

# HOW TO RUN A "Sport for Health" WORKSHOP

A Capacity Development Guideline





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## Introduction

The CD workshop "Sport for Health" is part of the  $\rightarrow$  S4D Learning Lab which you find on the  $\rightarrow$  Sport for Development (S4D) Resource Toolkit website.

You want to run a workshop on "Sport for Health"?

You want your participants to...

- ... learn more about linking development topics to sports?
- ... benefit from S4D projects and trainings offered in other countries?

This guideline will support you. It consists of the workshop structure, the overall contents, and the learning outcomes necessary to successfully facilitate a "Sport for Health" workshop in institutional settings. Additionally, you can use parts of this document (e. g. manuals, factsheets) as a reference for thematically appropriate wording, for inspirational purposes with practical activities or workshop development, and as layout examples for communicating information.

Please note that all contents were developed in a working context of GIZ. Feel free to **adapt and modify contents and scope** according to your needs, e.g. regarding wordings, country examples.

#### Target groups

Institutions and organisations interested in using sport-specific approaches and methods for health objectives, S4D instructors and S4D coaches.<sup>1</sup>

### General learning objectives of the workshop

By the end of the workshop, participants will be able to...

- ... describe why and how sport can be used as a tool for different health targets (SDG3),
- ... find information about "Sport for Health",
- ... use the "Sport for Health"-approach and related materials in their own working contexts.

#### The structure of the workshop

The workshop consists of the following three modules:

- Module 1: Introduction and Identification of Needs
- Module 2: Examples of Sport for Health Interventions, Learning Material and the Topic of Mental Health
   Module 3: S4D Mechanisms and Activities



**1** For definitions of S4D Instructors and Coaches, see the  $\rightarrow$  *GLOSSARY*.

Glossary



## The structure of the modules

#### Each module has

- specific learning objectives and
- the following components:





INPUTS theoretical inputs including the most relevant information and related links

**INTERACTIONS** interactive tasks to engage the participants



**\***=

knowledge gain regarding the inputs

participants'



HOMEWORK a preparation task for the upcoming module

#### Duration

When implemented as online format, each module has a duration of three hours. Delivered in presence, modules can be adapted length- and content-wise.

#### Helpful tools

On our website you will find more helpful  $\rightarrow$  tools regarding the design, the implementation and evaluation of a "Sport for Health" workshop, including guidelines, templates (e.g. agendas, certificates, reporting templates) and manuals. The following tools contain essential information in terms of designing and implementing workshops:

 $\rightarrow$  Guideline "Ensuring Quality Education in S4D" (available in 8 languages) → Manual/Guideline S4DA "Coaches and Instructors" → Guideline "Adult Education"







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# Module 1

## Introduction and Identification of Needs





# Module 1: Introduction and Identification of Needs

Specific learning objectives

By the end of the module, participants will be able to...

...explain the connection between sport and SDG 3. ...describe why sport is used in the context of health. ...outline existing daily problems related to health.



## INTERACTION Expectations and Knowledge Level

To clarify expectations and the level of knowledge/expertise of the participants, ask them the following questions. Answers can be collected on a flipchart or in the chat (online):

- What are your expectations for the workshop?
- Which topics are you especially interested in?
- Which questions do you have?

Statements: If participants answer the question with "yes", they have to stand up. If they answer with "no", they may remain seated.

- Is sport and health a new topic for you?
- Do you know the Sustainable Development Goals?
- Have you participated in a workshop related to health before?
- Have you worked on a project where health was the main focus?
- Have you conducted a health workshop before?

**Note:** In an online session, the participants can use emoji functions such as a "thumbs up" to agree with statements and a "thumbs down" to disagree.

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## **INPUT** Introduction to Sport for Health

## $\rightarrow$ Introduction: Sport & SDG 3:

#### The potential contribution of sport to ensure 'good health and well-being':

- Providing health benefits in general (e. g. reduced risk of heart disease, stroke, diabetes, cancer, control and prevention of obesity)
- Improving mental health and well-being
- Effecting positive child and adolescent development
- Raising awareness in terms of 'health messages'

### → Topic Collection Sport for Health:

#### The main arguments and objectives:

- Sport improves physical fitness and promotes healthy lifestyles.
- Using sport as exercise on a regular basis prevents non-communicable diseases.
- Sport promotes general individual physical and psycho-social well-being, self-esteem, social connectedness, and mental health.
- Sport can be used to support therapeutic treatments of depression, stress, and anxiety.

