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Sport in the Face of the COVID-19 Pandemic: Towards an Agenda for Research in the Sociology of Sport

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Sport in the face of the COVID-19 pandemic: towards an agenda for research in the sociology of sport

These are extraordinary times. Less because we are currently in the midst of a global pandemic; humanity has been here multiple times in the past, sometimes with even more devastating results (the 'Black Death' of 1346–1353, or Cocolitzli Epidemics in the 16th Century, for example). Rather, these are extraordinary times due to both the huge shutting down of industry, travel and borders, and the enormous level of coverage and discussion of the crisis through both traditional and social media formats (Stevens & Prins, 2020). Moreover, global, regional and national comparisons and discussions have become commonplace with regards to everything from healthcare preparedness and the social response to financial pressures, work-life balance considerations and environmental concerns. Perhaps as a consequence, pop-up 'experts' on the characteristics of the virus, its real (and imagined) socio-economic, cultural and social impacts, and what it might mean for the future have filled our television and computer screens, the airwaves and social media feeds. Experts, professionals and others from fields as diverse as psychology, economics and politics continue to provide such commentary, and a frankly enormous volume of 'COVID-19' related content has begun to fill the print and electronic pages of our existence. Such content is also now beginning to focus upon the implications of the virus for sport, exercise and physical activity.

Nevertheless, we note whilst much has been *said* about the present and future impact of this pandemic, much less is *known*.

Indeed, biomedical, socio-cultural, economic and political trends associated with the response to the pandemic are only now beginning to emerge. At the time of writing, much of the global workforce sits in -or is beginning to emerge from- isolation. According to the regular press conferences and updates provided by the governments of our countries, politicians, scientists and others are currently attempting to manage a response to the pandemic. One key consideration has been how to maintain balance between interdependent health and economic risks, resulting in an ongoing debate about how long the shutdown can be maintained before economic collapse becomes inevitable. This debate has been particularly vociferous (even bordering on civil disobedience or social unrest) in countries with minimal welfare support for the most needful. Such discussions have been characterised by increased urgency as the contagion has caused many industries to slow, move online or even come to a full halt for a period of weeks, if not months. What's more, the personal impact of this 'lockdown' is also only just now beginning to emerge. Whilst some people continue to attempt to balance working from home with childcare and other responsibilities, others have had their income reduced or even lost their employment. Conversely, many people in 'essential jobs,' including medical professionals and those working to maintain the food supply, continue to risk their health in an attempt to limit the impact of the pandemic and to support the wider population. The Academy has raced to respond, particularly in the fields of medicine and economics. Multiple 'rapid reviews' of medical evidence have been conducted as evidence about the effects of the virus has emerged in order to maximise treatment effectiveness and risk management (e.g.

Greenhalgh, 2020; Mullins et al., 2020; Thornton, 2020), and governments continue to use scientific evidence in their attempts to construct a response moving forward. The production of such evidence will doubtless continue to proliferate for some time into the future.

And yet, this disruption has been uneven, unequal and frankly at times, unjust. Shocking stories have circulated about how the wealthy can 'skip the queue' in order to be tested for the virus, sometimes even ahead of at-risk and essential healthcare workers (e.g. Schaffer, 2020). Similarly, whilst some celebrities reportedly complain about being stranded in their mansions (e.g. Lee, 2020), deaths within care homes remain uncounted, sometimes unnoticed, for days after the fact (e.g. Dickie & Plimmer, 2020). Surely, the pandemic has once again highlighted the economic and cultural inequalities that beset our societies, placing them under increased scrutiny.

