



YOUTH SPORTS AND ACTIVITIES GUIDANCE (School & Non-School Sports and Activities)

Participation in youth sports and activities is an important part of the growth and development of children and provides both physical and mental health benefits. By their nature, youth sports and activities bring together children and adults from different neighborhoods and communities. This can lead to increased risk of COVID-19 spread and introduction or reintroduction of the virus into new areas. While COVID-19 is circulating widely in the United States, measures should be taken to ensure that activities are conducted in a way that minimizes risk. Youth sports and activities can be high-risk and lead to exposures and quarantines.

Vaccination is the leading public health prevention strategy in the United States to help end the COVID-19 pandemic. Other tools to combat the pandemic include masking, ventilation, home isolation of sick people, cleaning and disinfection, and social distancing. Until children under the age of 12 are eligible for vaccination and more people are fully vaccinated, all other available tools to slow the spread of the virus that causes COVID-19 should be implemented in youth sports and activities.

The following are public health recommendations for youth sports and activities based on levels of community spread, vaccine status, and associated risk.

During Every Level of Community Transmission

- Refer to this CDC [checklist](#) for Coaches to help protect players as well as a [list of strategies](#) to reduce the spread of COVID-19 in youth sports.
- Adhere to local/state orders and advisories for information on gathering sizes and limitations on spectators.
- Vaccination is the best strategy to reduce the spread of COVID-19. The [vaccine is currently available](#) and recommended for individuals 12 and older.
- Considerations should be made to hold practices and games outside when possible, and for [increased ventilation](#) of indoor settings via opening doors or windows, when safe to do so.
- Heating, Ventilation, and Air Conditioning (HVAC) and air-filtration systems in gyms, locker rooms, training rooms, weight rooms, and other facilities should be routinely maintained.
- All athletes, coaches, officials, spectators, and volunteers should follow public health recommendations for masking and distancing, based on level of community transmission and risk of activity outlined below.

- Activities to include, but not limited to, speech, band, music, choir, debate, and drama present increased risk despite being low contact. Physical distancing and universal masking should be implemented when possible. *Moving these activities outdoors when possible increases ventilation and available space for physical distancing.*
- While traveling by bus, everyone should wear masks and windows should be open to allow for ventilation.
- Monitor athletes and coaches/staff for signs and symptoms of COVID-19 and require ill people to stay home.
 - *Work with local public health district if an individual develops symptoms or tests positive for COVID-19. If the local public health district is not immediately available, follow CDC guidelines for [When Someone is Diagnosed with or Exposed to COVID-19](#).*
- After exposure to someone with COVID-19, follow quarantine recommendations per the Centers for Disease Control and Prevention ([CDC](#)) [guidelines](#).
- Routinely clean and disinfect equipment and surfaces.
- Discourage sharing of water bottles and cups.
- Provide supplies for, and encourage frequent hand washing; provide hand sanitizer with at least 60% alcohol when possible.
- Encourage athletes to participate in individual drills and small group activities, instead of whole team or large group activities.
- Encourage participants to use their own equipment, when possible.
- Share safety protocols and procedures with spectators (do not attend if ill, mask requirements, physical distancing, etc.)

Screening Testing

Options for support for testing in schools can be found on the [Idaho State Department of Education](#) website.

Encourage the use of screening testing for athletes, coaches, athletic trainers, and other staff participants who are not fully vaccinated.

- The CDC does not recommend repeat screening testing for infected individuals within the 90-day window following infection or for fully vaccinated individuals, unless symptoms warrant such an evaluation as determined by a physician.
- Fully vaccinated individuals should be tested 3-5 days after an exposure to COVID-19 and wear a mask in public spaces until they receive a negative test result. If they decline testing, they should wear a mask in public for 14 days after the exposure.

	Low Transmission	Moderate Transmission	Substantial Transmission	High Transmission
High risk sports and activities	Screening testing at least once per week for unvaccinated participants		Screening testing at least twice per week for unvaccinated participants	Cancel or hold activities virtually unless all participants are vaccinated*
Low- and intermediate-risk sports	Screening not recommended	Screening testing at least once per week for unvaccinated participants.		

*Canceling or holding activities virtually is the safest option in communities experiencing high transmission. If activities continue in-person, screening testing with a test with a rapid (<24 hour) turnaround time at least twice per week for unvaccinated individuals should be considered.

CDC website for [low, moderate, substantial and high transmission](#)

Examples of sports by risk:

Low Risk: diving, golf

Intermediate Risk: baseball, cross-country, soccer

High Risk: football, wrestling, volleyball, basketball

High-risk extracurricular activities are those in which increased exhalation occurs, such as activities that involve singing, shouting, band, or exercise, especially when conducted indoors.

Recommendations by Level of Community Transmission

Reference the tables below for guidance on masking and physical distancing. Masking exceptions should be made for sports which masking may pose a choking or safety hazard, such as swimming, diving or other water sports, gymnastics while on any apparatus, competitive cheerleading (tumbling, stunting, flying), and during wrestling contact. "Participants" refers to student athletes and adults (e.g., coaches, teachers, advisors) who participate in and support these activities.

High (Red) Community Transmission

Screening testing should be conducted as specified in the screening testing section above.

	Indoor	Outdoor
High risk sports and activities	Cancel or hold virtually unless all participants are vaccinated	Cancel or hold virtually unless all participants are vaccinated
Low- and intermediate - risk sports	Universal masking and physical distance of six (6) feet maintained	Universal masking and physical distance of six (6) feet maintained

Athletes and participants should always wear a face mask:

- Between practice drills.
- While not on the playing field/on the sidelines.
- Arriving or departing from the playing facility.
- When in the locker rooms, weight rooms, or athletic training rooms.
- During shared transportation to and from an event (although carpooling is discouraged).

