

# YDF Manual for Tuberculosis Prevention

For Football Enthusiasts, Coaches, Educators, Community Leaders

Youth Development through Football



Under the patronage of  
**UNESCO**

United Nations  
Educational, Scientific and  
Cultural Organization



**USAID**  
FROM THE AMERICAN PEOPLE

TUBERCULOSIS  
PROGRAM  
SOUTH AFRICA



The 'Youth Development through Football' (YDF) project has its roots in the 2006 FIFA World Cup™. It was launched in 2007 and will run until 2012. The project is part of the 'South African - German Development Co-operation'. It is funded by the 'German Federal Ministry for Economic Co-operation and Development' (BMZ), co-funded by the 'European Union' (EU) and implemented by the 'Deutsche Gesellschaft für Internationale Zusammenarbeit' (GIZ). The project partner is 'Sport and Recreation South Africa' (SRSA). YDF is a football project aimed at the youth. At the same time, it far surpasses that description. The aim of the project is to support socially disadvantaged boys and girls in such a way that they are able to take their own lives 'in hand' and shape them positively. Their passion for football facilitates access to these youths. The YDF project will be established in all South African provinces and in nine other African countries.

## **YDF Manual for Tuberculosis Prevention**

For Football Enthusiasts, Coaches, Educators, Community Leaders

Published by United States Agency International Development (USAID)

Compiled by Liana Laubscher  
Henning Schick

Contributions by Chrisna Groenewald  
Nerice Swanepoel  
Dr Albert van Jaarsveld  
Gert Potgieter

Layout Design & Illustrations Björn Rothauge

First Edition published in South Africa 2014

This publication remains the property of the publishers. Any unauthorised use and/or sale of this product and its content are strictly prohibited by the publishers.





## Lesson 1

Role and Responsibilities of a Coach

## Lesson 2

What is Tuberculosis (TB)?

## Lesson 3

Transmission and Prevention

## Lesson 4

Signs, Symptoms and Social Drivers of TB

## Lesson 5

Treatment, Care and Support for Infected and Affected People

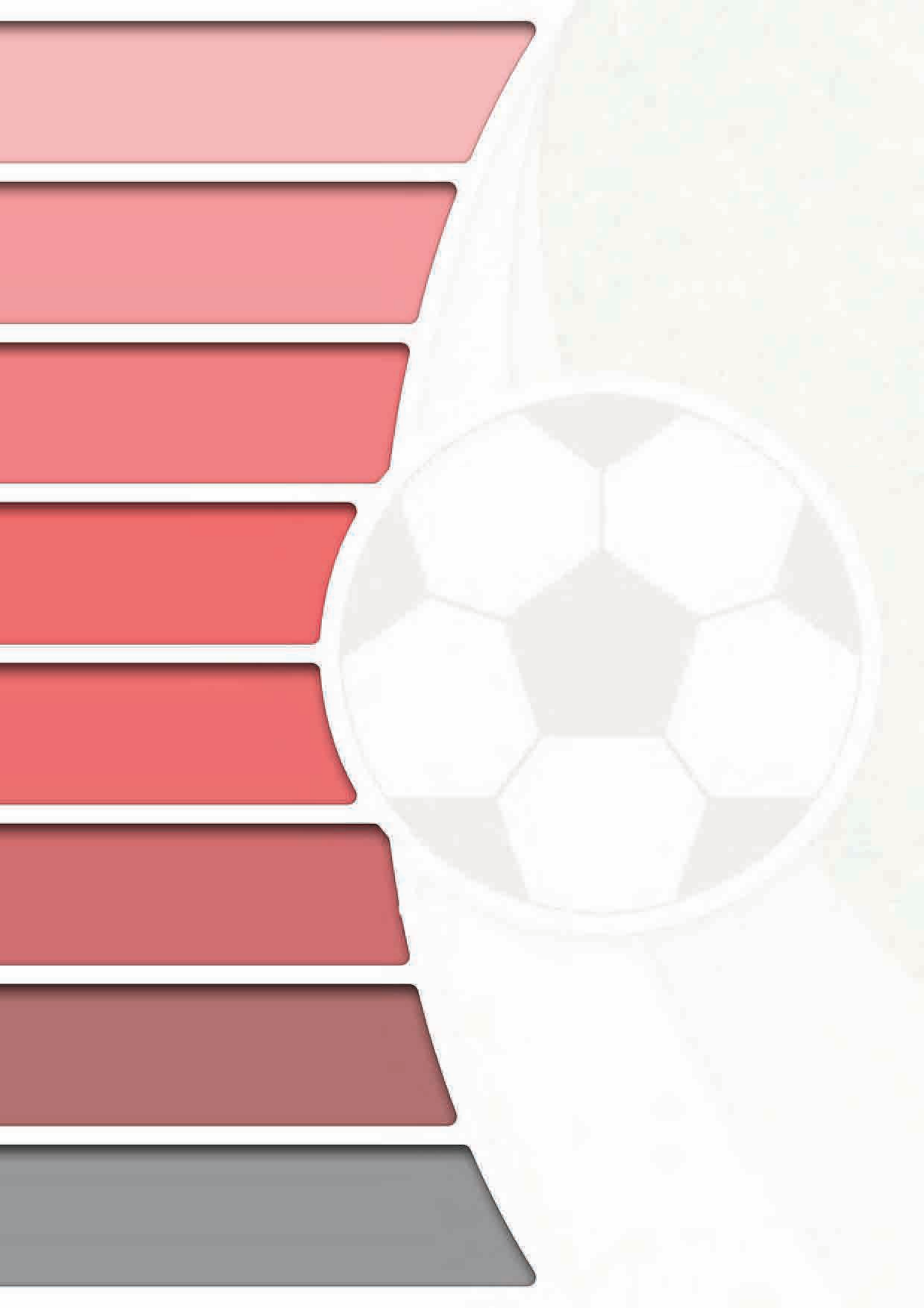
## Lesson 6

Working with People living with TB

## Lesson 7

Conclusion, Reflection and Action Planning

Work Sheets



## Lesson 1

Roles and Responsibilities of a Coach

1

## Lesson 2

What is Tuberculosis (TB)?

5

Football exercises relating to topic

9

## Lesson 3

Transmission and Prevention

11

Football exercises relating to topic

13

## Lesson 4

Signs, Symptoms and Social Drivers of TB

15

Football exercises relating to topic

21

## Lesson 5

Treatment, Care and Support for Infected and Affected People

23

## Lesson 6

Working with People living with TB

25

Football exercises relating to topic

29

## Lesson 7

Conclusion, Reflection and Action Planning

31

## Work Sheets

YES or NO Questionnaire for Exercise 1

WS1

Notes

WS2



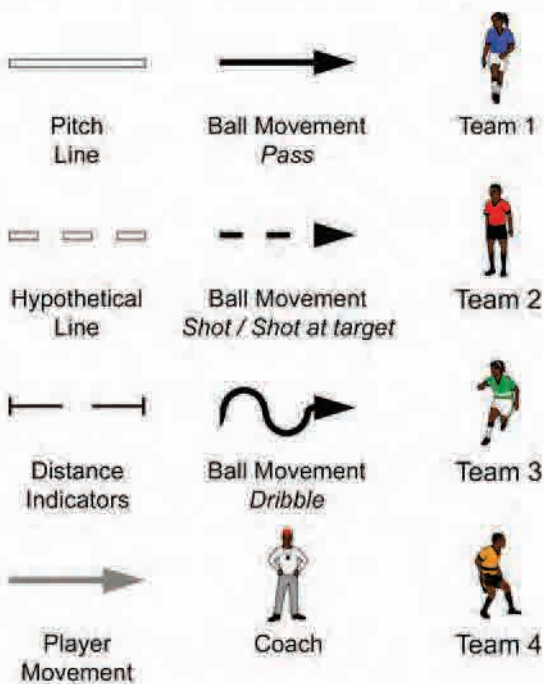
Hi there!

I'm **Edwin**, the Life Skills Meerkat. I'll give you helpful hints concerning Life and Social Skills in Football. So whenever you see me, be sure to take note of what I have to say, as it might just make the difference between a good coach and an excellent coach!

Together we will **Educate and win!**



## UNDERSTANDING THE DIAGRAMS





# LESSON 1

Roles and Responsibilities of a Coach





# LESSONS 1

## Roles and Responsibilities of a Coach

### Roles of a Youth Football Coach

There is more to the role of a youth football coach than teaching football skills and organising a team. The football coach working with young people is helping them develop not just as footballers but also as young people. The coach assumes many different roles as they work with youth. They are responsible for assessing the young person's level of ability, providing instruction that helps them develop their skills, and providing motivation to them. They are a performance analyst, a teacher, a motivator.

