COVID-19 Considerations and Strategy for a Safe Return to International

Football Competitions: An African perspective

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The COVID-19 pandemic has affected many aspects of life worldwide - educational, economic, cultural, social and sporting¹. To limit the spread of COVID-19, initial containment strategies included proper mask wearing, respiratory and hand hygiene, social/physical distancing and

different levels of lockdown to limit social interaction². While competitive sport has also been

impacted by these measures, risk mitigation protocols have allowed competitions at the national,

international, and professional levels to resume in some countries around the world^{3,4,5}. However,

additional barriers exist on the African continent to safely resume sport that may not exist

elsewhere. These include cost and resource limitations to facilitate player and staff education, safe

team transport, hotel and club sanitization, regular COVID-19 polymerase chain reaction (PCR) testing with short result turnaround times, and access to vaccinations^{6,7}. This commentary outlines

practical recommendations for a scientifically valid COVID-19 risk mitigating strategy to enhance

safety for teams and spectators at African football competitions that accommodates regional

challenges.

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Recommendations for sports organizing authorities

i) Design a guideline

The success of COVID-19 prevention during football competitions must involve a scientifically based risk mitigation plan that can evolve as new evidence and interventions emerge. This plan must be accepted by all stakeholders, including stadium management, National Federations, and executive committees of leagues and individual teams. A well-designed guideline on COVID-19 risk mitigation should be practical, concise and consider the following:⁸

- Involvement of the occupational health and safety guidelines of each country to legally
 align with the host country's regulations and reflect or exceed the requirements for the
 general public.
- A specialized team to coordinate the development of protocols in each country. Ideally,
 this team should comprise medical doctors, legal practitioners, sport administrators, and
 safety and security professionals with experience in sport. Players and coaches must be
 educated on the developed protocols and compliance to these protocols is for their own
 safety, health and well and the safe continuity of the industry.
- Implementation of the risk mitigation plan must be done by each country's National
 Federation or administrative institute. New COVID-19 specific protocols must be adopted
 into the rules and functional framework to ensure compliance. Non-compliance must be
 handled by the league or sport governing body, and the consequences for violations
 clarified and enforced.
- An estimate of the size and density of the crowd should be estimated, ingress and egress within the stadium capacity and infrastructure to define low/medium/high risk events.

ii) Selection of stadium

Selection of the stadia where matches take place is important, especially regarding capacity and facilities. The following aspects must be considered:

- Surveillance of the region/country as to whether there are COVID-19 incidence surges ("waves") or not.
- Positive uptake of vaccinations amongst local citizens to reduce new COVID-19 infection variants and waves.
- Staggered ingress of spectators to avoid congregation. Those with COVID-19 symptoms should not be allowed entry and referred on for COVID-19 testing.
- Accessible facilities for COVID-19 testing and case management should be located nearby (onsite for suspicious cases). Health facilities should be clearly identified and briefed on their specific responsibilities of medical care.

- Appropriate safety and security around the match precinct to respond to spectators ignoring COVID-19 protocols.
- Hand washing stations or hand sanitizer (preferably containing 70% alcohol) should be provided at the entrance of the stadium and available throughout the complex.
- Cleaning staff attending to ablutions should be trained to donn and doff gloves and other
 personal protective equipment at regular intervals. Personal protective equipment should be
 available to all cleaning staff.
- Disinfection should occur in public areas and team locker rooms before and after matches.
- Social distanced seating should be implemented with at least 1.5m between persons (two
 empty seat distance unless they are of the same household) and not exceeding 50% stadium
 capacity.

iii) Mass education

This should be reinforced by placing posters in various areas of the stadium that highlight proper mask wearing over the mouth and nose, appropriate social distancing, and hand and respiratory hygiene.

iv) Vaccination

Even though COVID-19 vaccination is still voluntary in most countries, all adult athletes as well as the staff members should be vaccinated against COVID-19. This will reduce the risk of contracting COVID-19 in the team setting and spreading it. Some airlines and countries require proof of full vaccination and/or COVID-19 testing prior to travel to allow entry and to avoid quarantine. Older adults or those with underlying health conditions at greater risk of experiencing a severe COVID-19 illness should be especially targeted – in the team setting this may include coaches and other support staff (i.e., Kit people, analysts, drivers). Permitting attendance by only vaccinated spectators is strongly advised. Recently, the South African Government launched a "Return to Play" vaccination campaign aimed to further encourage the public to go for vaccinations against COVID-199. In doing this, they are planning to invite, in conjunction with the South African Football Association, a certain number of ONLY vaccinated spectators to stadiums for international competitions. This will be used as a pilot project of returning fans to stadiums. ¹⁰The Union of European Federation of Associations (UEFA) had conducted a successful competition series for the Champions League between June and July 2021. There were specific protocols and requirements in lace for attendees [11].