Substantial (Orange) Community Transmission

Screening testing should be conducted as specified in the screening testing section above.

	Indoor	Outdoor
High risk sports and activities	Universal masking and physical distance of six (6) feet maintained	Universal masking and physical distance of six (6) feet maintained
Low- and intermediate - risk sports	Universal masking and physical distance of six (6) feet maintained	Universal masking and physical distance of six (6) feet maintained

All athletes and participants should always wear a face mask for the following:

- Between practice drills.
- While not on the playing field/on the sidelines.
- Arriving or departing from the playing facility.
- When in the locker rooms, weight rooms, or athletic training rooms.
- During shared transportation to/from an event (although carpooling is discouraged).

Moderate (Yellow) Community Transmission

Screening tests should be conducted as specified in the screening testing section above.

	Indoor	Outdoor
High risk sports and activities	Universal masking and physical distance of six (6) feet maintained	Universal masking and physical distance of six (6) feet maintained
Low- and intermediate - risk sports	Universal masking and physical distance of six (6) feet maintained	Universal masking and physical distance of six (6) feet maintained

Low (Blue) Community Transmission

Screening tests should be conducted as specified in the screening testing section above.

	Indoor	Outdoor
High risk sports and activities	Masking of unvaccinated participants and physical distance as much as possible	Masking of unvaccinated participants and physical distance as much as possible
Low- and intermediate - risk sports	Masking of unvaccinated participants and physical distance as much as possible	Physical distance as much as possible

When determining if sports and other activities will be held or how to hold them safely, it is important to determine the risk associated with the activity. The following considerations will also help determine risk level and are especially important to consider when individuals who are not fully vaccinated are involved in the event.

Risk Considerations:

- **Setting of the sporting event or activity.** In general, the risk of COVID-19 transmission is lower when playing outdoors than indoors. Consider the ability to keep physical distancing in various settings at the event (i.e. fields, benches/team areas, locker rooms, spectator viewing areas, spectator facilities/restrooms, etc.).
- **Physical closeness.** Spread of COVID-19 is more likely to occur when sports require sustained close contact, such as wrestling, hockey, and football.
- **Number of people.** The risk of spread increases with the increasing number of athletes, spectators, teachers, and staff.
- **Level of intensity of the activity.** The risk of spread increases with the intensity of the activity.

- **Duration of time.** The risk of spread increases the more time athletes, coaches, teachers, staff, and spectators spend in close-proximity or in an indoor group setting. This includes time spent traveling to and from sporting events, meetings, meals, and other activities related to the event.
- **Presence of people more likely to develop severe illness.** People at an [increased risk of severe illness](#) might need to take extra precautions.
- **Sport-specific training and competition, cross-training, or other aspects of training.** For example, football is an outdoor sport for training and competition, but lifting in the indoor weight room would require additional risk-mitigation strategies.

Safely Returning to Play

Follow American Academy of Pediatrics (AAP) Return to Play Guidelines for a child or adolescent who is COVID-19 positive:

- **Asymptomatic** or **mildly symptomatic** (<4 days of fever >100.4°F, <1 week of myalgia, chills, and lethargy): Recommended to follow guidance based on a **phone or telemedicine visit with the pediatrician**.
- **Moderate** symptoms of COVID-19 (≥4 days of fever >100.4°F, ≥1 week of myalgia, chills, or lethargy, or a non-ICU hospital stay and no evidence of multisystem inflammatory syndrome in children [MIS-C]): Recommended to follow guidance based on an evaluation by their primary care physician.
- **Severe** COVID-19 symptoms (ICU stay and / or intubation) or **multisystem inflammatory syndrome** in children (MIS-c): Recommended restriction from exercise for a minimum of 3-6 months and cardiology clearance prior to resuming training or competition.

The AAP recommends not returning to sports/physical activity until children or adolescents have completed quarantine, the minimum amount of symptom-free time has passed, they can perform normal activities of daily living, and they display no concerning signs/symptoms. All children younger than 12 years may progress back to sports and physical education classes according to their own tolerance.

For children and adolescents 12 years and older, a graduated return-to-play protocol is recommended. The progression should be performed over the course of a 7-day minimum. Consideration for extending the progression should be given to children and adolescents who experienced **moderate** COVID-19 symptoms, as outlined above.

American Academy of Pediatrics. COVID-19 Interim Guidance: Return to Sports (June 4, 2021).
<https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-interim-guidance-return-to-sports/>

Resources for Use and More Information:

[Guidance for COVID-19 Prevention in K-12 Schools](#) | **CDC**

[Guidance for Operating Youth Camps \(cdc.gov\)](#) | **CDC**

[Participate in Outdoor and Indoor Activities](#) | **CDC**

[When You've Been Fully Vaccinated](#) | **CDC**

[Delta Variant: What We Know About the Science](#) | **CDC**

[Your Guide to Masks](#) | **CDC**

[COVID-19 Interim Guidance: Return to Sports and Physical Activity \(aap.org\)](#) | **AAP**

[Resocialization of Collegiate Sport: 2021 Fall Training and Competition](#) | **NCAA**

[NFHS Joins White House Effort to Encourage COVID-19 Vaccinations](#) | **NFHS**

[Vaccine Locations](#) (English & Spanish translation available) | **IDHW**