The youth football coach is also responsible for the guidance of the youth in life and as well as their chosen sport. The roles of the youth football coach will therefore be many and varied from assessor, teacher, motivator, friend, mentor, facilitator, demonstrator, adviser, supporter, fact finder, counselor, organiser, and planner.



### Responsibilities of a Youth Football Coach

When someone undertakes to coach football to youth, they assume a range of responsibilities as a coach.

These responsibilities include:

- ❖ Ensuring the health and safety of the young people participating in activities you lead;
- ❖ A duty of care for young people that includes protecting children from abuse;
- ❖ Ensuring the balanced long term development of the young person taking into account their physical, technical, psychological and social needs.
- ❖ Continuing to update your own knowledge of football and football coaching;
- ❖ Planning and evaluating your coaching sessions;
- ❖ Providing opportunities for youth to play football and have fun;
- ❖ Involving young people in decision making around their own participation.
- ❖ Development of the Youth Football Player



## Roles and Responsibilities of a Coach

### Development of the Youth Football Player

One of the responsibilities of a youth football coach is the long term development of the player. This means developing the young person in terms of their technical / tactical skills, their physical fitness, their mental or psychological fitness, and their social skills.



All Round Development of the Youth Footballer

### The Needs and Entitlements of Children

Children are defined as being young people under the age of 18 years. Children have specific needs and entitlements which are enshrined in international charters and in many cases are enshrined in a country's laws and policies.



# LESSONS 1

## Roles and Responsibilities of a Coach

These can be categorised as Social Needs, Protective Needs, Personal Needs and Sporting Needs. Football activity delivered appropriately by good youth football coaches can provide for the needs and entitlements of children.

### SOCIAL NEEDS

- ☞ to play, leisure, rest
- ☞ to a family life
- ☞ to be a member of a safe, inclusive community

Social needs can be addressed through football by creating and connecting youth to a sporting environment where they can relax and enjoy sport and physical activity, supported by their families and wider community.

### PROTECTIVE NEEDS

- ☞ to be protected from abuse
- ☞ to be protected from exploitation
- ☞ to be kept safe
- ☞ to protect their health

Protective needs can be addressed through football by providing safe environments where youth can participate in football and develop their health & fitness; life skills; confidence; and self esteem.

### PERSONAL NEEDS

- ☞ good nutrition
- ☞ good health
- ☞ a holistic education
- ☞ develop relationships with people of varied backgrounds

Personal needs can be addressed through football by giving youth access to life skills and health education services, positive role models and mentors as well as an opportunity to participate with a cross section of community members.

### SPORTING NEEDS

- ☞ to develop physical literacy
- ☞ to be experience quality sport and play
- ☞ to lifelong participation
- ☞ to realise their talents

Sporting needs can be addressed through football by providing quality sport, physical activity and play environments where participants can develop their health & fitness; confidence; creativity; and skill as well as be sign posted to future participatory and elite pathways.

## Child Protection & Football

Children have an entitlement to be protected from abuse and youth football coaches have a moral duty of care to help protect children.

There are five types of abuse that coaches should be aware of physical, emotional, sexual, neglect, and bullying.

### ☞ Physical Abuse

Where a child is physically hurt or injured by an adult, or where an adult gives a child alcohol or drugs.

### ☞ Emotional Abuse

Persistent criticism, denigration, or putting unreasonable expectations on a child or young person.





## Roles and Responsibilities of a Coach

### ❖ Sexual Abuse

An adult or peer uses a child or young person to meet their own sexual needs.

### ❖ Neglect

A child's basic physical needs are consistently not met or they are regularly left alone or unsupervised.

### ❖ Bullying

Persistent or repeated hostile and intimidating behaviour towards a child or young person.

Youth football coaches need to be able to recognise these five forms of abuse and should undertake child protection training that will help them deal with suspected cases of abuse when they occur.

Youth football coaches should also be aware of their responsibility to be an adult role model, to always demonstrate good practice when working with children and young people, and not to abuse their position of trust.



When the needs of children and young people are not afforded the necessary priority, so as their welfare is compromised, inappropriate and poor practice occurs.

Poor practice may not constitute abuse but may create an environment in which abuse becomes more possible. Examples of poor practice would include:

- ❖ excessive training or training inappropriate for the age or stage of development a young person, possibly leading to injury



- ❖ focusing on the talented members of your group and not fully involving all members of the group equally
- ❖ working with children on a one to one basis without other adults present



# LESSON 2

What is Tuberculosis (TB)?





## LESSON 2

### What is Tuberculosis (TB)?

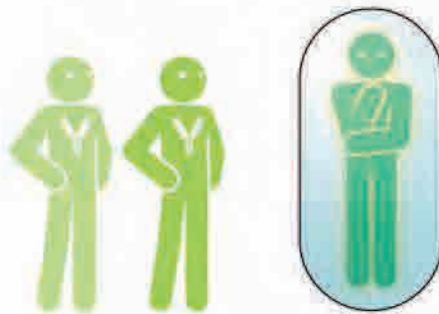
#### What is TB?

TB is a bacterial disease of the lungs. It is caused by the *Mycobacteria tuberculosis* bacterium which is spread from person to person through the air when the infected patient coughs and then enters the lungs.

#### How the infection progresses

##### LATENT TB

In a person with a healthy immune system, the body fights the infection by encapsulating the bacteria into tiny capsules. Although the bacteria remain alive it does not spread to surrounding tissues or to other people. Most persons stay at this stage, which is called latent TB. Due to the mildness of the infection, most people will not even know they have an infection.

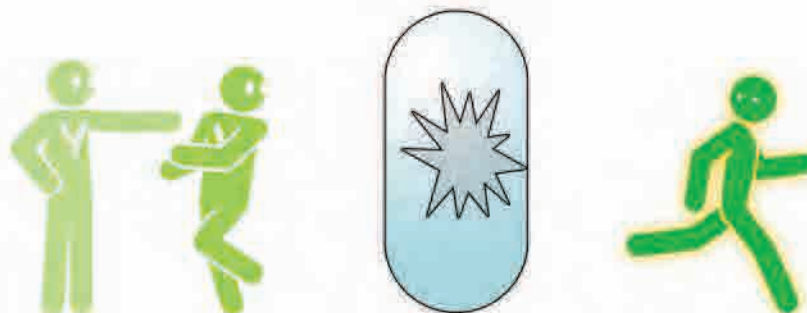


#### How do I find out whether I have latent TB?

A Mantoux skin test can be done. Around 48 hours after the test has been done, a red bump would appear where the needle went into the skin. This reaction is a sign that latent TB is in the body.

##### ACTIVE TB

If the immune system is unable to fight the growing bacteria, the TB becomes active. Latent TB could become active within 2 years after initial infection, or has the possibility of becoming active TB within the life span of the person.

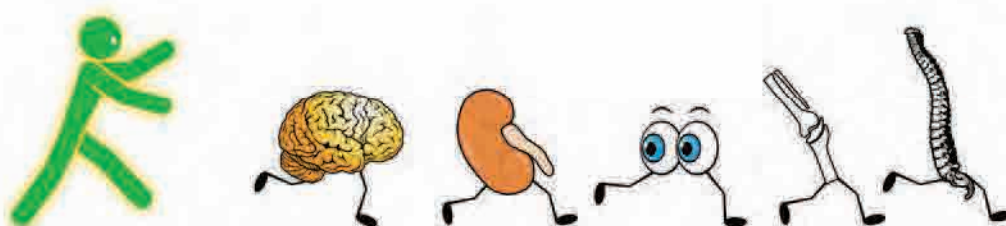


## What is Tuberculosis (TB)?

### Active TB in the lungs

Active TB in the lungs is contagious. Although after the use of specific Anti TB treatment, you can't spread an active TB infection to other people. Anti TB tablets needs to be taken every day for 6 months.

If untreated, the bacteria could travel through the bloodstream to other parts of the body and effect organs such as the brain, kidneys, eyes, joints and even the spine.



### Active TB outside the lungs

Active TB in other parts of the body is not spread easily to other people. Although the same medication is taken, the treatment would depend on which body part the infection is growing on and TB could lead to death, if not treated correctly! Anti TB treatment needs to be taken every day for 9 months if TB is outside the lungs.

### Origins of the disease

Evidence of the disease dates back around 18 000 years ago!



Skeletal remains show prehistoric humans (4 000 BC) had TB and researchers have found TB decay in the spines of Egyptian mummies dating from 3 000 - 2 400 BC.

In very early years, TB was associated with vampires! When a family member died from TB, the other infected family members would slowly become ill. The belief was that the original person that died from TB was draining the life from the other family members!

In 1882 Robert Koch identified and described the bacteria that cause TB, *Mycobacterium tuberculosis*, and in 1905 he received the Nobel Prize in medicine for this discovery.