Sport has also seen similar effects. Whilst state responses have varied widely, the global response has prompted the almost total shutdown of competitive sport at all levels. This shutdown has thus far included multiple postponements of mega-events such as the Olympic Games and European Football Championship, not to mention various leagues and events in sports as diverse as tennis, hockey and formula 1 (see Parnell et al., 2020). What's more, despite initial reticence from bodies such as UEFA and the IOC, their subsequent decisions to postpone or delay such events have been met with positivity from various stakeholders (Stevens & Prins, 2020). Nevertheless, whilst the pandemic has limited the extent to which people, including both athletes and the general population, can move around, exercise and socialise with one another (Mann, 2020) contradictory evidence is also emerging that many are more aware of the importance of physical activity than ever (e.g. Potts & McKenna, 2020). Clearly, evidence about the long-term impact of the virus on sport is only now beginning to emerge. We simply do not yet know what sport will look like following the pandemic, particularly given the early evidence to suggest the virus that caused the pandemic is likely to become a regular fixture in life from this point forward.

The intention of this editorial, therefore, is not to provide 'answers,' commentary or opinions. Nor is it our intention to 'get ahead of the game' by providing sweeping predictions about what sport will look like in a post-pandemic world (if that world exists), however tempting that might be. Again, we simply *do not know* what the long-term impact of this potentially long-term health threat will have on sports participation. What we can do, however, is ask questions. Hence, we would like to take a Socratic approach, to mobilise our sociological imaginations by reflecting on our personal troubles in order to situate them within the wider context, and hence to utilise the space afforded us here to suggest some of the questions that seem relevant to us (specifically in the sociology of sport) because of the pandemic. In so doing, we hope to stimulate the development of tentative questions to which we, as sociologists of sport, should attempt to provide answers over the coming weeks, months and years.

1. What role will sport, exercise and physical activity play in the future?

The first area that has piqued our sociological curiosity over the past months relates to the fundamental purpose of sport; who it is for, what counts as 'sport' (and physical activity and exercise), and how might this change over the forthcoming weeks, months and years. Questions about whether sport will even be possible in the forms and formats of the past will be central considerations, whilst new processes of re-sportization and de-sportization as new regulations on social distancing and civilised (or risk-averse) conduct could be key foci.

For example, how will the oft-held assertion that sport is actually an 'industry' be challenged, transformed or reconceptualised now that the precarity of sport has been exposed? Few industries have seen such immediate impact as that seen in professional sport, in which the cancellation of a single event, competition or even match has apparently placed severe and urgent strain on wage-payments, prize monies and the livelihoods of those concerned. The suggestion is that such pressures have been felt at multiple levels, where clubs and associations who are reliant upon memberships or fees have seen their operations curtailed for the time being. These economic pressures have been unevenly experienced, however, according factors including lost revenue, disruption to athletic careers and salaries, cash flow difficulties, unemployment and loss of commissions for free-lancers, loss of volunteer support and changes to business strategies (EOC, 2020, EU2020HR, 2020). These factors include timescale, seasonality and schedules, where those clubs in the midst of their seasonal activities, or organisations whose primary tournament or event was about to be delivered are likely to have been affected more than those for whom the pandemic fell during the off-season. How will such issues be controlled or alleviated, and upon whom will the costs fall most severely? This remains unclear.

Second, pressures are uneven due to the distribution of resources and facilities, and budgets will have been affected by facility ownership, payment schedules for rentals or maintenance, the level of support available and usage. Such impacts might have varied geographically, where some clubs may be supported by local authorities and governments by accident of a local or national policy, whereas others may not, resulting in some being compensated for lost revenues whilst others might not. Indeed, precisely upon whom any financial deficit eventually falls is open to question, and could be dependent upon local and national geopolitical contexts (i.e. the ability of a government to support infrastructure due to an advanced welfare system). This is clearly an area to which sociologists of sport can contribute knowledge and guidance. Moreover, at such times more fundamental questions are relevant, including questioning what counts as 'sport,' whether sport is indeed part of the welfare system (as many have argued in the past), whether it is part of the state or private sectors (Thiel et al., 2016), and whether it is indeed a 'special case' or not will become paramount. Such questions lead us to our second area of inquiry with regards the way sport is organised and supported.

