community, such as local newsletter and papers, ethnic media and by word of mouth. More recently the programme has been promoted by local G.Ps, Green Prescription programme and faith-based organisations.

The volunteer coordinator was mentioned as being instrumental in promoting the programme and continuing advocating for women's only physical activity options.

All members have recognised a shift in participants attitudes towards physical activity, and that women are now doing other physical activity, such as zumba classes and walking groups during the summer.

“There is much more awareness is the community of health and wellbeing and importance of exercise among older and younger women. Women have been walking in the park over the summer, which has not happened previously”

Mt. Roskill pool committee member

Nutrition and healthy lifestyles

The committee members agreed that bringing other elements of health promotion into the swimming programme was beneficial for the participants and it was important to promote a holistic healthy lifestyle.

They reported a flow on effect from the participants being able to access nutrition information at the swimming programme to influencing family at home, for example families are now eating healthier and planting vegetables.

The weekly 'weigh-in' at the pool was recognised as a motivating factor for the women to be active.

“The whole programme encourages women to be more active, not just going to swimming”

Mt. Roskill pool committee member

Mental health and wellbeing

All members agreed that the programme is helping reduce isolation for participants. The programme is recognised as a safe option for the women to relax and socialise. It was mentioned that particularly for the older women, it is their weekly outing and they look forward to seeing their friends.

It was mentioned that some participants do tend to stick with their own social groups and do not mix with other groups very much.

“Mental health issues are particular for refugee women but the swimming programme helps overcome social interaction and builds positive mental health”

Mt. Roskill pool committee member

Water safety and swimming skills

It was recognised that for many women, the first time attending the swimming programme was the first time they had ever seen water, let alone been in water at all. It was felt that the swimming lessons are working well, and it is assisting the women in being more confident in the water. This has also had a flow on effect for families, as the participants will go to the beach in the summer time and are more confident to look after their children around water.

Community capacity and cohesion

The committee noticed that the community leaders training provided by programmer partners (ARPHS and Procure) have been integral in improving the confidence of the participants and increasing the capacity within the community. Opportunities to become involved are open for everyone, but it was acknowledged that new members may not be aware of these opportunities.

A comment was that one thing stopping the programme to be completely community led is that people may not be so keen to volunteer if there is no monetary incentive

“If it was a full community led programme it would be fantastic but because money is involved it won’t happen. Volunteers are needed to lead but everyone expects money”

Mt. Roskill pool committee member

It was recognised that setting up a programme steering group at the beginning with a combination of community and stakeholders has been part of the success of the

programme. It has helped to set rules and allowed the programme to be tailored to the needs of the community. It has also helped to create expectations and respect for the different communities attending the programme.

“Advisory group set up at the beginning with the community and stakeholders has helped to set rules and establish respect for cultural differences”

Mt. Roskill pool committee member

Programme development

The committee members acknowledged that participants now have better understanding for each other, and respect of the rules and regulations for the facility staff.

Collaboration of community, stakeholders and funders has made the programme so successful and the funding support from Procure.

Health outcomes for participants are huge, not just in physical activity but holistic health. The programme has become sustainable!

Young women's swimming programme has been built on this model.

One area for development mentioned was having more group activity available and other gym options open to the participants such as the weights room.

Staff Surveys

A. Mt. Roskill Staff Surveys (Sunday & Saturday programme)

2x Swimming Instructors

3x Lifeguards

Receptionist

Gym Coordinator

Water Safety Instructor (not Cameron Pool Staff)

Administration

The majority of staff were satisfied with the behaviour of the women at upon entry (4/6). There was a mixed response about participants following pool rules, with half of the staff reporting that they were not satisfied with participant's behaviour towards pool rules. Again, half of the staff surveyed were satisfied with participants responding to lifeguards and staff, with about half not agreeing with this. All staff were satisfied with the behaviour of participant's interacting with one another.

There were many comments from staff about the need for participants to follow rules and have respect for facility staff, and introducing consequences for not following rules. Suggestions from staff for improved included having pool rules translated into different languages for the participants and having more activities available, including aerobics/gym classes and the weights room.

Practical Activities

What do you think is the benefit of offering your services to the participants?

All staff agreed that the programme is beneficial for the participants and is encouraging physical activity within the community. The staff recognised that having fun and socialising is helping to keep the women motivated to exercise.

In regards to swimming skills, it was noted that the programme is increasing confidence in the water and raising awareness of water safety.