## LESSON 2

### What is Tuberculosis (TB)?

#### Extent of the disease

It is reported that for every 1 person that is infected with HIV, there are a further 8 more infected with TB. That means that TB is 8 times more of a pandemic globally than HIV with many not even aware that they have been or are infected with the TB disease.



A combination of HIV and TB in the human body has been referred to as the "perfect storm" due to the severe negative effects each disease has on the other, also causing the Immune Reconstitution Inflammatory Syndrome (IRIS) which is basically a condition that when one disease gets treated it appears to make the other one worse before they both start to get better.

#### Impact of the disease on young people

With the higher incidence of HIV amongst our younger groups and the consequent drop in immune system, young people or adolescents are more susceptible for contracting diseases and spreading them. Although they are normally physically stronger and have better immune systems, a young person can deal with TB a lot easier and then continue to live a normal life.

Unfortunately there is a stigma surrounding TB and young people who are infected may feel shunned by society and seen as dirty or infectious to extreme reasons.



This can severely impact their social development and self-esteem. For this reason, immediate education and assistance from mature adults in their life is very important.





## What is Tuberculosis (TB)?

### Relationship between HIV and TB

HIV weakens the body's immune system and therefore HIV positive persons are more susceptible to TB.

If the Mantoux TB skin test is done, HIV could cause the test to show negative although the person actually has TB, latent or active due to the body's immune system not working effectively.

A HIV positive person may have to take TB medicine for a longer time than a HIV negative person. TB can be treated and cured in HIV positive persons if medication is taken correctly!



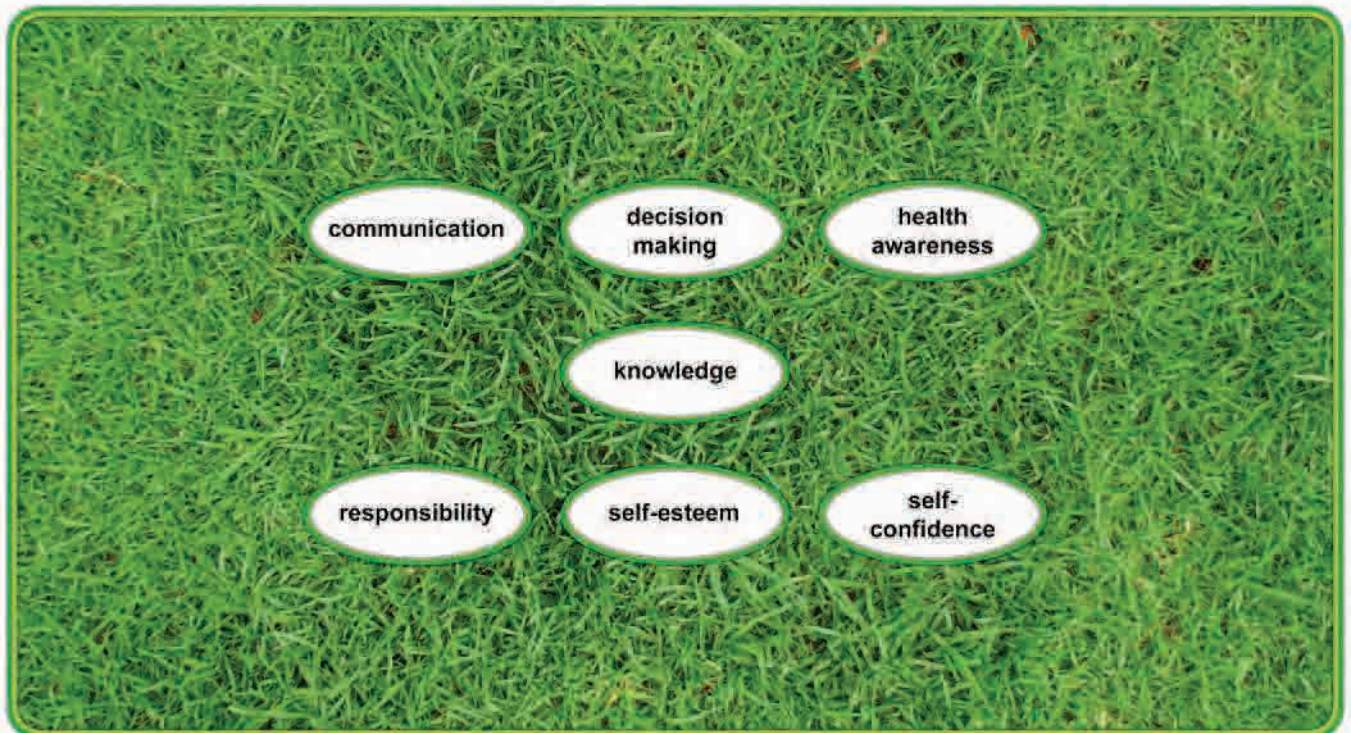
The South African Government has committed to an integrated effort in addressing HIV and AIDS and TB mostly through the Counselling and Testing (HCT) Campaign.

## LESSON 2

### What is Tuberculosis (TB)?

#### Using Football Exercises regarding the Topic

The Life Skill listed below will be focused on in this lesson.  
It is incorporated in the Football Exercises on the following page.



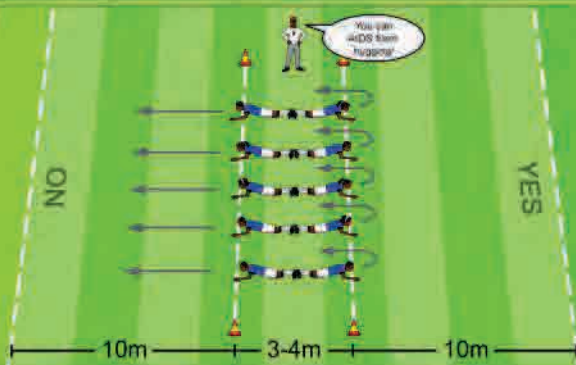
#### Types of Equipment useful for these Exercises





## What is Tuberculosis (TB)?

## EXERCISE 1



This exercise encourages the players to think fast and then react. It also develops their reflexes.

## "Yes or No?"

- Two groups of players line up opposite each other, 3-4m apart and 10m away from the 'answer' lines.
- The players lie on their backs or their stomachs; arms stretched out in front of them and their feet touching those of their 'opponent'.
- The coach asks a question. If the answer is 'No', all the players run as quickly as possible toward the left line.

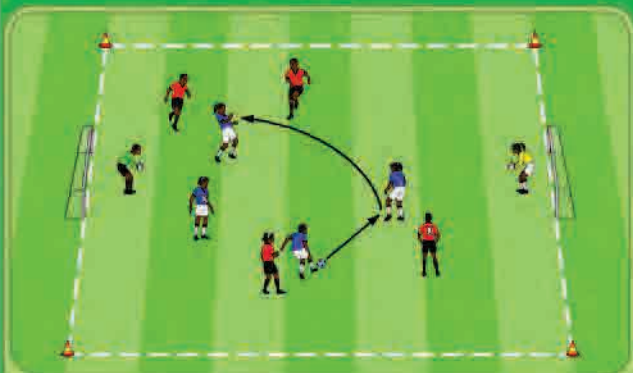
- The players in the back, the ones furthest away from the correct 'answer' line have to try and catch the players in front of them before they reach the line.
- If the answer is 'Yes', then the roles are reversed.

## Variations

- Do the exercise while dribbling a ball with the feet.
- Do the exercise while dribbling a ball with the hands.

Include in training session: WARM UP MAIN PART CONCLUSION COOLING DOWN

## EXERCISE 2



Every player, good or bad - infected or not, is part of the team and should therefore be supported by the team!



## Outsider Game

- Two teams play against each other.
- Both teams have an outsider who will not be included in the course of the game. They are believed to have TB and the team does not want to include them. The ball will not be passed to them.
- The coach only intervenes should the excluded player become aggressive and try to force his/her team to pass the ball to him/her.
- Afterwards, the outsider tells the other players

what kind of feeling not getting the ball and being an outsider is.

## Variations

- The team includes the TB player in the game. However, they do not include him/her in any goal celebrations as they are too afraid to touch him/her.
- Only 2 ball contacts.
- Only direct passing.

Include in training session: WARM UP MAIN PART CONCLUSION COOLING DOWN





# LESSON 3

Transmission and Prevention



## LESSON 3

## Transmission and Prevention

**How is TB transmitted**

Tuberculosis is transmitted through the air. It is an air-borne bacterium that is spread from person to person through coughing and sputum.

Although there are claims, it is very unlikely for TB to pass by sharing of food, cups, keys etc. However, it is suggested that TB infected individuals wash their hands thoroughly after coughing into them or before handling food.



