

**REPORT OF THE DOPING ENQUIRY TASKFORCE**

Contents

Sammanfattning

Appendix 1. Letter of appointment

Appendix 2. Organisation of the Finnish Ski Federation

Appendix 3. SLU decision on anti-doping work of 21 March 2001

Letter of submission

## TO THE MINISTRY OF EDUCATION

On 7 March 2001 the Ministry of Education appointed a taskforce to look into the wide-scale use of doping among Finnish skiers at the Lahti Nordic World Championships and to make proposals for improvements and future lines of action in Finnish top-level sports. The Letter of Appointment is in Appendix 1.

Justice Lauri Tarasti was invited to chair the taskforce and the invited members were Dr Tapio Kallio, Specialist in Sport Medicine, and, appointed by WADA, Mr Philippe Verbiest, Belgian lawyer and member of the WADA legal committee and counsel to the International Cycling Union. Ms Sirpa Irpola was appointed secretary to the taskforce and Director Timo Haukilahti and Senior Advisor Hannu Tolonen were appointed to coordinate the work at the Ministry of Education.

The taskforce adopted the name Doping Enquiry Taskforce.

The Taskforce convened from 2 to 5 May 2001 in Helsinki and on 11 May at the WADA office in Lausanne. The Taskforce has kept close contact by telephone, fax and e-mail. Justice Tarasti and Dr Kallio visited the Research Institute for Olympic Sports KIHU in Jyväskylä on 17 April 2001. In addition, the Finnish members of the Taskforce convened three times in Helsinki.

Between 2 and 4 April 2001 the Taskforce interviewed altogether 16 cross-country leaders, skiers and coaches, and Ski Federation elected leaders (5 persons). The interviews and the information provided are described in Section 2. The views formed by the Taskforce are discussed in Section 3.

The actual proposals put forward by the Taskforce are included in Sections 4 - 7. They concern the responsibility of the Ski Federation, measures to step up anti-doping work in Finland, the allocation of government aid separately to voluntary activities and to top-level sports, and measures to restore Finland's international reputation.

After completing its work, the Taskforce respectfully submits this report to the Ministry of Education.

Helsinki, the 23rd of May 2001

Lauri Tarasti

Tapio Kallio

Philippe Verbiest

Timo Haukilahti

Hannu Tolonen

Sirpa Irpola

## SUMMARY

The Doping Enquiry Taskforce interviewed in all 21 persons with reference to the doping cases at the Lahti Championships. Three of the skiers who tested positive for doping, Immonen, Isometsä and Myllylä, failed to come to the interviews, as did the two physicians involved, Dr Mäkelä and Dr Turpeinen. The Taskforce had no means of verifying the truth of the statements.

The Taskforce gained the impression that Finns had access to the erythrocyte hormone EPO. Without police powers, it was not possible for the Taskforce to investigate the alleged use of the plasma expanders as a possible cover-up for EPO.

The Taskforce concentrated on what should be done in Finnish sports and anti-doping work as a result of the doping cases.

The foremost proposals put forward by the Taskforce can be summarised as follows:

1. What made the Lahti doping cases serious was not only the large number of perpetrators, six, but also that doping had taken place under the auspices of Finnish Ski Federation coaching. A federation is always responsible for its own activities. The elective leadership should have understood that doping could be taking place in the Finnish team, and acted accordingly. The Taskforce proposes that the Ministry of Education refrain from paying one million FIM of the 4.52 million granted to the Ski Federation for 2001 because of the failure to comply with the conditions for government aid. In addition, future aid should be dependent on the anti-doping action of the Federation in the coming years.

2. It is necessary to educate athletes and coaches concerning prohibited and permitted substances and methods. Education is also needed among the elective leadership. The Taskforce endorses the use of Anti-Doping Pass.

A sports federation should have a physician or a medical commission responsible for anti-doping work; in smaller federations a person responsible for anti-doping would suffice.

3. The Finnish Anti-doping Committee should be a separate and independent operation. The Taskforce proposes that anti-doping testing and relevant education, information and research be concentrated into an association, organised like WADA, so that its board would form the Anti-doping Committee and be composed in equal parts of government and sports organisation representatives.

4. Sport is diverging, to some extent has already diverged, into top-level sports and voluntary activities. Doping control should focus on the group where doping is a problem, i.e. top-level sport. In the opinion of the Taskforce, it would clarify government aid to sports organisations if funds for top-level sports were channelled solely through the Finnish Olympic Association. In this case, the Association should also encompass those sports federations which are not affiliated members. In this way, the government aid would be allocated to top-level sports determined by the Olympic Association.

At the same time, the National Olympic Committee should take an active role in anti-doping work at the top level. The Olympic Committee could hire a full-time anti-doping physician, who would follow the actions of federation physicians and coaches, educate

them and provide anti-doping expertise to sports organisations and to sports federation coaches.

The Taskforce proposes that the Ministry of Education issue a resolution providing that government aid be allocated separately to top-level sports and to voluntary activities and a committee be appointed to look into ways to achieve this. It would be up to the Ministry of Education to determine to what extent it would require reallocation of funds to the National Olympic Committee if the sports federations were to receive resources on the basis of competitive activities and international cooperation instead of the current share of 25% aid allocated to top-level sports.

5. The Taskforce believes that, once passed, the Bill for including doping crimes in the Criminal Code, recently submitted to Parliament, will substantially step up the fight against doping. According to these amendments, the administration of doping substances determined in the Criminal Code would be subject to public prosecution. This would primarily criminalise doping by coaches and physicians. As it would criminalise even an attempt at doping, suggestions for doping alone could launch a police investigation.

The Taskforce proposes that the Ministry of Education publish a booklet on these doping statutes in English for use in international contexts.

Finland will also have to continue participating actively in international anti-doping work both within WADA and in intergovernmental contexts.

