Engaging urban Pacific women in healthy lifestyle behaviour. An outcome evaluation of a workplace-based physical activity intervention in Vanuatu
Siefken, Schofield, Malcata

Formative evaluation of a UK community-based sports intervention to prevent smoking among children and young people: SmokeFree Sports
Romeo-Velilla, Beynon, Murphy, Mcgee, Hilland, Parnell, Stratton, Foweather

Possibilities and Dangers at the Nexus of Sport and Development Discourses: An Analysis of Racialized and De-historicized Spaces
Mayrand

Empowerment revisited: How social work integrated into a sports programme can make a difference
Simard, Laberge, Dusseault

Football with three ‘halves’: A qualitative exploratory study of the football3 model at the Football for Hope Festival 2010
Gannett, Kaufman, Clark, Mcgarvey
Engaging urban Pacific women in healthy lifestyle behaviour. An outcome evaluation of a workplace-based physical activity intervention in Vanuatu

KATJA SIEFKEN¹, GRANT SCHOFIELD², RITA MALCATA³

¹,² Human Potential Centre, Auckland University of Technology
³ Sport Performance Research Institute of New Zealand (SPRINZ), Auckland University of Technology

Corresponding author email: katja.siefken@aut.ac.nz

Introduction

It is widely accepted that the most serious health problem facing Pacific nations today is the rapid growth of non-communicable diseases (NCDs).¹⁻⁶ NCDs present a leading threat to human health and development.⁷ There are four NCDs that are the leading contributors to the NCD epidemic in the region: cardiovascular diseases (CVDs), cancers, chronic respiratory diseases and diabetes.⁸

Vanuatu, a Pacific Island nation in Melanesia, consists of 83 islands and has a population of 234,023.⁹ Whilst NCDs remained rather uncommon in Vanuatu until the 1960s, a health transition resulted in the hidden onset of chronic diseases. Research suggests that this health transition is associated with migration to urban areas along with modernisation and increases in economic development.¹⁰ In fact, since 1999 the urban population has increased by 42%.⁹

Health infrastructure across the Pacific region is often poor and there is a shortage of appropriately trained health workforce, particularly in the field of health promotion.¹¹ Under-diagnosis of NCDs and under-treated costs are projected to rise sharply with increasing awareness of chronic disease complications.⁵ Importantly, average treatment costs of NCDs are considerably higher than non-NCD admissions in the country.¹² The prevention of lifestyle diseases is distinctly important where health services, diagnosis and treatment opportunities are limited.

Physical activity (PA) is a prerequisite for the prevention and control of NCDs. The benefits of regular (PA) include reduced risk of heart disease, stroke, diabetes, osteoporosis and some cancers.¹³,¹⁴ It is further a key element in obesity prevention¹⁵ and is associated with positive mental health.¹⁶ Increasing population PA levels is one of the most promising strategies for improving population health and reducing the NCD burden.⁷⁻¹⁹ Findings from a recent national health survey from 2011 indicate that Ni-Vanuatu women are more likely to be physically inactive and overweight than their male counterparts.²⁰

Various strategies have proven effective to engage individuals in PA. For example, research indicates that pedometer-based programmes can help increase PA behaviour and may reduce NCD risk.²¹ Hatano suggests that the accumulation of 10,000 steps per day is comparable to achieving 30 minutes of PA per day.²² The 10,000 steps message is an approach of PA promotion that initially came from researchers in Japan two decades ago, and this approach has become a popular tool for PA promotion internationally. The Pacific Guidelines for Physical Activity suggest using a pedometer to monitor PA behavior.²³ The 10,000 steps message from Japan is therefore considered an appropriate tool in this context.

Whilst Pacific Physical Activity Guidelines exist,²³ the lack of research regarding PA behaviour limits the evidence on how to engage the Pacific population in PA behaviour. It is unclear whether a) Pacific people would respond to pedometer-based PA interventions and b) whether interventions reduce NCD risks in this population. However, no pedometer-based study has been conducted in a region where walking forms part of the daily routine and is used as a means of transport and leisure-time PA.

Keywords: Outcome evaluation, Workplace health promotion, Physical activity, Pacific Islands
A great number of pedometer data from HICs is available, but little is known about step data from low- and middle income contexts (LMICs). This study can be a first step in closing the gap and also in contributing to the collection of step data from a LMIC context, as encouraged by Cook. Pacific PA research is in its infancy and if findings from this study are brought on to relevant stakeholders (i.e. Secretariat of the South Pacific, World Health Organization, AUSAID) they may invest in additional population-based step count collections, as called for by Cook.

Workplaces have been shown to be an effective means of promoting PA behaviour. Workplace environments may affect the health of the employee, their families, communities and societies at large. Whilst systematic evaluations are available from a number of workplace health programmes in higher income countries, there is a paucity of workplace health evaluations from LMICs. Overall, very little step data is available from LMICs. Whilst some pedometry data is available from Africa and Brazil, these data have not been collected in workplace settings and do not indicate PA levels of urban employees.

The Ottawa Charter for health promotion and the World Health Organization’s (WHO) ‘healthy workplace settings’ approaches provide the conceptual basis for the approach taken. Prior to this study, formative research investigated barriers and facilitators for healthy lifestyle behaviour and sought participants’ suggestions for programme content. A team-based pedometer challenge, accompanied by social marketing and health education tools, was implemented and monitored for twelve weeks between April and June in 2011.

An outcome evaluation was conducted to understand the effectiveness of the programme. Outcome evaluations aim to assess treatment effectiveness and examine whether a programme has achieved its goals.

The evidence highlighted that culturally-centred programmes are likely to increase PA behaviour and improve health outcomes. Success factors and potential areas for programme improvement were highlighted elsewhere.

The purpose of this study was to evaluate a PA programme that was designed for Pacific women in urban Vanuatu. Presented below is the first systematically evaluated workplace health intervention conducted in the Pacific.

Methods

Participants & recruitment

Participants were not randomly chosen from the population, but were recruited and sampled through the Ministry of Health Vanuatu. All female civil servants were officially invited via email invitations to attend the official opening in March 2011, which was launched by the Director of Public Health. A total of 207 female individuals were recruited; 189 individuals (91.3%) were from the Vanuatu Government sector (Correctional Services (9), Department of Youth and Sports (4), Magistrate's Court (8), Ministry of Agriculture (14), Ministry of Customs (5), Ministry of Education (29), Ministry of Finance (33), Ministry of Health (14), Ministry of Justice (6), Ministry of Labour (6), Ministry of Lands and Natural Resources (15), Ministry of Meteorology and Geo-hazards (11), Office of the Auditor General (4), Police Department (11), Prime Minister Office (12), Public Works Department (8); the remaining 18 individuals were from the private sector (Air Vanuatu (6), Daily Post Newspaper (6), Telecom Vanuatu (6). The majority (99%) of participants were of Ni-Vanuatu decent, whilst 1% were from other Pacific islands (e.g. Fiji). The selection criteria were that the participants are able to walk and also desired to partake in the programme. In order to involve a large group that can benefit from the study’s health effects, no further exclusionary criteria were set. The sample of this study is not representative for the entire population of Vanuatu, but results can be generalized to urban female, office-based employees.

133 individuals completed the programme and provided follow up data. Pregnant participants were excluded from analysis, leaving a total of 125 individuals for data analysis. The youngest participant was 21 years old, whilst the oldest was 55 years old (36.3 ± 8.3). The majority of the sample was either overweight (33%) or obese (46%). 18% were normal weight and 3% were underweight. Mean BMI was 29.6 ± 5.7; mean waist circumference was 96.0 ± 15.0 cm.

Study design

This pre-experimental study presents an intervention lasting twelve weeks in duration. The intervention was implemented in the Vanuatu Government sector in Port Vila, Vanuatu. Participants underwent pre- and post-health screenings (week 0, week 15) measuring PA levels (steps), anthropometric measures, BP, and blood samples for determination of fasting serum glucose (mmol/l) and blood lipid (mg/dl) parameters. For the duration of twelve weeks,
participants were encouraged to increase their PA levels, which were measured by pedometers.

A pre-experimental design (pre-post study) can provide observations about change in the objects of interest. The causal relations, however, of observed change are limited. However, this evaluation design provides an estimate of change.

\[ \text{Change} = \text{Post} - \text{Pre} \]

Where change is the difference between the post-intervention and pre-intervention measurements.

\section*{Wokabaot Jalens}

Wokabaot Jalens, designed in collaboration with local health practitioners and participants, is described in full detail elsewhere. Briefly, Wokabaot Jalens is a 12-week healthy lifestyle intervention based on the simple premise that walking can be increased gradually during the day at work, at home and during leisure time. Participants were asked to form groups of five participants. In reality, group sizes varied from three to seven group members. A total of 40 teams competed – on a fun basis – against each other with the overall aim of walking enough kilometres to virtually traverse the islands of Vanuatu. A step captain was appointed for each team, and over the twelve weeks of monitored intervention, step captains arranged weekly team meetings and exercise activities. All participants received electronic health information that accompanied Wokabaot Jalens on a weekly basis. Content included information on the benefits of an active and healthy lifestyle, suggestions for cost-effective approaches of healthy family lifestyle behaviour, ideas for locally attractive healthy shopping and cooking ideas, and motivational messages for the uptake of regular physical activities. The content emphasized the involvement of the external environment (i.e. family and communities).

Participants were further equipped with a daily walking log book, an elastic waist band to secure the pedometer, culturally sensitive health brochures as well as charts for self-monitoring daily steps.

During the study’s fully monitored 12-week phase, participants were required to use their pedometers and calendars for goal-setting and self-monitoring. Participants received a walking log to record daily step numbers, and were asked to complete the log at the end of each day for the duration of the intervention. Each step captain emailed each team members’ weekly step number to the researcher and each team’s step number was adjusted to a team of five participants. Mean steps/day were calculated and a step overview was provided.

The study hypothesised that Wokabaot Jalens would increase participants’ PA levels and improve health indicators in those with poor baseline health data. In addition to the primary outcome (measured steps/day), programme effects on health parameters were also measured (waist circumference (cm), BP (mmHg), fasting serum glucose (mmol/l), cholesterol levels (mg/dl)).

This study investigates two effects: the first part tested for modifications in objectively measured PA behaviour; the second part analysed the intervention’s effect on health measures. The Auckland University of Technology University Ethics Committee approved the study.

\section*{Assessment procedures}

The primary outcome was a change in step numbers, which was measured by Yamax SW-200. The Yamax SW-200 has been shown to be accurate and reliable for measuring step numbers in adults. Secondary outcomes were changes in waist circumference (cm), fasting serum glucose (mmol/l), lipid profile (mg/dl) and blood pressure (BP) (mmHg). Participants were assessed at baseline and after 15 weeks. Although the Wokabaot Jalens had terminated after 12 weeks, the additional three weeks were maintained to investigate whether independent changes were sustained after programme termination. The researcher, with the assistance of the Ministry of Health personnel, managed and carried out the health assessments. Importantly, staff aided with local language expertise in filling out lifestyle questionnaires.

After the accurate pedometer placement and use was demonstrated, baseline PA levels (steps/day) were assessed prior to the monitored phase. Participants were instructed to wear pedometers during waking hours while engaging in usual activities for 24 hours a day.

Scheduled health assessments were arranged for the collection of anthropometric and health indicator data prior to and following the monitored phase of Wokabaot Jalens. Each assessment was identical and included 1) PA levels (steps), 2) anthropometric measures (light clothing, no shoes), 3) BP, and 4) blood samples for determination of fasting serum glucose and blood lipid parameters. Changes in BMI, waist circumference (cm), BP (mmHg), fasting serum glucose (mmol/l) and blood lipids (mg/dl) were evaluated.

BMI was calculated (kg/m²) using a portable digital scale measuring weight to the nearest 0.1 kg. A stretch-resistant fiberglass tape measure seamstress butterfly brand was
used to measure height and waist circumference. Waist circumference was measured at the midpoint between the lower margin of the least palpable rib and the top of the iliac crest. Waist and hip girths were measured using standard protocols over light clothing. BP was measured twice (using OMRON, Automatic Blood Pressure Monitor, IA1B model). The 2nd reading was used for analysis. For the determination of fasting serum glucose tolerance, participants were asked to fast overnight. Serum glucose, high-density lipoprotein (HDL) cholesterol and triglycerides were determined using the CardioChek® PA system.

Data treatment and statistical analysis

The study used inferences based on magnitude for data analysis in order to quantify the magnitude of the effects, rather than simply identifying the presence or absence of effects. Effect sizes were calculated using the unequal-variance t-statistic to identify the effect on health indicators and to understand programme effectiveness. This also allowed covariate inclusion to calculate the differences in changes of each variable mean between the timeframe 0-15 weeks.\(^{37}\) Interpretation was based on confidence limits. An advantage of the magnitude based inference approach over the use of p-values is the guaranteed conclusion of the analysis. Effects can be either clear or unclear. Where unclear effects are found, sample sizes were not large enough and more data is needed to draw accurate conclusions about the effect. As such, the magnitude based inference approach also indicates the appropriateness of sample sizes.

Differences for high-risk and “normal” groups were investigated for the effects of step numbers, waist circumference (cm), systolic blood pressure (SBP; mmHg), diastolic blood pressure (DBP; mmHg), blood serum glucose (mmol/l), high-density lipoprotein (HDL; mg/dl) and triglycerides changes (mg/dl). The baseline value of each variable was included as a covariate to minimise confounding by the phenomenon of regression to the mean.\(^{37}\) All the variables were log-transformed with outcomes expressed both as percentages and raw units.

Effects were interpreted according to a scale of magnitude for standardized effect, using the mean effect and the confidence limits. First, we investigated if the effect is clear or unclear, estimating the probabilities of being beneficial and harmful (probabilities are given based on the overlapping of the confidence limits into these two regions). Where an effect is simultaneously beneficial and harmful, we deemed it unclear. For effects that are clear, magnitudes of those effects were calculated, using a scale to assess their magnitudes based on standardization.\(^{38}\) The thresholds for standardize effects are:

- <0.2 the effect is trivial,
- 0.2<standardize effect<0.6 the effect is small,
- 0.6< standardize effect<1.2 the effect is moderate;
- 1.2< standardize effect<2.0 the effect is large.

Uncertainty in statistics is shown as 90% confidence limits. 90% confidence limits were used as they contain much of the information (90%), without being too broad. Inferences were made based on the probabilities of harm and benefit of each effect. Magnitude inferences were as follows: a clinically clear beneficial effect was almost certainly not harmful (<0.5% risk) and at least possibly beneficial (>25% chance); an unclear effect was at least possibly beneficial (>25%) with an unacceptable risk of harm (>0.5%); the effect was otherwise clearly trivial or harmful, depending on which outcome had the greater probability. The quantitative probabilities are not shown, but the qualitative terms were applied to each clear effect with its qualitative magnitude (e.g., likely small benefit). Conclusions are based on inferential statistics that emphasise precision of estimation rather than null hypothesis testing.\(^{39}\) All data are presented as mean ± SD unless otherwise stated.

Findings

207 individuals registered for the programme and provided baseline data. Those who completed both assessments (n=133, 64%) recorded twelve weeks of step/day data and attended the final health assessment after 15 weeks. Partial completers, programme dropouts and pregnant participants were excluded from data analysis. Partial completers and dropouts were vindicated with lack of motivation, lack of time, staff turnover and frequent travelling. A total of 14 individuals reported a lost or broken pedometer and were not able to continue the programme. Further, 74 participants did not attend the 2nd health assessment and were excluded from data analysis.

The mean age for the 74 individuals who did not attend the 2nd health screening was 36 years. Of these, 30% were classified as normal weight, whilst 26% were classified as overweight and 27% as obese. Whilst 41% were classified as sufficiently active, 18% were classified as active and 23% classified as highly active. Mean baseline step data for these individuals was slightly higher (10,650 steps) than mean baseline step data for all completers (9,164 steps). Those
individuals who provided data for both health screenings. Those individuals who provided data for both health screenings (week 0, week 15) were categorised as low risk (LR) or high-risk (HR) for each variable, depending on whether their values exceeded certain thresholds or not.

Thresholds were based on literature and/or official guidelines that identified high risk cut-off points. These cut-off values have been defined by experts in their respective fields. Although reference is made to non-Pacific populations, I believe that thresholds that were defined in international contexts are more appropriate than no cut-off values. Further, these cut-off values are in line with WHO thresholds used during national STEPS surveys. Variables included PA (<5,000 steps), waist circumference (>88cm), SBP (>140 mmHg), DBP (DBP, >90 mmHg), fasting serum glucose (>6.1mmol/L), HDL (>40mg/dl) and triglycerides (>200 mg/dl). Changes in these variables over the course of the intervention on three groups are presented: 1) all participants, 2) LR individuals and 3) HR individuals.

**All participants**

Table 1 indicates that PA levels increased by 26% for all participants (90% confidence limits ± 11%). Mean daily step count (mean ± SD) was 9,160 ± 3,780 at baseline and 11,680 ± 5,780 at follow-up. For all programme completers, there was a most likely small beneficial increase of 2,510 ± 6,920 on the number of steps. Adjustments for age did not alter programme effects. Changes in all other variables measured for the periods 0-12 weeks are shown in Table 1. Changes in DBP, HDL and triglycerides did not track in their anticipated direction, all of them showing harmful outcomes. DBP increased by 4% representing an effect that is likely small and harmful. HDL levels decreased by 18% showing possibly moderate harmful effects, whilst triglycerides levels increased by 32% representing most likely harmful effects. A harmful effect on DBP and the harmful decrease in HDL levels was detected in low-risk individuals only.

Table 2 visualises the effect of PA behaviour on the specific NCD risk factors. For example, the PA effect on waist circumference in high-risk individuals is likely beneficial. For all other NCD risk factors, insufficient data is available to understand effects of PA in high-risk individuals. The PA effect is deemed unclear. Interestingly, Table 2 demonstrates the beneficial effect of PA behaviour in low-risk individuals (waist circumference, SBP, DBP, glucose, HDL and triglycerides).

Figure 1 shows the mean total steps per day on a week-to-week basis from week 0 until week 12. Data from 116 participants were used and adjusted to daily step numbers. Overall, a mean step increase of 2,510 steps was detected by week 12. A peak of mean step numbers was reached after week 8. The duration to reach an average step number of 1,000 steps more than usual was three weeks. During the first six weeks, the mean change in steps per day was 2,770 steps.

It is important to acknowledge the limitations in step data analysis. Clearly, step data do not represent total PA. Pedometers do not measure intensity, frequency and duration. However, step data gives an indication of total PA, particularly in contexts where walking is the most popular mode of PA and where vigorous PA is rather uncommon.
Table 1: Effect of the Wokaboat Jalens. Findings by variable, separated into low-risk and high-risk groups. Presenting effect sizes.