- When integrated into development programmes and implemented in a safe place, sport can address **sensitive health issues** like HIV/AIDS or sexual and reproductive health.
- Sport events can be used a **platform to sensitise people to health education** related to topics like HIV/AIDS and communicable/non-communicable diseases.
- Sport can contribute to overcoming **stigmatization** (e.g. in the context of HIV/Aids), reducing prejudices, and facilitating changes in behaviour.
- S4D programmes, or single training sessions, regarding health mostly address HIV/AIDS education, health promotion and life skills training.

Resources to use for the Introduction:

- → Guideline "The SDGs and Sport"
- $\rightarrow$  Commonwealth Secretariat (2017): Enhancing the Contribution of Sport to the SDGs
- → The Lancet Infographic "Child and Adolescents Health"
- ightarrow WHO Guidelines on Physical Activity and Sedentary Behaviour
- → WHO Physical Activity
- → WHO Adolescents Health Risks and Solutions
- → The Lancet Infographics Adolescent Health and Wellbeing





## INTERACTION Group Work "Daily Problems"



## ASSESSMENT

Divide the participants into three groups and ask them to discuss and define health-related problems and risks in their communities on different levels:

- **Multiburden** (Infectious diseases like HIV/AIDS, undernutrition, unhealthy food choices, sexual and reproductive health)
- Injury excess (Violence, unintentional injury, traffic accidents)
- Non-communicable diseases (Mental disorders, substance use disorders)

Critically discuss in your group health risks on the given level in your community context. Which risks are children and youth facing the most?

Please take notes and select one person to present your results in plenum. **Resource**:  $\rightarrow$  The Lancet Child & Adolescent Health Infographic-Adolescent-Physical-Activity

**Note:** In the GIZ online working context, the answers of the group works were collected via Jamboard. Feel free to use any media that you are comfortable and familiar with. If a workshop is conducted in presence, the participants can use a flip chart or sheets of paper.

To test the knowledge of the participants after module 1, ask them the following questions:

## True or False?

- a. According to the WHO, health is merely the absence of disease or infirmity.
- b. According to the WHO, adults (18 64 years old) should do at least 150 300 minutes of moderate-intensity aerobic physical activity.
- c. Prevalence of inactivity is higher in male adolescents as compared to female.
- d. Physical inactivity directly accounts for between 1% and 4% of all healthcare costs.
- Q: Adolescents may face three main burdens related to health: Multi-burden, Injury Excess and Non-communicable disease. To which main category of health burdens the following risks belong to?
- a. Violence
- b. Substance use disorders
- c. Undernutrition
- d. Mental disorder
- e. Traffic accidents
- f. Reproductive health

**Note:** The participants can shout out their answers in plenum or submit them via the chat function during an online session.





HOMEWORK The Toolkit Challenge

In order to prepare for Module 2, ask the participants to complete the following homework:

Have a look into the  $\rightarrow$  S4D Resource Toolkit and answer the following questions:

- Which information could you find related to health?
- Which contents/documents could be useful for your work?
- Which contents/documents do you use for your own work?
- Which S4D activities related to health could you find?
- Do you already use some of these activities in your programs?

# Module 2

Examples of Sport for Health Interventions, Learning Material and the Topic of Mental Health



SPORT FOR DEVELOPMENT







## 

In order to recap contents of module 1, you can play the following recap game:

• Participants write a word that stands out in their mind regarding the first module. The word should be written in large lettering on a piece of paper to show to other participants. The word could be an idea or feeling (funny or serious).

In order to prepare for module 2, let the participants discuss the homework in pairs:

## Module 2: Examples of Sport for Health Interventions, Learning Material and the Topic of Mental Health

## Specific learning objectives

By the end of the module, the participants will be able to...

- ...give examples of health related GIZ projects which are/were implemented in different countries.
- ...describe the importance of Mental Health and Psychosocial Support (MHPSS) in the context of S4D.

