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Case study

Grassroot Soccer and the SKILLZ COVID-19 curriculum

Experimentation and adaptability in Sport for
Development during COVID-19

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Experimentation and adaptability in Sport for Development during COVID-19

External shocks can happen and it is crucial for Sport for Development (S4D) organizations to be able to respond promptly and adjust their operations accordingly. Through an open-source curriculum that educates adolescents on healthy behaviours linked to the COVID-19 pandemic, Grassroot Soccer (GRS) has managed to adapt to an unforeseen and disruptive circumstance, keep children engaged and develop content that tackles their immediate needs. In doing so, the organization also created a platform for sharing knowledge and experiences, reinforced existing partnerships and developed new ones. This case study unpacks the experience of GRS in developing, rolling out and improving this open-source curriculum. By describing the process, from idea through implementation and assessment, it provides an interesting example of how S4D organizations can respond to a crisis situation in innovative ways, while ensuring their growth and sustainability.

Grassroot Soccer

Grassroot Soccer (GRS) is an adolescent health organization that leverages the power of soccer to educate at-risk youth in developing countries. The organization directly implements programmes in South Africa, Zambia and Zimbabwe, and works with partners in another 48 countries on five continents, having reached over two million young people since its inception in 2002.¹ GRS uses a health-based curriculum, designed for youth and delivered by trained local mentors to share knowledge and promote positive behaviours in relation to sexual and reproductive health, HIV, malaria, youth development and gender.

Programmes often take place in schools, where students are presented with the initiative and, if interested, are given the opportunity to participate in after-school sessions. Most curricula are composed of 12 one-hour sessions that are usually completed in

6–12 weeks and can be adapted to the specific needs of the recipient group. The participants are immersed in a positive environment, play sports, receive health-related information and are given access to health services through a referral process that is organized and followed up by GRS. The objectives of the programmes are: increasing knowledge about the topics covered, promoting positive behaviours and ensuring access to health services.

The SKILLZ COVID-19 RESPONSE curriculum

The SKILLZ COVID-19 RESPONSE curriculum (Grassroot Soccer n.d.) is an open-source curriculum that was developed by GRS and made available online in early April 2020 as a tool for coaches, educators and parents to facilitate sports-based sessions with young people (aged 10–19) during COVID-19. The curriculum aims to increase knowledge on COVID-19, promote healthy behaviours such as proper handwashing, provide skills for mental well-being, and dispel common myths about the disease.

While S4D organizations usually develop and facilitate the implementation their own curricula, this is a publicly available package which includes the curriculum itself, an implementation guide, facilitation tips and a survey to track progress. As of November 2020, the curriculum has been downloaded by over 700 people from organizations in 35 countries and has been translated to Amharic, Chichewa, French, kiSwahili, Portuguese, Spanish and Afaan Oromoo, to enable organizations and individuals from different regions to use it. The online available material is also accompanied by a video overview of the contents.

This case study unpacks the experience of GRS in developing, rolling out and improving this open-source curriculum about COVID-19. Through semi-structured interviews with GRS staff members, who led the curriculum development, the steps followed, the considerations made and the practical implications of such an exercise are laid out and explained. By describing the process, from idea through implementation and assessment, this case study provides an interesting example of how S4D organizations can respond in innovative ways to a crisis situation.

The decision to develop an open-source curriculum

GRS had wanted to work on an open-source curriculum for some time and the unpredictable and fast-changing COVID-19 situation provided an opportunity for them to do so. School closures, bans on group activities and social distancing in the various country programmes generated the need for a tool that could be implemented by anyone, not only by trained coaches, and that could reach as many young people as possible. By being in continuous contact with partner organizations around the world, GRS could appreciate the wide range of responses that were taking place. In some countries, such as South Africa, the virus started spreading quickly, while in others, such as Papua New Guinea, an early response helped keep numbers down. It was clear from the beginning that for such a quickly evolving situation only a flexible instrument could be adapted to the different realities on the ground.

While it usually takes months to develop a curriculum, the events of COVID-19 called for a tool to be available as quickly as possible, especially as each implementer would have to find a way to adapt it to their own situation. In normal circumstances a curriculum would be piloted with participants and revised in multiple rounds where participants and other stakeholders would give feedback and some monitoring and evaluation would be conducted. In this case, given the lack of time to fine-tune the tool and the broad audience of an open-source resource, it was clear to the developers that these methods would not be feasible.