## 1. THE CHAIN OF EVENTS

The chain of events in the doping cases at the Lahti Nordic World Championships, as established on the basis of interviews conducted by the Taskforce (Section 2), certain press reports and the account given by the Finnish Ski Federation to the Ministry of Education:

Saturday, 10.2.2001

The Finnish Ski Team returns to Helsinki from a World Cup meet in Otepää, Estonia. HemoHES was used in Otepää. The team physician Pirkka Mäkelä administered the plasma expander to the skiers. The most successful Finns at Otepää were Virpi Kuitunen and Janne Immonen.

The doctor's bag which the team had in Otepää is left at the Ala-Tikkurila Shell petrol station by mistake.

Wednesday, 14.2.2001

*Yhtyneet laboratoriot Oy* announces in the daily *Helsingin Sanomat* that plasma expanders will be tested for the first time in Lahti.

Head Coach Kari-Pekka Kyrö reads on text-TV that plasma expanders will be detectable in the Lahti tests.

Thursday, 15.2.2001, Opening of the Lahti Nordic World Championships

Jari Isometsä, Harri Kirvesniemi, Milla Jauho and Virpi Kuitunen are given HemoHES on Thursday morning. Jari Isometsä comes fourth in the 15 kilometre race and gives a positive sample in the doping test.

Friday, 16.2.2001

Before the second leg of the men's 10 km pursuit, Paavo M. Petäjä, Ski Federation President, tells Head Coach Kari-Pekka Kyrö and Antti Leppävuori, Director of Cross-Country Skiing, about the positive sample given by Jari Isometsä. Kyrö does not tell Isometsä about the positive sample, but advises Immonen not to finish the race. Immonen breaks his pole and does not finish. The winner of the first leg of the pursuit, Myllylä does not start the second leg, pleading flu.

In the evening, the team leader Jorma Hyytiä asks Kyrö and Leppävuori if there are any more cases of doping to be expected. They say no.

Sunday, 18.2.2001

Jari Isometsä's B sample is positive. At the press conference, Isometsä takes the blame for the doping incident and denies that anyone else is involved. The reason Isometsä gives for using the plasma expanders is that he needed to lower his haemoglobin value because of the low limit set by the International Ski Federation (FIS). He makes no reference to the list of banned/permitted substances.

Minister of Culture Suvi Lindén demands an explanation of the doping incident from the Finnish Ski Federation, which promises to give it to the Ministry of Education.

Virpi Kuitunen wins the women's pursuit and gives a negative sample.

#### Monday, 19.2.2001

The doctor's bag left at the Shell petrol station is taken to the police as lost property. The police inform Dr Juha-Pekka Turpeinen that the bag has been found and that it contains drugs prescribed by him. The other physician, Pirkka Mäkelä denies any knowledge of the Lahti doping case in a current events programme on TV.

#### Tuesday, 20.2.2001

Juha-Pekka Turpeinen goes to look at the doctor's bag, claiming that some of the things it contains are unfamiliar to him. The bag contains six Haes bags (a substance corresponding to HemoHES), bloody needles, intravenous tubes and gauze.

The Minister of Culture demands that the whole Finnish team be tested.

#### Wednesday, 21.2.2001

Kari-Pekka Kyrö fetches the doctor's bag from the police in Helsinki.

#### Thursday, 22.2.2001

Finland win gold in relay. Janne Immonen gives a positive sample. The Finnish team leaders express their wish that the whole team be tested. WADA makes a surprise test on the whole Finnish team.

#### Saturday, 24.2.2001

The two physicians resign from the Finnish team, saying that their integrity as physicians has been compromised.

#### Sunday, 25.2.2001, Closing of the Lahti Championships

In the afternoon, the Finnish team make it known at a press conference that there are some problems with a male skier's A sample. Janne Immonen has left Lahti for Sotkamo but on the phone denies any knowledge of the test result.

Myllylä announces that he will not ski the 50 kilometre race.

#### Monday, 26.2.2001

The Finnish Ski Federation confirms that Janne Immonen's B sample was positive. Finland lose the relay gold.

Kari-Pekka Kyrö, Antti Leppävuori and Jarmo Riski are released from their duties for the time being. The Federation Vice-President Matti Louekoski, who is responsible for finance and sponsoring, announces that he will resign from the Federation leadership.

*Helsingin Sanomat* writes about the Otepää bag. The police enquiry is transferred to the Central Criminal Police.

The Ministry of Education demands that the Finnish Ski Federation give a full account of the events and their own role in them by 2 March 2001. The Ministry of Education lodges a complaint with the police against the Ski Federation for alleged misuse of government subsidies.

#### Wednesday, 28.2.2001

The WADA tests show positive for Mika Myllylä, Harri Kirvesniemi, Milla Jauho and Virpi Kuitunen. Isometsä and Immonen announce that Pirkka Mäkelä and Juha-Pekka Turpeinen had administered the plasma expander. At an official hearing at the Ministry of Education, Kari-Pekka Kyrö claims that he was the one who had administered the plasma expander.

#### Tuesday, 6.3.2001

The Finnish Ski Federation's Managing Director Esa Klinga resigns. The women's relay gold is forfeited. The doping incident is discussed in the WADA (World Anti-Doping Agency) Executive Committee.

The Ministry of Education appoints an independent Taskforce to look into the doping cases. The Taskforce is chaired by Justice Lauri Tarasti; the members are Dr Tapio Kallio and, appointed by WADA, Mr Philippe Verbiest, Belgian lawyer and member of the WADA legal committee and counsel to the International Cycling Union. In addition, the Taskforce includes Director Timo Haukilahti and Senior Advisor Hannu Tolonen, appointed by the Ministry of Education, and Ms Sirpa Irpola, as secretary to the Taskforce.

#### Thursday, 8.3.2001

The Finnish Ski Federation leadership appoint a working group to prepare a reorganisation of the Federation.

#### Friday, 9.3.2001

The Finnish Ski Federation submits its account of the doping cases to the Ministry of Education.

