Pedagogical resources
AQUATIC ACTIVITIES

CARE IN THE WATER: THE WELL-BEING OF STUDENTS AND STAFF IN AQUATIC PROGRAMMES

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CARE IN THE WATER: THE WELL-BEING OF STUDENTS AND STAFF IN AQUATIC PROGRAMMES

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Aquatic programmes promote people's overall well-being when they are designed with an educational focus, safe practices and a responsible professional approach, with attention to warning signs and teachers' self-care. From this perspective, water becomes a space for learning, care and prevention that requires a conscious and committed approach.

Presentation

Aspect	Description
Document type	Support guide for professional practice in aquatic programmes in swimming pools.
Purpose	To provide a framework that integrates wellbeing, safety and water competence, alongside practical guidance on designing protective environments, identifying warning signs and professional self-care.
Content structure	• The rationale behind holistic wellbeing and the threefold role of aquatic activities. • Learners' well-being as the core of the intervention. • Practical guidance on the detection and management of warning signs in the pool. • The well-being and holistic health of the aquatic professional.
Scope and limitations	This resource does not replace health protocols or the intervention of specialists, but rather complements professional practice from a preventive, educational and responsible perspective.

Introduction

It is estimated that psychological stress affects approximately one billion people worldwide, with this mental health crisis expected to worsen in the coming years (Institute for Health Metrics and Evaluation, 2017). This situation is particularly worrying and has sparked growing interest in innovative, effective approaches to counteract its effects. In this regard, research into the benefits of activities in nature (Rugel et al., 2019; Overbury et al., 2023) stands out, as does the role of physical exercise as a preventive strategy and a means of promoting healthy lifestyles.

The World Health Organisation defines mental health as "a state of well-being in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community" (WHO, 2022). From this perspective, mental health directly influences the way people perceive themselves, feel, think and act, shaping their interpersonal relationships, decision-making, the

way they cope with difficulties and their life plans. In this context, learning to swim or participating in aquatic programmes now takes on a broader and deeper meaning than that traditionally attributed to it. These programmes take place in both natural environments (open-water swimming, surfing or SwimRun) and artificial settings (swimming, water polo, underwater hockey or aquagym) and have significant potential to impact not only lifestyle but also personal well-being.

Aquatic education has evolved from an approach focused exclusively on the technical execution of motor skills or the replication of standardised models towards approaches that adopt a holistic view of the human being. In this new approach, practical experiences should contribute to personal development, being linked to the acquisition of knowledge, skills and meaningful interpersonal relationships. Furthermore, the skills acquired must be transferable to different aquatic contexts in order to fully reap their benefits. Whilst some people choose aquatic programmes to transform their relationship with water, others use them as a self-care strategy aimed at improving their physical, emotional and mental wellbeing.

The characteristics of the holistic approach and the motivation with which the participant engages in an aquatic programme directly influence the planning and content of the intervention, with the learner's active involvement being essential both during the design phase and throughout the programme. This active participation fosters more meaningful experiences that are tailored to individual needs. However, the aquatic environment presents specific risk factors that vary according to the participant's age, lifestyle and the inherent unpredictability of the human condition (decision-making), as well as the possible presence of hypertension, depression or obesity, amongst others. These factors determine the level of risk within the class setting and require constant professional attention.

Continuing to teach classes and prescribe exercises as if the intervention were aimed solely at the physical body involves taking unnecessary risks. To ensure high-quality practice with a clear educational purpose, it is essential that aquatic professionals possess a broad range of knowledge, maintain a mindful attitude towards the people they work with, and plan their interventions in a way that encourages the active involvement of learners.

From a contextual perspective, UNICEF & INJU (2022) propose a model in which optimal development and well-being depend on multiple factors, including the family, community, socio-cultural and political conditions, access to services and the guarantee of rights. These factors can act as both protective and risk factors for mental health. In this model, mental health is closely linked to psychosocial support, understood as the set of internal and external supports aimed at preventing, protecting and promoting psychosocial well-being.