2. Will the organisational structure of sport change in response to the pandemic?

It has already been highlighted elsewhere that the global shut-down or postponement of competitive sport at the elite levels is precluded on the notion that such 'mass gatherings' significantly exacerbate the risks of the spread of the virus because of the widespread networks they are based upon (Parnell et al., 2020). Some sources even discuss the end of globalisation *per se*, citing the combined effects of the virus, nationalist and populist trends in politics and environmental concerns (e.g. Bremmer, 2020). Such observations raise questions about the extent to which global sport will be viable in the future, requiring us to consider whether the continued globalisation of competitive sport can continue at a sustained pace, or whether new limits based around health parameters must be introduced to the movement of athletes on regular 'tours' or for international events. What's more, relatively little has been said about the impact of social distancing or isolation on sport at a more general, community-based or local level.

Sport (used in its widest sense) is commonly organised through regional, local and grass-roots clubs, associations and other local institutions which facilitate and support

sporting communities across Europe (e.g. Fahlén & Stenling, 2016; Ibsen & Ottesen, 2003; Van Tuyckom & Scheerder, 2010). Such institutions are often based upon a centuries-old logic that suggests the benefits of sport are to be found both in its physical characteristics, but also in its potential to support sociability through supportive communities of mutually-oriented people (e.g. Andersen et al., 2019). However critical we are towards how effective sport is in promoting such benefits, most of us would accept that socialising through sport has the potential to be largely beneficial to physical, mental and social health, and that the benefits largely outweigh the pitfalls.

Yet in the present time it might be necessary to ask difficult questions about these assumptions. For example, what happens when proximity to others in the community becomes a threat? What if 'sport for all' is unsustainable, at least in its most literal sense, because of heightened health risks in some groups (e.g. older adults, the chronically ill, or pregnant women)? What does it mean for sports clubs and institutions if the communities for whom they exist become characterised as 'vectors,' or conduits through which health threats such as COVID-19 spread? How will such factors affect the rules and regulations in sport with regards hygiene and contact have to be altered or enforced (e.g. the Dutch FA has stated spitting on the football pitch will now result in a yellow card)? And to what extent will it still be possible to build sport around these existing organisational blocs which, at their heart, are based around notions of the community, inclusiveness and mutual support? Again, it might be that some sports are affected more than others due to the way in which a virus spreads (e.g. in the case of the Netherlands, team or indoor sports are more limited than solitary or outdoor adventure sports). Similarly, it might be that specific groups of participants find their sporting opportunities more limited than others (e.g. 'risky' groups might become more marginalised). Indeed, these are traditional sociological problems, and it is to considering the effect of the pandemic on sporting inequalities that we now turn.

3. Will the inequalities highlighted by the pandemic begin to be addressed?

Further trends have been observed that are linked to inequality, with some suggesting that the rates of infection are higher amongst populations less able to self-isolate due to financial concerns, including those on precarious contracts or who lack savings and who cannot simply 'pause' their working lives due to a lack of welfare support. Similar pressures also exist amongst those living in poverty or in physical living circumstances that make maintenance of social distance impossible (e.g. those who live in high-density housing). Similarly, those defined as 'essential workers' have also often been unable to maintain social distance due to their roles in healthcare, education, delivering goods or in food retail, for example, and healthcare workers in particular are apparently at extreme risk of infection in many countries. Moreover, several groups have largely been absent from the wider discourse about risk, including some of society's most marginalised groups such as the homeless, refugees or those stranded in migrant camps due to newly closed borders. Yet trends are beginning to emerge which suggest (rather predictably) that such groups are more likely to be negatively impacted than wealthier groups. What's more, we note that increases in ethnic discrimination have also been reported as a result of this pandemic, with some labelling COVID-19 the 'Chinese Virus' (Leigh, 2020). Again, evidence suggests that the number of attacks and a rise in abuse directed to those of East-Asian Ethnicities is on the increase, perhaps as a consequence (e.g. Guy, 2020). Conversely, it has been observed in some quarters that more financially-secure people, including company

owners and those who can work from home and continue to be paid, have been less negatively affected - or even have benefited from the pandemic. Indeed, in some cases there have been reports from some countries of some business owners claiming support from their host government even though their workers have been fired (e.g. Neate, 2020; Newton, 2020). Similarly, but somewhat conversely, some EPL-clubs were reported to be benefitting from the Furlough plan yet continuing paying £100,000-a-week-plus stars in full (Meehall Wood, 2020).