#### Monday, 19.3.2001

The FIS does not publish the results of the tests made in Lahti.

#### Thursday, 5.4.2001

The Doping Enquiry Taskforce holds a press conference after having heard some of the persons involved in the doping incident and some other skiers, coaches and physicians.

#### Saturday, 7.4.2001

The Finnish Ski Federation Board keep their posts by the smallest possible margin at an extraordinary meeting of the Ski Federation Central Council (liittovaltuusto).

Wednesday, 18.4.2001

The Delegate Committee of the Finnish Medical Association refers the decision on the ethical questions relating to Pirkka Mäkelä's and Juha-Pekka Turpeinen's action in the doping case to the Board.

Friday, 20.4.2001

The Finnish Ski Federation announces its sanctions: a two-year ineligibility for all the Finnish skiers who have given positive samples, and ineligibility for life as officials for Dr Pirkka Mäkelä and Dr Juha-Pekka Turpeinen and for the coaches. The FIS confirms the sanctions on 27 May.

Friday, 10.5.2001

Doctors Turpeinen and Mäkelä are reprimanded by the Finnish Medical Association

Sunday 13.5.2001

In the current events programme *Sunnuntairaportti* on MTV3, Coach Riski reveals that before the Lahti Championships Kyrö, Riski, Leppävuori, one of the physicians and possibly Klinga and Petäjä had known about the use of HemoHES and discussed whether or not HemoHES would be detectable in the doping tests. According to Riski, inquiries were made, and this possibly involved other persons as well.

That same night, Petäjä makes it known that he and Klinga will bring an action for defamation against Riski.

Tuesday 15.5.2001

Petäjä, Klinga and Leppävuori back off from the legal action after Riski contacts them through his counsel.

## **2. INTERVIEWS**

### **2.1 Interviews: skiers and coaches, elected leaders, physicians**

In an effort to obtain an overall picture of the Lahti doping cases, the Enquiry Taskforce interviewed outside experts as well as the different parties concerned. These included:

The skiers tested positive

- Milla Jauho and Virpi Kuitunen, and their counsel Markku Fredman
- Harri Kirvesniemi

Other skiers in the Finnish team:

- Pirjo Manninen and her coach (and father) Jorma Manninen
- Sami Repo
- Kati Sundqvist



## Coaches:

- Reijo Jylhä
- Kari-Pekka Kyrö, Head Coach (cross-country skiing)
- Jarmo Riski, Women's Coach

## Team leaders:

- Jorma Hyytiä, Director of the Lahti Team
- Antti Leppävuori, Director of Cross-Country Skiing

## Medical experts:

- Antti Eskola, physician to the ski-jumping and Nordic combined team
- Inggard Lereim, Chair, FIS Medical Committee
- Tapio Wideman, Vice-Chair, FIS Medical Committee

## Finnish Ski Federation leadership:

- Paavo Petäjä, President
- Matti Louekoski, Vice-President
- Antti Törmänen, Vice-President
- Esa Klinga, Managing Director
- Matti Leikoski, Assistant Director.

Between 2 and 4 April 2001, the Taskforce heard 16 persons separately, as indicated above, and the Federation leadership as a group. The Taskforce had no authority to summon. Five of the invited persons did not appear: the three men skiers who tested positive (Janne Immonen, Jari Isometsä and Mika Myllylä) and Doctors Pirkka Mäkelä and Juha-Pekka Turpeinen. After the Taskforce had contacted all of them by phone or letter, they gave their reasons for not attending the hearing. They were asked individually to give accounts to the Ski Federation and, in the case of the physicians, to the Finnish Medical Association. Mika Myllylä sent an account.

All persons were heard only once. No confrontation could take place. It has not been possible to undertake any separate investigations. Nor has the Taskforce had access to the accounts given by the physicians to the Medical Association and the National Authority for Medicolegal Affairs or to the material collected by the police in its investigation.

The observations made below are thus notions the Taskforce has formed on the basis of the interviews. Some of the information was given in confidence. It was not in the mandate of the Taskforce to punish anyone, which has influenced the questions posed to the interviewees. The following is an account of the information given to the Taskforce and the opinions it has formed on that basis.

## **2.2 The Taskforce's knowledge and views**

### **2.2.1 Athletes and coaches**

In order to raise their haemoglobin levels, the skiers had used the "alpine house" or stayed in alpine conditions for 20-60 days in preparation for the season. Most used the alpine house in Finland for 4-5 days and then went to camps or competitions in alpine conditions. The alpine house had not been used, according to their own account, by Milla Jauho, Pirjo Manninen, Kati Sundqvist and Sami Repo. All except Manninen had been administered infusions (rehydration), mainly after competitions.

In the case of skiers who had given positive samples, Kari-Pekka Kyrö had taken the initiative for doping; in the case of Kirvesniemi, this had happened in cooperation with him. Jauho and Kuitunen said that they had not known what the infusion contained; it had not been discussed. Kirvesniemi said that he had known about the substance and that it was prohibited. The same infusion had been tried on him before, once last autumn and then at Otepää. Kyrö assumed that the women skiers also knew. The impressions the others had got varied. The counsel for Jauho and Kuitunen pointed out that this might be a question of an offence committed by a Ski Federation official, for which the Federation shared responsibility.

Both the physicians, Mäkelä and Turpeinen, said in their written answer that the skiers and the Head Coach had agreed on the use of the substance. And Mäkelä said in addition that he had immediately provided the information relating to the procedure.

In Lahti the HemoHES infusions were administered in the coaches' and physicians' room. This was not discussed with anyone else except those directly involved. Jauho and Kuitunen had had the infusion at the same time. Manninen, Sundqvist and Repo, who had not given positive samples, said that they had noticed nothing out of the ordinary, nor had anyone discussed the infusion with them. They felt they had to some extent been outside the "inner circle".

