
Capacity building in public health and emergency management for volunteers at outdoor music festivals

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ABSTRACT

Many voluntary positions are supported by specific training programs, industry codes of practice and other formal mechanisms that contribute to capacity building. As yet, there are no codes of practice or specific training programs to support volunteers working at outdoor music festivals (OMFs) in Australia. There are considerable benefits in these volunteers having adequate capacity and confidence to successfully complete assigned tasks. These benefits have been recognised in England where there are now training programs and a code of practice to assist volunteering at OMFs.

This article discusses two studies undertaken to assess the impacts of training on volunteer capacity. The first study was carried out at a European festival with a training expectation and the other was at an Australian festival without the same expectation. Findings from the European study showed the volunteers in that study had a very high level of knowledge of public health and emergency management for that festival. Findings from the Australian study showed the study participants had a lower level of knowledge, particularly for emergency management at that festival. These findings support the introduction of formal training programs for volunteers at OMFs in Australia.

INTRODUCTION

In Australia it is widely recognised that volunteers play important roles within the community setting (Flick, Bittman & Doyle, 2002). Many of these voluntary positions are supported by training, industry codes of practice or other formal mechanisms that contribute to capacity building. These supports are important in assisting individuals in developing the skills needed to perform designated tasks successfully while in voluntary positions (Au, Ryan, Carey and Whalley, 1993). This is not the case for all voluntary work in Australia. An example of an area without these formal structures is volunteering at outdoor music festivals (OMFs). These voluntary roles vary considerably, especially between single- and multi-day events.

Volunteers at single-day events generally undertake singular tasks such as collecting tickets and being 'crowd carers' (Anonymous 2002). Alternatively volunteers at multi-day events have greater responsi-

bility and undertake multi-level tasks. Positions at multi-day events include campsite supervision and event stewarding (ACCESS 2003).

Many of these volunteer positions at OMFs involve emergency and public health management for the events (ACCESS 2003). This involvement includes the provision of first aid, crowd safety, fire safety and emergency evacuation support. Basic health and safety induction briefings are useful for the least complex volunteer positions however these are not sufficient for the more complex positions. It becomes very important for the volunteers involved in these more complex tasks to have adequate capacity. One option for improving this capacity is through the provision of formal training programs (ACCESS 2003).

This article reviews two studies undertaken to investigate volunteer capacity for public health and emergency management at two large OMFs, one in

Europe and one in Australia. The OMF in Europe had formal volunteer training programs while the Australian OMF did not.

EVENT PLANNING, EMERGENCY MANAGEMENT AND SUPPORT

There is considerable evidence that good event planning is critical to the successful management of OMFs (Emergency Management Australia 1999, Health and Safety Executive 1999 & Liquor Licensing Division 1999). The two study festivals have different approaches to event planning with a key difference being the roles of the regulatory authorities. The site for the Australian festival is owned by the event organisers and zoned specifically to cater for events (Qld Department of Housing, Local Government and Planning 1995). This zoning arrangement reduces the regulatory impacts on planning processes undertaken for that event. Alternatively the European festival site is primarily an agricultural property and requires an annual approval and licence to operate. This gives the regulatory authority considerable influence over the planning processes.

The emergency management is also important to the successful operation of OMFs. The European festival has extensive emergency management procedures that have been encouraged through the annual approval and licence processes for the event. Emergency management at the European festival has evolved considerably in recent years to a very high standard. Alternatively, there has not been the same regulatory pressure on the Australian festival and emergency management has remained a lower priority and much less comprehensive.

Volunteers are very important to the delivery of services at both study festivals. The European event organisers had decided to provide as much support to their volunteers as possible. This support included comprehensive emergency management systems, training programs, an extensive communication system and highly motivated professionals to coordinate the volunteer operations. The Australian festival did not have the same level of support. The high level of event planning and organisational and operational support at the European festival certainly appeared to assist volunteer activity at that event.

STUDY AIM

The aim of both studies was to identify the level of volunteer knowledge and skills for public health and emergency management at two OMFs. One OMF studied provided volunteer training programs and the other did not.

METHOD

It was not possible to collect a random sample of the volunteers from either festival so a purposive sampling method was utilised (Bouma 1996). Self report data from the volunteers was collected using a questionnaire. The questionnaire contained both open and closed questions. For both studies the questionnaire was administered only through key festival staff.

The studies were conceptualised as exploratory studies so no formal hypothesis testing was undertaken (Morton, Hebel & McCarter 1990; Portney & Watkins 1993; Streiner, Norman & Munroe-Blum 1989). The associations between variables have been summarised into counts and percentages.