Additionally, releasing such a curriculum had potential reputational consequences for GRS; if it proved to be sub-standard, it would be tied to them very publicly. However, the desire to produce something that everyone could use outweighed the hesitations. While a fast-track publication process was a priority, keeping the participants safe remained the primary concern. Before making the tool available to everyone, GRS asked one question: "What is the risk? That the tool will not work or that it will have adverse effects?" The conclusion was that, at worst, the curriculum would not be particularly effective, so it was still worth releasing it. To make sure that it could do no harm, GRS eliminated all elements that could lead to misuse or

misinterpretation. For example, the first version of the tool (in the debunking myths section) contained a sentence about the virus having been created in a Chinese lab, which was intended as a false statement. This sentence was later removed because it carried the risk of being misinterpreted and reinforcing this rumour.

The development process

Despite wanting to share a curriculum quickly, GRS strived to ensure that they developed a good quality product. The curriculum developer first thought about creating a COVID-19 focused tool in March 2020, during work-related travels between Scotland and Rwanda. This started as a fun idea, but the rapidly changing situation soon made it a viable solution to problems being faced by the various implementing partners. The idea was presented to management and quickly approved.

From inception to completion, it took three weeks.

The first draft was developed over a weekend with a group of consultants who worked for free. The team started from a theoretical model that outlined outcomes and related processes and drew from existing resources and games. This was done in a design sprint, in which the team was exclusively focused on this task and could not get stuck, owing to the tight deadline. After the initial draft, everyone in the organization worked to move the curriculum through the pipeline in a speedy manner.

To ensure it would cause no harm the tool had to be validated. Because of the tight timeline and restrictions to field activities, it was not possible to conduct proper field testing, so GRS put in place a series of measures to ensure quality:

- **S4D experts' review:** The curriculum was reviewed both internally and externally by specialists in S4D. Some curriculum developers at GRS are former coaches themselves so brought a coaching point of view to the table, which enabled the team to ensure that the games would actually resonate with recipients.
- **Health experts review:** The CDC and the WHO were involved in the finalization of the curriculum to ensure that health messaging was in line with current recommendations.

- **Use of previously validated GRS games:** Previous evaluations had shown that the ‘fact–nonsense’ game² is effective in transferring knowledge to children and youth, so messages were adapted to fit the COVID-19 theme. Similarly, previous evaluations in Mauritius and Zimbabwe had concluded that the ‘handwashing’ game³ is effective in teaching hand hygiene, so it was also included in the new curriculum.
- **Borrowing games from partners:** The Aberdeen Football Club Community Trust (McHugh 2020), a partner in Scotland, had a game focusing on mental well-being and deep breathing, which GRS decided to use, given the stresses that children would be subjected to during the crisis. GRS also borrowed the ‘Do the 5!’ game from WHO.⁴

This curriculum is working as a platform and helps us at being better partners.

GRS partnerships manager

Support between partners

Because the situation was – and still is – very fluid, the SKILLZ COVID-19 RESPONSE curriculum was designed to be used in a number of contexts and therefore required supporting materials to ensure correct and easy implementation. The first materials that become available in March 2020 included:

- The curriculum (in multiple languages)
- An implementation manual (*see example in Figure 1*)
- Tips for facilitators
- An assessment survey.

An updated version was released in June/July 2020 and contained updates based on the feedback received and more up-to-date information.

GRS ensured continued support to implementing partners. Requests came in different forms; when a

partner was already familiar with GRS, they could, for example, ask to speak to a trainer to go through the curriculum to make sure they knew how to use it. Some would reach out regarding translations, either specifically requesting a language, offering to do a translation or advising on optimal context adaptation. For example, the Portuguese version of the curriculum now includes some slang from Angola and Mozambique.⁵ Others asked for support on how to set up social media groups or how to adjust the curriculum for radio facilitation (how do you make a conversation about handwashing interesting on the radio?).

Having an ongoing conversation on what is working and what isn’t has helped to ensure continued learning and GRS, as the creator of the curriculum, has been functioning as a platform through which experiences are shared. In addition to having a good knowledge of programmes across different countries and partners, GRS is able to bring in contact organizations with relevant expertise, instead of acting as an adviser itself. For example, one of the increasingly used channels of delivery for the SKILLZ COVID-19 RESPONSE curriculum is social media/digital platforms. Despite having some knowledge about this, GRS decided that it was not best placed to be guiding other organizations. As one of the partners in Kenya had been working through digital platforms since 2004, GRS made sure to introduce the two organizations for a direct exchange. In this way implementers in need of guidance could obtain direct support from an organization with relevant expertise. Instead of dictating what would work, GRS gave interested organizations an overview of what has been tried and how it worked, and connected them with experts who could help them.

How the SKILLZ COVID-19 RESPONSE curriculum was used

Before launching, the GRS team had three tracks of expectations about possible uses of the curriculum:

1. Partners already implementing GRS’s regular curriculum would integrate the COVID-19 curriculum into their normal programming.

Figure 1: Excerpt from the implementation manual with examples of text messages

SMS/WHATSAPP MESSAGES

Here are some example messages questions to send to players. Create and send short, simple messages that contain accurate information and action steps.