The coaches were well aware of rehydration infusions and the use of the alpine house, both of which they considered normal methods in skiing. According to the coaches, their own knowledge of the effect of plasma expanders or how long they would show in tests was negligible or non-existent. (The fact that *Yhtyneet laboratoriot* can detect HemoHES and other plasma expanders in their tests became known a few days prior to the Lahti Championships. How the information found its way to the Finnish Ski Federation was not revealed in the interviews.)

Dr Turpeinen has taken part in research on the development of haemoglobin testing at the Research Institute for Olympic Sports KIHU. The views the coaches had of the others' complicity were contradictory, but Kyrö was considered a power figure.

No doping instructions/education had been given except the Anti-doping Committee's annual list of prohibited substances and a lecture by a physician concerning changes in the list.

**According to the findings of the Taskforce, all had been aware of EPO and its effects. Almost all suspected that others used it. No one admitted in the interviews that they had used or tried it or had seen anyone else doing this. The Taskforce gained the impression that Finns had access to EPO. According to one of the skiers, he/she was offered the possibility of using EPO in 1998 and 2000.**

The interviewees did not have any knowledge of Finns having had problems with keeping under the FIS haemoglobin limit. The coaches did, however, point out that there are great differences in haemoglobin levels, depending on the conditions, the elevation of the competition or camp site, the closeness of competitions or training periods, etc.

According to the coaches, plasma expanders had been used extensively in skiing before they were prohibited. The Taskforce got the impression that not only HemoHES, but also

albumin had been used earlier. Doping was not believed to be any more wide-spread in skiing than in other sports.

This leads to the conclusion that there is a culture which tends towards enhancing haemoglobin levels to the limit allowed within the FIS rules and that plasma expanders play a role in this.

All athletes and coaches were in favour of doping testing, including EPO tests, which had not been made in Lahti, adding that in testing everybody should be on the same footing and there should be tests for all substances. The athletes considered it necessary that WADA should replace FIS in testing. The Finnish team were aware that FIS would carry out voluntary blood testing in Lahti, but took no notice, and no one went to the tests. The other teams took the tests to varying degrees.

### **2.2.2 Officials**

All concerned agreed that the elected officials had not concerned themselves with practical coaching in any way. Not even the executive group for top-level sport had specifically dealt with doping, with the exception of a discussion led by Teuvo Valtanen from the Anti-doping Committee .

The coaches reported to the executive group in writing. They appeared to have different opinions about matters. There is no special bonus for coaches for success in competitions; on the whole, they only receive their salaries. The physicians work for the Federation on a part-time basis in addition to their regular employment.

The Ski Federation has advocated blood tests and haemoglobin limits. It had itself carried out only a few tests earlier, but prior to this season the Federation had made 20 tests. In the agreements the Federation concludes with top athletes, the athlete commits himself or herself to following the doping regulations in force and to being available for anti-doping work done by the Federation.

Most of the work of the elected officials and the Executive Group for Top-level Sports, as well as the Director of Cross-Country Skiing, relates to finance and fund-raising, in which the Ski Federation has been successful. The elected officials usually do not even accompany skiers abroad for competitions.

On the basis of the interviews, the Taskforce received the impression that the elected officials of the Federation and the leaders of the Lahti team had not known about the methods used. However, considering the discussion on doping conducted within ski circles, including the Federation, and the limits set for haemoglobin values, the leadership should have understood that the problem also concerned the Finns. Coach Riski's statement on 13 May 2001 implied that the prohibited methods used were in fact known to a number of people.

On the other hand, as a result of the distance which the skiers felt between themselves and the officials, the skiers may not have been fully aware of the enormous harm they can cause to their sport by the use of doping. Officials should be in contact with athletes even before the medal ceremonies and promote a sense that the whole sport community is interested in their doings, and concerned about their possible wrongdoings. Athletes

should also be made aware that the officials are concerned about doping and determined to eradicate it. Athletes should have confidence in the efficacy of anti-doping work.

### 2.2.3 Physicians

**In the view of the Taskforce, medical sciences appear to play a major part in cross-country skiing.** Blood tests were first given to skiers at the Lahti 1989 World Championships. As unhealthily high haemoglobin values were found in skiers, FIS set haemoglobin limits in 1997: 185 g/l for men and 165 g/l for women, which were subsequently lowered to 175 and 160, respectively, before the 200-2001 season. No Finnish skiers have applied to FIS for an exemption to the haemoglobin limit on the basis of their innately high values.

After the 1999 Ramsau World Championships, there were rumours about the use of plasma expanders, which were added to the list of prohibited substances in 2000.

Permitted asthma medication is used by some 60% of top-level skiers, whereas the corresponding rate in the population at large is 3%. Infusions have been used since 1997. Similarly, oxygen is administered.

A confidential EPO test, known as the SAFE test, was made on the 200 haemoglobin samples taken in Lahti. The Taskforce has not had access to the findings.

There was no cooperation between the physicians of the different ski teams. The cross-country skiing team kept aloof from the other teams. The Ski Federation has no medical commission, like some other major federations.

Neither of the cross-country team physicians attended the interviews. Initially, Pirkka Mäkelä did not take contact, and Juha-Pekka Turpeinen pleaded the ongoing enquiries of the Finnish Medical Association and the National Authority for Medicolegal Affairs. The physicians did not provide copies of the accounts they had given to these authorities because of the confidentiality involved. In the short faxes sent at a later point, they stressed that their actions had been medically justified and denied having prescribed, purchased or had in their possession prohibited doping substances. As the interviews with the skiers and coaches had revealed that the HemoHES infusions in Otepää and Lahti had been administered by physicians, many key questions remained unanswered.

The Taskforce further sent letters to the physicians, requesting answers to the following questions, without individualising the skiers (to avoid any breach of confidentiality):

1. What was the eventual medical justification for the plasma expander infusions?
2. Did you inform the athletes what it was all about?
3. Did you know that the substance in question, HemoHES, was on the list of prohibited substances?