<table>
<thead>
<tr>
<th>Group</th>
<th>Pre ± SD</th>
<th>Post ± SD</th>
<th>Change</th>
<th>% Change</th>
<th>Effect size</th>
<th>Magnitude of effect</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean ± SD</td>
<td>±90% CL</td>
<td>Mean ± SD</td>
<td>±90% CL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PA (steps)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>9.164 ± 3.783</td>
<td>11.676 ± 5.784</td>
<td>2.513 ± 6.922</td>
<td>±1.066</td>
<td>26 ± 98</td>
<td>±11</td>
</tr>
<tr>
<td>Low risk</td>
<td>10.053 ± 3.263</td>
<td>11.532 ± 5.565</td>
<td>1.478 ± 6.315</td>
<td>±1.048</td>
<td>8.3 ± 77</td>
<td>±10</td>
</tr>
<tr>
<td>High risk</td>
<td>3.510 ± 1.047</td>
<td>12.484 ± 7.385</td>
<td>8.975 ± 7.497</td>
<td>±3409</td>
<td>228.9 ± 76.3</td>
<td>±29.4</td>
</tr>
<tr>
<td>Waist (cm)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>96.0 ± 15.0</td>
<td>92.1 ± 13.6</td>
<td>-3.9 ± 10.3</td>
<td>±1.5</td>
<td>-4.0 ± 12</td>
<td>±1.6</td>
</tr>
<tr>
<td>Low risk</td>
<td>80.3 ± 6.1</td>
<td>81.1 ± 8.2</td>
<td>0.9 ± 6.3</td>
<td>±1.7</td>
<td>0.8 ± 8.7</td>
<td>±2.2</td>
</tr>
<tr>
<td>High risk</td>
<td>103.7 ± 11.6</td>
<td>97.5 ± 12.4</td>
<td>-6.2 ± 11.1</td>
<td>±1.8</td>
<td>-6.2 ± 11.9</td>
<td>±1.9</td>
</tr>
<tr>
<td>SBP* (mmHg)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>118.34 ± 15.46</td>
<td>119.32 ± 16.66</td>
<td>0.98 ± 14.2</td>
<td>±2.1</td>
<td>0.7 ± 12</td>
<td>±1.7</td>
</tr>
<tr>
<td>Low risk</td>
<td>114.9 ± 11.5</td>
<td>116.5 ± 13.3</td>
<td>1.5 ± 12.2</td>
<td>±1.9</td>
<td>1.2 ± 11.2</td>
<td>±1.7</td>
</tr>
<tr>
<td>High risk</td>
<td>145.3 ± 18.9</td>
<td>142.3 ± 23.5</td>
<td>-3.1 ± 25.9</td>
<td>±12.8</td>
<td>-2.4 ± 18.1</td>
<td>±6.6</td>
</tr>
<tr>
<td>DBP** (mmHg)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>75.4 ± 10.7</td>
<td>78.1 ± 10.7</td>
<td>2.7 ± 9.6</td>
<td>±1.4</td>
<td>3.7 ± 13.5</td>
<td>±1.9</td>
</tr>
<tr>
<td>Low risk</td>
<td>73.5 ± 8.8</td>
<td>76.7 ± 9.0</td>
<td>3.2 ± 9.1</td>
<td>±1.4</td>
<td>4.4 ± 13.1</td>
<td>±2.0</td>
</tr>
<tr>
<td>High risk</td>
<td>96.5 ± 6.5</td>
<td>93.7 ± 14.8</td>
<td>-2.7 ± 13.1</td>
<td>±7.2</td>
<td>-3.7 ± 14.6</td>
<td>±7.7</td>
</tr>
<tr>
<td>Glucose (mmol/l)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>5.1 ± 1.8</td>
<td>5.05 ± 1.95</td>
<td>-0.1 ± 2.1</td>
<td>±0.3</td>
<td>-1.3 ± 59.2</td>
<td>±7.3</td>
</tr>
<tr>
<td>Low risk</td>
<td>4.6 ± 1.3</td>
<td>4.6 ± 0.8</td>
<td>0.1 ± 1.4</td>
<td>±0.2</td>
<td>5.6 ± 61</td>
<td>±8.3</td>
</tr>
<tr>
<td>HDL (mg/dl)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>66.1 ± 15.9</td>
<td>54.0 ± 14.3</td>
<td>-12.2 ± 15.6</td>
<td>±2.8</td>
<td>-18.0 ± 41.7</td>
<td>±6.6</td>
</tr>
<tr>
<td>Low risk</td>
<td>68.6 ± 12.8</td>
<td>54.3 ± 13.9</td>
<td>-14.3 ± 11.4</td>
<td>±2.1</td>
<td>-22.0 ± 22.7</td>
<td>±3.9</td>
</tr>
<tr>
<td>High risk</td>
<td>28.4 ± 11.7</td>
<td>49.2 ± 21.0</td>
<td>20.8 ± 32.2</td>
<td>±30.7</td>
<td>78 ± 156</td>
<td>±145</td>
</tr>
<tr>
<td>Triglycerides (mg/dl)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>122.5 ± 86.9</td>
<td>148.3 ± 74.2</td>
<td>25.8 ± 87.0</td>
<td>±16.0</td>
<td>32.2 ± 68.2</td>
<td>±10.0</td>
</tr>
<tr>
<td>Low risk</td>
<td>96.4 ± 42.3</td>
<td>139.0 ± 65.2</td>
<td>42.6 ± 70.2</td>
<td>±13.8</td>
<td>45.8 ± 59</td>
<td>±9.5</td>
</tr>
<tr>
<td>High risk</td>
<td>293.4 ± 110.5</td>
<td>209.1 ± 101.2</td>
<td>-84.3 ± 108.1</td>
<td>±59.1</td>
<td>-30.6 ± 50.6</td>
<td>±25.1</td>
</tr>
</tbody>
</table>

* = Systolic Blood Pressure; ** DBP= Diastolic Blood Pressure
Table 2: Subgroup analysis: Effect of the *Wokabaot Jalens* on physical activity behaviour change (in steps), indicated by group

<table>
<thead>
<tr>
<th></th>
<th>Pre ± SD</th>
<th>Post ± SD</th>
<th>Change</th>
<th>% Change</th>
<th>PA e.s.*</th>
<th>PA effect</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean ± SD</td>
<td>Mean ± SD</td>
<td>Mean ± SD</td>
<td>90% CL</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9,455 ± 4,297</td>
<td>13,700 ± 7,277</td>
<td>4,244 ± 8,720 ±2,293</td>
<td>42 ± 110</td>
<td>±22</td>
<td>Small Likely beneficial</td>
</tr>
<tr>
<td>Waist (cm)</td>
<td>Low risk</td>
<td>High risk</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9,004 ± 3,490</td>
<td>10,570 ± 4,456</td>
<td>1,566 ± 5,548 ±1,067</td>
<td>18 ± 90</td>
<td>±13</td>
<td>Small Likely beneficial</td>
</tr>
<tr>
<td></td>
<td>9,309 ± 3,767</td>
<td>11,782 ± 5,834</td>
<td>2,473 ± 6,923 ±1,116</td>
<td>24 ± 92</td>
<td>±11</td>
<td>Small Very likely beneficial</td>
</tr>
<tr>
<td>SBP (mmHg)</td>
<td>Low risk</td>
<td>High risk</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7,731 ± 3,615</td>
<td>10,402 ± 5,120</td>
<td>2,671 ± 6,946 ±3,796</td>
<td>42 ± 152</td>
<td>±66</td>
<td>Unclear Unclear</td>
</tr>
<tr>
<td></td>
<td>(mmHg)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DBP (mmHg)</td>
<td>Low risk</td>
<td>High risk</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9,280 ± 3,819</td>
<td>11,720 ± 5,867</td>
<td>2,440 ± 6,922 ±1,116</td>
<td>25 ± 94</td>
<td>±11</td>
<td>Small Very likely beneficial</td>
</tr>
<tr>
<td></td>
<td>(mmHg)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Glucose (mmol/l)</td>
<td>Low risk</td>
<td>High risk</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9,227 ± 3,884</td>
<td>11,733 ± 5,931</td>
<td>2,507 ± 7,088 ±1,241</td>
<td>26 ± 105</td>
<td>±13</td>
<td>Moderate Possibly beneficial</td>
</tr>
<tr>
<td></td>
<td>(mmol/l)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HDL (mg/dl)</td>
<td>Low risk</td>
<td>High risk</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9,174 ± 3,889</td>
<td>11,947 ± 5,963</td>
<td>2,773 ± 7,155 ±1,165</td>
<td>29 ± 101</td>
<td>±12</td>
<td>Moderate Possibly beneficial</td>
</tr>
<tr>
<td></td>
<td>(mg/dl)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Triglycerides (mg/dl)</td>
<td>Low risk</td>
<td>High risk</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9,376 ± 3,750</td>
<td>11,337 ± 6,586</td>
<td>1,961 ± 6,889 ±1,373</td>
<td>16 ± 97</td>
<td>±14</td>
<td>Small Likely beneficial</td>
</tr>
<tr>
<td></td>
<td>(mg/dl)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*=e.s.= Effect Size
Based on the PA classification provided by Tudor-Locke, positive changes in step categories were detected (Table 3).

<table>
<thead>
<tr>
<th>Step numbers</th>
<th>Classification</th>
<th>Pre N</th>
<th>%</th>
<th>Post N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;=5,000</td>
<td>Sedentary</td>
<td>16</td>
<td>14</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>5,000-7,499</td>
<td>Low-active</td>
<td>22</td>
<td>19</td>
<td>17</td>
<td>15</td>
</tr>
<tr>
<td>7,500-9,999</td>
<td>Somewhat active</td>
<td>30</td>
<td>26</td>
<td>17</td>
<td>15</td>
</tr>
<tr>
<td>10,000-12,499</td>
<td>Active</td>
<td>30</td>
<td>26</td>
<td>44</td>
<td>38</td>
</tr>
<tr>
<td>&gt;=12,500</td>
<td>Highly active</td>
<td>18</td>
<td>16</td>
<td>32</td>
<td>28</td>
</tr>
</tbody>
</table>

*Classification based on Tudor-Locke* 40

Importantly, whilst 14% were classified as being sedentary at baseline, this number has come down to 5% at follow up. 38% were classified as being active after the 12-week programme (as opposed to 26% before the programme).

**Low risk individuals**

Individuals were classified as low risk if their values did not exceed certain thresholds (see above). The large majority (N=101) of the sample was at low-risk PA behaviour, which means that most individuals’ mean step number exceeded the threshold of 5,000 steps; <5,000 steps is the category for being classified as sedentary. 40

The health effect of the intervention on LR individuals did not always track in the anticipated direction. Trivial (waist circumference, SBP, serum glucose) and harmful (DBP, HDL, triglycerides) effects were encountered. Importantly, PA behaviour showed possibly beneficial effects with a percent change of +8.3%. Interestingly, the LR group on waist circumference showed the strongest percent change in

**High risk individuals**

The majority of individuals were classified as HR for at least one variable. In detail, 84 individuals were classified as HR for waist circumference, 23 were classified as HR for fasting serum glucose, 13 were classified as HR for SBP, 11 were classified as HR for DBP and 15 were classified as HR for PA.

The HR PA group experienced the strongest increase in PA behaviour with a percent change of +229% representing a large most likely beneficial effect. A subgroup analysis indicates that the change in PA behaviour is larger in the HR SBP group (+35%) and in the HR DBP group (+34%) than the overall PA increase (+26%).

Importantly, data analysis indicates substantial effects on metabolic indicators for HR individuals: The HR HDL group experienced an increase in HDL levels of 79%. Further, the HR waist circumference group showed a decrease of waist circumference by 6%, representing a moderate possibly beneficial effect. Both SBP and DBP decreased for HR, showing unclear effects. A small likely beneficial effect on fasting serum glucose (-16%) was detected. Whilst mean triglycerides increased for the LR group, they decreased in the high risk group by 31%, representing a moderate possibly beneficial effect.

Whilst data do not allow to draw conclusions for the entire population of Vanuatu, findings do give an indication of baseline step counts from Ni-Vanuatu female civil servants.

**Discussion**

The purpose of this study was to evaluate a PA programme that was designed for Pacific women in urban Vanuatu. Overall, findings indicate a successful lifestyle change programme that had beneficial effects on PA behaviour and on some health indicators, particularly in high-risk individuals.

Findings were mostly consistent with those from other research. Overall, the use of pedometers were found to be associated with substantial increases in PA, at least in the short term. 21, 46, 47 A systematic review investigated the effect of pedometers on PA levels, studying 26 interventions.

Whilst observational studies indicate significant step increases of 2,183 steps/day over baseline, 21 my intervention showed an increase of 2,513 steps/day over
baseline. Translated into percentages, PA increases by 26.1% were found, whilst other studies showed increases by 26.9%; rather similar findings from different contexts.²¹

Baseline step numbers from the participants were higher (9,164 ± 3,787) than in other studies (7,029 ± 3,100).⁴⁸ This is probably related to the different living conditions and less car ownership in Vanuatu.

Findings from other populations indicate a small decrease in BP through pedometer-based PA interventions.²¹ A small change at the whole group level was observed. Importantly, mean BP dropped in the high-risk group by -2.4% (SBP) and -3.7% (DBP). The effect was unclear due to a small sample size in high-risk BP group.

Findings indicate that 26% of the sample met the Pacific PA recommendations (>10,000 steps) and only 14% were classified as sedentary (<5,000 steps) prior to intervention. The wider implication of this finding is that due to the high mean baseline step number, the promotion of an additional daily 3,000 steps or 30-minutes of moderate-intensity PA is more feasible than the promotion of 10,000 steps/day in this context.

The harmful effect on DBP may be related to white coat hypertension and an increased nervousness upon arrival; to the increased number of participants walking (in the heat) to where the follow-up study took place 15 minutes post-arrival; or to measurement error.

The effect on HDL levels in high-risk individuals remains unclear because of the insufficient data available. Further research with more detailed dietary measures are needed to understand these trends. The very likely harmful effect on triglycerides in low-risk individuals may be related to an increased consumption of local food. The traditional diet in Vanuatu is based on root crops (cassava, taro, yam) which are high in simple carbohydrates.³⁰ The consumption of large amounts of carbohydrates is associated with increases in triglycerides and thus can help explain the findings.⁵¹

Whilst pedometer-based PA interventions have shown to be effective in the short run, long-term strategies are lacking.⁴⁰,⁵² Due to staff turnover in the host country and limited funding options, the sustained effect of this intervention remains unknown.

Knowledge gained from this outcome evaluation includes the understanding that team-based pedometer PA programmes can be successful in engaging urban Ni-Vanuatu women in PA. The programme helped keep healthy individuals at low-risk and improve health risks among high-risk participants. Some modest weight loss was experienced.

Limitations

There is inevitably a gender bias because the objective of this study was to investigate the effect of the intervention in adult women, and so the results cannot be used to draw conclusions for men. Additionally, there is a selection bias because a large majority of participants (98.9%) in this study were Ni-Vanuatu, and results may not be consistent across other PICs. Furthermore, the study includes a social bias: only employed civil servants took part in the intervention and it is not clear whether similar effects are true for unemployed female civil servants. Individuals who did not attend the follow-up health screening were excluded from analysis, creating an exclusion bias. From field experience, I assume that urban residents of Melanesia tend to be more physically active than their neighbours from Polynesia due to the less advanced infrastructure: whilst the use of cars and buses for transport is more affordable in Apia (Samoa) or Nuku’alofa (Tonga), walking is a more common mode of transport in Vanuatu. However, evidence for this observation is lacking.

The Ministry of Health of Vanuatu recruited the study’s participant sample and thus participants were not randomly chosen from the population. It is also important to note that the sample was a self-selected group of volunteers. The possibility of prior motivation for behaviour change must not be overlooked. Further, findings are limited because of the lack of a control group and it remains unclear whether external programmes (TV advertisements, newspaper, other sport programmes) contributed to the increase in PA behaviour.

Future research is needed to determine whether lifestyle changes have been maintained in the long-term. Similar research approaches to assess the effect of such interventions on male individuals can improve the understanding around local PA behaviour in greater detail. A comparison or urban/rural pedometry data may aid in the process of defining local and more traditional lifestyle behaviour. Finally, more research on Pacific PA policy is strongly encouraged in order to respond to the lack of evidence in the region.

² White coat hypertension is a phenomenon in which patients exhibit hypertension in clinical settings but not in other setting. This may be related to increased anxiety that can be experienced during a clinical visit.⁴⁹
Conclusion

The first evaluated pedometer-based workplace health intervention from the Pacific region is presented. The intervention was successful in increasing participants’ PA behaviour, which resulted in improvements in some health indicators. Due to the study’s design (uncontrolled pre-post), the findings do not enable conclusive assumptions surrounding the effects of this intervention. However, the findings indicate how the programme has impacted its participants. Pedometer-based lifestyle research need to be explored more widely in this specific region where walking forms part of the daily routine for both men and women and is often favoured over any other sport activity. High-risk individuals benefit most from this intervention that is largely cost-effective and simple to administer, and the adaptation and further distribution in other local and regional contexts is encouraged. The move away from promoting 10,000 steps/day towards promoting additional 3,000 steps/days is suggested. The author endorses the investigation of male inclusion in prospective health programmes. Future investigators are encouraged to expand the programme to wider circles, for example to families and communities since external support mechanisms were found to be essential for programme effectiveness; they provided opportunities to leverage health initiatives to benefit the wider community and thus should be sought. Finally, the study recognizes the importance of locally-centred health promotion approaches, and advocates its use in future health promotion practices in the region.  

References


Formative evaluation of a UK community-based sports intervention to prevent smoking among children and young people: SmokeFree Sports

MARIA ROMEO-VELILLA¹,², CARYL BEYNON³, REBECCA C. MURPHY¹, CIARA E. McGEE¹, TONI A. HILLAND¹,⁴, DANIEL PARNELL¹,⁵, GARETH STRATTON¹,⁶, LAWRENCE FOWEATHER¹

¹ Liverpool John Moores University, Physical Activity Exchange, Research Institute for Sport and Exercise Sciences
² Staffordshire University, Centre for Sport, Health and Exercise Research
³ Liverpool John Moores University, Centre for Public Health
⁴ Monash University, Faculty of Education
⁵ Leeds Metropolitan University, Carnegie Faculty, Institute of Sport, Physical Activity and Leisure
⁶ Swansea University, Applied Sport, Technology, Exercise and Medicine Research Centre, College of Engineering

Corresponding author email: l.foweather@ljmu.ac.uk

Abstract

Background

Smoking is a leading cause of preventable morbidity and mortality in England. This formative research involved the evaluation of SmokeFree Sports (SFS), a novel community sport intervention to prevent smoking among children and young people (CYP).

Methods

SFS was implemented in five youth clubs situated in deprived communities, between February and June 2011, involving 246 CYP (6-18 years). Seventy-one CYP (median age=10.0 years, 56% male) and five youth club managers participated in this formative evaluation study, which utilised a mixed methods design.

Results

Smoking prevalence at baseline and post-intervention did not differ significantly (2.8% vs. 1.4%). However, positive educational effects were observed: A lower proportion of respondents believed that smoking cigarettes was associated with weight gain or loss (80.0% to 66.2%). A higher proportion of respondents felt that once a person started smoking it would definitely be difficult to quit (52.1% to 62%). Qualitative data revealed that CYP’s awareness of smoking factors increased while youth club managers provided suggestions for future implementation.

Conclusions

Sport may be a viable mechanism to educate CYP about elements of smoking and health. This study raises key characteristics for the implementation and evaluation of a definitive trial.

Background

Globally, the use of tobacco continues to be the leading cause of preventable death; by 2030, tobacco is predicted to kill more than eight million people worldwide.¹ Smoking is one of the leading causes of preventable morbidity and death, and is a risk factor for cardiovascular disease, chronic obstructive pulmonary disease and multiple cancers.² The economic impact of smoking on peoples’ health and society is calculated to cost £13.74 billion a year in the UK.³ Although the proportion of adults and young people in England who smoke has declined in recent years,⁴,⁵ tackling reduction of tobacco consumption continues to be a key public health priority.²

Children are mindful of smoking from an early age.⁶ Many children undertake smoking for the first time in childhood⁴
and almost two-thirds of current and ex-smokers start smoking before the age of 18. Additionally, research shows that smoking a single cigarette in childhood is highly predictive of regular smoking in adolescence and initiation at an earlier age is a strong predictor of smoking behaviour later in life. Preventing smoking initiation among children is therefore an important global public health goal.