Wash your hands like a BOSS! Scrub your hands with soap and clean water for about 20 seconds. Sing “Happy Birthday” twice to help you count. Dry your hands on a clean towel or wave them in the air.

AHHHHH CHEWWW! Sneeze or cough into your elbow to prevent spreading germs. Take a photo of yourself sneezing like this. Send it to your friends and tell them why it’s important!

It’s OK to feel sad or anxious! Focus on things you CAN control, like washing your hands and staying at home. Reach out to friends and family members by phone or SMS. You are not alone!

Did you know that people touch their faces about 23 times an hour?! That’s too much! Touching our faces with unwashed hands can put us at risk of COVID-19. Try to avoid touching your face for a minute. Then try for an hour!

Try taking 5 deep breaths. It will help you feel more calm and focused.

We can do this! Follow the government’s instructions on social distancing, wash your hands (a lot!), and support each other.

Knowledge is POWER! To learn more about COVID-19 from the World Health Organization, send a message that says “hi” to +41798931892

2. Partners would use the COVID-19 curriculum as a stand-alone intervention relying on the coaches and the networks they already have, to promote healthy behaviours with more people.
3. Partners would use some of the critical messaging in the curriculum as stand-alone information to share, but not implemented as a curriculum per se.

GRS witnessed the above uses but also many more unexpected ones.

- **Video/radio:** In Kenya, a partner organization used the content from the SKILLZ COVID-19 RESPONSE curriculum to inform its animated sports-based COVID-19 video. In Nigeria, another partner organization used the COVID-19 curriculum to reach participants through public TV and radio spots, as well as through social media channels.
- **Songs:** Young people liked the positive tone of the curriculum, contrasted to the scary messaging in the news; one of the parts they enjoyed was the “no touch celebration and greeting” (i.e., a greeting that doesn’t involve physical contact). Young people also composed a lot of handwashing songs/anthems: for example, a group in Liberia wrote one called ‘Liberia Friday’.
- **Facebook Live:** Another unexpected application of the curriculum was the use of Facebook Live in Malawi by a local organization called YouthWave, whose coaches facilitated the curriculum via Facebook Live to reach youth participants as well as other community members with smartphones.
- **Government take-up:** In Malawi, the Ministry of Youth, Sport, and Culture, the Ministry of Gender, the Ministry of Health, and the Ministry of Education have promoted the SKILLZ COVID-19 RESPONSE curriculum as a best practice, as part of the national COVID-19 response focusing on adolescents and young people. Indeed, a pre/post assessment of 1391 adolescents who went through the curriculum showed increased knowledge about Covid-19.

Ongoing learning and improvements

Curriculum changes

Masks: When the first version of the curriculum was released, the WHO had not yet provided guidance on the use of face masks as a way to prevent the spread of COVID-19 among the general public. Since June 2020, the WHO has been recommending the use of face masks in public, so information and discussion about face masks has been included in the updated curriculum. Content includes basic facts on the purpose and efficacy of masks and addresses common misconceptions. The revised curriculum includes supplementary posters on how to make a fabric mask and an infographic showing the decreased risk of transmission as well as multiple ‘scenarios’ for participants to discuss and debate ‘real life’ issues related to face masks. Additionally, the ‘Do the 5’ game has been revised to include wearing a mask in public.

Supplementary materials: Interviews showed that partners appreciated supplementary materials, such as the examples of SMS/WhatsApp messages and posters that GRS had included in the implementation manual (see *Figure 1*). As a result, more message templates and simple guidance for partners to develop their own messages have been included in the second, updated, version of the manual. A supplementary page of ‘scenarios’ have been developed so participants can apply their knowledge on COVID-19 and make informed decisions. Several posters have been updated for partners to print, recreate on flipchart paper, or send via SMS/WhatsApp.

Physical distancing: While new WHO guidelines recommend physical distancing of two metres (approximately six feet) in public,⁶ there is some evidence that people may lack the spatial awareness needed to picture this distance. Messages on physical distancing have been updated and visual examples have been included to help participants improve their spatial awareness.

Misinformation: As myths and misinformation around COVID-19 continue to spread, implementing

organizations strongly recommended that the curriculum includes guidance on how to act safely when faced with misinformation. The revised curriculum now includes modified content from UNICEF's 'Voices of Youth' campaign (Voices of Youth n.d.) on addressing misinformation in Practice 2 (fact or nonsense), as well as a scenario on addressing misinformation.

Mental health: Overall, partners expressed appreciation that adolescent mental health was addressed in the curriculum. Some partners stressed the value of normalizing mental health and considered the breathing activities simple and beneficial. At the same time, there was general agreement that the part of the curriculum that focuses on mental well-being and face touching was confusing and should focus primarily on mental well-being. The curriculum has now re-focused this section and integrated updated definitions and explanations of mental well-being from the MindSet curriculum. The illustration for this practice has been revised so it looks 'less like yoga' and includes a clock showing 60 seconds.