Adults are more infectious than children and therefore infect other persons more easily. Young children, in particular those younger than 4 years are very susceptible to contracting the disease.

All people should cover their mouths when coughing to prevent germs spreading.

Spitting could also spread all kinds of germs, including the TB germ.

**Myths about how TB is transmitted**

You can't get TB from



Kissing



Sharing a drinking glass



Sharing cutlery or dishes



Handshake



Toilet



Intercourse with a condom



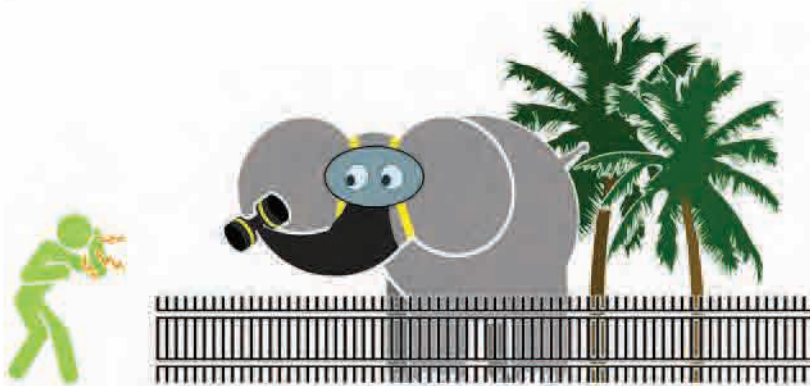


## Transmission and Prevention

**TB prevention**

It is recommended that those who are infected with TB sleep in an isolated room and that they are completely isolated from exposure to children under the age of 4 years.

Individuals infected with TB and are coughing frequently should wear a surgical mask in public areas or around other people. Persons who are not infected but come into contact with TB individuals can also wear a surgical mask or an air purifying respirator.



Do not stand too close to other people in case of coughing and spreading the infection.

Do not allow an infected person to be in a confined space, but always allow the room to have good ventilation so that the concentration of bacteria in the air is reduced.

In hospitals or offices, there are Ultra-Violet Germicidal Irradiation (UVGI) and High Efficiency Particulate Air Filter (HEPA) systems available to reduce the bacteria in the air.

The use of TB medication that lowers the signs and symptoms as well as the bacterial count of the disease in the body is relatively rapid. Most medications show improvements in about 2 weeks. It is recommended that medication is administered by a medical professional.

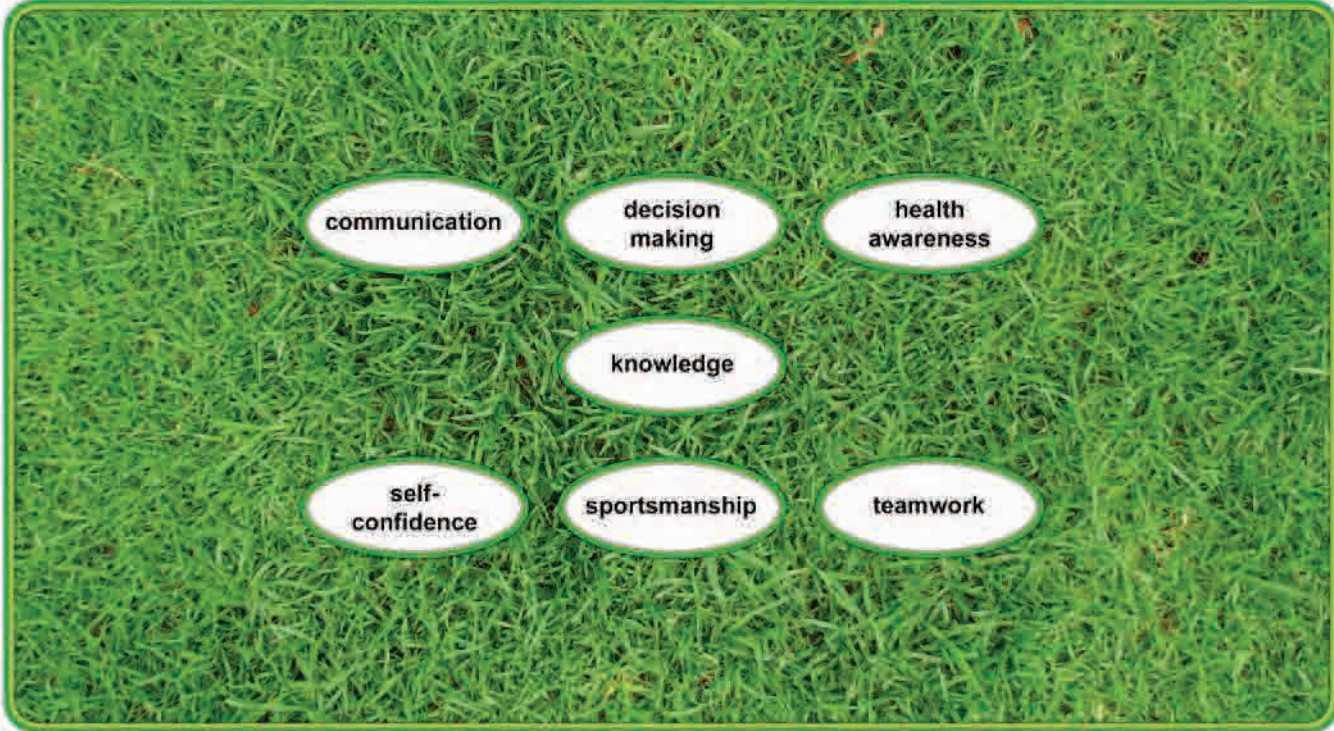


# LESSON 3

## Transmission and Prevention

### Using Football Exercises regarding the Topic

The Life Skill listed below will be focused on in this lesson. It is incorporated in the Football Exercises on the following page.



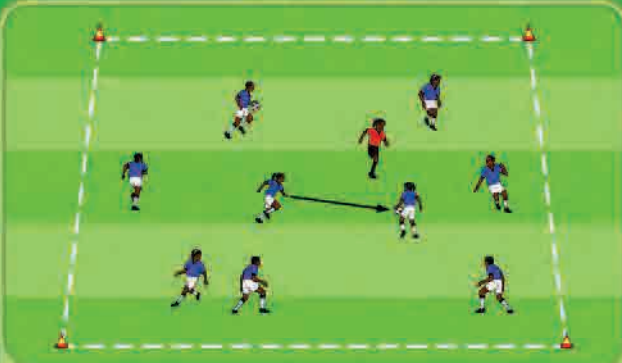
### Types of Equipment useful for these Exercises





## Transmission and Prevention

## EXERCISE 3



It is important for the players to realize that when you are sick your loved ones around you are also at risk of becoming sick.

They have to work together to prevent the virus from spreading!

**Take care of yourself and your team-mate**

- ❖ Mark off a pitch with cones.
- ❖ The players form two teams, one team consists of 1 catcher, he/she represents TB. The other team, family / friends / team-mates, consists of 9 players.
- ❖ The family / friends / team-mates team has two balls. These balls protect them from the catchers.
- ❖ Whoever holds a ball in his / her hand cannot be caught! The ball should be passed around amongst the team to protect one another from the

catcher.

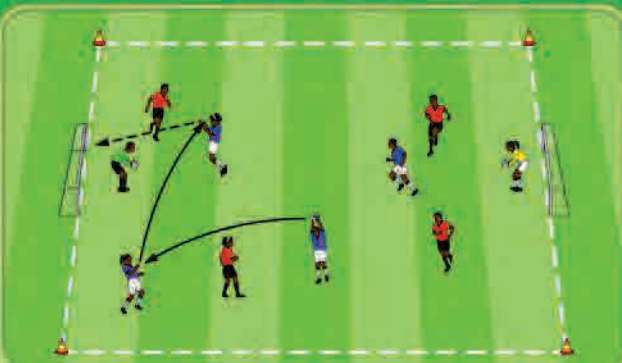
- ❖ Once the catchers have caught a player without a ball he/she joins the catcher's team.
- ❖ The catchers share the ball - strategy is now in play!
- ❖ The game ends when only two players are left.

**Variations**

- ❖ The coach decides how many players are in each group (Always the same amount balls as catchers).
- ❖ Play game with the ball on the ground (Passing by foot).

Include in training session: **WARM UP** MAIN PART CONCLUSION COOLING DOWN

## EXERCISE 4



Consider players who are not very confident by allowing them to serve the ball for the header themselves.

**"Airborne Threat"**

- ❖ 2 teams play with 2 big goals on a small pitch.
- ❖ Players have to keep the airborne TB bacterium in the air until they can discard it safely in the goals.
- ❖ Players pass the ball with their hands.
- ❖ Goals only with a header.
- ❖ Should the ball touch the ground, the team responsible for the drop will have one member 'infected with TB'.
- ❖ He/she will have to 'receive medicine' and so sit out the next round.

