

Performance-Enhancing Drugs in Sport: The Ethical Issue

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Observers of contemporary sport are aware of many problems with respect to performance-enhancing drugs. Those who wish to examine scholarly literature could find hundreds of research studies and clinical reports cited in the *Index Medicus*. Persons searching for scholarly literature on the ethics of performance-enhancing drugs would find very little. For illustration, in preparing this paper I perused *Books in Print* and found just two volumes having direct relevance to drugs in sport. I examined the past ten years in *The Humanities Index*, *The Social Sciences Index*, *The Physical Education Index*, and the only four years of *Sport Bibliography*. My reward was 14 articles whose titles were relevant to the ethics of drugs in sport. These sources and a very careful reading of Brown's "Paternalism, Drugs, and the Nature of Sport" (2), Simon's "Good Competition and Drug-Enhanced Performance" (11), and my own work *Right Actions in Sport: Ethics for Contestants* (3) are the bases for my remarks.

I describe these bibliographic efforts not to illustrate academic industry but to point out something of how I will treat the subject. The point is that little serious scholarship on the ethics of drug-enhanced performance is available when compared with experimental research and clinical reports on the effects of drugs, and with popular accounts of athletes' drug use and the testimony of drug users. Indeed, "we do not yet have a comprehensive, well informed study of the ethics of drug use in sport" (3: p. 117). This statement does not deprecate the present efforts of Professors Brown and Simon. It only makes explicit what they and I already know because we have done some research into the area. This conclusion informs my approach here. At this point our scholarship must perform two crucial tasks in the face of the exigencies of contemporary sport. One is to isolate what the most crucial ethical issue is. The other is to identify a useful approach to resolving that issue.

My analysis will proceed in two parts, first by citing those factors that Brown and Simon find relevant and irrelevant to the ethics of drug use, what each identifies as the pivotal ethical issue, and what their basic arguments are for the conclusions they reach. Second, standing on their shoulders, I will suggest a reformulation of the central issue and an approach which may help in its resolution.

I

Professors Brown (2) and Simon (11) both exclude several considerations which tend to cloud the important ethical issue. The exclusions are the recreational use of drugs in an athlete's private life, drug use for medical and restorative purposes, attempts to distinguish between natural and artificial substances, and the efficacy of present regulative rules. Clarity of the central issue is helped, also, by excluding consideration of young and immature athletes. Simon also excludes borderline drugs, those which have little harmful effects and do not enhance performance. To focus upon the crucial ethical issue, I agree that these exclusions are helpful.

Both include, either by direct statement or by entailment in argument, the positions that some drugs do enhance athletic performance and that there is clear risk of harm to those who take such drugs. These positions are important because the results of experimental research are mixed. Williams (14: p. 215) concludes that blood doping is effective in increasing endurance performance; Lamb (7: p. 177) states that research on long-term effects on performance of massive doses of androgenic-anabolic steroids is inadequate but the risk of deleterious side effects should dissuade rational people; Ivey (5: p. 120) says amphetamines improve physiological components related to performance but that no conclusion on enhanced performance is warranted and risks seem to exceed benefits. Accompanying such summaries of experimental research on drug effects, we have journalistic reporting and revelations by athletes. According to Murray (8: p. 27), it is reasonable to assume that positive performance effects and negative health effects of drugs go beyond these reports of experimental research, because dosages and frequency are well beyond the therapeutic doses included in experimental research and allowed in human subjects research.

My own conversations with high-level athletes, perusal of drug information in a body builder's publication, along with research and journalistic reports convinces me that drug use is widespread, that some drugs (or the placebo effect) enhance performance and that such use carries serious risk of harm. Also, obviously, there is no important ethical issue if drugs do not enhance performance and/or have harmful effects (unless these are assumed).

Brown and Simon, although by different approaches, are in general agreement on what the ethical issue is. Brown (2: p. 2) says "the moral questions concern the appropriateness of the use of drugs in sport." He believes appropriateness is to be assessed by a perspective from paternalism. Simon (11: pp. 4-5) asks, "Why then, should the use of possibly harmful drugs solely for the purpose of enhancing athletic performance be regarded as impermissible? In particular, why shouldn't individual athletes be left at liberty to pursue excellence by any means they freely choose?" In summary, they locate the issue in whether or not it is morally right to restrict the choices of an informed consenting adult athlete in taking drugs for the purpose of enhancing performance while accepting serious risk of harmful side effects.

Further, both state that any restriction of such choice is justifiable only by compelling moral considerations. Harm, coercion, and fairness are three considerations examined. So the critical issue in a question is as follows: Is it morally right, for reasons of harm, coercion, and/or fairness, to restrict the informed choice of consenting adult athletes in taking harmful drugs for the purpose of enhancing sports performance? I find myself in agreement with this formulation of the issue.

