

2017-2018 RESEARCH & INSIGHTS REPORT



GRASSROOTSOCCER 

SELECT RESEARCH, IMPLEMENTATION & FUNDING PARTNERS



WELCOME

In 2017, we celebrated a milestone: Grassroot Soccer has now reached over 2 million young people in nearly 50 countries with life-saving health programmes. This achievement has only been possible with the support of donors, advisors, and research partners like you.

The last 15 years have seen profound gains in global public health, including in the response to HIV and AIDS. But adolescents continue to be left behind. While mortality for children and adults has declined over the last decade, it hasn't improved enough for adolescents. Young people face the most acute combination of preventable diseases and disorders of any age group in the world — yet many organizations lack the tools to reach them.

This is where Grassroot Soccer comes in. We are uniquely positioned to address the adolescent health gap, combining the appeal of soccer with a rigorous, evidence-based approach.

In 2017, we reached more youth than ever — over 200,000 — achieving 45% growth between 2016 and 2017. We are proud to have partnered with research institutions and non-profits from 6 different countries, presented at 10 international public health conferences, and been involved with 16 studies since 2016.

This research has deepened our understanding of what works and strengthened our linkages to health service providers. Our involvement in research keeps the perspectives and needs of participants at the forefront, and ensures that intentional, adolescent-centered design is the core of our approach.

We're humbled that Grassroot Soccer has played a part in the lives of so many young people, and that we can work alongside leading researchers and non-profits contributing to the global evidence base on adolescent health.

Thomas S. Clark, MD, Founder & Chief Executive Officer
Chelsea Coakley, Director of Research, Curriculum & Innovation



OUR MISSION



SKILLZ Coach and participants, Lusaka, Zambia / Photo Credit: Slingshot Media

Grassroot Soccer (GRS) is an adolescent health organization that leverages the power of soccer to educate, inspire, and mobilize youth in developing countries to overcome their greatest health challenges, live healthier, more productive lives, and be agents for change in their communities.

CHALLENGE

“The world is about to undergo an unprecedented transformation: the largest generation of young people in human history is coming of age.” - Melinda Gates, May 2017

There are more adolescents in the world than ever before (1.8 billion), and they face unprecedented social, economic, and health challenges. Young people in sub-Saharan Africa face the most acute combination of health issues of any population in the world. HIV, unwanted pregnancy, and gender-based violence (among other issues) are undermining a population that is projected to double by 2050. While childhood mortality has improved 80% in the past 50 years, adolescent mortality hasn't budged. The evidence is clear — adolescents are being left behind.

Yet the future depends on young people having the tools to lead healthy and productive lives. The Lancet Commission has estimated that every dollar invested in adolescent health yields a 10x economic return.

Now is the time to invest in what works.

OPPORTUNITY

At Grassroot Soccer we reach adolescents through the universal appeal of soccer, engaging adolescents through proven soccer-based curricula, caring mentor coaches, and a culture that encourages safe spaces for vital conversation. GRS is unique among adolescent health organizations. We have a deep understanding of soccer (the “hook”) and our access to the world of soccer is enviable and unusual. At the same time, research, evidence, and information are at the core of what we do. GRS programs are infused with soccer activities and metaphors — which makes them fun and engaging — but are also rigorously evaluated and evidence-based. We know that data is critical to improving programmes and getting as much impact with every dollar as possible.

OUR IMPACT

ASSETS



INCREASED HEALTH KNOWLEDGE AND THE CONFIDENCE TO USE IT

ACCESS



INCREASED UPTAKE OF HIGH-QUALITY HEALTH SERVICES

ADHERENCE



ADHERENCE TO MEDICAL TREATMENT, THERAPY, AND HEALTHY BEHAVIOURS

OUR MODEL

CURRICULUM



SKILLZ SOCCER-BASED HEALTH CURRICULUM

COACHES



CARING ADULTS AND MENTORS

CULTURE



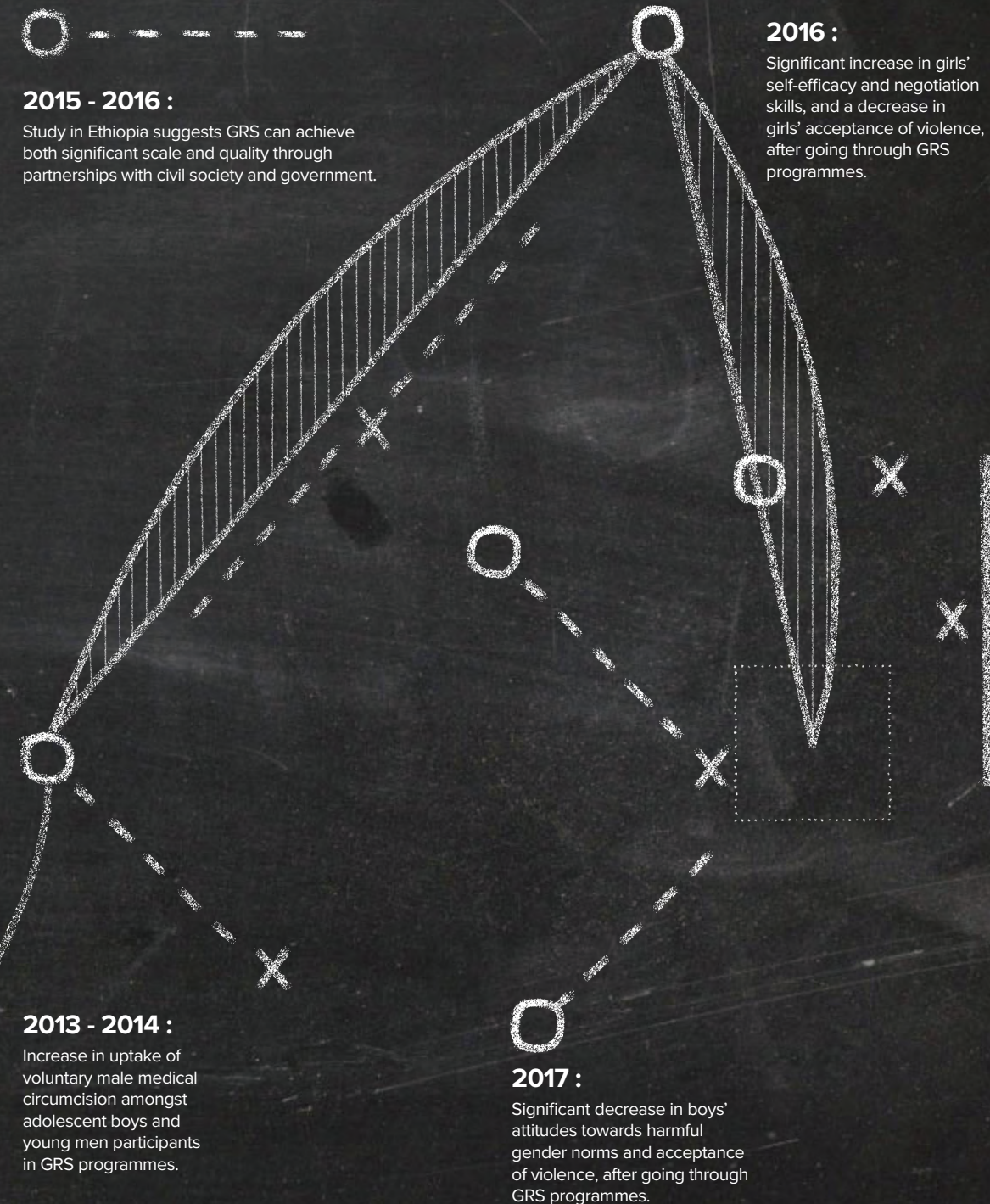
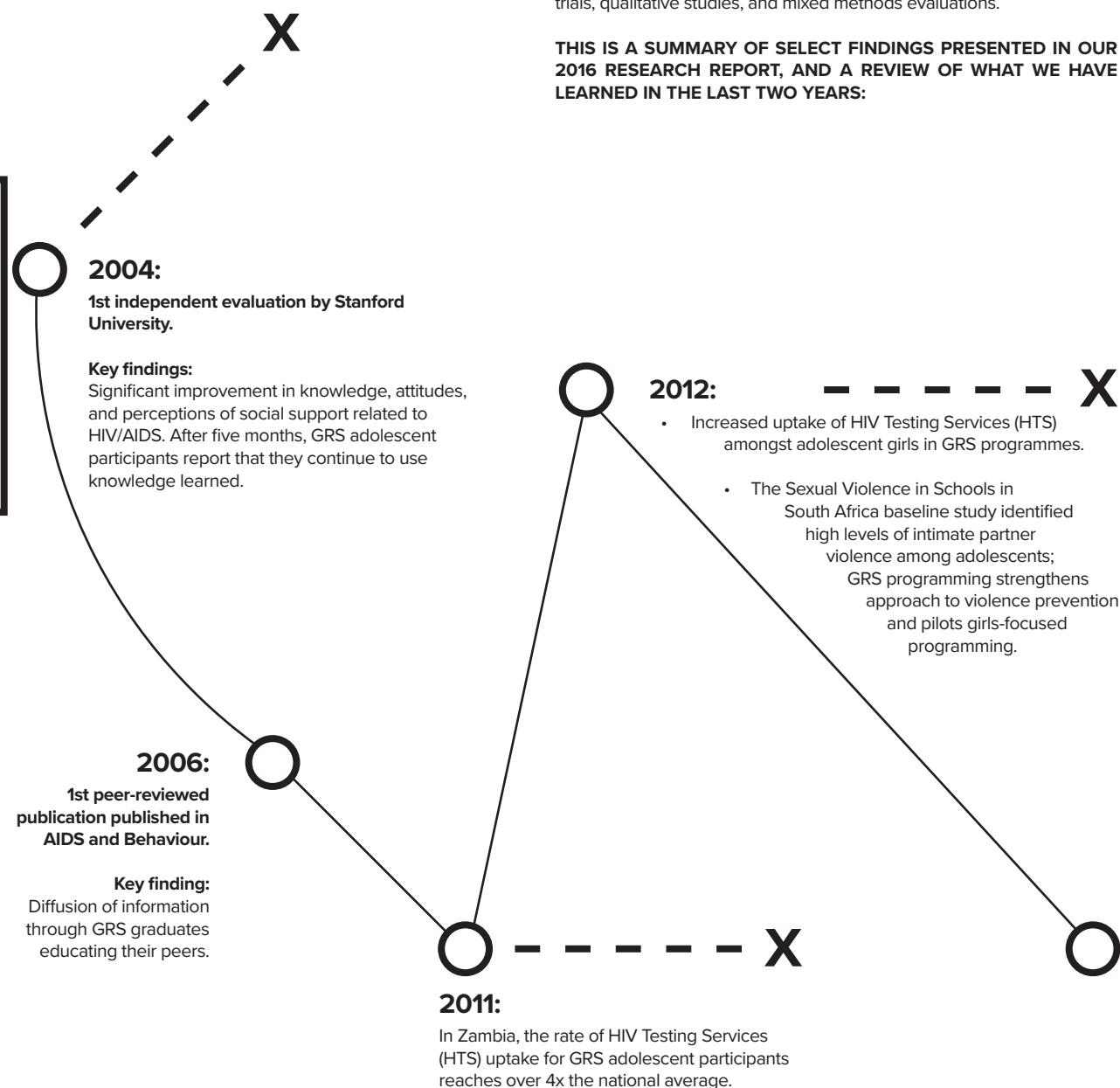
VITAL CONVERSATIONS, SAFE SPACES, INSPIRATION, AND FUN

