SUPPLEMENT 3 Bubble-wrapped recreation – have fun but don't get hurt! Heather Turner¹

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Injury Prevention

As a recreation practitioner who deals with the issues of risk and play on the front-line, I have had my share of experiences related to balancing facilities and programs for both riskaverse and risk-seeking community members. My goal is to provide a snapshot of the historically complex interaction between public recreation and risk, and how changes in demand – be it away from, or toward risky play have impacted municipal recreation services.

The origin of the Parks and Recreation movement in the early 1900s was largely in the provision of free and open park spaces for the aesthetic enjoyment of residents and visitors. These were simpler times and little time was spent considering potential risks in these spaces. Later, this work evolved into the development and management of swimming places (both outdoor and indoor), tennis courts, and new community halls to supplement churches and schools as venues for dances and community events. At that time, few resources were put into formalized recreation programs and services, and individuals took responsibility for their own leisure time. Our role was to build it and let them come. During this period, when government was considered "owned by the people" - it was almost unthinkable to take legal action against government for an injury incurred while playing in a park or facility; therefore little attention was paid to the mitigation of risk, and patrons were largely responsible for their own safety.

The 1950s, 60s and 70s were different times. Unstructured play was the norm for most children, playing games like scrub and kick-the-can with no adult supervision or cell phone contact. I was fortunate to spend every summer at a lake where our "main beach" had a raft, dock, slide and – the best of all – a home-crafted metal two level diving tower with planks on two sides where I learned to dive into water that was about 10 feet deep. Although I suspect the village council of the day was aware that these features brought risk of injury and they were open to litigation, the amenities made the beach area incredibly popular for locals and visitors.

This period; late 1950s to 1970s – brought some changes to the Parks and Recreation sector. During these years we were primarily seen as providers of recreation spaces - swimming pools, ice arenas, curling clubs, parks, and rather modest community centres. While more 'managed' or 'organized' recreation programs were emerging, the trend of free, unsupervised and unmitigated play remained most popular. We continued to be mainly facilitators, providing space where people could connect with each other and engage with recreation however they chose. Being safe continued to mostly be the responsibility of the patron – and while I do not suggest that this was a better time to be a child, there is a lot to be said for free play, and the associated learning that took place. I suggest that during that time, risk management was a notion for municipalities in their provision of recreation services, but not a great focus.

In the 1980s and 90s, taxpayer investment in public recreation increased as we built many facilities. We went wild in the playground department; constructing adventure and creative playgrounds that promised to foster creativity, innovation and ingenuity. We built many community recreation centres and sport specific facilities and switched from being primarily facility providers to both facility and program providers. This was a significant change sparked by consumer demand. Residents began to request recreation programs for two primary reasons.

Firstly, recreation was increasingly recognized as an important tool in positive childhood development and we developed programs and services that would maximize this development. Secondly, related more directly to riskaversion, was parental pressures and demands. The style of parenting that dominated in the 1990s was characterized by high fear, high control and low risk. Due to fear of 'what could happen', parents were over-protective and over-scheduled their children. We, as recreation service providers, mirrored these trends in our practices. The pressure to remove risky play elements, such as my beloved diving tower, came from risk-averse parents, insurance providers, Council members and administrators. We developed rules and regulations, ramped up our supervision of programs held in padded gyms and tore down playgrounds that were too high and too hard. We closed diving boards during public swimming sessions, removed ropes, slides, platforms and other fun elements. We resisted the growing demand for skate parks in response to public fears that they would be havens for delinguent youth to swear, do drugs and no doubt hurt themselves. We replaced swings, monkey bars and adventure playground components with static elements, brightly coloured to

make them look attractive; distracting parents and children from the fact that they were not that much fun. We closed outdoor paddling pools, introduced waiver forms, criminal record checks for staff and risk management manuals. A good example of this is my childhood beach which today has only a dock; no raft, slide or tower - all removed because the village could not afford the escalating insurance costs and the council was not prepared to take the chance of a potential lawsuit.

For the last 2 to 3 decades, our society has been so afraid of what "might" happen that children no longer bike through their neighbourhood, let alone to soccer practice or a friend's house. According to Active Healthy Kids Canada, only 25 to 35% of Canadian children and youth walk, bike or wheel to school – 65 to 75% are driven.[1] In addition to the health issues arising from this inactivity, over-protecting children impacts their ability to assess bad situations, take physical risk, learn from the consequences of taking such risks, and to problem solve.

My colleagues and I are passionate about the physical, social, emotional and cognitive benefits of play and recreation to participants and espouse the public good that the community at large derives from quality recreation. We aim to facilitate the healthy development of children, although I suggest that we got a bit side-tracked in the past 10 to 20 years in trying to appease parental fears and by becoming overly focused on mitigating risk. We did benefit from parental fears of children playing outside unsupervised; our program registrations increased as parents sought safe indoor, supervised recreation programs.

Most municipalities are now experiencing shifts in demand and either plateaus or decreases in participation in traditional registered programs. There appears to be a renewed increase in spontaneous activities and risky recreation and sport. We are now seeing the young adults that were over-protected children in the 1990s craving activities that are thrilling. While municipalities are not usually the providers of these of high-risk activities, they have an impact on the Councils and staff as the demand for, and concerns around these activities increase and collide. In my community, we have recently dealt with two matters directly related to such risk and recreation.

Firstly, we have been wrestling with the impact of the popular longboarding trend. There is pressure from the public to ban the activity and pressure from participants and their parents to allow it. This balancing act is challenging because both those for and those against have good points. While longboarding is prohibited on certain streets, as with many banned activities, enforcement is a problem and fines are rare. Municipalities face a dilemma of wanting people to be safe but struggling with the ability to regulate. A second example is an examination of the question of helmet use in ice arenas. Several viewpoints were expressed; that helmets should be mandatory for all, or for those under 16, while others expressed concern that teenagers would stop participating if helmets were required. We conducted research into the frequency of arena incidents, the probability of helmets preventing serious injury and the age of participants who typically participated in public skating. Our ultimate decision was to require helmets in registered programs and for instructors and supervisors on ice, and to encourage helmet use, but not to make them mandatory for all. We made this choice to ensure that we did not counter our primary objective – to attract youth to public skating sessions and to get them active.

Our challenge is to find the right balance between satisfying the legitimate concerns of risk managers and the public while meeting the recreation needs of risk-seeking parents and youth. When presented with the opportunity to offer circus programs in which participants fly high on silks and trapezes and pedal on unicycles, we jumped at it. In the 1990s we would have been too scared to try. We need to continue to move away from focusing too much on bubble-wrapped recreation – towards smartly and courageously providing new, innovative and physically challenging activities in support of healthy child development.

I wonder if in a few years we may begin to see that the parents (those who were over-protected in the 1990s) want different childhood experiences for their offspring; one with more adventure and risk-taking. Perhaps the pendulum that swung from personal responsibility for recreation to government provided; from outdoor to indoor and from risk-averse to managed acceptable risk will swing back to somewhere in the middle.

Risk in recreation is unavoidable and incidents will happen. Our goal must be to understand and meet the needs of our residents and address the expectations and fears of the riskaverse and risk-seeking in a reasonable, balanced way that protects both the participants and the municipalities. We need to understand parental fears and concerns and respond to them, but do that with our ultimate goal in mind; to build healthy individuals, families and communities.

REFERENCES

1. Active Healthy Kids Canada. Is active play extinct? 2012 Active Healthy Kids Canada report card on physical activity for children and youth. Active Healthy Kids Canada 2012.