To what extent are your services meeting the needs of the participants?

In general, the staff thought that the programme was meeting the needs of the participants fairly well, and that they were providing a friendly, clean, private facility to exercise.

"I believe it is meeting the needs as participants have lost weight, and have gained an understanding of how important exercise is"

Cameron Pool Staff Member

Some staff members thought that the gym could offer a lot more.

Do you think that the activities increase physical activity, confidence and ability of the participants?

General consensus was that the staff thought the activities offered increased physical activity levels and confidence of the participants. Staff reported that they thought the activities offered are increasing the participants confidence in and around the water, and the swimming lessons definitely helped with this.

One staff member commented that they did not think that activity levels were being increased, as there was the perception that many women just spend time sitting in the spa, and that by having more classes available, it would encourage these ladies to exercise more.

“Activity not so much because a lot of the women just sit around in the spa. More organised activity/classes would be better”

Cameron Pool Staff Member

All staff believed that the activities on offer were well matched to the audience attending and that people do not seem to any trouble participating in the activities being offered, and were well received by the participants.

When asked about targeting delivery to the needs of the participants, there was a very mixed response, with two comments about *‘Maintaining discipline’* mentioned. One staff member commented that she thought her service could be improved by regularly highlighting health benefits to the participants. Another staff member commented that she delivers to the individual’s goals and needs. All pool facility staff with the exception of one staff member said that they do not do anything differently from their mainstream classes/groups.

The swimming instructor commented that her mainstream swimming classes are more organised and better structured. The water safety instructor made mention of tailoring teaching methods to best suit each community and skill level and catering to cultural differences.

Programme improvement

Most staff commented that they would like to see more gym or aerobic classes offered for the participants, including making the weights room available, not just focussing on the pool.

Re-introduction of water safety was suggested, with a train-the-trainers model so the women can teach water safety themselves without relying on external instructors that cannot come regularly.

It was suggested that the participants need to be asked what they would like to and be involved in suggested activities and improvements that they would like to see, not just people thinking for them.

Nutrition – not answered.

Nutrition component was provided by Procare and ARPHS in 2011.

B. Papatoetoe Staff Surveys

- 1x Lifeguard
- 1x Zumba instructor
- 1x Receptionist
- 1x Nutrition workshop facilitator
- 1x Water Safety instructor

Administration

Majority of staff (3/4) agreed that they were satisfied with the overall behaviour of women attending Ladies Night programme.

Improvements suggested were around having translated guidelines for pool rules (especially around swimming attire) to reduce the communication barrier.

Practical Activities

What do you think is the benefit of offering your services to the participants?

Papatoetoe staff identified a range of benefits for participants, including physical activity and wider health benefits including learning to swim, water confidence, fitness, exercise suited to all fitness levels and socialising.

Staff observed that by having a female only environment, participants may be more comfortable to do exercise, regardless of ethnic or religious background.

“Gets them active and being able to do it among other women may make them a bit more comfortable:

Papatoetoe Staff Member

To what extent are your services meeting the needs of the participants?

Most staff members thought that the programme was meeting the needs of the participants, the aqua zumba in particular was very popular with the women and that they appear to enjoy the class very much. Some staff said that they would like to see more activities offered. Water safety was good to have as part of the programme but as the instructor only attends on a monthly basis, it was felt swimming lessons or something similar needed to be offered on a regular basis to make progress and increase skills.

Do you think that the activities increase physical activity, confidence and ability of the participants?

All staff surveyed agreed that the activities currently being offered are increasing the physical activity, confidence and ability of programme participants.

Staff reported that by having a variety of aquatic activities, it is encouraging water familiarity and confidence. One staff member commented that by having group classes, it appears that women are motivated to exercise because they can do it together, in a fun, relaxed and social atmosphere.

“It is great to see the ladies having fun whilst exercising!”

Papatoetoe Staff Member

How well matched is your activity to the participants?

This question was mainly relevant to the aqua zumba instructor and water safety instructor as those are the only ‘formal’ activities offered at Ladies Only Night.

The aqua zumba instructor mentioned that she specifically tailors her class for this particular audience and has done lots of training to ensure a successful class, for example:

“My playlist respects the needs of the ladies in its choice of music and exercise routines”

Aqua Zumba Instructor

One staff member pointed out the importance of socialising and relaxing for this particular audience and being able to be more flexible with time compared to other, more formal groups and the need to be more tolerant and patient with the ladies.

