
THIRD READING

Bill No: AB 708
Author: Valencia (D), et al.
Amended: 8/13/26 in Senate
Vote: 21

SENATE HEALTH COMMITTEE: 9-0, 6/11/25

AYES: Menjivar, Valladares, Durazo, Grove, Limón, Padilla, Richardson, Rubio, Wiener

NO VOTE RECORDED: Gonzalez, Weber Pierson

SENATE JUDICIARY COMMITTEE: 12-0, 6/24/25

AYES: Umberg, Niello, Allen, Arreguín, Ashby, Caballero, Durazo, Laird, Stern, Wahab, Weber Pierson, Wiener

NO VOTE RECORDED: Valladares

SENATE APPROPRIATIONS COMMITTEE: 7-0, 8/13/26

AYES: Cervantes, Seyarto, Cabaldon, Dahle, Grayson, Richardson, Wahab

ASSEMBLY FLOOR: 74-0, 4/3/25 (Consent) - See last page for vote

SUBJECT: California Youth Football Act: safety equipment

SOURCE: Author

DIGEST: This bill requires a youth tackle football league and coaches to allow youth tackle football participants to use safety equipment, including soft-shelled add-ons to football helmets. Permits a court to grant a restraining order or injunction to remedy a violation of this bill, and entitles plaintiffs to reasonable attorney's fees. Prohibits a warranty or safety certification of a football helmet put into play on or after January 1, 2027, with a soft-shell add-on, from being voided because of the use of the soft-shell add-on.

ANALYSIS:

Existing law:

- 1) Defines a “youth sports organization” as an organization, business, nonprofit entity, or a local governmental agency that sponsors or conducts amateur sports competitions, training, camps, or clubs in which persons 17 years of age or younger participate. [Health & Safety Code (HSC) §124235 (b)(4)]
- 2) Requires a youth sports organization to comply with certain requirements related to athletes suspected of sustaining a concussion or head injury, or who has passed out or fainted, including removal from the athletic activity and a prohibition on returning until he or she is evaluated by a licensed health care provider. Requires youth sports organizations to give both a concussion and head injury information sheet, and a sudden cardiac arrest information sheet, to each athlete on an annual basis. [HSC §124235]
- 3) Requires each coach, administrator, and referee, umpire, or other game official of the youth sports organization to successfully complete concussion and head injury and sudden cardiac arrest prevention education at least once, either online or in person, before supervising an athlete in an activity of the youth sports organization. [HSC §124235(a)(5)]
- 4) Requires “sudden cardiac arrest prevention education and educational materials” and a “sudden cardiac arrest information sheet” to include, at a minimum, information relating to cardiac conditions and their potential consequences, the signs and symptoms of sudden cardiac arrest, best practices for removal of an athlete from an athletic activity after fainting or a suspected cardiac condition is observed, steps for returning an athlete to activity, and what to do in the event of a cardiac emergency, which includes calling 911, performing hands-only CPR, and using an automated external defibrillator (AED) if it is available. [HSC §124235(b)(3)]
- 5) Establishes the California Youth Football Act, which establishes additional requirements on youth sports organizations that conduct a tackle football program, including requiring a minimum of one certified emergency medical technician, state-licensed paramedic, or higher-level medical professional to be present during all games, and requiring coaches to annually receive first aid, CPR, and AED certification. [HSC §124240, et seq. and §124241(h) and (i)]
- 6) Requires, as part of the California Youth Football Act, that at least one independent nonrostered individual, appointed by the youth sports organization, to be present at all practice locations, and requires the individual to hold current

certifications in first aid, CPR, AED, and concussion protocols. [HSC §124241(j)]

- 7) Establishes the Navaeh Youth Sports Safety Act to require a youth sports organization that elects to offer an athletic program to ensure, by January 1, 2027, that its athletes have access to an AED during any official practice or match. [HSC §124238.5]

This bill:

- 1) Requires a youth tackle football league, youth sports organization that conducts a tackle football program, or a coach of a youth sports organization to allow youth tackle football participants to use safety equipment, including soft-shell add-ons to football helmets.
- 2) Permits a court to grant a restraining order, preliminary injunction, or permanent injunction to remedy a violation or threatened violation of this bill.
- 3) Requires a prevailing plaintiff who obtains any remedy in 2) above, to be entitled to an award of reasonable attorney's fees and costs.
- 4) Prohibits a warranty or safety certification of a football helmet put into play on or after January 1, 2027, with a soft-shell add-on, from being voided because of the use of the soft-shell add-on unless both of the following conditions are met:
 - a) The soft-shell add-on substantially damages the football helmet; and,
 - b) The football helmet had a current manufacturer certification at the time immediately preceding the substantial damage to the football helmet.
- 5) States the intent of the Legislature to ensure that youth football organizations continue to have access to commercially available football helmets, including reconditioned football helmets, and that the attachment of a soft-shell helmet add-on does not, by itself, result in the loss of an otherwise applicable manufacturer warranty or certification designation.