Sport and recreation has been proposed as a context to embed health promotion into everyday activities. Eime et al. also suggest that the inherent association between sport and health means that sport may provide an ideal opportunity to integrate aspects of health promotion into a child’s environment. Youth sports coaches have the potential to be positive role models and can incorporate health promotion activity within their coaching practice placing them in an ideal position to be effective in supporting young people’s health through promotion, prevention and early intervention. Topics of healthy eating, alcohol prevention, mental health and injury protection have been the focus of successful health promotion efforts by sports coaches. Whilst several cross-sectional studies have reported negative associations between youth smoking and participation in sport and physical activity, to our knowledge there is no scientific evidence concerning whether sport and youth sports coaches can act as a possible mechanism to prevent smoking in children and young people.

In light of this evidence, a campaign entitled ‘SmokeFree Sports’ was established to prevent smoking (that is, to reduce smoking onset and support those who do smoke to stop) among children and young people (CYP) in one large urban city in North West England. The campaign, which was initially piloted within five community-based youth clubs, involved educating youth sport coaches to deliver smoke free messages through an organised programme of sports activities. It is recommended that practitioners undertake formative research when developing novel health promotion initiatives to help refine the programme protocols. Therefore this study aimed to (i) investigate the impact of the SmokeFree Sports intervention on CYP’s smoking behaviour, intentions, attitudes and beliefs towards smoking; (ii) evaluate the level of appropriateness of the SFS campaign; (iii) identify areas of improvement to inform the development of a subsequent intervention. This study forms part of a wider programme of formative research evaluating the SmokeFree Sports campaign. Data collected from youth sport coaches will be reported elsewhere (Hillard T et al., in press).

Methods

Description of the intervention

SmokeFree Sports was a multi-dimensional community-based intervention delivered between February and June 2011 in the City and North Neighbourhood of Liverpool. According to the Department for Communities and Local Government, Liverpool is the most deprived Local Authority in England. Furthermore, City and North Neighbourhood wards are the most deprived in Liverpool.

In accordance with guidance from the National Institute of Health and Clinical Excellence, a SmokeFree Sports logo and clear campaign messages were constructed in partnership with a leading marketing company and subsequently tested through two focus groups with CYP. The campaign was launched in February 2011.

Five youth clubs were used as settings to deliver sports coaching sessions for 12 weeks. Activities were delivered in two six-week blocks (dance and dodgeball / boxing and dodgeball) during school term time (typically between 4.30pm and 8pm). Five professional community coaches were recruited to deliver boxing and dance. Ten undergraduate student volunteers were trained to deliver dodgeball (UK Dodgeball Association, the Lead Coach Award). At the end of the 12 week programme a set of six dodgeballs were given to each youth club to sustain the delivery of the activity.

All recruited coaches were required to attend a free educational course on giving brief interventions around smoking delivered by Roy Castle FagEnds, a local charity organisation and community-based stop smoking service. The training comprised of a 3-hour workshop that aimed at preparing coaches to deliver messages on the impact of smoking on health and sport performance. The coaches also received a coaching package that included a coaching manual and a set of smoke free pledges. Both elements were adapted from a successful tobacco-control programme from the US state of Maine called Tobacco Free Athletes. The coaches were asked to distribute the smoke free pledges among the youth club members and to ask young people to sign them.

Key elements of the campaign were distributed through communication channels including flyers and posters displayed in local community settings and social media (i.e.
Facebook and Twitter). Campaign collateral including skipping ropes, t-shirts, water bottles, notepads, pens and yo-yos carrying the SmokeFree Sports logo were also produced. These were used to incentivise CYP’s participation and enhance retention levels by rewarding attendance to six coaching sessions. In addition, those who attended 12 sessions were rewarded with an ‘aspirational activity’ which involved a trip to an adventure centre.

**Participants and recruitment**

Five youth clubs were invited and agreed to take part in the intervention. These youth clubs were chosen because they had available sports facilities, low physical activity/sport provision, and a significant number of children in the target age range who regularly attended. In total 246 CYP participated in the SmokeFree Sports activities at least once. A convenience sampling strategy was used to recruit CYP from participating youth clubs into the research study. Informed parental consent and child assent was obtained from 83 CYP, of which 71 participants completed both baseline and follow up questionnaires. Thirty-four-CYP (10 female and 24 male) volunteered to take part in mixed gender focus groups (n=9), which took place in youth clubs immediately following the intervention. Each youth club manager (n=5) consented to take part in an interview between August and September 2011.

**Design and procedures**

To be able to appropriately inform future implementations, a formative evaluation was employed due to the early stage of development of the SFS campaign. Formative research assists to test concepts, programme materials and methods, and understand whether the intervention is accepted and appropriate in the target population. In formative research, mixed methods designs are frequently utilised to define essential programme elements and observe interventions from different perspectives. Therefore, a quantitative approach was considered to explore the impact of the intervention on CYP. In addition, a qualitative approach was applied to 1) further explore the impact of the intervention on CYP, 2) to gain insight into the appropriateness of the pilot intervention, and 3) to inform development of future implementation.

To assess the impact of the intervention on smoking, a questionnaire was constructed using items from the validated Health Survey for England and Global Youth Tobacco Survey, which was distributed pre- and post-intervention. Questions included demographic information (i.e. gender, age, postcode and ethnicity), smoking behaviour, smoking intentions, and knowledge and attitudes about smoking.

Focus groups explored CYP’s responses to the smoking questionnaire, appropriateness and improvements of future implementation in greater depth. Key areas of discussion included perspectives on the activities delivered as part of the intervention, recall of campaign messages, coaching practices, and views for improvement of the intervention. A schedule ensured that the required topics were covered whilst also allowing participants to respond freely. The focus groups (n=9) lasted from 15 to 45 minutes, were conducted in groups of three to seven CYP and were audio recorded using a Dictaphone.

Semi-structured interviews explored youth club managers’ views and opinions of the level of appropriateness and impact of the SmokeFree Sports intervention. Key areas for discussion included social marketing; impact of the campaign on CYP’s smoking behaviour, attitudes and knowledge; and suggestions for improvements to the campaign. Interviewees were given the opportunity to make comments about issues that were not specifically covered. Interviews were audio recorded and lasted between 20 and 50 minutes.

**Data analysis**

Prior to data analysis, questionnaires were collated and checked for anomalies using descriptive statistics. After checking for data normality, the Wilcoxon signed-rank test was applied to test for differences in questionnaire scores between the baseline and follow-up. Statistical significance was set at $p< 0.05$ and all analyses were conducted using SPSS version 17.0.

Focus groups and interviews were transcribed verbatim, imported into NVivo 2.0 software and subsequently analysed following a recommended six-phase approach to thematic analysis. Phase one (familiarisation with the data) involved reading and re-reading of the data and noting down initial ideas. Phase two (generating initial codes) involved coding interesting features of the data in a systematic fashion whilst collating data relevant to each code. Phases three through five involved the further searching, reviewing, defining and naming of themes. During phase six (producing the report) a thematic map of the analysis was generated of which master themes are presented as subheadings within the results section. This process was led by the first author and critically questioned.
at each step by three researchers (LF, TH and RM). When disagreements occurred, alternative interpretations of the data were provided until an acceptable consensus was reached by the involved researchers.

Ethics

Child assent and adult consent to participate in this study were gained. Ethical approval was granted by Liverpool John Moores University Ethics Committee (reference: 11/ SPS/007).

Results

Participants were aged between seven and 18 years, median = 10.0 (interquartile range = 9.0 to 13.0), 56.3% were male, 88.7% were white British, 1.4% were black British, 4.2% were mixed black and white and 2.8% were of other mixed ethnicity. Results are presented based on the whole sample (n=71).

Impact of the intervention

Table 1 displays quantitative findings surrounding the impact of the intervention on intentions, knowledge and attitudes about smoking.

Smoking behaviour

At baseline, 97.2% of participants reported that they did not currently smoke; 2.8% of participants were current smokers (n=2 males). Eighty percent of participants had never smoked, 16.9% had tried smoking once, and the remaining 4.2% of participants described themselves as either having used to smoke (1.4%), sometimes smoke (1.4%) or smoked over 6 cigarettes per week (1.4%). Likewise, the majority of the CYP who participated in the focus groups said that they did not smoke, although a few mentioned that they had tried it. Youth club managers were aware that only a small number of smokers attended the youth clubs, “we have very few smokers here in our young people”.

There were no significant differences between smoking prevalence at baseline and follow-up (2.8% vs. 1.4%). Youth club managers confirmed that the intervention did not have an impact on the CYP’s behaviour, with one youth club manager saying: “in relation to stopping or reducing their smoking, nothing has changed because they weren't heavy smokers to start with”.

CYP from six out of nine focus groups expressed that at least one member of their family smoked. CYP from three focus groups also mentioned that friends or peers smoked:

<table>
<thead>
<tr>
<th>Question (Response*)</th>
<th>Baseline</th>
<th>Follow-up</th>
<th>Δ</th>
</tr>
</thead>
<tbody>
<tr>
<td>If one of your best friends offered you a cigarette, would you smoke it?</td>
<td>88.7</td>
<td>88.7</td>
<td>0</td>
</tr>
<tr>
<td>Definitely not</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At any time during the next 12 months do you think you will smoke?</td>
<td>90.1</td>
<td>91.5</td>
<td>1.4</td>
</tr>
<tr>
<td>Definitely not</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Once someone has started smoking, do you think it would be difficult to quit?*</td>
<td>52.1</td>
<td>62</td>
<td>9.9*</td>
</tr>
<tr>
<td>Definitely yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you think that smoking cigarettes makes you gain or lose weight?*</td>
<td>20</td>
<td>33.8</td>
<td>13.8*</td>
</tr>
<tr>
<td>No difference</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you think that smoking cigarettes is bad for your health?</td>
<td>88.7</td>
<td>93</td>
<td>4.2</td>
</tr>
<tr>
<td>Definitely yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you think that it is safe to smoke for only a year or two as long as you quit after that?</td>
<td>60.6</td>
<td>62</td>
<td>1.4</td>
</tr>
<tr>
<td>Definitely not</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* = most positive response shown only, Δ = percentage change from baseline to follow-up, * = significant difference (P<0.05)
Young people now, like 13, 14, 12 and 11 and you see them all in the park, when you go the park with your mates and something. And they are all smoking and they say that it’s good. Some of my mates think that it’s good, but when I look at them I just think…it’s not. It’s really not. (Participant –Focus group E)

**Intentions to smoke**

Table 1 depicts that at baseline and follow-up around nine out of ten participants ‘would not smoke if a best friend offered a cigarette’ and did not intend to smoke during the next twelve months. Most children and young people stated that they do not have the intention of smoking in the future, including if a best friend offered them a cigarette, “it’s our choice, they do what they want to do and I do what I wanna do”. A child said that he felt even more determined to never start smoking, saying, “It [SmokeFree Sports] gives you more reason not to smoke”. Another child articulated this with the following personal experience:

...I was in the park with my two friends and she had just come in and she had bought these fake ciggies from [the shop]. And she went to one of my other friends ‘do you wanna smoke’ and she went ‘only if [speaker] will’, so she asked me and I said ‘no’ and my other friend said ‘no’, but like I just said ‘no’ and walked away, but why I did it that’s what it used to be like. If you didn’t do it you couldn’t be in the gang. (Participant –Focus group E)

**Knowledge and attitudes about smoking**

At baseline, nine out of ten CYP ‘definitely agreed’ that smoking is bad for their health (Table 1). However, there was a range of responses given by participants surrounding items on smoking and weight gain and whether or not it is difficult to quit smoking once you have started. More specifically, 80.0% of participants thought that smoking cigarettes was associated with weight gain or loss, and 22.5% stated that smoking cessation was ‘probably not’ or ‘definitely not’ difficult.

Post-intervention, there was a significant increase in the proportion of respondents who felt that once a person started smoking it was difficult to give up ($z = -2.71$, $p < .05$). Furthermore, there was a significant 13.8% increase in the proportion of respondents who believed that smoking cigarettes was not associated with weight gain or weight loss at follow-up ($z = -2.132$, $p < .05$). No significant differences were found in the proportion of respondents who felt that it was definitely not safe to smoke for one to two years.

Whilst there was no significant intervention effect on CYP awareness that cigarettes were bad for their health (likely due to a ceiling effect), qualitative data revealed further insights. For example, CYP remembered learning about the components of a cigarette, “Yes and you know like the brown stuff, it’s called...tobacco. That’s like the worst stuff”, and “when those people came in they showed you how much toxic stuff they had in it, tar is it?” Others commented that they had gained new knowledge about the types of illnesses and health consequences of smoking, for example saying: “About the damage to your lung cancer, didn’t know about that”. CYP declared that they were already against smoking before the start of the SmokeFree Sports campaign, “I have always felt this way, but I have learned a little bit more since being involved in dodgeball”. However, whilst they recognised that they did not change their views on smoking, some felt more aware about the negative consequences, “I knew it was dangerous, but I never knew it was that dangerous”. This aspect was also perceived by one youth club manager, who remarked that the intervention reinforced CYP’s non-smoking attitudes, “I think it’s re-affirmed for them you know that this is not a good thing to do… definitely”.

The additional information that participants gained from SmokeFree Sports supplemented the reasons offered for not smoking. For instance, focus group participants noted the impact of smoking on sports performance: “…you shouldn’t smoke if you want to carry on boxing”. Similarly, youth club managers suggested that coaches helped to educate CYP in relation to the conflict of interests between smoking and participating in sports, “if they're into football, say if you smoke it will affect your football in this way, that type of thing.” Furthermore, one of the managers stated that the SFS campaign had an impact on the CYP who were current smokers and have ambitions of developing a career in sport:

If you're thinking of a career that has a lot of physical activity...given the message that you were giving through SmokeFree Sports and going into careers that have physical activity as part, they realise that smoking is not going to enhance their performance. (Youth club manager 3)
**Appropriateness of the SmokeFree Sports campaign**

**Awareness of the SFS campaign**

CYP and youth club managers were aware of the purpose of the SmokeFree Sports campaign, “to persuade people not to smoke”. However, children and young people only remembered part of the SmokeFree Sports campaign’s name, suggesting answers such as “SmokeFree thing”, “SmokeFree”, “Smoking”, “Erm, smoke free dodgeball... something like that”. In addition, none of the children and young people in the focus groups could recall all three intervention sports that were delivered in the youth clubs.

**Smoke free messages**

CYP from five focus groups verbalised that they had received smoke free messages during coaching sessions, for example one child said “the coach who did the boxing said that each cigarette takes 3-4 minutes off your life”. Messages were usually delivered immediately before or after the coaching sessions. However, a substantial number of participants noted that they had never heard any smoking messages. A few participants made positive statements about the coaches and recalled some of the smoking-related activities and resources that coaches used. Some participants appeared to be willing to listen to coaches’ talk about smoking issues although a minority of participants mentioned the incongruence of being told not to smoke by people who are smokers.

*Can I just say something a minute? I know like I am never going to smoke. It's not good for you. But say like, some people who tell you not to smoke, they smoke themselves.*  
(Participant –Focus group E)

**Smoke free pledge**

Seventeen out of the 34 participants who took part in the focus groups had signed the smoke free pledge and were aware of the meaning behind signing it. One participant said it was “a little contract and then you get a certificate that you’re never gonna smoke”. However, numerous CYP from different focus groups had never seen or heard about the pledge, saying “we didn’t have to do that”. Not all club managers support the pledges. One club manager considered that the pledges could work but only temporarily, saying, “yeah I think that actually works well in the short term... how long the pledges lasts even for adults?...”. Another club manager completely disagreed, stating “I think they’re a waste of time to be perfectly honest, the certificates [pledges], because I’ve got them all behind the coffee bar. You give them out and they’re not bothered.”

**Incentives**

Most of the participants were aware of the existence of SmokeFree Sports collateral and the incentives scheme, “it’s like every 5 times you come, you get like a prize and you get like a top, a bag and a water bottle. I think its 12 times you get a whistle”. Some participants were asked whether the incentives were the main motivation for attending the coaching sessions but most denied this saying things such as, “no, because I don’t really care about the gifts”. The most common reason to attend the activities was for enjoyment, “it was fun and I just like playing the games”. However, CYP also gave other reasons including: (1) to alleviate boredom, “there’s nothing else to do”; (2) an inclination towards the sports offered, ”...we like dodgeball so we just started coming”; (3) coach-related, “because the coaches were good”; (4) a learning component, “we learned about smoke free and about what not to do and what to do”; or (5) a social component, “we got more friends”.

**Duration**

Some youth club managers believed that Smokefree Sports should have lasted longer in order to be able to build a rapport with the participants, “to really strike up a relationship with the kids...because until they trust you they won't listen to you at all, I think it should be longer”. In contrast, another youth club manager verbalised that the sporting activities may need to be shortened to sustain children and young people’s interest, saying:

*For young people from what I see is six weeks is a long time for dodgeball, maybe if it has been dodgeball for 2 weeks, something else for 2 weeks and back to dodgeball maybe. Just to mix it up a bit.* (Youth club manager 3)

**Legacy**

The youth club managers perceived that the campaign left a legacy behind. Managers highlighted that the campaign donated new sporting equipment to play dodgeball, raised awareness of other organisations that the youth clubs can partner with in order to tackle smoking, trained members of staff on smoking prevention, and built capacity for running smoking prevention activities:

*We were looking at coming into our autumn/ winter programme now we sort of like resurrecting it again with our own staff and doing little workshops [with children] on...*
...the damages of smoking can do. (Youth club manager 4)

Overall views

All youth club managers stated that they would support future SmokeFree Sports Campaigns. Four out of five youth club managers expressed positive views regarding the philosophy of the SmokeFree Sports campaign, saying it was “a great campaign,” and “absolutely fantastic, the whole idea of SmokeFree Sports”. The remaining youth club manager reported several negative points about the campaign including: getting only one activity that was already part of the existing activities offered by the youth club (dodgeball); SmokeFree Sport coaches not being able to engage with participants; organisation-related problems of the aspirational activity.

Discussion

To our knowledge, SmokeFree Sports is the first intervention in the UK to use sport to prevent smoking among CYP. We examined the impact of a preliminary SmokeFree Sports intervention on CYP’s smoking prevalence, intentions, attitudes and knowledge towards smoking behaviour, evaluated level of appropriateness of the SFS Campaign, and identified areas of improvement. Research findings regarding the impact of the SFS campaign revealed that a high proportion of CYP were non-smokers at pre-intervention. Positive educational effects were observed in relation to understanding the interaction between smoking and health. Awareness of smoking factors increased and participants stated that the campaign made them more determined to stay smoke free. Furthermore, the campaign was well received by CYP and youth clubs managers. These initial findings await confirmation in a definitive study with follow-up, but appear to lend support to the use of sport as a vehicle to deliver smoke free messages.

The intervention had no effect on CYP’s smoking behaviour though the sample was characterised by a high proportion of non-smokers pre-intervention. It is possible that there could be some participation bias with non-attenders to the youth clubs or sports activities differing in their smoking behaviour from attenders. Prevalence of regular smoking significantly increases during the teenage years; however, in this sample two-thirds of participants were aged between seven and 12 years. Therefore, the high proportion of non-smokers likely reflected the age range of the sample. Youth club managers confirmed that most children at the youth club were not smokers. This suggests that future interventions that target similar aged participants should consider concentrating efforts towards reducing smoking onset. Further research with a higher proportion of smokers is needed to determine the appropriateness and impact of the intervention as an aid to smoking cessation in CYP.

Smoking experimentation represents a high risk for becoming a regular smoker in the future; one in five participants had tried smoking at least once in the past. It was therefore encouraging that CYP who did not smoke at baseline remained smoke free at follow-up. Further, a high proportion of participants did not intend to smoke even if their friend offered them a cigarette – a positive finding given that most participants highlighted having peers who smoked and a recent study found that adolescents’ smoking was strongly associated with best friends’ smoking. A child regarded that ‘smoking was their [peers] own choice’. This resilience to undertaking smoking behaviours despite potential peer influence suggests that the knowledge gained from SmokeFree Sports could help tackle such social norms found in other research. Peer smoking together with boredom and curiosity has been identified as the principal reasons of starting smoking within young people. The majority of children verbalised that at least one member of their immediate or extended family smoke. This is important as parental smoking is also a predictor of smoking uptake in later life. These social influences may warrant the addition of a family and peer component to the intervention and further support a prevention focus within future campaigns.