“Timing allocation to teach? They are encouraged by socialising and relaxing. It is a necessity”

Papatoetoe Staff member

English language skills were cited as a barrier to communication, but a suggestion that demonstration instead of just instruction should be used.

“Patience and tolerance needs to be high; demonstration not just instruction”

Papatoetoe Staff Member

All staff surveyed believed that their services were very well received by participants. Staff thought that the consistent high attendance each week is reflective of how popular the programme is within the community and it is a positive thing. Staff commented that regular attendees were friendly and asked questions to the lifeguard and instructors. The staff mentioned that Parul Dube from Counties Manukau Active has been instrumental in breaking the barriers between participants and staff, and between different groups attending the programme.

Programme improvement

Staff thought that the Ladies Only Swimming Night could be improved with having more options available each week or on a fortnightly basis, not just water based classes or activities. One comment was that instructors need to be skilled and passionate to motivate the women attending and make it fun.

Activity suggestions put forward included: *swimming lessons, water safety, fitness classes, zumba.*

The water safety instructor commented that she would like to see water safety or swimming lessons more regular and sustainable for the programme, with perhaps the option of training up women from the community that could help other women with basic skills.

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SECTION 5: DISCUSSION & CONCLUSION

Discussion

It is evident from this evaluation that the swimming programmes are meeting the physical health, mental health and social needs of each of the respective target audiences.

One programme model was used to develop all the programmes therefore similar aims and objectives are seen in each of the programmes. These aims and objectives focus on improving the health and wellbeing of new migrant and refugee communities through culturally appropriate physical activity programmes. The programmes were tailored to meet the needs of the different communities and this resulted in slight difference between the programmes and this is discussed further later in this section.

The swimming programmes appear popular with the communities attending. The top three reasons for attending the programme and benefits participants gain from attending the programme are the same: *improved health and wellbeing, fitness and exercise, and swimming*. Reasons participants continue to attend include: *swimming, for fun and enjoyment and improved fitness*. In addition, 96% of respondents agreed the physical activity is an important part of a healthy lifestyle, whilst 86% agreed that their health and wellbeing has improved by participating in the swimming programme.

In regards to the targeted populations, the largest ethnic groups the survey captured were Somali (32%), Afghani (19%) and Fiji Indian/Indian (15%). When broken down into each programme, there were slight differences in ethnicity of participants which may be reflective of the area the swimming programmes are being held, for example Papatoetoe Ladies Only Night is attracting participants from Cambodia, Russia and Turkey, whereas Mt. Roskill has a higher number of African women attending. The Burundi swimming project was only for that particular community and they did not require separate female and male swimming sessions.

The activities and facilities available to each programme also slightly differed, and there was no statistical significance between venues/programmes and improvements in health, physical activity and swimming ability. However, the qualitative data suggests that having a swimming instructor present is more likely to increase swimming ability, water safety skills and water confidence of participants, compared to those programmes that do not have a dedicated swimming instructor present. The

Burundi Community swimming project was only for a short period of time (10 sessions) and when analysing the project results, it is clear to see that swimming ability and confidence among participants was not as high as the other programmes, and may require additional swimming instruction to increase skill ability. Despite these results with swimming ability and water safety, learning swimming and water safety skills is only mentioned as a goal for the three smallest swimming programmes – *Young Women’s Swimming Programme, Burundi Community Swimming Project, REAF Ladies Swimming Project.*

Activities and facilities offered by each of the programmes were outlined at the beginning of the report, and major differences between programmes are in Table 7: Comparisons between swimming programmes.

It appears that the programmes with community leadership and co-ordination may have more community ‘ownership’ of the programme and are more inclined to become involved in the running of it, for example at Mt. Roskill Women’s Swimming Programme and the Burundi Community Swimming Project. Satisfaction with staff and facilities of the swimming programmes were consistently high, with over 70% of respondents agreeing. Cost was scored the lowest; however 67% still appeared happy with the cost of attending the swimming programmes. This is important to note, as current funding for Mt. Roskill Women’s and Papatoetoe Ladies Night is being provided by Procure, which is subsidising approximately 50% of the cost to attend. The Young Women’s programme at the time of the evaluation was being provided from the Auckland Council and is also subsidised by approximately 50%. The Burundi Community had funding initially from Refugees as Survivors, which also allowed subsidised swimming for the community. The REAF Ladies project was fully funded for the six sessions. It is important to note for the future that the availability of funding may determine the sustainability of the swimming programmes should the attendance rates decrease. As mentioned, currently Mt. Roskill Women’s and Papatoetoe Ladies Night have consistently high numbers of attendance each week.

