

S O H K

SCHOOL OF HARD KNOCKS

# LEARNING

EVALUATION

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2023

# TABLE OF CONTENTS

1	Executive Summary	
2	Introduction	p1
3	Evaluation Questions (EQs)	p2
4	Method	p3
5	Findings & Discussion	p4
6	Recommendations	p16
7	Acknowledgements	p17



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SCHOOL OF HARD KNOCKS

# EXECUTIVE SUMMARY

## Introduction

The School of Hard Knocks (SoHK) is a Cape Town-based non-governmental organisation that uses sport as a vehicle to address the trauma and mental wellness of vulnerable people in South Africa, ultimately aiming to help people be better placed to realise their potential. SoHK's flagship programme, 'SoHK for Schools', is a year-long intervention that works with participants in no- and low-fee schools in and around the Cape Town CBD, using touch rugby as a vehicle for providing the participants with psycho-social support and helping them to learn coping skills that leave them better placed to deal with the trauma and other mental health challenges that they face.

## The Evaluation

With the support of the DG Murray Trust, SoHK undertook an evaluation of certain design decisions that needed to be made about the SoHK for Schools programme. This evaluation, carried out in late 2023, informed decisions that the organisation made about the shape of the SoHK for Schools programme in 2024.



## Evaluation Questions

The evaluation centred around three questions:

### 1. Does the SoHK for Schools programme work?

Ultimately, this is the pivotal question for the SoHK for Schools programme, interrogating whether SoHK is fulfilling its mission of improving mental and emotional wellbeing of its participants.

### 2. Which SoHK for Schools delivery model works best?

In 2023, SoHK had several different SoHK for School delivery models in place, with the intention of assessing whether the different models (namely, 1) a new compulsory model for all Grade 9s, held during school hours, 2) a referral/opt-in model, for all grades, held during school hours, and 3) an after-school model) realised similar or different outcomes.

### 3. Should SoHK continue to mandate therapy for its coaches?

SoHK's coaches are young individuals who, through their work with SoHK's participants, have to carry significant emotional weight. This is in addition to the fact that SoHK's coaches live in similar, or the same, communities, as SoHK's participants – often communities where conditions are difficult, and exposure to trauma is all-too-common. In order to support SoHK's coaches, SoHK has provided, and required that the coaches use, trained counsellors.

This question sought to explore whether this mandated therapy model is one that has realised positive consequences for the coaches and for the SoHK for Schools programme.

# EXECUTIVE SUMMARY

## Findings

### 1. Does the SoHK for Schools programme work?

The evaluation revealed that the SoHK for Schools programme has quantitatively significant impacts on several aspects of the participants' mental wellbeing, across models. The quantitative assessment was supported by qualitative data from focus groups and interviews. Overarchingly, the evaluation indicates that participants have a more positive outlook on their lives and their surroundings, and exhibit observable improvements in behaviour, strong indicators of improved mental and emotional wellbeing.

### 2. Which SoHK for Schools delivery model works best?

The impact of SoHK for Schools was definitely stronger in the new, entire grade, compulsory model. This model had the highest dosage (>90% attendance, against 48% for the opt-in models), exposing participants to more of the SoHK curriculum and coaches. The after-school model was not successful at all – attendance by participants, whose ability to attend was limited by their transport needs, was sufficiently poor that the after-school programme was discontinued in the 3rd term of 2023.

### 3. Should SoHK continue to mandate therapy for its coaches?

The mandating of therapy helped coaches to overcome their initial reservations about attending therapy, breaking through personal reservations and cultural norms. SoHK's process, which asking the coaches to engage in written reflections, not only had the benefit of helping the coaches deal with their own trauma, but had the effect of helping the coaches increase their emotional intelligence, with significant implications for their work with the participants in SoHK's programmes.

1

The SoHK for Schools programme delivers on its mission to improve the emotional wellbeing of its participants.

2

Not all delivery models work. The new model, which takes place during the school day and is compulsory for all participants in a grade, is most effective.