GRS RESEARCH TIMELINE

Grassroot Soccer conducts research as systematic investigation into programme delivery impact. Our research goals are clear: to gain a deeper understanding of the complex issues we seek to address, inform our organisational development, establish credibility for our efforts, and contribute more broadly to existing evidence of effective adolescent health interventions. This report demonstrates the ways in which Grassroot Soccer is standing beside youth on HIV, AIDS, malaria prevention, positive youth development, sexual and reproductive health, and gender-based violence.

In collaboration with a variety of research institutions and funders, Grassroot Soccer has participated in 40 research studies since 2005, including three randomised controlled trials (RCTs), in 24 countries and has utilised a variety of research methods, including cluster-randomised trials, qualitative studies, and mixed methods evaluations.

THIS IS A SUMMARY OF SELECT FINDINGS PRESENTED IN OUR 2016 RESEARCH REPORT, AND A REVIEW OF WHAT WE HAVE LEARNED IN THE LAST TWO YEARS:



ASSETS



**INCREASED HEALTH
KNOWLEDGE AND THE
CONFIDENCE TO USE IT**

“

**IT'S OUR PASSION TO CHANGE
THE LIVES OF YOUNG PEOPLE
AROUND US SO THAT THEY,
TOO, CAN CONTINUE TO MAKE
POSITIVE CHANGE FOR THOSE
AROUND THEM.**

”

- GRASSROOT SOCCER SKILLZ COACH

GIRLS

BUILDING THE **ASSETS** OF ADOLESCENT GIRLS:
KEY TO EMPOWERMENT AND FUTURE PLANNING

55%

of GRS participants globally are girls

To date, **1.1 million** adolescent girls have participated in GRS programmes globally

The SKILLZ asset-building approach meets the unique needs of adolescent girls, who are at higher risk of HIV infection than their male peers. The SKILLZ approach fosters girls' empowerment, promotes awareness of sexual and reproductive health, increases access to medical, legal and psychosocial services, and prepares girls for their future.

It means a lot to me to be a part of the Grassroot Soccer team. I am dedicated to building a new South Africa, a team that will prevent HIV by all means. People are dying out there, so why should I watch people die?

Let me be part of this team that is making progress, something I see that is working. To attract the youth, bring them all together, and share knowledge, share what we have. This is how we can build a new generation that will be free from HIV.

- Grassroot Soccer SKILLZ participant

2017

ADOLESCENT GIRLS

UPTAKE OF HIV TESTING

3X INCREASE IN HIV TESTING AS WELL AS AN INCREASE IN READINESS TO TEST

After going through SKILLZ Health, adolescent girls:

- + Reported increased self-efficacy and increased negotiation skills
- + Reported increased ability to disclose and have discussions about relationships and violence
- + Are more aware of available health, HIV, and violence-support services
- + See trust and support as important parts of relationships
- + Are less likely to justify violence against adolescent girls and young women



SOURCE: GRS studies from South Africa, Zimbabwe and Nigeria with support from UCLA, Bill & Melinda Gates Foundation and Barclays

ASSETS - GIRLS

BUILDING THE ASSETS OF ADOLESCENT GIRLS:
KEY TO EMPOWERMENT AND FUTURE PLANNING



I tell my friends messages from our Coaches, like how to behave, how to prevent yourself from getting HIV and other diseases, and how to treat other people.

We must treat each other equally and love each other like we love ourselves. I think all young girls should be part of the Grassroot Soccer programmes so as to learn about these topics in a fun and safe way.

- Grassroot Soccer SKILLZ Participant

Grassroot Soccer’s sport-based programming empowers girls to seek sexual and reproductive health services and provides a safe space to address sexuality and relationship issues as well as harmful gender norms, and to learn about the social and structural drivers of violence against women and girls.

The use of soccer language makes concepts such as HIV, sex, and gender awareness accessible, fun and non-threatening. The pairing of the participants with a Coach in their peer group, although slightly older, has proven to be powerful as it opens up safe spaces for the participants to talk about sex, sexuality, gender, pregnancy, and HIV.

SKILLZ Health for Girls is an intervention designed for girls, led exclusively by female GRS Coaches, that uses soccer as a tool to engage adolescent girls. The program combines sport-based activities with a sexual and reproductive health-focused curriculum that explores the ways in which their bodies are changing throughout puberty, incorporates gender awareness, fosters healthy equitable relationships, and addresses unintended pregnancy, contraception, and HIV prevention. This unique approach provides a platform for young girls to develop their soccer skills and participate in a sport seen as a ‘male domain’, while building critical life skills, a sense of solidarity and support in a team environment that is affirming and encouraging of pro-social behaviour.

HIV and SRH-related knowledge

In multiple studies, GRS measured self-reported changes in attitudes, communication, and knowledge amongst adolescent girls in SKILLZ programmes, at pre-intervention and post-intervention. Adolescent girls reported overall improvements in attitudes, communication and knowledge. This increase signals the positive effect of presenting information about HIV to participants using an interactive, informative and sport-based methodology, as participants are able to process information about HIV and SRH in a non-threatening and fun way.

The largest increases were reflected in communication, which signified increased self-efficacy and agency among participants, resulting in confidence to speak to peers, parents and guardians regarding topics discussed during SKILLZ interventions. In turn, the increased communication signifies the positive effects of creating safe spaces for adolescents to discuss sensitive topics with the support of Coaches.

Gender-Equitable Relationships

SKILLZ programming for adolescent girls proved to be beneficial in helping girls leave physically and emotionally abusive relationships and choose to be in relationships that contained greater levels of gender equality. Adolescent girls understood trust and support to be fundamental to healthy relationships. As girls showed significant increases in self efficacy, their beliefs with regard to gender equitable relationships also improved, and the confidence gained to communicate their beliefs and challenges may have led to their choice of more gender equitable relationships. Findings from a qualitative study suggested that some girls left physically and emotionally abusive relationships and some chose to be in relationships that contained greater levels of equality. Research does not indicate exactly what informed their choices, but possible explanations could involve a shift in beliefs regarding gender-equitable relationships as well as improved self-concept and self-efficacy.