This study demonstrated CYP’s knowledge about the harmful effects of smoking increased following the intervention. CYP from five focus groups mentioned knowledge gains through SmokeFree Sports (i.e. of harmful effect, impact on weight status and recognition of addictive component). One child stated that this made them more determined to ‘never’ start smoking. Knowledge concerning smoking has previously been measured within community smoking prevention interventions for young people and some interventions have successfully demonstrated an impact. Specifically, we found positive educational effects for topics including the influence of smoking on weight status and recognition of its addictive component. However, it is difficult to directly compare knowledge gains found within this study with other interventions because of methodological differences. Some studies have explored varied knowledge items such as refusal skills or decision-making, others focused only on a single item such as ‘harm caused by tobacco’, while others did not specify any particular item.
It has been shown that child smoking is driven by social relations, such as gaining group membership, and that children who smoke do not recognise that they have nicotine dependence as adults tend to do. This makes CYP vulnerable towards nicotine addiction and could explain why some participants did not recognise the addictive risk of smoking at baseline.

In terms of the level of appropriateness and future improvements, CYP were aware of the social-marketing campaign, possibly through receiving SFS branded collateral and incentives. However, most of them verbalised that these incentives did not motivate them to participate in the activities. In fact, enjoyment and the activities themselves were the primary motivational factors. Therefore, it is recommended that future campaigns with social marketing components find a cost-effective compromise between incentivising participation and raising brand awareness. In relation to a campaign legacy, youth club managers felt that the smoking cessation training course provided an opportunity to build partnerships with local smoke free organisations and build capacity for conducting further smoke free initiatives in house. Overall, youth club managers considered SmokeFree Sports a novel programme and supported the philosophy of promoting positive smoke free messages through sports.

Regarding future interventions, lessons were learned from the implementation and delivery of the SmokeFree Sports campaign activities and messages. CYP recalled that coaches typically delivered smoke free messages before or after the activity sessions but scarcely during sessions. Consequently, coaches may need practical tips and creative ideas to incorporate smoke free messages within sports activities. Further, youth club managers suggested that the activities should last longer than 12 weeks to enable coaches to build a solid connection with CYP in order to make a stronger impact on their attitudes, knowledge and intentions. Building rapport has been highlighted as one of the essential aspects to take into consideration by practitioners in charge of screening and counselling young people who smoke cigarettes. Therefore, it is recommended that if sport coaches are not familiar with the participants, team building activities should be included at the start of the coaching programme to foster relationships. This is especially important if the campaign is delivered within challenging environments such as community-based settings (i.e. youth clubs).

There are a number of limitations to this study. Firstly, this study did not include a control/comparison group. However, it has been acknowledged that community-based interventions are difficult to evaluate particularly in relation to the difficulties of establishing control groups. Secondly, this was a pilot study conducted in two areas of Liverpool; the number of intervention settings was restricted and the sample size was low, limiting the generalisability of the findings. Recruitment of the target population to the research study at youth club settings was particularly challenging. Thirdly, a self-report questionnaire was used as
a method to measure smoking and it is possible that respondents may have underreported their smoking habits. On the other hand several strengths of the study were identified. Participants were reached through natural settings that were not artificially created to accommodate research purposes, therefore enhancing the ecological validity of the findings. In addition, a mixed methods approach was employed to address the research questions, producing more complete knowledge to inform theory and practice and providing stronger evidence through the convergence and corroboration of findings. Further, this preliminary intervention was designed through strong collaborative action with local partners and stakeholders building on formative work with children.

In conclusion, a novel SmokeFree Sports campaign appears to be a promising vehicle to educate CYP about smoking and health. The use of sports coaches to deliver smoke free messages could provide a sustainable model for tobacco control programmes to dispel myths around smoking and health. Recommendations for future research and implementation are, firstly, for a randomised controlled trial to be conducted with the inclusion of robust measures of smoking status; if the aim is prevention, mediating factors (e.g. decision making and refusal skills) or determinants of behaviour that are sensitive to change and specific to the intervention’s purpose. Moreover, intermediate and outcome measures should be accompanied by a process evaluation to determine implementation of campaign messages, and effectiveness of various coaching styles and practices. Secondly, apply a health promotion framework and behaviour change theory, such as the socio-ecological model and theories of Planned Behaviour or Social Learning, to guide the design and evaluation of the intervention. Thirdly, assess smoking behaviour objectively, for instance using a breath carbon monoxide monitor, instead of relying on self-reported information. Fourthly, include recruitment and retention strategies to ensure a definitive study is sufficiently powered. Fifthly, a follow-up study is needed to determine whether belief changes had an impact on smoking behaviour in later life. Finally, views on the SFS campaign from CYP and youth club managers on the provided incentives, duration of the activities, pledges and the delivery of smoke free messages will inform the future implementation.

**Funding:** This project was commissioned by Liverpool Primary Care Trust using funding from the Local Government Improvement and Development Agency.

**References**


www.jsfd.org


Possibilities and Dangers at the Nexus of Sport and Development Discourses: An Analysis of Racialized and De-historicized Spaces

NICHOLAS S. MAYRAND

University of Dayton, Department of Religious Studies

Corresponding author email: mayrandn1@udayton.edu

Abstract

Pairing the discourse of sport with that of development has resulted in innovative and fruitful approaches to development work, but has also reinforced and created racialized and de-historicized spaces that constrain the positive impact of development efforts. This paper traces the evolution and interplay of sport and development discourses within recent Catholic social thought in order to highlight the importance of attention to solidarity and subsidiarity in development contexts that involve sport. The specific focus rests on the positive difference that a dual commitment to solidarity and subsidiarity can make with regard to racialized and de-historicized social spaces. This essay serves as an initial attempt to bring together the “sport for development and peace” sector and Catholic social thought, which the author hopes will be the beginning of a fruitful conversation between the two fields of study.

Introduction

I begin with these two quotes because this essay brings together two fields of study that seem like an unlikely pair: theology and the “sport for development and peace” sector (SDP). The similarities between the two statements are striking when one considers that the first comes from a Catholic pope, the second from a U.N. Secretary-General. These quotes provide a modest, initial indicator that the two fields may share more in common than many would anticipate. In what follows, I argue that Catholic approaches to the use of sport for human development in both theory and practice prove helpful for dealing with certain issues that leading SDP scholars raise in their critiques. I focus specifically on problems surrounding the production of racialized and de-historicized spaces in SDP efforts, showing that attention to the Catholic principle of subsidiarity and virtue of solidarity can help prevent these spaces from forming.

I have organized the essay into three main sections. First, I trace the emergence of development and sport discourses in 20th century Catholicism. This section contextualizes the intertwining of these two discourses and introduces the two key terms: solidarity and subsidiarity. Second, I assess the key critique that SDP efforts have the potential to create or reinforce racialized spaces. This section focuses on theoretical concerns, employing specific examples when appropriate and useful. Finally, the third section features an analysis of solidarity and subsidiarity in an effort to address issues raised in the second section. I highlight specific projects that Catholic Relief Services has recently undertaken in order to demonstrate the practical application of these key elements of Catholic social thought.

Keywords: Sport for Development and Peace, Solidarity, Subsidiarity, Social Space, Catholic Relief Services
I. The Emergence of Discourses of Development and Sport in 20th Century Catholicism

“How can the Church not be interested in sport?”
-Pius XII, Address to Roman Athletes, May 20, 1945

Throughout the last century, key shifts in the Catholic tradition have occurred that have generated interest in areas of discourse that were largely absent from the tradition in years past. This essay focuses on two such discourses, namely that of development and that of sport. The importance of the discourse of development was especially recognized in 1967 when Pope Paul VI promulgated the encyclical *Populorum progressio*, which has been called the Church’s “magna carta on development.” This encyclical provides a humanistic understanding of development that has since been refined and updated within the Catholic tradition especially in John Paul II’s *Sollicitudo rei socialis* and Benedict VI’s *Caritas in veritate*. Concurrently, the discourse of sport has garnered increasing consideration especially following its inclusion in *Gaudium et spes*. Over 200 papal speeches and greetings concerning various sport themes throughout the 20th century together with the founding of the “Church and Sport” Section of the Pontifical Council for the Laity in 2004 and the “Culture and Sport” Department in the Pontifical Council for Culture in 2011 attest to the growing interest in the discourse of sport within Catholicism.

As these discourses have developed within the Catholic tradition, they have also come into contact with one another. Although no comprehensive treatment of the intersection of these two discourses within Catholicism exists, the idea that sport plays a role in human development has consistently appeared in various texts, speeches and endeavors. For example, at a Jubilee event for athletes on October 29, 2000, John Paul II stated: “We have offered sports to God as a human activity aimed at the full development of the human person and at fraternal social relations.” In what follows, I will investigate the evolution and interplay of these two key discourses in order to establish a context for the remainder of the paper.

A. Seeds of integral human development and an awakening Catholic consciousness regarding sport

At the 1084th plenary meeting of the General Assembly of the United Nations in 1961, the 1960s were declared the “decade of development.” This decade was one of not only rapid advancement in terms of technology and communication capabilities but also one of increasingly alarming inequality and division. As many “developing” nations tried to cope with newfound independence, cold war rivals invested both economically and militarily in many of these young nations with hopes of gaining strategic advantages. It was within this context that Pope Paul VI published his encyclical devoted to development in 1967, *Populorum progressio* (henceforth, *PP*).

*PP* presented a robust and humanistic development discourse. Drawing on the Christian humanism of Louis-Joseph Lebret and Jacques Maritain, *PP* argued for an understanding of economic and social development linked with the Christian view of human beings in community. The human person was placed at the center of this vision of complete development with the goal being the “transition from less than human conditions to truly human ones.” Less than humane conditions included not only material poverty but also moral poverty characterized by selfishness and oppression, thus implicating the rich by extending this notion of development beyond the material. Conversely, truly human conditions included “the rise from poverty to the acquisition of life’s necessities; the elimination of social ills; broadening the horizons of knowledge; acquiring refinement and culture.” These basic conditions paved the way for higher values such as “a growing awareness of other people’s dignity” and “a desire for peace,” which in turn make possible the recognition of the highest values and of God. According to *PP*, these truly humane conditions are the necessary font for faith and “loving unity in Christ.”

In addition to rooting development in the process of Christian humanization, *PP* took Pope John XXIII’s concept of solidarity and expanded its significance to make it central to social and economic justice. *PP* established solidarity as the necessary, conscious response of people and emphasized the undeniable interdependence among people and nations. *PP* also argued that individual development depends on “a joint effort for the development of the human race as a whole.” In practical terms, *PP* claimed that solidarity demands wealthier nations to fulfill three key obligations that cover issues of aid, trade relations and truly mutually beneficial progress. *PP* also concluded with an appeal for joint action from both individuals and nations in pursuit of peaceful development, solidifying the link between solidarity, development, and peace.

Not surprisingly, *PP* and its new understanding of development garnered a mixed reception throughout the world. Free market capitalists criticized its interventionist elements while many Latin American bishops worried that the role of politics in development was not given enough
attention, which could restrict opportunities for liberation.\textsuperscript{3} The publication of \textit{Humanae vitae} in 1968 triggered uproar surrounding the contraception debate and shifted the attention of many scholars from PP, perhaps delaying the critical conversation surrounding the novel conceptions of human development that the document espoused. Despite these factors, \textit{PP} clearly laid the groundwork for the evolving concept of integral human development that has informed the development efforts of Catholics and non-Catholics alike for over fifty years. In addition to \textit{PP}'s impact on John Paul II’s \textit{Sollicitudo rei socialis} and Benedict XVI’s \textit{Deus caritas est}, Deck points out that \textit{PP}'s development approach has numerous points of contact with development expert Amartya Sen.\textsuperscript{3}

The 1960s were also an important decade for the emergence of a discourse of sport within the Catholic tradition. Although several popes in the first half of the twentieth century had made remarks about sport in a limited sense, it was not until 1965 that sport was mentioned for the first time in a papal encyclical. Within a list of ways that leisure time should be used to “fortify the health of the soul and body,” \textit{Gaudium et spes} referenced sports activity as that which “helps to preserve equilibrium of spirit even in the community, and to establish fraternal relations among men of all conditions, nations and races.”\textsuperscript{4} According to Monsignor Carlo Mazza, this placed sport “at the very heart of a culture” and initiated a new consciousness about sport that “led the Church right into the middle of the phenomenon of sport,” providing a foundation for more precise and direct discussion of both the benefits and dangers associated with sport.\textsuperscript{5}

The increased attention to both sport and development discourse within Catholicism in the 1960s eventually resulted in an intertwining of the two discourses. The location of sport within culture as a source of fraternity and the place of culture and solidarity within the integral development of the human person provided a clear link between sport and development. Within the discourse of a Christian humanistic development, it was not a giant leap to see how sport can be used for improving the human person as well as to protect the human person from consumerism or materialism within sport as important parts of integral development.\textsuperscript{5} This new marriage between the discourses of sport and development evolved and expanded especially during the papacy of Paul VI’s successor, John Paul II (referred to as the “sportsman pope” because of his love for athletics and attention to sport as an area deserving Christian reflection).

B. The legacy of \textit{PP}: The ongoing maturation of integral human development and the explicit role of sport

In 1987, twenty years after \textit{PP}'s promulgation, John Paul II issued \textit{Sollicitudo rei socialis} (On Social Concern, henceforth \textit{SRS}).\textsuperscript{9} \textit{SRS} affirmed the Church’s commitment to the integral development laid out in \textit{PP} and rooted it in the new context of the 1980s. Much like Paul VI in \textit{PP}, John Paul II discussed false understandings of development, presented the Church’s conception of true integral development, and provided practical steps to bring that integral development to fruition.\textsuperscript{10} Introduced as a 20\textsuperscript{th} anniversary commemoration of \textit{PP}, \textit{SRS} recognized \textit{PP}'s importance in three key areas according to Curran et al.: its success at highlighting additional dimensions of development beyond the economic; its exposition of the interdependent relationships between rich and poor countries; and its contribution that development and peace go hand-in-hand.\textsuperscript{10}

While \textit{PP} extended the fledgling concept of solidarity, \textit{SRS} took solidarity and made it a key virtue for pursuing integral development, which counters the ills of both under- and super-development. Solidarity occurs when society’s “members recognize one another as persons,” which transforms the “other” into a “neighbor,” “helper,” or “sharer,” in a common life.\textsuperscript{9} According to Curran et al., solidarity becomes “a veritable synonym”\textsuperscript{10} for development in this encyclical that challenges many of the “structures of sin” such as the politics of blocs, various forms of imperialism and trenchant distrust.\textsuperscript{9} Solidarity brings an awareness that all human persons are united both to God as a common father and other humans in fraternity through Christ, which in turn allows the “positive energies” present in the modern world to be released from the “evil mechanisms” and structures of sin.\textsuperscript{9}

Recognition of John Paul II’s commitment to this robust understanding of solidarity is critical for understanding how he brought the discourse of sport explicitly to bear on the discourse of development throughout his pontificate. John Paul II consistently referred to sport’s role in the integral development of persons, which is understood specifically via solidarity, speeches and homilies that he delivered to various groups of athletes and sport governing bodies. For example, in 1979, he proclaimed to members of Italian soccer club A.C. Milan that sport offers “training in social relations that are founded upon mutual respect for the person, and an element of social cohesion that favors the friendly gathering of persons…”\textsuperscript{6} His statement makes use of language that fits perfectly with the language he later uses to describe solidarity in \textit{SRS}. In the years following
SRS, John Paul II made explicit the connection between sport and development, with development understood in terms of solidarity. In his homily at the Mass for the Jubilee of the World of Sport in 2000, he stated “we have offered sports to God as a human activity aimed at the full development of the human person and at fraternal social relations.”6 Reflecting on this homily four years later in a speech about sport and tourism, John Paul II urged Christians to pursue a specific form of sport that moves towards integral development:

…sport that protects the weak and excludes no one, that frees young people from the snares of apathy and indifference and arouses a healthy sense of competition in them; sport that is a factor of emancipation for poorer countries and helps to eradicate intolerance and build a more fraternal and united world; sport which contributes to the love of life, teaches sacrifice, respect and responsibility, leading to the full development of every human person.6

Similar descriptions of the role of sport show up throughout the 120 different discourses on the subject attributed to John Paul II by the time of his death in 2005.

Pope Benedict XVI has since continued this trajectory with respect to development and sport. His 2009 encyclical Caritas in veritate (henceforth, CIV) built upon PP and SRS, referring to PP as “the Rerum Novarum of the present age.”11 Much like SRS, CIV began with a lengthy discussion of the enduring message of PP before applying it to the new context of the 21st century. CIV affirmed once again that “development needs above all to be true and integral”11 and set out to explore what that entails in the context of globalization. Although a full analysis of this recent encyclical exceeds the bounds of this paper, it is important to note that solidarity again emerged as a central concept in this treatment of human development (the term solidarity occurs 40 times in the document). This emphasis on solidarity was accompanied by a strong appeal to subsidiarity, two terms to which I will later return. Through CIV, Benedict carried forward the discourse of development in the Catholic tradition, a fact which he explicitly acknowledged: “At a distance of over forty years from the Encyclical’s publication, I intend to pay tribute and to honour the memory of the great Pope Paul VI, revisiting his teachings on integral human development and taking my place within the path that they marked out…”11

With respect to sport, Benedict followed John Paul II in connecting it to development, understood primarily via solidarity. For example, in an address in 2005 to participants in the “Festa dello sportive,” Benedict stated that sports “contribute to the construction of a society where mutual and fraternal acceptance reign.” In a speech to members of the Venarotta Calcio Association, he again connected sport and solidarity: “Dear Friends, you are messengers not only of the serene joy of play, but also that which comes from partaking in fraternity and solidarity.”12 Benedict also followed in John Paul’s footsteps with the creation of a new office within the Pontifical Council for Culture in 2011. Benedict created the “Culture and Sport” Department to support and further the work of the “Church and Sport” Section of the Pontifical Council for the Laity, which John Paul started in 2004.

By tracing this historical trajectory within the Catholic tradition, I have tried to show the growing prominence of the discourses of sport and development within Catholicism especially since the 1960s. These discourses have evolved not only concurrently but also in a rather complex relationship with one another. However, theologians have yet to spend much time grappling with both the potentialities and problems associated with the marriage of sport with development. In the remainder of this paper, I will offer a limited “spatial” analysis of the interlocking of these two discourses. I focus on issues of race and history before turning back to the aforementioned principles of solidarity and subsidiarity, principles which I contend offer real possibilities for thinking through certain tough critiques of SDP.

II. SDP and Racialized and De-Historicized Space

The preceding section argues that John Paul II and Benedict XVI’s explicitly recognized the role of sport in bringing about integral human development especially via solidarity. If their claims are to be taken seriously, the following questions deserve attention: First, what difficulties arise when sport and development are linked that prevent SDP efforts from bringing about a robust form of human development? Second, does the Catholic tradition contain elements of reasoning that can provide ways to potentially address problems that crop up in SDP projects?

Researchers in the SDP sector have been addressing the first question at length. These critical reflections together form an increasingly large body of research that incorporates sociology, anthropology and political science in efforts to inform a wide range of SDP efforts. Prominent SDP researcher Richard Giulianotti divides these diverse SDP efforts into four broad categories that allow for more nuanced critiques: nongovernmental, nonprofit organizations (NGO’s); intergovernmental and...
governmental organizations; the private sector; and radical NGO’s and social movements. This essay will focus primarily on the first of these four categories, NGO’s, in order to allow for greater depth with regard to the critiques and potential responses.

