‘It was my thought … he made it a reality’: Normalization and responsibility in athletes’ accounts of performance-enhancing drug use

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Abstract
Despite the widespread interest in athletes’ use of performance-enhancing drugs (PEDs) in track and field, the voices of the athletes who use banned substances have seldom been heard. Interviews with competitive athletes were conducted to explore their relationship to doping. Two themes emerged from the interviews. Firstly, the athletes presented doping as a normalized part of competitive sport, inevitably involving the participation of coaching staff. Secondly, and in contrast to the first theme, athletes maintained that they alone were responsible for the decision to use PEDs. The study supports the ‘networked athlete’ explanation of PED use, while highlighting the individualist explanation of doping offered by the athletes themselves. Foucault’s concept of governmentality is used to explain this contradiction, by suggesting that athletes’ internalization of responsibility for doping is part of the art of governing competitive sport.

Keywords
athletics, doping, governmentality, interviews, track and field

Introduction
Commentators such as Cashmore (2010), Coakley (2003), König, (1995) and Petróczi (2007), among others, have argued that doping is, in fact, an endemic part of sport congruent with the demands of contemporary sport to exploit the limits of human
For König (1995: 253), doping is a result of the drive for high performance in sport and in science. The underlying competitive logic of both sport and science takes on a ‘medical-pharmaceutical shape’ in the form of doping. It is unsurprising, then, that despite the widespread condemnation of doping in sport in popular and official discourse (including the establishment of the World Anti-doping Agency, WADA, in 1999 ‘to fight against doping in sport in all its forms’ (WADA, 2011)) and the existence of studies that minimize the significance of doping (Amateur Athletics Association, 1988; Rasmussen, 2005), there has been plentiful evidence to suggest that the phenomenon is widespread and established (Ljungquist, 1975; Sports Council, 1996; Coni et al., 1988; Hanstad et al., 2009; McIlvaney cited in Evans, 1999; Sadeghi Pour et al., 2009). For example, research has indicated that the competitive culture of cycling tolerates and accepts to a certain extent the use of performance-enhancing substances (Christiansen, 2005; Lentillon-Kaestner and Carstairs, 2010; Schneider, 2006). Mazanov and Connor (2010) have suggested that the two industries of doping and of anti-doping have a symbiotic relationship: while a doping industry has developed to keep one step ahead of doping policy, an anti-doping industry has evolved to implement that policy.

Since competitive sport is organized according to a win/lose coding (Wagner, 2009), winning represents a great personal achievement and the ultimate goal of a competitive athlete (Newsholme et al., 1994). Moreover, in recent times, winning can also lead to substantial economic, social and personal gains (Ehnborg and Rosén, 2009; Shapiro, 1989). Coaches are under pressure themselves to produce a winning athlete and are also rewarded in the case of victory, and may transmit this pressure to the athlete to consume performance-enhancing drugs (PEDs) (Miah, 2004), Johnson (1990) suggested that many athletes believe that the only way to win against steroid users is to use themselves. However, existing studies (Hoberman, 2005; Houlihan, 1999; Hughes and Coakley, 1991) that seek to explore and evaluate the pressures that lead athletes to take banned substances tend to be conducted in the absence of hard empirical evidence in the form of first-hand accounts from competitive athletes who admit to using banned drugs themselves. This paper presents these data, and takes further the field of inquiry by adding the voices of elite, competitive track and field athletes who have engaged in doping to the debate.

**Competitive athletes and performance-enhancing drug use**

First-hand accounts of PED use among sportspeople have tended to focus on the sport of bodybuilding. For example, Monaghan (2002) interviewed male bodybuilders who admitted using steroids. His research emphasized the need to explore the social meanings that illicit drug users attach to ‘risk’ practices. Participants in his research constructed three narratives of justification for using PEDs: self-fulfilment; condemnation of condemners; and denial of injury. The bodybuilders rationalized that PED use was necessary for them to reach their potential, but that it was not wholly responsible for their success. They used techniques of neutralization (Sykes and Matza, 1957) to undermine condemners of PED
use on the grounds of hypocrisy and misinformation. In addition, they denied that steroids caused harm to themselves and, in particular, to others.

