

**TESTIMONY OF DIRECTOR BARRY R. McCaffrey,
OFFICE OF NATIONAL DRUG CONTROL POLICY,
COMBATING THE USE OF DRUGS AND DOPING IN SPORT,
BEFORE THE SENATE COMMITTEE ON
COMMERCE, SCIENCE AND TRANSPORTATION
OCTOBER 20, 1999**

Mr. Chairman, Senator Hollings, thank you for the opportunity to testify before you today on combating drug use in sport. We thank this Committee and its members for your long-term commitment to athletics here in the United States and internationally. In particular, thank you Mr. Chairman and Senator Stevens for your individual leadership within the U.S. Olympic movement and your support of our nation's athletes. Senator Stevens, the Amateur Sports Act, which you played the lead role in creating, has helped the United States and the U.S. Olympic Committee (USOC) develop one of the most outstanding Olympic programs in the world.

INTRODUCTION

Throughout American history athletics have played a significant role in our national culture and identity. Before this nation was born, Native Americans played lacrosse. When World War II struck, Franklin Roosevelt wrote to the first commissioner of baseball asking him not to cancel the season – the President believed the American people needed something to lift their spirits in those dark days, and asked only that the games be extended into the night so the day shift could also turn out. One of the greatest defeats ever handed Hitler and the Nazis was dealt by Jessie Owens. Athletes, like tennis' Althea Gibson, basketball's Wilt Chamberlin and baseball's Jackie Robinson, were among the first to tear down the racial barriers that had so long divided our nation. The USA Hockey "miracle on ice" lifted the Cold War spirits of this country and presaged the end of an era on the ice and off. The recent Women's World Cup soccer tournament struck a blow for "girl power" across this nation and the world.

Sports occupy a special place in the hearts of the American people. On home game weekends, the most heavily populated "city" in Nebraska is Cornhusker Stadium. My alma mater, West Point, defines a successful year largely by how we fared against the other service academies – with all due respect to the Chairman who may have a similar, but "opposing" view on this issue.

Our youth look up to athletes as heroes. Great performances on the fields of play are a source of inspiration. As Americans, we gain from our athletes a common, national pride.

Sadly, drug use in sports now puts all of this at risk. Doping and drug use in sport are so pervasive that they jeopardize the ethics and integrity of athletic competitions – the intangibles that give greater meaning to a game than just "putting points on the board." Most importantly, this drug use puts the lives and health of our athletes at real risk. There is no victory worth the suffering these substances can bring.

This threat is no longer confined to a mere handful of Olympic athletes. Today, drug use in sport can be found in the local high school football locker room and on the neighborhood soccer field. Children – some as young as twelve years old – are turning to drugs to gain an upper hand in contests where only a gold-painted plastic trophy is at stake.

Our current efforts – governmental and nongovernmental, national and international – have been inadequate to address this threat. If we fail to act now -- the damage to the Olympic movement, the beauty and glory of sport, and the futures of our nation's children and athletes will be serious and lasting.

Today, the Office of National Drug Control Policy is releasing a national strategy to help address the threat of drug use and doping in sport (the Strategy is described further in section III of this testimony). This Strategy builds upon a series of important successes. ONDCP pushed the International Olympic Committee (IOC) to make marijuana a banned substance after an athlete who tested positive for marijuana was awarded the Olympic gold and hoisted up on the medal platform as a hero to all the world's youth. The IOC responded and marijuana is now prohibited. We also worked closely with the National Basketball Association and the NBA players union to close the loophole in the league contract that allowed marijuana use. Last year, we ran the first ever National Coachathon Against Drugs. Major League Soccer ran a clinic at their championship game. Professional coaches, Major League Baseball and National Football League stars, college coaches and others turned out across the nation to help keep our youth drug free. The NFL Vikings' Dennis Green, who served as an honorary chair, and the Patriots' Pete Carroll were particularly generous with their time. These efforts will move into a more coordinated and comprehensive phase with this new Strategy.

Before turning to the substance of this hearing, it is appropriate to recognize the many people and organizations represented here in this room today who helped us develop this Strategy. Allow me to begin with the athletes – they are the heart and soul of this effort.

Frank Shorter won the Olympic gold medal in the marathon at the 1972 games – he took Silver in 1976 finishing behind a competitor that the evidence suggests was doping. Mr. Shorter's determination to fight doping, however, comes primarily from being a father -- he doesn't want to see his son faced with the decision to either use drugs or stand no chance of victory. Mr. Shorter has been an important advisor to ONDCP in our anti-doping efforts. He joined me as part of the U.S. delegation to the World Conference on Doping in Lausanne, Switzerland in February 1999. Mr. Shorter will also serve as a member of our delegation for the 1999 Australian led Summit of Governments to Combat Drug Use in Sport in November of this year.

No one knows the uphill struggle that an athlete faces when competing against a competitor who is cheating through chemical engineering better than Carl Lewis. In 1998, the two fastest men on earth faced off at the Seoul Olympics in the men's 100-meter race – Carl Lewis and Ben Johnson. Mr. Johnson crossed the finish line first, but his victory was ill gotten and illusory. Mr. Johnson's drug test revealed that he was using steroids. Mr. Johnson was stripped of his medal and his honor. History – and the record books – show Mr. Lewis as the real champion. Competing cleanly he captured a total of nine gold medals, including tying Jessie Owens' record of four gold

in a single games. Mr. Lewis has long been an advocate of ending drug use and doping in sport. Recently, Mr. Lewis saw press accounts of ONDCP's efforts to combat drug use. He immediately called ONDCP and pledged his support. We are grateful that he took the initiative to reach out to us and we have benefited greatly from his support.

