



FIBA Hoops for Health

Monitoring and Evaluation review



Preface

The following report was commissioned by the International Basketball Federation (FIBA)'s Oceania Office in the interest of continually striving for best practice in the field of Sport for Social Change with their Basketball for Good programs. The study was supported by global leaders in Sport for Development, the Laureus Sport for Good Foundation, and carried out by Sport for Social Change specialists at the University of New South Wales School of Public Health and Community Medicine.

Authored by;

Dr Anne W Bunde-Birouste
Ms Gemma Whitley
Ms Catherine Grawich
Mr Tun Aung Shwe

ISBN-10	ISBN-13	EAN
0-7334-3776-1	978-0-7334-3776-2	EAN: 9780733437762

For further information:

FIBA in Oceania Ltd
Catherine Grawich
Basketball for Good Manager
catherine.grawich@fiba.com

**UNSW School of Public Health and Community
Medicine Sport for Social Change**
Anne Bunde-Birouste
ab.birouste@unsw.edu.au

Monitoring and Evaluation review for FIBA Hoops for Health program

Executive summary:

Introduction:

FIBA's Hoops for Health program is unique in its delivery as it aims to develop the sport of basketball in the Pacific Islands whilst also using basketball as a vehicle to drive capacity building and development of healthier and more inclusive communities.

Despite anecdotal evidence and reporting of the program's success, the H4H program currently lacks a specifically designed and tailored monitoring and evaluation model nor has the program's systems and processes been systematically audited against best practices methods outlined in the sport for development and social change literature.

This research aims to address this gap and build the evidence base for the program to allow FIBA to have confidence in the design and impact of the H4H program.



Figure 1 – Hoops for Health Clinic in Fiji

Monitoring and Evaluation:

M&E typically examines three types of data; **participation data**, **process evaluation** and **impact evaluation**. Participation data refers to information collected relevant to those partaking in the program including demographic information, as well as the number of participants. Process data determines whether the program activities have been implemented as intended and resulted in certain outcomes. Finally, impact data is used to assess program effectiveness in achieving its ultimate

goals, for example, improved health behaviours for Pacific Islanders. All three elements are integral to triangulating an accurate depiction of program success. This report will use these three elements to structure the findings of this research.

Conducting thorough M&E is challenging, particularly in nations where resources may be limited as it is time and resource intensive, the environment is not always conducive to collecting data or completing forms, complaints are often raised as it takes time out of the lesson to complete and staff are not always competent or adequately trained in delivery.

Best practice M&E should use standardised processes which are streamlined throughout program design, implementation and delivery. It must also always be completed by staff that are appropriately trained and competent in the role to ensure best results.



Figure 2 – Catherine Grawich taking Mum's A Hero Coaches in Timor-Leste through a session.

Current FIBA M&E processes and analysis:

Participation data:

- Situation: Participation data is currently to be collected by coaches each session. It includes number of attendees, gender and approximate age of participants. No individually identifiable data is collected about participants. Data is manually entered into an excel database by program manager and reported to FIBA HQ quarterly.
- Issues: The absence of nominative data makes it impossible to track participants throughout the program and therefore, reported participation rates may be heavily inflated and not accurately reflecting program reach as the same participant could be counted numerous times, or not at all.
- Best practice: Completion of standardised consent and registration forms by all participants at the beginning of each program. Forms include demographic details including; age, gender and community. Coaches or program officers collecting the data must be adequately trained in data collection and entry.

Process data:

- Situation: Session plans are completed by coaches for each session and submitted for review to ensure the program lessons and learnings are being delivered as intended. The last 5 minutes of each session are to be dedicated to debriefing with participants regarding how the session was and what they learnt.
- Issue: There is no systematic and therefore robust monitoring mechanism implemented to examine how coaches deliver programs in all sites and if such a mechanism exists, it is not

clear from this review how routinely this is implemented and to what extent. Without random auditing or quality assurance processes it is impossible to ensure that the session plans are reflective of program delivery.