Comments

According to the author of this bill:

This bill safeguards parents' rights to decide on soft-shell helmet add-ons for their children in youth football leagues, allowing them to make informed decisions about player safety. Many parents consider soft-shell helmet add-

ons essential for their child's safety, yet some youth football leagues impose restrictions that prevent their use. Young athletes are particularly vulnerable to cognitive impairments from repeated head impacts, making it critical to provide protective options. These add-ons have been shown to reduce concussion risk and are already utilized by the National Football League (NFL). At a critical stage of brain development, it is essential to protect young athletes' long-term well-being while upholding the integrity of the sport. This bill ensures that families have the freedom to equip their children with additional safety measures, aligning youth football protections with those used at the professional level in the NFL.

Opposition. Riddell, which states it is the leading manufacturer of football helmets and protective equipment, is opposed to this bill unless it is amended. Riddell states that it is concerned that this bill unintentionally promotes equipment solutions that are not supported by consistent scientific evidence and that are in direct conflict with established safety standards governing football protective equipment. According to Riddell, football helmets used in organized play in the United States must be certified to performance standards set by the National Operating Committee on Standards for Athletic Equipment (NOCSAE), and that certification is granted to a complete helmet system exactly as manufactured and tested, and not to individual components in isolation. Riddell states that soft shell caps added onto certified helmets create a "new uncertified model." Riddell cites a public statement from NOCSAE that included the following: "The addition of an item(s) to a helmet previously certified without those item(s) creates a new uncertified model. Whether the add-on product changes the performance or not, the helmet model with the add-on is no longer 'identical in every aspect' to the one originally certified." Riddell points out that the NOCSAE statement provided guidance for manufacturers of add-on products to achieve certification, and when that is done, the certification and responsibility for the helmet/third-party product combination would become theirs, not the helmet manufacturer. Riddell states that NOCSAE finalized a new youth football helmet standard in 2025, and that for small sizes, the helmet, including all accessories, attachments, and facemask, cannot exceed 3.5 lbs. A youth soft shell cap can weigh 7 ounces, and some helmets combined with a soft shell cap may not meet the new weight requirement. Riddell states that because decertification would be prohibited under this bill, parents would not know whether the helmet combination is in compliance with the new standard. Riddell states that this bill makes liability issues unclear, and that unless it is amended to ensure these soft-shell add-ons also pursue certification with helmet combinations, they must oppose this bill.

Background

What are soft-shelled add-ons for football helmets? To address the growing concern associated with concussions in football, a company called Guardian Cap created a padded, soft-shelled outer layer that goes on the outside of the traditional hard helmets to add protection and reduce the severity of impacts. While the product was initially developed in 2010, it wasn't until 2020 that the NFL moved forward with on-the-field experimentation with the cap in practices. In March 2022, the NFL passed a mandate and began requiring offensive and defensive linemen, tight ends, and linebackers to wear Guardian Caps during every preseason practice between the start of training camp and the second preseason game. In 2024, the NFL expanded this mandate to include all positions, with the option for quarterback, kicker, and punter, and also began allowing the use of Guardian Caps for regular season in-game use. According to the Guardian Cap company, in the 2024 season, 19 NFL players from different teams wore Guardian Caps during games. Over the years, a number of different companies have developed soft-shell helmet covers, including the SAFR Football Helmet Cover, and GameBreaker.

Studies on the effectiveness of soft-shelled helmet covers are mixed. Prior to the mandate the NFL players used Guardian Caps during football practices, the NFL studied the product in laboratory tests, and found, on average, a 9% reduction in force impact compared to a helmet with the cover. According to an ESPN article from September 2021, the Guardian Cap company claims the reduction is up to 33% for high school players who are not as big and fast as NFL players. In a CNN article from September 25, 2024, the NFL saw about a 50% decrease in concussions in the positions that were mandated to use the Guardian Caps during practices, which is why the NFL extended the requirement to all positions during practices. However, the NFL did not release the data behind its claims, and some studies have not found a major impact. A University of Wisconsin study published in the British Journal of Sports Medicine in January of 2025, collected data on 2,610 athletes from 41 high schools across Wisconsin. In the study, there were 1,188 players who did not wear Guardian Caps and 1,451 players who wore them. While the caps were only worn during practice and not during games, there was no association with a reduction in concussions by players who wore the caps. Over the course of the study, there were 64 concussions that occurred during practice, and 33 of those were players who wore the Guardian Cap. On the other hand, Virginia Tech published a study in October of 2024 in Annals of Biomedical Engineering, where two different models of Guardian Caps, as well as the SAFR Helmet Cover, were put through repeated collision tests. According to these tests, the soft shell

covers led to average reductions in linear accelerations between 3% and 8%, and rotational accelerations by 5% to 14% (in both cases, the best performing cover was the NFL version of the Guardian Cap, known as the Guardian NXT). According to the study, these reductions in linear and rotational accelerations would result in average decreases in concussion risk of between 15% and 34%.