Dr Turpeinen answered:

1. For reasons of confidentiality I am bound to, I cannot comment further.
2. The athletes had agreed on the use of the substance with the Head Coach. My part concerned the infusion itself and the safety considerations involved.
3. Yes.

Dr Mäkelä answered:

1. While the enquiry and process which concern my action in view of the general and specific duties of physician are going on, and because of the confidentiality I am bound to, I feel I cannot give an account of the matter to other parties at this point.
2. The Head Coach and the athlete had together agreed on the use of the substance in advance. My role was solely to carry out the procedure and to see to the safety of the athlete. For my part, I provided the information relating to the procedure immediately.

**The Taskforce believe that new information about doping at the Lahti Championships and the Finnish skiers' positive tests will come to light, in addition to what was revealed or known by the time this report was written. The Taskforce had no means of verifying the information given.**

### **3. CHEMICAL TRAINING, DOPING IN LAHTI AND KIHU'S ACTIVITY**

#### **3.1 Chemical training**

Coaching used to focus on physical training at least up to the sixties. Coaches studied and designed different training programmes, compared their methods and tested different alternative methods for improving the performance of the athletes under their care. The aim was to train more diligently and more efficiently to gain a competitive edge on rivals. Later coaching also came to encompass mental training.

As the methods of physical training became to a large extent known and the amount of training could no longer be increased and as medical sciences and their applications developed, physical training was supplemented by so-called chemical training. Coaches and athletes began to use drugs, vitamins, health pills, supplementary nutrients, blood manipulation and similar means in order to improve performance by manipulating the human biochemical system.

Besides their physical training programmes, today's athletes also have a regime of several kinds of supplementary substances. In addition to this, for instance in cross-country skiing, dehydration is treated with sugar-saline solutions or glucose. The next step to doping is very short, only one more pill or infusion.

At this point, it must be acknowledged that the move towards chemical training was inevitable. It is impossible to prevent the development of new methods for achieving better results and better athletic performances. Society itself is increasingly chemicalised and medicalised. There are drugs for ageing, depression, contraception, alcoholism and so on – and also, of course, for improving athletic performance.

The methods of chemical training are innumerable, for nearly everything we ingest has some – larger or smaller – effect on our performance. The sports organisations themselves have to determine their stance on chemical training. This has taken the form of doping rules. Only the means of chemical training which are considered to be artificial performance-enhancement or hazard to health have been prohibited as doping.

In chemical training, however, caution needs to be observed. It is easy to transgress doping rules. Supplementary nutrients, for instance, may contain undeclared prohibited substances. The responsibility rests with the athlete. This is a personal responsibility which cannot be shifted to the coach, physician or anybody else in the entourage. The

athlete must be vigilant and ascertain what he/she ingests or is given, when venturing out of the trodden path.

Doping regulations have been laid down with a view to preventing risks to the athlete's health and to ensuring that the rules of the game are the same for all competitors. But whatever the reason for the doping regulations, they are part of sport rules. It is essential for fair play that everybody follows the same rules. In this respect, a violation of the doping rules is on a par with cutting corners in cross-country races, tampering with an engine in Formula or an off-side goal in football. Doping is an offence and results in penalisation, irrespective of the degree of guilt.

It was seen to be appropriate to note these axioms in this context because of the various claims circulating in the media.

**The Taskforce wish to stress that there are top-level athletes, including skiers, who do not use prohibited substances or methods.**

### **3.2 Special characteristics of the Lahti cases**

The Lahti doping cases involve some special features which are partly medical, partly juridical, partly factual.

The plasma expander used was HemoHES, and it is administered by infusion. Such infusions were given not only in Lahti but also in Otepää earlier in February. This was done by a physician.

HemoHES has at least two different effects:

1. HemoHES expands plasma and lowers the haemoglobin (Hb) content in the blood. It makes it possible temporarily to reduce Hb, which would otherwise be too high to be within the rules applied in skiing. This is blood manipulation, in which HemoHES is used as a cover-up.
2. There are indications that HemoHES may improve performance directly on the same day the infusion is administered by helping to regulate fluid balance and temperature and by maximising peripheral circulation. Studies show, however, that the use of plasma expanders of the HemoHES type do not improve the performance of top-level athletes (Warburton et al.: 'Blood volume, aerobic power, and endurance performance: potential ergogenic effect of volume loading', *Clinical Journal of Sports Medicine*, 10(1), 59-66, 2000).

None of the interviewees admitted using erythropoietin (EPO), an erythrocyte hormone. The Taskforce was told that one athlete was offered the possibility of using EPO in 1998 and 2000. In addition, it is generally assumed among skiers that EPO has been used in cross-country skiing. According to one of the athletes, "EPO tests will clean up skiing".

EPO increases red blood cells and raises the haemoglobin (Hb) level. In order not to exceed the FIS limit, the athlete must keep an eye on his/her Hb value and, if necessary, dilute his/her plasma before competition by means of an infusion, e.g. HemoHES. The Finnish team had their own Hb analysis equipment in Lahti.

The Hb level can be naturally high, but then it would be logical that the athlete had known this earlier and applied for an exemption to the Hb level set by FIS. It is possible to investigate by additional tests whether the Hb level is natural or artificial. No international elite-level skier has asked to have such tests done. Some athletes have claimed that the alpine house had raised their Hb too high. Studies have shown, however, that the alpine house has only a temporary and short-lived effect on Hb.

The men skiers did not deny using the plasma expander, but some of them have said in public that they had believed that HemoHES was not prohibited, because it was listed as a permitted substance in the booklet *Kielletyt ja sallitut lääkeaineet* (Prohibited and permitted substances) issued by the Finnish Anti-doping Committee. Plasma substitutes in general are listed as prohibited substances in the booklet. According to the Medical Code published by FIS in autumn 2000, plasma expanders are prohibited, as they are in the International Olympic Committee's Anti-doping Code of 2000. According to Coach Riski's statement of 13 May (*Sunnuntairaportti* on MTV3), Kyrö, Leppävuori, one of the physicians and possibly Klinga and Petäjä had discussed whether or not HemoHES would show in the doping test. At least the physicians have admitted knowing that HemoHES is a prohibited substance.