Other researchers, albeit without access to such first-hand accounts, have stressed a combination of personal and environmental forces in decisions to use PEDs (Dodge and Jaccard, 2007; Nicholson and Agnew, 1989; Tricker et al., 1989). The influence of peers, parents, availability of drugs, cultural norms and fear of failure are all cited to explain athletes’ motivation to take PEDs. Judge et al. (2010) argued that the coach is one of the primary ‘significant others’ (Coakley, 2007) that shape an athlete’s decisions to take PEDs. The coach was also considered influential in experimental research by Huybers and Mazanov (2010). Based on a sample of 259 Australian athletes (the majority of whom were elite), the authors concluded that athletes who were at risk of doping were those that could be persuaded by their coaches that the effects would be improved performance without negative consequence, such as prosecution. Effects such as death, fines or lack of financial gain were factors that would disincline athletes to dope (Huybers and Mazanov, 2010).

First-hand accounts of PED use, particularly from track and field athletes, have to date been largely restricted to popular autobiographies, such as those written by the British sprinter, Dwain Chambers (2009) and the Australian shot putter, Werner Reiterer (2000). Despite the possibility of the authors’ need for self-justification influencing these accounts, they indicate the influence of complex social and environmental factors, and suggest doping involves a host of significant others, including coaches and medical professionals. Chambers (2009) described the culture of track and field as highly competitive, and maintained that doping was an integral part of the system, with most athletes using banned substances. Chambers (2009) criticized the hypocrisy of the sporting institution that was complicit in suppressing this knowledge. Reiterer (2000) also admitted taking drugs and argued that drugs were necessary in order to become a protagonist at the highest competitive level and that, while he was using drugs, he was also receiving continuous, professional assistance. The combined effect of the medicalization of sport, the pressures on the athletes and the nature of their relationship to their coach and support staff, indicates the complexity surrounding the issue of doping in track and field. Reiterer’s claim of institutionalized and supervised doping (Holt et al., 2009), as well as major doping scandals such as the Bay Area Laboratory Co-Operative (BALCO) in which Chambers was implicated, and the ‘Puerto Affair’ in cycling (Soule and Lestrelin, 2011), all involved a developed network of agents.

Lentillon-Kaestner and Carstairs (2010) interviewed eight young cyclists on the brink of pursuing professional careers and found that only one of the eight was not attracted to PEDs. The cyclists had a positive attitude to doping at the professional level, but not at lower levels, with two of the cyclists who had recently turned professional indicating that they thought it was riskier for their health to take nothing than to take banned substances. The cyclists reported influence from others in their social environment:

At the non-professional level, social pressures prevent cyclists from taking banned substances. By contrast, cyclists who had recently become professional found that there was subtle pressure from teammates or even team managers to start doping. (Lentillon-Kaestner and Carstairs, 2010: 340)
Both informal and formal evidence exists, therefore, that the decision to dope is influenced by a network of people including parents, other athletes, coaches, managers and doctors, as well as the competitive logic of sport and the desire to win. The young cyclists suggested that the decision to dope did not happen immediately but could be affected by the experience of losing a race and the pressure to win. Doping was viewed not as destroying sport, but as being part of sport (Lentillon-Kaestner and Carstairs, 2010).

The importance of the social context in shaping sports peoples’ behaviour has led Connor (2009) and others to question the individualizing of athletes’ decisions to use drugs within dominant discourses. For example, athletes who test positive for drug use are often portrayed as ‘cheats’ who must be removed or ‘banned’ from the ‘clean’ sporting environment. Connor (2009: 390) argued that PED use ‘is not an issue that merely affects a lone individual, but it is an issue that concerns many’. Connor (2009) eschewed these individualistic explanations of athlete’s decisions to use PEDs in favour of an approach that acknowledged the athlete’s connection to a network of support from ‘coaches, doctors, nutritionists, managers, marketers, physiotherapists, acupuncturists, and/or biomechanics to name just a few’ (339). Connor (2009) argued that a focus on the ‘networked athlete’ could help researchers understand the micro-sociological interactions within the social world of the elite athlete.

This individualistic explanation is also condemned by Stewart and Smith (2010) in their analysis of the press and official narratives surrounding the elite-level Australian cyclist Mark French, who was accused of doping in 2003. Stewart and Smith (2010: 194) pointed to the immediate and unanimous condemnation of French ‘even though scant details had been released in the first instance, and even though French was subsequently cleared of all charges on appeal’. They observed that the dominant ‘lone athlete’ account of doping in this case was contradicted by the evidence against French, including the discovery of more than 200 drug-related items in his apartment, implying that more than one cyclist must have been involved.