Two other athletes who are not here today also deserve special mention. Mr. Edwin Moses is one of the finest athletes ever to grace the world stage. From 1977 to 1987, he won an incredible 107 consecutive 400-meter hurdle races, including the 1984 Olympics – a feat that may never be truly equaled. In addition to being a champion athlete, Mr. Moses deserves a gold medal for civic leadership. Mr. Moses has also served as the head of the USOC's anti-doping committee – a challenge he accepted in an effort to reform the system. In our opinion, he has been one of the world's most outspoken leaders working for the creation of a level drug-free playing field for sport. He is one of the few individuals who has the perspective of both an elite athlete and an anti-doping administrator. Over the last few months, Mr. Moses support and insights have been an important contribution to ONDCP's efforts. It is indeed an honor to work with a sportsman and statesman of his caliber. Mr. Moses will also serve as part of our delegation for the 1999 Australian led Summit of Governments to Combat Drug Use in Sport.

Ms. Donna de Varona, who helped Senator Stevens in developing the Amateur Sports Act has also been a tremendous asset to us. In addition to being a gold medal swimmer, Ms. de Varona is an award winning sports broadcaster. She helped bring the unbelievably successful Women's World Cup to the United States. She is a real champion of "girl power" in sports. And, she has been a leader in the movement against drug use in sport. In short, we have taken to calling her "the First Lady of American sports." In keeping with her tradition of public service, she has been a great help to us.

In addition to the support of the athletes we have also worked closely with the USOC. Americans take great pride in our Olympic teams and the accomplishments of the largely volunteer USOC. Under the leadership of Mr. Bill Hybl, Mr. Dick Schultz and Mr. Baaron Pittenger, the USOC is committed to ending the threat of drug use in sport. ONDCP has been impressed by the USOC's willingness to move forward and address this threat in a considered manner– as opposed to the reaction of others who have sought to adopt public relations not public policy solutions. We look forward to working with the USOC and other stakeholders as we move ahead.

In developing our strategy we have reached out to the experts in the relevant fields. Allow me to recognize the contributions of two such individuals who are here today as witnesses: Dr. Gary Wadler and Professor Doriane Coleman. Dr. Wadler is one of the world's preeminent sports medicine doctors. His medical advice has been vital to us in developing our strategy. We are delighted that he has been a source of advice. Professor Doriane Coleman's work on the legal issues associated with drug use and doping in sport is similarly groundbreaking. In addition, she has defended the rights of athletes in doping cases. She brings an important, practitioner's voice to the table. We thank both of these individuals for their hard work.

The Olympic sponsors are another voice that must be heard if we are to make progress in bringing an end to drug use in sport. Recently, I stood with Mr. Scott Serota and the leadership of Blue

Cross/Blue Shield as they launched the Healthy Competition Foundation. This new not-for-profit, public interest foundation is dedicated to educating children and athletes about the dangers of drug use. The Foundation is also charged with working to encourage the IOC to implement real reforms to help end drug use in sport. As both an Olympic sponsor and health care company, Blue Cross/Blue Shield's involvement sends an important message to all those involved that the time has come for a change. ONDCP congratulates the "Blues" for their leadership and we look forward to working with the Healthy Competition Foundation.

As you can tell from this introduction, for over a year now, ONDCP has been hard at work listening to America's athletes, doctors, sports leaders and other stakeholders. Through these efforts it has become abundantly clear that the use of drugs in sports has become an international crisis of both public health and public confidence. **Section I** of this testimony will set out our conclusions about **the threat of drug use and doping in sport**. **Section II** of this testimony outlines the **need for a new approach**. **Section III** briefly lays out the **highlights of the national Strategy** that has been developed by a federal inter-agency working group in close consultation with various stakeholders. A copy of this strategy is provided as appendix A to this testimony and is incorporated by reference. This section highlights our efforts at the **international level**, which we believe are now entering a critical phase. This Committee is about to hear from a representative of the IOC about their efforts on the international level. This section should be of particular interest.

- **THE THREAT OF DRUG USE IN SPORTS**

From the "Miracle on Ice" to Dan Jansen's gold medal win dedicated to the memory of his sister, sports inspire us all to try harder and be better. As parents – and as a nation – we rely upon athletics to help us nurture healthy, strong children and to inculcate important values. For example, according to the Department of Health and Human Services, a child who plays sports is 49 percent less likely to get involved with drugs than a peer who does not play sports.

However, these positive aspects of sport are now at risk to drug use and doping. Drug use and doping in sport has reached a level where athletes increasingly believe that they cannot compete honestly and win – chemical engineering is now perceived as a *sine qua non* to success.

Drug use deprives honest athletes of a lifetime of hard work and dedication. Shirley Babashoff won six silver medals behind East German swimmers. When she raised questions about doping by the East German medal winners, the press unfairly denigrated this superb athlete of such enormous integrity. Subsequently, newly opened *Stasi* files made public through a series of lawsuits show that the former East German sports machine doped thousands upon thousands of athletes, many of whom were unwitting children – including Ms. Babashoff's competitors. To date nothing has been done to redress this extreme injustice.