When an athlete is called to a doping test, he/she must report all the medical substances he/she has been using in the past three days (the routine doping test at Lahti) or the past seven days (WADA tests). If an athlete believes that HemoHES is permitted and does not feel that the infusion method is prohibited, it would be natural that he/she would also report the use of HemoHES. The form which athletes fill in at the doping test may not be published without their consent, and the forms were not shown to the Taskforce.

Manipulation for the purposes of a test is prohibited, whatever the substance used, because test results may not be adulterated, not even with sugar-saline solutions or any other innocuous substance. Pharmacological, chemical and physiological manipulation is listed as prohibited in the FIS regulations (and also in the booklets issued by IOC and the Finnish Anti-doping Committee). It is another matter altogether if there are medical reasons for the use of a substance, either as part of treatment for an illness or as an indisputable preventive measure. Such reasons did not come up in the investigation of the Taskforce.

**The Taskforce note that public discussion and interviews have concentrated on plasma expanders, and not on the possible reasons for their use, namely to increase haemoglobin in the blood. This has been because it is not possible to investigate the matters without police powers - as happened in the Tour de France in 1998.**

### 3.3. KIHU's part

Since one of the physicians, Dr Juha-Pekka Turpeinen, worked for the Research Institute for Olympic Sports (KIHU) at the time of the Lahti Championships and had specifically done research into haemoglobin testing, the Taskforce saw it necessary to find out KIHU's possible involvement in this doping affair.

KIHU was founded in 1990 to promote the success of Finnish top-level sports. KIHU has evolved into a multidisciplinary research, development and service organisation, and one of its research areas is so-called chemical training. The Taskforce visited KIHU in Jyväskylä and discussed matters with Director Heikki Rusko. KIHU research turned out to be well documented and the choice of subjects fulfilled the ethical criteria of medical and sport research. KIHU has no ethical board of its own to evaluate research plans, but uses

either the ethical board of Jyväskylä University or that of the Central Finland Hospital for this purpose.

Director Rusko's view was that any research into anti-doping also involves research on doping. In his opinion, KIHU had no part in the Lahti events, especially since HES has no direct doping effects and since it appears that what was actually involved was the use of EPO.

The study most often cited in public is research into the use of plasma expanders and their effect on haemoglobin testing. This research was commissioned by FIS and the relevant research plan dates from 1999. Dr Juha-Pekka Turpeinen took part in this research. The research plan was changed when plasma expanders were prohibited, and the infusion eventually used was physiological saline solution. There are appropriate reports of the findings, which have been published at different congresses. In the opinion of the Taskforce, the reports have had no other relevance, except that Dr Turpeinen is well-informed on factors influencing Hb values.

#### **4. CROSS-COUNTRY SKIING IN THE FINNISH SKI FEDERATION, THE RESPONSIBILITY OF ITS LEADERSHIP AND ECONOMIC CONSEQUENCES FOR THE FEDERATION**

##### **4.1 Organisation of cross-country skiing**

The Finnish Ski Federation is a registered association governed by the Associations Act. It is a union whose membership consists of registered associations, that is, sports clubs. The supreme power is invested in a Central Council (liittovaltuusto) elected by a General Assembly (liittokokous).

Under Section 22 of the Ski Federation regulations, the executive board acts as the managerial body which runs the Federation in conformity with the law, the Federation regulations and the decisions of the Central Council. Subordinate to it is the Managing Director, who is in charge of the office and a staff of about 25 people. (see Appendix 2)

For operational purposes, the Federation is divided into four sections for different ski sports: alpine skiing, freestyle, cross-country skiing and Nordic combined. Each has a committee and a director. The budget is structured in the same way.

The Federation also has federal committees, executive groups and other groups. One group relevant to the present enquiry is the Executive Group for Top-level Sports, which comprises two elected executive board members, the directors of the four sections and the Managing Director, who presents matters to the Central Council.

The Executive Group for Top-level Sports has convened about five times a year. It is responsible for

- determining the overall organisation of coaching and the relevant lines of action,
- coordinating the training of coaches and research,
- proposing training groups,
- proposing competition teams; and
- monitoring the finance of top-level sports.



The Director of Cross-Country Skiing is a full-time official, who has three full-time accountable officials under him: the Head Coach (top-level sports), the head of recreational sports and the head of junior sports. The Head Coach is assisted by a few full-time and several part-time coaches and two part-time physicians.

Thus, the division of labour is well defined in the Ski Federation, and each of the four forms of sport works fairly independently. The Managing Director does not have much say in their operations, nor has this been part of his job description. He focuses on organisational matters.

In cross-country skiing, the top level, led by the Head Coach, similarly forms an accountable unit of its own. In his own words, the Director of Cross-Country Skiing Antti Leppävuori has mostly managed economic matters and matters concerning cross-country skiing in general. As a former head coach, he is, however, very familiar with practical coaching. The work of the Executive Group for Top-level Sports has already been discussed above.

Top-level cross-country coaching is led by the Head Coach. He is assisted by the Women's Coach. In addition, most world-class skiers have their own personal coaches. It is worth mentioning here that Head Coach Kari-Pekka Kyrö has been the personal coach of one skier in the Lahti team, namely Kaisa Varis, and Jarmo Riski has similarly coached Virpi Kuitunen. Except for written reports to the executive group, top-level coaching has been managed independently. It is thus largely separate from the other operations of the Ski Federation.

Such distancing of top-level coaching from other operations is not specific to the Ski Federation, but exists in many other Finnish sports federations as well. In a large and efficient organisation like the Ski Federation, however, this distancing is marked, and the elective leadership has made a point of not interfering in any way with top-level coaching, except in matters relating to economic resources.