- Best Practice: To ensure program fidelity, that is, that the program is delivered as intended, random audits of sessions should be conducted routinely across all program sites, in addition to review of coach's session plans by specifically trained H4H coaches or program managers. The use of internationally validated survey tools is suggested to ensure programs are delivering the desired behaviour change. It is imperative that any staff member conducting M&E, whether it be collecting feedback or auditing a coach's session is adequately trained in this role.

Impact data:

- Situation: Impact data is collected using a *stories of change* template specifically designed by FIBA, where by participants identify the most important change they have made as a result of completing the H4H program. Stories are not always very meaningful and in some instances, literacy and language barriers may impede completion.
- Concern: No field staff are trained in collecting, conducting or analysing the stories of change data which limits the reliability of the data collected as they may not be explaining the requirements to participants in a way that collects the best responses.
- Best practice: A mixed methods approach combining qualitative and quantitative methods is most effective in collecting meaningful impact data. For example, a combination of validated survey tools for indicators of change such as health behaviours or gender equality, combined with focus groups or interviews. The stories of change model is an effective impact evaluation tool. However, in this instance, execution and delivery are not yielding best results.



Figure 3 – Children from a school in Port Vila, Vanuatu enjoying a Hoops for Health Clinic with their coaches in the background.

Recommendations:

General recommendations:



Figure 4 – Dr Anne Bunde-Birouste with a team of Fijians after a competition in Raiwaqa, Fiji.

1. Appropriate and sufficient M&E training and capacity building:

It is integral that any individual involved in the M&E process; from data collection to data analysis, is adequately trained in the processes to do so. In addition to technical training, staff need to be made aware of the importance of M&E and systems need to be developed so that it is built into their role and the program.

2. Time, systems, processes and budget:

M&E design needs to be easy and practical to ensure it has the greatest chance of being

routinely implemented. Ideally, it should be built into the program during the design phase with the same amount of focus as content development. Context specific systems need to be set up in each site exploring what amongst all of the options and mode of delivery will work best in each setting. Finally, an appropriate budget must be provided in order to develop, implement and refine systems.

3. Investing in assistive technology:

Many organisations are currently using technology to assist with their data collection, entry and analysis. It is integral for training to be implemented for using any of these technologies.

Participation data:

4. Registration forms and participant data:

Registration and consent forms should be standardised across all programs and participant demographic information collected during the first session or 'registration' session. To maintain anonymity, participants are then coded and all data collected will remain confidential.

Process data:

5. Feedback, random audits and quality assurance:

To ensure the program is being delivered as intended and to maintain program quality, it is suggested that systems be developed to ensure that coaches and sessions have random "spot checks". Participant satisfaction surveys should also be collected from participants and other relevant people involved in the program, such as school teachers or parents to get feedback across all levels and triangulate feedback.

Impact data:

6. Stories of change:

The use of stories of change is a recommended approach to collecting data on program impact. To address concerns noted with literacy and language, another approach to consider is conducting a short

interview with participants and community members and the program officer can pick the best ones to send through to FIBA HQ. A mixed method data collection approach has proven to be effective in understanding program impact. Findings should also be triangulated to increase rigour and robustness of data and therefore, data from different sources such as children, parents, teachers and volunteers needs to be collected.

Introduction:

Sport for development (S4D) refers to the use of sporting activities to provide opportunities for personal and community development, with effects that go well beyond the sphere of physical activity and elite player and game development (Beutler, 2008; Bunde-Birouste A., 2012).

Sport development on the other hand, focuses on participation and promoting the opportunities and benefits of sport participation spanning across a wide range of contexts (Shilbury, Sotiriadou, & Green, 2008). These include the modification of games to be incorporated in children's play, through to junior and youth sport which become the foundation of participation in senior competitions and ultimately elite and professional sport (Shilbury et al., 2008).