QUESTIONNAIRE

The questionnaire used for both studies was composed of four sections. The first section related to demographic information. This included age, gender, volunteer experience and participants' usual occupation. The second section focussed on public health hazards and involvement with control measures used at the festivals. The third section related directly to emergency management planning and roles in emergency management. The final question related to the level of confidence that the volunteers had in dealing with emergency situations.

STUDY LIMITATIONS

There were two main limitations identified for both studies. The first limitation was the small sample sizes for both studies. Secondly there were some variations for age and gender in the studies. There was over sampling of older and female volunteers for the European study. There was under sampling of some of the older volunteers and over sampling of the younger volunteers for the Australian festival. As

a result discussions were limited to the volunteers in each study and it was not assumed that these groups represented the general volunteer populations.

SELECTION OF STUDY FESTIVALS

The festivals were chosen based on (1) size, (2) reliance on volunteers, (3) training offered and (4) availability of willing event staff participants. A key difference between the two study festivals was access to formal training programs for the volunteers at the European festival.

VOLUNTEERS AND OMFS

TRAINING

All the volunteers in the European study were considered to have received training to support their volunteer work (100.0%, n=50). Some of the Australian participants reported receiving briefings from festival staff (8.0%, n=6) or training provided through other agencies (28.0%, n=21). The training programs considered useful by the Australian participants had been delivered by the State Emergency Services and the Rural Fire Brigade.

At the European festival, the training courses were tailored to the expected level of responsibility, complexity and autonomy for each volunteer position (ACCESS 2003). The volunteers engaged in singularly focussed tasks such as stewarding at the gates and fire safety for the festival had received a 'basic' training program. Volunteers with greater responsibilities such as campsite supervision had received an 'advanced' program. In addition to this training, all the volunteers should have received induction training before deployment to their assigned positions (ACCESS 2003).

Overall, the level of knowledge of public health (92.0%, n=46) and emergency management (82.0%, n=41) was higher for the participants in the European study than that of participants in the Australian study, 71.0% (n=53) and 24.0% (n=18) respectively.

ADDITIONAL SKILLS

In addition to the training, 69.3% (n=34) of the European participants had gained further capacity from involvement in the health industry or from

having volunteered previously at the study festival or other festivals. A number of the participants at the Australian festival also had additional capacity with 36% (n=27) having received training (SES, RFS and First Aid certificate) or 7% (n=5) having involvement in the health industry. For both studies, 50% (Australian study n=37; European study n=25) of the participants had volunteered previously at the study festivals.

KNOWLEDGE AND PUBLIC HEALTH MANAGEMENT INVOLVEMENT

The European participants demonstrated a very high level of knowledge of public health concerns for that festival (92%, n=46). The common public health hazards included vehicle safety, waste management impacts, aggressive behaviour and fire incidents (refer to Figure 1). Seventy-seven per cent of these participants (77.0%, n=34) had knowledge of and were involved in control measures for these hazards in some capacity. Ninety per cent of the participants with basic training experience (90.0% n=19) were involved in control measures compared to 52.5% (n=11) with the advanced training experience.

Seventy-one per cent of the Australian participants (71%, n=53) were able to identify public health hazards at that festival. The common public health hazards included sun exposure and vehicle, fire and camp site hazards (refer to Figure 1). Forty-four per cent of the Australian participants (n=33) had knowledge of and involvement in control measures for these hazards in some capacity. Figure 1 provides a summary of the priority public health hazards identified by the two volunteer groups.

KNOWLEDGE OF EMERGENCY MANAGEMENT

The European study participants again demonstrated considerable capacity in the area of emergency management at that festival. Eighty-two per cent (82%, n=41) of these volunteers had knowledge of emergency management planning at the festival with the greater proportion aware of their roles and responsibilities and local coordinators for emergency responses (78.0%, n=39).

The Australian participants conversely demonstrated very low knowledge of emergency manage-

Figure 1: Public health concerns at both study festivals.

