

Kick starting healthier lifestyles: results from a mixed methods study on a sport-based FASD and HIV education program for adolescents in South Africa.

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CONTEXT FOR AN FASD AND HIV PROGRAMME

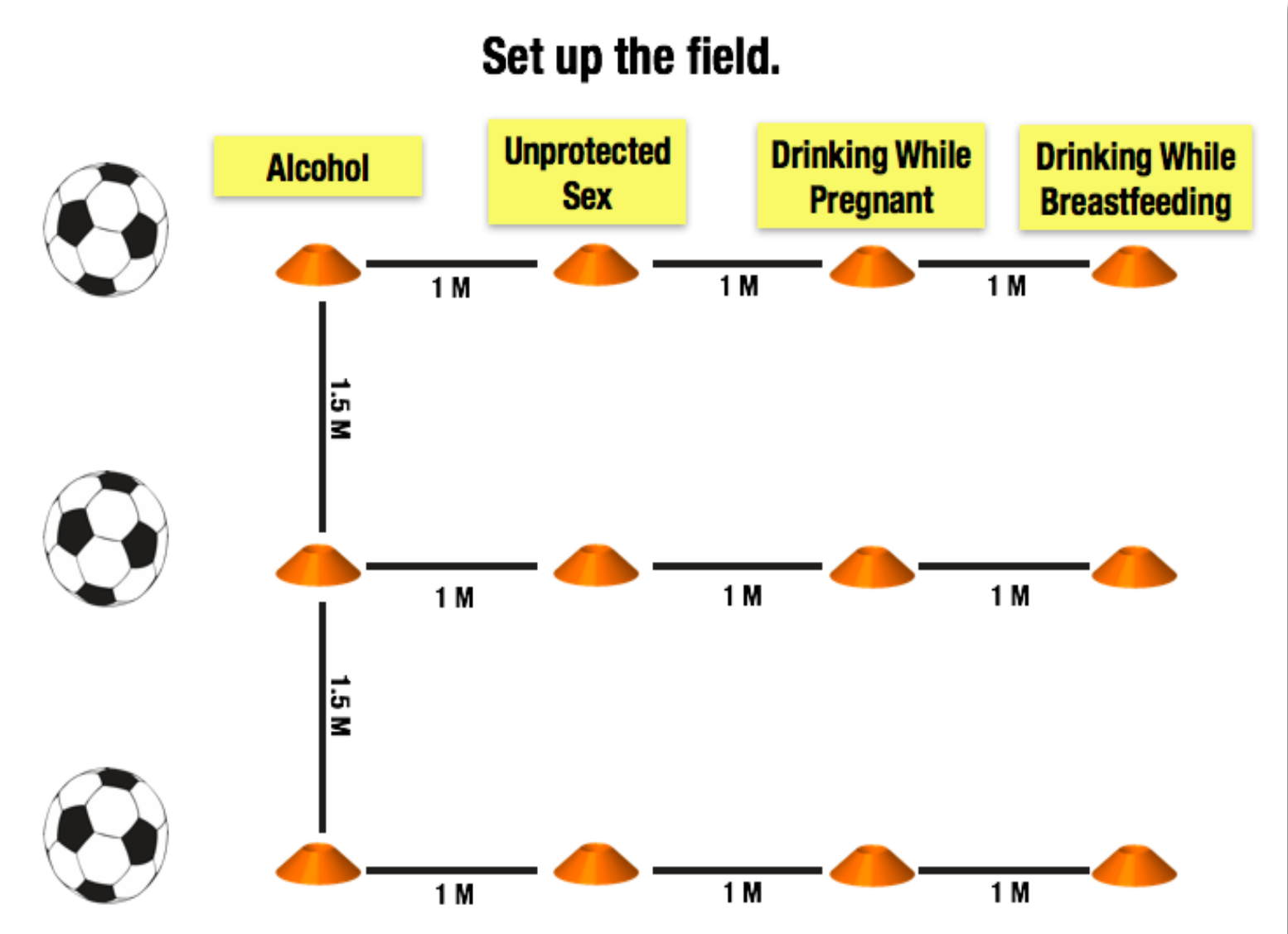
South Africa's Northern Cape Province has the highest reported rate of Fetal Alcohol Spectrum Disorders (FASD) in the world. FAS prevalence in Kimberley suburbs is approximately 6% and in some areas goes as high as 11%. There is no cure or treatment for FASD, however FASD is preventable. Additionally, the region is burdened by HIV infection and high unemployment rates. Adolescents are especially vulnerable to these factors and are at high risk of adopting destructive behaviors which may lead to alcohol abuse and unsafe sex practices. The programme delivered by Hope in South Africa and Grassroot Soccer provides comprehensive FASD and HIV prevention education, through the SKILLZ Together intervention.