• "Speed dating": two participants share their answers regarding the homework questions with each other at first and afterwards in plenum





## **INPUT**Sport for Health Interventions (→ Country Examples GIZ)

 $\rightarrow$  South Africa and  $\rightarrow$  Brazil: Designed to Move - Promote the importance of moving

- **Background:** More than 31% of young people worldwide are not sufficiently physically active (WHO). For example, in Brazil, physical inactivity is expected to rise by 34% by 2030.
- **GIZ Programme:** GIZ and "Designed to Move" shared a common goal: promoting the importance of moving. The alliance enforced the idea that sport and daily physical activity are essential for the social, physical, and mental development of children and youth. Physical activities were integrated into 20 pilot schools in Brazil and South Africa.

#### • Results:<sup>2</sup>

- Brazil: Outreach to around 2,000 children between 6-12 years
- South Africa: Outreach to around 4,000 children
- In both countries, the importance participants attach to sport for their health increased by 84%
- Teaching and Learning Materials:
- The Manual "Active Communities" was developed for the Designed to Move programme and is available in → English and → Portuguese. The coach's guide aims "to get kids active before and after school".
- Two YDF Manuals from South Africa focus on  $\rightarrow$  HIV/Aids prevention and
- → *Tuberculosis prevention* through football.

• Resources:

→ Programme overview Designed to Move (page 6)
→ More detailed Factsheet "Cooperation with Nike"
→ Publication "Designed to Move"

## "Spont fon Health"



→ Namibia: HIV/AIDS prevention, health promotion and life skills training

- **Background:** High HIV infection rates, women and girls are particularly affected; a lot of early pregnancies
- **GIZ Programme:** Promotion of sexual and reproductive health and improvement of the quality of educational services

#### • Results:

- HIV prevention and the teaching of social skills have been fully integrated into football coaching programmes – 8,000 young people have been reached
- Increase in knowledge about HIV prevention and contraception among participants
- Teaching and Learning Materials: The manuals → Football4Life, → Basketball4Life,
   → Netball4Life and → Volleyball4Life aim to facilitate and promote positive youth development, education, and healthy lifestyles through the use of football, basketball, volleyball, or netball.
- Resources:

→ Programme overview Namibia (page 4)
 → More detailed Factsheet



## $\rightarrow$ Uganda and $\rightarrow$ Kenya: Sport and hygiene

• GIZ Programme Uganda: During the beginning of the pandemic in 2020, Viva con Agua and GIZ partnered up in Uganda to develop the hygiene manual "Become the next Washampion". This comic book filled with activities and information on hygiene measures aims at educating young people in a fun way on how to behave within a sports team and in their respective communities during pandemic times. More than 5000 children and teenagers have been reached through the manual already and both partner organizations are busy planning the distribution of many more comic books throughout all districts in Uganda.

#### • Teaching and Learning Material:

- $\rightarrow$  Manual "Water, Sanitation, Hygiene Champion", Uganda
- $\rightarrow$  Drillbook S4DA "WASH Mental Health in Crisis Situations", Kenya





## "Spont fon Health"



→ Jordan & → Northern Iraq: Healthy physical and mental development (refugee context)

- **Background:** 655,000 officially registered Syrian refugees (mid 2016) living mostly outside the camps in host communities; need of access to basic services and healthcare; need of more psycho-social support, education and leisure activities to help ease tensions.
- **GIZ Programme:** Using sport and physical activity for violence prevention in host communities and refugee camps; promotion of healthy physical and mental development of children and young people, including those who are disadvantaged and disabled.

#### • Results:

- Jordan: S4D activities at over 60 schools and 40 community centres, more than 10,000 children and young people reached
- Northern Iraq: S4D activities for around 65,000 children and young people in six refugee camps and two youth centres
- **Teaching and Learning Materials:** The Manual "Yalla Nela B" is a guidebook for active and healthy communities and is available in → *English* and → *Arabic*. It provides fun games and a hands-on facilitation guide. Its goal is to create a more active and healthy community through active play experiences.

#### • Resources:

→ More detailed Factsheet Jordan
 → More detailed Factsheet Iraq

• Other examples:

 Additionally, a lot of Teaching and Learning Materials contain health sections, like the manuals from → Jordan (→ "Sport builds generations") or → Brazil (→ "Treino Social").