**Variations**

- ❖ Goals can be scored as a volley: foot / knee / etc.
- ❖ Every second pass has to be done as a header.
- ❖ Dropped balls result in a point for the opposing team.

Include in training session: WARM UP MAIN PART **CONCLUSION** COOLING DOWN





# LESSON 4

Signs, Symptoms and Social Drivers of TB



## Signs, Symptoms and Social Drivers of TB

### Who is at risk?

Any person can be infected by the disease, although the following have a greater risk in contracting the disease:

- ⊗ People with HIV or AIDS
- ⊗ People with a weak immune system due to other diseases
- ⊗ People living with someone who has active TB
- ⊗ Poor people living in inadequate conditions
- ⊗ Infants and very young kids
- ⊗ Elderly people with failing health
- ⊗ Residents in nursing homes
- ⊗ People in or working in prisons
- ⊗ Extreme drug users
- ⊗ Smokers



### Recognise the signs and symptoms

- ⊗ A cough that lasts more than 3 weeks
- ⊗ A pain in the chest when in- or exhaling
- ⊗ Coughing up blood
- ⊗ Lack of energy
- ⊗ Extreme tiredness
- ⊗ Weight loss
- ⊗ Lack or poor appetite
- ⊗ Fever and chills
- ⊗ Sweating at night



### Testing

The Mantoux skin test is used where a small amount of fluid is injected into the forearm just under the skin. After 48 – 72 hours a health professional should check for the reaction, which is a red swelling which indicates the presence of the bacteria.



## Signs, Symptoms and Social Drivers of TB

### Social drivers of TB

#### Social behaviour - HIV infection



HIV drops the immune system so it increases the risk of TB infection because the body will not be able to fight off the bacteria should they be exposed.

#### Smoking



Although smoking does not cause TB or can be a catalyst for the spread of the bacteria, smoking does lower the natural immunity of the lungs due to the toxicity of cigarettes. Smoking is also a gate-way to the use of other drugs which increases the risk for HIV infection.

#### Alcohol / drug abuse



Alcohol and drug abuse will have the same indicators for TB infection as smoking.

#### Malnutrition



Lack of a proper diet and consequently a drop in overall health status also drops the immune system dramatically. This exposes someone to the risk of TB infection and also inhibits their ability to fight it off and stay healthy even after medication

#### Prisons



Unfortunately prisons are confined in space and it is normally a large limitation to really isolate infected persons. Therefore when one inmate has TB it can very easily spread to other inmates

#### Crowding / poverty



These are socio-economic factors that increase the prevalence of most diseases due to lack of medical care or education, inability to isolate or exclude someone from others who are infected and so forth.

## Signs, Symptoms and Social Drivers of TB

### Religious & cultural practice

In many cultures a stigma is attached to TB which leads to a lengthy delay in seeking professional help.

In extreme cases a TB patient may be identified as a witch! It is believed that due to the power of a witch being passed down the family line, all members of the family are labelled.



In a very illiterate community in Mexico, patients that were taken up in hospital for a lengthy time, were rejected by their families when they returned home.

### Strategies for addressing social drivers of TB

#### Sex education



As it is easier to contract the TB disease when you are HIV positive, it is important for every child to fully understand the risks of reckless sexual behaviour. The importance of abstinence should be constantly reinstated by reminding children of the role of sexual behaviour and how it will impact them in life. The responsible use of condoms and birth control is also an important educational aspect.

- ☞ Teach the youths about the negative factors about early sexual activity
- ☞ The responsibility of early parenthood
- ☞ Health risks
- ☞ Promote leadership skills as to make correct choices
- ☞ Through football and life skills, build true values and confidence for the girls to stand up for their rights



## Signs, Symptoms and Social Drivers of TB

### Drug education

Use of drugs has been associated with reckless sexual behaviour, unhygienic choices when using drugs and many other social factors that severely impact health and the increased risk for debilitating bacterial and viral infections.



- ❖ Make sure the youths have a clear understanding of the influence of drugs in their life
- ❖ Use examples in their community to show the negative consequences

### Smoking and alcohol abuse

Smoking and being in smoky places could increase the chances of getting the TB disease. Family and friends should be informed of the negative aspects of smoking and be encouraged to stop smoking. Alcohol is mostly the root to reckless sexual behaviour and many other evil wrongdoings in the community.



- ❖ Create opportunities for the youths to play football
- ❖ Talks regarding life skills around smoking and alcohol should be handled very carefully so that they keep on playing
- ❖ Address any form of violence with both gender groups
- ❖ Create a safe environment for the youths to discuss any confidential matter



## Signs, Symptoms and Social Drivers of TB

### Football and total fitness

Exercise is a way of keeping healthy, making sure the immune system is able to fight any germs or bacteria that enters the body.

- ☞ Create opportunities for girls to play football.
- ☞ Encourage equal participation for both girls and boys



- ☞ Through life skills, encourage total fitness: body, mind & soul
- ☞ Encourage a daily form of activity
- ☞ Teach the youths about healthy eating habits and the benefits thereof

### Longevity

It is the dream of every child to one day be successful, earn money and have a good job. Irresponsible and risky behaviour through drug use and sexual activity may damper that drastically and shorten their lifespan, reduce their ability to maintain a successful career and increase their risks to get sick and not be able to engage in sport.

- ☞ Be active – make sure you have a regular exercise programme
- ☞ Always learn – formal or informal – even from your mistakes!
- ☞ Strive to be a role model – draw up your own code of values
- ☞ BE POSITIVE



## Signs, Symptoms and Social Drivers of TB

## Political climate



Unless political leaders take a very strong stance in the fight against a disease through relevant education and interventions, the crisis normally never gets resolved. On the flip side, always having a "soft place to fall" for HIV victims will increase the incidence for persons to want to be infected. Ultimately education programmes that are relevant to cultures and traditions are vital and needs to be implemented aggressively. Poor environments should have access to birth control and condoms.

## Economic climate



Unfortunately in areas or countries where jobs are scarce, money is short and there are mouths to feed, many families resort to the business of prostitution. Homosexuality and tourism also attracts larger prevalence's for prostitution and promiscuous behaviour. Prostitution is also highly related to drug abuse which further accelerates the incidences for HIV contraction



Signs, Symptoms and Social Drivers of TB

Using Football Exercises regarding the Topic

The Life Skill listed below will be focused on in this lesson. It is incorporated in the Football Exercises on the following page.



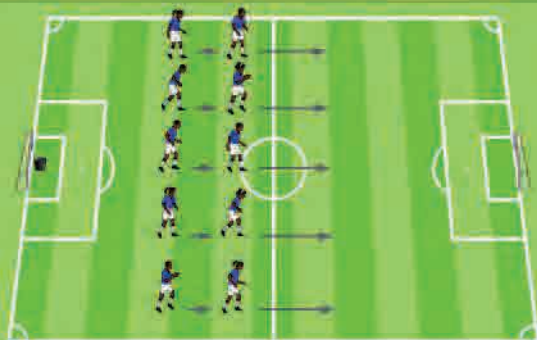
Types of Equipment useful for these Exercises





## Signs, Symptoms and Social Drivers of TB

## EXERCISE 5



On a clean pitch (as with 'clean' body) you can play (live) more successfully!



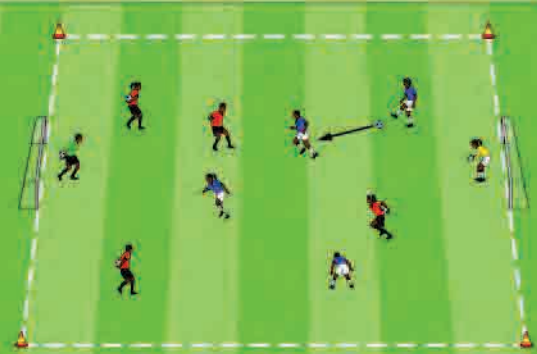
## Cleaning up the Pitch

- ☞ The players clean up the pitch during warm up. The litter represents any type of substance that corrupts the body (the pitch).
- ☞ They walk in two rows, one after the other, over the pitch.
- ☞ If somebody from the first row finds rubbish, he / she gives it to the person behind him / her.
- ☞ This person has to run to the goal, where a rubbish bin has been placed and has to put the rubbish in it.

- ☞ After that he / she runs in front of the person who gave him / her the rubbish and they continue.
- ☞ Play ±5-10 minutes or until the pitch is (nearly) clean.

Include in training session: **WARM UP** MAIN PART CONCLUSION COOLING DOWN

## EXERCISE 6



A handicap reduces your efficiency / power in sports / football.