INTERVENTION OVERVIEW



The FASD knot. Participants make and wear the bracelets to show their commitment to prevent FASD.

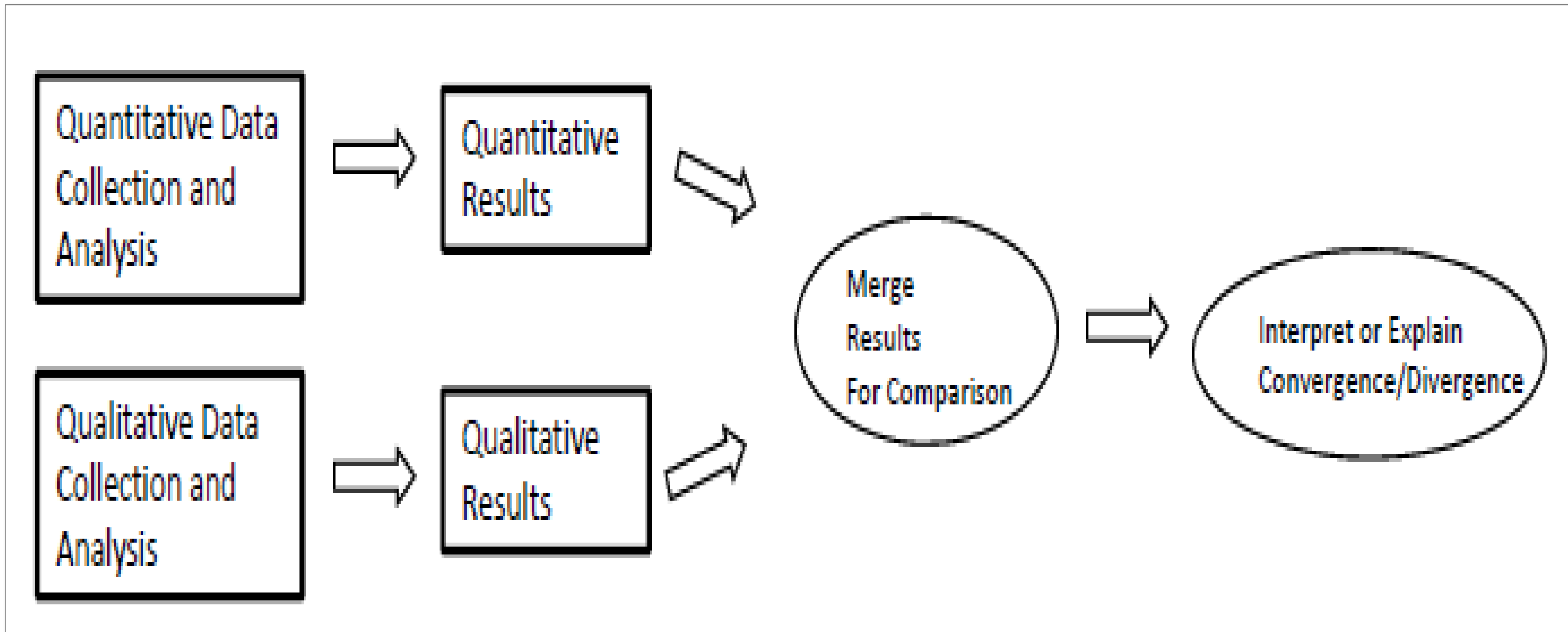
SKILLZ Together is a 9-session soccer based intervention through which peer educators support adolescents age 10-18 to recognize the risks associated with unsafe sexual behaviors, alcohol consumption, and peer pressure. The programme includes themes on FASD knowledge, substance abuse, pregnancy and supporting pregnant women, and the role of men and boys to prevent FASD. Participants are encouraged to act to prevent FASD in their communities. A practical way to show their support to the FASD movement is the "FASD knot" bracelet which they can make and wear. The programme makes use of 'teachable moments' during soccer activities to deliver messaging to adolescents. SKILLZ Together has positive impact on FASD prevention knowledge and awareness, self-efficacy to avoid risky sexual behavior, future orientation and males' responsibility to prevent FASD.