Research on CTE and youth football. CTE is a neurodegenerative disease associated with exposure to contact and collision sports (CCS), including football, boxing, soccer, rugby, and ice hockey. Like most neurodegenerative diseases, CTE only can be definitively diagnosed by postmortem neuropathological examination, thus it is difficult to do definitive studies on the relationship between head injuries and sports given limited sample sizes. In short, researchers must be able to examine the brain of a deceased athlete and know the sports history or injury history of that individual. Also, because only brains of the deceased can be adequately analyzed, it is hard to determine the impact of recent changes to make the sport safer. Of the studies that do exist, there is cause for concern. One study published in the *Annals of Neurology* in October 2019 found that there was a strong dose-response relationship for the number of years of football played with CTE neuropathology, doubling odds of disease every 2.6 years and doubling odds of severe disease among those with CTE every 5.3 years. Another study published in the *Annals of Neurology* in April 2018, found that while a younger age of exposure to tackle football was not associated with CTE pathological severity, it did predict earlier neurobehavioral symptom onset. According to a study published in December 2018 in the *Journal of Pediatrics*, researchers from the University of Washington Medicine's Sports Health and Safety Institute and Seattle Children's Research Institute found concussion rates among football players ages five to 14 were higher than previously reported, with 5% sustaining a football-related concussion each season.

However, a narrative review of studies published in September 2021 in *Frontiers in Neurology*, found that although the literature on whether younger age of first exposure to tackle football is associated with later in life cognitive, neurobehavioral, or mental health problems in former NFL players is mixed, the largest study of retired NFL players suggested there was not a significant association between earlier age of first exposure to organized tackle football and worse subjectively experienced cognitive functioning, depression, or anxiety. Furthermore, no published studies of current athletes show a significant association between playing tackle football (or other CCS) before the age of 12 and cognitive, neurobehavioral, or mental health problems. All studies were judged to be at high overall risk of bias, indicating that more methodologically rigorous research is needed to understand whether there is an association between age of first exposure

to CCS and later in life brain health. The accumulated research to date suggests that earlier age of first exposure to CCS is not associated with worse cognitive functioning or mental health in current high school athletes, current collegiate athletes, or middle-aged men who played high school football. The literature on former NFL players is mixed and does not, at present, clearly support the theory that exposure to tackle football before age 12 is associated with later in life cognitive impairment or mental health problems.

AAP statement on tackling in youth football. In November of 2015, the American Academy of Pediatrics (AAP) published a policy statement, Tackling in Youth Football. According to the AAP, there are approximately 250,000 youth football players age five to 15 years in Pop Warner leagues alone, and that the injuries sustained during football, especially to the head and neck, have been a topic of intense interest. More recently, AAP states that the cumulative effects of concussions and the potential for a cumulative effect of subconcussive blows to the head have been hypothesized as a causative risk factor for CTE. The recognition of these injuries and the potential for long term consequences have led some physicians to call for a reduction in the number of contact practices, a postponement of tackling until a certain age, and even a ban on high school football. AAP states that available data suggest that both the overall incidence and the severity of injuries sustained by younger football players are lower than those sustained by older players, though this finding is not universally consistent. Tackling is the most common player activity at the time of injury, and at the time of severe injury. AAP points out that delaying the age at which tackling is introduced to the game would likely decrease the risk of injuries for the age levels at which tackling would be prohibited. Once tackling is introduced, however, AAP states that athletes who have no previous experience with tackling would be exposed to collisions for the first time at an age at which speeds are faster, collision forces are greater, and injury risk is higher. AAP states that removing tackling from football altogether would likely lead to a decrease in the incidence of overall injuries, but it recognizes removing tackling from football would also lead to a fundamental change in the way the game is played.

A more recent study published by AAP in November 2019, found that while football had the highest overall incidence of concussions of the sports reviewed, nine other sports had a higher incidence of recurrent concussions, including baseball, wrestling, cheerleading, lacrosse, basketball, and soccer. The study noted that rates of football practice-related concussions and recurrent concussions across all sports have decreased.