It has to be taken into account that excessive segmentation of responsibilities may lead to a situation in which no one feels responsible for things that can go wrong. The distancing of coaching and management results in a lack of management in coaching. This opens the door to favouritism, conflicts between team coaches and personal coaches, and inner circles within the team.

#### **4.2 Responsibility of the elective leadership**

A situation like this begs the question what the responsibility of the elective leadership is when coaches hired by the Federation, its part-time physicians and top skiers are shown to have acted contrary to the doping regulations.

If it were a question of one single doping case, unrelated to the Federation's coaching, the responsibility of the Federation would not be so much an issue, provided testing had been appropriate. It is impossible to keep a constant eye on the activities of individual athletes or coaches. What makes the Lahti incidents serious is not only the large number of doping cases, which were six, but also that doping has taken place within the Federation's own activities. The Federation is always responsible for its own operations.

Under Section 35, 1 of the Associations Act, the executive board must manage the association's affairs with care in accordance with law and regulations and the decisions of

the association. This provision determines the responsibility of the executive boards of all registered associations. It assigns them the responsibility for being careful - matters must be managed with care. Applying this to doping in the Ski Federation, we find the following.

Doping matters or anti-doping work have no organisational status in the Ski Federation. They have not been specifically assigned to any organ or person. The Federation has no medical committee. The action plan for 2001 makes no mention of doping matters.

According to its minutes, the Executive Board has not discussed doping during the training and competition seasons under review. The last time the Executive Group for Top-level Sports discussed doping testing to any extent was 13 April 2000, when they heard Teuvo Valtanen from the Finnish Anti-doping Committee and decided that the Federation will pay for 20 tests during the 2000-2001 training and competition season. The Federation's testing had been insignificant before that.

According to skiers and coaches, doping education has not been provided. Everyone has been given the booklet *Kielletyt ja sallitut lääkeaineet* (Prohibited and permitted substances). In addition to this, the physician responsible for cross-country skiing has explained in relevant contexts what changes had been made in the list. It has been the responsibility of the sport-specific coaches to provide the Anti-doping Committee with information about the training groups and camp and competition programmes, and to forward the forms completed by the skiers concerning the places where they planned to train. The Ski Federation net site has a link to the Association for Promotion of Sports Medicine and Physiological Testing (Liite ry.) The periodical *Hiihtäjä* (Skier) has published some articles on doping.

Suspicions about blood doping have been aired more often in connection with cross-country skiing than any other sport, perhaps with the exception of cycling. Blood testing started at the Lahti 1989 World Championships. Finland was among the countries taking the initiative for this. The haemoglobin limits for competitions were imposed in 1997 and lowered in 2000. Doping tests received a great deal of media exposure before the Lahti Championships, where the stated aim was effective tests. Blood tests were not taken to reveal doping, but confidential haemoglobin tests were used for scientific research to detect EPO.

**In view of this, it is the opinion of the Taskforce that the Ski Federation Executive Board cannot be regarded as having acted in accordance with their responsibility for care and control when they overlooked Finland's own doping control. The elective leadership should have understood that doping may occur in the Finnish team just as well as in any other team.**

#### 4.3 State aid

The Ski Federation was granted FIM 4.52 million in government subsidy for 2001. The condition for these funds is that the Federation complies with the regulations issued by the Finnish Anti-doping Committee. This has not been the case. Consequently the Ministry of Education must consider sanctions.

The guiding principle in government support for sports federations is that the share of top-level sports is 25% of the total (children's and young people's sport 50% and adult amateur

sport 25%). The Ski Federation has four sport-specific sections, of which cross-country skiing is one. Calculated in this way, the share of cross-country skiing of the overall sum allocated by the Ministry of Education is fairly small.

Further, according to its own estimate, the Ski Federation received FIM 2.97 million for top-level sport from the National Olympic Committee for 2001. According to the Finnish Sports Federation SLU, the Ski Federation received FIM 8.311 million in public aid in 2000 (the Ministry of Education appropriation and coaching support from the National Olympic Committee).

The Ski Federation budget for 2001 is FIM 28.484 million. The share of top-level sport is FIM 15.567 million. Indirectly, however, the sum is larger; cross-country skiing receives FIM 5.39 million of this. The income from the Lahti 2001 Championships will probably exceed FIM 10 million.

The damage done to Finnish sport cannot be measured in money. It is clear that doping cannot go unpunished at the federation level either. Athletes, coaches and physicians will be punished and thus lose money. The failure to meet the conditions determined for government support must influence the amount of state aid granted to the Ski Federation, but must not affect the funds intended for children's, young people's and adults' non-professional sports.

**In the opinion of the Taskforce, it is not possible to devise any mathematical formula for cutting the state aid of the Ski Federation, or in doping cases in general. The considered proposal of the Taskforce is that the Ministry of Education cut FIM one million from the aid of FIM 4.52 million granted to the Ski Federation for 2001 because of the failure to adhere to the condition for state aid. In addition, the size of state aid to the Ski Federation should be dependent on how convincingly the Federation organises its future anti-doping activity.**

## **5. Efficient anti-doping work and restructuring of the Finnish Anti-doping Committee**

### **5.1 Efficient anti-doping activities**

Anti-doping education and doping testing in Finland were found to be of a good quality in an international evaluation. But the use of doping uncovered in Lahti shows that there are clear shortcomings, not only in the activities and attitudes of the Ski Federation, but also in the Finnish Anti-doping Committee, as exemplified by the booklet *Kielletyt ja sallitut lääkeaineet* (Prohibited and permitted substances) and the Committee's net site.