While both cycling and bodybuilding have attracted attention for the incidence of PED use, there are differences in attitudes to doping among different sports (Alaranta et al., 2006). In a study of elite athletes eligible for funding by the National Finnish Olympic Committee, Alaranta et al. (2006) found that 90% reported that they believed banned substances and methods had performance-enhancing effects, and 30% said that they personally knew an athlete who used banned substances. However, there appeared a greater prevalence towards the use of PED in certain sports, with 42.5% athletes in speed and power sports reporting direct knowledge of others’ use. Despite this, none of the athletes themselves admitted using banned substances.

While existing research suggests that athletes do perceive drug use to be a problem in some sports (Judge et al., 2010), interview data has typically found that athletes’ opinions are consistent with anti-doping discourses (Bloodworth and McNamee, 2010; Butryn, 2003). In the next section, we employ Foucault’s concept of governmentality to explore theoretically the reasons why athletes may hold PED use to be an inevitable part of sport while simultaneously endorse an anti-doping position.
Governmentality and the ‘networked athlete’ in track and field

This study presents accounts of doping from elite track and field athletes. Drawing on the work of Foucault (1975), Heikkala (1993) has described the culture of track and field as heavily dependent on disciplinary techniques, which he saw as both an instrument and an effect of competition. Training practices produce athletes as docile bodies, conforming to the ‘to the norms of correct training’ (400). Deviations from the norm, including the assertion of personal freedom, are strongly discouraged if sporting victory is to be achieved.

The consequence of the immersion of the athlete in this highly disciplined environment is that his or her choices, including whether to take PEDs, are highly constrained by the logic of competing. Wagner (2009) suggested that the contradictions surrounding doping are inherent in the different uses to which sport is put in society. Doping may be compatible with the competitive logic of sport, but not with the health, political and social uses of sport. For example, records may be broken through the use of PEDs, but that may sully the image of sport for politicians who use it to signify the success of their administration. PEDs may help sportspeople to win medals, but it may contradict their subsequent use as role models or symbols of the embodiment of health. The use of PEDs presents a risk to these other uses of sport.

The objective of WADA has been to control the risk of doping to this socially and politically useful, healthful vision of sport. Hanstad and Loland (2009) have suggested that the close monitoring of athletes, who have to report their whereabouts on an everyday basis to comply with anti-doping measures, could be understood within a Foucauldian framework of disciplinary society. In addition, Park (2005) suggested that WADA’s surveillance of athletes could be understood through Foucault’s concept of governmentality. Foucault argued for the need to adopt an external point of view of the way the state uses technologies of power to govern the population. Governmentality can, therefore, be understood as the ‘art of government’ (2009: 79) or the ‘rationality immanent in the micro-powers’ (Senellart, 2009: 389) by which the state seeks to shape the conduct of individuals. The exercise of power can take many forms and may involve coercion, discipline, encouragement and the manipulation of desires and anxieties. Fundamentally, however, it involves ‘acting upon an acting subject or acting subjects by virtue of their acting or being capable of action’ (Foucault, 1982: 220). In other words, this art of governing depends on subjects being free. Athletes are capable of action and making decisions.

WADA perpetuates the individualist explanation of doping by monitoring the athlete’s individual behaviour. In this way, WADA addresses itself to the capacity of athletes themselves to reject doping. Yet, the pressures of track and field mean that the actions of athletes take place within the limitations of the logic of competition. WADA, however, draws attention away from these influences, downplaying the ‘networked athlete’ explanation of doping. It may be argued that revisions to the WADA code (2009) have begun to acknowledge the involvement of the athlete in a network of support systems, and have tried to target support personnel in addition to athletes themselves. Currently, the code refers to the prohibition of ‘administration or attempted administration’ (WADA, 2009: 24) of
banned substances, as well as ‘assisting, encouraging, aiding, abetting, covering up or any other type of complicity involving an anti-doping rule violation’ (25). However, the code does not specify detection measures specifically targeted at support personnel, only athletes. McNamee and Phillips (2011) made a number of observations that that undermine this aspect of the code. Firstly, WADA does not have jurisdiction over sports medicine personnel. Secondly, there is considerable ambiguity in the terminology used. For example, ‘aiding and abetting’ has no precise medical definition. Finally, McNamee and Phillips argue that the code infringes medical professionals’ commitment to care and confidentiality for their patients. So, despite lip service to the existence of athlete networks, individual athletes remain the clearest target of the code. The concept of governmentality may, therefore, be useful to explain the complex position of competitive athletes who choose to use banned substances to improve their performance.