In this regard, this resource aims to raise awareness of the importance of the learner's holistic well-being in aquatic programmes, taking into account the threefold role of aquatic learning as a foundation for encouraging greater commitment and continuity in participation. It also aims to help identify warning signs in classes, taking into account different age groups, and to provide guidance on the most appropriate and responsible interventions. Finally, it proposes a specific reflection on the importance of the well-being and self-care of the aquatic

professional themself.

From this perspective, aquatic programmes are seen as spaces with great potential for promoting well-being, provided they are designed from a holistic perspective that takes into account both the individual participating and the context in which the programme takes place. Understanding this complexity is key to moving towards approaches that not only teach aquatic skills, but also consciously care for, prevent and support participants throughout the learning process.

In the context of pool-based aquatic programmes, discussing holistic wellbeing involves simultaneously considering the physical, emotional, social and cognitive experiences of the participant. This entails addressing not only their sense of safety and competence in the water, but also emotional regulation, the quality of the bonds formed in the class, and the sense of purpose the learner attributes to what they are learning. From this broad perspective, water ceases to be merely a medium for exercise and becomes a privileged setting for care, learning and prevention.

The threefold function of aquatic activities

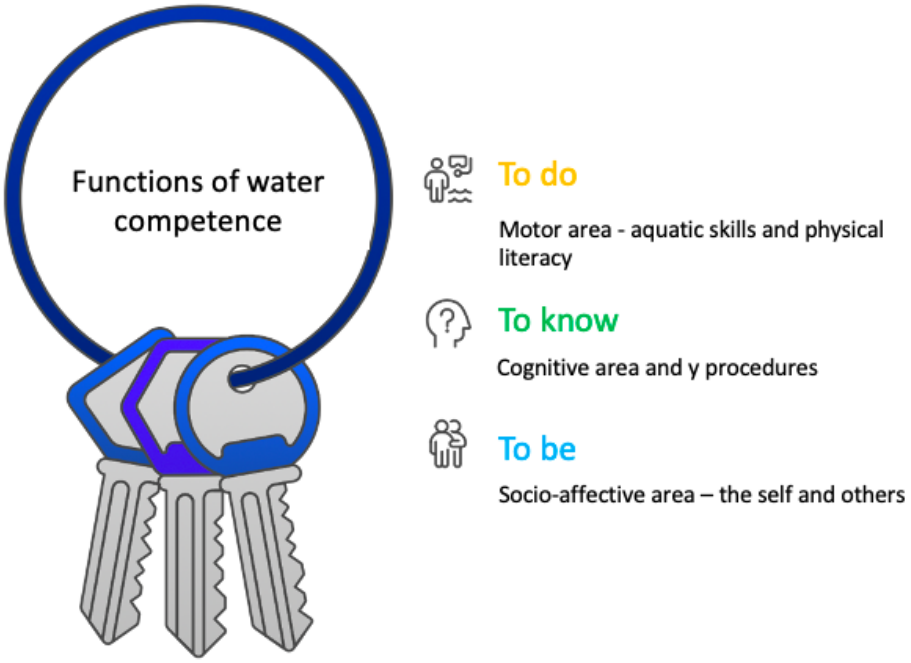
For many years, learning to swim or spending time in the water for its health benefits were sufficient and entirely valid reasons for taking part in aquatic activities. Today, this recommendation has been expanded and places particular emphasis on the connection with water, safety and the prevention of drowning. However, the scope of aquatic programmes focused on well-being extends beyond these initial objectives. Undergoing a process that ranges from learning to developing water competence contributes to a person's overall well-being, promoting not only greater safety and autonomy, but also a more conscious, positive and lasting relationship with the aquatic environment, provided that certain principles are followed, such as the acquisition of specific water safety skills and knowledge (Ortiz et al., 2025).