Critiques of SDP efforts cover a number of complex issues, a full account of which would exceed the constraints of this essay. Therefore, I have chosen particularly strong spatial critiques that I find repeated across the SDP sector especially regarding NGO’s, namely that SDP efforts potentially create or reinforce racialized space and/or de-historicized space. The analysis of these two related critiques sets the stage for the final main section of the essay where I argue that the Catholic tradition has something to offer in terms of a way forward regarding these critiques.

These critiques begin at the theoretical level with careful attention to the ways that SDP groups bring together sport and development discourses, because that linkage directly affects how those groups formulate the goals and methods that inform their projects. The broad claim that runs across the various critiques is that SDP groups may combine the two in manners that uncritically accept the predominant understandings of development. This “neo-liberal” understanding of development features a firm distinction between those who carry out development work and those who are said to benefit from it. In what follows, I will track how this division manifests itself problematically in terms of race and distorted historical consciousness.

First, the sharp distinction between subjects and objects of development work often maps onto pre-existing relationships characterized by race. SDP efforts carried out by agencies from the global north (North America, Europe) in countries in the global south occur in a setting where “whiteness” has long been a normative construction. Simon Darnell’s 2007 study of the NGO Right to Play demonstrates how a persistent ethic of evolutionary racism that once served to justify outright colonial domination can show up in modern SDP efforts, pitting the active subjects from the north (white) against the passive objects in the south (non-white). SDP projects that rely heavily on volunteers from the north then often unwittingly employ paternalistic understandings of development that divide those involved into the white, rational, problem solvers and the non-white, intellectually inferior, passive bodies. Sport then factors in as a tool for transferring knowledge and skills in only one direction, from white to non-white. In this way, SDP efforts can become modern forms of racially inflected colonial dominance despite the positive intentions of those involved.

Such racial problems are only exacerbated by the prevalence of multiculturalist efforts to celebrate the unique contributions of particular groups. In the context of SDP programs that feature strong contingencies of northern volunteers working in southern countries, this multicultural mentality can quickly slip into a “stranger fetishism” that over-determines people based on race. Differences between the volunteers and the participants can then be chalked up to race while the real reasons for those differences remain obscured from consciousness. Thus, this over-determination contributes to the formation of social spaces that allow the northern volunteers to experience the “pleasure of having, knowing, and living race… through the volunteer’s experience of encountering, and improving the lives of, bodies of color.”

Along with these issues of race, NGO’s run the risk of creating or reinforcing social spaces lacking healthy historical consciousness. Several factors contribute to the construction of this sort of space in the SDP context. First, sport is expected to bear a great deal of pressure as a medium that transcends cultural and linguistic barriers. Sport functions (often unintentionally) as a bridge that allows the northern volunteers and southern participants alike to temporarily cross over the messy historical and political constraints that have made the presence of the volunteers necessary in the first place. Those involved thus operate in a de-historicized social space where what matters is the joy and potential of sport. Second, the material requirements of most northern sports often make it necessary for the volunteers to bring sports equipment as gifts for the native participants. The inherent imbalance of this economic exchange places the native peoples in perpetual states of gratitude. The “voice” that the native peoples acquire then is one of thanks that the volunteers may hear as an affirmation of their presence, especially if linguistic and cultural barriers prevent other voices from being heard. Thus, the volunteers and native participants can find themselves together in a constructed space characterized by a patron-client relationship, which occludes the historical space that occasioned the original need for development work.

Together, these racialized and de-historicized spaces can unfortunately reinforce the prejudices of the northern volunteers. The nature of the relationships between the volunteers and the native peoples has been strongly shaped at levels that rarely leave the subconscious. In other words,
these social spaces make it difficult for those within them to identify and confront deeply embedded structures. This is not to say that the influx of economic aid and volunteer efforts is evil, but it is a strong caution that development cannot remain solely economic, nor can it be content to operate within unjust structures. In the next section, I will show how attention to subsidiarity and solidarity as expressed in the social teachings of Catholicism can help NGO’s seeking to carry out SDP efforts bring about a more holistic development that minimizes the creation of these dangerous racialized and de-historicized spaces.

III. Subsidiarity and Solidarity in Catholic Social Thought: Application for SDP Efforts

The preceding section was certainly not an indictment of every SDP organization or effort, but it highlighted the various problems that can potentially plague SDP efforts. I will now demonstrate how solidarity and subsidiarity prove useful for addressing those issues. Recent efforts of the NGO Catholic Relief Services will serve as concrete examples of the application of these two principles to situations involving the use of sport for development work. I contend that these principles are general enough to prove useful in many different contexts, yet not so broad that they lack meaningful definition.

A. Subsidiarity

According to the Compendium of the Social Doctrine of the Church, a thorough and trusted summary of Catholic social thought, subsidiarity is a directive that promotes the dignity of human persons as members of societies made up of all sorts of relationships, groupings, associations, and territorial realities. Subsidiarity can be understood primarily as a defense of a properly ordered social life that keeps central the dignity of the human person. One central tenet then is that individuals need space to accomplish things through their own endeavors. Community organizations certainly have a role to play when individual effort is not enough, but those “higher” order social groups ought not assume responsibility for things that individuals can accomplish on their own (n186). The key assumption operating here is that those closest to the tasks at hand are most suited to deal with those tasks, especially because those people often stand to gain or lose the most based on how the tasks are carried out. (A classic example of this idea is the story of the pact between fishermen of a small village. They agree to only catch a moderate amount of the fish in their waters so that they do not wipe out the supply. This means that they cannot live extravagant lifestyles, but it enables them to adequately provide for their village each year. Then, a large fishing corporation moves into their area and sees that large numbers of fish go uncaught each season. The corporation uses the promise of high wages to contract the fishermen to work for them, but soon require a much higher yield from the fishermen. Before long, the supply near the village is exhausted and the corporation moves on to the next village, leaving the devastated small village in its wake.) In addition, this individualist strain is balanced by the conviction that there are also functions in society that properly fall to groups of various sizes and power. The principle of subsidiarity thus recognizes the need for “higher” order social groups, but only insofar as those groups enable “lower” order groups and ultimately individuals to flourish:

On the basis of this principle, all societies of a superior order must adopt attitudes of help – therefore of support, promotion, development – with respect to lower-order societies. In this way, intermediate social entities can properly perform the functions that fall to them without being required to hand them over unjustly to other social entities of a higher level, by which they would end up being absorbed and substituted, in the end seeing themselves denied their dignity and essential place.

Catholic social thought thus understands there to be both positive and negative implications of the principle of subsidiarity. Larger, more powerful (“higher”) social groups have a positive role to play as they offer needed assistance to smaller, less powerful groups or individuals. However, those “higher” groups must refrain from unnecessarily restricting the initiative and freedom of smaller groups and individuals. In other words, “every social activity ought of its very nature to furnish help to the members of the body social, and never destroy and absorb them.”

The work of Catholic Relief Services (CRS) offers a useful example of what attention to this principle of subsidiarity looks like in practice. Instead of sending scores of volunteers to carry out development work, CRS commits to building relationships with local partners who know best the needs of their communities. CRS positions itself as a resource for local partners rather than as an interventionist savior for the communities it serves. According to its partnership philosophy, “All of CRS’ partnerships assign responsibility for decision-making and implementation to a level as close as possible to the people whom decisions will affect.” CRS emphasizes the autonomy of these local partners in a spirit of deference to local understanding whenever possible, believing in the transformation of unjust
systems and structures primarily through strengthening the capacities of local communities and their institutions.\textsuperscript{18} CRS also recognizes that subsidiarity is often difficult to put into practice due to various requirements and constraints that come with being an international organization. For example, donor requirements or standard record-keeping processes can conflict with local practices posing serious challenges for CRS and its partners.\textsuperscript{19} Nevertheless, CRS consistently strives through its partnerships rooted in subsidiarity to allow those most affected by problems to take the leading role in responding to those challenges.

CRS’s efforts in South Sudan show how this partnership philosophy rooted in subsidiarity can be of use for SDP work. CRS’ involvement with Sudan began in 1978 when it aided in refugee resettlement stemming from a major civil war in 1972.\textsuperscript{20} When a second civil war broke out in 1984, CRS elected to relocate its operations from Khartoum in the North to South Sudan. Despite the move, CRS continued to serve peoples in North and South Sudan, as evidenced by its participation in “Operation Lifeline Sudan” in 1989 along with several United Nations and non-governmental organizations. CRS is now based in Juba in South Sudan and has partnerships across the South in places like Nimule, Torit, Eastern and Central Equatoria State, and Bor of Jonglei State. In keeping with its partnership philosophy, CRS states: “In South Sudan, as elsewhere, CRS relies on its strong partnerships with local Church and secular organizations, the host government, non-governmental organizations, and international agencies to efficiently and effectively deliver services to those most in need.”\textsuperscript{20} Among CRS’s partners include the Archdiocese of Juba, Caritas Juba, an organization called “Solidarity with South Sudan,” and the Government of Jonglei State. Through strategic relationships with partners like these, CRS has engaged in the process of integral human development in South Sudan.

One clear way CRS has used sport in its efforts to bring about integral development in South Sudan is through its support of a course on peacebuilding through sport and culture specifically designed for teenage females through one of its partners, the Loreto Girls’ School.\textsuperscript{21} The course aimed to strengthen and empower these young women to be peace-builders in the community. Sports played a key role in fostering bonds among the participants as the various sporting activities “transferred new skills to students from different ethnic groups and enabled them to spend time together outside the school in a non-threatening setting. These people-to-people gatherings helped deepen their sense of compassion and acceptance of each other.”\textsuperscript{21} Rather than rely on international and national institutions to go about the complicated process of building peace within this highly fractured region, CRS has opted here in the spirit of subsidiarity to provide support to a local partner in an effort to bring about peace through individuals who are arguably affected most by the region’s violence: young Sudanese women.

It is important to note that attention to subsidiarity does not mean putting blind trust in local organizations, nor does it mean that NGO’s do not have useful knowledge, skills, and resources to offer. CRS has stringent qualifications for its local partners and offers a great deal of input concerning the direction of programs it supports. The key to the relations between CRS and its partners is the real possibility that knowledge can move in both directions.\textsuperscript{17} This is perhaps the main strength of approaches that take subsidiarity seriously. Not only does this reciprocal exchange of knowledge ensure that the concerns of local groups and individuals are not ignored in development work, but it also enables NGO’s to make more effective use of their resources. Furthermore, cooperation with local partners lessens the burden on sport to bridge barriers like language. Because local groups directly organize sporting events, sport can more easily provide a space for interaction free of the power and racial relationships that seem to plague SDP efforts that rely heavily on northern volunteers.

B. Solidarity

As noted at various points in the first section of this essay, the meaning and use of the term solidarity has changed and developed throughout the last century in Catholic social thought. Here, I will focus on how solidarity understood as a moral virtue can keep SDP efforts from perpetuating the problems of race and history outlined above. Solidarity as a virtue is the consistent, authentic commitment to the common good that the increasing interdependence of the modern world requires of every individual and nation.\textsuperscript{16} The underlying principle here is that the life of each person in the world impacts the overall health of humanity. (For Christians, this claim follows from the message of Jesus Christ in the gospels. However, it also has relevance beyond just Christians given technological/scientific advances that show how the smallest behaviors by peoples on one side of the world have real effects on the lives of those on the opposite side of the globe.) Solidarity as a virtue thus requires and enables humans to attend to social conditions and structures that limit the common good, transforming “structures of sin” into “structures of solidarity.”\textsuperscript{16} Structures of sin include any and all relationships between peoples and nations based on domination and inequality.
The virtue of solidarity functions in order to expose and change these into structures that benefit rather than detract from the common good of humanity.

SDP efforts that consciously seek to foster the virtue of solidarity are capable of affecting changes that account for these “structures of sin” rather than operating within them. Again, the work of CRS offers a useful example of how this concretely plays out. In conjunction with its efforts on the ground with its partners in South Sudan, CRS has also used sport to foster the virtue of solidarity in an attempt to inspire people to go after larger structures holding back South Sudan’s development. For example, CRS’s “Playing for Peace” program in partnership with the University of Notre Dame tried to inspire solidarity among college students. By marketing the event as primarily a 3v3 basketball tournament, CRS and Notre Dame created an inviting space for members of the campus community to come together. At a break between games, the participants listened to the stories of Sudanese students studying at Notre Dame as well as a video message from Chicago Bulls star Luol Deng, who was forced to flee Sudan as a child. According to Michael Hebbeler of Notre Dame’s Center for Social Concerns (oral communication, April 19, 2013), sport played a crucial role in its ability to draw an impressive 400-plus participants. These men and women then took part in what Hebbeler identified as the most important part of the event: the collection of more than 1,000 signatures for a petition bound to the White House. This petition thanked the President for his efforts in ensuring the peaceful passing of South Sudan’s independence referendum in 2011, but also called for continued engagement with the process due to the unstable nature of the region in the wake of the vote. The petition also called for funding for aid and development programs in Darfur, Sudan, and South Sudan referring specifically to legislation such as the FY11 Continuing Resolution and the FY12 Budget that were in the works at the time. It concluded with an appeal to the principle of solidarity and finally by identifying assistance to Sudan as a “moral responsibility” rather than simply an “optional commitment.”

Representatives from the Playing for Peace initiative personally delivered this petition to Samantha Power, a member of President Obama’s National Security Council staff and head of the Office of Multilateral Affairs and Human Rights. These representatives met directly with Power for one hour and expressed the concerns of the Notre Dame community. According to the Playing 4 Peace report, Power “said this initiative is ‘significant and unusual’ as she applauded the unique nature of the event which brought a community together around a sporting event while leveraging the opportunity to raise awareness, educate, and advocate for a serious social justice concern.”

“Playing for Peace” presents a unique example of an SDP effort that focuses specifically on fostering the virtue of solidarity in order to bring about structural change. Although tracking the concrete impact of this effort has proved difficult, the continual use of sport in “Playing for Peace” style advocacy events attests to CRS’s confidence in the ability of this form of SDP to affect structural change via solidarity. For example, CRS has since worked with Georgetown and Villanova on separate occasions to craft variations of Playing for Peace events. This endeavor represents an effort to take concrete historical realities into account (e.g. the tenuous and incomplete nature of South Sudan’s independence) and through advocacy attempt to create a network of people in solidarity that may be able to influence structures and systems (e.g. Notre Dame students and faculty who contributed through prayer, financial means, and the petition to the U.S. government).

When paired with subsidiarity-inflected SDP efforts on the ground, this approach to SDP is well suited to use sport for development in a way that can attend to racial and historical difficulties rather than perpetuating or creating them. NGO’s can gain vitally important knowledge of local capabilities and needs from local partners that then inform the direction of their broader advocacy work, which can then affect influential structures via solidarity. This sort of two-pronged SDP work will certainly take different forms depending on any number of factors (context, available resources, donor requirements, etc.), but has the potential to make positive changes in the world, as evidenced by the efforts of CRS.

Conclusion

This call for attention to the principle of subsidiarity and the virtue of solidarity is not intended as a sweeping indictment of established, ongoing SDP efforts. This essay is primarily an initial attempt at bringing the SDP sector into conversation with Catholic social thought, especially given Catholic thought’s relatively recent interest in sport’s role in human development. I have focused the analysis on issues of race and historical consciousness within the SDP efforts of NGO’s arguing how efforts that take into account subsidiarity and solidarity are well-suited to bring about change in a way that may steer clear of the creation or reinforcing of racialized and dehistoricized social space. I do not wish to hold up the combination of subsidiarity and solidarity as some form of magic bullet that solves all
problems of race and domination, but I hope I have shown that these resources from the Catholic social tradition can be of some service to the ongoing maturation of SDP projects in the midst of the challenges of the 21st century.

References


www.jsfd.org
22. Notre Dame Stands for Peace in Sudan [Internet]. 2011.

Available from: http://playing4peace.nd.edu/mission/p4p-history/.
Empowerment revisited: How social work integrated into a sports programme can make a difference

STÉPHANIE SIMARD¹, SUZANNE LABELGE¹, MARTIN DUSSELAULT²

¹ Université de Montréal, Kinesiology department
² Centre de santé et services sociaux Jeanne-Mance

Corresponding author email: simardstefanie@gmail.com

Abstract

Team sports may represent an arena in which adolescent girls can develop skills and abilities to gain control over their lives. The aim of this retrospective study was to explore how participation in a psychosocial programme using sport as an intervention tool could foster the process of empowerment in young women at risk of delinquency and school dropout. Interviews were conducted with seven young women who were involved in the programme during high school. A descriptive content analysis suggests that involvement in the programme may contribute to the participants’ empowerment process through better academic persistency, capacity to resist negative external influences and the development of life skills. Results, however, indicate that the empowerment process is moderated by the participants’ differential social environment and life trajectory after high school.

Background

Sport is often identified as a context that can favour empowerment in girls and women, allowing them to develop skills and abilities that may consequently lead to greater control over their lives. Various foundation and association reports (1–4) have acknowledged the health benefits of sport and physical activity for women and girls, benefits that in turn could contribute to their empowerment. Some researchers have looked into the empowerment process specifically in light of gender equity in developing countries. (5–7) Empirical studies have reported on women’s empowerment, although mostly indirectly, such as in the discussion of their research findings while their main objective was to explore the potential benefits of sport or physical activity on sexual behaviours and health, (8) for example, or within a therapeutic intervention. (9–11)

Only one empirical study has drawn attention to the specific processes involved in girls’ empowerment in industrialized societies. (12) The authors examined the empowerment process at work through sports involvement in women college athletes in the United States. However, to our knowledge, no study has focused on this issue in the case of high school girls at risk of delinquency and school dropout.

Our current investigation is part of a larger research project that evaluates the impact of a psychosocial intervention programme that uses a team sport to reach at-risk youth. This innovative programme, called Bien dans mes Baskets (BdmB), promotes the psychosocial development of youth from less affluent backgrounds through their involvement in basketball. A detailed description of the characteristics of the programme is presented in the next section. This study aims to add to the body of knowledge regarding the role sports can play in empowering girls from underserved communities in industrialized societies. Moreover, we attempt to highlight the potential contribution of the combination of social work and sport in the empowerment process.

The BdmB Program

BdmB is an innovative approach to social work that is more akin to “plus sport programmes” than traditional sports programmes. The “plus sports programmes” has been

Keywords: Adolescent girls; empowerment; sports; academic persistence; social work
defined by Coalter (13) as “programs that focus primarily on achieving nonsport objectives […] while incorporating sport as a component of their programming”. Accordingly, BdmB is characterized by a distinctive philosophy and specific youth development objectives.

**Programme Philosophy**

In the BdmB programme, sport represents an intervention tool enabling the social-worker-coach to reach those at-risk youth who would be difficult to reach in the more traditional context of an office meeting. Sport, therefore, becomes a means to reach these youth and promote their personal and social development. A feature of this philosophy is the use of the young people’s basketball-related dreams as a source of motivation to pursue further studies in the school circuit (vs. the civil circuit) since this is the preferred option to reach a high basketball level in Québec. It is this particular aspect of the programme’s philosophy that motivated the programme instigator to use the term athlete-student instead of student-athlete, which is the more common term in the scientific literature.

The use of group interventions in real contexts is also an important feature of the programme’s philosophy. This approach, which is known as “social group work” in the field of social work, may be defined as: “a context in which individuals help each other; it is a method of helping groups as well as helping individuals; and it can enable individuals and groups to influence and change personal, group, organisational and community problems.” (14) The assistance that members of a group provide one another is a fundamental aspect of the intervention, for it contributes to the problem-solving process both at an individual and at a community level. (15) The “social group work” approach used by BdmB is closely related to Middleman and Wood’s (16) definition: “First of all, to qualify as social work with groups, worker attention must focus on helping members to become a system of mutual aid. […] A second criterion for inclusion in social work with groups is that the worker must actively understand, value and respect the group process itself as the powerful change dynamic it is. […] The worker’s basic attitudinal set is the third criterion for social work with groups […] the worker helps the group to become as autonomous as it possibly can […] the fourth criterion is that the worker must help the members to re-experience their groupness at the point of termination.”