Methodological considerations

This article presents qualitative data that offers a rare insight into the sense that the athletes themselves make of their drug use. The study has examined track and field athletes, that is, athletes who are among the group identified by Alaranta et al. (2006) as most at risk of doping. This qualitative approach avoids some of the problems of existing studies that have relied on survey methodologies. Alaranta et al. (2006) indicates that there are differences between sports in their attitude to doping. Yet, even though this difference exists, much of the existing research has mixed competitive athlete and amateur or non-athlete populations within their samples (for example, Berning et al., 2008; Dunn et al., 2009; Laure et al., 2005; Match, 2007; Parkinson and Evans, 2006; Perry et al., 2005). In addition, the survey methods used to obtain data on attitudes and use of PEDs have been called into question by a number of authors (Alaranta et al., 2006; Judge et al., 2010; Pope et al., 1988). Problems of generalizability associated with surveys, and their inevitable decontextualization of the meaning of responses (Robson, 2002) detract from the value of studies of this kind. Survey research may appear to address the issue of PED use, but often simply investigates anabolic steroid use without links to competitive sport. It is likely that difficulty of access to competitive athletes willing to disclose information that may incriminate them is the reason why researchers investigate other populations. In the study by Alaranta et al. (2006) none of the athletes surveyed admitted personal use. Judge et al. (2010: 55) remarked that within surveys of this kind ‘many athletes may have feared expressing their true feelings, even if anonymity and confidentiality were guaranteed’.

In contrast to these studies, athletes were interviewed who were willing to discuss their use of PEDs in frank and open ways. Details of the recruitment of the athletes have been removed from the paper in order to protect the identities of the athletes concerned. However, the participants in the research consisted of male and female European, competitive athletes between the ages of 19 and 26 years, in the prime years of their competitive career (Yesalis, 2000). The findings from interviews with the athletes presented here are able to shed new light of the phenomenon of doping in sport.

Snowball sampling was used to increase the pool of athletes willing to be interviewed, since this technique relies on identified members of a community identifying
other members (Fink, 1995). This approach may have resulted in a group of athletes with an uncharacteristically uniform attitude to doping, since the athletes may have been part of a network of doping themselves. Nevertheless, all participants were aware at the outset that the research was focused on PED use and were willing to disclose their participation. Thirteen out of fifteen of the athletes interviewed affirmed that they had used performance-enhancing substances. Two out of fifteen reported that they have never used them, but that they had been offered them. Twelve out of fifteen were still using performance-enhancing substances at the time they were interviewed.

Fifteen in-depth interviews with competitive athletes were conducted. Most of the interviews were recorded and a small number were documented by keeping detailed notes. The interviews took the form of semi-structured questions, as, although the questions were initially specified, the interviewees were allowed to answer on their own terms and to shape the discussion to reflect their experiences (May, 2001). The questions focused on issues related to doping and interviewees were asked to: discuss the types of PEDs they used and their reasons for using them; describe the involvement of significant others – particularly the coach; discuss the relationship between doping and elite sport more broadly, including perceptions of prevalence; and explain their feelings about anti-doping policy and testing procedures. At the beginning of the interviews a number of the participants asked whether the researcher was interested in the real story or the usual party line indicating the presence of differing public and insider information.

As the research involved discussion of doping activities, efforts were made to ensure informed consent was freely given with assurances of anonymity and confidentiality. All participants provided formal consent to be involved in the study and were informed in advance of the purpose of the study and their right to withdraw at any time. The athletes were assured of complete anonymity. Any identifying material has been removed including places, dates and names. In addition, the audiotapes of the interviews have been destroyed and all record of the participants’ names or identifying details were omitted from the transcripts.

Thematic analysis (Braun and Clarke, 2006) was used as a strategy to organize and interpret the interview data. The emerging patterns were coded and organized into broader themes that helped to explain the athletes’ doping-related experiences in sport.