Decision-making: Feedback from the first COVID-19 curriculum showed that participants were uncertain about assessing the risks associated with the virus. This suggested that they could benefit from a tool to help them assess the risks of participating in common activities based on intensity and time of exposure. GRS has now included a tool with several guiding questions that young people can use to reduce their risk and make healthy choices.

Sexual contact: The WHO review suggested that the language used may convey the message that COVID-19 is a sexually transmitted infection, so the language has been revised referencing the WHO adolescent Q&A resource.⁷

Online safeguarding: GRS staff strongly recommends addressing child safeguarding in the curriculum and this is something on which they provide extensive training in their regular curriculum. As not all aspects of safeguarding were fully addressed in the first COVID

curriculum, they modified the child safeguarding guidance to include more on general safeguarding best practices as well as guidelines specific to virtual communication as remote delivery may be new to many implementors.

On-the-fly updating

A challenge faced by the curriculum developers was that of new information regularly emerging; indeed, the changes illustrated here are examples of updates to the contents. The first curriculum did not talk about testing, treatment or masks, and to add such information, GRS would have needed to send out a new PDF which might not be readily adopted. To ensure that those using the curriculum always have access to the most up-to-date information GRS is exploring the use of a WhatsApp chatbot so that they can update 'on the fly' without having to change all the documentation.

Gaining insights for the future

Interviewed GRS staff noted some observations that may influence the way GRS operates in the future. This shows that experimentation in crisis situations may go on to strengthen organizational capacity. The main lessons are about:

- **Curriculum design:** Before COVID-19 GRS had been adapting its curriculum to specific contexts and developing many different curricula in collaboration with partners. However, the process of designing the COVID-19 response curriculum has shown them that this may not always be necessary. In the future, GRS will consider developing less detailed content and trusting partner organizations to adapt it as needed.
- **Remote delivery:** Experimentation with remote curriculum delivery and monitoring are likely to have a long-lasting impact on programme design. GRS staff suggested that hybrid delivery was likely to become more prevalent in their programming in the future. Further, this experience has highlighted the value of open-source platforms for remote delivery, which contrasts to their earlier model of partnering with other organizations and getting funding for a

specific project. In this open-source platform, which GRS aims to continue using, the curriculum can be adopted by anyone, without GRS having to get involved in funding and the adaptation process.

- **Online training:** GRS trained more than 16 organizations on the COVID-19 response curriculum through short, online 'onboarding' sessions, consisting of approximately four to eight hours of training over Zoom. This positive experience has meant that GRS plans to modify its training strategy to add remote training sessions, thus reducing travel, for training in the regular curriculum post-COVID – which was normally delivered in person.
- **Partner engagement:** Creating and disseminating an open-source curriculum has allowed GRS to connect in new ways with several organizations – both existing partners and new ones – across multiple countries. GRS normally works with partner organizations directly to train people to implement and adapt the curriculum as well as monitoring, evaluation and learning to the local context. The experience with the COVID-19 curriculum has shown GRS that acting as a platform connecting different organizations and allowing them to share best practices has been an effective way for organizations to adapt and implement their curriculum. This will influence how they work with partners going forward.

¹ Grassroot Soccer, 'M&E Is Not Your Enemy', 2016, <https://www.grassrootsoccer.org/wp-content/uploads/2016/04/ME-Strategy_FINAL-1.pdf>, accessed 5 May 2021.

² A game in which the facilitator reads a statement and participants have to say whether it is true (fact) or false (nonsense). At the end of each round the facilitator makes sure to properly communicate the correct answer.

³ A game in which players learn the steps to effective handwashing. They then identify times in their lives where they need to wash their hands and physically act out effective handwashing.

⁴ A game encouraging five healthy behaviours for prevention. More information can be found here: <www.who.int/mongolia/multi-media/item/do-the-5#>, accessed February 2021.

⁵ <www.grassrootsoccer.org/2020/04/28/teamwork-in-action-partners-come-together-for-rapid-translations-of-skillz-covid-19-response-curriculum/>, accessed February 2021.

⁶ Previous guidance was one metre/three feet.

⁷ WHO, 'Coronavirus disease (COVID-19): Adolescents and youth', Q&A, 4 May 2020, <<https://www.who.int/news-room/q-a-detail/coronavirus-disease-covid-19-adolescents-and-youth>>, accessed 5 May 2021.

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UNICEF Office of Research – Innocenti

Via degli Alfani, 58

50121 Florence, Italy

Tel: (+39) 055 20 330

Fax: (+39) 055 2033 220

florence@unicef.org

www.unicef-irc.org

@UNICEFInnocenti

facebook.com/UnicefInnocenti/

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