**Programme Objectives**

The main objectives of the programme are to prevent school dropout, delinquency and social exclusion. In order to achieve these objectives, BdmB specifically targets the development of prosocial behaviour and life skills in athlete-students by exposing them to significant experiences in a sport context.

**Priority Population**

BdmB targets students with an interest in playing basketball. However, in order to be part of the programme, students need to commit themselves to the programme philosophy. Upon acceptance into the programme, participants therefore commit in writing to abide by the programme rules and philosophy. Priority is given to students displaying behavioural problems, although students without behaviour problems are also eligible for the programme.

The main issues found among girl participants pertain to prostitution and street gangs. During adolescence, young women from this neighbourhood are often confronted with difficult choices such as whether to continue their studies or take on paid work. Their family’s precarious financial situation and a lack of overall social support are major factors that can incite some teenagers to become involved in illicit activities such as prostitution.

From the start of the programme in 1999–2000 until the end of the 2007–2008 school year (one year prior to data collection), approximately fifteen girls took part in the programme. Throughout that period there was only one female team (between 7 and 14 players) who went through their entire secondary school years together.

**Program activities**

The sports component of the programme (over the period of time the participants were in the programme) was comprised of several basketball-focused activities: two or three practices each week; free practice in the school gym during lunch hour, in the morning and on school holidays; about twenty games each season (the actual number depended on the team’s performance); and tournaments (between three and seven each year) held in Montreal and other cities. With respect to education, the programme offered the athlete-students academic support, which consisted of help with homework alongside encouraging them to take responsibility for their own educational experience so that they could develop independence. Two scholarships aimed at student retention were also available to those completing the programme in order to help cover post-secondary education costs.
The programme also included community volunteer initiatives designed to encourage the athlete-students to pursue volunteer activities in their community. A few examples of the volunteer work done by young people in the programme include collecting and distributing food to the neighbourhood’s poorest families at Christmas, taking part in organizing and carrying out fundraising activities (e.g. tournaments between the programme’s young men’s team and city police), and becoming involved in basketball games and tournaments held at the school.

It should be noted that all programme activities were open to both girls and boys. The psychosocial interventions, however, were gender specific.

Social work intervention

The social workers acting as coaches were, and still currently are, fully dedicated to the programme. They are not school employees but rather social workers from the public health department who work full time in this specific school. The programme is their strategy to get in touch with at-risk youth and intervene as social workers. They are available within the school during the day, but can also be reached evenings and week-ends if necessary. Girls who participated in this study had been supervised by two female social-worker-coaches who had academic backgrounds that enable them to be sensitive of gender in their interventions.

The social-worker-coaches use actual events experienced by the students in the context of the team as well as in other areas of their lives to trigger social group work interventions. In this way, the team and team-related events provide the raw material for the intervention. This method thus differs from the one used by most youth development sports programmes such as First Tee Life Skills Program (17) and SUPER Program (18), which consist of predetermined workshops targeting different life skills such as honesty and respect. In the BdmB programme, the social-worker-coach uses real lived experiences and group dynamics to foster reflections and develop a critical mind.

Exposure to the programme

Contrary to many programmes targeting positive youth development, which run for a predetermined amount of time of several weeks to several months, students can participate in BdmB at any time during high school, which lasts a maximum of five years. The duration of programme participation can thus vary considerably. The number of years during which the participants of the current study participated in the programme is provided in Table 1. There is no specific follow-up to the programme. When participants leave the high school they leave the programme. However, it is always possible for them to stay in contact with the social-worker-coaches.

The notion of empowerment

Over the years, different definitions have been given to the concept of empowerment. (19) Depending on the authors and the contexts, the notion of empowerment has been conceptualized as a theory, a reference framework, an action plan, a goal, an ideology, a process, a result, and a consequence. (20–21) Although the empowerment process can be studied within any dominated group, in this study, we will refer particularly to the empowerment process as understood in the literature on women’s empowerment. Thus, we define empowerment as a process, that is, a set of stages or actions leading to a change in the acquisition of power or control. (20–21) Indeed, as the etymology of the word would suggest, the notion of power is central to many definitions of empowerment, since an increase in the latter results in the ability to make choices and the possibility of transforming these choices into action. (23, 26–28)

Empowerment can be studied at different levels—individual, social or community—classifications that are interrelated and respect a hierarchy. (29) At the community level, empowerment refers to the “process of increasing collective political power” while at the individual level empowerment refers to the “development of a personal feeling of increased power or control without an actual change in structural arrangements.”

In this study, we examine more specifically the empowerment process at the individual level within girls from underserved communities. The aim is to highlight the elements or factors that may contribute to the development of a personal feeling of increased power or control over one’s life without changing the dominant social structure.

Methods

Participants

Semi-structured interviews were carried out with seven young female adults (mean age = 19 years) who were involved in the BdmB programme between 2003 and 2008 and had left the programme at least one year before the beginning of the study. Table 1 presents some characteristics
of the former BdmB participants who were interviewed. Convenience (30–31) and snowball (31) sampling were used as part of this research. No other method could be applied given the major constraints of the context, namely the young women’s distrust in regard to participating in discussions with strangers and the rather limited number of participants of about fifteen young women in BdmB between 1999 and 2009. We thus requested the cooperation of the coordinator and some coaches to contact past-participants. It is important to note that certain coaches made the decision not to put us in touch with certain participants in difficult situations (prostitution, street gangs) to avoid unintended effects the interviews might have on them if they agreed to participate in the study. This may have contributed to restricting the number of study participants.

We also requested the cooperation of past-participants who had agreed to meet with us. They helped us contact other past-participants. Our sample thus shares convenience and snowball sample characteristics and is not representative of the study population, namely all past-participants of the BdmB programme.

Data collection

Face-to-face interviews were conducted at venues chosen by the participants. In general, interviews lasted about one hour and were recorded with their consent. The interviewer was a 34-year old, Caucasian graduate student who had previously received training in qualitative methodology and interview techniques.

The interview guide aimed at determining, through participants’ life stories, the impact the BdmB programme had on their perception of the control they have over their lives. It was divided into three sections, each addressing a different period of their life. In an effort to understand the socio-cultural context in which the participants grew up, since it might be related to later experiences, the first section explored childhood and primary school experiences. Their description of their neighbourhood, the value given to education in their milieu, and the reasons that lead them to choose this high school were some of the themes discussed in this section. The second section explored in-depth the experiences lived during the interviewees’ participation in BdmB, what they learned and what was developed in relation to the empowerment process. The main themes discussed were the difficulties the participants faced during their adolescence and how their participation in the programme eventually helped them overcome these difficulties. The third section addressed the beginning of the participants’ adult life after leaving the BdmB programme. The main themes discussed were the lessons learned from their participation in the programme and its impacts on their adult life (where applicable) through concrete examples. At the end of the interview, participants were also invited to discuss the idealistic view of sport as “school for life.” The semi-structured format allowed us to deepen and probe
Data analysis

This qualitative study adopts certain elements of constructivist grounded theory. We adopted this approach particularly to promote openness and the potential emergence of a theoretical framework through the analysis of data rather than applying an existing framework to the data. In order to proceed to the thematic content analysis, we carried out a two-stage coding process. First, we conducted an open coding of data. The codes were created in reference to the themes that emerged from the testimonies rather than from existing theories. Then, categories regrouping codes of similar content and relevant to the research question were created. Initially, we performed a vertical analysis (i.e., an internal analysis of each interview). Subsequently, a transversal analysis (i.e., an analysis between interviews) was conducted, which highlighted recurring themes. From such analyses emerged a conceptual framework that aimed to report the empowerment development process. Word frequencies were not considered in our analysis because in this type of qualitative methodology, the number of times an expression is used is not considered indicative of its salience. Even an expression mentioned once can be of importance, depending on its context in the interview. The coding process was carried out by two investigators separately. In the rare instances of discrepancies in interpretation, consensus was reached through discussion.

Another key characteristic of our approach is its retrospective nature based on interpretive interactionism. In this approach, it is assumed that if someone defines a situation as real, it is therefore real in its consequences. This implies that people’s subjective recollections of events have important implications for their ongoing self-story. Thus, the accuracy of how people recall an event is less important than how they perceive the consequences of the event in their biographical experience. This approach, previously used by Holt and colleagues, seems promising for understanding the key elements of the empowerment process in a sports context. Like Holt and colleagues, we were not concerned with the objective accuracy of the recalled events, but rather with how these events were perceived and interpreted within the participant’s life. Consequently, it is through the subjective recollections of the participants’ experiences in the BdmB programme that we look at the empowerment process.

Empowerment Development Process

The conceptual framework that emerges from the data analysis allows for an overview of the various factors that impacted the development of empowerment in the study participants (Figure 1). Their testimonies suggest that involvement in the BdmB programme contributed in different ways and at varying intensities to the development of empowerment, especially by enhancing their perception of control over their lives. This improvement was most likely the result of cumulative learning experiences including the capacity to resist negative external influences and the development of life skills combined with various positive life experiences. Moreover, the participants’ testimonies suggest that the development of various life skills, and their transfer from sports to other contexts in life, has contributed to a gain in control over their lives. The positive experiences they had in participating in the programme were also beneficial to their academic aspirations and persistence, and to their capacity to make the “right” choices. However, the life trajectory of participants following programme involvement was quite diverse. These differences appeared to have modulated the impact of the programme on their gain of control over their lives.

The next section discusses the key elements of the empowerment process presented in Figure 1.

Academic persistence and career aspirations

A first main theme emerging from our content analysis which seems to have contributed to the empowerment process is the positive impact of the BdmB programme on academic persistence and career aspirations. These positive impacts seem to be favoured mainly by the coach’s competence as a social worker who prioritised the psychosocial development of the participants over performance in sports. Eliane’s testimony exposes it well:

When we play basketball, we know the others who play in the other schools and it’s totally different there. Here, we have a programme for basketball but at the same time we focus on social stuff, on us. Black girls that I knew, that played basketball in other schools, they all quit school, they started dancing, just like that. School was never their priority. At our school, we learned at basketball that the game isn’t over until it’s over, so you have to give 100%...
...until you get what you set out for. Other teams, the coaches, well all you have to do is win the game, that's it.

This is consistent with the work of Collins, Gould, Lauer and Chung, (37) who stated that it is imperative that the coaches assign primary importance to the development of their players as good citizens.

The coach’s support and her relationship with the participants seem to have contributed to academic persistence, particularly when participants were faced with life choices. For example, Lana conveyed that a discussion with her coach led her to decide to stay in school and in the programme rather than opting for a full-time job that would give her “good money” quickly and easily:

In the end, I decided to quit my job. The thing was that I missed basketball and because, if I work, then I make all this money and then I think that I don't even have to go to school. But if I play basketball with the others, I get support to stay in school.

This is consistent with the results of Daud and Carruthers (38) who mentioned that the two most important aspects of extracurricular high school activities that encourage youth to think about their future in terms of obtaining academic knowledge are: 1) good communication between players and coaches and 2) programme focus on the development of life skills.

The coach was also a role model to some of the participants. The fact that she was both a coach and a social worker inspired some participants when the time came to choose future careers:

It was the BdmB programme that made me want to get a job with people. At the beginning it was my coach who made me want to do it. She was a social worker and a basketball coach. When she was my basketball coach, she made me want to do the same. That's why I want to be a social worker and maybe also be a basketball coach. (Raissa)

This is consistent with other findings where coaches are reported to act as role models for the youth with whom they interact. (39–40) Participation in these types of programmes may put these adolescents in touch with significant others who deal successfully with challenges in their own lives. These significant others can serve as hook-ups to experiences and opportunities that provide young people with exposure to possible positive futures. (41) This can be particularly relevant in the case of women coaching girls as females are more likely than males to emulate and identify with a matched-gender role model, and the success and visibility of the female may have a positive impact on girl’s motivation, self-confidence and self-perception. (42–43) As suggested by Audas and Willms, (44) a correlation exists in boys and girls between dropout rates and rates of delinquency, teen pregnancy and drug use. It can be
assumed that engaging in this type of negative life trajectory can contribute to the perception of limited control over one’s life and the reproduction of social inequalities especially for young women. Conversely, being confident, competitive, and having a high level of education is recognised as an asset for girls and women in developing a perception of increased control over their lives. (45) The BdmB programme appeared to have contributed to the empowerment process of the participant through positive socialisation, and by offering participants new life possibilities and opportunities with regard to their academic future. The coach’s positive reinforcement, encouragement and support played a key role in this process.

However, in light of our results, it is important not to disregard the influence of the living environment on the life trajectory. For example, college education was much more difficult to achieve for some participants because of personal and family situations (for example, an unplanned pregnancy or a parent losing her/his job). These situations may require the interruption of education for a period of time to work full time and provide for oneself and one’s family. This illustrates the importance of understanding empowerment as a dynamic process that is in constant interaction with the environment. (27) It is also important to mention that the effect of the programme on the participants’ academic persistence was of greater importance when the parents’ support was not present. Indeed, in the case where parents do not encourage their child to persevere at school, the programme may have a greater determining role than when the participants’ parents offer support and guidance.

Capacity to resist negative external influences

A second main theme emerging from our content analysis which seemed to contribute to the empowerment process is the capacity to resist negative external influences. It appears that participation in the BdmB programme has helped participants, to varying degrees, to be in greater control and to make better decisions in vulnerable situations (negative external influences). Analysis of participants’ accounts suggested that three main factors appeared to have played a role: 1) valorisation gained through the programme; 2) a protective factor of the programme; 3) the psychosocial development aspect of the programme.

First, as evidenced in the following quotation from Andrea, some participants found that the valorisation gained through the programme helped them to remain “on track” without engaging in delinquent behaviour during high school:

Basketball especially helped me not to hang out with street gangs and not to take drugs. When you start off well in life, you have more chances to stay on the right path, even if there’s always a chance that you might fall off the wagon at some point.

Second, the fear of the consequences of inappropriate behaviour on their participation in the programme appears to have helped prevent delinquent behaviour. In some cases, involvement in the programme acted as a “protective factor.” As reported by Tina, it was inconceivable to be involved in the basketball programme and at the same time involved in delinquency:

It helped to stay far from people like that, because you just can’t do both. It looks like either you’re in a gang, or you’re in basketball. Because all the way from the first to the last year of high school, we were supervised for academics, and you get involved in the programme, and you practice with the others, so it’s, like, impossible to be in a gang.

This suggests that participants were more inclined to socialise with other BdmB players than other adolescents who could have had negative influences on them. These results are similar to those of Daud and Carruthers (38) where adolescents from less affluent backgrounds participated in after-school activities, preventing them from associating with problem groups.

Finally, the distinctive combination of the psychosocial intervention and the sports intervention of the BdmB programme is the third factor which influenced the development of the ability to withstand negative external influences. It seems that this combination encouraged the participants to stay focused on positive goals during their high school years. Andrea mentioned how her coach’s values and attitudes as a social worker helped her stay away from street gangs:

My coach was also a social worker. She was more than our coach, she helped us, she guided us. We couldn’t even think of doing drugs or get in a gang ’cause we knew that she would be there to tell us “are you nuts!”

It seems, therefore, that the coach’s expertise as a social worker and her daily presence in the school played an instrumental role in the participants’ development. The positive influence was particularly mediated by her concern for the participants’ psychosocial development (more so than their sports performance) and her daily presence in the school and neighbourhood. This is consistent with the
results of Petitpas, Cornelius, Van Raalte and Jones (46) who suggested that the quantity and quality of the interaction between the athlete and her/his coach is one of the best indicators of the resulting effect that the programme will have on the psychosocial development of the adolescent through sports. Furthermore, Camiré, Trudel and Lemyre (47) mentioned that one of the most important factors that promote the development of closer ties between coaches and youth is the coach’s daily presence within the school. This situation was found to favour the relationship between participants and the coach compared with the situation where the coach is only present during practices and games.

Given our study environment, the participants’ development of the ability to resist negative external influences is a particularly significant effect of the programme; its importance to the development of empowerment cannot be overlooked. Indeed, the street gangs and the sex industry neighbouring these female adolescents were more conducive to their exploitation than to their empowerment. A number of writings on the role of women in these difficult environments have suggested similar findings (48–50). As mentioned by Eliane, whether to take part or not in the sex industry is not always a choice, but rather part of a pre-established life trajectory: “that’s how it works in these neighbourhoods. It was a way to make money. Guys do drugs and girls dance.” To have the choice in this context is to be able to refuse to take this option. In this respect, the programme appears to have contributed to the empowerment process at an individual level through positive socialisation and by giving participants the opportunity to develop their capacity to make their own life choices. Furthermore, this improvement gained in adolescent years may have helped some participants gain control over their present lives. Eliane explains how her past experiences in BdmB continue to help her resist, even currently, the negative influences of her social environment in difficult times:

It was so tempting, so tempting to go dancing. Even today I don’t really want to because it’s a bit degrading, but sometimes I check it out. It happened once when I had no milk for my son, we had just moved into a bigger apartment, and it was tough on the wallet. So I thought I could go dancing, I thought about it. But all what I learned in the past told me that it wouldn’t serve me in the long run. It wouldn’t do me any good.

As mentioned before, our study focused on empowerment at the individual level. In this context, empowerment is characterised by the development of a personal feeling of increased power or control without an actual change in the social structure. An increase in power or control in a specific domain implies a greater ability to make choices and the possibility of transforming those choices into action in that domain. Thus, it appears that being part of the BdmB programme helped participants to positively influence their life trajectory without an actual change in the social structure. However, we do not deny the importance of the social structure in the empowerment process. As pointed out by Kabeer, (22) “individual empowerment is a fragile gain if it cannot be mobilized in the interest of collective empowerment.” In our study, however, it appears that the participants were able to develop the sense of being in control over their lives without political action seeking change in the social structure. This might be possible in modern industrialized societies where structural gender inequality is less limiting in terms of individual life choices. Hence, it is important to account the empowerment process in relation to the sociocultural and political context in which this process is taking place. (27)

Development and transfer of life skills

To begin, it should be underscored that the results relating to life skills are informed by the definition proposed by Danish, Taylor and Fazio (51) and Danish, Taylor, Hodge and Heke, (52) and later refined by Gould and Carson. (53) Danish and colleagues (52) defined life skills in the sports context as “those skills that enable individuals to succeed in the different environments in which they live, such as school, home and in their neighbourhoods.” Gould and Carson (53) criticised this definition as “an implicit assumption in this definition is that life skills help a young person not only succeed in the sport he or she is playing, but also help the individual once he or she transfers the skills to non-sport settings in which they are used successfully.” Indeed, the transfer to non-sport settings is not “automatic” as efforts must be made to transfer the life skills learned in the sport setting to other life situations. Therefore, Gould and Carson (53) contented that skills developed through sports would not be considered life skills unless they are applied, or can be applied, in a different setting. Accordingly, the authors proposed a revised definition of life skills: “Those internal personal assets, characteristics and skills such as goal setting, emotional control, self-esteem, and hard work ethic that can be facilitated or developed in sport and transferred for use in a non-sporting setting.”

The analysis of our data suggests that the BdmB programme
favoured the development of various life skills among participants in varying degrees of importance. Of these skills, we noted stress management, problem solving, emotional control, punctuality, time management, organisational skills, work ethic, responsibility, communication, leadership, teamwork, and respect for others. Most importantly, some of the skills developed through participation in the BdmB programme seem to have been transferred to contexts other than sports, both during the programme (to school tasks, friends and family) and following the programme.

While we recognise the possible role of several skills, two of them appear to be more closely related to the process of empowerment: 1) the ability to set goals and establish strategies to achieve them, and 2) the ability to see challenges as opportunities rather than obstacles.