From this perspective, participation in aquatic programmes is geared towards a broader purpose that encompasses well-being, health, personal development and safety (Fonseca-Pinto & Moreno-Murcia, 2023). Well-being ceases to be a side effect of the activity and becomes an explicit objective of the intervention. This approach requires professionals to possess a broader range of knowledge and skills, as their work, through the aquatic environment, addresses the whole person, simultaneously addressing physical, cognitive, emotional and social dimensions. This gives greater meaning to the practice and reinforces the pedagogical and ethical responsibility associated with the teaching role.

In this regard, the multidimensional model of water competence proposed by Fonseca-Pinto & Moreno-Murcia (2023) is recognised as a coherent framework for the design of aquatic programmes focused on well-being. This model proposes the development of water competence through an integrated process that fulfils three essential and interdependent functions: know-how, linked to the motor domain; knowledge, associated with the cognitive and procedural domains; and knowing how to be, corresponding to the socio-affective

domain. These functions are structured around three fundamental dimensions (aquatic literacy, drowning prevention and environmental education) which, together, contribute to creating safe, meaningful aquatic experiences that promote well-being (Figure 1).

Figure 1. Threefold function of water competence.



From an intervention perspective, the process of planning and structuring the activity should begin with the "why" of learning (understood as the sense of purpose and well-being that the experience can bring to the individual) before moving on to define the "what" to be learnt, that is, the content. In this "why", the interaction of the human being with the aquatic environment in the diversity of existing settings takes on particular relevance; this is not limited to a single sport or a specific context of practice, but is geared towards fostering experiences of safety, enjoyment, autonomy and self-regulation.

This broad and conscious interaction with the aquatic environment requires the integration of knowledge, skills, procedures and attitudes that directly affect the well-being of the participant. These include knowledge related to entering and exiting the water or interpreting environmental conditions; skills and competencies such as floating, moving, swimming or diving in different conditions; procedures for dealing with situations of risk or fatigue; and attitudes of respect towards one's own limits, those of others and those of the environment. All of this contributes to creating a safer, more autonomous and emotionally regulated aquatic experience.

The needs of the students determine the content to be covered, enable priorities to be set, and facilitate the development of coherent teaching sequences and progressions aimed at their short- and long-term well-being. This process must consider the individual characteristics of the participants, the dynamics of the group or class, strategies to actively engage them in

learning, and the specific conditions of the practical context, such as the materials available, the type of space, the duration of the sessions, or the number of pupils per group. In this way, aquatic intervention is configured as an educational space that not only teaches people how to cope in the water, but also cares for, protects and promotes their overall well-being.

From the threefold function to pedagogical decision-making

Conceiving water competence in terms of its threefold function implies that the professional must decide not only which exercises to propose, but also what experiences to offer. Prioritising technical skills without addressing knowledge and personal development can lead to fragile learning, low adherence to practice and a false sense of security. Conversely, integrating the three functions allows for the design of situations that foster autonomy, understanding of the environment and emotional regulation – elements directly linked to well-being and the prevention of incidents in the aquatic environment.

Student well-being is a priority

Mental health issues represent a major global challenge, with an estimated prevalence of around one billion people worldwide and a forecast of further deterioration in the coming years (Institute for Health Metrics and Evaluation, 2017; Ritchie & Roser, 2018). Linked to high levels of physical inactivity and the rise in non-communicable diseases, the current situation is particularly worrying and calls for coordinated and sustained responses. In this context, aquatic activities can play a significant role as a protective factor and in promoting health and well-being. To this end, it is essential that aquatic professionals are aware of the scope of their work and are committed to innovative, competent and varied teaching approaches, focused on the well-being of participants and the creation of safe environments.

Regardless of whether they are recreational, leisure-based or competitive in nature, water-based activities are an important strategy for promoting health and well-being, with evidence of positive effects on both physical and mental health (Swim England, 2017). Furthermore, when carried out in natural aquatic environments (blue spaces), these activities have been linked to improvements in mood, a greater sense of psychological restoration and a reduction in symptoms of psychological distress (Foley & Kistemann, 2015; Gascon et al., 2017; White et al., 2020; Britton et al., 2020). However, this type of practice requires a high level of professional competence to ensure safe and meaningful experiences (Overbury et al., 2023). Furthermore, the quality of aquatic experiences from an early age has a decisive influence on reducing the risk of drowning (Swim England, 2017), which reinforces the need to facilitate access to these programmes from childhood and to sustain them over time.

