A CASE STUDY ON THE APPLICATION OF AN INTEGRATED SPORT FOR ALL MODEL

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INTRODUCTION

1. The second case study to be presented is based on the same theoretical grounds as the first one, thus the model will not be discussed.

2. This case study developed in the South African Military Health Service Training Formation. The Training Formation Houses the following Units under Command:

   a. The Military School. This school is responsible for all military training provided to personnel in the health Arm of Service of the South African National Defense Force.


   d. The Senior Staff Wing. Responsible for staff training.

   e. The Training Formation HQ. This element is responsible for the overall management of the Formation.

SCOPE

3. The scope of this presentation is as follows:

   a. BACKGROUND
   b. INTERVENTION
   c. INITIAL REACTION
   d. MANAGEMENT
   e. RESULTS
   f. CONCLUSION
BACKGROUND

4. Since 1995 the South African National Defense Force are going through a major Transformation process. The change method utilized is a business process re-engineering approach. This process is lengthy and time consuming. The re-engineering process is linked to a change management process to facilitate not only the organizational change, but also the effects of the change on individual members and groups within the organization.

5. One of the crucial elements in this process is the protracted redevelopment phase. This caused strong feelings of uncertainty about the future and members position, in the organization after re-engineering.

6. The symptoms of these processes were also visible in the morale and motivation of members in the Health Training Formation. The majority of the members were in limbo. Some experienced the change as tremendous threatening. The change imperatives of a smaller leaner defense force, affirmative action and gender equality led to a mixture of expectations on the one hand and apprehension on the other.

7. It was clear to management that an intervention was necessary to defuse the pressure on morale and motivation. The differences between the subgroups within the units also asked for some intervention with reference to the interpersonal relations between people. At this point it was decided to use Physical Training, Sport and Recreation as a means of defusing, and relationship building mechanism.

INTERVENTION

8. The intervention was planned for an environment that was saturated with complex processes. Thus it was decided to keep it simple.

9. The following instruction was issued

   a. The daily program at the formation will change to include a Physical Training, Sport and Recreation period from 15:00 to 16:00 every afternoon. This will be an addition to the normal Physical Training that is part of the curriculum. It is expected of the members to select an activity to participate in. The list of suggested activities were:

      i. Volleyball.

      ii. Tennis.
iii. Touch rugby.
iv. Soccer.

v. Netbal.
vi. Gymnasium.
vii. Walking.
viii. Road running.
ix. Traditional dancing.
x. Stick fighting.

xi. Stretching.

xii. Hobby

INITIAL REACTION

10. The instruction was met with mixed reaction, some members joined in with the activities with ease, some took time to get into the pattern while others members showed resistance to the new routine. The most popular activities were:

a. Gymnasium.
b. Walking.
c. Road running.
d. Volleyball.
e. Stretching.
f. Soccer.
MANAGEMENT

11. The management of the intervention became a challenge, based on the following factors.

   a. The staffing of the structures within the formation was not completed. This led to a position where stand in Officer Commanders were appointed, in one case a relative low rank officer had to fulfill the responsibilities of the Officer Commanding.

   b. The sport officer was staffed in a post outside the Formation and was waiting to take up the new position.

   c. The physical setting of the Units in the formation is of such a nature that control was difficult to manage. This led to members misusing the opportunity.

   d. A Culture of Physical Training, Sport and recreation is not properly installed.

RESULTS

12. After thirteen months the program was temporary terminated until the following milestones are in place.

   a. The permanent officers commanding are appointed.

   b. A Permanent Sport Officer and staff is in place.

   c. The control over members with reference to discipline is properly coordinated between the different units.

13. Not with standing the managerial problems the intervention had very positive effects with reference to:

   a. The quality of interpersonal relations.

   b. Stress relief for members.

   c. Fitness levels.

   d. Cultivating of PTSR culture.
CONCLUSION

14. Utilizing PTSR as an intervention under circumstances of morale and motivation difficulties is a powerful instrument. A factor, which must be addressed in detail to ensure success, is the management of the activities and at least a stable senior management position.
CASE STUDY 1

SOUTH AFRICAN MILITARY HEALTH TRAINING FORMATION

INTRODUCTION

- MILITARY SCHOOL
- HEALTH SCHOOL
- NURSING COLLEGE
- STAFF WING
- HQ

SCOPE

- BACKGROUND
- INTERVENTION
- INITIAL REACTION
- MANAGEMENT
- RESULTS
- CONCLUSION

BACKGROUND

- CHANGE
- UNCERTAINTY
- MORALE AND MOTIVATION
- DEFUSE

INTERVENTION

- COMPLEX VERSUS SIMPLE PROCESS
- INSTRUCTION
  - Volleyball  Tennis  Soccer
  - Rugby  Netball  Gym
  - Walking  Road running
  - Traditional dancing  Stick fighting
  - Hobby

Initial Reaction

- DIVERSE
MANAGEMENT

- STAFFING
- SPORT OFFICER
- PHYSICAL SETTING
- CULTURE OF PTSR

RESULTS

- TEMPORARY TERMINATION
  - APPOINTMENT OF GC'S
  - APPOINTMENT OF SPORT OFFICER
  - CONTROL

RESULTS

- POSITIVE EFFECTS
  - QUALITY OF RELATIONSHIPS
  - STRESS RELIEF
  - FITNESS
  - CULTIVATING CULTURE OF PTSR

CONCLUSION

- Utilizing PTSR as a morale and motivation intervention is a powerful tool.
- Proof of the pudding is in the management of the program

INTRODUCTION

- INTEGRATED MODEL

CASE STUDY 2

EXECUTIVE WELLNESS PROGRAM
SCOPE

- BACKGROUND
- THE PROGRAM
- MANAGEMENT OF PROGRAM
- INDIVIDUAL INTERVENTION
- GROUP INTERVENTION
- CONCLUSION

BACKGROUND

- CHIEF OF SANDF
- GUIDELINES
  - PARTICIPATION
  - SCIENTIFIC APPROACH
  - MEDICAL ETHICS
  - COMMUNICATION
  - DIARIES

BACKGROUND

- MULTI-PROFESSIONAL TEAM
- SURGEON GENERAL
- PERSONAL PLEDGE

- CONTRACTING

ROLE PLAYERS

- DIRECTOR SPORT
- DIRECTOR PSYCHOLOGY
- DIRECTOR MEDICINE
- DIRECTOR ORAL HEALTH
- DIRECTOR SOCIAL WORK
- DIRECTOR NURSING
- DIETETICS AND ANCILLARY HEALTH

THE PROGRAM

- MANAGEMENT
- INDIVIDUAL INTERVENTIONS
- GROUP INTERVENTIONS

APPLICATION

- GENERAL X

- CONCLUSION