Table 7: Comparisons between swimming programmes

	Mt Roskill Women's Swimming Programme	Papatoetoe Ladies Only Night	Young Women's Swimming Programme	Burundi Community Swimming Project	REAF Ladies Swimming sessions
Target audience	Women 18 years and older only	Women of all ages, including children	Age 12-17 years old	Mixed male/female, all ages	Women at REAF programme and their children
Staffing	1x Receptionist 2x Lifeguards 1x gym instructor 1x swimming instructor Childcare minders Programme coordinator	1x receptionist 2x lifeguards 1x aqua zumba instructor 1x water safety instructor (monthly) Programme Advisor	1x Receptionist 2x Lifeguards 1x gym instructor 1x swimming instructor	2x swimming instructors	2x swimming instructors
Facilities	Spa and Sauna facilities	Spa and Sauna facilities	No Spa and Sauna facilities	All facilities open – during normal public swimming time	Portable pool only
Physical activity options	Aqua Aerobics Gym machines (cardio only) Lane swimming	Aqua Zumba Lane Swimming Learners Pool	Swimming Lanes Learners pool Gym open for girls 16yrs +	NA	NA
Health Promotion	Nutrition workshops 2011	Nutrition workshops series 2011	NA	HEHL Nutrition programme (external to swimming project)	NA
Funding	ProCare	ProCare	Auckland Council Umma Trust	Refugees as Survivors	WaterSafe Auckland
Community Involvement	Pool committee and community co-ordinator	No pool committee or community co-ordinator	Programme Coordinator	Community leaders organised	NA
Cultural considerations	Closure during Ramadan	No closure during Ramadan	Closure during Ramadan	NA	NA
Other	Regular partners/stakeholders meetings	Water safety instruction monthly.	Water Safety training to youth leaders to deliver	NA	On-going water safety presentations

Limitations

Several limitations impact on this report. This report is based on a sample of people attending five specific swimming programmes targeted to migrant and refugee communities across Auckland.

The survey was conducted over two nights at each programme in July 2012. The survey did not reach all participants enrolled in programme or those who had left the programme. It is important to note that the evaluation took place in the winter, before Ramadan, and attendance rates tend to decrease during the winter months compared to during the summer (refer to Figure 4 and Figure 16).

The Ramadan period has a history of the lowest attendance rate of the swimming programme throughout the year. During this period participants of Muslim faith are less likely to attend the programme. Therefore results are only indicative of those who filled out the surveys not the programme participants as a collective.

In addition, new participants to the programme who were surveyed may not capture all interventions that have been undertaken in programmes, contributing to a negative response to some questions, for example nutrition workshops.

Many of the respondents speak English as a second language and therefore a facilitator translated the survey for some participants. The validation of this translation was not undertaken and the facilitator could have influenced the result of the survey as they are a key stakeholder in the programme. One swimming programme (Papatoetoe) did not have access to a facilitator to translate the surveys and therefore had a low response rate for the survey. This could have contributed to the high number of open-ended questions with a 'no response' answer.

This report was authored by the key stakeholders of the swimming programmes and therefore a potential for bias is present.

This study relied on self-reported behaviours, knowledge and ability, so may not accurately report on actual competencies and health status of respondents.

Nevertheless, this evaluation report does provide new and encouraging information for improving the health and wellbeing of new migrant and refugee communities, particularly women, through culturally appropriate holistic health promotion programmes.

Recommendations

Future development suggestions for existing programmes:

- Continuation of Women's Only Swimming Programmes is recommended
- In the future, more emphasis needs to be placed on communicating health messages to participants to support the exercise component of the programme
- Participants highlighted the need of greater variety of activities at the swimming programmes for example, zumba and gym facilities, weights etc.
- Future surveys should also investigate reasons for discontinued attendance of women and non-attendance by women in local communities. This would provide insight into limitations and barriers of these programmes.
- Consider including a nutrition component to increase health outcomes for a holistic health promotion initiative
- Continue capacity building model at Mt. Roskill and introduce into other programmes: training of community leaders to deliver components e.g. water safety, nutrition
- Further cultural awareness and ESOL support should be offered to staff to enable them to adapt their methods to work more comfortably with new migrant, refugee and ESOL communities
- Consult participants about creating a 'participant pool group' to inform and guide programme development to ensure it is appropriate for the target audience attending and improve communication between participants, staff and stakeholders
- Swimming lessons need to be offered at all programmes, as many of the women have had no prior experience in the water
- Water safety knowledge and skills should be included in programme aims given the low or nil previous water experience of participants
- Translated pool guidelines to improve communication between staff and participants and maintain appropriate behaviour within the facilities.
- Utilise this captured audience for promoting other relevant health issues, e.g. breast and cervical screening