Related/Prior Legislation

AB 3047 (McCarty of 2024) would have required the California Surgeon General to convene a Commission on Chronic Traumatic Encephalopathy (CTE) and Youth Football to investigate issues related to the risks of brain injury associated with participation in youth football, and issue recommendations on the minimum age for tackle football and best practices for minimizing the risk of concussion and CTE. *AB 3047 was held on the Senate Appropriations Committee suspense file.*

AB 734 (McCarty of 2023), would have prohibited youth tackle football leagues, and youth sports organizations that conduct tackle football programs, from allowing the participation of any person younger than six years of age. *AB 734 was not taken up on the Assembly Floor.*

AB 1467 (Alanis, Chapter 24, Statutes of 2023) enacts the Navaeh Youth Sports Safety Act to require a youth sports organization that elects to offer an athletic program to ensure that by January 1, 2027, its athletes have access to an AED during any official practice or match.

AB 1348 (McCarty of 2022) was substantially similar to AB 3047 of 2024. *AB 1348 was vetoed by Governor Newsom who stated in his veto message, referring to the relatively recent passage of AB 1 below, “The effectiveness of these recently implemented safety measures has not been sufficiently assessed. More research is needed to better understand current safety measures and the risks. Furthermore, this bill would require more than \$2 million to implement, which was not accounted for in the budget.”*

AB 1 (Cooper, Chapter 158, Statutes of 2019) enacts the California Youth Football Act, which establishes certain requirements on youth football, including limiting full-contact practices to 30 minutes per day, and no more than two days per week, and requires an EMT or higher-level medical professional to be present during all games, and one independent non-rostered individual to be present at all practice locations with the authority to evaluate and remove any youth tackle football participant from practice who exhibits an injury.

FISCAL EFFECT: Appropriation: No Fiscal Com.: No Local: No

According to the Senate Appropriations Committee, unknown, potential workload costs to the courts related to plaintiffs seeking remedies under the bill (Trial Court Trust Fund, General Fund). While the courts are not funded on a workload basis, an increase in workload could result in delayed court services and would put

pressure on the General Fund to increase the amount appropriated for trial court operations.

SUPPORT: (Verified 8/17/26)

California Academy of Family Physicians
California Association for Health, Physical Education, Recreation and Dance
California Medical Association
California Neurology Society
California Orthopedic Association
California Youth Football Alliance
Concussion Legacy Foundation
Fullerton Pop Warner Football and Cheer
National Cheer Safety Foundation

OPPOSITION: (Verified 8/17/26)

Riddell

ARGUMENTS IN SUPPORT: The California Youth Football Alliance states in support that it is essential to empower parents to make informed decisions about their child's protective equipment, and this bill provides families with the freedom to enhance safety measures without unnecessary restrictions that could limit advancements in protective gear. The California Orthopaedic Association states that Guardian Caps are a soft shell helmet designed to reduce impact, and may help reduce concussion risk to players. Given the risk to youth playing football, measures to improve safety deserve support. Fullerton Pop Warner states in support that this bill upholds parental choice and ensures that children in California can continue to participate in one of the state's most popular sports with the best available safety measures. The Concussion Legacy Foundation states that it does not believe that children should play tackle football before the age of 12 due to the risk of developing chronic traumatic encephalopathy, and notes that there is limited evidence that soft-shelled helmets have reduced the number of diagnosed concussions. However, if the state is going to allow children to play, the Concussion Legacy Foundation agrees that they should have the option to wear soft-shelled helmets.

ASSEMBLY FLOOR: 74-0, 4/3/25

AYES: Aguiar-Curry, Ahrens, Alanis, Alvarez, Arambula, Ávila Farías, Bains, Bauer-Kahan, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Castillo, Chen, Connolly, Davies, DeMaio, Dixon, Elhawary, Ellis, Flora, Fong, Gabriel,

Gallagher, Garcia, Gipson, Jeff Gonzalez, Mark González, Hadwick, Haney, Harabedian, Hart, Hoover, Irwin, Jackson, Kalra, Krell, Lackey, Lee, Lowenthal, Macedo, McKinnor, Muratsuchi, Nguyen, Ortega, Pacheco, Papan, Patel, Patterson, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Blanca Rubio, Sanchez, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Ta, Tangipa, Valencia, Wallis, Ward, Zbur, Rivas

NO VOTE RECORDED: Addis, Bennett, Carrillo, Wicks, Wilson

Prepared by: Vincent Marchand/ HEALTH/ (916) 651-4111
8/17/26 11:37:53

****** END ******