Such socio-economic inequality is also manifest within sport. For example, one group amongst whom particular scrutiny has fallen is elite footballers, sometimes due to direct pressure from politicians (France24, 2020). For example, the Health Minister of the UK directly called on professional footballers to take pay cuts, resulting in players agreeing an initiative through which to donate wages directly to the UK healthcare services. Indeed, in most cases, professional footballers have taken limited pay-cuts (typically 10-30%) due to the suspension of their competitive football. Yet this debate seems to be based on the notion that 'football players' are consistently wealthy enough to take such action, an argument which overlooks the fact that players in the Women's top divisions, players on youth contracts or players employed in lower-division clubs or at clubs outside the top European leagues are unlikely to be in a position to donate vast sums of money to healthcare institutions. Such assumptions about sport and sportspeople highlight the implicit gender-based and class-based norms and inequalities that exist in this particular sport, and doubtless merit further investigation.

Oddly, to our knowledge the same pressure to donate money has rarely been applied to those who pay the player's wages in the first place, including club owners, sponsors and media corporations. Such absences illustrate the stark financial inequalities and limited support systems for non-playing staff and grass-roots clubs that have been exposed by this particular crisis. Indeed, whilst players have taken limited pay-cuts across Europe and beyond, many non-playing staff have lost their jobs or, in some cases, club owners have approached governments for financial support to cover wages. The actions of such owners and clubs has been met with anger in some quarters, particularly in the United Kingdom, resulting in some clubs in England (such as Liverpool FC) quickly reversing their decision to place non-playing staff into the 'furlough' system designed so that the British government to pay 80% of staff wages. Indeed, the financial viability of elite sport has come under scrutiny, and at the time of writing significant debates exist regarding the production of timetables for various leagues and competitions to be restarted (discussions into which governments and politicians have had significant input). The question of how the sports industry could or should be supported, without placing the health of players, spectators and other staff at risk, has become an unequivocally political one. What's more, such observations are not applicable only to sport at the elite or global levels, and political and sport-governance questions are increasingly on local and national agendas. For example, how to uphold local sport infrastructures is a key issue, including swimming pools, fitness centres, golf clubs, event organisers and voluntary sport clubs. The way in which governors and boards steer their organisations through these uncertain times and adapt to the future will be crucial for sport in the future. Finally, the way in which governments and politicians place value sport and prioritise compensation to different sport providers, and the consequences of these decisions on accessibility to sport (financially, proximity, etc.) in different countries, regions and communities are important foci (van der Poel, 2020).

There are other relevant sociological questions that arise from these reflections. For example, will such inequalities, now laid bare be addressed, reduced, or reproduced? To what extent will socio-economic inequality within and beyond sport be reconsidered as

culturally acceptable? Can the modern capitalist system, which has for so long exacerbated such inequalities, continue as before? And how can the global international sports system, so long reliant upon mass spectatorship, sponsorship and the free movement of athletes and organisations be maintained given these pressures and observances? Indeed, this focus upon athletes leads us to our fourth area of inquiry.

4. How will the lives of athletes and other participants in sport change, and what new considerations will inform teaching and coaching practice in the future?