Concerning the first skill, the competitive nature of basketball combined with the strategies implemented by the social-worker-coach may have played a critical role. For example, at the beginning of each season, the social-worker-coach requested that the team as well as each participant set goals. Then, individually and in groups, participants were expected to develop strategies to achieve them. This type of intervention may have allowed participants to transfer these skills to other life situations. One of the participants, who was then in early adulthood, always kept the habit of setting goals as she had done at basketball practice. She often notes her life objectives and strategies in a notebook.

In regard to the second skill, the competitive nature of basketball combined with the support received within the programme appears to have contributed to the development of positive thinking in times of defeat and challenge. In this respect, participants may have seized, through experiences in the BdmB programme, the importance of persevering and putting all necessary efforts toward achieving the goals they have set for themselves (sports-related or not). Most importantly, they learned to never give up:

If I practice what I can do, well, I will succeed instead of giving up, and I will tell myself, hey, I can do it. It’s like, for example, if I’m practicing something for basketball, like free throws, if I jump at the line but I think that I shouldn’t jump at the line, well I won’t jump, I’ll practice until I get it instead of giving up. It’s the same in real life. If there’s something you can’t do, well you have to practice, and it’s the basketball programme that taught me that, never give up. (Anna)

Thus, as expressed by another participant, obstacles can become motivators rather than reasons for withdrawal:

When I got pregnant, it was basketball that taught me: don’t stop yourself when there’s a problem. And for me, being pregnant, yes, it was a big shock, but it wasn’t a reason for giving up, it was even a motivation. It was like, I’ll show you how we can succeed with a kid. That’s how I saw it. (Eliane)

Through the BdmB programme, participants simultaneously engaged in sports and were exposed to psychosocial intervention. Our results suggest that this combination may have contributed to the empowerment process by allowing participants to develop life skills related to goal-setting and perseverance. This may in turn have allowed participants to develop a good sense of personal competence and thereby to be more proactive. This proactive approach includes the ability to seek challenges and take risks, to set goals, to establish strategies for achieving them, and to feel comfortable being assertive and competitive. (12) As suggested by Blinde, Taub and Han, (12) if women adopt a passive rather than a proactive approach, they will likely remain in a subordinate position and continue to lack control over their lives. In contrast, being more proactive can foster empowerment by helping women not to shy away from the challenges that arise and to play an active role in controlling the direction of their lives. (8, 12, 54)

Furthermore, as discussed earlier, the ability to make choices is a central concept in the empowerment process. This ability to exercise choice can be thought of in terms of: “three interrelated dimensions: agency, resources and achievement.” (22) Our results may be linked to these dimensions. The ability to set goals, establish strategies to achieve them and persevere, as well as the capacity to resist negative external influences may be linked to the agency dimension, defined by Kabeer (22) as the ability to define one’s goals or own life choices and act upon them. The social support found within the programme, especially the social-worker-coach and athlete relationship, can be seen as the resources, which according to Kabeer (22) refer to the social and human resources that may enhance the ability to exercise choices. The positive impact of the programme on the academic persistence and career aspirations of the participants can be viewed as achievement. This impact may be of great importance for the ability to make choices as a high level of education is often pointed out as a key factor in the empowerment process. (45)
Nevertheless, as mentioned before, empowerment is a dynamic process that is in constant interaction with the environment. (27) In this regard, participants’ life trajectories may influence the empowerment process at any given time. Indeed, certain situations and social relationships can modulate the control achieved over their lives during the programme. For example, for some participants the transition that occurred when leaving the programme went smoothly, reinforcing their sense of personal competence. For others, adaptation difficulties negatively affected their sense of personal competence. Eliane explains how her relationship with her mother became increasingly difficult following her unplanned pregnancy during her post-secondary studies. This has affected, and is still affecting, her sense of personal competence in a negative way:

Basketball gave me lots of confidence, it helped me to work on who I am, to believe in myself because I know I can. But there are other things in life that make me not believe in myself. Like my relationship with my mom. Because it’s so bad, and because she never congratulates me, it decreases my confidence, a lot. I don’t know why, but it’s important for me that my mom congratulate me. I have to hear her say it. But she won’t, so it affects my confidence in myself.

However, she further explains how having had the opportunity to experience success in the BdmB programme is still today a motivator in difficult times:

When things aren’t going well, I remember basketball days. I remember those years and that I was able to do things. That means I can still do them today.

Limits

There are some limitations to this study that warrant consideration. First, we were not able to reach all former BdmB participants. Therefore, the factors involved in the empowerment development processes identified through our relatively small sample may not be exhaustive. Second, it is possible that participants were hesitant to express negative thoughts about the programme, even in confidentiality. Moreover, social desirability may have influenced participants’ responses.

Conclusion

The aim of this study was to explore how participation in a psychosocial programme using sport as an intervention tool could foster the process of empowerment in young women at risk of delinquency and school dropout. While various research studies (8–12) have looked at sports as a context favouring empowerment, no study to our knowledge has focused particularly on a programme combining psychosocial intervention and sport as a means of empowering young women. Three main contributions stand out in this study. First of all, the study was able to identify two life skills that appear to play a key role in the empowerment process: the ability to develop the means of achieving stated goals and the perseverance to actually do so. These skills enabled participants to experience success in both a sports and an academic context and to acquire a better sense of personal competence.

The second contribution is that our study highlighted the critical role that the experiences lived in the programme play in the participants’ capacity to resist negative external influences. The acquisition of a sense of personal competence and the capacity to resist negative external influences are in some way interconnected: the experience of success in sports and in the academic arena (persistence), enabled participants to consider the possibility of a future other than the one fraught with risks that otherwise lay before them.

The last main contribution of our study is that it highlighted the notion that empowerment is a dynamic process in constant interaction with the environment and an individual’s life trajectory. To our knowledge, no previous study has accounted for the dynamic interaction between the empowerment experienced in sports and the life trajectory of young women. Accordingly, empowerment should not be considered as something that is acquired forever but rather as something that is always being challenged.

To deepen our understanding of the role of the social worker on the empowerment process, studies that could account for their specific strategies of interventions within sport-based psychosocial programme are needed. This might provide promising insights for social workers using sports to intervene with adolescent girls and favour their empowerment.

Acknowledgments

This study was supported by a grant from the Lucie and André Chagnon Foundation and the Jeanne-Mance Center for Health and Social Services Foundation. We would like to thank the staff of the Jeanne-Mance high school for their generous contribution of time and support to this project. We are particularly indebted to the young women who participated in this study.
References


Football with three ‘halves’: A qualitative exploratory study of the football3 model at the Football for Hope Festival 2010

KATHERINE R. GANNETT¹, ZACHARY A. KAUFMAN², MELISSA A. CLARK³, STEPHEN T. MCGARVEY³

¹ Grassroot Soccer, South Africa
² London School of Hygiene and Tropical Medicine, Faculty of Epidemiology and Population Health, United Kingdom
³ Brown University School of Public Health, Department of Epidemiology, United States

Corresponding author email: katie.gannett@gmail.com.

Abstract

The football3 model refers to a restructuring of traditional football/soccer rules to bring social and developmental benefits to participating youth and their communities. The model incorporates three ‘halves’: pre-game discussion, football match, and post-game discussion. This study was carried out to shed light on experiences with the football3 model at the Football for Hope Festival 2010. As an official 2010 FIFA World Cup event, the festival assembled 32 mixed-sex delegations of youth for cultural activities and a football tournament. The study’s aim was to inform the model’s future design and implementation. Twenty interviews, two focus group discussions, and participant observation were conducted. Findings highlight positive experiences with the model regarding cultural exchange and relationship building, Fair Play and social values, and gender integration. Implementation challenges include the misunderstanding and abuse of football3, notable skill level differences across teams, and pressure on teams induced by the tournament atmosphere. Recommendations for Sport for Development scholars and practitioners centre on systematically formulating desired outcomes, formalizing a curriculum and training plan, prioritizing social outcomes over match results during implementation, piloting football3 in a range of settings over time, and emphasizing monitoring and evaluation. Future piloting and research should inform the potential scale-up of the model.

Introduction

Around the world, youth participation in sport is increasingly being used to generate positive social outcomes for young people and their communities. At an individual level, sport-based programmes have been linked with the personal development of important abilities and values, including teamwork and social skills, (1) respect and fairness, (2) personal responsibility, (3) self-esteem, (4) a sense of community, (5) and acceptance of racial or cultural differences. (6, 7) These outcomes are considered life skills when applied more widely to daily life. (8) While a majority of studies exploring personal development through sport have been carried out in high-income settings, there is a widespread assumption that these findings are transferrable across different cultural and socio-economic settings. (9)

At the community level, sport-based programmes are thought to bring broader benefits. Studies have recognized the ability of sport to contribute to efforts aimed, for instance, at generating social capital, (10, 11) promoting peace and conflict resolution, (12, 13) encouraging social inclusion, (14, 15) and empowering women. (16, 17) These programmes are increasingly recognized to fall within the field of Sport for Development (SFD), referring to the intentional use of sport, physical activity and play to attain specific development objectives. (18)

Importantly, the success of SFD programmes in achieving positive individual and community outcomes depends on contextual factors and the nature of the sporting experience.

Keywords: football3; Fair Play; youth; life skills; development

www.jsfd.org
Involvement in SFD programmes is not sufficient to guarantee beneficial outcomes and sport can indeed result in undesirable outcomes if it is improperly implemented. A variety of strategies have been adopted to achieve the goals of personal and community development through sport. Some seek to increase access to sporting opportunities among historically marginalized groups and/or build the self-confidence of participants. Others use sport to attract participants into educational programmes that directly teach life skills and values. The football3 model was implemented as part of the Football for Hope Festival 2010. It sought to explore positive experiences and implementation challenges encountered with the aim of offering recommendations on the model’s future design and implementation for organisations worldwide.

Method

Setting and Participants

The football3 model was implemented in a tournament setting during the second week of the Football for Hope Festival (4-10 July 2010). Twelve-minute matches were hosted in Alexandra, a township of Johannesburg. Teams played 5-v-5 on one of two 20x40m turf fields. Every participating delegation was guaranteed seven matches in the first group stage and three matches in the second group stage. Based on match outcomes, teams progressed to the quarterfinals, semi-finals, and finals. Approximately 20,000 spectators and 400 media representatives attended.

The 32 participating delegations included 8 from the Americas, 13 from Africa, 6 from Europe, 3 from Asia and the Middle East, and 2 from Oceania. In total, 56 SFD organisations and 35 countries were represented. Delegations were selected through an application process launched by streetfootballworld in December 2008. Application criteria centred on the organisations’ mission, quality of work and potential to benefit from the festival. Each delegation was instructed to form a mixed-sex team of eight participants, four boys and four girls, between the ages of 15 and 18. The responsibility for selecting participants lay with the organisations.

Intervention Overview

According to streetfootballworld, ‘football3’ describes adaptations to the game of football to ensure that players transfer skills and Fair Play values that they gain in and around sport — including teamwork, physical fitness, fairness, respect, and responsibility — into their daily lives. Streetfootballworld created regulations and guidelines...
for the 2010 festival based on experience at previous streetfootballworld/FIFA events of similar structure. (29)¹

During pre-game discussions, participants decided on key rules (e.g., throw-ins or kick-ins from the side-lines, etc.) and proposed their own rules that were implemented if agreed on by both teams. During matches, players were expected to adhere to these rules, play fairly, and call their own fouls. Both boys and girls were required to be represented on the field at all times.

During post-game discussions, participants voted to award their opponents with a ‘Fair Play’ point, based on their opponents’ adherence to the football³ rules and guidelines.² The time allocation for pre- and post-game discussions was not specified although most discussions ranged from 10 to 20 minutes long. Mediators facilitated and translated discussions, replacing referees as unbiased observers during matches. At the close of the tournament, trophies were given to the winning and runner-up teams. One team was awarded a Fair Play trophy based on a delegation-wide vote and tally of Fair Play points.

To increase familiarity with football³, streetfootballworld distributed regulations and guidelines six months prior to the tournament [see Table 1]. Delegation leaders were

| Table 1. |
|-----------------|-----------------|
| **Basic Rules** | **Fair Play Guidelines** |
| Matches are 12 minutes long -- without a change of ends. | Fair Play is a must -- no fouls, no slide tackles, and no insults! |
| 4 players, 1 goalkeeper, and 3 substitutes per team. | Respect your teammates, your opponents, the mediators, officials and spectators. |
| 2 girls and 2 boys from each team must be on the pitch at all times. | In cases when a foul occurs, the fouled player should indicate that a foul has occurred by raising his or her hand. The players should help each other up and the team of the fouled player receives a free kick. |
| All free kicks are indirect and opponents must be at least 3 metres from the ball. | There are no referees. Mediators are entitled to call a Fair Play time out and arbitrate if the players cannot agree among themselves. Time is stopped for these discussions. |
| Goalkeepers can use their hands in the penalty areas, are able to play until the halfway line but may not throw the ball beyond the halfway line. | In addition, each team has one Fair Play time out per match. It can be used in cases when the players themselves feel that the game is not being played in a fair manner. Only the players can call the timeout and results in a discussion between the teams about how they can improve the level of Fair Play. Timeouts must not be used tactically and can only be called when the ball is out of play. |
| If the ball goes out the teams must decide who has possession. | Following intentional or dangerous fouls, the offending player must be substituted out for the rest of the match. Ideally the player’s own team or coach would do this. If necessary, the mediator will direct the offending player to be substituted. |
| The off-side rule will not apply. | Teams, coaches, or individual players that consistently play unfairly can be reported to the tournament director by other teams, which can result in an official warning to the offending team or individual. If that team or individual repeatedly demonstrates a lack of Fair Play and respect, the tournament director, in consultation with the mediators and players’ committee, can suspend them from the tournament. |

| **Points for a win, 1 point for a draw and no points for a defeat** |
|-----------------|-----------------|
| Following the match, the teams will come together and decide on an additional Fair Play point for each team. This can be granted to opposing teams if a team felt their opponents played according to the guidelines on Fair Play and the rules agreed to before the match. | Following intentional or dangerous fouls, the offending player must be substituted out for the rest of the match. Ideally the player’s own team or coach would do this. If necessary, the mediator will direct the offending player to be substituted. |
| In the knock-out stage, drawn matches will proceed directly to a penalty shoot-out, which will include three penalties per team, followed by sudden death. | Teams, coaches, or individual players that consistently play unfairly can be reported to the tournament director by other teams, which can result in an official warning to the offending team or individual. If that team or individual repeatedly demonstrates a lack of Fair Play and respect, the tournament director, in consultation with the mediators and players’ committee, can suspend them from the tournament. |

¹ For a history of the Football for Hope movement, see FIFA’s overview (34).
² The football³ model was referred to as ‘Fair Play’ during the 2010 festival.
encouraged to incorporate football3 into their programmes. During the festival’s first week, all participants took part in a workshop to improve their understanding of the model. In addition, one youth member of every delegation was trained as a mediator.

Data Collection and Analysis

In-depth interviews (IDIs) and focus group discussions (FGDs) were employed to explore experiences with the football3 model as well as the festival as a whole. IDIs were intended to elicit individual experiences, opinions and feelings. FGDs complemented IDIs by facilitating conversation between study participants with the aim of gathering group-level perspectives and discovering the variety in views within the study population. Individual interviews and focus groups have previously been used to evaluate SFD projects worldwide. In combination with programme observation, the interviews and focus groups promised to be the most comprehensive and pragmatic approach to our data collection. Discussion guides were created in consultation with streetfootballworld as the co-organisers of the event.

IDIs were hosted during the final three days of the festival. They were conducted by the primary author and lasted for approximately 30 to 60 minutes. IDIs were conducted with youth participants (n=15), coaches (n=2), streetfootballworld staff members (n=2), and a mediator (n=1). Thirteen IDIs were conducted in English, five in French, and two in Spanish. Four interviews were conducted with interpreters present given the limited language proficiency of the interviewees in any of these languages. Interviewees came from 16 countries: Cambodia, Ecuador, France, Germany, India, Israel, Mali, Nigeria, Rwanda, Senegal, Serbia, South Africa, Tahiti, Uganda, United Kingdom, and Uruguay.

Supplementing the interviews, two 90-minute FGDs were conducted by the primary author in English, one with 4 male participants and the other with 5 female participants. Participants were from four countries: Kenya, India, the United Kingdom, and the United States. Discussions were hosted immediately following the close of the festival before the delegations returned home.

IDIs and FGDs were audio-recorded and transcribed verbatim. Interview transcriptions in French and Spanish were translated and re-transcribed in English by the primary author. A set of codes was developed around two broad emerging categories: positive experiences and implementation challenges. The primary author coded the data initially through a manual process and later using NVivo 10 qualitative software. The coding process was carried out twice to enhance its reliability. To facilitate a richer analysis, other members of the research team provided input on the codes and categories produced and double-checked for reliability.

Participant observation and informal discussions with festival attendees also formed part of the data collection process. The primary author observed and took extensive notes on the behaviour of participants during both weeks of the festival including their interaction on and off the field, adherence to football3 rules and general wellbeing. Where possible, unobtrusive observation was conducted with different teams and groups to gain a broader perspective of the festival activities. The resulting notes also served as a check against participants’ subjective reporting of their perceptions during IDIs and FGDs.

Findings

Positive Experiences

Three central themes emerged regarding positive experiences with football3: a) cultural exchange and relationship building; b) Fair Play and social values; and c) gender integration.

a. Cultural exchange and relationship building

IDIs and FGDs suggested that the football3 model facilitated opportunities for cultural exchange and relationship building particularly through implementation in an international setting. Exchange occurred both on and off the football pitch. In particular, study participants suggested that the three ‘halves’ — pre-game discussion, football match, and post-game discussion — helped to build a sense of trust and mutual understanding.

[The football3 model] gives the players a voice to say what they want and say how they feel...It shows an understanding between players on the pitch...You can trust each other. (Male interviewee, Australia)

Off the pitch, the cultural and educational activities hosted during the first week in the form of discussions, workshops and fieldtrips were described as offering valuable opportunities for cultural exchange. By requiring international travel for most delegations, the festival setting was presented by some as affording a broader perspective of
the world. For instance, an informal conversation with an adult attendee revealed that members of one delegation had been unable to locate their home country on a world map prior to festival preparations. One interviewee explained that he had never seen a city, paved roads or large buildings before his arrival in Johannesburg. Exchange was also cited as occurring between tournament matches and at the ‘festival village,’ a boarding school in Johannesburg where teams were accommodated.

Despite language differences, study participants highlighted friendships that were built often through visual gestures and hand signals or verbally through translators. Several discussed common interest in football as creating a sense of community. As explained by an interviewee from the United Kingdom, “We all became one family with football as our language.” This friendship building occurred both within and across teams. In particular, this theme was highlighted with regard to the Peres Center for Peace delegation, comprised of four Israeli and four Palestinian youth. According to an Israeli interviewee, he and his teammates became “like brothers,” reinforcing this interviewee’s belief that “football can bring all people together.” Participants often discussed plans to keep in touch after the festival using e-mail and social networking sites, to which a majority reported having access.

Several study participants further expressed pride in having experienced cultural exchange by attending an international festival on behalf of their organisations:

When I arrive back at my home, my family will say, ‘Congratulations for having lived your dream. You made many friends and exchanged many experiences.’ It will be a very happy moment. My parents will be very proud of me. (Female interviewee, Ecuador)

Some planned to encourage their friends to remain highly dedicated to the mission of their organisation, so as to be considered as a candidate for future international festivals.

b. Fair Play and social values

Study participants highlighted the importance of Fair Play and social values underlying the football3 model, which includes respect, responsibility, and fairness. On the theme of respect, one participant described another delegation as “role models” for coping with losses of significant goal differentials while maintaining respect for other teams. Participant observation revealed additional instances in which delegations upheld the rules created during pre-game discussions: teams walking onto the pitch holding hands; teams huddling at the centre-circle for a cheer; and teams congratulating their opponents for scoring a memorable goal.