**Discussion: normalization and responsibility**

There were two major findings from the research. Firstly, doping was perceived by the athletes as a normalized practice. Secondly, the athletes nevertheless saw doping as the individual responsibility of the athlete alone. The following discussion highlights key themes emerging in the research that illuminate the experiences and decision-making processes that influenced athletes to use PEDs.

‘The results are obvious’

The most common substance used by the athletes was steroids (9 out of 13 interviewees reported using them). From this group of substances the ones with the highest rates were the various types of testosterone and nandrolone. All of the steroids mentioned were
testosterone, nandrolone (decca), stanozolol, methyltestosterone, sustanon, dianabol, testosterone cypionate; three times the general term ‘steroids’ was used.

Analgesics were the second substance group most commonly used by the interviewees (mentioned 3 times) followed by insulin (2), diuretics (2) and amphetamines (2). Erythropoietin was mentioned once, as was caffeine and cannabis. Finally, four athletes said that they used dietary supplements not on the banned list.

We use it (a diuretic) sometimes in case of a doping control test. (Interview No.1)

Almost all of the athletes reported experiencing physical or psychological changes as a result of taking banned substances. Only one answered that he had not seen any differences yet but he also noted that he only recently started to use drugs. The vast majority reported being satisfied with the results of doping, reporting that they had gained strength and were better able to respond to training. The interviewees maintained that the drugs had a psychological effect, as they felt stronger and in much better condition:

They help me practicing for longer and at the same time I feel less tired. They also help me concentrate and the results are obvious in my times, they are getting better and better. (Interview No.1)

It’s fine, I’m not using for a long time but I’m already feeling stronger and healthier. (Interview No.4)

The majority (10 out of 13 users) had noticed both physical and psychological side effects, including mood changes:

I’m becoming more aggressive sometimes but steroids do that. I’m using weed instead you know. (Interview No.6)

I have noticed some changes in my body and face such as acne. (Interview No.1)

When I first started to use them I was feeling very strong both physically and psychologically. Then and while the time was passing I had side effects like pains all over my body, I tried to take more without asking my coach or the doctor. The pains got worse. I stopped and at the same time I stopped practicing. I believe that the worst side effect of this use was that I couldn’t realize how far I had pushed myself. (Interview No.2)

However, the vast majority expressed a very optimistic view concerning the probable side effects. They anticipated that they would receive appropriate medical guidance to ensure problems would not occur, and were ambivalent about the extent of any risks:

EPO is a normal substance for the body, with the correct use it won’t be any problem. (Interview No.4)

Hypoglycemia as a side effect is obvious though. But it isn’t something that you cannot control. (Interview No.14)
Only one of the athletes had experienced severe side effects and gave this as the reason for quitting training and competing:

I stopped because after seven years of using it I started having pains in my muscles and bones. (Interview No.2)

The most common side effects of steroids were acne and aggression, while of insulin it was hypoglycemia. Also changes to the body and voice were noticed by a steroid user. The athletes’ descriptions of their doping experiences reflect, in some ways, the discussion of Monaghan’s bodybuilders. They ‘experiment’ with the drugs, gauging their effects and monitoring the side effects. The athletes in this study demonstrated an awareness of what they were doing and, as discussed below, felt as if they had resources to help them make decisions about what and how to use PEDs effectively. The sense of confidence and control has also emerged within autobiographical work on doping, which suggests that athletes may not perceive their activities as physically or psychologically risky behaviours, but as a potentially useful part of their training regime (Chambers, 2009). One of the more experienced athletes, however, did eventually feel that the side effects were becoming untenable and stopped using PEDs.