According to Lindert et al. (2015), well-being is linked to a positive perception of one's own health, greater longevity, healthy lifestyle habits, improved physical and mental health, strong social ties, and a sense of being able to contribute to society. High levels of well-being are also associated with a reduction in premature mortality, which underscores its importance as an educational and public health objective.

To encourage long-term adherence and continuity in aquatic activities through intrinsic motivation, it is essential to address the participant's basic psychological needs: to feel autonomous, competent and connected to others, as outlined in self-determination theory (Ryan & Deci, 2002). For the practice environment to truly function as a protective space, it must promote peer interaction, facilitate family involvement and serve as a space for listening, dialogue and recognition of participants as rights-holders. Belonging to groups, the presence of meaningful relationships, regular participation in practice spaces and the development of positive future expectations reinforce these contexts of well-being (INJU, 2022).

Pedagogical criteria for promoting well-being in aquatic programmes

Promoting pupils' well-being in the aquatic environment involves creating settings where individuals feel safe, listened to and competent. To this end, it is essential to offer progressive activities, allow active participation in the process, acknowledge the emotions associated with water, diversify practical experiences and build a relational atmosphere based on respect and trust. These criteria not only promote immediate well-being but also directly influence continuity, adherence and the long-term relationship with aquatic activities.

In day-to-day practice, some indicators that the classroom environment is promoting holistic well-being include, for example, active participation in activities and in making small decisions (choosing tasks, paces or materials), a gradual reduction in water-avoidance behaviours, spontaneous expressions of enjoyment and confidence, the emergence of cooperative gestures among peers, and a willingness to share doubts or fears with the professional. When these signs appear repeatedly, it is more likely that the aquatic experience will be perceived as a safe, meaningful and sustainable space over time.

From this perspective, it is worth questioning some key aspects of the aquatic intervention: to what extent do the activities offer variety and richness to sustain high levels of participation and engagement over time? Do the pupils feel listened to and actively involved in the space they inhabit when they attend the class? Does the professional have the conditions that allow them to plan and guide the practice in a way that has positive effects on the participants' well-being? Is there an institutional context that fosters creativity, initiative and care for the professional themself?

Ultimately, it is the quality of the practice that will determine whether a student continues with the programme and remains committed to the aquatic learning process. In this regard, it is necessary to broaden the educational approach in terms of content, organisation and teaching styles, so that it has a real impact on the different aspects of the human being. Varying the contexts of practice and offering experiences with added value in everyday life, which is often marked by stress and overload, becomes a shared responsibility between the institutions that coordinate aquatic programmes and the professionals who deliver them. Both must act as beacons of well-being and promote a culture of care.

Warning signs in aquatic programmes in swimming pools

Despite careful planning, a variety of activities and the creation of safe environments, it is important to recognise that every pupil may experience physical, emotional or psychological distress during aquatic activities. These situations may arise suddenly or manifest themselves through early warning signs that require specific attention and, in some cases, specialist intervention. From a holistic well-being perspective, the early identification of these signs constitutes an essential form of care and prevention.

The aquatic professional carries out their work in a context of constant vigilance, simultaneously attending to the individual and collective needs of the group throughout the session. This vigilance should not be understood as a state of constant alarm, but rather as a **conscious, attentive and regulated presence**, aimed at ensuring the safety and well-being of the participants. Maintaining these levels of attention is demanding and requires training, experience and institutional support.

To interpret these situations from a care-based perspective, it is helpful to start with a few common principles: always prioritise safety over the continuity of the activity; avoid pathologising interpretations based on a single incident; document what has happened so that lessons can be learnt from the experience; and, where necessary, make use of the resources available within the facility or refer the individual to other professionals. These general guidelines place the teacher in a role of detection and support, which is complementary to but distinct from that of other health or psychological professionals.