In the past decade, there has been an increase in programs that use sport to foster social development and engagement, as well as programs that work to specifically increase participation in the game, however, few programs work to achieve both of these objectives at the same time (Levermore, 2009).

FIBA's "Hoops for Health" (H4H) program is a basketball development initiative which currently runs in the national federations of Fiji, Vanuatu, Kiribati and Papua New Guinea (FIBA, 2017). The program is novel in its approach to development, using Basketball as a vehicle for social change and community development, whilst concurrently working to develop the sport in these nations. Funded by the Australian Government's Department of Foreign Affairs and Trade (DFAT) as part of the Pacific Sports Partnerships (PSP) initiative, H4H is a grass roots program which focuses on capacity building and developing healthier and more inclusive communities through sport (FIBA, 2017).



Figure 5 – Two participants from the Cook Islands and Fiji bonding at a FIBA Youth Leadership initiative – Pacific Youth Leadership Basketball Camp which also falls under FIBA's Basketball for Good strategy.

Program Objectives:

The PSP's main program objectives include;

1. Increased regular participation of Pacific Islanders in *quality* sport activities
2. Improved health related behaviours of Pacific Islanders, which impact non-communicable disease (NCD) risk factors, focusing on increasing levels of physical activity

In addition, expected program outcomes include;

- Improved governance and operational effectiveness of Pacific basketball federations;
- Increased capacity to plan, run and monitor participation based basketball programs;
- Increased participation in basketball activities of people at risk of acquiring NCDs or related illnesses;

- Increased participation and leadership of people with disability and women and girls in sport; and,
- Improved collaboration between Pacific sport organisations and development partners.

To determine if the H4H program is effectively meeting and targeting the above goals and objectives requires specifically designed and integrated **Monitoring and Evaluation** (M&E) processes. M&E is integral in ensuring the program is being delivered as intended and allows for confidence in program data and outcomes. The H4H program currently lacks a specifically designed and tailored M&E model as the program has to report back to, and use measures imposed by the contracting and managing agency. The program systems and processes have also not been systematically audited against best practices methods outlined in the sport for development and social change literature. Therefore, the aim of this research is to address this gap and build the evidence base for the program to allow FIBA to have confidence in the design and impact of the H4H program.



Figure 6 – Mum's A Hero Coaches promote inclusivity at a session in Dili, Timor-Leste.

This report provides a review of M&E methods and processes currently used by FIBA H4H against leading processes and “best practice” being implemented across the globe. The analysis includes review of FIBA operations, noted issues and challenges and how best to obtain learning on both process and some impact through a more streamlined approach. It then provides recommendations and suggestions for improved M&E that can be specifically designed to meet the FIBA H4H program components and delivery realities. Whilst it addresses major concerns, this is not an exhaustive piece of work and more finely

tuned, country or program specific analysis is required to get a true understanding of what is required for effective and efficient M&E.

Monitoring and Evaluation:

The H4H program has been positively received in all settings. Participants and community members have reported improved health behaviours and increased participation in basketball which has been mirrored by anecdotal and experiential reports from program staff. However, current M&E processes are not adequately capturing the true impact of the program and data collected related to program reach and experience is not always reliable or meaningful.

M&E approaches differ across programs around the world and follow different methodologies to produce outputs depending on funding and reporting requirements. One method that dominates contemporary development evaluation is the *positivist logical framework* ('logframe') approach (Cracknell, 2000; Levermore, 2011). It provides a methodology that aims to highlight a clear linkage between how far each component of the programme (such as inputs, outputs, immediate and wider objectives, risks/assumptions involved) assists in contributing to meeting program objectives (Levermore, 2011). This approach relies heavily on quantitative survey data and whilst its methods are validated, it is critiqued for its heavy “top down” and largely external approach. Concerns also relate to the fact that quantitative data alone cannot satisfactorily reflect interpersonal skills, which are the

most vital success factors in programmes that have community and personal development as their central focus (Cracknell, 2000).