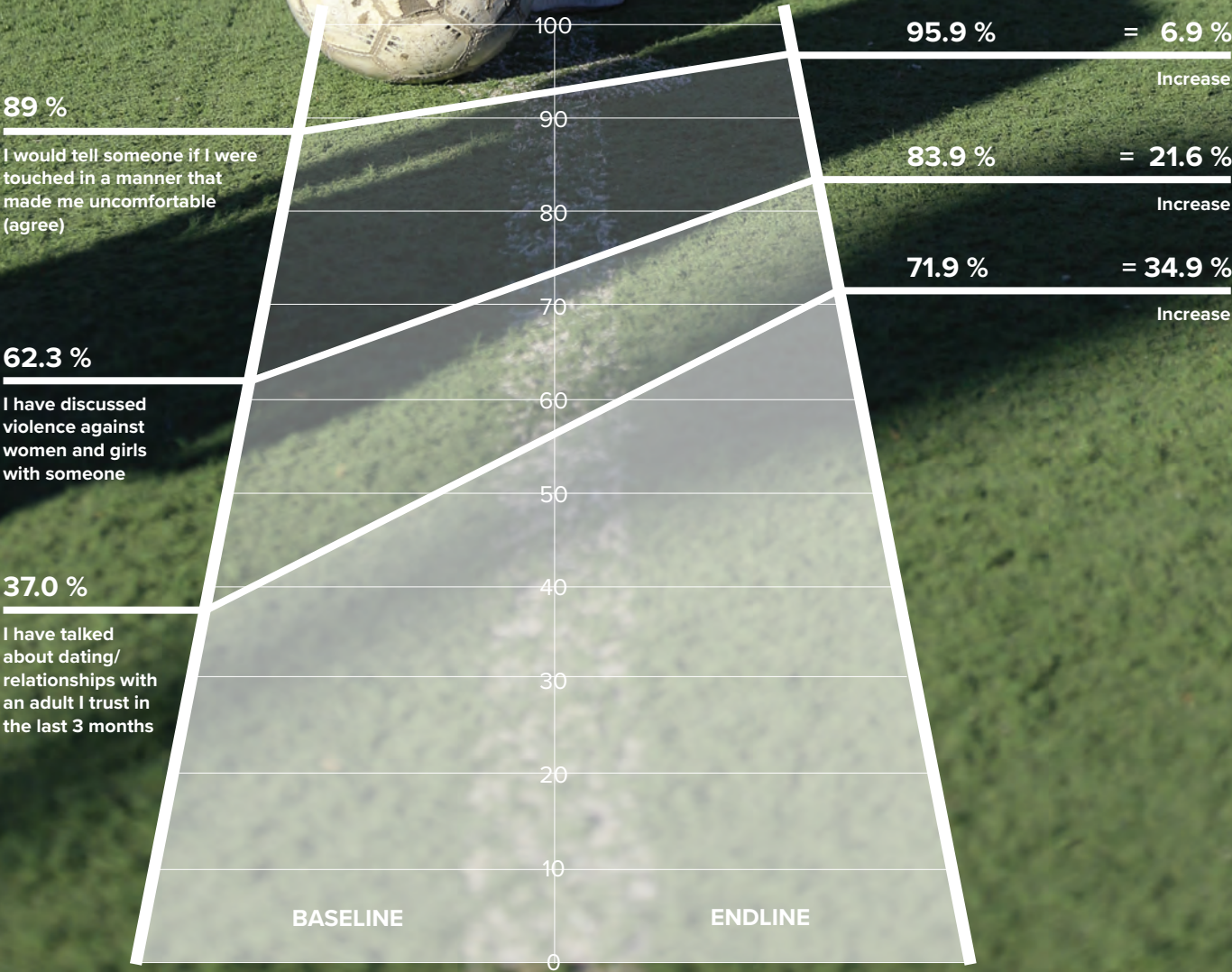
Violence Against Women and Girls

By developing adolescent girls’ assets and understanding of power dynamics in relationships and their rights, GRS programming for adolescent girls resulted in fewer girls justifying violence against women. Although challenges still exist in addressing the root cause of violence, adolescent girls in SKILLZ programmes were able to break the silence and confidently communicate with parents regarding violent relationships, receive support from parents and increase their awareness of services available within their community.

2017

ADOLESCENT GIRLS

ABILITY TO DISCLOSE AND HAVE
DISCUSSION AROUND RELATIONSHIP
AND VIOLENCE



ASSETS - GIRLS

BUILDING THE ASSETS OF ADOLESCENT GIRLS:
KEY TO EMPOWERMENT AND FUTURE PLANNING



Conference Presentations, Publications & Ongoing Studies	Title	Method	Results
2017 South African AIDS Conference, Durban & 2017 International AIDS Society Conference on HIV Science, Paris (two separate abstracts)	Changing the game for girls: results from a mixed methods longitudinal study of a soccer-based HIV and SGBV prevention programme for adolescent girls in South Africa	Baseline and endline questionnaires were administered to girls (n=146, average age = 13.6) in two intermediate and two secondary schools in Soweto over an 18-month period. Project monitoring data were collected, including uptake of HIV testing and disclosure of experiences requiring follow-up. An external evaluation investigated quantitative results through rapid ethnographies, focus group discussions (n=6) and interviews (n=19) with staff, coach mentors, SSP participants as well as male participants in mixed-sex GRS programmes.	89% of girls reported intimate partner violence (IPV) as unacceptable versus 70% at baseline. Some girls chose to leave abusive relationships, complemented by reported decreases in justification and experiences of IPV. HIV testing uptake (ever tested for HIV and tested for HIV in last 3 months) increased from 12.3% to 43.9% and from 4.8% to 27.4% respectively. Girls reported greater confidence, self-efficacy, and improved decision making, while disclosure of violence doubled from baseline to endline.
	Gender Norms; Sexuality and Sport for Development: Challenges Faced by Adolescent Girls When Participating in a Soccer-Based Life Skills Programme in Khayelitsha, South Africa	Qualitative study based on interviews, focus groups, semi-structured observations, and field notes.	Barriers to access: teachers indicated that girls who want to play soccer face no barriers in doing so, one saying that "nowadays everyone knows that what a boy can do, a girl can do it too". However, this sentiment seems disconnected from the reality that few resources are invested in girls' soccer, community support is limited, and a lack of necessary structures and infrastructure persist — all of which hinder girls' access to soccer. Policing Sexuality: based on interviews with teachers, the idea that playing a sport 'for males' might have an impact on how girls think of their sexuality is a significant barrier for girls who want to play soccer. Participants stated reasons for quitting the programme, indicating feelings of shame for not playing well, beliefs that they would become tomboys, and beliefs that girls cannot play soccer. Results indicate culturally and self-imposed gender stereotypes, which go beyond the soccer field into other areas of life.
2016 International AIDS Conference, Durban (Ford Foundation) & Sexual Violence Research Initiative website, 2017 (StoryCenter)	Supplementing Social Learning Theory with Communication for Social Change Techniques: A Mixed-Methods Approach to Sexuality Education and Gender-Based Violence Prevention (Jenn Warren Communications)	Focus groups, in-depth interviews, participatory digital storytelling workshop	Co-creation and sharing of knowledge between workshop participants and facilitators; increased self-awareness, self-confidence and reflection amongst young women; increase in digital literacy, storytelling, and audio/visual skills; and increase in understanding of, or introduction to, digital media and communication, activism, and social change.

Conference Presentations, Publications & Ongoing Studies	Title	Method	Results
Journal of Evaluation and Planning - 2018 (Brown University, University of North Carolina)	Linking at-risk South African girls to sexual violence and reproductive health services: A mixed-methods assessment of a soccer-based HIV prevention program and pilot SMS campaign	Mixed-methods assessment of preliminary outcomes and implementation processes in three primary schools in Soweto, South Africa, from August-December 2013. Quantitative methods included participant attendance and SMS platform usage tracking, pre/post questionnaires, and structured observation. Qualitative methods included 6 focus group discussions and 4 in-depth interviews with program participants, parents, teachers, and a social worker.	Of 394 female participants enrolled, 97% (n=382) graduated, and 217 unique users accessed the SMS platform. Questionnaires completed by 213 participants (mean age: 11.9, SD: 3.02 years) alongside qualitative findings showed modest improvements in participants' perceptions of power in relationships and gender equity, self-esteem and self-efficacy to avoid unwanted sex, communication with others about HIV and sex, and HIV-related knowledge and stigma. The coach-participant relationship, safe space, and integration of soccer were raised as key intervention components.
Ongoing study (Wits Reproductive Health Institute, PATH, Sonke Gender Justice)	Girls Achieve Power (GAP) Year: Using sport to empower girls at critical time of adolescent transition	Two-arm cluster randomized controlled trial (cRCT) with three time point repeated measurement of outcome variables at baseline (12 months), post midline (12 months) and end line (24 months) of follow-up. The primary objective is to assess learner dropout as they transition through high school, and secondary objectives include assessing whether the intervention increases girls' access to social, health, and educational assets.	Study underway
Ongoing study (Desmond Tutu HIV Foundation)	Goals for Girls: Evaluating the feasibility, acceptability, and impact of integrating an in-school sexual and reproductive health (SRH) education programme with an after- school sport-based programme on SRH health outcomes amongst adolescent girls (aged 14-17 years) in Cape Town, South Africa.	Cluster randomized controlled trial using mixed biomedical, quantitative, and qualitative methods will be used to determine programme feasibility and acceptability, impact on SRH outcomes (including pregnancy, HIV and sexually transmitted infections), uptake of health care services, and impact on school attendance, both immediately post-intervention and 6 months later.	Study underway
2018 International AIDS Conference, Amsterdam (Zimbabwe National University of Science and Technology)	Outcome evaluation of Grassroot Soccer-Zimbabwe SKILLZ for youth programmes (2011-2017)	Mixed methods evaluation to explore the relevance, efficiency, effectiveness, utility, and sustainability of three GRS SKILLZ Health programs: Generation SKILLZ, SKILLZ Holiday, and SKILLZ Street. Quantitative methods included self-administered pre/post-intervention survey, where outcomes from 2017 were compared to previous years of program implementation. Qualitative methods included 10 focus group discussions with adolescents and 2 with coaches, as well as in-depth interviews with teachers, parents/guardians, and partner organizations.	Quantitative data was collected from 392 adolescents, showing a large gap in HIV and SRHR knowledge levels between female and male participants (mean 69.3% compared to 30.7%). There was a significant (p<.001) increase in self-efficacy in resisting unwanted sex and negotiating safer sex practices; of 18.5% of participants who reported having had sex, 41.7% reported using male condoms to prevent STIs and pregnancy. Evaluation results demonstrate the relevance, efficiency, and effectiveness of GRS Zimbabwe programmes.

“The programmes have taught me how to be mindful of my health and how I carry myself as a young person.

I learnt a lot on puberty and the knowledge will help me understand my changing body.”

- Grassroot Soccer SKILLZ Participant



BOYS

BUILDING THE ASSETS OF ADOLESCENT BOYS:
KEY TO ENGAGEMENT AND RETENTION

45%

of GRS participants globally are boys

To date, **900,000** adolescent boys have participated in GRS programmes

Building assets through SKILLZ ensures adolescent boys participate in critical discussions about what it means to be a man, take small steps to achieve their goals, stay strong when faced with challenges, and support each other to be positive male role models in their communities.