3

Mandated therapy for SoHK coaches is highly beneficial, for the coaches, the organisation and the participants.

The key findings to the three evaluation questions.

## Recommendations

PUT ALL PARTNER  
SCHOOLS  
ON THE NEW  
DELIVERY MODEL

CONTINUE TO  
MANDATE  
THERAPY

DO NOT  
SPLIT  
GROUPS BY  
GENDER

MAKE  
COACHES  
REFLECT ON  
THERAPY

The key recommendations for future delivery.

## Conclusion

The evaluation provided SoHK with evidence of both the efficacy of the programme – it does have an impact on the participants' mental and emotional health – and with concrete steps that need to be taken in relation to delivery – specifically, the type of delivery model that the programme should use. Finally, the evaluation made clear that mandating therapy improves the mental health of SoHK's coaches, and improves their ability to impact the lives of SoHK's participants positively.

# INTRODUCTION

The School of Hard Knocks (SoHK) seeks to use sport and psycho-social support to improve the emotional health and wellbeing of people in South Africa, helping people who would not otherwise have access to mental health resources to address the trauma that they have experienced in order to better realise their potential and, through this, contributing to meaningful social change.

SoHK was founded in 2017, and, in 2023 alone, through its 3 programmes, (SoHK for Schools, NxtGenMen and NxtGenWomxn) has delivered its programmes to nearly 1500 adolescents and adults.

This evaluation focused on the 'SoHK for Schools' Programme, SoHK's flagship programme. SoHK for Schools is a year-long intervention delivered to under-served participants in no- and low-fee commuter schools in Cape Town. Through trained coaches, supported by a team of social workers and a counsellor, touch rugby is used as a way to provide participants with psycho-social support and coping skills, helping them to better deal with trauma and other mental health challenges that they face.

In 2024, SoHK will seek to expand this programme from 350 to 600 participants.

**This evaluation is intended to inform the design of delivery to best achieve the desired outcomes of the SoHK for Schools programme in 2024.**

## THE EVALUATORS



**Buck Whaley (MA Social Impact Assessment, University of Johannesburg):** "I'm driven by work that brings about better societies, communities, families and individuals, mindful of the complex environmental and social challenges we face in our world globally and locally, and the need for cooperative, solution-focused engagement. I like to be involved in impactful work for business, government and civil society by ensuring impact is delivered to those who need."



**Chris Anderson (BSocSci (Hons), University of Cape Town):** "I am an easygoing research analyst and monitoring and evaluation specialist, with a passion for helping people reach their full potential and helping organisations reach those in need. I possess years of experience working in the education, healthcare and financial sectors."

# EVALUATION QUESTIONS



Evaluation Questions (EQs), similar to research questions in academic research projects, guide the methods and tools used to collect data to understand the problem under investigation. In this instance the EQs were developed in partnership with SoHK leadership to guide planning and implementation of the SoHK for Schools programme in 2024.

## 1 Does the SoHK for Schools programme work?

This is a question that SoHK is often asked by people outside the organisation, and it is a question that the employees of the organisation often ask themselves. The organisation, and the people within it, constantly strive to ensure that their valuable resources are used effectively and efficiently to further bring about lasting change in society through improved mental wellbeing.

**The aim of this EQ is to evaluate whether the programme achieves its desired outcomes of improving emotional intelligence, healthy coping, self-regulation, and gender equity.**

## 2 Which delivery model works best?

Historically, the SoHK for Schools programme sessions were delivered in a single session at each school during the school day, to a group of participants from across the grades in each high school (grades 8-12). The participants were referred to the programme by teachers, and could opt-out at any point in the year. In 2023, SoHK trialled two new modes of delivery, attempting to ascertain whether the organisation could improve impact by varying its approach.