Alternatively, the more critically minded *participatory approaches*, invites program recipients to influence the management of projects in order to shape future objectives of the programme (Cracknell, 2000). The process of evaluation looks to be ongoing and the beneficiaries and evaluators are part of a team that contributes to that as well as program design and implementation. Critical evaluation concentrates on obtaining a cross-section of views from all stakeholders about their interpretation of what is being evaluated and also reflects on the subjectivity of the evaluator in this process. It does not seek to find causal explanations, but rather a core characteristic of critical evaluation is the aim for empowerment, where wider political and social meaning of the elements of the programme evaluated (especially the donors that support it) need to be ascertained (Taylor and Balloch, 2005). This method requires ongoing engagement with local staff and can be challenging in ensuring methods are conducted appropriately to ensure data collected is both valid and reliable.

A combination of the above methods is recommended to ensure the program data being collected is reliable, whilst concurrently promoting a capacity building approach to encourage ownership and acknowledgement of the importance of conducting quality M&E.

M&E typically examines three types of data; **participation data**, **process evaluation** and **impact evaluation**. All three elements are integral to triangulating an accurate depiction of program success; from the number of participations and reach of the program, to specifics of program systems and processes in operations and the impact the program has on its participants. This report will use these three elements to structure the findings of this research.



Figure 7 – A Hoops for Health Coach in Vanuatu sets up an activity to teach participants about choosing healthy snacks.

The challenges of conducting thorough M&E are well documented and understood, particularly in the context of nations where resources may be limited (Elsemann, Hebel, & Daraspe, 2016). Quality and reliable M&E is time and resource intensive, the environment is not always conducive to collecting data or completing forms and often complaints are raised as it takes time out of the lesson to complete. In addition, staff are not always competent or adequately trained in delivery and do not appreciate or understand it's importance and therefore, it is not made a priority (Elsemann et al., 2016).

Best practice M&E should use standardised processes which are streamlined throughout program design, implementation and delivery. It must also always be completed by staff that are appropriately trained and competent in the role to ensure best results (Schulenkorf, Sherry, & Rowe, 2016; Shwe & Bunde-Birouste, 2015).

Methods:

This report was completed following extensive review of the current M&E Sport for Development and Social Change literature.

Interviews were conducted with key informants including leading researchers and program developers working locally and internationally in the field with established track records and long standing programs in both high and low to middle income countries. Supervision and consultation was also given by academics currently working in the field with upwards of 10 years of experiential evidence, visits to H4H sites and FIBA headquarters guiding recommendations and critiques from similar programs. All contributors have significant experience in sport for development praxis and research in low and middle income countries.

Relevant staff from FIBA were also interviewed to understand current systems, context, challenges and the setting of H4H and FIBA.

Information was integrated and reviewed for commonalities and differences to those presented in other, similar programs. A situational analysis is presented with recommendations and suggestions for improved M&E.



Figure 8 – Kids from a village outside of Port Moresby, Papua New Guinea line up to have a go at shooting a basketball after Hoops for Health Coaches show up to run some 3x3 games.

Current FIBA M&E processes and analysis:

The following section explores and analyses current FIBA practices against best practice monitoring and evaluation. The **situation** describes processes and assumptions, **issues** raises concerns with the procedures or practice and **best practice** describes what is presented as “gold standard” operations in the field throughout the research and literature. Practices have been grouped under three categories- participation, process and impact data, as these provide information most relevant to

program objectives and align FIBA's systems with terminology used in the sport for development and development of sport fields.

Participation data:

Participation data refers to information collected relevant to those partaking in the program. Data includes demographic information, as well as the number of participants. This data is integral to understanding the program's reach and exposure and enables the ability to track participants throughout the course of the program and over time, noting trends and potential gaps in attendance (Elsemann et al., 2016).