Every great victory is questioned. Track legend Edwin Moses and wrestling hero Bruce Baumgartner – both of whom compete cleanly and are leaders in fighting drug use -- have spoken out about the anguish and loss of dignity they feel when total strangers approach them and ask if

their honest victories were the product of doping. Even the 1999 Tour de France victory of Lance Armstrong, who came back from cancer, has been doubted. At base, doping has become so widespread that the many athletes who compete and win based solely on talent and determination are still viewed with skepticism.

America's youth are at risk. The threat of doping affects not just a few elite athletes, but millions of American children at all levels who dream of Olympic gold and other sport victories – from little league baseball to youth soccer to high school swimming. This threat occurs not just at the world class level, but in our own neighborhoods and schools.

- In 1998, a survey of Massachusetts youth reported in the well-respected journal *Pediatrics* found that 3 percent of girls ages **9 to 13** have used steroids. Use among boys was found to be just under 3 percent. This is the first time that the use of steroids among girls was found to surpass use among boys. For both boys and girls, these levels are on par with use of other drugs of abuse. For example, the 1997 National Household Survey found that lifetime cocaine use by children ages **12-17** was 3 percent.
- The Healthy Competition Foundation's 1999 survey found that 1-in-4 young people personally know someone using performance enhancing substances. Knowledge grows substantially with age – 9 percent of 12 year olds personally know someone doping, compared with 32 percent of those ages 15-16 and 48 percent of those ages 17 and older.
- The majority of young people report that steroids are easily available through their friends and their coaches.

The threat of drug use in sports is growing. Our National Drug Control Strategy is producing real progress in reducing overall youth drug use. According to the 1998 National Household Survey, overall youth (age 12 to 17) drug use is down 13 percent from the previous year. Among this critical age group cocaine use is down 20 percent and inhalant use is down 45 percent over the same period. However, in sharp contrast, research indicates that today's highly competitive athletic world is causing youth performance enhancing drug use to grow significantly.

- According to the Monitoring the Future survey, the rate of steroid use among twelfth grade girls jumped 100 percent from 1991 to 1996. During this same period, steroid use among 10th grade females jumped 83 percent, and 75 percent among 8th grade females.
- Makers of Androstenedione (Andro) self-report that Andro sales are up roughly five-fold since last year. (Andro, currently classed as a food supplement, is believed by many to improve performance. The DEA is engaged in a scientific process to determine if Andro actually produces muscle growth – and, in turn, whether it should be classed as a steroid).

Drug use in sports is now widely perceived as a public health crisis. The performance enhancing drugs now being used by increasingly younger and younger children put lives and health in real jeopardy. The American people recognize these risks and want them ended.

- According to a 1999 survey by the Healthy Competition Foundation, 75 percent of American adults see drug use and doping in sport as a public health problem.
- This survey also found that 83 percent of American teens and pre-teens and 86 percent of adults disapprove of current drug use and doping in sport.

Performance enhancing drugs put the health and safety of those who use these substances at serious risk. These risks are particularly high for young people; the use of exogenous hormones during a child's development can seriously impair and/or alter the normal cycle of development. No victory is worth the damage these substances do to human health.

- The risks of steroid use include: elevated cholesterol levels; increased risks of heart disease; serious liver damage (e.g., blood filled cysts and tumors); androgenizing of females (the irreversible development of male secondary sex characteristics by girls, including clitoral hypertrophy, breast atrophy and amenorrhea); behavioral changes, particularly heightened aggressiveness; and, feminization of males (including shrinking of the testes, low sperm counts, the development of high-pitched voice and breast development). Adolescents are also at risk of permanently stunting their growth.
- The adverse health impacts of performance enhancing drugs on athletes as documented in the German criminal doping trials have been devastating. The files of the *Stasi* (the German secret police who ran East Germany's national doping program) clearly reflect these health horror stories in frightening detail. *Stasi*-documented health problems include: Androgen-induced amenorrhea, severe ovarian cysts, advanced liver damage, and fetal malformation among pregnant women.
- In the worst cases these drugs can even be deadly. The drug erythropoietin (EPO) is widely thought to have contributed to the deaths of 18 Dutch and Belgian cyclists and 12 Scandinavian orienteers in the late 1980s and early 1990s. Documented incidences of deaths related to the use of performance enhancing drugs go back more than a century.

Trafficking in performance enhancing substances is a large and growing criminal industry.

- In the last year, the Drug Enforcement Administration has carried out a number of steroid investigations. In Dallas, authorities broke up a ring that smuggled steroids from Mexico for distribution to local gyms and high schools. In Pittsburgh, DEA agents worked with Thai counterparts to identify an international steroid ring that illicitly sold steroids over the Internet. In New York, the DEA arrested 15 members of a Russian organized crime group that reportedly smuggled more than two tons of anabolic steroids into the United States. The DEA is also conducting ongoing investigations of the importation of products labeled as androstenedione that actually contain steroids.
- According to the DEA, these and other investigations indicate that the international sale of steroids is becoming increasingly sophisticated and entrenched in criminal networks.

II. THE NEED FOR A NEW ANTI-DOPING APPROACH

Current anti-doping systems fail to provide athletes with the assurance that a level playing field exists for those who do not want to cheat. Moreover, many athletes believe that the existing systems are public relations tools, not effective counter-drug programs. Many athletes believe that these systems are run in such a way as to catch unknown athletes -- but not stars or potential medallists.

Irregularities abound. The athletes, in general, completely lack confidence in the ability of the international community to prevent, detect and punish drug use in sport. Moreover, the persistent pattern of irregularities in international competition raises serious doubts about the existing commitment of the IOC and the international community to protect the interests of the vast majority of honest athletes, the virtues of sport, and the health and safety of the competitors.