You will be stronger, more powerful and faster without a "handicap".



## Handicap Football

- ☞ Two teams play against each other.
- ☞ One team has the handicap that every player of the team has to carry a ball behind their back. Normally they will not have a chance to win the game, due to their handicap.
- ☞ After 5 minutes of play, the coach interrupts the game and talks with the players about their handicap.

This handicap could be:

- ☞ smoking
- ☞ drinking alcohol
- ☞ taking drugs
- ☞ etc.

Include in training session: **WARM UP** MAIN PART CONCLUSION COOLING DOWN



# LESSON 5

Treatment, Care and Support for Infected or Affected People







Treatment, Care and Support for Infected or Affected People

What are the short comings in the prevention and treatment of TB



Poverty



Lack of education



Poor motivation



Superstition



Failure to comply to the recommendation of treatment



Delay in seeking professional attention

Most children with TB can be treated at home or as outpatients. The treatment is mostly in the form of oral medication. Rarely 3 or 4 drugs may be prescribed. It is of vital importance that the full course of medication is taken, even if it requires 6 or 9 months to complete.

TB is a chronic disease that can persist for years if it is not treated.

When to call the doctor

Call the doctor if the child

- ☞ has been in contact with a person who has TB
- ☞ has on going fever
- ☞ complains about sweating at night
- ☞ develops a cough that does not respond to standard cough medicine

When is hospitalization recommended

- ☞ An infant with active TB
- ☞ There are severe drug reactions from TB medication
- ☞ There are other diseases along with TB



## Treatment, Care and Support for Infected or Affected People

### Nutrition

Although medication fights TB, proper nutrition and herbs could assist in the fight.

Fruits like cherries and blueberries have antioxidants that can relieve the symptoms. Herbs such as green tea and aged garlic also have antioxidants that help to strengthen the immune system.

#### Nutrition for a TB patient



**Grains and starches (whole wheat bread, brown rice, corn, whole wheat cereal)**

These would assist to regain weight loss



**Fruit and vegetables (sweet and normal potatoes, carrots, spinach, beans)**

They contain vitamin A & C which is important to the immune system



**Meat and meat substitutes (beef, poultry, fish, eggs, nuts, peanut butter)**

They rebuild the protein stores and help fight infection



**Dairy foods**

They provide protein and sources of vitamin D as well as calcium



**Nutritional supplements**

TB can affect your appetite, making it harder for you to eat enough to maintain a healthy weight. In some cases, nutritional supplementation may be necessary. Nutritional supplements provide your body with a concentrated source of calories, protein, vitamins and minerals.





# LESSON 6

Working with People living with TB





## Working with People living with TB

### TB and Exercise

Upper respiratory infections are commonly reported in athletes due to an immune-suppression after training sessions.

TB is an infection of the lower respiratory system and if further aggravated by an upper respiratory infection, individuals may experience severe difficulty in breathing and further diminish their overall health.



It is recommended that coaches and athletes take responsibility for their own health and so not to infect other individuals by wearing protective masks. Infected individuals must also be consistent and disciplined in taking their medication to improve their health and drop the incidence of disease.



It is also advisable to have exercise sessions outdoors where there is ample ventilation. Exercise sessions that are performed indoors such as a gymnasium poses a greater health threat to other individuals because of the lack of ventilation.

Individuals infected with TB have difficulty breathing, cough frequently and in general have a drop in their immune system. With this in mind, training is a difficult component in their daily lives to uphold. However, some individuals may be athletes and contract the disease and they need to be managed correctly.

Below are general guidelines of how to adopt training to the incidence of TB infection:

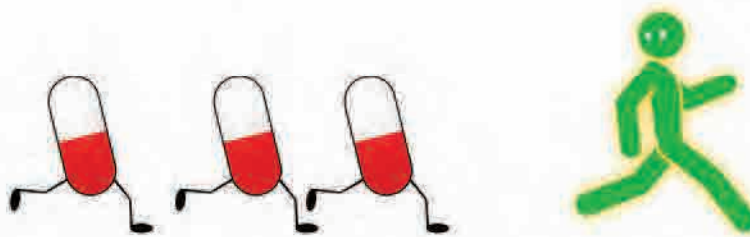
- Once diagnosed or showing the severe signs and symptoms, training must stop until medical attention has been sought and the individual has been placed on medication





## Working with People living with TB

- ❖ It is important to advise the athlete that he/she cannot join in training sessions with the squad so prevent the infection from spreading.
- ❖ After approximately 2 weeks on medication the signs and symptoms will start to diminish which will be evident with a reduction in coughing and overall ease of breathing. At this point, the athlete can be introduced to light volumes of cardiovascular training.



- ▲ 3-4 sessions per week of 20-60 minutes per session depending on the athletes' previous conditioning state. Intensity should be kept below 75% of maximum heart rate
- ❖ Training should be scheduled for a time of day where there is little traffic or lower levels of air pollution. For example, don't do training sessions during peak traffic times. Also locate an outdoor environment that has low environmental pollution.



- ❖ High intensity training such as intervals, time trials, speed work as well as strength training in the gymnasium must be avoided for at least 6-8 weeks or until the athlete is demonstrating a significant improvement in health from the light cardiovascular training.
- ❖ Once an athlete is evidently considered "healthy", they still need to be kept under strict observation with minimal high intensity training per week. High intensity training or high volumes of training increase the incidence of respiratory infections which is not conducive for an individual with latent TB.
- ▲ It is recommended that high intensity training or strength work does not exceed 5-10% of their overall training volume per week.

## Working with People living with TB

- △ Training should be kept light (below 75% maximum heart rate) and of a cardiovascular nature and should not exceed 8 hours of training per week.
- ⊕ Individuals who are both HIV positive and have been infected with TB will have a long recovery period provided they are on medication for both diseases. The treatment of both diseases may cause an IRIS effect as discussed before. Therefore, these individuals should not be allowed to train for at least 8 weeks from time of diagnosis and start of medication. Only once the athlete has been given the go-ahead from a medical practitioner that both diseases are under control and that he/ she is responding positively to the medication for both diseases, can the athlete begin training starting from guideline points 3-6.

If training is not planned and strictly controlled, it can become a negative stress and further aggravate the incidence of the TB disease.

### Responsibility of the coach

It is the responsibility of the coach to focus on their athletes and be aware of any sudden or gradual changes in behaviour or health, whether positive or negative.

Players that provide confidential information to the coach such as their HIV status and TB diagnosis should be kept under strict confidentiality of the coach and managed correctly when an emergency arises.

The coach should always educate the athlete on their disease or diagnosis and provide relevant information on how to not spread the disease or place fellow athletes and staff at risk.

Coaches should educate players to always wash their hands before and after training and especially before eating. Players must also learn to not cough over food or near other persons but to always close their mouth with the hand and turn completely away from surrounding persons or food. After severe coughing, that player must be informed to wash their hands again.

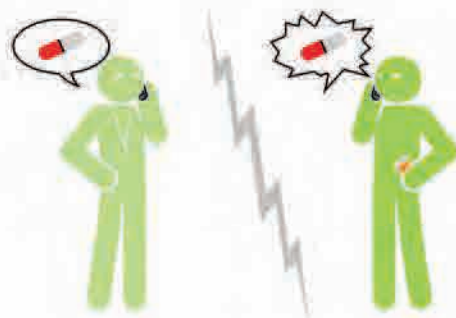


Players that are experiencing uncontrollable coughing or any of the signs of a TB infection should be informed in private that they must immediately seek medical assistance and cannot return to training for 2 weeks once they start taking their medication. That will allow the medication enough time to reduce the coughing and symptoms.



## Working with People living with TB

The coach must check up on the athlete that is sick to make sure they are taking their medication. That way the coach can also encourage the player to continue focusing on improving their health so that they can return to soccer practice.



The risks and responsibilities associated with TB infections should be addressed in coaching and management meetings so that everyone is knowledgeable and on the same page.

Parents who sign their kids into a sporting team or activity should also be briefed on TB infections and how the club or team will deal with situations where an athlete is infected with the disease. That will prevent players from feeling like they are being "kicked out" or no longer welcome in the team.