Situation:

- Participation data is currently to be collected by coaches each session. It includes number of attendees, gender and approximate age of participants.
- Consent forms are to be completed by all participants and collected by coaches
- No individually identifiable data is collected about participants- except in Timor Leste; where names are collected and the community they are from, as well as how many times that community has been visited.
- Data is manually entered into an excel database by program manager and reported to FIBA HQ quarterly.

Issue:

- The absence of nominative data makes it impossible to track participants throughout the program and therefore, reported participation rates may be heavily inflated and not accurately reflecting program reach as the same participant could be counted numerous times, or not at all.



Figure 9 – FIBA's Catherine Grawich donates basketball equipment as part of the Hoops for Health program to a school in Suva, Fiji.

- Similarly, without collection of more robust and reliable participant data, it is also impossible to follow or track participants over time and therefore valuable information regarding program impact and the growth of the sport is not being captured.
 - o As an example, to address this concern in Fiji, the same community is not visited twice in the same year, which is not advised as research suggests that program impact is greater on participants with prolonged participation (Nathan et al., 2010a).
- Logistically, without reliable data, it is also hard for coaches to plan sessions if they are unsure of how many participants to expect each lesson as well as impacting on program structure, equipment and budgeting.
- Consent and registration forms are not routinely collected from all participants.

Best practice:

- Completion of standardised consent and registration forms by all participants at the beginning of each program. Forms include demographic details including; age, gender and community (Sherry, Schulenkorf, & Chalip, 2015).
- Data can be beneficiary coded to protect participant confidentiality, but ensure participant can be followed throughout the program and over time (Elsemann et al., 2016).
- Coaches or program officers collecting the data must be adequately trained in data collection and entry (Yohalem & Wilson-Ahlstrom, 2010).

Process data:

Process data determines whether program activities have been implemented as intended and resulted in certain outcomes (CDC, 2017). It provides valuable and ongoing feedback throughout the duration of the program and can help guide program redesign and refinement.

Situation:

- Session plans are completed by coaches for each session and submitted for review to ensure the program lessons and learnings are being delivered as intended.
- The last 5 minutes of each session are to be dedicated to debriefing with participants regarding how the session was and what they learnt. During this time, participants complete a short feedback survey which asks about key learning and satisfaction.
- Fiji use an 'assessor tool' in which the program officer or another coach completes a random assessment of a coach whilst delivering the session.
- Program auditing and quality assurance is not routinely conducted across all program sites.

Issue:

- There is no systematic and therefore robust monitoring mechanism implemented to examine how coaches deliver program in all sites and if such a mechanism exists, it is not clear from this review how routinely this is implemented and to what extent.
- Without random auditing or quality assurance processes it is impossible to ensure that the session plans are reflective of program delivery and that the program is being delivered as intended.
- It is important for the reputation of the program and FIBA branding that the coaches are audited to ensure a high quality of session delivery.
- Survey tools used to understand key participant learning, such as health behaviours and NCD awareness are not specifically tailored or validated in each setting they are implemented.



Figure 10 – Girls pose for a photo after participating in a youth clinic promoting gender empowerment in Timor-Leste.

- Currently used feedback tools are not used systematically and thus does not adequately capture participant engagement during the session.

Best Practice:

- To ensure program fidelity, that is, that the program is delivered as intended, random audits of sessions should be conducted routinely across all program sites, in addition to review of coach's session plans by specifically trained H4H coaches or program managers.
- The use of internationally validated survey tools is suggested to ensure programs are delivering the desired behaviour change learning and that the changes can be attributed to the program and would not just have occurred over time (Levermore, 2011).
- It is important that survey tools are validated in each country and in some instances communities, as tools that are validated in one setting, may not be appropriate or applicable in another setting (Elsemann et al., 2016).
- Ideally, but understandably challenging, is for feedback to be received from coaches, participants and others involved such as Mums or teachers to triangulate findings.
- Feedback should also be shared with participants to verify findings and enable program developers to respond and react appropriately.
- Again, it is imperative that any staff member conducting M&E, whether it be collecting feedback or auditing a coach's session is adequately trained in this role.