## INPUT

Mental Health and Psychosocial Support (MHPSS) & S4D Interventions

- **S4D interventions as a psychosocial measure**: It should be designed, supported and managed in such a way that it offers the players the **scope to experience**:
- Life competences/skills: e. g. empathy, fairness, cooperation, opportunities to test non-violent and creative problem-solving, use of constructive communication and target-achievement strategies
- Control & empowerment
- A sense of belonging and being part of a group
- The experience of following rules, without feeling restricted by them
- Reflection on handling one's own emotions
- Being able to both enjoy success and cope with frustration
- Risks: If not supervised and implemented by a person trained in providing PSS it could...
  - lead to reinforcing enemy stereotypes, threatening behaviour, mistrust, marginalisation, bullying.
  - magnify feelings of loss of control and powerlessness, encourage displays of aggression, and feed destructive tendencies towards the opposition or even one's own teammates.
- In this case, the sport intervention would **not** be a PSS measure, but would increase the **potential for conflict** and can be perceived as **disempowering** for the players.

- Intervention principles:
- Promoting a sense of safety (e. g. safe spaces: environments should be free from physical, psychological and social harm!)
- Promoting calming (e.g. sharing circle, time for relaxation, trustful coaches)
- Promoting a sense of self and collective efficacy (e.g. through achievable goals for everyone)
- Promoting connectedness (e. g. through work in pairs)
- Promoting hope (= positive, action-oriented expectation that a future goal or outcome is possible → e. g. sustainability of S4D projects, cycle of S4D training sessions, routine)
- Resources:
- → GIZ (2018). Guiding Framework for Mental Health and Psychosocial Support (MHPSS) in Development Cooperation. As exemplified in the context of the crises in Syria and Iraq
- $\rightarrow$  Delphis (2019). The Biopsychosocial Model of Mental Health
- → Manual Moving together- Promoting psychosocial well-being through sport and physical activity





## ASSESSMENT

To test the knowledge of the participants after module 2, ask them the following questions:

- Q1: According to the Biopsychosocial Model of Mental Health, which factors contribute to one's mental health?
- Q2: What does this definition refer to? "A positive physical and mental state that fosters personal growth, enabling the individual to relate constructively to other people. It is a lifelong, dynamic process."

Q3: To which layer of the international framework for psychosocial services can S4D contribute?

- a. Layer 1. Basic services and security
- b. Layer 2. Community and family support
- c. Layer 3. Focused, non-specialized supports
- d. Layer 4. Specialized services

Q4: When and how should we refer a case to a professional psychologist?





## HOMEWORK Your "Shopping List"

Ask the participants to complete the following homework until the next module:

- Give yourself some time to memorize the topics of the modules (e.g. health realities in your community, five principles of S4D, competence framework SDG 3 etc.)
- Prepare your shopping list including (1) what you take along from the modules and (2) what you want to implement in your own working context
- Please remember, aspects on a shopping list are not possibilities, but intended purchases.
   For example, if you have "onions" on your shopping list, you will definitely buy them. So, it is better to pick a few important takeaways than to pick many you won't use!
- For your list, you can use the following table as structure:



What will you implement in your work? (e. g. in your next training session, workshop?



# Module 3

## **S4D Mechanisms and Activities**





## Module 3: S4D Mechanisms and Activities

### Specific learning objectives

By the end of the module, the participants will be able to...

...explain the mechanisms behind Sport for Health interventions

(competences & impact indicator frameworks).

...describe which principles are essential to design Sport for health interventions.

... justify why the role of coaches is important.

...design Sport for Health activities.

...select health related contents they want to implement/use in their own working contexts.





## **INPUT** The Mechanisms behind "Sport for Health" Interventions

## • How can S4D interventions contribute to Health?

Sport can be used to promote a variety of topics related to health, including (non)-communicable diseases, psychosocial health, and general ways to live a healthy lifestyle. Sport can improve physical fitness, mental well-being and social interactions, but it is also a valuable tool for health education, sensitization, and mobilization. Given the broad appeal of sport, particularly among young people who are difficult to reach, sports activities are an ideal way to promote health-related development goals.