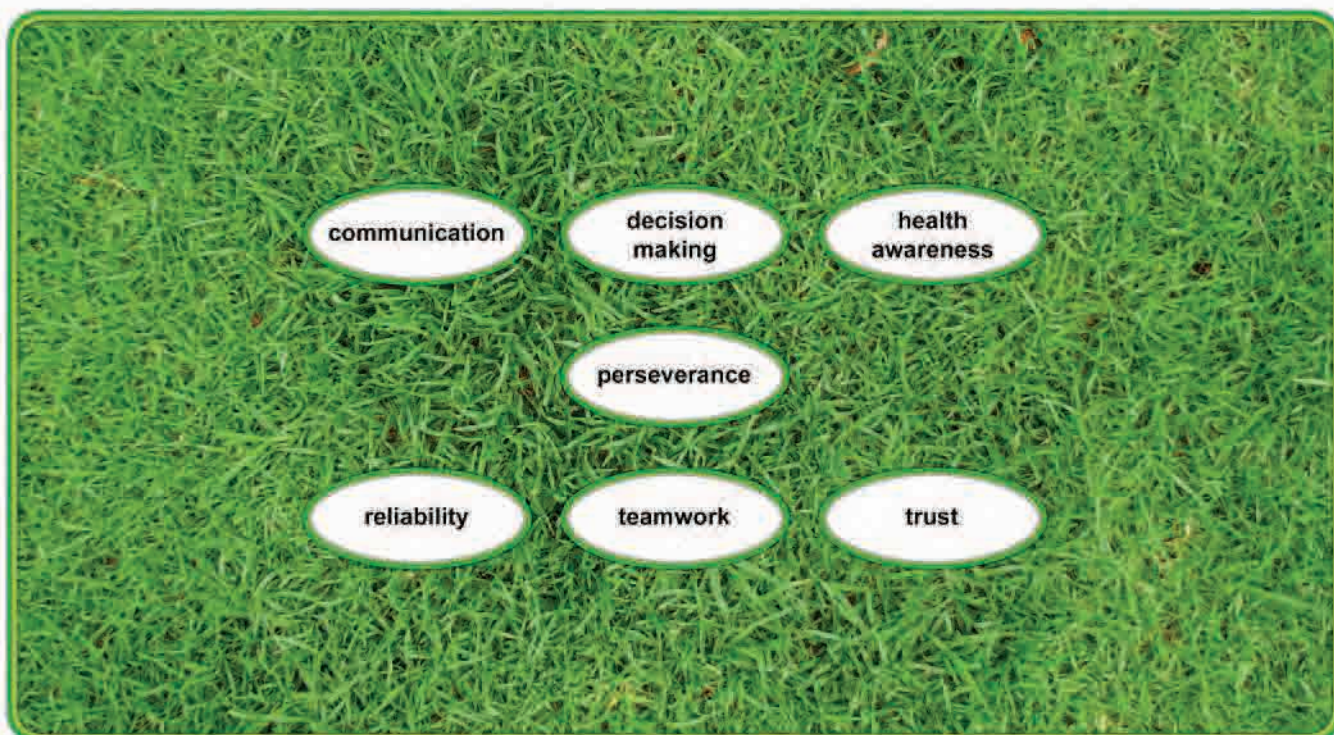
It must be reinstated that your health is very important and that it is always appropriate to take some time off to ensure your health is always good so that you are guaranteed to play sport for the rest of your life.



Working with People living with TB

Using Football Exercises regarding the Topic

The Life Skill listed below will be focused on in this lesson. It is incorporated in the Football Exercises on the following page.



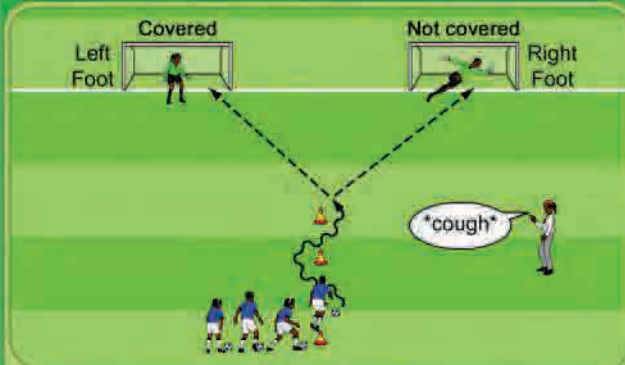
Types of Equipment useful for these Exercises





## Working with People living with TB

## EXERCISE 7



This exercise teaches the player, even when focused on a task, to be aware of his/her surroundings. A skill important in both football and everyday life.

**Shooting competition**

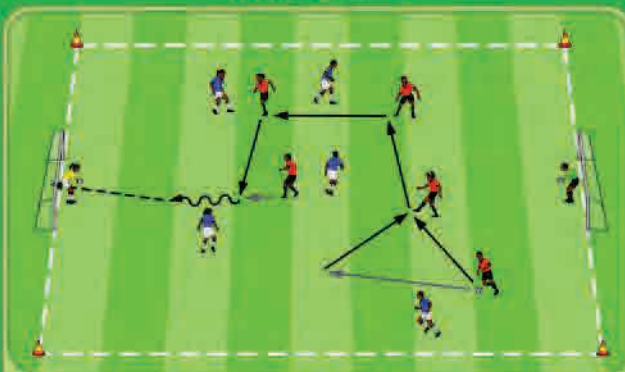
- ☛ The player starts to dribble into the slalom-course, when the coach gives a short cough. Either covering, or not covering, his/her mouth.
- ☛ Depending on the coach covering his/her mouth or not covering his/her mouth, the player has to shoot on the left or right goal (refer to diagram) using the optimal foot. (left goal - left foot, right goal - right foot).

**Progression**

- ☛ Start with a shorter distance to the goal for beginners and increase it as they get used to it.
- ☛ Create a single competition: a right decision one point + goal another point → how many times in the end of the game?

Include in training session: WARM UP MAIN PART CONCLUSION COOLING DOWN

## EXERCISE 8



A team works best together. To be an effective team, it is vital to look past 'short comings' and focus on the strengths of the members!

**"Stronger together"**

- ☛ The coach divides the players into two teams.
- ☛ The players must pass the ball five times in order to be allowed to shoot at the goal.
- ☛ Once a goal is scored, the other team loses one team member.

Include in training session: WARM UP MAIN PART CONCLUSION COOLING DOWN



# LESSON 7

XXX

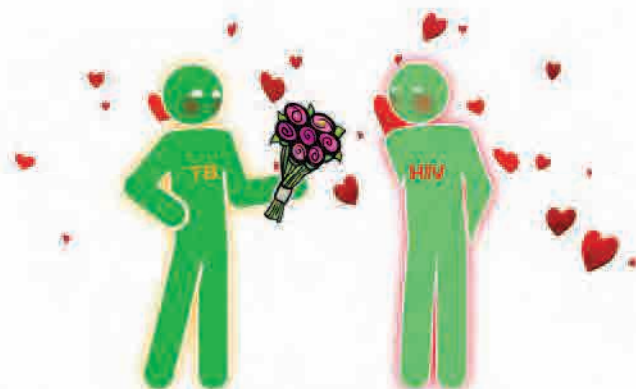




## Conclusion, Reflection and Action Planning

### Conclusion

Tuberculosis, commonly known as TB, has been known to mankind since ancient times. Even today after the development of advanced screening, diagnostic and treatment methods for the disease, a third of the world's population has been exposed and is infected with the organism. The numbers are over 90% in the developing world.

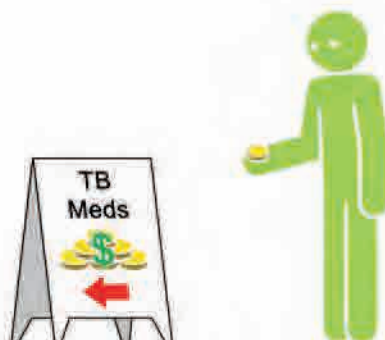


With advent of HIV infection there is a dramatic resurgence of TB with more than 8 million new cases each year worldwide and more than 2 million persons dying from it. In the nineteenth century, TB was known as "the captain of all men of death". It is still true to a large extent today.

### Tuberculosis in Ancient Times

The organism causing TB existed 15,000 to 20,000 years ago. It has been found in relics from ancient Egypt, India, and China. Among Egyptian mummies spinal tuberculosis, known as Pott's disease has been detected by archaeologists.

TB is one of the most deadly diseases that face vulnerable groups around the world. Until the 1940's it was the leading cause of death in the United States. Currently TB rates have increased due to the presence of the Human Immunodeficiency Virus (HIV). Around the world 1,7 million people die of TB mainly because they can't get the medication to make them better!



Coaches can contribute towards the awareness and prevention of TB by incorporating policy, messages and education within their club's / team's and football programmes. If we can raise the awareness, dangers and prevention of TB within our all-round football activities, we could contribute by producing a healthy and immune strong nation.





## Conclusion, Reflection and Action Planning

### Reflection

Having had the time to read this manual and participate in a TB workshop, we would encourage you to take the time to reflect on what you can do to make a positive difference to the devastating effect of TB.

- ➔ Reflect on how you can use the knowledge you have gained to become an advocate to protect the community from TB.