Adolescent boys and girls playing "risk-field" - a session focusing on key-drivers of FASD and HIV.

METHODS

A parallel mixed methods study design was used to investigate the perceived impact of the programme at the individual and community level. Quantitative and qualitative data was collected and analyzed simultaneously and then merged for comparison. Findings are based on data collected in Kimberley, Richmond, and Colesberg. Focus group discussions with participants, coaches and community members (n=5, 2, 1) and one key informant interview were transcribed, coded thematically and analyzed in Nvivo 10. Routine attendance data (n= 991) and pre-post surveys (n = 977, median age = 13) were analyzed. Pre-post surveys are 14 agree/disagree statements. Significance was assessed via Wilcoxon Rank sum test.



Parallel Design – allows for merging of concurrent quantitative and qualitative data to address study aims.



FINDINGS

Quantitative data shows that 98. 5% of participants attend at least 70% of the session and show improvements in their knowledge, attitudes and communication related to FASD and HIV. Of the 14 survey-questions, 9 show significant positive change. These are the ones measuring communication, knowledge on FASD and HIV, self-efficacy to support pregnant women, delay in having a baby and men's role to prevent FASD. We saw no significant change for some of the questions: on recognizing alcohol and alcohol consumption during pregnancy as being big problems in South Africa, and saying no to the pressure from peers to drink alcohol. Negative change was observed for the statement on drinking alcohol while breastfeeding.

Qualitative findings
Participants demonstrated understanding of risks and consequences related to drinking

Actually we know now that what are the consequences when you drink alcohol when you are pregnant and what diseases we can get if we have unprotected sex. (Participant, Colesberg)

Participants increased communication, taking action, and planning
People are now interested in what I said. My mom says to her friends about what I said about FAS and women who are pregnant. (Participant, Kimberley)

Participants reported avoiding negative peers and seeking supporters
So before this, we hanged out with the wrong people, and we didn't chase them away. After that, they just chose to walk away because we didn't do what they were doing anymore. (Participant, Colesberg)

Coaches value their role as mentors, both in SKILLZ and the community
I don't just educate them about FASD, you see. I help them achieve their dreams, more like a caring coach, a coach that looks after his community (Coach in Richmond)

Community health workers and teachers believe SKILLZ should also directly target pregnant women and parents.

Limitations: Lack of control group and randomization limits the ability to infer causality while bias could have been introduced as a result of this being an internal study. Nevertheless, the study allowed us insight into the programme and evidence points towards a promising model.



SKILLZ Together participants during Game Changer activity – standing up to alcohol use

CONCLUSIONS AND NEXT STEPS

Study results show that SKILLZ Together has an effect on participants' knowledge, attitudes and communication regarding alcohol consumption, FASD, and HIV prevention. Moreover, findings suggest the intervention can play a role in promoting risk-avoiding behaviours. The role of peer educators spills over beyond the intervention itself, creating positive role-models in affected communities. The evaluation highlighted strong appreciation for the programme and broad community support. In addition, it is essential to engage partners during development phase and implementation, as well as to address attitudes of other community members, so that harmful behaviours are challenged on multiple levels. The internal mixed-method approach provided an appropriate level of rigor at this stage and informed future steps.

Further research could follow participants for multiple years to measure changes in behaviours as a result of the intervention, as well as further engagement with government and NGOs to integrate SKILLZ Together with existing campaigns around FASD, HIV and teenage pregnancy prevention.

ACKNOWLEDGEMENTS

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