#### • The S4D competence-based approach aims to:

- strengthen social relations and improve social skills by fostering in children the ability to make friends, learn trust, empathy, respect, and tolerance for others by abandoning stereotypes and prejudices, improving their ability to cooperate, manage conflicts, respect rules, and offering them a sense of belonging.
- enhance the **development of mental well-being**, including both the cognitive skills and the management of emotions.
- stimulate movement skills and helps children and youth develop physical abilities like flexibility, strength, endurance, speed, coordination, orientation, reaction, rhythm, balance, and body awareness. It improves the efficiency of the heart and lungs and reduces excess weight and the risk of non-communicable diseases like diabetes.
- enhance confidence and positive identity in youth.



• Resource:

#### → Manual Yalla Nela B – Guidebook for active and healthy communities

- Benefits of "Sport for Health" Interventions
- Awareness raising of the risks of communicable diseases such as HIV, AIDS and tuberculosis in a fun and age-appropriate way
- Coaches can act as role models and help participants to reduce high-risk behaviour.
- Stigma associated with certain diseases can be reduced.
- Set up of voluntary HIV testing facilities and advice centres at tournaments and sports festivals
- Female coaches can create a safe environment in which issues relating to sexual and reproductive health and rights can be freely discussed.
- Sport encourages people to eat healthy, exercise more, reduce smoking and drinking and thus helps to prevent non-communicable diseases.
- **Rehabilitation** for people with cardiovascular problems, cancer, dementia, and physical and mental disabilities
- Where individual counselling or psychotherapy is not available, sport can help people suffering from psychological stress due to displacement, war or violence.
- Engaging in sport together imparts a sense of security and normality, enabling participants to work through traumatic experiences and build their self-esteem.
  - Resource:
    - → GIZ Factsheet "Implementing Development Goals: Sport and Health

- Development of → Competences
  - → Competences on Coach Level (focus on health)
  - A precondition for youth to develop health-focused competences are well-designed and well-conducted S4D activities/training sessions delivered through coaches. Coaches must be trained in S4D workshops to develop the specific competences needed to deliver S4D activities.



## INTERACTION

Group Discussion about "Coaches as role models"

### Ask the participants the following questions (collect the answers in plenum):

- How can coaches be role models in the context of health?
- Which attitudes come into your mind to promote healthy lifestyles?
- What are "dos and don'ts"?

#### → Children/Youth competences (focus on health)

• When regularly taking part in well-conducted S4D activities/training sessions focusing on health (see 6), youth may gain the competences in the framework.

## "Spont fon Health"



- "Bridging the gap": From Activity to SDG → Impact Indicator Framework SDG 3
- The S4D Impact Indicator Frameworks advocate for a systematic and specific approach to measure the contribution of sport, physical education, and physical activity to the SDGs. The frameworks are based on the competences that children and youth (13 – 16 years old) gain in different SDG-related areas, and they are therefore designed for the programme or project level. The overall aim is to measure the contribution of sport activities to different SDGs.

#### • Impact hypothesis:

If children/youth (1) regularly take part in S4D Trainings, (2) involving S4D Activities, (3) they may gain S4D specific competences (4) contributing to SDG 3 Targets.

#### • "The 5 Principles of S4D" (available in 8 languages)

 S4D means the intentional pedagogical development and implementation of exercises which prioritize the personal and social development of (youth) participants over their sport and motoric development. In S4D, sport and physical activity are used to attain development objectives, including, most notably, the SDG. If sport is to make a meaningful contribution to development, coaches need to use exercises that explicitly and intentionally develop life skills/competences of participants. S4D can only develop its full potential if S4D coaches consider and employ **all five principles**:

### $\rightarrow$ Poster "The 5 Principles of S4D"

- $\rightarrow$  S4D Principle 1 Multidimensional Development of Participants
- → S4D Principle 2 Developing Life Skills/ Competences
- $\rightarrow$  S4D Principle 3 Roles and Responsibilities of the Coach
- $\rightarrow$  S4D Principle 4 Appropriate Educational Goals
- → S4D Principle 5 The Structure of an S4D Training

## • Resources "Design Filters" (similar to 5 principles):

- $\rightarrow$  Manual "Yalla Nela B Guidebook for active and healthy communities" (GIZ)
- → Manual "Active Communities a coach's guide" (GIZ)





