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Public Health
Prevent. Promote. Protect.

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HEALTH RISK COMMUNICATION TO PARENTS AND STUDENTS WITHIN ROCKLAND COUNTY

Key Items to Consider Before Allowing Your Child to Engage in Higher-Risk Sports and Recreation Activities

- COVID-19 is still highly prevalent and variant strains have been found in the County
- Higher-risk sports and recreation activities increase the possibility of transmission of COVID-19 among students, their families, and their community
- Studies of sport-related transmission show that the brief interactions which occur during these activities increase transmission risk, even if it's less than 15 minutes
- Competitions and tournaments also increase the risk of spread through additional interactions like riding on team buses and interacting/congregating in locker rooms

I hope that this finds you and your family healthy and safe. At the Rockland County Health Department, the protection of the public's health is our fundamental goal. Governor Cuomo has announced that schools may allow sports and recreational activities associated with a high risk for COVID-19 transmission as of February 1, 2021 if permitted by local health departments. **This information is provided to you at this time in order for you to make an informed choice for your child regarding their participation in these activities, as you know your child and their circumstances best.**

The impact of the COVID-19 global pandemic has resulted in 34,830 confirmed cases, 5,544 cases in children ages 0 – 18 (15.9%), as well as 842 deaths among Rockland County residents as of February 2, 2021. The prevalence of COVID-19 in our region is higher than the statewide average. Our County 7-day percent positivity rolling average is 5.7% compared to the statewide of 5.3%, case rates are posted at <https://forward.ny.gov/early-warning-monitoring-dashboard>, and the 7-day average number of cases is 166 per day as of February 2, 2021. To understand how these numbers may translate to risk in schools, please refer to the CDC's "Indicators and thresholds for risk of introduction and transmission of COVID-19 in schools" found at <https://forward.ny.gov/early-warning-monitoring-dashboard>

In addition, we are finding that there are variant strains present in our Mid-Hudson Region, and other counties in New York State. Globally, we are seeing reports of a disproportionate impact of the United Kingdom's COVID-19 variant (SARS CoV-2 UK (B.1.1.7)) in women and children. While Rockland County is using every dose of vaccine given to us by the State, we are nowhere near achieving "herd immunity" with the current rate of vaccine allocation. Children and adolescents are at risk for acquisition of COVID-19 and serious illness or death among members of this age group has occurred

here in New York State. Furthermore, vaccines are not yet approved for children or adolescents under the age of 16, and New York State has not yet permitted vaccination of children ages 16-18. Thus, vaccinations are not yet providing protection for students engaged in activities associated with a high risk for COVID-19 transmission.

Because this virus is relatively new, and although some symptoms are common among those suffering from the illness, the complete list of symptoms, as well as long term complications remain unknown. In fact, some children seem to be at risk for developing more severe complications from COVID-19, such as multi-system inflammatory syndrome in children (MIS-C), which is of great concern, especially for children who are medically fragile. For more information about MIS-C, please visit the following website: <https://www.cdc.gov/mis-c/>

At present, it cannot be predicted who will become severely ill, although older people and those with underlying health conditions are at higher risk. The long-term effects of COVID-19 are not known; even otherwise healthy people with mild cases may experience long-term complications and disability. Of additional concern is that the American Academy of Pediatrics noted that in the two-week period from 12/31/20-1/14/21, there was an 18% increase in childhood COVID-19 cases.

Please understand that the State’s decision to permit activities associated with a high risk for COVID-19 transmission does not mean that the health risk from COVID-19 has been eliminated. In fact, as the recent study by the Journal of the American Medical Association found, while in-school transmission of COVID-19 was not found to be high, the resumption of in-person athletics increased the risk of transmission. This increase was particularly evident in wrestling. This study concluded that:

“Even though high school athletics are highly valued by many students and parents, **indoor practice or competition and school-related social gatherings with limited adherence to physical distancing and other mitigation strategies could jeopardize the safe operation of in-person education.** While there are likely many factors, the pressure to continue high school athletics during the pandemic might be driven at least in part by scholarship concerns; colleges and universities recruiting athletes for the 2021/2022 academic year should consider approaches that do not penalize students for interruptions to high school sports related to the pandemic to avoid incentivizing activities posing high risk for SARS-CoV-2 infection.

<https://jamanetwork.com/journals/jama/fullarticle/2775875>. Also of note, the CDC recently reported on an outbreak of COVID-19 at a wrestling tournament, further highlighting the risks, including death inherent in these types of sports. For more information regarding the CDC investigation, please see <https://www.cdc.gov/mmwr/volumes/70/wr/mm7004e4.htm>

As you are aware, any time people are gathered, there is a risk of exposure to COVID-19, which can lead to serious medical conditions and even death. Symptomatic and asymptomatic individuals can spread the virus. Indoor, close contact practices and tournament events increase this risk for athletes, coaches and other bystanders including parents. In the Spring of 2020, we witnessed the resumption of college sports activities which resulted in campus closings, conversion to remote learning, and increased community transmission. Masking, distancing, and other mitigation measures reduce, but do not eliminate risk. The American Academy of Pediatrics COVID-19 Interim Guidance: Return to Sports warns that masks cannot be worn for all activities and described medical clearance needed for student

athletes who have contracted COVID-19 in the past. Please see: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-interim-guidance-return-to-sports/> for more information regarding these requirements.

Additionally, there is a significant risk of transmission to those in the home of an infected student-athlete. The JAMA study noted that, **“Outbreaks among athletes participating in high contact sports can impact in-person learning for all students and increase risk for secondary in-school and community transmission with potentially severe outcomes, including death.”** Part of the increased risk is because transmission can occur through cumulative brief interactions, such as those which occur during athletic activities, which has been confirmed by the CDC. In a study entitled, “Implementation and Evolution of Mitigation Measures, Testing, and Contact Tracing in the National Football League, August 9–November 21, 2020”. In this study the CDC concluded that, COVID-19 transmission could occur following less than 15 minutes of cumulative interaction. For more information, see <https://www.cdc.gov/mmwr/volumes/70/wr/mm7004e2.htm>.

Parents should understand that other social interactions which occur during organized activities, outside of an actual practice or competition, also increase risk of transmission among student-athletes. These include, but are not limited to, interactions in locker rooms and buses. Many counties have had experience with positive athletes attending sports tournaments, which have resulted in additional athletes being isolated and quarantined, and exposure to others resulting in positive cases of COVID-19.

Decisions made by parents and guardians today can help contribute to the safest possible in-person operation of schools. These are difficult decisions and require a balancing of the public health best practices to limit the transmission of COVID-19 in the community and other societal factors. As we collectively learn more about this ongoing pandemic, new health information will be shared with you. With two vaccines now being distributed and more vaccine options anticipated in the near future, there is every reason to hope for a much safer environment for schools and school-related activities as time progresses. However, as noted above, there are no SARS COVID-19 vaccines that have been authorized for use in individuals under 16 years of age, at this time.

Please keep all of the foregoing in mind as you make the decision on whether or not to allow your child to participate in sports and recreation activities known to place them at a high risk for acquiring COVID-19.

The Health Department takes the health and safety of our children very seriously, even more so during the worst public health crisis in a century. While infection rates are increasing daily, we need to proceed with caution and take every step possible in resuming in-person activities safely and responsibly.

Best regards,



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