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FOOTBALL ASSOCIATION**

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SABA RETURN TO FOOTBALL PROTOCOL

Preamble

COVID-19 has been responsible for a number of deaths worldwide, with more than 195 000 deaths in the world and 79 deaths in South Africa as of the 24th of April 2020. It has been seven weeks since the first case of the COVID-19 was confirmed in South Africa. The lockdown has actually helped in curbing the spread of the virus hence the praises from the World Health Organization. The government has avoided a massive surge in infections and uncontrolled increase in the number of people needing medical care. The approach was based on the principles of social distancing, restriction of movement and stringent basic hygiene practices. This approach has yielded clear evidence that the lockdown has been effective.

Although athletes are younger and have fewer comorbidities than the general population, and therefore are at lower risk for severe disease or death, preventing the transmission of COVID-19 is necessary to protect those at high risk of death and to slow the pandemic so that our health care system does not exceed its capacity. In South Africa the other challenge is that club football doesn't have comprehensive medical data of athletes because clubs do not have fulltime sports physicians to perform this task. Sports medicine providers involved in the care of competitive footballers should be aware of the prevention strategies for COVID-19, common symptoms for the disease, potential treatment options, and when it may be safe to return to athletic participation.

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National List Members: Bennett BAILEY, Poobalan GOVINDASAMY, Emma HENDRICKS, Ria LEDWABA, Mzwandile MAFORVANE, Thamsanqa MOKOENA, Xolile NKOMPELA, Paseka NKONE, Leonard SHIBE, Mxolisi SIBAM, Anastasia TSICHLAS, Gladwin WHITE, Simphiwe XABA.

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COVID-19 IMPACT ON FOOTBALL

The virus is having a dramatic impact on the football industry, community, fans, and all people involved in football. Travel restrictions, the imperative social distancing, quarantine and isolation requirements and the closure of training facilities effectively make football impossible. Global and regional football events scheduled for 2020 have been postponed or cancelled due to COVID-19 since early March 2020. The FIFA President Mr. Gianni Infantino has made it clear that the health of the players comes first hence the postponement of all FIFA tournaments and qualifiers. CAF has also done the same and SAFA has done exactly the same by suspending all football activities in South Africa.

These impacts do not only threaten the health, human rights, employment and careers of athletes but also the wellbeing of millions whose livelihoods are dependent on the sports industry and its supply chains.

PREVENTION OF COVID-19 IN FOOTBALL

While the typical footballer may only experience mild symptoms as a result of COVID-19, prevention strategies are necessary for multiple reasons. First and foremost, preventing the transmission of COVID-19 is needed to reduce the risk of spread to individuals within the community who are most at risk of severe infection or death, which includes older individuals and the immunocompromised. Prevention of COVID-19 is also important for the competitive footballer to minimize interruptions in training and the adverse effects that it could have on his or her respiratory tract and aerobic capacity in both the short and long term.

Sports medicine providers should support footballers and teams during the COVID-19 pandemic by advocating the following preventative measures:

- I. *Hand hygiene*: Washing hands often with soap and water for at least 20 seconds or using hand sanitizer (at least 60% alcohol), if soap and water are not available. As the virus can survive for days on surfaces, frequently touched objects and surfaces should be regularly cleaned and disinfected.
- II. *Social distancing*: The centers for Disease Control and Prevention (CDC) describes social distancing as remaining out of congregate settings, avoiding mass gatherings, and maintain the distance (approximately 2 meters) from others when possible. This practice is also strongly advocated by our government and unfortunately makes it impossible to play football.

- III. *Travel*: The virus does not move but its people that move the virus. To slow transmission our government has imposed travel restrictions. Measures range from suspending flights, closing the borders, closing inter provincial travelling of people. This makes playing football impossible because it involves travelling in-between matches.
- IV. *Face masks*: The government is now advocating that everyone must wear masks when leaving home however it must be noted that inappropriate use of masks can affect supply and demand to the point where health care workers will have inadequate protection, as we are currently seeing. Playing football while wearing a mask and not touching your face is impossible and actually compromises respiration.

RETURN TO FOOTBALL

The State President, his excellency Mr. Cyril Ramaphosa has announced that the government will implement a risk adjusted strategy through which a deliberate and cautious approach will be taken to the easing of the current lockdown restrictions. He also mentioned that we need to avoid a rushed re-opening that could risk the spread, which would need to be followed by another hard lockdown, as has happened in the other countries. The President mentioned that there will be five coronavirus levels.

This is the proposed return to football programme which should be implemented in relation to the coronavirus levels outlined by the state President. The programme should be put into effect from the 1st of May 2020 when we start level 4.

- I. Level 4 – means activity can be allowed to resume subject to extreme precautions required to limit community transmission and outbreaks.
 - ***A preliminary phase normally performed during the lockdown phase, during which the player trains at home, with the training programme sent and checked remotely by the club staff.***
- II. Level 3 – Involves the easing of some restrictions, including on work and social activities, to address a high risk of transmission. Interprovincial travel restrictions.
 - ***All training venues and building sanitized and all club employees (including players) screened and tested for COVID-19. An individual training phase in which a few club staff members may assist the player during the pitch training. During this phase, it is recommended that a maximum of two players can train on the pitch at the same time, keeping a safe distance between them.***

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- III. Level 2 – Involves the further easing of restrictions, but the maintenance of physical distancing and restrictions on some leisure and social activities to prevent a resurgence of the virus. Movement between provinces restrictions.
 - ***A group training phase (e.g. Goalkeepers, Defenders, Midfielders and strikers), with a maximum of 8 players at a time.***
- IV. Level 1 – Means that most normal activity can resume, which precautions and health guidelines followed at all times.
 - ***A collective training phase with full resumption of training for the whole group.***

Furthermore, during the aforementioned phases, it will be necessary to respect a series of rigorous medical and hygienic-sanitary rules. SAFA would also like to highly recommend that all clubs use this period as an opportunity to hire fulltime sports physicians because they are key role players in managing this current situation and other sports science issues in the near future.

CONCLUSION

COVID-19 has imposed a serious strain to football operations however SAFA prioritizes the health and wellbeing of people over football. At return to play there will probably be a congested period with 2-3 games every 7 days, after a period of detraining. Since both match congested periods and activity variation have been associated with an increased risk of injury, attention should be paid to organizing for each player a tailored schedule of training and matches in order to avoid sudden variations of the load. This will also be necessary in order to avoid potential exercise-induced depression of the immune system.