“I had two girlfriends before SKILLZ came to our school. I was into a sexual relationship with the two. Having two girls was so prestigious and made me a jack of all trades at the campus. I felt like a king in other ways. After SKILLZ, I have learnt that having more than one sexual partner increases the risk of HIV transmission. I have since dropped all the two and refocused my vision to school, for education indeed is the key to success. The risk of having two partners would easily have landed me into STIs and possible be a father at a tender age. I do not think school would be so dear again if I was to be a father. “Risk factor,” a topic in one of the practices, helped me change my way of living. [I] am ready to go for an HIV test for that is where my future begins.”

- Grassroot Soccer SKILLZ Participant

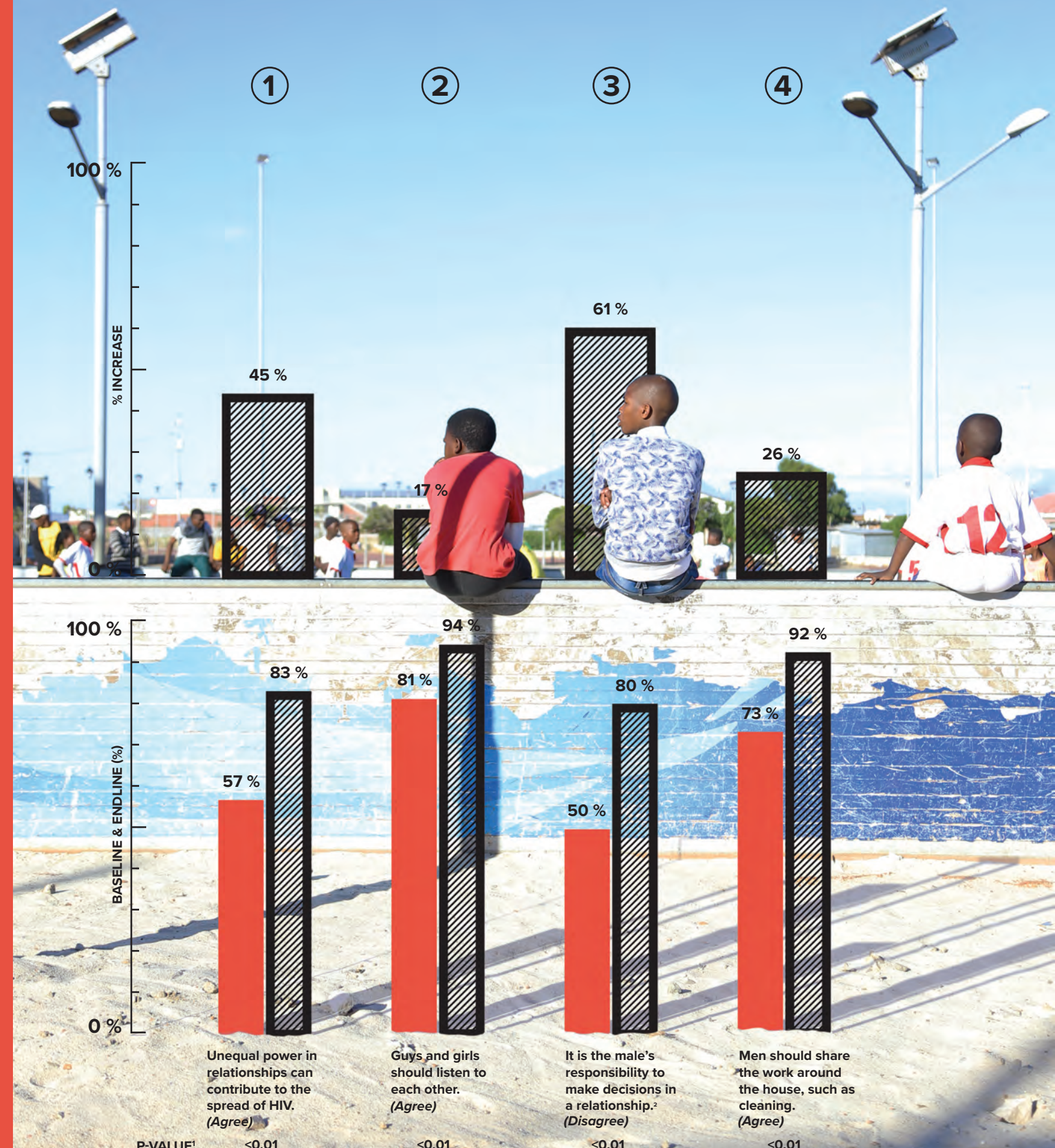
¹ A P-Value indicates there is a statistically significant difference between scores at baseline and endline.
² % who expressed gender-equitable response.

2017 - 2018

ADOLESCENT BOYS & YOUNG MEN

CHANGES TO VIEWS ON GENDER EQUALITY

CHANGES IN FAVOURABLE RESPONSES TO PRE- AND POST-TEST STATEMENTS ABOUT GENDERED RELATIONSHIPS



ASSETS - BOYS

BUILDING THE ASSETS OF ADOLESCENT BOYS:
KEY TO ENGAGEMENT AND RETENTION



SKILLZ Health for Boys uses different intervention designs in both mixed and single-sex settings. Our 3C model has proven to create meaningful changes in the lives of young men and adolescent boys in diverse contexts and towards a range of health and development outcomes. Using football as a hook seems especially appropriate for young men and boys – football is a platform already used by young men and adolescent boys, and often builds on their existing identities and preferred styles of acting and communicating.

Shaping gender norms among very young adolescent boys
Studies from Nigeria and South Africa have highlighted the potential of single-sex interventions for very young adolescent boys (10-14) to shift harmful gender norms. In South Africa, a 7-session SRH and gender norms intervention for adolescent boys (mean age = 13.88) found significant improvements to gender equitable views (n=974).¹

Transferable skills
Multiple studies² with young men and adolescent boys have found that the 3C model is particularly effective at providing an experience that develops important skills or competencies that apply to different life events and may enable outcomes. Using a mix of evaluation designs, we have found significant improvements to participants' future orientation, communication skills, positive self-image, and self-control/discipline

Meaningful relationships with male mentors
Findings from a process evaluation of a sport-based voluntary medical male circumcision (VMMC) demand creation intervention in Zimbabwe found that the coach-participant relationship was the key factor in increasing participants' motivation to undergo VMMC, especially among younger male participants.

The GRS sport-based VMMC demand creation intervention has been recognised by the Bill & Melinda Gates Foundation as one of the most innovative and effective VMMC interventions for young men and boys, recognized by PEPFAR in COP 2017 Guidance as a "Country Example of Priority Interventions for Preventing New Infections Among Adolescents and Young Adults Under 30", recently highlighted by UNAIDS' 2017 World AIDS Day Report "Addressing a blind spot in the response to HIV — Reaching out to men and boys", and selected as the "Best Demonstrated Impact" winner in the Optimizing Prevention Technology Introduction on Schedule (OPTIONS) Consortium Demand Creation Challenge.

1 RESULTS FROM TWO CRTs IN ZIMBABWE



BASELINE: 4.6 % 12.2 % INCREASE ENDLINE 12.2 %

Results from three studies

ZIMBABWE



1 Two cluster-randomised trials of a sport-based voluntary male medical circumcision (VMMC) intervention in Bulawayo, Zimbabwe produced promising evidence of its effect, especially among school-going youths, finding strong evidence that the intervention increased VMMC uptake nearly threefold, from 4.6% to 12.2%.

UGANDA



2 A modified sport-based voluntary male medical circumcision (VMMC) intervention delivered in-school to adolescent boys (mean age = 16) found that 55% of uncircumcised participants registered for Safe Medical Circumcision, with 23% undergoing circumcision by the end of the study. 26% of male participants were also vaccinated to prevent other health issues, highlighting the potential of integrating health services or using medical male circumcision as an entry point to other health services.

Access to health education and health services for hard-to-reach young men and boys
Using football structures and sport-based education, GRS found that its soccer-based intervention to promote healthy living pro-social behaviours among unemployed men (18-25) recruited from local taverns was highly acceptable and resulted in reduced violence towards women, crime, and drug usage compared to a control group.

2 RESULTS FROM A FEASIBILT Y STUDY IN UGANDA



0 % 23 % 26 % 55 % 100 %

“

IT WAS A NORM ON FRIDAY
AND SATURDAY TO GO WITH
FRIENDS TO THE TAVERNS
AND BINGE ON ALCOHOL.
BUT DURING [SKILLZ] WE
HAD SOMETHING TO KEEP
US BUSY, AND THAT ALSO
KEPT US FROM WAYWARD
ACTIVITIES.

”

¹[Publication under development] HIV prevention and SRH education on the football pitch: results from a mixed-methods evaluation of an HIV prevention program delivered to adolescent boys by football coaches.
²Banda, DeCelles, Peacock-Villada. (2007). Grassroot Soccer Resiliency Pilot Program: Building resiliency through sport-based education in Zambia and South Africa. Afterschool Around the Globe: Policy, Practices, and Youth Voice.