## **INTERACTION** Group work "Recommendations for Practitioners"

Divide the participants into suitable groups regarding group size and ask them to fulfil the following task:

- Brainstorm ideas on promoting health through sport. As a group, compile ideas/recommendations for practitioners wanting to implement a sport for health training session based on the given information.
- Define a problem related to the earlier discussed health issues children and youth face in your community (Remember MODULE 1).
- Think about ideas/recommendations how this problem can be addressed through a S4D training session?
- What are crucial aspects for the success of the training session?
- What are "dos and don'ts"?
- You can use the Competence Framework, Impact Indicator Framework and Design Filters as orientation.
- Related Health issues: HIV/AIDS prevention, substance abuse, Hygiene, Sexual & reproductive health, mental health, Covid19



## **INPUT** "Sport for Health" Training Sessions and Activities

- From theory to practice: Competences as part of a training session
  - Simply playing sports does not guarantee that children and youth will develop competences that lead to a positive development and will prepare them for the future!
  - **Precondition**: the coach has to make an intentional effort to develop competences! The development of competences has to be part of S4D activities and at best part of all training units, including reflection!
- Example training session and activities:

→ S4D Training Session SDG 3 "Virus Transmission & Hygiene"
→ S4D Activity SDG 3 "Healthy Living"
→ S4D Activity SDG 3 "Virus Chain"
→ S4D Activity SDG 3 "Moonball"
→ S4D Activity SDG 3 "Pick the Fruits"

## "Spont fon Health"



- The connection between S4D activities, competences to be acquired, and Health: 5 Steps
- 1. Define a **daily problem** or health issue the children and youth in your program are facing in their daily lives.
  - e. g. Children and Youth are not aware of the consequences of their actions related to a healthy lifestyle, which could cause infectious and communicable diseases to spread quickly.
- 2. Search for an S4D activity that can be used to address this problemthe virus chain
- Have a look into the → Competence Framework Health to identify a fitting competence/ life skill that you want to focus on
  - critical thinking
- 4. Define the **acquired learning objective (long-term competences**) that should be observed after the whole intervention.
  - Children and youth are able to...
  - identify a rationale for maintaining good attitudes towards health and sports.
  - question norms, opinions and practices concerning health and well-being, including sexual and reproductive health.
  - cope with the consequences of their actions in the area of health.
- 5. Define the **acquired short-term competence** that can be observed during the sport activity. This will help you during the reflection part to build a connection between the activity and the competence.
  - Children and youth are able to be cautious and prevent being caught by the "virus chain".

- Importance of the reflection part: No reflection no impact!
- Resource: → Reflection Guideline

   (available in Arabic, Bahasa-Indonesia, English, French, Spanish)



The Reflection Cycle (GIZ illustration on the basis of Kolb, 1984; EDU:PACT Network, 2019)





## **INTERACTION** Group work on the Reflection model

Divide the participants into suitable groups regarding group size and ask the participants to fulfil the following task:

• For the Virus Chain activity or for your own activities, think of questions for each step of the reflection model: Reflect, Connect, Apply, Action

The Toolkit provides a lot of  $\rightarrow$  S4D Tools for Implementing Activities and Events (supporting tools in order to create your own S4D sessions):

- The → Guideline "Planning a Training Session" assists to plan and structure a S4D training session in advance.
- The → Template "Planning and Reviewing Sheet for S4D Training Sessions" can assist you to plan, conduct and review a well-structured course.

To test the knowledge of the participants after module 2, ask them the following questions:

**ASSESSMENT** 

Q1: What are the 5 principles of Sport for Development, according to GIZ / GSU?

Q2: What are the 07 Design filters for health-related interventions?

Q2: What are the four categories of competences?

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Q3: Critical Thinking would fit which of these categories?

Q4: What are the three levels of a competence?

- Q5: "Learning about the importance of mental health as well as the negative impacts of behaviours such as xenophobia, discrimination, bullying, etc." corresponds to which level (Recognizing, Assessing or Acting)?
- Q6: Match the following questions to a different stage of the Reflect-Connect-Apply-Action reflection model.
- a. Has a similar situation happened to you before?
- b. What will you do differently in the future?
- c. What helped you to succeed in this activity/game?
- d. Write a letter to yourself and formulate one personal goal you would like to achieve in three months.





