

STATEMENT OF MYLES BRAND, NCAA PRESIDENT
BEFORE THE
HOUSE SUBCOMMITTEE ON COMMERCE, TRADE AND
CONSUMER PROTECTION
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Chairman Rush, Ranking Member Whitfield, and other distinguished Members of the Subcommittee, on behalf of the National Collegiate Athletic Association, as president of the NCAA, I appreciate the opportunity to appear today and inform you of the Association's drug education and drug-testing programs.

The NCAA has worked diligently for more than 35 years to provide leadership and resources to its member schools in partnership for effective drug abuse deterrence.

The NCAA is a private association of approximately 1,200 four-year institutions of higher education and athletics conferences. There are more than 380,000 student-athletes competing at these NCAA member schools. According to the NCAA Constitution, under the Principle of Student-Athlete Welfare, intercollegiate athletics programs "shall be conducted in a manner designed to protect and enhance the physical and educational welfare of student-athletes." The NCAA manual makes clear that it is the responsibility of each member institution to protect the health and safety of and provide a safe environment for each of its participating student-athletes.

The NCAA Drug-Testing Program is an aggressive initiative now in its third decade working to ensure that intercollegiate athletics is as free of performance-enhancing drugs as possible. The NCAA and its member institutions have taken a strong stand to deter doping in sports and have long established serious penalties for those who violate these policies. Under the NCAA testing program, athletes who test positive are withheld from

competition in all sports for at least one year, and lose one of their four years of collegiate eligibility. Athletes who test positive a second time for steroids and other performance-enhancing drugs lose all remaining eligibility and are permanently banned from intercollegiate athletics competition.

The NCAA testing program has proven to be effective in dramatically reducing the use of such drugs by collegiate athletes. And the proof is verified by the longitudinal study of NCAA athlete drug use, administered every four years since 1985. In the 1989 Study of the Substance Use Habits of College Student Athletes, 9.7% of NCAA Division I football student-athletes reported using anabolic steroids. In 1990, the NCAA began testing for anabolic steroids during the academic year in all Division I football programs. In the 1993 study, 5.0% of Division I football student-athletes reported using anabolic steroids, and subsequently, 2.2% reported steroid use in the 1997 study. In the most recent study (2005), 2.3 % of football student-athletes reported steroid use.

This impact is the result of a comprehensive approach and a number of key factors in our drug-education and testing programs:

- A strict drug-testing protocol, reviewed and published annually;
- A national drug-testing program where student-athletes are subject to testing at any time through a random and short notice selection process;
- The use of an outside independent third-party drug-testing administrator;
- Standardized serious penalties for violations: a first positive drug test results in the loss of one of the four years of eligibility and withholding from all sports; a

- Transparency in publishing aggregate drug-testing results and the report of survey data on drug use;
- And a broad-based educational effort combining the expertise, resources and programs of the NCAA national office, the athletic conference offices and the individual schools.

In order to promote student-athlete well-being and create an environment that does not permit drug use, the NCAA has developed a collaborative and comprehensive approach of strong policy, effective education and detection. This approach is strengthened by the effort and support of member schools. Critical to success is the philosophy embedded in the NCAA Constitution whereby member institutions adopt common values and commit to the principals that assure student-athlete health and safety and protect the integrity of collegiate athletics. Member schools are required to conduct annual compliance meetings where every student-athlete signs a drug-testing consent form and is educated about banned drugs and products that may contain them. NCAA regulations require that member schools respond to any knowledge of banned drug use, and the ethical code of conduct prohibits athletics staff from providing banned drugs to any student-athlete, or providing prescription medication outside of medical standards of practice.

