

Wear appropriate safety equipment

- Wear shock absorbent, anatomically shaped shinguards during informal play as well as competition.
- Seek professional advice for correct fitting of shin guards and footwear.
- Wear external ankle supports (taping or a semirigid orthosis) to decrease inversion and eversion.
- Wear mouthguards to prevent dental injury.

Modify rules for children

- Encourage children to play Rooball, with modified field and ball size, fewer players and shorter playing periods, as a means of developing good skills and technique and reducing injuries.

Other safety tips

- Coaches should educate players that foul play is not acceptable.
- Encourage players to drink adequate water before and during play.
- Encourage use of a broad spectrum sunscreen in high UV conditions and discourage play in extreme weather conditions, particularly extreme heat and humidity.
- Cooldown adequately after play or training

If an injury occurs

- Require the players to leave the field immediately.
- Ensure all injured soccer players receive adequate treatment and full rehabilitation before they resume play.

FOR FURTHER INFORMATION CONTACT:

- Victorian Soccer Federation, 236 Dorcas Street, South Melbourne, Vic, 3205. Ph: (03) 9682 9666. Fax: (03) 9682 9777
- Sports and Recreation Victoria, Communications Unit, Client Services, GPO Box 2392V, Melbourne VIC 3000. Ph: (03) 9666 4331 (for further copies of fact sheet). <http://www.vicnet.net.au/~sportrec/svrhome.htm>
- Accident Research Centre, Monash University. Building 70, Wellington Road, Clayton, Vic. 3168. Ph: (03) 9905 1808. email: muarc.enquire@general.monash.edu.au <http://www.general.monash.edu.au/muarc>

REFERENCES

- Inklaar, 1994, 'Soccer injuries: incidence and severity', *Sports Medicine*, 18 (1), 55-73.
- McGrath A, Ozanne-Smith J. Heading Injuries Out Of Soccer. Monash University Accident Research Centre. Report No. 125, September 1997

FOR DETAILS ON WARM-UP & STRETCHING CONTACT:

- Victorian Soccer Federation, 236 Dorcas Street, South Melbourne, Vic, 3205. Ph: (03) 9682 9666. Fax: (03) 9682 9777

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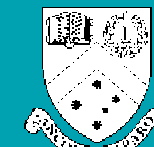
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**SPORT AND
RECREATION
VICTORIA**

PREVENTING SOCCER INJURIES

*Facts
Safety for players
Safety tips*



Soccer is one of the largest participation sports in Australia and indeed the world. During the course of play, soccer players accelerate, decelerate, jump, cut, pivot, turn, head and kick the ball. This sport places many demands on the technical and physical skills of the player and, as a result, injuries can and do occur (Inklaar, 1994).

FACTS ON SOCCER INJURIES

How many soccer players?

- In 1997 Soccer Australia reported that there were 270,000 registered players in Australia. The majority of these players were male.
- Within Australia, 4-7% of persons aged over 16 years, participated in soccer between 1987 and 1991, the majority, 62%, were 16-29 years of age.

How many injuries?

- In Australia, soccer represents 8.1% of adult and 6% of child sports related injuries presenting to hospital emergency departments.
- In Australia, soccer ranks third for adults and fifth for children in terms of sport related injuries presenting to hospital emergency departments.
- In Victoria, approximately 9% of adult and 10% of child soccer injuries presenting to emergency departments warrants hospital admission.
- Lower leg injury results in the highest admission rate to hospital.

When do soccer injuries occur?

- In Australia, 89% of adult and 59% of child soccer injuries occur during organised competition and practice.
- Injury risk during games tends to be 3-4 times higher than risk in practice (Inklaar, 1994).

The cause and type of injuries

- Overall, soccer injuries are mostly sprains, strains, fractures, bruising, muscle-tendon injury and abrasions.
- Adult soccer players most often sustain injuries to the lower limbs, followed by the upper limbs and the head. Child injury is most often to the upper limbs, lower limbs and the head.
- Lower limb injuries are often the result of contact with another player, eg being kicked or collisions, and are mostly to the ankle and knee.
- Head injury is associated with heading the ball, being struck by a ball kicked at high speed and as the result of head to head contact.
- Falls, over-exertion, overuse and being struck by the ball are other common injury causes.



SAFETY TIPS FOR SOCCER

Good preparation is important

- Undertake conditioning programs to increase flexibility, endurance and strength.
- Warm up and stretch adequately before the day's play and training.
- Simple fitness testing should be conducted prior to competition to ensure fitness to play.
- Seek pre-participation screening by a professional to identify potential bio-mechanic abnormalities which may contribute to overuse injury.

Good technique and practices will help prevent injury

- Instruction in correct technique (particularly heading), must be available from initial training and be reinforced at all training sessions.
- Coaches should undergo regular re-accreditation and education updates to ensure they have the latest information about playing techniques.

Use appropriate equipment.

- Use only plastic coated balls.
- Once water resistant qualities are lost, replace the ball.
- Use the appropriate sized ball for the age and gender group of players.
- Ensure both permanent and portable goals are securely anchored to the ground.
- Ensure portable goals are made of a lightweight material.
- Cover goal posts with protective padding.
- Dismantle, remove or secure portable goals to a permanent structure after use.
- Check and maintain soccer fields regularly to eliminate hazards.

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