- Active promotion/marketing of the Swimming Programmes to increase numbers and continue reach into the community.
- Encourage car-pooling among the community to reduce transport barriers in attending the Swimming Programmes
- Investigate options for learning to swim for men from new migrant and refugee communities.

Recommendations for new/future programmes

- Communities looking at introducing female only exercise programmes should follow the models outlined in this report due to their success.
- Investigation into other forms of women's only programmes which can be developed should be undertaken to broaden the access of physical activity to migrant women.
- Consider a having a variety of activities within the programme for participants, for example: zumba classes and gym facilities
- An ongoing nutrition programme should be offered alongside the physical activity programme to promote a holistic healthy lifestyle
- Have a water safety component in addition to swimming lessons
- Consider creating a 'programme committee' consisting of participants and staff to inform programme development, create expectations and positive communication between staff and participants.
- Cultural awareness training should be provided to programme staff and instructors before working with new migrants and refugee communities
- Translated pool guidelines developed to improve communication and address appropriate behaviour of participants
- Consider a capacity building model like train-the-trainers to create capacity and empowerment within the community
- Include other health promotion messages relevant to the audience e.g. women's health issues
- Work with community leaders and consult the community to develop an adult learn to swim programme which can be tailored to their specific needs, for example some communities will require separate gender swimming session whilst others may not (the Burundi community did not require this)

- Consider accessibility and transport strategies when planning and developing programmes for these communities
- Widely promote and advertise the programme
- Consider 'bring a friend for free' or trial nights to encourage people to increase numbers at the beginning
- Keep it fun!

Conclusion

From these results, it is clear that the new migrant swimming initiatives in Auckland, are producing numerous benefits for participants, including improved health, increased physical activity and learning swimming skills. By providing culturally appropriate services, particularly for women, this gives new migrant communities an opportunity to learn vital skills to keep themselves and families safe when around water, whilst keeping fit and healthy in a fun, social and supportive environment. It is clear that these swimming programmes are continuing to meet the health and social needs of the communities attending.

The authors acknowledge that there are some limitations to this study; however this report does provide some new and encouraging insights about the impact of targeted health promotion programmes for new migrants and refugee communities in Auckland

This is a successful health promotion model that can be replicated for new migrant communities in other cities.

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Appendix A – Participant Survey

Evaluation of Community Swimming Programme

Papatoetoe Mt Roskill (women's) REAF Burundi Young Women's

We are evaluating the swimming programme to see if it is benefiting the community and to see where improvements can be made. Please help us by completing this questionnaire.

How long have you been in the programme?

How did you find out about the programme?

What suburb do you travel from?

Age bracket (please tick)

Under 16 17 - 24 25 - 44 44-64 65 plus

Ethnicity

Are you registered with a GP yes no Don't Know?

If yes

Name

Address/Suburb

Facilities used where applicable (please tick)

- | | |
|---|--|
| <input type="checkbox"/> swimming lanes | <input type="checkbox"/> gym |
| <input type="checkbox"/> swimming lessons | <input type="checkbox"/> aqua exercise/zumba |
| <input type="checkbox"/> spa and sauna | <input type="checkbox"/> nutrition workshops |

Why do you attend the programme?

What benefits do you get from attending the programme?

What keeps you coming back?

Please answer the questions on the next few pages

Use the scale to circle your answer

Example

Strongly Disagree	Disagree	No change	Agree	Strongly Agree

Health & Wellbeing

I believe that physical activity is an important part of a healthy lifestyle



I do 30mins or more activity most days



My physical activity has increased as a result of participating in the programme?



I know more about health & wellbeing



My health and wellbeing has improved by participating in the programme?



This programme has influenced my food choices?



If so how?

This programme has increased my motivation to visit my doctor/nurse or local community health centre more regularly?



I have made lifestyle changes since joining the programme?