Turning to the themes of personal responsibility and fairness, some described the football3 model as useful in building a sense of accountability for one’s actions in requiring teams to call their own fouls. For example:

I think it’s better playing with the Fair Play rules because the teams have to agree and say when they’ve done something wrong. They’ve got to own up [to] it. (Male interviewee, United Kingdom)

Participants’ responses further suggested awareness of the value of fairness. Some expressed concern for high scoring differentials while others created rules during pre-game discussions that sought to facilitate a fair match among potentially unequal teams. One interviewee, for example, explained his delegation’s creation of a rule that would penalize anyone who played aggressively around his team member who possessed a prosthetic leg.

c. Gender integration

A vast majority of study participants supported and recognized value in using mixed-sex teams. However, a few female interviewees felt that males did not trust females with the ball. Some males were frustrated that females slowed down the game. Nevertheless, most discussed the benefits of gender integration. This theme was addressed at length during the FGDs:

Usually we don’t have a chance to play with girls [in India] because they have things to do for the family and afterwards the housework. So it was a good opportunity that we had a chance to play here. We come to know about the girls, as they are. If we give the chance to the girls, they can play the football... If the girls played well, you were happy. (Male FGD participant, India)

In my country of Kenya, girls’ football is not taken as something nice because they think that we cannot play as boys play. So it was a nice idea to show not only my country but the other countries that what a boy can do a girl can do. (Female FGD participant, Kenya)

Study participants were hopeful that in enabling girls to

2 Sixty-one percent of participants reported that they had never travelled to another country before arriving at the Football for Hope Festival 2010 (38).
show their football abilities, mixed-sex teams might help to challenge gender norms in their home communities in the future.

Implementation Challenges

Three central themes emerged regarding football3 implementation challenges at the 2010 festival: a) misunderstanding and abuse of the football3 model; b) notable differences in skill level across teams; and c) pressure on teams induced by the tournament atmosphere.

a. Misunderstanding and abuse of the football3 model

Despite support offered for football3, findings suggested widespread misunderstanding of the model’s primary purpose: to instil Fair Play and social values transferrable into daily life directly within a soccer match. The misunderstandings hindered implementation of the model as planned.

An overwhelming majority of study participants suggested that not all teams followed the rules. Many participants’ comments echoed the words of a male interviewee that “some teams...did not respect the rules and they thought just about winning, not Fair Play.” Players reportedly used the rules strategically by exaggerating fouls to obtain the ball from their opponents, a point highlighted by FGD participants:

Many teams take the Fair Play as an advantage...When the other team is going to score, one player will just fall down and raise his or her hand for Fair Play to get the ball. (Female FGD participant, Kenya)

It was a bit pathetic. If I touched someone, he would just go flying and if they raised their hands, they would get a free kick. (Male FGD participant, United Kingdom)

Moreover, several teams attempted to create rules that would enhance their chances of winning. One team, for instance, always proposed that goals scored by girls should count double, which was motivated by the high skill level of their female players. Some teams resisted giving out Fair Play points when not receiving a point from their opponents, a practice viewed by one participant as “obnoxious” (female interviewee, United Kingdom).

In addition to widespread non-compliance with the rules, findings suggest that participants misunderstood the role of the mediator. For some, mediators empowered participants to express their views and make their own decisions in matches. However, a majority raised concerns at times contesting decisions made by mediators. Several believed that mediators compromised the physical side of the game, which they viewed as an essential component of football although not a key element of football3. A few stated that they did not always trust mediators’ translations during discussions: “mediators twist our words” (female interviewee, South Africa).

As further evidence of misunderstanding, several interviewees believed that the football3 rules could have been defined and communicated more clearly from the outset. A mediator interviewed described this challenge: “We tell [the participants] 10 rules one day and the next day 15...In the end, they are lost...As a result, there are arguments.” In one example, confusion resulted from the addition of a rule mid-way through the tournament, allowing mediators to cut overly physical matches after giving a team three warnings. Teams were additionally uncertain about the number of girls required on the pitch: whereas the rulebook (see 35) stated that “2 girls and 2 boys from each team must be on the pitch at all times,” the sex of the 5th player (the goal-keeper) was not specified. Although the festival organisers had encouraged delegation leaders to incorporate football3 into local programming prior to the festival, a number of study participants reported their first exposure to the programme at the festival.

Beyond evidence of confusion over rules on the field, views on the overall purpose of the festival ranged broadly. In discussing implementation of the football3 model, a festival organizer highlighted the importance of cultural exchange above match outcomes:

We’ve wanted to ensure that the kids understand that football is not the focus and their interaction and engagement is what we want to achieve. So, the emphasis at the beginning is always to integrate the delegations—to take a little away from the drive to win in the football. During the first week, we play virtually no football at all. (streetfootballworld interviewee)

In contrast with these views expressed, a few participants mistakenly arrived anticipating an opportunity to be recruited for professional football:

Some people are here because they think that scouts are going to be here to see them and take them...All they want is to be picked [as professional football players] and to be famous. (Male interviewee, Nigeria)
Several study participants further discussed what they perceived as an underlying discrepancy within the football3 model being implemented in a tournament setting. They found difficulty in balancing a simultaneous focus on Fair Play values with pursuit of the tournament trophy. An adult and participant articulated this challenge as follows:

For me, there is a big problem. On the one hand, there is Fair Play and on the other there is football and the results. There are two types of teams: teams that are here to win and teams that are here to have fun...What is the goal of this event?...Should [the matches] only be about the exchanges or about producing a winning team?...What I always say is that this is not a traditional tournament. It involves Fair Play, which has to be put ahead of the game itself. (Male interviewee, Tahiti)

In my opinion, some of the teams are forgetting their values—the Fair Play values and everything they worked for to get here. To us—and I know it’s happened to other teams—winning becomes more important than what the tournament stands for. That’s the worst part because the tournament wouldn’t be here if it wasn’t for everything that these organisations have worked for. Forgetting everything for a trophy—I don’t like it. (Male interviewee, Tahiti)

Most agreed that the competition demonstrated by teams was extreme. They felt that promoting Fair Play values should be of equal or greater priority than match outcomes.

b. Notable differences in skill level across teams

Notable differences in skill level across teams caused further implementation challenges. Some teams were new to the game of football. For example, three delegations brought mentally disabled players. The weakest teams were most often deemed the victims of high scoring and unfair play. An adult interviewee discussed this tendency, calling into question the very premise of football3:

When you lose 10 to 0, the first time, it doesn’t matter; the second time, it’s more frustrating; and the third time, you don’t feel like playing anymore and you want to go home. Is this Fair Play?...It’s a psychological disaster for the players...It’s not right. (Male interviewee, Tahiti)

On the other hand, some teams had extensive football experience and were set on winning. Higher-skilled teams were perceived to abuse the football3 rules and guidelines, heightening the level of intensity and competition. As highlighted by a participant:

When the crowd are screaming, [my teammates] are getting so frustrated...Because we are the hosts, [the spectators] are expecting much from us...They have to understand that the Football for Hope is not all about winning. It is all about being fair and meeting other people from other countries. (Male interviewee, South Africa)

Our supporters here, they are swearing at us...It hurts at the end of the day...They call us cows, big cows [in the local dialect]. (Female interviewee, South Africa)

Despite these challenges cited, a majority recognized the football3 rules as being new and believed that rule adherence improved over the course of the tournament—that teams were “learning more and more every day” (male interviewee, Uganda). For instance:

This is the first time that this festival is an official [FIFA World Cup] event. The first time, you’re always going to have ups and downs. But over time, [the model] will develop to be stronger, so I think they should keep using it. (Male interviewee, Australia)
Study participants made several recommendations: ensure that only teams truly committed to Fair Play values take part; create separate divisions based on skill level; and ask teams to vote on awarding Fair Play points after matches in writing rather than verbally.

**Discussions and Implications**

This study set out to investigate the experiences of youth and adults with the football3 model at the Football for Hope Festival 2010, with the aim of offering recommendations on the model’s future design and implementation for organisations worldwide. Based on our findings, we offer five recommendations:

1) Systematically formulate desired outcomes;
2) Formalize a curriculum and training plan;
3) Prioritize social values over match outcomes during implementation;
4) Pilot in a range of settings, over an extended period of time;
5) Emphasize monitoring and evaluation to assess effectiveness and impact.

We proceed to discuss the study findings in the context of these five recommendations, considering the potential for future implementation in both tournament and non-tournament settings.

**Systematically formulating desired outcomes**

Based on widespread misunderstanding of football3 at the 2010 festival, we recommend that future implementers systematically formulate desired outcomes of the model, tailored to the delivery setting. Specifically, we suggest advancing the creation of a football3 programme theory (also referred to as a ‘theory of change’), detailing the sequence of causes and effects that are presumed to lead to the desired outcomes. The need for greater clarity of desired outcomes of sport-based programmes has been consistently noted in the literature. (31, 39) Indeed, sound theoretical frameworks are often missing in SFD programmes, due to a focus of many SFD organisations in the early stages on programme implementation and fulfilling funding requirements. (39)

The Football4Peace programme in Israel offers one example of a sound philosophy for pursuing social integration through football that has been tested and refined over time. (12) The sustained growth of the programme and its increased impact over the past decade provides evidence of its successful ‘teaching philosophy.’ We are confident that similar milestones can be achieved with football3’s ‘theory of change.’

Ultimately, we view the football3 model’s adaptability to address a range of social development issues at the community level as its greatest asset. However, the very adaptability of the model reinforces the importance that its desired outcomes be established at the outset and customized to fit the delivery context.

**Formalizing a football3 curriculum and training plan**

After formulating desired outcomes, we recommend formalizing a curriculum and training plan to address some of the challenges that the participants faced (e.g., confusion over rules and the role of the mediator, etc.). Other SFD organisations have developed curriculum and training plans that could serve as a resource (see Football4Peace, 45, and Grassroot Soccer, 46, as examples). A football3 curriculum should clarify key learning objectives while providing step-by-step delivery guidelines and tips for implementation.

Alongside a guiding curriculum, a training plan should be developed to detail when and how stakeholders (e.g., participants, adults, the community, etc.) will become familiar with the model. If implementation occurs in a tournament setting, teams should be trained on the rules in advance. Moreover, given issues with overly critical spectators, we recommend incorporating a plan for educating influential stakeholders and the broader community. This plan could involve delivering information on the primary purpose of the tournament and importance of social values to spectators upon their arrival at the sporting grounds.

**Prioritizing social outcomes over match results during implementation**

During the delivery of football3, implementers should prioritize social outcomes over match results. According to our findings, study participants described the “desire to win” as excessive appears to have instigated a majority of challenges faced, including the abuse of rules, lopsided game results and pressure to perform. Existing literature has noted the difficulty of balancing the pursuit of sporting and non-sporting outcomes. (25, 41, 42, 43) According to Sugden (12) in his research on the Football4Peace programme in Israel:

*Sport is inherently competitive and this can be one of its most enjoyable qualities. Of course, if sport becomes ‘too...*
Sugden does not suggest that competition should be eliminated to achieve social outcomes. A guiding philosophy of Football4Peace centres on inciting conflict during matches to provide a “teachable moment,” which is an opportunity to teach about resolving conflict and in turn instil positive values. In the case of football3, balancing the emphasis on match and social outcomes appears complicated by the model’s positioning on the ‘sport plus’ and ‘plus sport’ continuum. Arguably the most innovative feature of the model—addressing social development directly within a sporting match—gives rise to its greatest challenge: maintaining a focus on social outcomes without diminishing competition as an indispensable component of the game of football.

Several modifications during implementation could help reduce the tendency of teams to become “too competitive.” Organisations should work to pair teams of similar skill level, as some study participants suggested. Research posits that contestants should be evenly matched in order to create a “level playing field” (10) and achieve positive outcomes in a sporting contest that emphasizes Fair Play. (44) In a tournament setting, such pairing could occur either through a pre-selection process or the creation of separate divisions. Participants should feel emotionally safe during matches, a feature recognized as important for fostering positive outcomes in youth sport. (21) This recommendation comes in light of the pressure felt by teams to perform, which was induced by the announcers, large television screens and spectators. Finally, football3 implementation in a non-tournament setting could assist in mitigating an excessive drive to win; matches could be positioned as “friendly” rather than having teams form part of a tournament bracket leading to the championship.

**Piloting in a range of settings, over an extended period of time**

Upon formulating desired outcomes and formalizing a curriculum and training plan, we propose that the football3 model be piloted in a range of settings over an extended period of time. In our analysis, additional piloting is justified by the positive experiences of study participants regarding cultural exchange and learning, Fair Play and social values, and gender integration. Although at this point in time, we cannot draw conclusions on the model’s effectiveness, we consider our findings in relation to future football3 implementation.

First, study participants appreciated the opportunity to interact with and learn from diverse individuals in an international setting. Relationship building has been noted as a necessary component of a successful sport-based programme. (20) In other sport-based programmes, cultural exchange has been shown to assist in building friendships and generating a feeling of togetherness, for instance, among racially diverse South African youth (6) and ethnically divided communities in Sri Lanka (37) and Cyprus. (13) Experiences at the Homeless World Cup support the ability of a sport-based international event to generate social capital among disadvantaged youth. (15) Together, these findings suggest that the football3 model could be well positioned as a tool for building social cohesion in a community, especially in conflict settings. The inclusion of cultural and educational activities was viewed positively at the 2010 festival and could be of particular benefit towards this end. Existing literature suggests value in incorporating such activities (e.g., arts, dance, etc.) into sport-based programmes aimed at addressing peace and conflict resolution (6, 13). Future implementers should ensure that such “off-pitch” activities are led by highly trained and capable facilitators, particularly in discussions about sensitive issues such as conflict. (12)

Second, findings show positive experiences surrounding the model’s Fair Play and social tenets including respect, responsibility, and fairness. While findings on mediators were divided, study participants appear to have valued the opportunity to demonstrate personal responsibility and ownership of football3—important qualities for a sport-based programme that promotes personal growth and development. (3, 14, 43) Existing literature, though primarily conducted in physical education classes in first-world settings, provides evidence that sport-based programmes can promote social and moral development. (22, 48, 49) These findings together suggest potential value in tailoring football3 to address the social and moral development of youth. The literature emphasizes the importance that such initiatives be based in sound theoretical principles. (50) Implementers should look to existing theory (e.g., Bandura’s social learning theory, 51) in developing the basis for their programmes.

Third, findings on the whole show positive experiences regarding usage of mixed-sex teams, although comments of certain participants suggest a need for the further exploration of this area. Study participants generally
supported integrating boys and girls, suggesting the potential to challenge prevailing gender norms in their communities by demonstrating the athletic abilities of females. The importance of providing girls with sporting opportunities has been well documented. (16, 52) Nevertheless, the suggestion from some participants that female players were viewed as valuable only if they played well reinforces the importance of future piloting of the model to explore its potential to address complex issues of gender and power dynamics. Future implementers should be mindful to carefully plan and tailor usage of sport for female empowerment to the local context, given the sensitive nature of the topic and potential for a negative community response. (53)

In piloting football3 across different settings, implementers should aim to deliver football3 programming over an extended time period. Existing literature has noted that the effects of sport-based programmes are determined by their frequency, intensity of participation and the degree of participants’ adherence over time (54). Research highlights limitations of short-term sporting initiatives on long-term impact, for instance, regarding peace processes (10, 12). The streetfootballworld team (33) itself recognizes the importance of sustained football3 implementation to achieve desired outcomes:

This way of using football for social development will not succeed overnight. The best football3 programmes work with players and communities over a long period of time to build the essence of the idea and to ease players into using the principles of the dialogue sessions in their lives off the pitch.

We perceive value in delivering the football3 model through a once-off event based on positive experiences at the 2010 festival. Nevertheless, we suggest that the programme’s long-term implementation would assist organisations in achieving individual outcomes and tailoring the model towards addressing local social challenges. Organisations might alternatively integrate on-going programmes with once-off events, the synchronization of which has been advanced as adding potential value to SFD programmes. (55)

**Emphasizing monitoring and evaluation**

In our final recommendation, we highlight the importance of monitoring and evaluation (M&E) to future piloting. A need for stronger M&E of SFD programmes has been consistently noted in the literature. (19, 28, 30, 31) At the 2010 festival, streetfootballworld carried out an M&E plan, incorporating surveys and interviews and publishing findings internally to capture lessons learned. (38) Beyond the festival, streetfootballworld reports that organisations are using versions of football3 in their communities, (29) but the programme’s successes and challenges in this extended context remain unclear. Through M&E, SFD organisations will be positioned to set benchmarks and targets, celebrate their achievements, incorporate learning into future implementation and share findings broadly.

Future studies may benefit from including control groups that compare the outcomes of football3 with SFD interventions incorporating traditional football matches or no intervention at all. Quantitative and qualitative methods should be integrated in light of widespread recognition that mixing different types of methods can strengthen a study—particularly when examining complex social phenomena. (e.g., 56, 57) Research should explore football3 programmes that address a range of desired outcomes while comparing implementation in tournament and non-tournament settings. In particular, research should investigate the degree to which the benefits of the model transcend the football3 setting: whether and, if so, in what ways values are gained and incorporated into participants’ daily lives. If future investigations demonstrate that the football3 model is effective and has a positive impact, scale-up may be justified.

**Study Limitations**

A number of methodological limitations of this study must be noted. The primary author both collected and analysed the data, which may have caused bias in data interpretation. However, in accordance with the recommendations in the literature, (36, 58) peer examination was used as a check on the data interpreted. Five delegations were excluded from the study due to insufficient resources for language translation, hindering our ability to generalize perspectives across festival attendees. Some interviewees used a second language to participate in the study, which may have limited their ability to speak honestly. FGDs contained fewer than expected participants due to the travel schedules of delegations, which had a likely impact on the richness of the discussions. Finally, the observational component of this research was undertaken in a largely unstructured way. To use the full benefits of the observation technique, it deserves greater planning and perhaps a more structured approach in the future. Overall, we again note the nature of this study as exploratory and recommend rigorous future research to test the effectiveness of the football3 model and to cautiously
consider its impact both during the football match and over the long term. (37)

**Conclusion**

By providing insight into the experiences of youth and adults with the football3 model at the Football for Hope Festival 2010, this qualitative exploratory study contributes to the broader field of SFD. We conclude that the football3 model merits future use as a tool for addressing social development issues through the game of football. Our findings suggest that football3 offers numerous positive experiences for festival participants that pertain to cultural exchange and relationship building, promotion of Fair Play and social values, and gender integration. Through its adaptability to address a range of social challenges within a football match, the football3 model could be tailored to a variety of local settings.

However, challenges faced during implementation at the 2010 festival reinforce the need for specific modifications to the football3 model. Our findings highlight widespread misunderstanding and abuse of the football3 model, which were issues that resulted from notable differences in skill level across teams and the pressure on teams induced by the overall tournament atmosphere. We recommend that future implementers systematically formulate the desired outcomes of the model, formalize a curriculum and training plan, prioritize social outcomes over match results, pilot football3 in a range of settings over an extended period of time, and emphasize monitoring and evaluation to assess the model’s effectiveness and impact. Future piloting and research should inform the potential scale-up of the model for organisations worldwide.

**Acknowledgements and Notes**

We would like to thank all of the festival attendees for their participation in this study. We extend a special thanks to Jürgen Griesbeck, Maja Hebel, George Springborg and all members of the streetfootballworld team for their assistance with making this study possible. The primary author collected data for this study while fulfilling the requirements of the Development Studies thesis as an undergraduate student at Brown University. The Brown University International Scholars Program funded this study. The views presented in this article do not necessarily reflect those of the funding source.

**References**


29. streetfootballworld. Festival 06 documentation. c2006.


