Ideas and Strategies for Diversity and Inclusion in local USMS programs

Short Title:

Description:

What Worked/What Didn't:

How does this strategy promote diversity and inclusion?

Local Contact Person

Diversity Task Force-USMS Board of Directors Template for Ideas-Diversity and Inclusion



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# Short Title: Masters 101

**Description:** A series of 4-6 swim clinics for newcomers to Masters swimming. 30 minute to 1 hour sessions held in successive weeks and offered for free or nominal entry fee. This clinic is for swimmers who are able to swim 1 length of the pool and who want to explore masters swimming. Swimmer/coach ratio no more than 1-6 participants. Swimmers are divided by swimming ability in a shallow pool. Skill instruction includes: basic freestyle stroke, kicking, breathing. Basic information to include: basic swimwear-suits, goggles, cap and orientation to the pool deck and facility and what to expect when arriving for a masters practice. Clinic sessions include an introduction to a pace clock and workout structures and language they will encounter in a masters practice (send off, interval, warm up, heart rate and how to take HR); types of equipment and use of equipment (fins, alignment board, snorkel, tempo trainer, pull buoy) and the opportunity to work with and practice with different types of equipment with recommendations by the coach as to what works for what purposes.

#### What Worked/What Didn't:

- What worked was having a good initial assessment of the swimming ability of every participant and have coaches/instructors available to work with people individually and in small groups. What didn't work is having a widely differing set of participants and lacking individual attention.
- Teaching about equipment takes time and it's best to introduce just 1-2 pieces of equipment during a single session. Also, sponsors were willing to donate equipment which the club retained to be able to offer future clinics and to donate for those unable to purchase their own.
- Working the new swimmers into regular practice happens best after they have attended 2-3 of the clinic sessions so they can see what they know and don't know and come back to the clinic and ask questions.
- Holding the clinic when you have at least 5-6 new people is better than doing individual instruction because they learn from one another.
- Holding the clinic in a pool where there is already a masters group or as part of the masters practice by reserving 1-2 lanes really helps because swimmers can move into the program rather than having to go out and find a program after the clinic is complete.

How does this strategy promote diversity and inclusion? By having a strategy to overcome the traditional barriers to masters-a masters 101 series can bring in new people who think of masters as intimidating.

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#### Ideas and Strategies for Diversity and Inclusion in local USMS programs

# Short Title: New Swimmer Clinic and Practice Swim Meet

**Description:** This clinic offers the newer masters swimmer a clinic and orientation to their first swim meet. PNA has offered such a clinic in January for swimmers who contemplate swimming in our annual 'champs' meet in April. The purpose of the clinic and practice meet is to offer skills that swimmers might not get in regular practice and to break down the apprehension swimmers that can keep a swimmer from competing. We offered the clinic for a nominal fee (\$25) for a 5-hour time period and for 25 participants with 6 coaches on deck. The format included 5 'stations' the swimmers rotated through: 1) Officials orientation-walk around the pool deck, introduction to rules; 2) start-dives and back stroke starts; 3) turns including flip turns and open turns; 4) medley turns and 5) race strategy (pacing, 'nerves-talk', race prep, nutrition/hydration, etc). Each station took 35 minutes with a 5-minute shift change. The clinic was followed by a mock meet. Swimmers selected 2 individual events and the meet was run with 50's and 100's heats. Heats used 4 lanes so swimmers could practice in the other two. Swimmers divided into 'red' and 'blue' teams. Coaches met swimmers for feedback after each of their races. The meet concluded with freestyle relays and medley relays such that each swimmer swam in one of each. Swimmers received a 'goodie bag' for their participation.

#### What Worked/What Didn't:

- The clinic needs a minimum of 12 participants to achieve the desired outcome-to have relays and the fun and excitement of a swim meet. One time only a few signed up and that wasn't effective.
- Adequate staffing/coaching is essential because swimmers want and deserve individual feedback.
- Most swimmers were completely unfamiliar with dives/starts. A double session on starts is recommended. We had several swimmers who had never dived, much less off the blocks. Teaching them about in water entries and diving from the side helped them realize they had options.
- Inviting an official really added credibility and valuable teaching.
- Feeding (and hydrating) the group is important. A 5-hour clinic is really long especially if they're in the water most of the time. They also need to know to bring warm deck clothes.... just like a swim meet!

# How does this strategy promote diversity and inclusion?

We found that fitness swimmers and those without a swimming background felt they 'could never' participate in a swim meet. This clinic built confidence and excitement especially for women who never envisioned themselves competing.

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