‘A common secret’

A theme common to all the athletes interviewed, drug users and non-users alike, was that doping was a normalized practice in competitive sport. While the athletes gave many reasons for their own or others’ drug use in sport, none of interviewees questioned the practice of doping as an abnormal activity. The primary reason the athletes gave for doping was to improve performance. The ethos of success and winning was adopted relatively without question. When asked to account for their decision to take drugs, they replied:

Because I wanted better results in training and performance. (Interview No.11)

Because I wanted better performances, better results from the training and a better body. Because they help me a lot with training and on the other hand I haven’t seen their full results yet. They are not magic pills or anything like that, they just let your body train harder. (Interview No.6)

Experimenting. Because I saw the results I expected. With hard training I saw results to my body and performance. (Interview No.7)

All the interviewees maintained that the majority of athletes who are training at a professional and elite level use performance-enhancing substances. On a number of occasions they even talked about a ‘common secret’ that exists within the sport. However, they suggested that drug use is less prevalent within non-professional sport:

It is a common secret. I suppose the majority use. Their performances show that. (Interview No.4)
I think yes, but I don’t know how many. It is a commonly known secret but as long as it remains a secret many still hide it, I can’t tell how many. (Interview No.9)

At a professional level who isn’t? At a lower level I believe some do so, but not many. (Interview No.11)

The athletes expressed the view that doping was considered necessary for competing at a higher level, echoing the young cyclists’ arguments that doping was required at professional level but not levels below that (Lentillon-Kaestner and Carstairs, 2010). The results of the interviews indicate that doping is established and widely accepted within the sports world. All interviewees stated that they knew other teammates who use PEDs, indicating that it is not an underground activity within this field:

(Doping is) Increasing and I think no one can stop this. Because everyone would do everything to win. This is the way our society works in general. (Interview No.3)

As long as medicine discovers new methods and drugs, doping will continue increasing and finally will be an accepted reality. The evolution of sports and beauty and the breaking of records is medicine. (Interview No.7)

It became evident from the interviews that the athletes were inclined to consider doping in elite athletics to be an established and unchangeable reality. Given the normalized practice of doping as reported by the athletes interviewed, it might be assumed that athletes would implicate the culture of track and field in attributing blame for their use of banned substances. After all, the athletes reported widespread involvement in doping and argued that doping was necessary for sporting success. In contrast to this, however, a second pattern that emerged from the interviews was the athletes’ willingness to accept complete individual responsibility for doping.

Athletes were inclined to present their PED use as their own decision. This is despite the clear involvement of coaches and medical staff in doping practices.

‘Who do you think is doing the injections?’

The following were responses to a question about whether the athletes needed drugs to perform at the highest level:

Absolutely. How could this be possible without them? Everyone who is involved at a professional level in sports knows that. And they helped a lot both psychologically and in practice. (Interview No.1)

That was the point, yes. You could continue practice but you would never win. (Interview No.2)

The perceived necessity of doping was also evident when the respondents identified many aspects of pressure in competitive sport: pressure to cope with their own expectations, pressure from officials, friends and the nature of sporting competition.
Yes but everything in sports is pressure. The nature of sport itself is based on competition, which among other things means pressure. Pressure to perform, pressure to become better and to always improve yourself. (Interview No.4)

Everybody was expecting me to be the best. I had to prove them right and then to prove myself right. (Interview No.14)

The athletes reported that the coaches knew that they were using. They were adamant that it could not be otherwise. According to the athletes the coach always knew if his/her athlete was using substances and what sorts of substances were involved.

Of course [he knows]. Who do you think is doing the injections? (Interview No.14)

Of course, we are working together. We are both trying to use them properly in order to achieve the best results and avoid health side effects. I would never use something without his guidance. (Interview No.1)

In two cases the athletes’ previous coach did not agree to train them under these conditions. Nevertheless, they both found another coach to replace him.

The coach at the national team yes. He was the one who introduced me to this area. He presented to me the advantages and disadvantages of using and then he let me choose what I wanted to do. My coach at my previous club had warned me about the situation at a professional level and he didn’t agree to continue working with me later. (Interview No.2)

It became evident from the interviews that coaches, at least at the competitive level, are aware and actively involved in athletes’ doping. The fact that, in most cases, they agreed to train the athlete, while s/he was using drugs, and in the two cases who did not, the athletes found another coach who was willing to train them, demonstrated beyond doubt the coaches’ knowledge and involvement in doping. This is important, since it shows that the athlete is never alone in this procedure and they cannot keep secret the use of PEDs from their coach.

Throughout the interviews, the athletes stressed that the decision to use drugs was their own. They wanted to improve their performance and were willing to use PEDs to succeed. Furthermore, they rejected the notion that they were encouraged or influenced by their coaches to do so.