**This EQ sought to examine the way that the three models impacted delivery, to gauge the success of each of the models and to make recommendations for a preferred, evidence-based model of delivery.**

## 3 Mandated therapy for coaches?

SoHK's coach/counsellors work on the frontline, dealing with serious disclosures by young people whilst often living in difficult conditions themselves - a reflection of an unequal and often-violent South Africa. Additionally, many of the coach/counsellors have had limited exposure to therapy and the benefits that arise from working with a counsellor, with implications for their understanding of their own work. To address these dual needs, personal and professional, SoHK leadership mandated therapy for all coach/counsellors in 2023: Coach/counsellors had access to a therapist, of their own choosing, at SoHK's cost. Each coach/counsellor was required to attend at least one therapy session a month, with access to additional sessions if they so desired. Coaches were tasked with writing reflective pieces, reflecting on their personal development journeys and on the role of these therapy sessions on their development.

**The aim of this EQ was to determine whether the mandated therapy was beneficial, personally and/or professionally, and whether it should be an ongoing requirement for SoHK coaches.**

# METHOD

We, the evaluators, were fortunate that SoHK values monitoring, evaluation and learning (MEL) and was already collecting reliable data at different time intervals from different stakeholders. SoHK's participants were used to providing data, which meant they felt comfortable sharing openly in the focus groups and were familiar with the process of completing surveys. The partner school educators responded promptly to requests for online survey completion.

Most data used in this evaluation had already been collected by SoHK for their internal MEL purposes. Tools and data were reviewed by Buck (evaluator 1) for face validity and reliability. Buck also created new tools to collect data from the educators and for EQ3, collecting and analysing the EQ3 data with these tools. Chris (evaluator 2), organised, cleaned and analysed the data for EQ1 and EQ2.

Statistical analyses were conducted using IBM SPSS version 27.



Survey and focus group data collection.

EQ	DATA TYPE & SOURCES	ANALYSES
EQ1	<ul style="list-style-type: none"> <li>• Baseline and Midline survey data from direct participants, and their educators.</li> <li>• Focus groups with participants.</li> </ul>	<ul style="list-style-type: none"> <li>• Cross tabulation</li> <li>• Paired sample t-tests</li> <li>• Word clouds</li> <li>• Thematic analysis</li> </ul>
EQ2	<ul style="list-style-type: none"> <li>• Participant attendance registers</li> <li>• Baseline and Midline survey data from the direct participants, and their educators.</li> </ul>	<ul style="list-style-type: none"> <li>• Cross tabulation</li> <li>• Paired sample t-tests</li> </ul>
EQ3	<ul style="list-style-type: none"> <li>• Coach focus group data</li> <li>• Coach survey data</li> <li>• Coach written pieces</li> <li>• Coach leave data '22 and '23</li> </ul>	<ul style="list-style-type: none"> <li>• Thematic</li> <li>• Cross tabulation</li> </ul>



# FINDINGS & DISCUSSION

EQ1

# DOES THE PROGRAMME WORK?



# EQT FINDINGS

For the purposes of this evaluation, five main outcomes were assessed:

1. Emotional intelligence;
2. Destigmatising talking about emotions;
3. Healthy coping mechanisms;
4. Impulse control (self-regulation);
5. Gender equity.

Data were collected in the beginning, middle and end of the school year in the form of self-report surveys, focus groups and by surveys completed by educators.

On EMOTIONAL INTELLIGENCE and DESTIGMATISING TALKING ABOUT EMOTIONS, we found statistically significant improvements.

Improvement in EMOTIONAL INTELLIGENCE is further triangulated by self-report data and educator observational data.

HEALTHY COPING MECHANISMS showed almost statistically significant change, with self-report and observational data making a strong case for significant improvements.