The NCAA formalized its national drug-education program in the 1970's, and started its drug-testing programs in 1986. The NCAA drug-testing program has earned a reputation

as a model of quality and professionalism. The NCAA spends more than \$4 million annually for the national drug-testing programs, and this effort is supported by another \$4.8 million spent by member institutions on campus-administered drug testing. Overall, the NCAA has spent over \$50 million dollars in testing and countless millions in additional resources in educating collegiate athletes to avoid drug use. The majority of member schools have developed institutional policies to conduct drug-education and drug testing programs for their athletes, as measured through the biennial Drug-Education and Testing survey of the membership. This partnership – national office and Association member -- provides a strong anti-doping message throughout intercollegiate athletics programs.

Drug Testing

The NCAA sponsors two national drug-testing programs for college athletes – during NCAA championships and randomly throughout the year. The NCAA believes that drug testing is an integral part of drug-abuse prevention. NCAA drug testing was established to protect student-athlete health and safety and to ensure that athletes are not using performance-enhancing drugs to gain a competitive advantage.

The NCAA first introduced drug testing at its championships and postseason football bowl games in 1986. Since 1986, any NCAA athlete competing in these events is subject to NCAA drug testing, and approximately 2,000 athletes are tested each year through championship drug testing. NCAA testing is conducted by an independent third-party drug-testing administrator. Selections and notification are completed via direct

communication with the athletics office of the selected school, with no notification provided to the NCAA. Selections are done through short notice of randomly selected subjects, and functions under a strict, published protocol. The NCAA utilizes only World Anti-Doping Agency (WADA) certified laboratories.

As part of its drug-prevention efforts, the NCAA publishes a list of banned drug classes. This list bans more performance-enhancing drugs than what is banned under federal law, and includes the anabolic steroid precursor DHEA and the stimulant synephrine.

To deter the use of training drugs such as anabolic steroids, the NCAA implemented a second drug-testing program in August 1990. Today as part of this program, approximately 11,000 athletes, including incoming freshman and transfers, are tested by the NCAA all through the year. Athletes in all sports in Division I and II, and all athletes participating in NCAA championships, are subject to NCAA year-round drug testing. Sanctions for positive drug tests are automatic and defined for the student-athlete in the annual signing of the NCAA drug-testing consent form.

Competitive Safeguards and Medical Aspects of Sports

The NCAA Association-Wide Committee on Competitive Safeguards and Medical Aspects of Sports, CSMAS, provides expertise and guidance to the NCAA on issues pertaining to student-athlete health and safety. CSMAS is comprised of experts in sports medicine practice and research, sports law, and athletics administration. A member of the National Federation of High School Associations sits on this committee in order to

facilitate communications on safety and drug deterrence policies. A current roster of these members is attached to this statement [Attachment 1]. Committee members have been published in their respective fields, and are looked to as important resources for sports science information. These dedicated professionals contribute their time and expertise to assist the NCAA in the development of drug-education and testing policies, and provide medical and policy review and adjudication through a “blind” appeal for any student-athlete who wishes to appeal a positive drug test. In addition, a committee panel of medical experts provides review of medical documentation to determine if an exception will be allowed for the use of any medication that contains a banned substance. NCAA policy requires that a non-banned alternative be used if medically appropriate. Approval to use a prescription medication that contains a banned substance is granted only after documentation of the diagnosis, course of treatment, and current prescription is submitted and deemed medically necessary. This committee annually reviews the NCAA drug-testing program protocol and list of banned drugs, which is published annually to the entire membership.

Drug Research

Since 1985, the NCAA has conducted a national study of the drug use habits of college athletes. The NCAA is the only sports governing body that has this longitudinal research to provide data regarding the effectiveness of its drug-deterrence programs. The study is replicated every four years and five replications have been conducted since the original study. The study is designed to obtain data on the substances and use patterns of college athletes through the use of anonymous self-report questionnaires. This data assists us in

developing policy and practices to deter drug use by collegiate athletes. More than 20,000 student-athletes completed the survey in the 2005 study. The 2009 study will be administered in the upcoming academic year. Copies of the last two published studies are available at www.ncaa.org/health-safety