- At both the Atlanta and Los Angeles games the IOC Medical Commission failed to act on a series of positive drug test results among medal winners for banned substances. During the Atlanta Games only two positive samples were announced. However, in an interview with the *London Sunday Times*, an internationally recognized expert who helped with the testing in Atlanta stated that “There were several other steroid positives from around the end of the Games which we [the lab] reported.” Lab officials subsequently reported that in each of these instances the samples were passed along to Prince de Merode, the Director of the IOC anti-doping program. Prince de Merode has publicly stated that he discarded the samples for unstated “technical difficulties.” Neither the lab reports, nor the names of the athletes in question, nor the purported technical difficulties have ever been disclosed.

Structural flaws undermine existing anti-doping approaches.

- These problems exist not just at the world level, but here domestically. U.S. laws provide inadequate regulation over a range of performance enhancing drugs. Domestic sports, particularly professional sports, do not ban a number of substances that are banned in international competition. These conflicting regimes confuse athletes and the public and cause international concerns about U.S.-based anti-doping programs.
- Existing federal standards also require improvement. For example, a 1995 DOJ/DEA conference determined that “current provisions of the Federal Sentencing Guidelines establish grossly inadequate sentencing standards for steroid traffickers.”
- The current USOC drug testing program has been able to achieve less than a 75 percent success rate in testing athletes out-of-competition -- roughly one-quarter of the time, athletes who are selected for out-of-competition tests are not tested for logistical reasons (e.g., the athlete could not be found). Yet, effective no-notice, out-of-competition testing is critical to any successful anti-doping regime.
- Moreover, the potential conflicts of interest that are inherent in our existing self-regulating approach have fueled international skepticism about the commitment of the United States to

drug-free competition.

The essence of athletic competition is at risk. Recent drug scandals are without question eroding the ethical foundation of sport and are compromising the public's support for sport. A 1999 survey by the Healthy Competition Foundation found that 71 percent of the American people are less likely to watch the Olympics if they know athletes are using drugs. There is a growing perception that these games are becoming yet another fraud on the public.

• **BUILDING A BETTER APPROACH –
HIGHLIGHTS OF THE NATIONAL ANTI-DOPING STRATEGY**

A. Development of the Strategy

It is clear to the Office of National Drug Control Policy that a new approach is required. With the health and safety of countless young people at stake and with the fate of one of the world's greatest tributes to the dignity of mankind in the balance, the Federal government has an obligation to play a role in creating such a solution. In the eloquent words of Edwin Moses:

“The problem of drug use by elite athletes must continue to be addressed on the Federal level by General McCaffrey and others who are responsible for children and the public welfare The United States is unique among Western democracies in not having a ministry of sport, because Americans generally believe that less government is good and that private organizations and the market can be trusted to do work that affects the public trust. Whatever the merits of this perspective in other contexts, the traditional deference to the private organizations that govern sport is not warranted in the case of doping Notwithstanding the efforts of some well-intentioned individuals, the sports governing bodies in this country and internationally have shown time and time again that they are not structurally equipped for this work, nor are they sufficiently accountable to the larger interests of society that are affected by doping.”

Since the infamous Nagano snowboarding incident described above, the Office of National Drug Control Policy has been examining the issue of drug use in sport. The result of these efforts is the Strategy we are releasing today.

This Strategy has been developed in close consultation with America's athletes – the hard work and sound advice of people like Frank Shorter, Edwin Moses, Donna de Varona, Wes Barnett and others have been critical to this effort. These world class athletes have taken time out of their otherwise busy lives simply because they care – they care about the dignity and beauty of athletics, but mostly they care about the futures of the young people who wish to follow in their footsteps. Protecting all our athletes – the elite, the up and coming and the hopefuls – is the central purpose behind this initiative.

In developing our international strategies we have relied heavily upon the advice of the distinguished Dr. Henry Kissinger. It has been a privilege to work with a person of his intellect

and stature. Allow me to personally thank him not only for his outstanding contributions to this effort, but also for the selfless efforts he has made with respect to overall reform of the IOC. While the reform of the IOC remains a difficult challenge, we have great confidence in the ability of Dr. Kissinger and other public servants of international reputation to succeed.

In addition, we have relied upon experts from the fields of medicine, scientific research and law. In particular, allow me to recognize the tremendous support we have received from doctors and scientists. Dr. Gary Wadler, one of the world's preeminent sports medicine physicians and a recipient of the IOC's President's Prize, has provided us with the benefits of his years of experience. We look forward to his testimony today. Our efforts have also been aided by the outstanding counsel of doctors Don Catlin and Larry Bowers, who run the two IOC accredited U.S. drug testing laboratories. Through their assistance, we have ensured that our work is grounded in sound science. These doctors, along with ONDCP's own nationally recognized Deputy Director Dr. Don Vereen, have all helped us understand the importance of cutting edge research to this effort.

In addition to relying on leading scientists, we have also worked closely with experts from the legal field who have defended, prosecuted and adjudicated doping cases. At the outset of this testimony ONDCP recognized the contributions of Professor Coleman, who you will hear from later. Let me also thank Mr. Richard Young for his invaluable assistance. Mr. Young serves on the International Court of Arbitration for Sport, he is a legal advisor to the USOC and serves as counsel for USA Swimming. He has been generous with his time and knowledge.