ASSETS - BOYS

BUILDING THE ASSETS OF ADOLESCENT BOYS:
KEY TO ENGAGEMENT AND RETENTION



Conference
Presentations,
Publications &
Ongoing Studies

Title	Method	Results
Journal of Acquired Immune Deficiency Syndromes - 2016 (London School of Hygiene and Tropical Medicine, Brown University, National University of Science and Technology)	Process Evaluation of a Sport-Based Voluntary Medical Male Circumcision Demand-Creation Intervention in Bulawayo, Zimbabwe	Two cluster Randomised Control Trials (RCTs), were conducted along with 17 interviews and 2 focus group discussions with coaches and 29 interviews with circumcised (n = 13) and uncircumcised participants (n = 16). Findings demonstrate high program acceptability, highlighting the coach-participant relationship as a key factor associated with uptake. Specifically, participants valued the coaches' openness to discuss their personal experiences with VMMC and the accompaniment by their coaches to the VMMC clinic.
PLoS ONE - 2017 (Uganda Virus Research Institute, London School of Hygiene and Tropical Medicine, WHO)	Soccer-based promotion of voluntary medical male circumcision: A mixed-methods feasibility study with secondary students in Uganda	A mixed-methods (quantitative and qualitative) approach was used to explore the feasibility and acceptability of a soccer-based VMMC intervention in Uganda. 210 boys were enrolled in a cross-sectional survey. 59% of boys reported being circumcised already; findings showed high levels of knowledge and generally favourable perceptions of circumcision. Initial implementation resulted in uncircumcised boys (10.3%) becoming circumcised. Following changes to increase engagement with parents and schools, uptake improved to 26.1%. In-depth interviews highlighted the important role of family and peer support and the coach in facilitating the decision to circumcise. The study showed the intervention may be effective; since it is time-intensive, further work is needed to assess the cost-effectiveness of the intervention conducted at scale.
2018 International Social and Behaviour Change Communication Summit, Nusa Dua (Youth Empowerment and Development Initiative)	Changing gender norms, improving health: a sport-based sexual and reproductive health programme in Lagos, Nigeria	YEDI and GRS designed and pilot-tested SKILLZ Guyz, an SRH and gender transformative life skills intervention for adolescent boys. The programme uses soccer metaphors to build self-efficacy, challenge risky behaviors, and encourage participants to become positive role models. Leveraging the power of soccer is an innovative approach expanding the potential to engage boys who may not otherwise participate in SRH and gender programming. To date, 796 participants completed the programme with a 92% graduation rate (attending at least 7 out of 11 sessions). Overall pre/post questionnaire results showed a 26% increase in attitudes, communication, and knowledge – and large gains specifically on gender equitable norms, self-efficacy, knowledge of reproductive health, and risk of multiple concurrent partners. Findings from this study will inform intervention revisions and research methods for a rigorous mixed-methods evaluation starting in 2018 (see ongoing study below).
Ongoing study - 2018 (Youth Empowerment and Development Initiative, Nigeria Institute of Medical Research)	Using a sport-based Intervention to improve sexual and reproductive health including health-seeking behaviours among adolescent males in Lagos, Nigeria	A convergent parallel mixed methods design will be used to gain a deeper understanding of the effectiveness of the intervention. The qualitative methods will include focus group discussions and in-depth interviews, providing deeper understanding of the processes related to planning, training, implementing, monitoring, and reporting on intervention activities. Quantitative data will include self-administered questionnaires, standard routing monitoring data on fidelity, and uptake of HIV testing. Study underway
2018 International AIDS Conference Society, Amsterdam (South African Football Association)	HIV prevention and SRH education on the football pitch: results from a mixed-methods evaluation of a HIV prevention programme delivered to adolescent boys by football coaches	Participants (mean age = 13.8) completed a 17-item questionnaire at baseline (September-December 2016, n=974) and immediately after the intervention (March-May 2017, n=974). Focus group discussions (FGDs) were conducted with participants (n=1) and coaches (n=1) and in-depth interviews (IDIs) were conducted with GRS staff (n=2) and LFA administrators (n=1). All questionnaire items showed significant improvements pre- to post-intervention. The largest changes were seen in items about communication about HIV with friends, gender equitable decision-making responsibility in relationships, and drinking alcohol increasing HIV risk. Larger changes were seen in older participants (ages 14-17) in items pertaining to decision-making responsibility in relationships and attitude toward people living with HIV. Qualitative data found unanticipated improvements to communication and discipline on the football pitch. These findings suggest that local football structures may be under-utilised in reaching adolescent boys. The intervention and delivery channel present opportunities for scale and merit more rigorous, longer-term evaluation.

2017 - 2018

ADOLESCENT BOYS & YOUNG MEN

KNOWLEDGE OF HEALTH RISKS
ASSOCIATED WITH MULTIPLE
CONCURRENT PARTNERS

An improvement of 23% was observed.

After going through SKILLZ Health, adolescent boys and young men:

- + Are 2.5x more likely to circumcise
- + Are more likely to test for HIV
- + Report large gains in knowledge about and healthier attitudes towards reproductive health, gender-equitable beliefs, and gender-based violence
- + Are less likely to perpetrate violence against adolescent girls and young women
- + Are more willing to test for alcohol and drugs, and less likely to test positive for drugs while enrolled in SKILLZ Health



COACHES

DEVELOPMENTAL JOURNEY OF COACHES

In South Africa > 65% of 18-25-year-olds are unemployed

This is caused by a faltering education system that limits knowledge and skills development, systematic economic and social exclusion of those historically disadvantaged, as well as unequal access to training, networks, and resources to find employment.

Grassroot Soccer (GRS) SKILLZ Coaches come from the communities GRS works in and are 19-30 years old. Their Coach Development Journey includes:

- Training and mentorship to ensure high quality delivery of SKILLZ Health programmes for adolescents
- Structured and supervised work experience
- A Coach Development Programme, which shows an increase in agency and leadership skills and a drastically increased likelihood of accessing employment or further study opportunities beyond their two years with GRS. In turn this journey that SKILLZ Coaches undertake contributes to decreasing the impact of many of the societal and economic drivers leading to high levels of HIV and gender based violence in their own lives and close family networks.

Delivering SKILLZ Health is at the core of what GRS does in terms of our approach to adolescent health and is the vehicle through which our Curriculum, Coaches, and Culture are shared with adolescent participants. It is also a vital aspect of the journey SKILLZ Coaches embark on towards their own development and ultimately becoming confident, independent, and employable individuals. During the delivery of SKILLZ, Coaches gain valuable work experience that will contribute greatly towards this. It includes planning skills, engaging stakeholders, scheduling sessions, facilitating learning and discussion, working in a team, monitoring and evaluation skills, resilience, and problem solving, amongst other skills. All of which takes place under supervision and with support, structured for them by GRS staff. This gives SKILLZ Coaches the opportunity to experience aspects associated with the broader world of work, but within a safe environment.

RESULTS

Results from a longitudinal study of the first cohort of coaches to complete the GRS Coach Development programme demonstrated a significant increase in self-esteem, future orientation and planning, financial skills, community leadership, and computer literacy.

In comparison to the national average on youth unemployment in South Africa, these findings suggest that the combination of training, work experience, and a formal Coach Development programme has a positive impact on the lives and futures of SKILLZ Coaches.

This programme has been implemented comprehensively in South Africa, and at a small scale in Zambia, Zimbabwe, and in GRS partner organisation Youth Development and Empowerment Initiative (YEDI), in Nigeria.

“

It's difficult to believe in yourself if people can't believe in you, so we first believe in those kids. We show them that they are important and whatever they want to achieve, they can do it, there is no limit. Low self-esteem is dangerous.

- Grassroot Soccer SKILLZ Coach

”

2017 - 2018

THE COACHES

PERCENTAGE OF SKILLZ COACHES WHO HAVE OPENED THEIR OWN BANK ACCOUNT AND HAVE GRADUATED INTO FURTHER EDUCATION OR EMPLOYMENT

Additional Findings

- + SKILLZ Coaches are not only crucial implementers of sexual and reproductive health curricula, but are the next generation of community leaders and change agents.
- + Structured work and skills development, combined with the use of sport-based methodology, may offer an innovative and evidence-based manner in which to tackle the twin, interrelated epidemics of HIV and youth unemployment.
- + Favourable results in health knowledge, community leadership and employability amongst SKILLZ Coaches were also observed.
- + Coaches gain Social Return on Investment which is a calculation that determines the worth of the benefits generated for society, evaluating both inputs and outcomes of an intervention.

100 %

73 %

COACHES THAT GRADUATE INTO FURTHER
EDUCATION, EMPLOYMENT OR TRAINING

COACHES THAT GRADUATE WITH A BANK ACCOUNT

“

IN ADDITION TO THE PROFESSIONAL SKILLS I HAVE LEARNED, THE INTANGIBLE THINGS I TOOK AWAY WERE SO VALUABLE. GRASSROOT SOCCER MADE ME BELIEVE I CAN BE A GAME CHANGER IN MY COMMUNITY, BUT ALSO SHOWED ME I CAN BE A GAME CHANGER IN MY OWN LIFE.

”

- GRASSROOT SOCCER SKILLZ COACH



Conference
Presentations,
Publications &
Ongoing Studies

Title	Method	Results
Grassroot Soccer - South Africa Youth Employability and Leadership Programme: A Response to the Youth Unemployment Crisis	Programme aims to develop unemployed youth to become (1) effective change agents and leaders in their communities (building assets); and (2) move onto further employment, education or training following their two-year tenure with GRS SA (promoting access).	Quantitative and qualitative research shows SKILLZ Coaches demonstrate increased employability and leadership, greater agency, improved knowledge of HIV and healthy behaviours, and develop a range of life skills. Furthermore, 73% of SKILLZ Coaches that completed their two-year tenure since programme inception (between 2013 – 2016), accessed further employment (54%), education and/or training (19%).
Changing the game – can a sport based youth development programme generate a positive social return on investment?	A results-based management approach and a social return on investment methodology were used to track the young people during and after the intervention.	Preliminary results offer encouraging evidence of progress into employment, education and training with positive social returns for the youth and external stakeholders, suggesting that this investment is cost-effective and impactful. The results indicate that structured sport-based programmes can put young people to work and get them to study in a constructive manner, thereby stimulating economic growth and development. It concluded that initiatives using sport to promote youth work merit greater investment, recognition, and research.