To facilitate the identification of warning signs and guiding professional practice, a series of guidelines organised by age group and type of pool activity are presented below (Tables 1, 2, 3 and 4). These guidelines include warning indicators, guidelines for immediate action, group management strategies and considerations regarding emotional support. The content is based on contributions from Neptune Serenity (drowning prevention association) and forms part of a responsible, person-centred approach to intervention.

The management of safety and well-being in aquatic programmes can be understood as a multi-tiered process. The first level relates to the design of protective environments and prevention; the second level to the early detection of warning signs; the third level to immediate action and the activation of protocols; and the fourth level to subsequent follow-up and the recording of what has happened. The tables presented below mainly address the second and third levels of this process and should always be interpreted in relation to appropriate preventive planning.

Table 1. Warning signs during water activities with children.

Dimension	Content
Warning signs	Sudden immobility; cessation of arm or leg movement; a blank or confused stare; repeated swallowing of water; persistently clinging to the edge, equipment or instructor.
Key rule	⚠ A silent child in the water is always a warning sign.
Immediate action	Ensure the safety of the group; remove the child from the water; check for consciousness and breathing. If unresponsive or not breathing: raise the alarm and perform CPR. If breathing: maintain the recovery position, keep a close watch and suspend the activity.
Group management	Move the other children away; remain calm; give simple, clear instructions ("Sit on the edge", "Let's wait together").
Emotional support	Possible reactions: intense crying, prolonged silence, fear of returning to the water. Strategies: get down to their level, speak in a calm voice, use brief reassuring phrases ("You're safe", "I'm here with you").
Avoid	Forcing them back into the water, downplaying what happened ("it was nothing"), separating them from their primary caregiver.
After the incident	Inform the family; record what happened; observe the emotional impact on the group.

Adolescence is a particularly vulnerable stage of life, during which distress is not always expressed explicitly. The body can become a vessel for emotional tensions that require careful, non-pathologising interpretation. Building relationships, active participation and social interaction act as protective factors (Table 2).

Table 2. Warning signs in adolescents and young people.

Dimension	Content
Warning signs	Common physical complaints (fatigue, insomnia, aches and pains); signs of psychological distress (sadness, anxiety, boredom); changes in body perception; shortness of breath or hyperventilation; dizziness; paleness or sweating; confusion or lack of coordination; progressive loss of buoyancy or sudden cessation of activity.
Action	Recognise the situation; ensure safety; alert the lifeguard and remove the person from the water; assess consciousness and breathing; activate institutional protocols if necessary. In the event of a panic attack: provide verbal support and help with breathing until help arrives. Suspend participation in the session.
Context management	Avoid crowds; preserve privacy; seek professional support; follow established protocols.
Emotional support	Common reactions: embarrassment, anxiety, minimisation. Strategies: normalise without trivialising; communicate clearly and calmly; reinforce that this is a safe and supportive environment.

Avoid	Minimise symptoms; allow the activity to continue “a little longer”; address the situation in front of the group.
After the incident	Record what happened; inform the coordinator and the family (if applicable); facilitate spaces for group dialogue based on care; avoid non-professional diagnoses.

Table 3. Warning signs in adult swimming lessons.

Dimension	Content
Warning signs	Shortness of breath; dizziness; paleness or excessive sweating; confusion or lack of coordination; sudden cessation of activity; chest pain; leaning heavily on the edge. ⚠️ The person may downplay their symptoms.
Immediate action	Stop the activity; ensure safety; alert the lifeguard; remove from the water; assess consciousness and breathing; activate emergency protocol and CPR/AED if necessary; do not allow a return to the activity.
Group management	Avoid crowds; preserve privacy; maintain a calm atmosphere; avoid alarmist comments; seek professional support if necessary.
Emotional support	Common reactions: embarrassment, anxiety, denial. Strategies: firm and calm tone; reassuring phrases (“Let’s have a rest now”, “Your safety comes first”).
Avoid	Pressuring the person to continue, ignoring mild signs, leaving the person alone, downplaying the symptoms.
After the incident	Record what happened; inform the coordination team; recommend a medical assessment.