OUTCOME	STATISTICAL ANALYSES OF SELF-REPORT LIKERT SCALES (BASELINE COMPARED TO MIDLINE)	SELF REPORT ON NON-LIKERT SCALE (MIDLINE)	EDUCATOR DATA
Emotional intelligence	significant (p<0.001)	80% report improvement	100% see improvement
Destigmatising talking about emotions	significant (p<0.001)	97% report improvement	n/a
Healthy coping mechanisms	not significant (p= 0.08)	80% report improvement	80% see improvement
Impulse control (self-regulation)	not significant (p= 0.926)	83% report improvement	80% see improvement
Gender equity	not significant (p= 0.65)	79% report improvement	n/a

# ADDITIONAL FINDINGS

When we controlled for the different delivery models, the model where SoHK works with the entire grade 9 cohort (new model) showed significant improvements on all outcomes EXCEPT SELF-REGULATION. This finding is perhaps unsurprising: SoHK for Schools works with adolescents, an age-group epitomised by an inability to think through the consequences of their behaviour.

But when we listen to what participants say in focus groups, we hear evidence that there are, in fact, improvements in SELF-REGULATION:

“In the past, when a teacher made me angry, I would raise my voice or walk out of the classroom, now I think about my actions and know the old ways were not a solution. Staying calm and talking to my teacher is better.”

“I used to get really angry with my mom when she told me I couldn’t do something I really wanted to, now I try to understand it from her point and only speak to her when I am calm.”

Although statistical analyses on GENDER EQUITY did not show significant change, other sources of data suggest noticeable increases in knowledge around gender and gender equity.

In response to the question, “What did you learn this year?”, 79% of participants report an increase in knowledge of gender issues and gender norms.

“By seeing female coaches playing rugby, I realise that girls can also be strong and fast.”

“When playing touch rugby against the girls, I am surprised that they can actually play!”

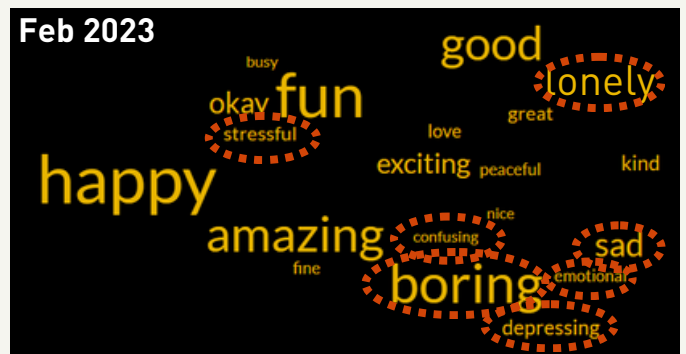
“By learning touch rugby, I see that I can do things boys can do, I didn’t know that!”



Keeping in mind the limitations of likert-scale survey data, we trialled a novel approach to data collection: We asked the participants at the start and the end of the programme to describe themselves/their lives in three words.

We then analysed the top 20 most frequently used words, looking for patterns or changes.

At the beginning of 2023, in the TOP 20 MOST FREQUENT WORDS, 7 were negative.



At the end of 2023, all were positive.



This indicates that the participants have a more positive outlook on their life/surroundings, and themselves, a strong indicator of improved mental and emotional health.

EQ2

# WHICH IS THE MODEL WITH THE MOST?



4  
DIFFERENT  
MODELS  
BUT WHICH ONE  
WORKS BEST?



# THE DELIVERY MODELS

SoHK’s partner schools are all based in or around the Cape Town city centre. The participants travel from all over the greater Cape Town area to attend school - some participants travel on public transport for 2 hours each way every school day. Due to the long hours spent commuting, very few participants participate in extra-curricular activities such as sport.

Historically, SoHK worked with participants referred to them by teachers because of problematic behaviour in and/or outside of school. These sessions took place during the school day, at the same time as academic classes. This meant participants had to choose between attending SoHK and attending class, which led to sporadic attendance and, accordingly, low dosage (exposure to SoHK programme).

In late 2022, one of the partner schools requested that SoHK work with their entire 2023 grade 9 cohort, with SoHK sessions scheduled as part of the school timetable, so no academic classes were missed. SoHK offered this model as an option to the other partner schools, and one other school was interested in trialling this model. This model offered the potential for SoHK to reach more children, more frequently, as well as to remove or to deconstruct any stigma that existed around participating in SoHK’s programmes.