Brown (2) finds no morally compelling arguments to restrict drug use by athletes. He supports his conclusion as follows:

1. Such a choice is informed and fully voluntary.
2. The drug-using athlete chooses, for himself or herself, values which are permissible in a free society.
3. The restriction of choice attempts to impose alternative values on the drug-choosing athlete.
4. No argument against appropriateness of drug use in sport is feasible on the basis of an *accepted* single conception of the nature of sport since there is no such conception.
5. If choice is restricted we deny the athlete the values of self-reliance, personal achievement, and autonomy.

Professor Simon (11) finds morally compelling arguments to restrict the choice of consenting adult athletes. Recognizing that such choice ought not to be prevented by simple arguments of harm and coercion singly, he states that drug use is wrong because it introduces an inappropriate element into the sport contest which is contrary to an ideal of competitive sport. This nonsport element is the differing abilities of athletes' bodies to benefit from drugs. That kind of ability is not an ability contested in ideal sport; indeed it is extraneous. Drug use is *morally* wrong because it reduces athletic competition to contests between mechanized bodies rather than total thinking, feeling, willing, and acting persons. It dehumanizes by not respecting the status of athletes as persons.

II

So, we have contrary conclusions by two reasonable and competent commentators. Shall we flip a coin or vote to decide? I think not! Before my short analysis is presented, a crucial difference in these two treatments needs recognition. Brown's (2: p. 2) argument against restriction of choice is founded in a general conception of paternalism presumably applicable to any question of choice. In combination with his assertion that an agreed concept of the nature of sport does not exist and therefore cannot be a factor in a moral argument, his solution to the issue operates only *from* general principle *to* sport. On the other hand Simon (11: pp. 12-13) presents a rational normative conception of good sports competition which can be used and which is important to moral decision on the question of choice. Thus, he views the general choice issue in a specific context, namely, sport contests.

To me it is difficult to generate useful moral action prescriptions for a human endeavor without some notion of the nature of that activity. While not everyone may agree on the nature of sports contests, that is not necessary for a consistent normative ethic for sport. What is necessary is a rationally defensible characterization which *could* be agreeable to agents acting under ideal conditions of rational choices (12: p. 164-172), namely freedom, enlightenment, and impartiality. Lacking a rational characterization we can only *import* external guidelines to the sports contest without any adaptation and differentiation which becomes relevant to sport as it is practiced and understood.

Elsewhere, I argue that there is indeed a normative rational characterization of the good sports contest which is a major needed source for guidelines for ethically right sports actions (3: pp. 29-106). In a recent analysis, Kretchmar (6: pp. 28-29) says "Descriptive or metaphysical understanding of sport have not yet been sufficiently utilized in the development of a sport ethic. Because they have not, many discussions on competitive ethics are vague, preparatory rather than conclusionary, and point out issues in ethics generally, rather than ethics of sport specifically." Thomas (13: pp. 201-202) also alludes to the essence of the sports contest in relation to the drug issue. Therefore, I assume in my treatment from here the need to relate a conclusion to a clear characterization of the sports contest.

The question at issue is: Is it morally right, for reasons of harm, coercion, and/or fairness, to restrict the informed choice of consenting adult athletes in taking harmful drugs for the purpose of enhancing sports performance? Now, how can we resolve this issue? Three specific points must be addressed.

First, we must be clear on some basic assumptions relevant to sport today:

1. Taking certain drugs in appropriate dosages at appropriate times will improve athletic performance.
2. Taking certain performance-enhancing drugs in appropriate dosages at appropriate times will entail severe risk of harmful side effects.
3. Individual athletes do have the choice of whether they will take performance-enhancing drugs, regardless of regulations restricting such drug use.

Second, we must look at these assumptions and their consequences in terms of harm, coercion, and fairness under two sets of hypothetical conditions in sport:

1. There are no restrictions or rules against the use of performance-enhancing drugs by consenting adult athletes.
2. There are selective restrictions and rules against the use of those drugs which do not enhance performance.

Third, we must judge whether it is morally right to restrict the choice of consenting adult athletes by comparing the harm, coercion, and fairness consequences under the two conditions. In summary, we resolve the ethical issue by an approach that recognizes operative empirical factors, is historically connected to the present as conditioned by the past, and uses moral criteria in such a context. Let's now examine the consequences under the two conditions.

Condition One—No Rules or Restrictions

1. Many athletes will choose drug use, and some physicians and trainers will supply them.
2. Sports performances will improve.
3. Many athletes will be harmed, and in some cases that harm will negatively affect their loved ones.
4. Some athletes will not use drugs because of harmful side effects, and some physicians and trainers will not supply them for the same reason. (a) These athletes

will have lesser chances of victory. (b) These athletes will avoid drug-induced harm to themselves and loved ones.