Table 4. Warning signs in aquagym classes.

Dimension	Content
Warning signs	Sudden cessation of exercise; shortness of breath; chest pain; dizziness; confusion; leaning heavily on the pool edge.
Key rule	⚠️ Symptoms may be downplayed by the person themself.
Immediate action	Stop the class; alert the lifeguard; safely remove the person from the water; check for consciousness and breathing; if unresponsive or not breathing: raise the alarm and start CPR/AED; if breathing: sit or lay them down comfortably, maintain constant vigilance and do not allow them to return to the activity.
Group management	Move participants away; maintain a calm atmosphere; avoid alarmist comments; ask a colleague for support if necessary.
Emotional support	Possible reactions: fear of falling, embarrassment, denial (“I’m fine”). Strategies: firm and calm tone; reassuring phrases (“Now let’s take a break”, “Your safety comes first”)

Avoid	Pressuring them to continue, ignoring mild symptoms, leaving the person alone.
After the incident	Record what happened; inform the coordinator and, where appropriate, the family in the case of older people; recommend a medical assessment.

The way in which such situations are handled has a decisive influence on emotional regulation in the moment and on the impact the experience has on both the participant and the professional. Simple phrases such as “I’m here”, “you’re safe”, or “breathe with me” are highly effective, whereas downplaying the distress can intensify the negative experience.

Given that many incidents in the water occur silently, prevention becomes the aquatic professional’s greatest ally. Active presence, knowledge, anticipation, and the application of clear protocols enable intervention based on care rather than urgency. Having institutional protocols that are well-known and practised is a key element in protecting the well-being of everyone involved.

Every emergency or critical situation also takes its toll on those who manage it. The need to remain constantly vigilant, make quick decisions in high-risk situations and cope with one’s own distress and that of others makes the work of aquatic professionals an emotionally demanding task. Caring for those who care for others in the water, therefore, becomes an essential prerequisite for maintaining the quality of the intervention, the safety of participants and the sustainability of the programmes themselves. In these situations, support from the team and coordination are fundamental.

Well-being of aquatic professionals

The well-being of aquatic professionals should not be seen as an afterthought, but as a necessary condition for ensuring safe, appropriate and humane interventions. Looking after the professional is, in this sense, an indirect but fundamental way of looking after the pupils and preventing risky situations.

Aquatic professionals must be aware of the importance of looking after themselves and of maintaining a positive and stabilising presence within the team they work with. Their well-being not only affects their own health, but is also a key factor in the quality of their teaching and, consequently, in the pupils’ experience and learning.

Teaching is recognised as one of the professions with the highest levels of stress and workplace distress, which has a direct impact on the well-being and performance of professionals (Pagán-Castaño et al., 2021). This reality inevitably affects the quality of the educational experiences provided. Therefore, the well-being of aquatic professionals must be understood as a shared priority between coordination and management teams and the individual responsibility of each teacher.

Burnout is a reality found across various areas of aquatic practice, from teaching to the

competitive arena. It is defined as a multidimensional syndrome characterised by emotional exhaustion, cynicism and a diminished sense of personal fulfilment (Maslach et al., 2001). Exhaustion manifests as a progressive loss of energy and motivation; cynicism, as a negative, distant and critical attitude towards work, perceived as lacking in interest or pleasure; and reduced personal fulfilment, as a sense of professional ineffectiveness. When this perception takes hold, there is a decline in commitment and an increasingly routine performance, which contributes to intensifying the distress. By way of a practical summary, some examples of self-care strategies for aquatic professionals at different levels of intervention are presented below (Table 5).

Table 5. Self-care strategies for aquatic professionals at different levels.