Australian study festival issues	Percentage and number	European study festival issues	Percentage and number
Sun exposure	27.0% (n=20)	Vehicle hazards	20.0% (n=10)
Trip hazards	9.0% (n=7)	Waste hazards	14.0% (n=7)
Structural hazards (eg collapse)	9.0% (n=7)	Aggressive behaviour	14.0% (n=7)
Vehicle hazards	8.0% (n=6)	Fire hazards	12.0% (n=6)
Fire hazards	8.0% (n=6)	Uneven ground	8.0% (n=4)
Services failures (eg sewage or amenity)	6.5% (n=5)	Medical conditions	6.0% (n=3)
Medical conditions	5.5% (n=4)	Drug & alcohol abuse	6.0% (n=3)
Electrical hazards	3.0% (n=2)	Crowd hazards	4.0% (n=2)
Camp site hazards	3.0% (n=2)	Other issues (sun safety, lighting, water)	dust &
No issues offered	23.0% (n=16)	No issues offered	8.0% (n=4)
TOTALS	100.0% (n=75)		100.0% (n=50)

ment for that festival. Only 24% (n=18) of study participants were aware of emergency management planning for that festival with 15% (n=11) able to identify their roles and responsibilities. This was judged to be low. Forty per cent of these participants (n=30) could correctly identify a person responsible for emergency response coordination. In terms of skills in emergency management, 13% (n=12) of the study participants indicated having specific training in emergency management.

LEVEL OF CONFIDENCE (AND LINKS TO TRAINING)

The participants were asked to rate their levels of confidence in dealing with emergency situations. Ninety-two per cent (n=46) of the European study participants expressed some level of confidence with 47% (n=24) reporting having been very confident in dealing with emergency situations. This is compared to 71% (n=53) of the Australian participants who similarly expressed some level of confidence with 30% (n=23) responding in the highest category.

In terms of confidence, the participants in both studies were divided in accordance with the levels of training reported. Firstly, the Australian cohort was divided into two groups, the participants with no

training and those who reported having received training. Seventy-nine per cent of the participants who reported having received training (n=19) expressed at least some level of confidence dealing with emergency situations. Sixty-six per cent of those who reported no training (n=28) had the same level of confidence.

The European participants were also divided according to the basic and advanced training programs. Ninety-two per cent of the study participants with the basic training (n=23) and 96% (n=23) with advanced training experience expressed at least some level of confidence in dealing with emergency situations.

DISCUSSION

The competencies required for volunteers to successfully undertake tasks in the areas of public health and emergency management at OMFs would be best achieved through the combination of factors such as knowledge and experience (Health and Safety Executive 1997, cited in Health and Safety Executive 2003). Au and others (1993) added that critical competencies for event staff would be (a) adequate skills to perform designated tasks, (b) awareness of problems that may arise and having some understanding

of the control measures and (c) awareness of roles, responsibilities, contingency and emergency procedures. A reasonable number of participants in the studies, particularly from the European festival, would be considered competent according to these expectations.

The European participants reported higher levels of knowledge and involvement for majority of the factors discussed in the study. Clearly, the European participants had significantly higher levels of knowledge of emergency management for their festival. Emergency management was a key component of the training given to the volunteers at the European festival and was reflected in volunteer knowledge. Both training programs discussed health and safety issues, teamwork, principles of spectator management, control entry and exits and dealing with unauthorised items (ACCESS 2003).

A comparatively smaller proportion of the Australian participants had knowledge of emergency management. Notably some of the participants with emergency management training experience were not able to comment on emergency management for that festival. In defence of the Australian participants, the profile and level of emergency management planning for the Australian festival was very different to that of the European festival. Further, Davis (1997) considered the lack of emergency planning for mass gatherings to be endemic in Australia. This may explain a considerable proportion of the lack of volunteer knowledge.

Regulatory bodies may have influenced the support processes for volunteers at each study festival. Volunteer roles were similar for both festivals however the European event managers did appear much more supportive of their volunteers. In terms of training programs for volunteers, it would appear that encouragement from government agencies is useful (Avon & Somerset Constabulary 2000) and the event organisers must see the benefits (ACCESS 2003; Glastonbury Festival Ltd 2001).

CONCLUSION

Both cohorts were able to demonstrate knowledge, training, volunteer experience and some professional expertise resulting in good capacity for emergency and public health management. It was apparent from the findings that the both cohorts had good

knowledge of public health hazards and some knowledge of control measures. However it was knowledge of emergency management where there were significant differences. The European participants had much better knowledge of emergency management for that festival. There was an improvement in knowledge for the Australian participants who reported having received emergency management training from external sources.

The main difference between the two cohorts was that the European participants had received formal training to help carry out their duties. The findings showed that there was relationship between training and improved knowledge, particularly when the training reflected the needs and operations for the event. So the introduction of training programs for volunteers at Australian OMFs would see improvements in knowledge of public health hazards, control measures, emergency management and an increase in confidence in dealing with emergency situations.

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