One of the partner schools was not able to accommodate SoHK during the school day and SoHK offered after-school sessions. The other two partner schools remained on the traditional model - referral/opt-in sessions during the school day, where participants would miss an academic class.

MODELS
TRADITIONAL (referred/opt-in, during the school day, at the same time as academic classes)
AFTER SCHOOL (referred/opt-in, after the school days ends)
ENTIRE GRADE (NEW) (compulsory, part of the school timetable, usually replacing a Technology or Life Orientation period)

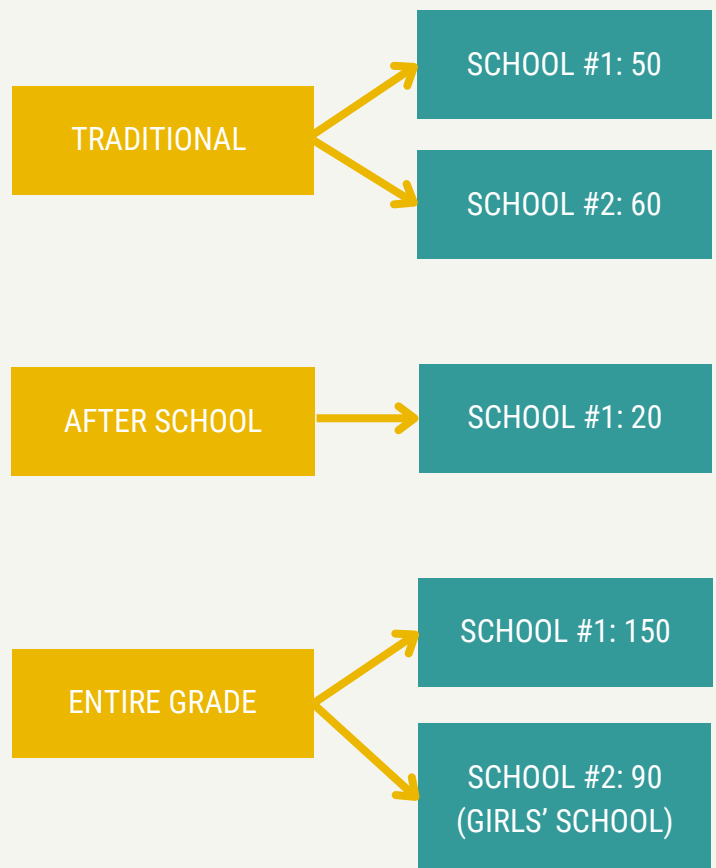


Diagram indicating the number of schools and participants in each model.

# EQ2 FINDINGS

## ATTENDANCE

On average, participants attended 87% of sessions. Upon closer inspection, it was the two schools on the new model that skewed the average. Attendance (dosage) on the new model was >90%. In the opt-in models, average attendance was only 48%, meaning that participants were exposed to only half of the curriculum and available time with the coaches.

*Note: this is normal for sport-for-development interventions. A dosage of 50% is the average, and 75% is the goal.*

The after-school model did not work at all. In fact, the programme was terminated during the year, due to poor attendance. We learned that, although the participants were keen, they could not attend as they would miss their transport and have to take later taxis or buses, which not only cost more (as this would be peak-time travel) but also exposed them to safety risks, as they would arrive home after dark.

## OUTCOMES

Review of the data immediately revealed that the opt-in models, which realised lower dosage, were less effective in realising SoHK's desired outcomes. When the data from these models were removed, all outcomes showed significant impact. This means that although participants and educators report seeing changes in some children in the opt-in models, **effects were definitely stronger in model where participants were exposed to more of the SoHK curriculum and coaches.**

Feedback from the two principals at the schools on the new model reflected what the data showed:

"The grade 9 teachers all comment on how the whole vibe of the grade has changed, they are calm and more in control of themselves."