Level of self-care	Specific example	How to put it into practice
Organisational	Rotation of tasks and short breaks	Plan shifts in and out of the water; set aside 3–5 minutes between sessions to hydrate and breathe mindfully.
Personal in-session	Micro-regulation strategies	Mindful breathing cycles, self-instructions ("one thing at a time"), small adjustments to posture or clothing (self-hug).
Team	Debriefing and peer support	Brief meetings to review incidents, time after a critical episode to express feelings and receive support.
Outside of work	Boundaries and personal schedule	Clear timetables, non-water-related activities, regular review of workload and renegotiation of tasks.

These strategies do not constitute a rigid protocol, but rather a set of guidelines that each professional and each team can adapt to their own circumstances. The key is to recognise that looking after one's own physical, emotional and relational well-being is part of one's pedagogical responsibility and contributes to the quality of aquatic programmes.

To halt this downward spiral, intrinsic motivation plays a central role (Brummelhuis et al., 2011). The work environment has a decisive influence on its development, particularly through the leadership style exercised by team leaders, such as coordinators or technical directors (Ryan & Deci, 2002). The most beneficial leadership styles are those that foster professional autonomy, understood not as the absence of rules, but as the ability to act with discretion, support and consistency within a shared framework. In this regard, clear guidelines are essential in relation to the centre's philosophy, team dynamics, high-quality continuous training, the provision of spaces for rest and socialising, as well as both group and individual support for staff.

The perception of teachers' well-being is based on three key components: the personal self, the professional self and the relational self (Spilt et al., 2011). These elements are interrelated and influence one another, shaping the overall experience of well-being in professional

practice (Figure 2).

Figure 2. Key elements of well-being.

In the same vein, Mansfield et al. (2016) note that teachers with higher levels of well-being cope better with difficulties when they feel motivated, have confidence in their abilities, maintain positive relationships in the workplace, and employ effective strategies such as problem-solving, self-care and work-life balance. These findings highlight the importance of individual responsibility, leadership and the quality of the organisational environment.

The better a professional feels about themself, the more available they are to their environment and the greater their capacity to be attentive and respond appropriately to the needs of others. This disposition is key both to preventing extreme situations, such as a fear of water or the physical and emotional exhaustion of pupils, and to intervening appropriately when such situations arise.

Becoming a better professional, therefore, involves feeling good about oneself, knowing one's own values, understanding the purpose of one's work, and acting in a way that is consistent with these values in one's day-to-day work. Added to this is the importance of the working environment, which plays a decisive role in maintaining motivation and commitment. Contexts characterised by heavy workloads, passive or confrontational leadership, and complex working relationships (marked by comparison, criticism or a lack of dialogue) have a negative impact on professionals' intrinsic motivation, increasing frustration, disengagement and vulnerability to burnout (Bentzen et al., 2014; Skaalvik & Skaalvik, 2017).

Conclusion

Being a water safety professional is a choice that requires commitment, as the people we work with, and, quite directly, their safety in the water, depend on our day-to-day actions. Recognising the warning signs that may indicate a situation of risk or vulnerability, as well as knowing how to intervene appropriately once preventive measures have been exhausted, is crucial and cannot be overlooked. A well-executed initial response significantly increases the likelihood of success in subsequent interventions and helps to safeguard the well-being of everyone involved.

Caring for pupils is built up through day-to-day practice. There are, however, psychological, physical and physiological conditions that fall outside the scope of the aquatic professional's expertise and require the intervention of specialists, such as psychologists, doctors or hydrotherapists. Recognising the limits of one's own intervention is part of responsible practice and must be shared by both the professional and the coordination teams of the organisations where the programmes are run.

Leading aquatic programmes means accepting that one influences people's lives. This responsibility demands commitment, training, professional judgement and self-care, so that, session after session, we can offer experiences aimed at developing water competence and the overall well-being of the pupils. At the same time, aquatic practice must serve as a source of health and wellbeing for the professional themself, who needs opportunities for rest, meaningful relationships and a break from the work environment in order to maintain high-quality delivery.

When wellbeing and safety are placed at the heart of the programme, aquatic programmes cease to be merely spaces for technical instruction and become contexts for care, prevention and human development.

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