Impact data:

Impact data is used to assess program effectiveness in achieving its ultimate goals, for example, improved health behaviours for Pacific Islanders (CDC, 2017). Impact data that is meaningful and reliable is the most challenging to collect, however, it valuable in providing evidence for use in future partnership and program funding decisions.

Situation:

- Impact data is collected using a *stories of change* template specifically designed by FIBA, where by participants identify the most important change they have made as a result of completing the H4H program.



Figure 11 – A group shot with participants, Hoops for Health Coaches, FIBA's Catherine Grawich and the Director of the International Basketball Foundation (far left) in Papua New Guinea.

- The minimum requirement reporting from DFAT is 6 stories from each country which are sent to FIBA HQ quarterly.
- Feedback from FIBA staff suggests that sometimes the stories are not very meaningful and in some instances, literacy and language barriers may impede completion.
 - o For example, "I ate unhealthy food before H4H and now I do not".

Issue:

- No field staff are trained in collecting, conducting or analysing the stories of change data which limits the reliability of the data collected as they may not be explaining the requirements to participants in a way that collects the best responses.

- Whilst this method is an appropriate impact evaluation tool, in practice it may not be collecting the most meaningful data, nor is it capturing external program impact and anecdotal data from the community.
- It has been noted that the stories of change reporting process is often completed last minute, and only after extended efforts from FIBA HQ follow up. Often stories are completed by participants and coaches well known to program staff which can also limit data reliability and total impact is not adequately captured.

Best practice:

- A mixed methods approach combining qualitative and quantitative methods is most effective in collecting meaningful impact data. For example, a combination of validated survey tools for indicators of change such as health behaviours or gender equality, combined with focus groups or interviews (Nathan et al., 2010b).
- The stories of change model is an effective impact evaluation tool. However, in this instance, execution and delivery are not yielding best results.

Recommendations:

Conducting rigorous M&E is challenging, particularly in low and middle income country settings and many field staff lack the necessary skills to carry out data collection and analysis. However, despite noted challenges, it is paramount that organisations find ways to work around these and implement robust M&E processes to ensure their programs are delivered appropriately and having the desired impact.

Based on this review and analysis of the current FIBA/PSP M&E situation, the following recommendations have been compiled to address gaps in processes and provide suggestions for more comprehensive and streamlined M&E of future programs.

General recommendations:

1. Appropriate and sufficient M&E training and capacity building:

It is integral that any individual involved in the M&E process; from data collection to data analysis, is adequately trained in the processes to do so (Schulenkorf et al., 2016). In addition to technical training, staff need to be made aware of the importance of M&E and systems need to be developed so that it is built into their role and the program. Understanding how and why their role is important and the type of change they are affecting is a powerful tool for keeping staff engaged and decreasing staff turnover (Roth & Brooks-Gunn, 2015). Training can also have multiple flow on effects including enhanced staff engagement with program content and delivery which enhances enthusiasm, building dedication to program and encouraging other community members to become involved.



Figure 12 – Fiji's Hoops for Health Coach Nicky teaching kids proper basketball shooting techniques.

At present, no key personnel are formally trained in M&E processes or delivery, and frequently, data collection and entry is completed on top of an already heavy workload and with great effort and follow up from staff at FIBA HQ. To ensure

staff are on board with the process, they need to receive appropriate remuneration for their time and efforts. Some suggestions include;

- Paying the coaches an extra hour each shift, and that time is dedicated to data entry, completed at the relevant program office.
- Paying a stipend to a local community member and training them to oversee the process
- If the federations are unable to pay, staff can be rewarded in other ways such as community recognition, awards and tickets to games etc...