-Mr Isaacs, Principal,  
Harold Cressy High School

"We have seen a remarkable difference across the entire grade, and the teachers agree, undoubtedly, that is all due to SoHK."

-Ms Monnig, Acting Principal,  
Good Hope Seminary High School



Another variable that was experimented with was gender. In one school the sessions were gender-segregated (a girls' session followed by a boys' session) whilst in the other school sessions were mixed. **Interestingly, when we controlled for gender, we found no significant differences: It makes no difference if the sessions are gender-segregated or not.**



EQ3

# MANDATED THERAPY FOR COACHES?





# THE COACHES

The SoHK coaches are central figures in the organisation. They are the frontline workers who lead SoHK's impact on individuals, schools and communities. The eight coaches undergo specialised training to be able to effectively deliver SoHK's mission, helping them to engage effectively with SoHK's participants, offering guidance and support as needed.

On an almost daily basis, the coaches encounter young individuals grappling with severe issues, frequently rooted in the deep-seated inequality that epitomises South Africa. The twin duties of these coaches is, first, to ensure that SoHK's rigorous curriculum is successfully imparted and, secondly, to ensure those individuals facing particularly acute challenges receive the additional support that they need. Both of these duties are emotionally taxing.

**The emotional toll faced by SoHK's coaches is exacerbated by their own personal circumstances: The coaches, recruited from the same communities and backgrounds as the participants, are themselves navigating challenging circumstances.** Interactions with the participants they mentor may trigger personal emotions, requiring them to confront past traumas that had long been suppressed.

# THE PROCESS

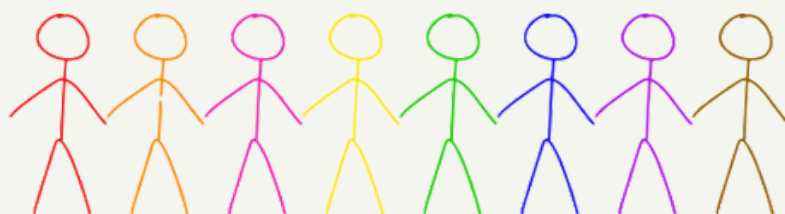
To support the coaches, SoHK took the somewhat controversial approach of mandating therapy for the coaches, and of requiring coaches to provide written pieces of reflections on their experience of therapy.

MONTHLY  
THERAPY  
SESSIONS



As part of their monthly KPIs, coaches are required to attend at least one session with a therapist from Company Wellness, SoHK's Employee Assistance Programme partner. Coaches could choose their own counselor and needed to submit a reflective piece of writing on the experience.

*In this chapter, each coach will be assigned a unique color. Through a random selection, every coach drew a piece of paper bearing a particular color. The color designated to each coach corresponds to their verbal contributions.*



# EQ3 FINDINGS

Initially, many coaches harbored assumptions about therapy that hindered their willingness to engage fully. For instance, some coaches, like **ORANGE**, were conditioned to keep their feelings internalised due to family or cultural norms, while others, such as **PURPLE**, associated therapy with stigma and viewed it as a sign of weakness or abnormality. However, the more that they participated in therapy sessions, the more these assumptions were debunked.

Through the reflective process facilitated by therapy, coaches began recognising the misconceptions in their initial beliefs. They came to understand that **therapy wasn't just for individuals with severe trauma or specific backgrounds**; rather, it provided a safe and constructive space for anyone to explore and process their emotions. As they delved deeper into their own experiences and emotions during therapy, coaches like **ORANGE** acknowledged the importance of allowing themselves to express and address feelings, rather than bottling them up.

Moreover, the practice of **written reflections** emerged as a crucial tool in the coaches' therapeutic journey. Through writing, they were **able to confront and unpack complex emotions, reinforcing the lessons learned in therapy sessions**. This process enabled coaches to gain clarity, increase their emotional intelligence, and cultivate empathy towards themselves and others, with significant implications on their work with SoHK's participants.