GRS staff and SKILLZ Coaches, Lusaka, Zambia / Photo Credit: Slingshot Media

ACCESS



**INCREASED UPTAKE
OF HIGH QUALITY
HEALTH SERVICES**

“

**MY WISH FOR GIRLS GROWING
UP TODAY IS THAT THEY
SHOULD FOLLOW THEIR
DREAMS AND NEVER LET
ANYTHING OR ANYONE
STAND IN THE WAY OF THEM
REACHING THEIR GOALS.
A GIRL WITH A VOICE IS
STRONG, CONFIDENT, AND
ABLE TO TAKE ON THE WORLD.**

”

- GRASSROOT SOCCER SKILLZ PARTICIPANT



In addition to building the assets of adolescent boys and girls, Grassroot Soccer ensures they are linked to high quality, adolescent-friendly health services. This portion of the report highlights some of the achievements and insights gained from working with service delivery partners in a few of Grassroot Soccer’s priority partnership geographies.

South Africa
Public-Private Partnerships & Centre for Communication Impact
In 2015 GRS established a 3-year public-private partnership to prevent HIV, promote sexual and reproductive health and rights (SRHR), and reduce the likelihood of sexual and gender-based violence (SGBV) by challenging harmful gender norms among adolescents, and providing clear linkages to post-violence care for survivors, HIV testing, and SRH services. GRS successfully scaled its sport-based approach through partnerships with three community-based organisations (CBOs) by rolling out an integrated, comprehensive community prevention programme called Community Responses in 2016. Both programmes have reached significant scale and have built-in sustainability strategies by building the capacity of local community-based organisations and strengthening the enabling environment.

Hope in South Africa
Educating South African Youth About Fetal Alcohol Spectrum Disorders (FASD), is a sport-based education and prevention programme that engages and teaches children between the ages of 10 - 18 in South Africa’s Northern Cape province, which has the highest incidence of FASD in the world, about the dangers of Fetal Alcohol Spectrum Disorders.

Nigeria
The Youth Empowerment Development Initiative (YEDI)
YEDI has partnered with GRS since 2011 to provide comprehensive sexuality education in and out of schools across Nigeria, and deliver integrated, youth-friendly sexual health services. YEDI oversees the operation of three UNFPA-supported “Hello Lagos” centres, linked to the Lagos State Ministry of Health, through which they offer a range of adolescent-friendly services.

Special Olympics Nigeria (SON)
SON has partnered with GRS since 2014 to provide unique HIV, malaria, and life skills education and testing services to people living with and without intellectual disabilities.

Zambia
Since 2012, GRS has been working in partnership with the *Ministry of Health of Zambia* and other clinical service providers, such as *Centre for Infectious Disease Research Zambia (CIDRZ)* to ensure our adolescent participants have access to friendly and confidential clinical services, and to facilitate adherence support clubs for adolescents living with HIV in government health facilities, and to mobile HIV testing. As a result of these service integrations, there has been an increase in access to health services for young people.

Zimbabwe
GRS Zimbabwe has partnered with several organisations in order to link adolescents to more health information and appropriate health services. For participants in SKILLZ Health, the *National AIDS Council* helps to provide HIV testing and counseling, while participants seeking VMMC are referred to *Population Services International*. GRS Zimbabwe also links adolescents and their families to sexual and reproductive health services through the *Zimbabwe National Family Planning Council* and *Ricabytes*. According to a 2017 outcomes evaluation, about 14% of SKILLZ participants reported accessing VMMC, while nearly 15% of

SKILLZ participants in a girls-specific programme accessed STI services and 26.9% of participants in the smaller SKILLZ week-long programme reported accessing VMMC.

Malawi
The Baylor College of Medicine and the *Children’s Foundation of Malawi*, a partnership established in part by the *Malawian Ministry of Health*, serves as a pillar of pediatric HIV care in the country*. Over the years, Baylor has built a large adolescent support programme, focusing on the provision of clinical care and treatment, mentorship, and advocacy. In collaboration with GRS, the program was developed to fill a gap in testing and uptake among Malawian youth, and includes a combination of home visits, private counselling, and regularly-held community HIV testing tournaments. More recently, in 2017 Baylor and GRS designed and scaled the Transition Training (T2) project: a self-care, social enfranchisement, and career development programme for 17 - 25 year olds living with HIV and transitioning to adult care.

The Global AIDS Interfaith Alliance (GAIA) is an innovative healthcare organisation that directly provides comprehensive HIV education, testing, and care through the implementation of GRS programmes, regular home visits to encourage uptake, support of youth clubs, hosting of activity-based community events, and local mobile clinics. GAIA has brought critical health services to remote regions of Mulanje, and has been particularly vital in increasing the number of boys and young men who get tested for HIV and gain access to relevant health services. Indeed, GAIA has tested over 2,000 people and referred many to services, with about fifty percent of the total referrals for VMMC.

*More detail in ADHERENCE section

Kenya
Vijana Amani Pamoja (VAP) is a youth-focused social services organisation based in Nairobi, and a long-standing partner of GRS.

RESULTS FROM 2017

FACILITATING ACCESS TO SERVICES FOR ADOLESCENTS





Conference Presentations, Publications & Ongoing Studies	Title	Method	Results
2016 7th African Conference on Sexual Health and Rights, Accra (Concern Worldwide, Banja La Mtsogolo)	Increasing Contraceptive Prevalence in adolescent girls in Malawi: A model for success	Mixed methods evaluation of sport-based intervention for in-school and out-of-school adolescent girls, including modelling exercise utilising Marie Stopes International Impact2 (innovation tool to estimate impact of reproductive health programmes)	Increase in contraception prevalence rate among adolescent girls from 9% to 21%; 3781 referred for SRH services; 2,780 unintended pregnancies averted; caring relationships built between Coaches and adolescent girl participants
2016 Medical University of South Carolina (MUSC) Global Health Conference (Vijana Amani Pamoja, MUSC)	HIV Testing Attitudes and Behaviours at a Sports-based HIV Prevention Program in Mukuru kwa Ruben, Nairobi, Kenya	23-question survey to assess socio-demographics, HIV risk behaviours, HIV testing behaviours and attitudes, and knowledge of HIV self-testing (HST), HIV status, linkage and barriers to care	Preliminary data suggest that this population is highly motivated to test for HIV and willing to use HST on themselves and as a tool to motivate others to test. As the age of participants increased, so did the proportions of those who knew about HST and were willing to use HST.
2017 Fetal Alcohol Spectrum Disorders Summit, Bloemfontein (Hope in South Africa)		A mixed methods convergent parallel study design was used, including a pre and post intervention questionnaire, focus group discussions and one in-depth interview.	98% graduation rate; statistically significant positive change for 9 of the 14 questions included in the pre-post surveys; statistically significant positive change in participants' communication about FASD, knowledge related to sexual and reproductive health and FASD, and attitudes towards pregnancy, alcohol consumption, and men's role in FASD prevention. Qualitative data showed that the intervention has the potential to change participants' behaviour as respondents described risky situations and identified actual steps to avoid or remove themselves from such situations.
2018 International Social and Behaviour Change Communication Summit, Nusa Dua; programme ongoing (Centre for Communication Impact)	Importance of engaging parents and caregivers in the provision of HIV Testing Services (HTS) to adolescent girls 10 - 14 in Johannesburg	Using participatory communication model for dialogue, reflection and action, girls and their parents/ caregivers discussed the importance of HIV prevention and accessing services.	Between 2016 - 2017, 2,213 girls aged 10 - 14 received the programme

Conference Presentations, Publications & Ongoing Studies	Title	Method	Results
2018 International AIDS Conference, Amsterdam (Special Olympics Nigeria, Special Olympics International)	Lessons from implementing SKILLZ for life: A sport-based HIV and life skills programme for youth with intellectual disabilities in Namibia, Nigeria, and South Africa	Lessons learned from the implementation of SKILLZ for Life, an HIV prevention and life skills programme for youth with intellectual disabilities (ID) in South Africa and Nigeria. The programme aims to increase knowledge of HIV and sexual rights, malaria/HIV testing uptake, self-esteem, and improve attitudes toward health services of "athletes" with ID and their "partners," participants without ID.	Key lessons learned from a 2015 external evaluation and 2017-2018 process evaluation include the importance of early engagement with key stakeholders and community, rigorous curriculum review and adaptation for participants with ID, and the use of Family Health Forum events to provide ID-friendly health services for participants and their families.
2018 International AIDS Conference, Amsterdam (Special Olympics Nigeria, Special Olympics International)	Scalability of SKILLZ for Life: A sports-based behaviour change HIV/AIDS and Malaria programme for young people with intellectual disabilities	Mixed methods evaluation conducted from June 2017-January 2018 in order to assess the scalability of SKILLZ for Life to other geographies. Qualitative methods included 10 IDIs, 7 FGDs, and 3 observation visits, while quantitative pre/post surveys were used to examine changes in participants' knowledge, behavior, and attitudes.	Quantitative survey results show significant positive changes from baseline to endline, including improvements on HIV stigma, HIV and malaria knowledge, and identifying sexual abuse items. Qualitative data indicate conditions for successful scale include adaptation of curriculum to local context and including community stakeholders in the training process in order to improve health outcomes.



Peace Corps SKILLZ participants, South Africa / Photo © Holly Powers, USAID Southern Africa



“

Grassroot Soccer has taught me that one cannot tell just by looking at someone, one needs to be tested to know if they are HIV positive or negative.

We were taught to love even those who are HIV positive and treat them as we would treat ourselves.

- Grassroot Soccer SKILLZ Participant

”

ADHERENCE



ADHERENCE TO MEDICAL TREATMENT, THERAPY, AND HEALTHY BEHAVIOURS

ADHERENCE

SUPPORTING ADOLESCENTS LIVING WITH HIV



Innovative Partnerships

Recognizing that more services are available to adolescents living with HIV (ALHIV) than in previous stages of the HIV epidemic, GRS is actively looking to broaden the types of support we can provide to young people living with HIV. We aim to continue building strong partnerships with local institutions, both clinical and non-clinical, and connect youth to local resources to improve adherence and retention in care.