We would be remiss to not flag the particularly important contributions that the USOC and the Salt Lake Organizing Committee have made to this effort. Throughout the development of this Strategy the USOC has worked closely with the ONDCP team to help us understand the challenges they face and to help us better understand the role the federal government can play in supporting their efforts. We are proud to have the leadership and support of President Hybl, Executive Director Schultz, Anti-Doping Committee Chair Baaron Pittenger and the rest of the USOC anti-doping program. Their support for this Strategy clearly underscores the organization's commitment to developing a drug-free playing field for sport domestically and at the international level.

Similarly, ONDCP would like to call the Committee's attention to the tremendous leadership and commitment of Mr. Mitt Romney and the Salt Lake Organizing Committee. Throughout my career in public service I have had the privilege of working with many outstanding public servants. Mr. Romney is among the finest. His outstanding Salt Lake Olympic team has worked with us to ensure that this Strategy addresses the important responsibility we shoulder as a host nation – when the athletes of the world come to the 2000 games we owe them a level drug-free playing field. We have complete confidence that the Salt Lake games will set the standard for the winter Olympics.

ONDCP would also like to recognize the important contributions that our "Federal team" has made to this Strategy. Secretary Donna Shalala, one of our nation's biggest sports fans -- and a superb amateur athlete herself – has been a valued partner in this effort. We also look forward to

working with NIDA's brilliant Dr. Alan Leshner, SAMHSA's distinguished Dr. Nelba Chavez and the rest of the Department of Health and Human Services. Additionally, Drug Enforcement Acting Administrator Donnie Marshall and the rest of the DEA have been key players in building this Strategy. Our efforts here build on years of DEA work with the sports community. On the international front, the expertise and support of the Department of State, in particular Undersecretary Tom Pickering and international athletics liaison Donna Giglotti, have helped shape our approach.

In particular, ONDCP wishes to thank Mickey Ibarra and Thurgood Marshall, Jr., the White House Salt Lake Olympic Games Task Force co-vice chairs. They have been incredibly supportive and have worked closely with us to develop what we feel is a highly effective Strategy to address this problem. We are grateful for their support and good counsel. Mr. Ibarra will be an important member of our U.S. delegation to the Australia Summit. His presence on this delegation underscores the highly coordinated nature of our Strategy.

While the focus of this Strategy is on federal efforts, as you can see from this lineup the Strategy is far more than a "federal strategy." It is based on the views of our nation's athletes, coaches and sports leaders. It is built upon the expertise of leading scientists, doctors, jurists and other experts. It is comprehensive in scope, reaching from the research lab to the local playground to the Olympic medal stand.

B. Key Components of the National Strategy – Recommendations for Building a New Approach

The Strategy begins from the understanding that the United States government has a responsibility to undertake efforts at the national, binational and international levels to strengthen anti-doping regimes. The goals of these initiatives are to protect the health and safety of athletes and young people and to safeguard the legitimacy of sports competition. The Strategy also recognizes that to be effective these substantive initiatives should be augmented by efforts to inform the American public and the international community about the risks of drug use in sport – as well as the nature of our actions and goals.

Our Strategy provides a comprehensive set of national efforts to address this threat. We encourage you to review it in its entirety and welcome your views and leadership as we move forward. To assist you in this review, this section highlights key elements of the Strategy

- National Efforts

Among the key initiatives at the national level are:

- **Developing options for targeted governmental oversight of U.S. amateur sports anti-doping programs.** An effective domestic anti-drug use program for sports may likely call for an oversight and reporting mechanism requiring Federal review and certification of amateur athletic anti-doping programs.
- **Working with the USOC and other stakeholders to facilitate the development of an**

externalized and fully independent domestic anti-doping mechanism or body (including research, testing, and adjudication). The development of an effective, transparent, accountable and independent U.S. agency is critical to the success of U.S. anti-doping efforts. Over the past year, the USOC has made significant strides toward building a more effective, transparent, independent and externalized anti-doping program. This effort is an important contribution to this Strategy.

In order to be effective, such an agency must be fully independent and must have certain governmental or quasi-governmental powers. (For example, the USOC has long sought membership in the International Anti-Doping Arrangement (IADA). However, it has been precluded from membership because the IADA is a treaty among governments and the USOC is not a governmental body.) With the powers of governmental status, however, must come the responsibilities of public service – most notably the duties of transparency and accountability to the American taxpayer. Further, an independent anti-doping agency would benefit substantially – both at home and abroad -- from the added credibility offered by governmental oversight. Limited, but effective, oversight, accountability and transparency would allow the United States to dispel the perceived conflicts of interests and the “fox guarding the hens” reputation that unfortunately now plagues the program.

It is important to underscore that the purpose here is not to build a new government bureaucracy. Rather, the goal is to provide a level drug-free playing field for all of America’s athletes, and to ensure that the institutions that police this field are effective, accountable and transparent. We look forward to working closely with the Congress and this Committee as we move forward in developing these institutions and relationships.

- **Improving Federal Support for U.S. Anti-Doping Programs.** From increasing drug prevention efforts to strengthening law enforcement operations to break up illegal smuggling networks, the Federal government should play a more active role in combating drug use in sport. The Strategy lays out a series of efforts that would support anti-drug and anti-doping efforts in the United States. The interagency task force will be evaluating ways to accomplish this goal.

One area where Federal support can be most valuable is in carrying out advanced research designed to end the “cat and mouse game” of current anti-doping programs by closing the existing scientific loopholes. Federally supported research has put a man on the moon and developed drug detection systems that can find a few ounces of drugs hidden within an entire truckload of produce. It seems nonsensical to suggest that we cannot find a way to determine if an athlete is chemically engineering his body.