## **INTERACTION (FINAL REFLECTION)**

Implementing Health Contents in Your Own Work

## Ask the participants to fulfill the following tasks:

- Please update and review your "shopping list" (homework module 2) regarding contents of module 3
- Reflect on your own the following questions and take some notes:
- What was **new** for you?
- What did you take along from the modules?
- What will you implement in your own work?
- Which health issue do you want to focus on?
- What will be your next step to implement your takeaways from the workshop in your work?
- Formulate 1 NEXT STEP on a piece of paper and present it in plenum.



## Feedback

To get feedback on the workshop, you can use different methods you will find in the following guidelines:

 $\rightarrow$  Guideline "Ensuring Quality Education in S4D" (available in 8 languages)  $\rightarrow$  Guideline "Options for Receiving Feedback" Ase answer the questions as follows: Act your answer with an "X" Al the space by writing your answer the one illustrated below, please indicate your level of Associated statement provide, using an "X":

⊿isagree	I am not sure	l agree	I strongly agree
28			
stions, feel free	to ask someone of the	e team!	

I code number is\_\_\_\_\_

indicate your level of agreement to the following statements.

	l strongly disagree	l disagree	l am not sure	l agree	l strong agree
expectations.					
the opportunity to the workshop.					
pared for the					
n age appropriate including					
of children					
' groups					

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## ANSWERS ASSESSMENT (Module 1)

To test the knowledge of the participants after module 1, ask them the following questions:

## True or False?

- a. According to the WHO, health is meity ...
- b. According to the WHO, adults ...
- c. Prevalence of inactivity is higher ...
- d. Physical inactivity directly accounts ...

Q: Adolescents may face three main burdens ...

- a. Violence
- b. Substance use disorders
- c. Undernutrition
- d. Mental disorder
- e. Traffic accidents
- f. Reproductive health

## Answers:

- a. False b. True c. False
- d. True

### Answers

- a. Injury excess
- b. Non-communicable diseases
- c. Multi-burden
- d. Non-communicable diseases
- e. Injury excess
- f. Multi-burden

# ANSW

## ANSWERS ASSESSMENT (Module 2)

To test the knowledge of the participants after module 2, ask them the following questions:

Q1: According to the Biopsychosocial Model ...?

Q2: What does this definition refer to ...? Q3: To which layer of the international framework ...?

a. Layer 1. Basic services and securityb. Layer 2. Community and family supportc. Layer 3. Focused, non-specialized supportsd. Layer 4. Specialized services

Q4: When and how should we ...?

#### Answers

- Q1: Biological, Psychological and Social
- Q2: Psychosocial wellbeing
- Q3: Layer 2. Community and family support
- Q4: Various answers possible. See Manual Moving together- Promoting psychosocial well-being through sport and physical activity, p. 38f.



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## ANSWERS ASSESSMENT (Module 3)

To test the knowledge of the participants after module 2, ask them the following questions:

Q1: What are the 5 principles of Sport for ...?

Q2: What are the 07 Design filters ...?

Q2: What are the four categories ...?

Q3: Critical Thinking would fit which of ...?

Q4: What are the three levels of a ...?

Q5: "Learning about the importance of mental health as...?

Q6: Match the following questions to a differen ...?

a. Has a similar situation happened to you before?

- b. What will you do differently in the future?
- c. What helped you to succeed in this activity/game?
- d. Write a letter to yourself and formulate one personal goal you would like to achieve in three months.

Glossary

#### Answers:

- Q1: Multi-dimensional development; Developing Life Skills; Roles and responsibilities of a coach; Appropriate Educational Goals; Structure of an S4D Training
- Q2: Universal access; Age appropriate; Dosage and Duration; Fun; Incentives & Motivations; Feedback to Kids; Teach, Coach & Mentor
  Q3: Personal, Social, Methodological, Professional
  Q4: Methodological
  Q5: Recognising; Assessing; Acting
  Q6: Recognising
  Q6: a. Connect; b. Apply; c. Reflect; d. Act

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## Imprint

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# SUSTAINABLE DEVELOPMENT GALS