Fostering capacity building and local federation empowerment to take ownership of their program has also been proven an effective tool in developing program sustainability (Straume & Hasselgård, 2014). In this instance, it is important that more than one person is trained in the M&E processes to allow for staff turnover without leaving the program with incomplete skillsets.

2. Time, systems, processes and budget:

M&E design needs to be easy and practical to ensure it has the greatest chance of being routinely implemented. Ideally, it should be built into the program during the design phase with the same amount of focus as content development. It is understood that tasks can be quite administrative and time intensive, especially in the initial stages, however, these processes are integral to program success and with appropriate training, staff will be able to complete.

Context specific systems need to be set up in each site exploring what amongst all of the options and mode of delivery will work best in each setting. This includes exploring what resources are needed in each site and how many people required. This information will then feed into the overall system and be refined over time. It should also be acknowledged in training that in these contexts, delivery conditions are often less than ideal, so the challenges should be addressed and even workshopped collaboratively to make systems more efficient in the early stages. Indicators should also be developed



Figure 13 – Hoops for Health Coaches in Vanuatu watch on as one of their own speaks to kids about the benefits of being physically active.

with program staff and in some instances including participant and community representatives to ensure that the program is measuring the outcomes most relevant to the context it is being implemented in. This creates a “nutcracker” method of implementation combining a synergy between top down and grass roots collaboration (Baum, 2008; Straume & Hasselgård, 2014).

Finally, an appropriate budget must be provided in order to develop, implement and refine systems. It is recommended that between 5 and 15% of overall program budget be allocated to ongoing M&E and similar to any development, the upfront cost of design and trialling is much

more costly than ongoing.

3. Investing in assistive technology:

Many organisations are currently using technology to assist with their data collection, entry and analysis. Software ranges from base level Microsoft office program such as excel, to specifically designed and tailored programs such as salesforce. The use of iPads and app software has also

emerged as efficient M&E tools. For example; attendance, feedback surveys, story of change interviews can all be conducted even with minimal or unreliable internet access.

As mentioned above, it is integral for training to be implemented for using any of these technologies.

- It may also be an effective marketing tool and increase the appeal of the program if it is paired with additional skills such as computer, iPad or photography training.

Participation data:

4. Registration forms and participant data:

Registration and consent forms should be standardised across all programs and participant demographic information collected during the first session or 'registration' session. To maintain anonymity, participants are then coded and all data collected will remain confidential and securely kept.

Consent can also be obtained during a community information session- delivered in the local language to parents if consent form collection is challenging.

For settings where collecting names is prohibited, programs can be creative in the way of gathering information, for example;

- Using nick names or the names of national sports stars to identify participants
- Having an object like a peg, sticker or stamp that participants "mark off" when they arrive.

Irrespective of method used for identifying participant, the name, code or other needs to be unique to the individual participant throughout the data input/ collection process to ensure the participant can be tracked over time. The individual in charge of M&E should then keep a separate document that links the study code to subjects' identifying information gathered at registration.

Process data:

5. Feedback, random audits and quality assurance:

To ensure the program is being delivered as intended and to maintain program quality, it is suggested that systems be developed to ensure that coaches and sessions have random "spot checks". This can be completed by a senior coach, program manager or peer assessed and is valuable in providing ongoing feedback, ensure the program is running on the ground as perceived from the session plans and maintains engagement with the coaches.

Participant satisfaction surveys should also be collected from participants and other relevant people involved in the program, such as school teachers or parents to get feedback across all levels and triangulate feedback.



Figure 14 – Dr Anne Bunde-Birouste poses for a photo with four of Fiji's Hoops for Health Coaches after a Mum's a Hero clinic promoting proper nutrition to 30 women.

Impact data:***6. Stories of change:***

The use of stories of change is a recommended approach to collecting data on program impact. To address concerns noted with literacy and language, another approach to consider is conducting a short interview with participants and community members and the program officer can pick the best ones to send through to FIBA HQ. Alternatively, video interviewing or pictorial stories of change are also effective options. Of most importance when using this method is ensuring that the participants understand the importance of this information and that staff are trained in collecting these stories (Levermore, 2009).