- **Assisting the Salt Lake Games.** In 2002, the eyes of the world will turn to Salt Lake and the United States. Over the next two years, we have an important opportunity to set the standard for a drug-free Olympics. As the host nation it is our responsibility to ensure that we provide for the world’s athletes a level playing field in Salt Lake. The

Salt Lake Organizing Committee (SLOC) is committed to this goal. It is incumbent that we assist them in their efforts.

- Binational Efforts – Australia and the United States

Our binational efforts focus upon building a partnership against drugs and doping between the Sydney and Salt Lake games. The anti-doping program being implemented for the Sydney games is impressive. For example, the Australians have also committed roughly \$3 million to develop new drug testing and detection methods alone. Our goal in working with the Australians is to assist them as they prepare for the 2000 games and to learn from their efforts as we prepare for the 2002 games. The SLOC has already begun efforts in partnership with ONDCP to build such a team approach to combating doping – which is unheard of among host nations. Through effective teamwork, we have an opportunity to ensure that the last games of this millennium and the first games of the next millennium can begin a new drug-free era for the Olympic movement.

- International Efforts

At the international level, our efforts are focused on achieving five commonsense principles within the world of international competition:

- A truly independent and accountable international anti-doping agency;
- Testing on a 365 day-a-year, no notice basis;
 - No statute of limitations – whenever evidence becomes available that an athlete cheated by doping they will be stripped of their honors;
 - Deterrence through the preservation of samples for at least ten years– while a dishonest athlete may be able to defeat today’s drug test, he or she has no way to know what will be detectable through tomorrow’s scientific advances; and,
 - Advanced research to end the present cat and mouse game of doping by closing the loopholes created by gaps in science.

These principles were first presented by ONDCP on behalf of the United States government to the IOC at the February, 1999 World Conference on Doping in Sport.

Since the Lausanne meeting at which these markers were set out, the IOC has held a series of meetings to develop an anti-doping agency and program. The United States and the USOC were not included in these discussions – even though the United States is the largest market for the games, the bulk of the funding for the IOC and the games originates in the U.S. and we consistently field one of the largest teams in both summer and winter games. Nor were we consulted on the resulting text. Similarly, other nations – such as the Australians, the British, the Germans, the French and the Canadians – who are committed to the fight against drugs in sport were also not consulted. Of equal importance, only a few select athletes were part of this process.

As a result the IOC process has produced a proposal that does not meet the requirements we

have set out. In general, it is our view that the IOC is rushing forward to build an institution that we cannot support – one which is more public relations ploy than public policy solution. Our central concerns include:

- The IOC's proposal provides the agency no real authority over anti-doping programs. Under the IOC's new Medical Code, anti-doping decisions of the agency would serve as mere recommendations to the IOC. This is not a model for either independence or effectiveness.
- The proposal should have stronger guarantees that the agency will be independent and operate based on basic principles of good governance and democracy, such as transparency and no conflicts of interest.
- The proposal asks national governments to pay half the bill for the agency, but fails to accord these governments a sufficient role in the policy-making process.
- Important decisions, such as the parameters of testing, have not been addressed – instead they have been *de facto* delegated to a small executive board of IOC-related appointees to decide in secret.

With respect to funding, it seems inappropriate to assume that national governments will fund half the cost of an agency that they had no involvement in developing -- and which they will have an inadequate role in operating. Further, while the international community should provide support for an adequate anti-doping agency of this sort, the "pay for a say" formula that has been set out fails to recognize that the nations hosting the upcoming games must also have a say in the agency – as is the case with the IOC's present Medical Commission. Additionally, the current IOC proposal fails to recognize the other contributions that many nations, such as the United States, have made and will make to the games -- and the fight against drug use in sport.

We have once again consulted with many of our key partners, such as Australia, Canada and Great Britain. They continue to share the concerns that I have outlined. Further, while certain international organizations may have expressed agreement with the general direction of the IOC proposal, these organizations have not "endorsed" the IOC's proposal in the strict sense of the word (e.g., they have not taken it back to their member states for approval). Most importantly, the EU has informed us that during the discussions leading up to the IOC proposal, the EU made it clear that such a proposal could not appropriately move ahead without the involvement of the United States, the Australians, the Canadians and other national governments. These responses seem to refute the view expressed in public by IOC official Mr. Pound that the IOC's proposal has already been adequately endorsed internationally. However, we do have reason to believe that Mr. Samaranch will be open to a reasonable discussion to achieve a rational consensus position.

Given this state of play, it is up to the international community to work with the IOC to ensure that an effective anti-doping regime is put in place. Ultimately, in order for any anti-

doping regime to be effective, it must have the involvement of the international community, including the IOC, which is (rightly) a significant stakeholder in this effort.

ONDCP has begun efforts to develop an international consensus approach to rectify this situation. Over the coming months we will work closely with our U.S. stakeholders and international allies (e.g., the Australians, the Canadians, the British, the French, the Germans) and international organizations (e.g., the U.N. Drug Control Programme, and the Council of Europe) to develop such a consensus. This week, I will lead a U.S. interagency team to Europe to meet with our European allies. In November, I will lead a delegation to a Summit of Governments on how to combat drug use in sports, which is being sponsored by the Australian government in Sydney.