I am more aware of health messages and other health programmes (e.g. breast, cervical or CVD screening)



What prevents you from making changes in your lifestyle?

Water safety

I am more awareness of water safety as a result of the programme?



The programme has increased my swimming skills?



I feel more confident around water?



I feel more confident looking after children around water?



I can swim the length of the pool?



I can float for up to 1 minute?



Community Involvement

The community is actively involved in the running of the programme



There are opportunities for the community to be involved in the development of the programme



I enjoy meeting people from other communities through the programme



I have better understanding of people from other communities through my interactions at the programme



I tend to stick with my own community at the programme



Programme Roll Out

I am aware of the pool rules



I am aware of the type of clothes you can wear in the pool



What are these?

	Strongly Disagree	Disagree	No change	Agree	Strongly Agree
Swim teachers					
Lifeguards					
Receptionist					
Aqua exercise/zumba teacher					
Co-ordinator					
Volunteers					
Other instructors (please specify)					

I find the staff friendly and helpful

	Strongly Disagree	Disagree	No change	Agree	Strongly Agree
Equipment provision and condition					
Pool water quality					
Toilet & shower areas					
kitchen area					
Outside of the building					
Overall cleanliness of the facility					
Car-parking					
Location					
Access					
Cost					

I am satisfied with the facilities

What is working well?

What could be improved and how?

Thank you for your input!

Appendix 3: Papatoetoe Participant Information



EVALUATION

This is your chance to have your say about the swimming programme!

We are gathering information about The Female Only Swimming Night to see how it is benefiting you and it could be made better for you.

This information will be collected through surveys and group feedback and will be used in an evaluation report to guide programme improvement.

We would like your feedback on how the program has:

Benefited your health and wellbeing

Improved your swimming and water safety skills

Feedback on the facility and the staff

Any improvements for the programme

Surveys

We kindly ask that all participants fill in the survey that has been emailed out so that everyone can have a say about the programme. Everyone who completes the survey will go into the draw to win a prize!

Group Feedback

Group interviews will also be used to get more detailed feedback about the programme. If you would like to be part of a group interview, please leave your name at Reception

Friday 13th July 6.30-7pm (before swimming time)

Friday 20th July 6.30-7pm (before swimming time)

All information from the surveys and groups will be kept confidential and anonymous.

The final report may be shared with other agencies or published to help guide future work with your communities. ***Thank you for your time and feedback!***



Appendix 4 – Participant Focus Group Questions

Evaluation of Community Swimming Programme

Papatoetoe Mt Roskill (women's) REAF Burundi Young Women's

Focus Group Questions

1. Demographics of Participants

- a. How many in the focus group:
- b. How long have you (the participants) been attending the programme?
- c. How did you find out about the programme?
- d. What suburbs do you travel from?
- e. Age of participants (indicate number in each age group)

Under 16	17 - 24	25 - 44	44-64	65 plus
----------	---------	---------	-------	---------
- f. Ethnicity of participants:
- g. Facilities used by the participants where applicable (please tick)

<input type="checkbox"/> swimming lanes	<input type="checkbox"/> gym
<input type="checkbox"/> swimming lessons	<input type="checkbox"/> aqua exercise/zumba
<input type="checkbox"/> spa and sauna	<input type="checkbox"/> nutrition workshops
- h. Why do you attend the programme?
- i. What benefits do you get from attending the programme?
- j. What keeps you coming back

1. Health & Wellbeing

- a. Have you made lifestyle changes since joining the programme?
- Physical Activity
 - Healthy Eating
 - Mental/Social Wellbeing?
- b. Has this programme has increased your motivation to visit your doctor/nurse or local community health centre more regularly?

2. Water safety

- a. Has this programme has increased your swimming skills?
- b. Do you feel more confident in the water as a result of this programme?
- c. Are you more aware of being safe around water with my family as a result of this programme?

3. Community Involvement

- a. Who do you think runs the swimming programme?
- b. Do you think that the community has enough input into running the programme and are there opportunities for you and other women to provide input into the programme?
- c. Do you think that there is much social interaction between the different groups/communities attending the swimming programme?

4. Programme Delivery

- a. Are you satisfied with:
- Administration
 - Facility Staff
 - Facilities
- b. What is working well?
- c. What could be improved and how?