v) Considerations on prevention measures outside the stadia for teams

Risk mitigating measures should extend to higher-risk areas outside of the stadiums such as hotels and modes of transport. These measures should consider:

- One athlete per room
- Provision of hand sanitizer
- Use of face-masks when in common spaces
- Regular COVID-19 PCR testing (one week and 72 hours prior to accessing the participation bubble, then upon arrival, every 48 hours until the competition begins). Rapid antigen testing could be considered an alternative in vaccinated players and staff members. However, it is important to note that antigen testing (point-of-care testing) is not without caveats. Research suggests, that optimal quality kits, coupled with appropriate testing process, interpretation, timing and frequency yields best outcomes when using these tests. [12]
- A contact-tracing system. This may involve epidemiologists, healthcare surveillance teams and match organizers when there is a positive primary case and inform secondary exposures accordingly. There is a challenge in Africa from all these aspects as the appropriate teams and expertise are not easily available. Hence the contact tracing system may involve a combination of the above with cellular phone industries in order to alert as to whether a match attendee in the past 10-14 days has attended a match and surveillance and response implemented to monitor for a mass super spreader event. [13]

 Table 1: Summary of a COVID-19 mitigation plan for international football competitions in Africa.

Areas of intervention	Characteristics/Important notes	Athletes/Staff	Spectators
Programmatic level	•		
Design and develop a handbook on COVID-19 mitigation strategies	It should be practical, short and concise,Cover all the organizational and technical aspects,Written in a simple language.	 It should include strategies to mitigate the risks both in athletes, staff members and spectators, It should be implemented by all clubs/teams, officials and other stakeholders involved in the competition. 	
Put in place a specialized team to coordinate the implementation of the risk mitigation strategies.	The team should include experienced sport physicians, epidemiologists, virologists, infectious disease specialists, biomedical technicians and representatives from the ministry of public health and sport federations.		
Selection of the stadia where the competitions will take place	 Selection based on whether it is possible to implement prevention measures (maintain physical distance, control the flow of spectators), Selected in areas/neighborhoods with available facilities for COVID-19 testing, quarantine, isolation and case management. 		- Hand sanitisation stations to be easily available
Health facilities involved in the planning should be clearly identified	- All the selected health facilities should be trained and briefed on their specific responsibilities.		
Maintenance of physical distance	 The distance should be based on scientifically sound and internationally recognised recommendations, Seats should be labelled accordingly. 		 Limit unnecessary staff members interacting with the team, Limit the number of spectators (especially if unvaccinated), Guide spectators on the correct seating order in the stadium.
Use of face mask	- Face masks should be standard and validated.	- All athletes should wear a face mask when indoors or not playing.	- Require use of face mask for staff members and spectators all the time.
Education on COVID-19 prevention measures and signs and symptoms Biosafety and decontamination	Should use both the mass media and the posting of messages/symbols in various strategic areas of the stadium	Education should target the athletes, the staff members and the spectators.	

A trained team designated for disinfection should be put in place in each of the stadium							
Hand disinfection at the entry points	- Hand washing stations (with liquid soap) should be placed at the entrance of the stadium Alternatively, hands should be disinfected by an alcoholic based hand sanitizer.		All the athletes, staff members and spectators entering the stadium should				
Disinfection of the potentially infected areas of the stadium (i.e. higher density seating ereas)	 All the potentially infected areas should be disinfected after each game, Perform using appropriate personal protective equipment (gloves, face masks, eye protection and coats). 						
Vaccination							
Must be vaccinated	Make use of any of the COVID-19 vaccines.	- All adult players as well as staff members must be vaccinated.	 Adult spectators should be encouraged to get vaccinated before attending the matches, People with high risk of experiencing severe forms of the disease should be vaccinated or encouraged to avoid going to the stadium. 				
COVID-19 Testing							
COVID-19 test results	Test performed by laboratories which are selected by the country's health authorities. The test kits should be among the WHO approved list for COVID-19 test	 - A negative PCR test result (collected in not more than 48 hours) should be presented by the athletes before each match. - Non-vaccinated staff should present a negative test result before each 	- A negative COVID-19 rapid test or PCR test result (collected in not more than 72 hours) should be presented by non-vaccinated spectators before each match.				
		a negative test result before each match as well.					

Recommendations for spectators

Many of the measures outlined for athletes also apply to spectators (Table 1).

Measures like proper face-mask use (covering nose and mouth), social and physical

distancing, respiratory hygiene and hand sanitizing ² must be obligatory.

• Spectators should be fully vaccinated and/or present a recent (within 72 hours) negative

COVID-19 PCR/Antigen test before attending matches.