Our purpose is to build a consensus sufficiently rational to bring the IOC to the table and require that these shortcomings be fixed. We look forward to helping the IOC work with the community of nations and the other stakeholders – in particular the athletes – to develop a truly independent and fully effective international anti-doping agency. We believe that the Australia Summit affords the IOC an important opportunity to move such a process ahead.

Mr. Chairman, knowing of your interest in this issue, we will keep you informed of developments on this front. If the IOC fails to seize this opportunity to work cooperatively with us and the rest of the international community, we will need your support to force change. In short, your leadership and that of the Committee will be critical to the creation of a truly independent agency and a fully effective international anti-doping regime.

C. Implementation of the National Strategy

The Strategy before you is a living document. Between now and the 2002 games in Salt Lake the world of athletics – and the worlds of science and medicine – are likely to change dramatically. This Strategy provides a framework capable of evolving in parallel. In the near term we will convene the federal task force called for under the Strategy. This task force will be chaired jointly by ONDCP, the White House Olympic Task Force Chairs and HHS. This task force will include representatives from across the involved federal spectrum, including, but not limited to, the Office of Management and Budget, Justice (including DEA), State, the National Institute on Drug Abuse and the Substance Abuse and Mental Health Services Administration. The primary purposes of this task force will be to refine the Strategy, set priorities for implementation and undertake the task of implementing real reforms.

We believe that this should be an open and participatory process. We will reach out to the widest possible range of stakeholders – athletes young and old, coaches, doctors, the leaders of the National Governing Bodies, parents, sports organizations, and others. And, we will continue to work closely with the SLOC, USOC, and the USOC's Athletes Advisory Council – key actors in this effort.

Congressional leadership on sports issues has been strong. We recognize the important role that Congress plays in these matters. To this end, we will also seek out bipartisan Congressional

representation on this task force and specifically look forward to working with the Chairman, Senator Hollings and this Committee.

CONCLUSION

Drug use in sports today has reached a level at which it jeopardizes both the integrity and legitimacy of athletics, as well as the health and safety of athletes and our youth. Athletes who want to compete fairly and without doping fear that they stand no chance against competitors who will accept any cost – debilitating injury, illness and even death – to win. Doping undermines the public trust in organized sport and the integrity of the vast majority of participating athletes who do not use drugs or dope. Every great victory is subject to doubt. Drug-using athletes verge on creating records that honest human performance cannot best. We seriously risk the creation of a chemically engineered class of athletic gladiators.

The current messages being sent by illicit, undetected, unreported or unresponded to drug use in sport continue to place our nation's young people at great risk. Each day, growing numbers of young people turn to untested and unproven chemicals to gain an edge. The age at which children -- and in turn parents -- are being confronted with the decision whether to use drugs or forgo them and face a competitive disadvantage is growing younger each year. Young people are confronted with the use of drugs, ranging from marijuana to steroids, among the ranks of elite athletes and consequently are led to the false belief that they can use drugs and succeed in life. At risk youth are not limited to a few isolated elite athletes; on soccer fields, baseball diamonds and swimming pools all across the nation, hundreds of thousands of American children strive for greatness. Each of these young people are within the at-risk population.

First and foremost, doping control measures must be rooted in sports ethics and values. They must also be founded on respect for personal rights and the fairness of due process. Current doping and drug control programs have proven inadequate to the task. In general, they are limited in their ability to either effectively detect drug use or deter current or future athletes from cheating. Conflicts of interest – both real and apparent – abound. The current approach places honest athletes at risk of false accusations -- and fails to ensnare those who actually cheat. Overall, today's systems fail to provide athletes with the assurance and confidence that the playing fields are level and that the clean competitors stand a fair chance at victory.

Absent real reform, we risk not only irreparable damage to the beauty and glory of sports but also to the long-term health of our athletes and young people. Athletes willing to cheat will continue to push the envelope of science to find new ways to steal even the slightest advantage. Increasing numbers of ever younger children will acquiesce to the risks of drugs in order to pursue their athletic dreams. Absent change, the value of sports in our society will diminish and the human spirit will be poorer for its loss.

United States government leadership is critical if we are to succeed in eliminating the threat of drugs in sports. With such leadership, a strategy comprising national, binational and international efforts can help bring about needed reforms. Working with stakeholders (athletes, youth, the USOC (including the USOC Athletes Advisory Council), the NCAA, NGBs, the leagues,

coaches, doctors, parents, schools and others), we have an important window of opportunity to preserve the values of athletic competition and to safeguard the futures of our children.

Athletics at all levels play a major role in American society. Aside from their recreational value, we look to sports to help us as parents and as a nation to develop healthy children and instill positive values and mores in our youth. Feats of athletic greatness – the victory of the 1999 U.S. Women’s World Cup soccer team, the U.S. hockey team’s miracle on ice,” Jessie Owens victories in the face of Nazism – inspire us and remind us to strive to be better in all that we do in pursuit of excellence. Athletics shape our culture, heritage and history. In this nation, sports provide us with rallying points around which diverse groups of people can unite and cheer with one voice. By working to safeguard sports we help preserve these important contributions to our nation.

See HHS, Adolescent Time, Risky Behavior, and Outcomes: An Analysis of National Data (September 1995); see also NFHS, The Case for High School Activities (undated) (available at www.nfhs.org) (discussing Hardiness Center study finding that roughly 92 percent of participants in high school sports were non-drug users, received above average grades and had better chances of attending and succeeding in college); T. Collingwood, et al., Physical Fitness Effects on Substance Abuse Risk Factors and Use Patterns, 21 J. Drug Education 73-84 (1991); E. Shields, Sociodemographic Analysis of Drug-Use Among Adolescent Athletes: Observations – Perceptions of Athletic Directors-Coaches, 30 Adolescence 839-861 (1995).