## ASSUMPTIONS

"Keep your feelings to yourself. They are yours. Don't make your feelings someone else's problem."

"People who go to therapy have something wrong with them."

"I might bring shame on my family for talking to someone outside of my family."

"Therapy is only for people who have experienced high levels of trauma."

"Therapy is not for normal people."

"Therapy is only for white people!"

## DEBUNKED

"Being given the space to speak and not be judged has given us the skill to allow others TO SPEAK AND NOT BE JUDGED."

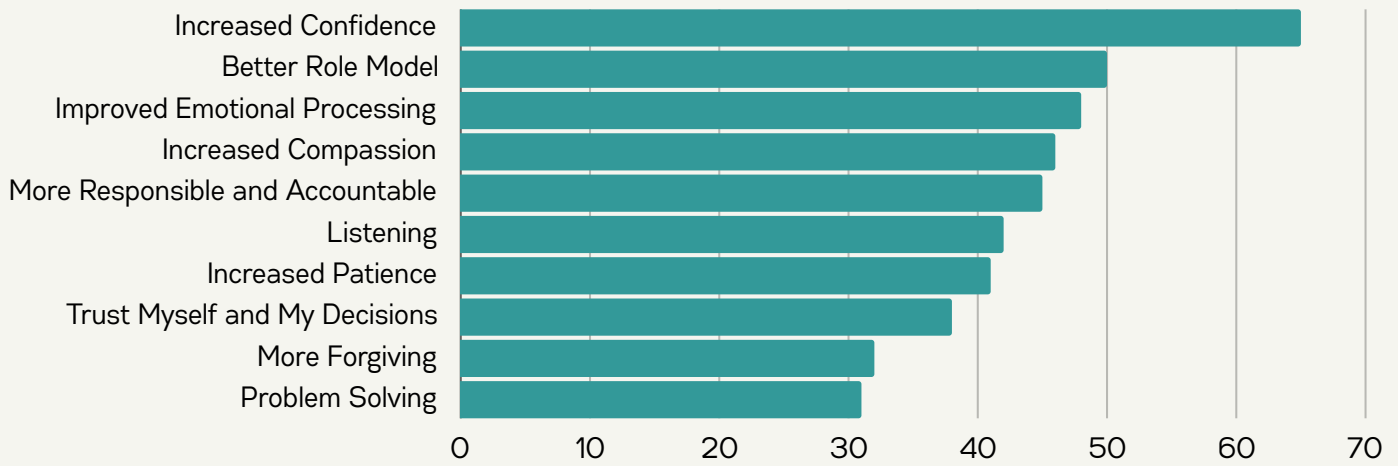
"Kids go through the most!"

"Therapy creates a SAFE, HEALTHY AND PROGRESSIVE space to negotiate your feelings."

"I never felt that anything was wrong with me or that I had experienced anything that needed talking about."

"Everyone needs therapy!"





Coaches were asked to rank the changes they have experienced as a result of therapy.

**RED** believes that SoHK's mandated therapy has helped them to change the narrative from self-blame, to become more compassionate, confident and less angry.

"It is okay to ask for help" says **YELLOW**. Therapy has helped them *identify trauma* in their own life, in order to identify and address the trauma of the participants they are coaching.

Since the passing of their mother, **PINK** went from being outgoing and open to anti-social. Therapy has given them *the space to be heard and guided*.

Since going to therapy, **BROWN** has become more cognisant of their feelings. They have gained *significant confidence*.

For **ORANGE**, therapy has changed how they interact with people: "I am more *open, confident, and willing to listen to others*".

SoHK's mandated therapy has helped **BLUE** to find better *coping strategies* when dealing with grief. Through speaking, they are better able to assist *others who are grieving*.

**GREEN** has experienced clarity in their decision-making: "The therapist allows that space for you and helps guide you to a solution without judgement.

Therapy has helped **PURPLE** to heal parts of themselves that they never knew existed. They have gained a *deeper understanding*.

