

Integrating Mental Health in Grassroot Soccer: Reflections

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OVERVIEW

This brief is meant for organisations aiming to integrate mental health into youth programmes, offering insights and practical strategies from Grassroot Soccer (GRS's) experiences integrating mental health into SRH, gender, and HIV programmes over the past two years. GRS hopes to share more often and openly because by working together and sharing knowledge, we can develop more effective, culturally sensitive strategies to improve the mental well-being of adolescents globally.

PRINCIPLES FOR MENTAL HEALTH INTEGRATION

- 1. Communication and Perspective: GRS recognised the need for clear communication and understanding of mental health, acknowledging varying levels of knowledge and perspectives among staff.
- 2. Flexible and Balanced Integration: GRS adapted mental health integrations to fit specific projects or programmes, explicitly linking mental health with broader development goals for smoother adoption and change.
- **3. Defining Integration:** GRS defined clearly and early what integration means within an organisation, project, or programme.

WAYS ORGANIZATIONS CAN INTEGRATE MENTAL HEALTH INTO THEIR PROGRAMMING

Update programme materials with mental health content

• Define the topics and objectives using a logic model, storyboard, or other framework to guide programme and materials development. Here are three examples from GRS:



Resources:

SKILLZ Girl Curriculum Framework SKILLZ Plus Curriculum Framework SKILLZ Guyz Participatory Logic Model

- Clarify the connections between other health areas and mental health and improve the logic and flow of information between health topics. Mental health was a natural extension for many topics and conversations, such as connecting healthy relationships to mental well-being or extending help-seeking actions to mental health services.
- Identify opportunities to tweak existing materials. GRS added breathing exercises as part of the warm-up or cooldown to help participants focus during the session and learn a coping skill they can use to calm themselves. GRS also reworked the debrief structure, using *Feel-Think-Do* questions to help participants build emotional vocabulary and reflect on the connections between thoughts, feelings, and actions.

For more information about Grassroot Soccer's mental health work, go to:

grassrootsoccer.org/mental-health

or contact Chris Barkley at cbarkley@grassrootsoccer.org



Provide support and skills

- **Prioritise the mental health and well-being of Coaches.** Many GRS Coaches struggle with their own mental health and life challenges and require support. GRS learned from Waves for Change and brought in a local counsellor or psychologist to facilitate regular group debriefing sessions with Coaches.
- **Ongoing learning.** Because not everything can be covered during the Training of Coaches, spreading learning across a Coach's life cycle is vital to ensure they have the knowledge and skills to support their mental health and deliver effective mental health programmes. GRS has implemented sessions meant for 'Coach Development' and links to free resources for self-directed learning.

Respond to participants' mental health needs

- **Strengthen crisis preparedness.** GRS is working to train staff to recognise mental health crises, such as sudden behavioural changes or expressions of distress.
 - Establish clear emergency protocols, including steps for immediate response and when to seek a mental health professional.
 - Develop collaborations with mental health professionals for expert guidance and support. At one of our community centres, this meant making new links to occupational therapists at a local mental health clinic. Who are the mental health professionals where you work? Do digital or toll-free lines exist where in-person services do not?
 - Involve parents and the community in awareness programmes and encourage peer support within the programme.
 - Regularly review and update these procedures to ensure they remain practical and relevant.

Measure mental health alongside other topics

- Qualitative Data and Youth Voices. Mental health is inherently subjective and not easily quantifiable. By emphasising qualitative approaches, we can help young people share personal views and narratives, allowing them to advocate for what they want. People experience their health in an integrated manner, and young people will provide rich descriptions of the connections between mental health and other areas of their lives.
- **Questionnaires and Surveys.** Several brief validated scales measure mental health-related constructs such as well-being, distress, knowledge, skills, and attitudes. After several studies and developing routine monitoring tools, we are still forming ideas about the tools best suited for our programmes and participants. Here are some of the measurement tools GRS has explored:
 - WHO-5 Well-Being Index: A short scale measuring current mental well-being.
 - GAD-7 (Generalized Anxiety Disorder Scale): A tool for assessing the severity of generalised anxiety symptoms.
 - PHQ-9 (Patient Health Questionnaire): A tool for assessing levels of depressive symptoms.
 - Strengths and Difficulties Questionnaire: A behavioural screening questionnaire for children and teenagers assessing emotional and behavioural difficulties.
 - **Mental Health Literacy Scale:** An instrument designed to evaluate knowledge and beliefs about mental disorders, which aid their recognition, management, and prevention.
 - Emotional Approach to Coping: Measures coping strategies centred around emotional processing and expression.
 - Emotional Regulation Questionnaire: Assesses individual differences in emotion regulation strategies.



Resources:

MindSKILLZ pre-post questionnaire SKILLZ Guy pre-post questionnaire

• Clarify the costs of integrating mental health. So far, this is a gap for GRS. In 2024, GRS plans to assess the costs of different mental health integration approaches and activities to expand mental health work with partners.