AIDS Healthcare Foundation

Grassroot Soccer partners with the AIDS Healthcare Foundation (AHF) in South Africa and Zambia. In Durban, South Africa, GRS has partnered with AHF to build capacity and support services at a local clinic serving ALHIV in order to improve retention to care. At various sites across Zambia, GRS has partnered with AHF in order to improve linkages to quality support services; all young people who test HIV positive from AHF health facilities and testing events will be enrolled in SKILLZ Plus.

Baylor College of Medicine Children's Foundation-Malawi

In 2017, GRS revised the Baylor College of Medicine Children's Foundation - Malawi (BCM-CFM) Transition Training program, which aims to support young adults living with HIV as they transition into adulthood and adult HIV care. T2 was created in response to young adult patients' requests for tips on finding jobs, starting and sustaining businesses, how to have healthy sex while living positively, and which modern contraceptive methods were most effective on ARVs. Through an asset-building approach, T2 also aims to improve psychosocial and behavioral outcomes that influence decision-making in sexual health and relationships, economic empowerment, and self-care skills.

After initial success in Lilongwe, the second round of the program was initiated in 2017, with a pilot program in rural Salima District and use of the revised curriculum in Lilongwe. A mixed methods evaluation of T2 is underway, with preliminary results demonstrating modest positive changes in many domains measured in a quantitative pre/post survey, such as support, leadership/mentorship, HIV and SRH knowledge, disclosure self-efficacy, and self-concept (n=35). Greater changes were seen in the Salima (rural/peri-urban) cohort than the Lilongwe (urban) cohort, with the Lilongwe cohort demonstrating higher baseline scores. Qualitative interviews with service providers and Ministry of Health stakeholders have been conducted, with participatory focus groups and data analysis to be held with participants later in 2018. Participants will be trained in research methods using a Youth Participatory Action Research (YPAR) approach in order to empower and engage them in further research and dissemination of findings.

ALHIV Working Group

Over the years, GRS's ALHIV programmes have been adapted to the local context in which they are implemented. In order to ensure GRS is providing evidence-based and relevant programming across all of our sites and partnerships, Grassroot Soccer established an internal ALHIV working group in late 2017. The goal of the working group is to share internal learnings, highlight innovations, and ensure that our programmes are effectively responding to the needs of ALHIV.

SKILLZ Plus & Clubs

Our work is evolving and we are piloting new and different approaches to engaging ALHIV while continuing to reach and support ALHIV through SKILLZ Plus interventions and clubs.

- SKILLZ Plus is specifically tailored to adolescents living with HIV, providing them with mentorship, life skills, information on living healthy sexual lives and links to quality health services. Grassroot Soccer's work is evolving, which requires piloting new and differentiated approaches to engaging adolescents living with HIV (ALWHIV).
- Clinical partnerships: In Zambia and Zimbabwe, the SKILLZ Plus program is implemented in partnership with Ministry of Health, where interventions and peer support meetings (see below) are held from district and community-level health facilities.
- Home visits: In Zimbabwe, home visits are conducted by Coaches and are at the request of participants, peers, or care providers in order to provide holistic support and/or follow up.
- SKILLZ Plus Clubs: After the conclusion of the initial SKILLZ Plus intervention, participants are linked to peer support groups — SKILLZ Clubs — where they continue to access services and connect with their team of supporters. SKILLZ Clubs are held once every month, which for most participants coincides with their monthly clinical visits for check-up and refills. Some SKILLZ Clubs are held outside of the health center at local community centers.



**WITH THE REDUCTION
OF STIGMA, AND
INTRODUCTION OF A
MENTOR, LINKAGE TO
TREATMENT AND HIGH
QUALITY SERVICES,
ADOLESCENTS LIVING
WITH HIV CAN LIVE
LONGER, HEALTHIER LIVES.**



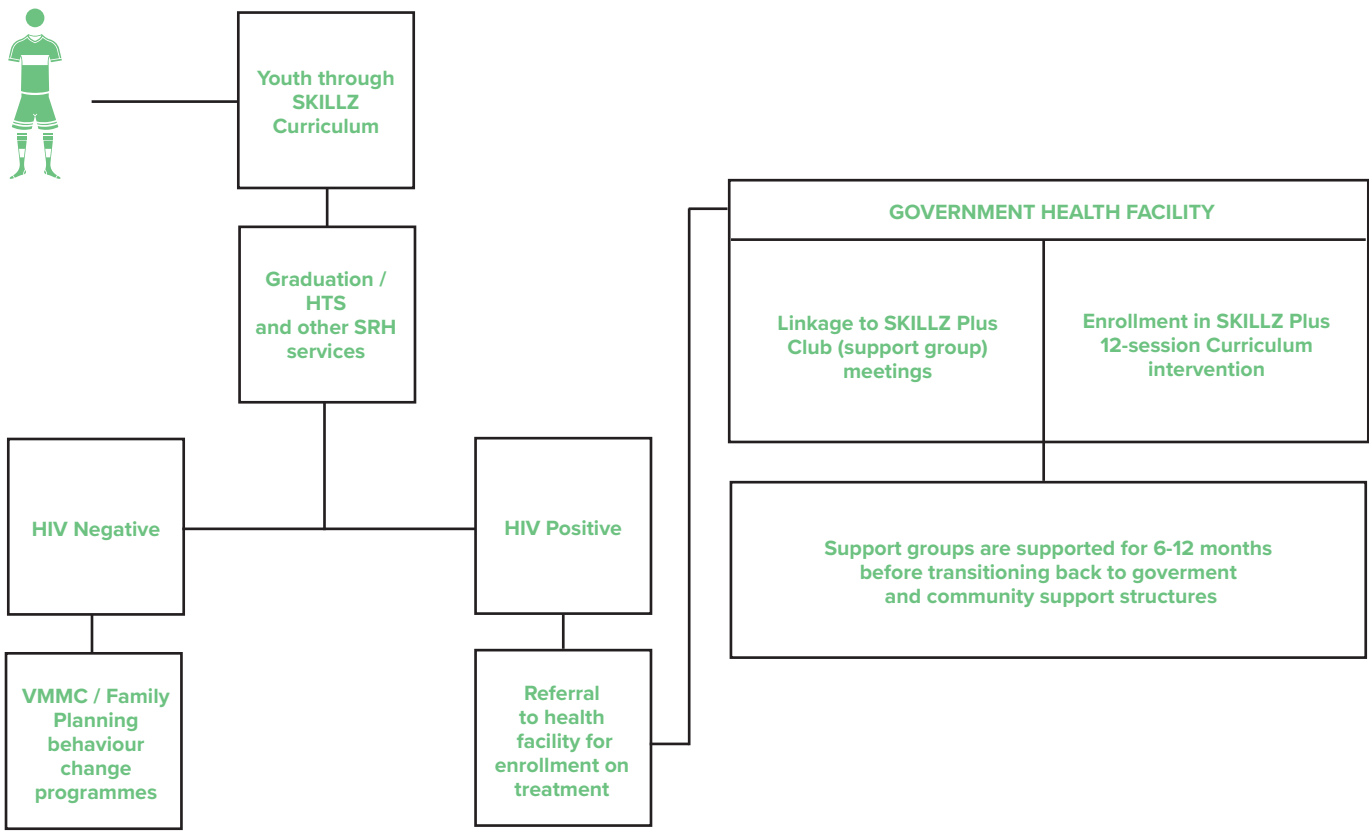
4%

TO DATE, 2,068 ADOLESCENTS (40% MALE) HAVE GRADUATED FROM SKILLZ PLUS PROGRAMMES



6%

TO DATE, 2,068 ADOLESCENTS (60% FEMALE) HAVE GRADUATED FROM SKILLZ PLUS PROGRAMMES



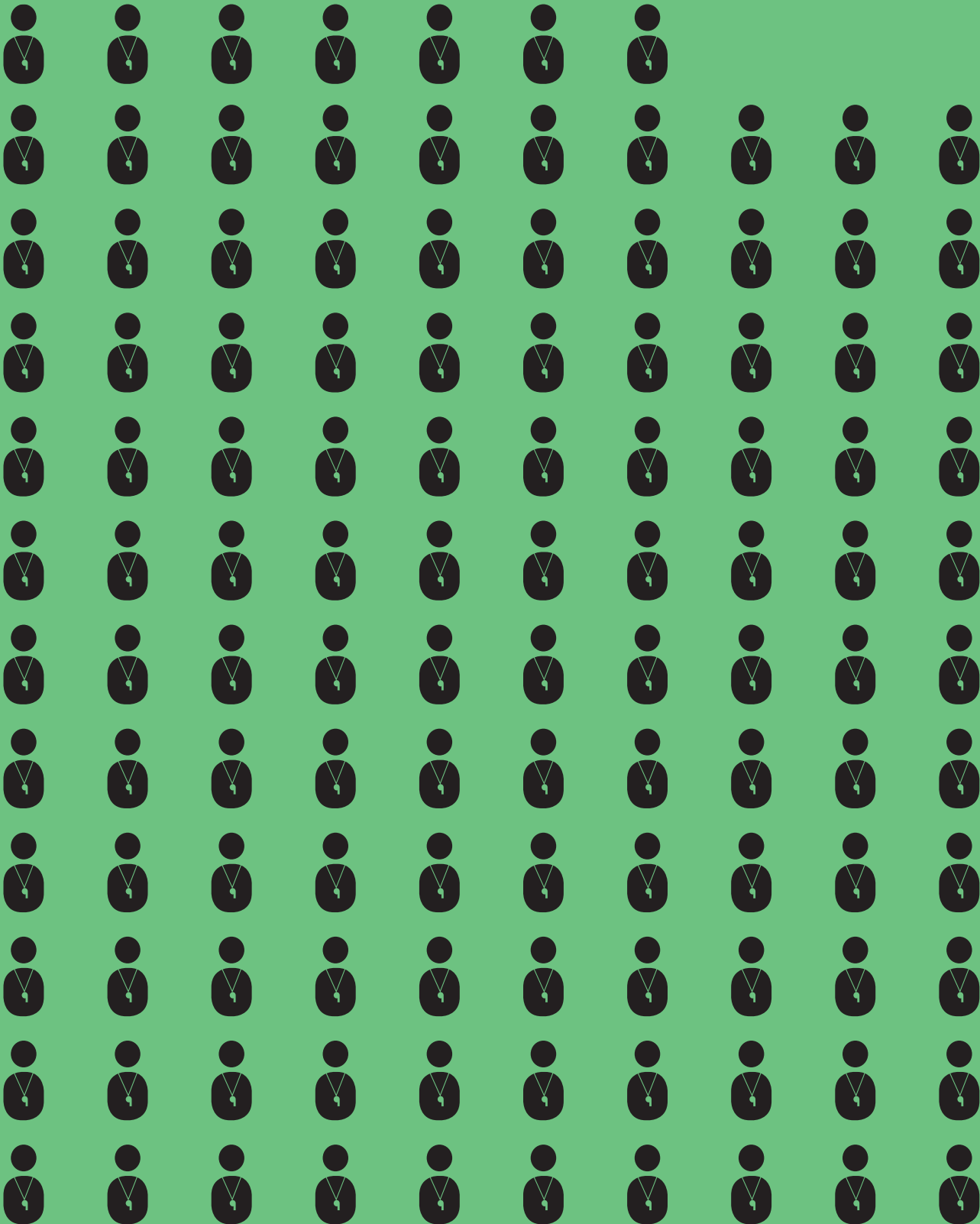
Conference
Presentations,
Publications &
Ongoing Studies