- ⌚ How can you lead by example?
  - ⌚ What are you going to do differently that will help mitigate the problem of TB?
- ➔ Reflect on how you will integrate TB awareness and prevention into your football programme?



- ⌚ What things will you do to educate youth on the dangers of TB?
- ➔ Reflect on how you can work in your community to promote actions against TB?



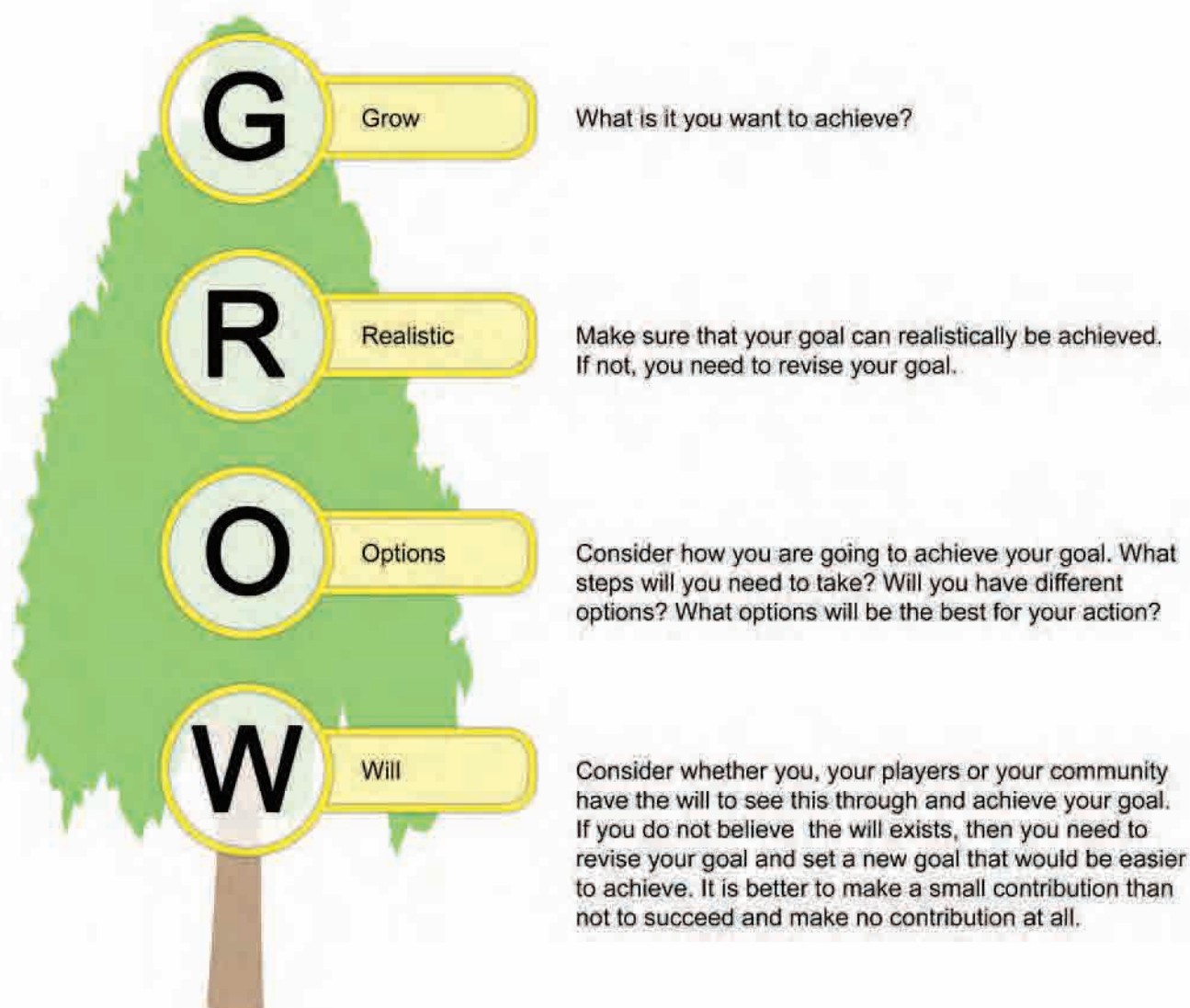
- ⌚ What other organizations exist in your community that are working on TB matters?
- ⌚ Is TB on the agenda of your local community councils?
- ⌚ What can you do as a football coach or football club to support the community's efforts to encourage TB awareness and prevention?

## Conclusion, Reflection and Action Planning

### Action Planning

Having taken the opportunity to reflect on what you can do individually, with the football team/club, and with your community, to address challenges of TB, it is now time for you to plan to take action.

Set some short term and long term goals and write these down. What are the things that you can start to do immediately? These can be your short term goals. What can you achieve in the long term given some time to plan actions? These can be your long term goals. When setting goals you can use the GROW model.



When you are action planning, why not set some goals for yourself, some goals for the club/team and some community based goals. Share your personal goals with your friends and family – they will help you achieve them. Involve the youth in your team / club in setting goals for them to achieve. Consult other TB actions in your community and see how you can collaborate to achieve goals for community activation.





## Conclusion, Reflection and Action Planning

### Action Planner

YDF coaches can use a simple action planner such as the one shown here to set short and long term goals by implementing the GROW model:

GOAL	REALISTIC	OPTIONS	WILL
<u>Short term</u>			
Identify doubtful symptoms	Yes	Visit a doctor	Players must have the will to identify TB symptoms
All players to cough correctly during speaking to each other, at team talks, warming-up sessions, at home with the family or friends	Yes	Each player to apply correct method of coughing	Players to develop the will to cough correctly during all occasions
Practical football exercise Playing a game where pressure and quick decisions taken	Yes	Playing a game taking decisions under pressure (Lion and buck)	Players to have the will to play a game during which decisions are made under pressure
<u>Long term</u>			
Collaborate with other actions in the community addressing TB	Yes	Identifying other actions in the community through medical department  Article in press	Players / team / club to develop a will to identify other TB actions in the community and taking initiatives



# WORK SHEETS





## WORK SHEETS

## Exercise 1

## "Yes or No?" Questions

- |           |   |            |           |
|-----------|---|------------|-----------|
| <b>1</b>  | <b>TB is a disease of the heart?</b><br>TB is a disease of the respiratory system.  | <b>YES</b> | <b>NO</b> |
| <b>2</b>  | <b>TB can be cured.</b>   | <b>YES</b> | <b>NO</b> |
| <b>3</b>  | <b>When coughing I should put my HAND in front of my mouth.</b><br>You should cough into your elbow - hands spread germs.                                       | <b>YES</b> | <b>NO</b> |
| <b>4</b>  | <b>It is very likely for TB to be passed by sharing of food, cups, keys etc.</b><br>It is passed on when a person with TB coughs, sneezes, speaks, or sings.    | <b>YES</b> | <b>NO</b> |
| <b>5</b>  | <b>Many people with latent TB infection never develop TB disease.</b>   | <b>YES</b> | <b>NO</b> |
| <b>6</b>  | <b>A person coughing badly for longer than 3 weeks should be tested for TB.</b>   | <b>YES</b> | <b>NO</b> |
| <b>7</b>  | <b>A skin test can be done to find out if a person has latent TB.</b>   | <b>YES</b> | <b>NO</b> |
| <b>8</b>  | <b>Active TB in the lungs is not contagious.</b><br>It is contagious.   | <b>YES</b> | <b>NO</b> |
| <b>9</b>  | <b>Persons with a weak immune system are not at risk in getting TB.</b><br>Unfortunately they are most at risk.   | <b>YES</b> | <b>NO</b> |
| <b>10</b> | <b>The TB disease only started when the HI Virus was identified.</b><br>The origin of TB can be traced back to over 15 000 years ago - long before HIV arrived. | <b>YES</b> | <b>NO</b> |





Two horizontal green bars for writing notes.

Main body of the page with horizontal lines for writing notes.



## **Lesedi la Batho**

Loftus Versveld Stadium,  
Kirkness Street,  
South Gate,  
Gate 5, First Floor,  
Office 11,  
Pretoria

P.O. Box 2011,  
Newlands,  
0049

Telephone: +27 (0) 12 343 8060  
Fax: +27 (0) 86 655 9233  
Webpage: [lesedilabatho.co.za](http://lesedilabatho.co.za)  
E-mail: [info@lesedilabatho.co.za](mailto:info@lesedilabatho.co.za)



Youth Development through Football (YDF) is a project dedicated to educate disadvantaged youths in ten African countries.

It is implemented by the 'Deutsche Gesellschaft für Internationale Zusammenarbeit' (GIZ) in partnership with the Department of Sport and Recreation South Africa (SRSA).

The project is part of the South African - German development cooperation. It is funded by the German Government and co-funded by the European Union.