See A.D. Faigenbaum, et al., Anabolic Steroid Use by Male and Female Middle Students, Pediatrics, May 1998 (this survey was conducted in public middle schools in Massachusetts).

Id.

See S.M. Tanner, et al., Anabolic Steroid Use by Adolescents: Prevalence, Motives, and Knowledge of Risks, 5 Clin. J. Sports Med. 108-115 (1995). Fifty-five percent of young people report that steroids are easily attainable. Id. Friends and coaches were the two most often reported sources for these drugs. Id.

See Steve Wilstein, Baseball Unlikely to Rule on Andro, Associated Press, Feb. 27, 1999 (citing tenfold increase). The industry’s own study noted a three-fold increase between the time of the McGwire revelation (August 1998) and December 1998 alone. See Steve Wilstein, McGwire Powers Andro Sales to 100,000 users, Doctors Fear Hazards, Associated Press, Dec. 8, 1998.

Blue Cross/Blue Shield, Healthy Competition Foundation, Summary of Findings From National Surveys on Performance Enhancing Drugs, August 1999.

Id.

See, e.g., Werner Franke, Brigitte Berendonk, A Secret Governmental Program of Hormonal Doping and Androgenization of Athletics: The German Democratic Republic (unpublished manuscript) (documenting health impacts on GDR athletes who used performance enhancing drugs); A.B. Middleman, et al., Anabolic Steroid Use and Associated Health Risks, 21 Sports Med. 251-255 (April 1996); S.M. Tanner, et al., Anabolic Steroid Use by Adolescents: Prevalence, Motives, and Knowledge of Risks, 5 Clin. J. Sports Med. 108-115 (1995); M.A. Nelson, Androgenic-Anabolic Steroid Use in Adolescents, 3 J. Pediatric Health Care 175-180 (Jul-Aug 1989); C.E. Yesalis, et al., Anabolic Steroid Use Among Adolescents: A Study of Indications of Psychological Dependence, in C.E. Yesalis, ed., Anabolic Steroids in Sport and Exercise 215-229 (1993); C.E. Yesalis, et al., Anabolic-Androgenic Steroid Use in the United States, 270 JAMA 1217-1221 (1993); M. Johnson, et al., Steroid Use in Adolescent Males, 83 Pediatrics 921-924 (1989); K.E. Friedl, Effects of Anabolic Steroids on Physical Health, in C.E. Yesalis, ed., Anabolic Steroids in Sport and Exercise 109-150 (1993); R.H. Durant, et al. Use of Multiple Drugs Among Adolescents Who Use Anabolic Steroids, 328 N. Eng. J. Med. 922-926 (1993).

See Richard Panek, *Tarnished Gold*, *Women's Sports and Fitness*, May 1, 199, 124. "Rica Reinisch, winner of three golds in 1980, blamed her ovarian cysts on hormones she'd taken . . . Shot-putter Heidi Krieger, the 1986 European champion, contended that her unwitting ingestion of male hormones had led to facial hair, an Adam's apple and her eventual decision to undergo a sex change.

Werner Franke, Brigitte Berendonk, *A Secret Governmental Program of Hormonal Doping and Androgenization of Athletics: The German Democratic Republic*, 43 *Clinical Chem.* 1262-1279 (1997).

Id.

See Sean Fine, *et al.*, *Canadian Cyclist Watches Dream Die*, *The Globe and Mail*, Nov. 7, 1998; Dr. Gary Wadler, *Drug Abuse Update*, *The Medical Clinics of North America*, 439-455 (1994).

See G. Wadler and B. Hanline, Introduction, in *Drugs and the Athlete*, 1-17 (1989). In 1886, an English cyclist died from an overdose of the stimulant trimethyl. See Gary Wadler, *Doping in Sport: From Strychnine to Genetic Enhancement, It's a Moving Target*, presentation before the Duke Conference on Doping, May 7, 1999. In 1904, marathoner Thomas Hicks became the first death in the modern Olympics from the stimulant strychnine. *Id.* In 1960, Danish cyclist Knud Jensen died during the Rome Olympics from amphetamines. In 1967, English cyclist Tom Simpson died during the Tour de France. The autopsy revealed high levels of amphetamines. See E.M. Swift, *Drug Pedaling*, *Sports Illustrated*, June 5, 1999, at 65. Among the most egregious drug use practices reported by Mr. Voet, is the use of the so-called "Belgian cocktail" – a mix of amphetamines, cocaine, caffeine and heroin.

See John Hoberman, *SmithKline Beecham and the Atlanta Olympic Games* (unpublished paper on file at ONDCP).

Id.; Steven Downes, *Revealed: Four More Olympic Drug Users*, *Sunday Times* (London), Nov. 19, 1996.

See *Das Erbe von Atlanta: Vier vertuschte Dopingfalle*, *Suddeutsche Zeitung*, Nov. 19, 1996; Hoberman *supra* n. 25.

See *supra* n. 16.

See U.S. Department of Justice, Drug Enforcement Administration, Conference on the Impact of National Steroid Control Legislation in the United States, June 1995.

John Powers, *Supplement User Striking Out*, *Boston Globe*, Sept. 6, 1998.

See Edwin Moses, *McCaffrey Must Not Stop at Andro*, *New York Times*, May 23, 1999, 13: