BABY AND TODDLER SWIMMING TEACHING POLICY STATEMENT

ASCTA and Swim Australia Support

Teaching Methodology

The introduction of babies and pre-schoolers to water must be very careful and gentle in order to prevent long-term fear of water being developed.

- The teaching of babies and pre-school children should only be undertaken by holders of a suitable specialist baby and pre-school teaching certificate such as the Swim Australia Teacher of Babies and Toddlers qualification
- Teachers should maintain competency
- Teachers should hold a recognized CPR qualification
- Teachers must ensure they are working within the guidelines set out in the ASCTA/Swim Australia Code of Practice which includes safeguarding, code of ethics and professional conduct
- The maximum teaching ratio is 12 adult – child pairs to 1 baby and pre-school teacher. A risk assessment may be required to calculate how many pairs one teacher can safely teach during a lesson. Pool space, age and abilities of the pairs should also be taken into consideration as numbers may need to be reduced in order to deliver safe effective lessons.

Submersions

Submersion is likely to occur as part of aquatic activities when adults with babies and pre-schoolers move together in the water. When submersions are carefully introduced by specially trained teachers, they can be beneficial towards creating the best foundations for swimming, as well as helping develop water confidence and water safety skills.

Submersion is only one part of introducing babies and pre-schoolers to the aquatic environment. It should never be the dominant focus as it can be counterproductive to both the aims and objectives of adults and babies enjoying being in water together. An excessive number of submersions can be averse to setting good foundations in swimming.

The policy of ASCTA/Swim Australia relates to intentional submersion as a practice that takes place as part of the communication between baby, accompanying adult and the teacher in a structured session.

Submersion is not something done to a baby but with a baby. Any submersion practice that does not take into account the readiness of the baby as demonstrated by 'baby cues', irrespective of the consent of the accompanying adult, amounts to a forced submersion and is contrary to best practice.

This policy does not include accidental submersions which may happen during a session; these submersions should be avoided as much as possible. Teachers should make sure adults are informed of correct holds and observe all adult and baby pairs carefully.

ASCTA/Swim Australia places the willingness and acceptance of the baby or pre-schooler at the forefront of its submersion policy. Submersion practices which are carried out on a baby or pre-schooler without their obvious willingness is liken to enforced behaviour and is not ethically acceptable. More over these practices can compromise healthy brain development of babies.
Forced submersion is contrary to best practice; it must not be carried out.

ASCTA/Swim Australia recognizes 3 classes of acceptable submerisions:

Intentional submersion
Submisions intended as part of a structured session, but only carried out as baby or pre-schooler led, after accompanying adults have been briefed by the teacher in the observation of positive cues.

Pre-schooler initiated submersion
Activities led by the teacher such as jumping in, blowing bubbles, jumping from a raft may lead to submersions initiated by the toddler or pre-schooler.

Accidental submersion
The baby/pre-schooler falls in or is submerged inadvertently due to loss of balance during shared activities with the accompanying adult. Teachers are specially trained to manage accidental submersions to avoid distress being caused to either the baby/pre-schooler or accompanying adult.

Guidelines for Best Practice
• Intentional submersion should only take place when the baby/pre-schooler shows signs that he/she is ready, and only then as part of a fun exercise. If carried out at an inappropriate time, submersion may lead to distress and may result in a baby/pre-schooler experiencing long term fear of water.
• Submersion practices should be progressive and should be stopped immediately if the baby/pre-schooler shows any signs of distress or unhappiness.
• Submersions should only take place with the active involvement of the baby/pre-schooler; it should not be attempted when the baby/pre-schooler is looking away or is unaware of what is about to happen.

Frequency of Intentional Submersions
The frequency, depth and duration of submersions should be controlled within the guidelines set out below:
• The frequency of intentional submersions should be based on the baby/pre-schoolers age, physical ability and experience. It will also depend upon the swimming teacher’s style and technique of teaching.
• The number of intentional submersions per session should be built up progressively at the baby/pre-schoolers pace.

Depth of Submersion
The depth of submersion is dependent upon age, physical ability and experience of the baby.

ASCTA/Swim Australia recommend that:
• No baby under 12 months should be submerged to a depth greater than 1 metre, this is a maximum depth. Surface swims with face submerged is recommend for babies with a gradual build up to deeper as toddlers develop.
• Toddlers/pre-schoolers over 12 months can progressively build up to a maximum submersion depth of 1 metre.

Duration of Submersion
• Babies under 12 months can progressively build up to a submersion time of 3 seconds
• Toddlers/pre-schoolers over 12 months can progressively build up to a submersion time of 10 seconds
• Teachers need to be aware and vigilant as to when a toddler/pre-schoolers need to come up for air.

Explanatory Notes
The principal concern surrounding the number of submersions a baby undertakes is related to water intoxication (hyponatremia). The diving reflex stops water entering the lungs of babies under 12 months.

The volume of water absorbed will modify the salt concentration in babies’ blood, which may cause ‘water intoxication’. There has not been significant or recent research on this subject other than that carried out by Karl G Rosen, MD, PhD, published by the Swedish Paediatric Association in collaboration with the Swedish Board of Health and Welfare together with the Swedish Swimming Association. His research has shown that a baby needs to drink at least 10% of its body weight for the risk of water intoxication to occur. In a study of 15 babies below the age of 6 months, undertaking a 20 minute swimming session consisting of between 5 and 10 submersions, 7 of the babies increased their body weight by a maximum of 1.6%.

Signs and symptoms of Hyponatremia:
• Nausea and vomiting
• Loss of energy
• Frequent urination
• Unconsciousness.
Seek medical attention as soon as possible.

ASCTA/Swim Australia is a member of the International Federation of Swim Teacher Associations (IFSTA) and has referenced other IFSTA members position statements in the development of this document.