As noted above, there is little doubt that the everyday lives and practices of sports participants, not least athletes, have had to change, pause or even cease as a result of the pandemic. For those that coach or teach sport, this has required a fundamental restructuring of the way in which we engage with and instruct sports participants. In turn, coaches are likely to have to have to address multiple key questions, such as how to monitor athletic performance, injury and other feedback about training due to the distance between coach and athlete (sometimes only possible due to the presence of the limited view provided by a webcam and computer screen). In sport, where technique and physical skills are paramount, this could limit the effectiveness of many kinds of coaching practice. Moreover, coaching programmes are also likely to have to change due the lack of proximity between coaches and athletes, leading to the substitution of technique-based coaching with strength and conditioning practices, for example. Similarly, the ability of coaches and teachers to ensure the development of togetherness and belonging within squads and teams is likely to be altered. This time away from the pitches, pools and tracks could also give coaches an opportunity to reflect on their practice, and engage with CPD or conversations with other coaches and practitioners across different sporting cultures and landscapes, which may lead to changes in coaching philosophies, behaviours and practices. These considerations have also produced contradictory statements and advice. For example, in California the decision has been made that physical education should be shorter in order to reduce contact, at the same time as the importance of remaining active has been underlined. How such dissonant guidance will be received remains unclear, and such factors need investigation if teaching and coaching practices are to be adapted; how, why and what the effects of these changes are remains to be seen, and best practice may be some way off.

The experience of sport is also likely to have changed. It seems that due to the global lockdown and social distancing regulations, sport is increasingly experienced alone in quieter outdoor spaces, or else at home alone or in family groups with contact with others only through a camera and computer screen. Although convincing evidence is yet to develop, there are indications that the use of tracking technology, the rise of e-sports and online courses could become even more prevalent (e.g. Gerrish, 2020). It will be interesting to observe the extent to which the digitalisation of sport that started before the COVID-19 pandemic wins territory and takes up a larger share of the sport practices. The same applies to increasingly-encouraged individual 'sport' participation in the outdoors, which could eclipse the practice of group sports. Indeed, individual outdoor sports have growing popularity in Europe (Scheerder et al., 2015), and yet it will be interesting to see whether this upward trend is further encouraged by COVID-19 pandemic in the face of often contradictory advice in some countries to stay indoors. Whilst exercise in the natural environment is often assumed to be beneficial in many ways (e.g. Nielsen et al., 2016), the impact of reduced sociability in sport and exercise could also be a focus of sociological

investigation. Similarly, the way in which the senses are experienced and utilised within sport is likely to have changed for many people; some senses are likely to become limited (such as smell and touch), creating a greater reliance upon sight and kinaesthesia, changing the ability of athletes, teachers and coaches to share feedback (e.g. McNarry et al., 2020).

Furthermore, the way in which structural changes of sport and the delays, postponements and cancellations of various sporting events have affected the wellbeing and sense of self of various athletes could be investigated, from both positive and negative perspectives. For example, for some athletes the delay of major events or leagues could be a serious barrier to career progression or a route towards contract re-negotiation, or even an early driver towards an involuntary retirement. For others, such as those returning from a drugs or disciplinary ban (e.g. Southcombe, 2020), from injury or early in a career, perhaps the chance to delay or extend a season, event or competition is a new chance to achieve (or retrieve) something from a season thought lost. Finally, the impact of delays and cancellations upon athletes' sense of self, including their identity as athletes, mental wellbeing and biography is important to understand, given the problems that many athletes have faced following similar biographically disruptive experiences, such as retirement (e.g. Jewett et al., 2019; Koukouris, 2005). What's more, the introduction of this notion of biographical disruption brings us to our fifth and final area of inquiry related to the impact of reduced sport and health provision for those in ill-health.

5. Will the virus result in the further exclusion or stigmatisation of 'risky' and marginalised groups?

Much has been made of the notion that the virus 'does not discriminate,' and yet similarly much of the wider discourse surrounding the virus has focussed upon the heightened risk of mortality to several specific groups, such as older adults, pregnant women and those with 'underlying health problems' (some of which might be unrecognised prior to infection) (Jordan, 2020; Zhou et al., 2020). The response to this, according to some sources, is for some policymakers to socio-culturally construct their response to manage the virus as action to protect such groups by reducing their access and socialisation with other, less risky groups (the young and ostensibly healthy).