Title	Method	Results
2018 International Social and Behaviour Change Communication Summit, Nusa Dua; study ongoing (Baylor College of Medicine - Children's Foundation, Malawi)	Multi-disciplinary model for Increasing adherence to Antiretroviral Treatment and Employability Outcomes for Youth Living with HIV A convergent parallel mixed methods study is underway, quantitative analysis on adherence and viral load will be conducted based on participant medical charts, while qualitative data will be analysed from in-depth interviews with participants and service providers, as well as participatory, peer-to-peer focus group discussions.	Study underway
International AIDS Conference & 8th International Workshop on HIV Paediatrics, Durban - 2016 International AIDS Society & Collaborative Initiative for Paediatric HIV Education and Research 2nd Adolescent Transition Workshop, Budapest - 2016 (Baylor College of Medicine Children's Foundation - Malawi)	T2 Transferring Economic, Psychosocial, and Self-care Skills Needed for Young Adults Living with HIV in Malawi for Successful Transition into Adulthood Retrospective chart reviews (n=70) and unstructured follow up interviews were conducted (n=100) between January 2013 - December 2015.	70 graduates from T2 had better adherence rates than adolescent patients seen at general clinic: 64 adolescent patients were retained in care, 3 were transferred out, 1 died, 1 engaged in pill-dumping, and 1 was lost to follow up. Of the 43 who had viral loads drawn since graduating, 37 (86%) were virally suppressed. During or after the programme, 15 males and 9 females disclosed their status to a friend or partner.



COACHES

TO DATE, 117 CARING COACHES (AGED 20-30) LIVING WITH HIV HAVE BEEN TRAINED AS MENTORS FOR SKILLZ ADOLESCENT PARTICIPANTS LIVING WITH HIV





Grassroot Soccer collaborates with implementing partners in 20+ countries, ensuring that adolescents adhere to healthy behaviours, and partners are equipped with critical adolescent-centred tools and strategies to sustain impact.

In 2017, Grassroot Soccer (GRS) commissioned Keystone Accountability to survey partners on their experience working with GRS, and benchmark performance of GRS against other organisations globally. These are select findings from the survey:



PARTNERSHIPS

PARTNERSHIPS FOR SUSTAINED IMPACT

PARTNERS HAVE CLEAR RECOMMENDATIONS FOR GRS:

- THEY WANT TO BE INVOLVED IN GRS STRATEGY DEVELOPMENT
- THEY WANT TO HAVE THE OPPORTUNITY TO SHARE LEARNINGS
- THEY WANT TO STRENGTHEN THE “CRITICAL MASS OF PARTNERS” WORKING IN THE SAME AREA
- THEY WANT GRS TO BE CLOSER TO THEIR CONSTITUENTS

45%

of respondents were based in Southern Africa

20%

of respondents were based in East Africa

3%

of respondents were based in other countries

11%

of respondents were based in North America

6%

of respondents were based in Europe

6%

of respondents were based in Central Africa

9%

of respondents were based in West Africa

SUMMARY OF RESEARCH FINDINGS & INSIGHTS

The Grassroot Soccer 2017-2018 Research & Insights report reaffirms that a sport-based approach is a unique and innovative way to address adolescents' evolving needs, engage them on their health, and support them to plan for their futures.

ASSETS: Increased health knowledge and the confidence to use it

After going through Grassroot Soccer SKILLZ programming,

- **Adolescent girls** are more likely to test for HIV, leave physically and emotionally abusive relationships, and choose relationships that have greater levels of gender equality and trust. Building girls' social and health assets through SKILLZ also strengthens their capabilities and confidence to communicate with peers, parents, and guardians about their sexual health, gender-equitable beliefs and unique needs; seek critical health services; and, effectively navigate and negotiate safer sex with their partners.
- **Adolescent boys** are more likely to undergo preventative voluntary medical male circumcision, thereby reducing their risk of acquiring HIV and test for HIV; their attitudes towards gender-equitable norms improve, and their knowledge of sexual and reproductive health risk factors and services increase. Building boys' social and health assets through SKILLZ strengthens their orientation towards the future, teaches transferable skills, promotes pro-social behaviours, improves their self-concept and self-regulation.

After working with Grassroot Soccer,

- All **SKILLZ Coaches** in South Africa leave with their own bank accounts, and the majority exit into further training, education or employment. Building SKILLZ Coaches' social and health assets leads to a significant increase in self-esteem, orientation towards the future, strengthened financial skills and computer literacy, as well as demonstrated community leadership.

ACCESS: Increased uptake of high-quality health services

After building strategic SKILLZ partnerships with international and regional non-governmental organisations and local community-based organisations, Grassroot Soccer and its partners have:

- Piloted innovative adolescent-centred service delivery strategies, resulting in increased contraceptive prevalence rate in Malawi and increased willingness and motivation to self-test for HIV in Kenya.
- Delivered integrated, youth-friendly HIV Testing Services, family planning, VMMC, sexual and gender-based violence services, and malaria testing services across seven countries in West, East and Southern Africa with high burden of HIV/sexual and reproductive health-related health challenges.
- Strengthened local service providers' approaches to adolescent-friendliness and thereby attracted more youth to their services.

ADHERENCE: Adherence to medical treatment, therapy, and health behaviours

Grassroot Soccer is committed to ensuring that adolescents have the assets and access they need to sustain healthy behaviors over time. In the case of adolescents living with HIV, GRS identifies adolescent-friendly clinical service providers with a specialty in adolescents living with HIV, and continues to utilise routine monitoring data and select clinical data from partners to track SKILLZ participants' enrollment, adherence and retention in care.

In order to create an enabling environment for young people and to sustain adolescent health outcomes, GRS is committed to partnering broadly with various stakeholders. In order to inform and improve our partnership approach, GRS surveyed our current and prospective partners, finding that our organisation ranks 13th out of 85 non-profit organisations partnering globally; that our partners value interactions with us; and that they want to engage in more strategic thinking with GRS, share learnings, and strengthen the critical mass of partners working in adolescent health in the future.

LOOKING AHEAD

Building on 14 years of research and insights from routine monitoring data, in collaboration with its partners, Grassroot Soccer will sharpen its focus on research to address critical gaps in the global adolescent health evidence base and strengthen existing interventions. From 2018 forward, our priorities are to:

- Evaluate, refine and scale up interventions to engage with hard-to-reach adolescent boys and young men and link them to SRH services
 - Complete and disseminate an ongoing mixed-methods evaluation of a sport-based SRH programme for in school and out of school adolescent boys in Lagos, Nigeria
 - Pilot new interventions in urban, peri-urban and rural Zimbabwe and Zambia
 - Leverage local football structures to bring male-friendly health services to the pitch
- Initiate 3-year, multi-country longitudinal cohort study in Zambia and Zimbabwe, to estimate long-term impact of an integrated package of SKILLZ Health interventions on building the health and social assets of adolescents, including tracking key adolescent health and well-being indicators
- Identify mediators, predictors and barriers to achieving health outcomes in the enabling environment and in partnerships with government, private sector and civil society
- In Zambia and South Africa, evaluate cost-effectiveness and return on investment for integrated HIV/SRH programming for adolescent girls in urban secondary schools
- **Pilot non-traditional, youth-led participatory action research methods in Malawi, Nigeria and South Africa in ongoing studies, capitalising on adolescents as trend-spothers and trend-setters**
- Invest in and mentor youth as researchers, co-author publications and co-present in local, regional and international forums
- **Integrate emerging adolescent health topics and new interventions into existing programmes and existing and future research**
 - HIV Self-testing: pilots with mid-late adolescents in Zambia, Zimbabwe and Kenya
 - Mental health: building on resiliency research, **pilot mindfulness micro-interventions and well-being questionnaires in South Africa**
 - Non-communicable diseases: measure BMI in two randomised controlled trials in Zambia and South Africa



GRS SKILLZ Coach and participants, Alexandra, South Africa / Photo Credit: Slingshot Media



GRS SKILLZ participants, Soweto, South Africa / Photo Credit: Slingshot Media

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