It was my decision. I wanted to continue training at an upper level. I discussed it with him, he also talked with the medical team and we started. (Interview No.1)

It was my thought and decision, he made it a reality. (Interview No.7)

Evidently, the athletes personalize their decision of drug using. This is in spite of the fact that they see drug use in sport as necessary for success. The athletes also pointed to multiple pressures on them that might encourage drug use. Nevertheless, the athletes did not try to present excuses to neutralize blame attached to their decision to take drugs. Even though their accounts support the idea of the ‘networked athlete’ (Connor, 2009) by
providing evidence that PED use involves many more people than a lone athlete, the athletes insist their actions are their own responsibility.

‘A false image’

Moreover, the interviewees pointed to the hypocrisy with which doping cases are treated by the sport’s official anti-doping stance. Specifically, athletes perceived doping as an established reality in sport, but a marginalized and stigmatized activity for the rest of society:

They (doping tests) are for lying to the people. We are not the real cheaters. Almost everybody is using at a higher level. But trying to present a false image to the society is cheating. (Interview No.3)

Finally, the athletes reported a discrepancy between the reality of sports and the image held by the rest of society. Doping control among athletes was considered to be symbolic. Again this implies the normalization thesis of doping in elite and competitive sport, as athletes consider doping tests to have failed:

Doping is an established reality and the money they spend on the tests they could give for education and the invention of safer methods. Up to now ‘underground handbooks’ provide the vast information about doping. (Interview No.14)

I cannot see why they want to reduce it (doping) anyway? Many countries have developed a whole industry around their champions. A part of their success is of course due to doping. It just should be more education and information available for safer use. (Interview No.11)

Part of the process of normalization then, was the denunciation of conventional morality. Athletes normalize doping and consider mainstream society’s perspective as invalid. Doping was seen as such a normal part of athletic preparation, that it was not considered as extraordinary or even an especially effective part of training. In contrast to the commonly held belief that doping works, the athletes argued that doping may be essential for training at a higher level, but they did not perceive doping to be the only means for success:

… They are not magic pills or anything like that, they just let your body train harder. (Interview No.6)

Overall, these findings suggest that doping is perceived as not only established but also essential in competitive sport. Athletes felt that doping was a ‘common secret’ and an accepted practice within the professional level of sport. It was evident that this was not something they did alone and that their coach – at least – knew about their drug use. Athletes also felt that the drug testing policies were hypocritical practices, as the government supplied part of the pressure on athletes to win and potentially were aware that doping was one of the practices that could lead to successful performances.
Individualization and normalization

The justification for taking PEDs by athletes in this study is comparable to Monaghan’s (2002) findings. The athletes use self-fulfilment narratives – they need to use drugs to win. They condemn the condemners for hypocrisy. They also deny the severity of injury. The athletes give a clear indication that they see doping as a normalized phenomenon, supporting a networked athlete perspective on PEDs by implicating coaches and doctors (Connor, 2009). Yet a reflection on this finding reveals an important contradiction. Despite the athletes describing their involvement in a network of relationships with ‘significant others’, the athletes support an individualist explanation of their own PED use. Connor argued ‘individualistic explanations of drug use in sport not only hide the real reasons for use but also continue to feed the view that sport is about the athlete alone’ (2009: 329). The internalization of this view, even by athletes themselves, successfully supports the dominant lone athlete explanations promulgated by bodies such as WADA and the International Olympic Committee (IOC). It can be argued that the suppression of the ‘networked athlete’ explanation of PED use is part of the process of governmentality.

Governmentality requires that individuals understand themselves to be free, so that they take responsibility for their actions. According to Foucault (2007), freedom is not only given by the government, but it is also managed by mechanisms of security in a way that allows the citizen to be free within specific limits. In that sense government does not aim to suppress the individual’s ability to take action, but rather to guide the actions the citizen will take in specific directions (Dean, 1999; Garland, 1997). The athletes freely accepted the need to improve their performance and strive to win, a discourse endorsed by the institution, and one that provided an incentive to take PEDs. However, the role of institution in supporting the performance directive is obscured by their more explicit messages about the individual responsibilities of the athletes in making doping decisions. The athletes concluded on the basis of these totalizing and individualizing discourses that all athletes should take individual responsibility for both performance enhancement and the decision to use PEDs. They saw their decision as an individual choice and did not associate it with the influence of others or the values of the sporting environment in which they were immersed. In this sense, the processes of governmentality continue to serve the interests of the sporting institution, as any responsibility it may have been made invisible by circulating such explicit individualizing messages as the insistence on strict liability and the promotion of anti-doping attitudes. The end result is that athletes themselves failed to question two simultaneously totalizing and individualizing discourses. Athletes’ limited freedom to accept or reject the discourses of the sporting institution encourages such a position.