This raises the questions about whether new forms of inequality in sport participation could be produced, reproduced or exacerbated. In other sport, exercise and physical activity contexts it has been observed how the 'othering' of specific groups, such as older adults or those managing chronic can result in marginalization or segregation into age- or health-risk appropriate activities (e.g. Bangsbo et al. 2019; Evans & Crust, 2015; Tulle, 2008). For example, growing distinctions between the healthy and less healthy, between 'clear' groups and unknown 'at risk' groups could lead to new forms of established-outsider relations (see Elias & Scotson, 1994), especially where outsider groups lack social cohesion to challenge stigmatisation processes and internalise established beliefs concerning their vulnerability to infection. Furthermore, such threats are not limited to specific, isolated or 'at-risk' groups. If close proximity between young and old, healthy and unhealthy or 'high-risk' and 'low-risk' groups becomes prohibited, will this lead to increased exclusion or segregation of such groups, and if so, where will the line be drawn between those who are 'safe' to participate with others and those who are not? Could this definition of risk extend to further stigmatise disabled groups through an extension of the medical model of disability? How will the costs and benefits of exclusion be weighed against one another, and who will decide on which costs are acceptable (i.e. what are acceptable costs to justify exclusion

from the very activities which are intended to engender good health), and to whom (Graham-Harrison, 2020)? What about otherwise 'healthy' groups, such as pregnant women, who have also been advised to remain in extended isolation? Which risks will be considered acceptable, and who will decide upon which underlying health problems are sufficient to justify exclusion of which groups? How will such justifications impact upon the human rights of specific groups in specific contexts and spaces, and will they blur the boundaries between 'public' and 'private,' extend the surveillance manifest in the medicalisation of our 'risk societies,' or could awareness of the challenges such groups face present opportunities for the voices of such marginalised groups to be heard and included in the debate?

Indeed, the extent to which the global pandemic extend such segregation will only emerge in the future, as will the impact upon groups who are labelled, stigmatised and marginalised as a result. For example, could the socio-cultural or discursive construction of specific groups as 'risky' impact such risky groups' access to the places, spaces and organisations around which sport is built? We are already seeing such impacts. For example, the pandemic has led to the almost complete cessation of face-to-face exercise-based cardiac rehabilitation in the United Kingdom, whilst there are suggestions that some high-risk groups (such as those with spinal cord injury) could be isolated for a far longer period than the general population. Such observances suggest that decision makers might already be prioritising management of some risks over others i, such as privileging physical health over mental health, and focusing upon the management of communicable rather than (sometimes equally lethal) non-communicable diseases. Such decisions, and how they are rooted in socio-cultural, political and political economical systems, are surely worthy of study.

Concluding comments

The present editorial remains nothing more than a snapshot; written at a moment in time when much about the future of sport remains uncertain, seen from a specific set of perspectives, contexts and linguistic frames of reference. Much remains to be done to ensure the long-term survival of many sports, and we would argue that sociologists of sport could and should play an important role in producing knowledge about how sport can weather the storm. Over the forthcoming months, as sociological researchers shift from producing commentaries or opinion pieces towards the production of scientifically robust empirical and theoretical work, we are confident their contribution will be hugely valuable in several ways. This work might encapsulate the extent to which inequalities have been highlighted by the pandemic. It might help understand the challenges facing sports organisations, or the difficulties of producing applicable policies and actions to support sport. We hope we can begin to highlight how athletic careers and coaching have been affected, and how to safeguard the most vulnerable in society during exercise. Equally, we might conduct research with some other aim that exists beyond this paper. Whatever the case, we hope that out of the present darkness, light can and will emerge. What's more, we hope sociologists could be at the forefront of this. Perhaps the recognition of inequality can lead to the reallocation of public and private funds. Perhaps the fragility or robustness of specific sports systems will lead to new ways of conceptualising how sport should be organised. Perhaps awareness of the difficulties faced by specific populations will lead us to reconsider the way in which sport and healthcare resources are utilised in new, more ethical and inclusive ways. Perhaps the intersection of the virus with environmental stresses and the recognition of the wastefulness of our previously globalised version of sport will lead

us to rethink the very nature of sport and the sports 'industry.' Perhaps this is a chance for a new beginning.

Perhaps.

Finally, and most importantly, however, we wish good health to all, and offer our deepest condolences to the bereaved at this most difficult of times.

Disclosure statement

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