Appendix 5 - Key Service Provider Survey

Evaluation of Community Swimming Programme Staff

Papatoetoe

Mt Roskill (women's)

REAF Burundi

Young Women's

Key Service Provider Survey

We are evaluating the swimming programme to see if it is benefiting the community and to see where improvements can be made. As a service provider your experience and comments are very valuable. Please help us by completing this questionnaire.

Which of the following do you fit into?

Swimming Instructor

Aqua aerobics/Zumba instructor

Lifeguard

Receptionist

Nutrition workshop facilitator

Water Safety

Child Carer

1. Administration

Are you satisfied with the behaviour of the women when:

Upon entry/at reception		Y	N
Interacting with the other participants	Y	N	
Following the pool rules		Y	N
Responding to the lifeguards and other pool staff?		Y	N

How could things be improved?

2. Practical Activities

- a) What do you think is the benefit of offering your services to the participants?
- b) To what extent are your services meeting the needs of the participants?
- c) Do you think that the activities increase physical activity, confidence and ability of the participants?
- d) How well matched is your activity to the participants?
- e) How well received are your services by the participants?
- f) How do you think your delivery is targeted to the needs of the participants?
- g) Do you do anything differently from your mainstream classes?
- h) How do you think things could be improved for the programme participants?

3. Nutrition Component

- a) What was the extent of participation from the target audience?
- b) How did the topics/workshops respond to the needs of the women?
- c) To what extent was the information provided relevant and appropriate for the participants?
- d) What would you have done differently? (If anything?)
- e) What was the value of attending these workshops for the women?
- f) How have the participants improved their knowledge and awareness of food choices for them and their family?
- g) Do you know if any of the participants have implemented their new knowledge at home? – behaviour change

Any further comments to add about your experience working with the women as part of this swimming programme?

Thank you for your time!

Appendix 5- Evaluation Questions for Committees/Co-ordinators

Theme/Questions	Committee/ coordinators
<p>Background</p> <p>1) How long have you been involved in the program? 2) What suburb do you travel from?</p>	
<p>Physical activity (PA) Awareness (importance of physical activity) and Behaviour (an increase in physical activity and benefits recognised)</p> <p>1) How do you promote PA to program participants 2) Have you organised any other PA programs for the participants (e.g. walking/ gardening groups) If yes, can you please give details. 3) Are you role modelling positive PA behaviours to program participants? If yes, please explain how? 4) Have you seen a shift in attitude with re: to PA amongst program participants? If yes, please explain in more detail. 5) Have you experienced any positive changes with re: to your health after having joined the program?</p>	<p>Role modelling & anecdotal feedback</p> <p>Y Y Y Y</p>
<p>Nutrition and healthy lifestyles Awareness</p> <p>1) How do you promote healthier eating to program participants?</p> <p>Behaviour</p> <p>2) Have you seen any change in eating behaviour outside the programme (e.g. social gatherings)? 3) Have you seen any changes in eating behaviour during the months of fasting? 4) How do you promote annual health checks and screening to programme participants? 5) What lifestyle changes have you made since joining the programme? 6) What prevents you and your family from making changes in your lifestyle?</p>	<p>Role modelling & anecdotal feedback</p> <p>Y Y Y Y</p>
<p>Mental health and wellbeing</p> <p>1) Do you think the programme is achieving its goals of reducing social isolation?</p>	
<p>Water Safety and Swimming Skills Knowledge</p> <p>1) Has your awareness of water safety increased as a result of the programme?</p> <p>Skills & behaviour</p> <p>2) Are you noticing trained volunteers (in water safety) helping newcomers in the facility and outside the program (e.g. beach/ lake/ kayaking etc.)? 3) Are you promoting the volunteer services to newcomers and existing participants? 4) Have you noticed an uptake in swimming lessons by participants? 5) Do you feel participants are more confident with their children when in the water?</p>	<p>Y</p>
<p>Community capacity and cohesion Capacity</p> <p>1. What skills and knowledge have you gained from the programme 2. How has participation helped your community? 3. Has the program enhanced your leadership skills? 4. Have you had opportunities to develop person skills? If yes, which? 5. The community is actively involved in the running of the programme (Agree disagree) 6. There are opportunities for the community to be involved in the development of the programme</p> <p>Cohesion</p> <p>7. Have you observed interaction between different communities? 8. Has the program enhanced your understanding of other communities?</p>	<p>Y Y Y Y Y Y Y Y</p>
<p>Process Evaluation</p> <p>What are the major changes you have seen since your involvement? What could work differently and how?</p>	<p>Y Y</p>