To sum up, athletes are subject to surveillance, discipline and punishment whether they dope or not. As a result of the total hold of the disciplinary system, athletes are individualized and accept responsibility for doping. As Foucault explained, the comprehensive power of the panopticon is always anonymous at its source but ‘will only ever be directed at a series of separate individuals’ (2008: 75). For Foucault, the individual ‘is nothing other than the subjected body’ (2008: 55). This explains why athletes point only to themselves as responsible for the decision to dope, even while they describe the role of other members of the training team and the pressure to dope emanating from the
culture of the sport. Within the panopticon, power is deindividualized at its centre, whereas the power is ‘always individual at the point at which it arrives’ (75). For these reasons, Foucault argued that discipline individualizes below: ‘it individualizes those on whom it is brought to bear’ (2008: 75). The athletes are, therefore, unable to identify responsibility with the institution of sport, since its power is pervasive and invisible, and understand themselves only to be personally responsible.

**Conclusion**

This article has argued that in order to understand doping in the culture of track and field, it is necessary to listen to the athletes themselves. Athletes in the study presented doping as normalized, widespread and established in competitive track and field. Although sporting authorities have banned the use of PEDs, the athletes consider them necessary for their career and for competition at a high level. The accounts also indicated that the majority of their fellow teammates and opponents use PEDs. Furthermore, there was evidence that the athletes are not the only ones involved in this practice: athletes’ coaches, at the very least, were also aware of the use of prohibited substances and methods.

While this study focuses on the experiences of a small number of athletes, it is the first study to include the views of track and field athletes who are engaged in PED use. This study confirms the suggestions of previous literature that doping needs to be understood as a social, not individual, phenomenon. PED use can only be explained by the ‘networked athlete’ thesis (Connor, 2009). Yet, despite this vision of sport being the only plausible one, which derives from the athletes’ own accounts, these same athletes offer an individualist explanation for the use of PEDs.

Track and field has been understood as a disciplinary system (Heikkala, 1993). Athletes are subjected to excessive levels of surveillance, pressures to conform to the norm and punitive measures at all times. Since the disciplinary system entails an underlying process of individualization – power is directed at the individual – the athletes consider themselves to be personally responsible for doping despite its normalization in competitive track and field. This paradox makes the athletes vulnerable to further surveillance and punitive measures.

The athletes also attested to the failure of anti-doping policy. How, then, is it possible to understand the reasons for the continued existence of anti-doping measures, with all the resources they entail, given their evident lack of success? Foucault (1980) argued that the failure of the penal system could be understood as part of its success, since without crime, there would be no police. By extension, the threat presented by doping justifies the excesses of surveillance and discipline of all athletes at all times. Demonizing doping, despite the oversimplification that this entails, may be more useful to the institution of sport than explaining and addressing the complexity of pressures brought to bear on athletes. In this way, athletes’ internalization of responsibility for doping can be seen as part of the art of governing competitive sport. By not acknowledging the ‘networked athlete’ explanation of doping, WADA minimizes the influence of the pressures and norms of the sports environment and encourages athletes to take responsibility for altering their own behaviour.
Although this study focused on the experiences of a small group of athletes in a particular sporting environment, the findings have implications for our understanding of athlete experience and the ongoing challenges of addressing doping in sport. First of all, individualizing discourses of doping need to be challenged and refocused on the discourses and practices of the ‘network’, as well as sports culture more broadly (Coakley, 2007; Connor, 2009). Secondly, the discourses and practices of government and policy makers must be challenged. If doping is a ‘common secret’, as articulated by these athletes, it would be naive to assume that those who are responsible for the governance of sport are unaware. Thirdly, athletes felt that the hypocrisy of policy makers is arguably harming rather than safeguarding their health. By protecting themselves and their reputations, sports organizing bodies may be suppressing the possibility of creating safer practices and opportunities for educating athletes, coaches and support staff.

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References