Conclusion

To fully resume international football competitions across Africa, we need a common COVID-19

risk mitigation strategy based on regional epidemiology, available resources, the overall

organizational capacity of the African football federations and host countries, and in line with best

practice COVID-19 prevention guidelines. This includes education, planning, and stakeholder and

government buy-in. Proper planning can create a safe environment for both players and spectators

to enjoy the 'beautiful game'.

Competing interests: None.

Contributorship: MD conceived the study idea of this editorial. MD, EZM, ALDW, YB and LP

wrote the first draft and suggested critical revisions and approved the final manuscript.

Funding: No funding for this editorial.

Acknowledgements: Not applicable

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Reference

[1] Haleem, A., Javaid, M. and Vaishya, R., 2020. Effects of COVID-19 pandemic in daily life.

Current medicine research and practice, 10(2), p.78.

[2] Flaxman, S., Mishra, S., Gandy, A., Unwin, H.J.T., Mellan, T.A., Coupland, H., Whittaker, C.,

Zhu, H., Berah, T., Eaton, J.W. and Monod, M., 2020. Estimating the effects of non-

pharmaceutical interventions on COVID-19 in Europe. Nature, 584(7820), pp.257-261.

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- [3] Meyer T, Mack D, Donde K, Harzer O, Krutsch W, Rössler A, Kimpel J, von Laer D, Gärtner BC. Successful return to professional men's football (soccer) competition after the COVID-19 shutdown: a cohort study in the German Bundesliga. Br J Sports Med. 2021 Jan;55(1):62-66. doi: 10.1136/bjsports-2020-103150. Epub 2020 Sep 24. PMID: 32972979; PMCID: PMC7788215.
- [4] Jones B, Phillips G, Kemp S, Payne B, Hart B, Cross M, Stokes KA. SARS-CoV-2 transmission during rugby league matches: do players become infected after participating with SARS-CoV-2 positive players? Br J Sports Med. 2021 Jul;55(14):807-813. doi: 10.1136/bjsports-2020-103714. Epub 2021 Feb 11. PMID: 33574043; PMCID: PMC7886661.
- [5] Schumacher YO, Tabben M, Hassoun K, Al Marwani A, Al Hussein I, Coyle P, Abbassi AK, Ballan HT, Al-Kuwari A, Chamari K, Bahr R. Resuming professional football (soccer) during the COVID-19 pandemic in a country with high infection rates: a prospective cohort study. Br J Sports Med. 2021 Oct;55(19):1092-1098. doi: 10.1136/bjsports-2020-103724. Epub 2021 Feb 15. PMID: 33589470; PMCID: PMC7886664.
- [6] Wadvalla, B.A., 2020. How Africa has tackled covid-19. bmj, 370.
- [7] Asundi, A., O'Leary, C. and Bhadelia, N., 2021. Global COVID-19 vaccine inequity: The scope, the impact, and the challenges. Cell Host & Microbe, 29(7), pp.1036-1039.
- [8] Ramagole, D.A., van Rensburg, D.C., Pillay, L., Viviers, P., Zondi, P. and Patricios, J., 2020. Implications of COVID-19 for resumption of sport in South Africa: A South African Sports Medicine Association (SASMA) position statement. South African Journal of Sports Medicine, 32(1), pp.1-6.
- [9] https://www.gov.za/speeches/sport-arts-and-culture-launches-%E2%80%9Creturn-play-%E2%80%93-it%E2%80%99s-your-hands%E2%80%9D-national-campaign-8-sept-7
- [10] https://www.safa.net/2021/10/04/safa-minister-of-health-agree-on-return-of-fans-to-the-stadium/
- [11] Union of European Football Associations (UEFA). UEFA EURO 2020 Code of Conduct for Spectators, March 2021. https://editorial.uefa.com/resources/0268-11fe38356536-8f3c3625933e-1000/20210408_uefa_euro_2020_code_of_conduct_-_spectators_final.pdf

- [12] Kost, G.J., 2021. Diagnostic strategies for endemic coronavirus disease 2019 (COVID-19): Rapid antigen tests, repeat testing, and prevalence boundaries. Archives of Pathology & Laboratory Medicine.
- [13] Nachega, J.B., Grimwood, A., Mahomed, H., Fatti, G., Preiser, W., Kallay, O., Mbala, P.K., Muyembe, J.J.T., Rwagasore, E., Nsanzimana, S. and Ngamije, D., 2021. From easing lockdowns to scaling up community-based coronavirus disease 2019 screening, testing, and contact tracing in Africa—shared approaches, innovations, and challenges to minimize morbidity and mortality. Clinical Infectious Diseases, 72(2), pp.327-331.