Mandated therapy has proven to be invaluable in providing the coaches with the toolkit needed to identify and address the issues faced by the participants. Through therapy, coaches have **honed their listening skills and developed a heightened awareness of the emotional needs of those they mentor**. For instance, coaches like **GREEN** and **ORANGE** have reported **becoming better role models due to therapy, which has facilitated personal growth and enhanced their ability to support others effectively**.

The combination of SoHK's training and mandated therapy has contributed to a holistic approach to coaching, emphasising empathy, understanding, and self-awareness. Coaches have learned to empathise with the experiences of the participants by reflecting on their own past and by actively listening and engaging with them. As a result, they are better equipped to connect with and support the individuals they work with, fostering a positive and nurturing environment for growth and development.

**Overall, the integration of both training and therapy has empowered the coaches to fulfill their roles more effectively and make a meaningful difference in the lives of the participants at the School of Hard Knocks.**

# ADDITIONAL FINDINGS



There were additional findings regarding their wellbeing and overall job satisfaction. Firstly, the research indicated a **significant reduction in sick days taken by the coaches compared to previous years**. This decrease suggests that the coaches are experiencing better physical health, potentially attributed to interventions such as wellness programs, improved work conditions, or increased job satisfaction.

Furthermore, the study unveiled a **remarkable decline in mental health leave days** among the coaches. This finding suggests that measures implemented to support mental wellbeing, such as counseling services, stress management programs, or fostering a supportive work environment, have been effective. Reduced mental health leave days indicate that the coaches are better equipped to cope with stressors and challenges associated with their roles, ultimately contributing to their overall job satisfaction and performance.

Lastly, the research revealed a **lower staff turnover rate** among the coaches at the School of Hard Knocks. This finding indicates that the coaches are more likely to remain in their positions for an extended period, which can have several positive implications for the organisation and their participants. Lower staff turnover often correlates with increased continuity, productivity, and morale within the workplace, as experienced coaches bring valuable expertise and stability to the team.

Overall, these findings underscore the importance of prioritising employee wellbeing and job satisfaction in educational institutions like the School of Hard Knocks, as it leads to positive outcomes for both staff and participants.

**Ultimately, therapy not only empowered the coaches to address their own emotional needs but also equipped them with the skills to create a supportive and non-judgmental environment for the participants they mentor.**

# RECOMMENDATIONS

This evaluation has provided useful answers to each of the three EQs.

In relation to EQ1, we found that there is strong evidence that the SoHK programme is effective in improving emotional intelligence, and in destigmatising talking about emotions, while it increases knowledge of, and the ability to use, healthy coping mechanisms. Additionally, there is moderate evidence that the programme improves participants' impulse control and knowledge of gender equity: These improvements culminate in positive observable changes in behaviour.

**We can thus conclude that the SoHK programme fulfils its central mission.**

The impact on participants' mental and emotional wellbeing is particularly impactful when delivered at high dosage, to boys and girls together, answering EQ2.

A crucial component of the programme is the training and wellbeing of the organisation's coaches, the individuals who form the front-line team, delivering the sessions and working closely with the participants. In response to EQ3, we found that the mandated therapy, together with being given a space to reflect on the therapy process, was highly beneficial for the coaches, the organisation and the participants.

**Below are four key recommendations for delivery:**

PUT ALL PARTNER  
SCHOOLS  
ON THE NEW  
DELIVERY MODEL

CONTINUE TO  
MANDATE  
THERAPY

DO NOT  
SPLIT  
GROUPS BY  
GENDER

MAKE  
COACHES  
REFLECT ON  
THERAPY

# ACKNOWLEDGEMENTS

First and foremost we would like to thank our team of **dedicated coaches**. They are our mental health first aiders and the core of SoHK.

Then we would like to thank our **partner schools**. Without their buy-in we would not be able to do what we do.

The **evaluators**, Buck Whaley and Chris Anderson, for your commitment to our learning.

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One in particular, **The DG Murray Trust**, who funded this evaluation.

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