NCAA Membership Requirements and Support of Drug Deterrence

To support and promote drug education for student-athletes, NCAA bylaw requires that each institution's Director of Athletics or the director's designee educate student-athletes about NCAA banned substances and the products that may contain them. Student-athletes are required to sign a student-athlete statement and a drug-testing consent form that alerts them to the NCAA drug-testing policies and the list of banned substances, and requires their agreement to abide by these regulations and be tested when selected anytime during the year or during any championship play. The NCAA publishes guidelines for institutional drug-education programs, and annually provides more than a million dollars in resources to its member institutions to help them conduct campus drug-education and prevention efforts. Some of the other resources provided to assist our member institutions to enhance student-athlete health and safety and deter drug use are:

- Health and safety specialists. The NCAA national office employs staff members who oversee the NCAA's health and safety initiatives.
- The NCAA Sports Medicine Handbook. A set of sports medicine guidelines compiled by leaders in the field of sports science that includes the NCAA's recommendations on educating athletes about drugs and supplements.

- The NCAA-sponsored APPLE Conferences: promoting substance abuse prevention and student-athlete well-being. These strategic planning workshops train teams of athletics staff and student-athletes to identify needs and enhance drug education on individual campuses.
- Educational information via bookmarks, posters, and Web-based resources.
- Educational conferences for coaches and administrators on deterring supplement use by athletes.
- A national speaker's bureau of experts on drug use in sport.
- The Dietary Supplement Resource Exchange Center (REC). All NCAA athletes and staff may use this service funded by the NCAA and housed at Drug Free Sport, the company that manages the Association's drug-testing efforts. The REC provides a toll-free number and Web site for athletes to get reliable information about NCAA banned substances, medications and supplements. Inquiries are treated in a confidential manner.
- Articles and alerts through its electronic publication, The NCAA News, which has featured a number of articles on drug use in sports.
- A special advisory memorandum sent periodically to the senior athletics administrators at every NCAA institution to alert them to the potential risks of banned drugs in dietary supplements.

Proven Results and Continued Growth

The NCAA has been active in the fight to eliminate steroid and other performance enhancing drug use for over 35 years. Through collaborative educational efforts with

sports medicine and athletics organizations, the NCAA has been a champion in deterring the use of these substances by young athletes. The establishment of drug testing, NCAA support for drug-testing research, the strengthening of NCAA and campus policies to deter drug use, and the combined educational efforts from the NCAA national office and campus athletics staff have had a positive impact on steroid use.

In the last two years, the NCAA has added testing through the summer months, expanded testing for masking agents, and engaged in a two-year pilot testing program in Division III. In addition NCAA honors USADA/WADA suspensions by withholding athletes from any NCAA competition for the duration of the suspension.

Next Steps

The NCAA was vocal and supportive of legislative efforts to remove steroid precursors from the dietary supplement market through the Anabolic Steroid Control Act of 2004. We support further government efforts to control steroids and human growth hormone, including HR 4911 and SB 877 that identify HGH as a Schedule III Controlled Substance, and SB 2470 that restricts the sale of DHEA, a steroid precursor. The NCAA supports drug-testing research, and annually reviews the literature and data to determine trends and effective strategies to deter use. We support our colleagues in their efforts to address drug use at the high school and professional leagues, and offer our cooperation to those who share in our commitment to ensure safe, drug free sport. As we have for over two decades, we will continue to enlist the expertise of sports scientists to provide us guidance in our drug-testing programs. The important next steps involve expanding

resources for research in the areas of more cost effective steroid testing, detecting new performance enhancing substances as they emerge, and identifying and implementing effective prevention strategies. Though we have had success in reducing the use of performance-enhancing drugs, we recognize the continuing challenges posed by emerging drugs. We urge funding support for drug-testing research and implementation of programs that have been able to demonstrate a positive impact on youth decisions to enhance performance through healthy and fair strategies, by hard work, dedication and practicing healthy behaviors.

On behalf of the NCAA, I would like to thank the subcommittee for the opportunity to speak before you today and express the NCAA's willingness to assist in moving forward in this monumental and critical task to eradicate drugs from sports.