5. Young, adolescent athletes will use drugs more extensively because of role model example and socialization.

Condition Two—Selective Rules and Restrictions

1. Some athletes will choose drug use, while fewer physicians and trainers will supply drugs.
2. Sports performances will improve, but among fewer athletes.
3. Some, but fewer, athletes will be harmed, as will fewer loved ones.
4. More athletes will not use drugs because of harmful side effects and because of the negative sanctions in the rules and regulations. For the same reasons, fewer physicians and trainers will be involved.
5. Fewer adolescent athletes will use drugs.
6. Expensive testing programs will be needed and may increase dangerous experimentation with nondetectable drugs.

Comparing these consequences of the two conditions in terms of harm, coercion, and fairness we find the following.

Harm

More athletes and their loved ones will be harmed when there are no restrictions. With selective restrictions, fewer people may be harmed but to a greater degree because of experimentation with nondetectables. In both conditions the harm is related to the choice to use drugs.

Coercion

Under the no restriction condition there will be greater effective coercion to use drugs. Since no rules deter drug use, more will choose drugs and elevate the impact on competitive effectiveness. With selective restrictions there will be lesser coercion to fewer people.

Fairness

With no restrictions all will have equal access to drugs. With selective restrictions, access will be influenced more by financial ability and acquaintance with suppliers. Under both conditions what is being contested will differ, that is, sports skills and endurance, strategy, and bodily response to drugs for those who use drugs and sports skills, endurance and strategy for those who do not. Under the no restrictions condition the contest will be more equal among those who take drugs and less equal between them and those who do not use drugs. Under selective restrictions the contest will be more equal among those

who do not use drugs and less equal between them and those who do use drugs. Since some will use drugs in both conditions, what is being contested will not be equal for all under either condition.

What conclusions result from applying these consequences to our issue? To have a fair contest requires that the contestants must be attempting to do the *same* thing better than one another. After all, what is being contested in the sports contest is "the relative abilities of the participants to move mass in space and time within the confines prescribed by an agreed-upon set of rules" (3: p. 41). The rules of sports describe what that something being contested is. Present understandings of sport do not include the ability of an athlete's body to respond to a drug as an element of the contest. This could change in the future, but is not so at present. As I shall argue below, there are good reasons why it ought not be considered an element to be contested. I think Simon (11: pp. 17-18) is right in stating we are primarily interested in testing persons rather than simply bodies or in attaining machinelike competency. With regard to the fairness of what is being contested, restrictive rules against drug usage help sharpen agreement on this.

The harm and coercion consequences must be examined together. Under "no rules" we note that more people will be harmed and that there will be greater effective coercion to use drugs. With selective rules there will be less coercion of fewer people who may be more seriously harmed. While it is true that athletes do choose whether or not to take drugs, and it is true also that an athlete can choose to forego competition or lower his/her success expectancies, I think such options are morally questionable. Under current historical conditions of sport, why, morally speaking, should a highly competent athlete be forced either to lower his/her expectancies or discontinue sport involvement because he/she cannot compete with drug users? Why should the effective coercive force not be in the opposite direction against drug users? The effect of more people harmed by coerced drug use under the no restriction condition amounts to *tacit social approval of coerced self-harm of athletes*. To me the forced choice of either coerced self-harm or of dropping out or lowering one's expectancies is a morally unconscionable choice.

The solution to this issue is not whether the individual user of drugs should be restricted because of harm to himself/herself. It lies in the consequences of his or her acts for others. The use of performance-enhancing drugs by the individual is morally wrong because it changes the nature of the contest without agreement and exerts coercion on others to inflict self-harm. The social system of sport intensifies and institutionalizes such a moral wrong if it fails to promulgate selective restrictive rules. The question is broadened beyond the individual's choice being restricted to what kind of sports we would encourage under selective restrictions or no restrictions. One guide for right action may be called the Guide of Noninjurious Action:

Athletes, coaches, and athletic trainers shall avoid acts or the encouragement of acts that intend physical injury to another person, are known to increase the possibility of physical injury unnecessarily, or are known to be detrimental to the health (or are known to increase, unnecessarily, the possibility of detriment to the health) of another person. (3: p. 115)

This guide applies here, and is supported by a general principle of nonmaleficence and by described conditions conducive to the good sports contest (3).

Taking such a position against drugs in sport itself generates additional consequences in the sports world. For instance, Handley (4: p. 134) and Ryan (10: p. 132) state that anti-drug rules lead to difficulties in effective testing. Adlercreutz (1: p. 136) thinks that the steroid ban has increased the use of more dangerous drugs. Ryan and Adlercreutz are

concerned about the disproportionate costs and consistency of testing programs. To date, we have not seen consistent and effective testing programs. In the 1984 Summer Olympics 11 competitors failed drug tests. Whatever rules on drugs exist—some will choose to violate them. Such does not invalidate the moral need for rules any more than violation of traffic laws invalidates them.

Although our efforts here have taken a small step, we are yet a good distance from a definitive study on the ethics of performance-enhancing drugs in sport.

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