As mentioned above, a mixed method data collection approach has proven to be effective in understanding program impact. Findings should also be triangulated to increase rigour and robustness of data and therefore, data from different sources such as children, parents, teachers and volunteers needs to be collected.

Conclusion:

Monitoring and evaluation is an integral part of any program design and development. Whilst initial investment in M&E design, preparation and training is significant, the return on investment is worthwhile and required to ensure program success and sustainability. The processes do not need to be complex or overly sophisticated to get data that is rich and meaningful. However, they do require careful and thorough development, training and attention to implementation. In addition, it is also integral that everyone, across all levels of the program is on board and understands the importance of the work they are doing.

References:

- Baum, F. (2008). Community development in health *The new public health*. Melbourne: Oxford University Press.
- Beutler, I. (2008). Sport serving development and peace: Achieving the goals of the United Nations through sport. *Sport in Society*, 11(4), 359-369.
- Bunde-Birouste A., N. S., McCarroll B., Kemp L., Shwe T., Grand Ortega (2012). Playing for Change. *Football United, School of Public Health and Community Medicine, UNSW, Sydney*.
- Cracknell, B. E. (2000). *Evaluating development aid: issues, problems and solutions*: Sage.
- Elsemann, K., Hebel, M., & Daraspe, C. (2016). Monitoring and Evaluation in Sport for Development. *Street Football World*.
- FIBA. (2017). Hoops for Health. Retrieved from <http://www.fiba.com/oceania/hoops-for-health>
- Levermore, R. (2009). Sport-in-international development: Theoretical frameworks *Sport and international development* (pp. 26-54): Springer.
- Levermore, R. (2011). Evaluating sport-for-development approaches and critical issues. *Progress in development studies*, 11(4), 339-353.
- Nathan, S., Bunde-Birouste, A., Evers, C., Kemp, L., MacKenzie, J., & Henley, R. (2010a). Social cohesion through football: a quasi-experimental mixed methods design to evaluate a complex health promotion program. *BMC Public Health*, 10(1), 587.
- Nathan, S., Bunde-Birouste, A., Evers, C., Kemp, L., MacKenzie, J., & Henley, R. (2010b). Social cohesion through football: a quasi-experimental mixed methods design to evaluate a complex health promotion program. *BMC Public Health*, 10(1), 1-12.
- Roth, J. L., & Brooks-Gunn, J. (2015). Evaluating youth development programs: Progress and promise. *Applied Developmental Science*, 1-15. doi:10.1080/10888691.2015.1113879
- Schulenkorf, N., Sherry, E., & Rowe, K. (2016). Sport for development: an integrated literature review. *Journal of Sport Management*, 30(1), 22-39.
- Sherry, E., Schulenkorf, N., & Chalip, L. (2015). Managing sport for social change: The state of play: Elsevier.
- Shilbury, D., Sotiriadou, K. P., & Green, B. C. (2008). Sport development. systems, policies and pathways: An introduction to the special issue. *Sport Management Review*, 11(3), 217-223.
- Shwe, T. A., & Bunde-Birouste, A. (2015). Monitoring and Evaluation Framework. *Prepare for Creating Chances; a sports-based youth leadership and life skills development program*.
- Straume, S., & Hasselgård, A. (2014). 'They need to get the feeling that these are their ideas': trusteeship in Norwegian Sport for Development and Peace to Zimbabwe. *International Journal of Sport Policy and Politics*, 6(1), 1-18. doi:10.1080/19406940.2013.813866
- Yohalem, N., & Wilson-Ahlstrom, A. (2010). Inside the black box: Assessing and improving quality in youth programs. *American Journal of Community Psychology*, 45(3-4), 350-357.