During the enquiry, it transpired that one reason for the use of doping was the skiers' and partly also the coaches' belief that other countries' skiers use doping substances and methods and that the only way to be on the same footing with them was to use doping. Changing an attitude like this may be uphill work, but it is vital to emphasise the converse, i.e. the possibilities of "pure sport", both in national and international contexts. International doping control is essential. Finland has to support the work of WADA in every way.

Especially in top-level skiing, it has been common to use different kinds of sugar-saline infusions after demanding competitions and sometimes even before a competition. There

has been discussion about the “grey area” between prohibited and permitted substances and methods and its possible exploitation. A lapse from this grey area into doping is all too easy. It is necessary to target intensified education regarding prohibited and permitted substances and especially attitude training at athletes and coaches. Every top-level athlete should know the doping rules thoroughly. The Finnish Sports Federation (SLU) Board made a decision to intensify education and information on 21 March 2001 (Appendix 2). A similar decision was adopted by the National Finnish Olympic Committee on 8 March 2001. The Ski Federation has also made its measures known. The Taskforce support this development.

In its anti-doping work, the Finnish Ski Federation has mainly distributed the booklet on prohibited and permitted substances. Athletes did not feel that the Federation had any clearly anti-doping policy. This is why all the echelons of the Federation, starting with the leadership, should communicate an attitude condemning doping and stress possible sanctions if this line of policy is not adhered to. Educational activities also need to be intensified among elected officials. The elected officials should continuously express their views concerning doping matters. Communications between the different levels of the organisation and especially reporting from the "field" upwards require more attention.

The Anti-Doping Pass has already been piloted. Especially in endurance sports, it has been seen necessary to create a system in which blood values are regularly monitored in addition to ordinary doping tests, and suspicious changes lead to further investigations and measures. Within ski circles such a procedure has been developed to a fairly high degree and the Taskforce recommend that the plan be finalised. The National Olympic Committee decided on 8 March 2001 to launch a programme for promoting the use of Anti-Doping Pass by all athletes who receive training support from the National Olympic Committee, while WADA is developing its own system.

After the doping cases in Lahti became known, it became apparent that the information and public relations structure of the Ski Federation fell short. The Federation should create a clear system in which the leaders find out without delay what has happened and communicate it openly. Although the rules of the International Ski Federation are somewhat ambiguous, the aim should be to establish a system in which a positively tested A sample automatically leads to suspension. This is what happens at the Olympic Games and most team championships, where – as is the case in skiing - the same athletes take part in several competitions in a row. Similarly, a doping case could be made public immediately after the A sample is shown to be positive, without having to wait for the analysis on the B sample. This would help to avoid many disagreeable and unnecessary speculations.

## **5.2 Physicians' role in anti-doping**

In the Lahti cases, the infusions had been administered by a physician. Medical interventions should always be clinically and ethically justified, even if coaches or athletes exert pressures on the physician to use dubious methods. Physicians working with athletes need more training for anti-doping work. Norway has introduced an "anti-doping test", which measures knowledge and attitudes. Physicians working for sports federations have to pass the test. The Finnish Ski Federation has had no physician with overall responsibility; each physician responsible for a given form of sport has primarily worked alone and for short periods. The Federation could remedy this by hiring a knowledgeable physician who is given sufficient resources and responsibility.

This model has worked well in the International Cycling Federation (UCI) since the doping scandal: "a physician who is given responsibility is responsible in his actions". UCI has created a statute for physicians and enacted rules of conduct. Similarly, UCI has a statute for team directors and paramedical assistants, each of them with rules of conduct and sanctions. UCI has also introduced a system of permanent medical monitoring, for which team directors and physicians have primary responsibility. One purpose of medical monitoring is to avoid health risks caused by undetectable doping substances. All these rules are geared to assign responsibility to the athlete's entourage, to preserve the health of the athlete and to prevent doping.

Another possible model is that each federation sets up a medical commission, in which the chairman is responsible for activities and convenes the physicians working in the federation to discuss and plan, with anti-doping work as one item on the agenda. In a small federation it would be enough to appoint an official responsible for anti-doping work.

The National Olympic Committee has proposed a post for a full-time physician instead of the present fixed term postings. This physician should cooperate with the Finnish Anti-doping Committee in educating the physicians who work in the federations and represent the sport community in dealings with the Anti-doping Committee. A proposal to this effect is made by the Taskforce in Section 6.

### **5.3 Doping statutes**

A major step was taken in doping control and anti-doping activities when the Government submitted its proposal for amending the statutes on crimes which endanger health and safety. This amendment would supplement Section 44 of the Criminal Code with provisions concerning doping crimes, aggravated doping crimes and petty doping crimes, and with a definition of the doping substances referred to in the Criminal Code. Even if the definition of doping substances in the Criminal Code were narrower than in the doping codes of the sports federations, it would still cover the most potent doping substances. The doping crimes would not include the use of doping substances, so that they would not concern athletes, only coaches, physicians and others who distribute or administer doping substances. In their case, doping would become an offence subject to public prosecution, punishable by a fine or up to four years' imprisonment. The police would also have the right to make house searches in doping crimes and in aggravated doping crimes.

There is every reason to assume that the new provisions would influence the behaviour of coaches and especially physicians. Since attempted doping would also be punishable, the threshold to even suggesting doping would be high. The athlete might denounce the perpetrator and thus launch police investigations.

It is likely that the new provisions will come into force at the beginning of 2002 if Parliament passes the bill.

### **5.4. Reform of the Anti-doping Committee**

The Finnish Anti-doping Committee was founded in 1990 (replacing the National Doping Committee founded in 1982) to work in connection with the Association for Promotion of Sports Medicine and Physiological Testing (Liite ry).

The aim of Liite is to promote a healthy, sportive life style. It works in three different sectors: sport medicine, physiological testing and anti-doping work. In addition to the statutory board, Liite has a sports medicine commission and a physiological testing commission, as well as the independently operating Anti-doping Committee and its supervisory group. The Association has a managing director and five employees.

Anti-doping work comprises testing and its development, education and information, research watch, contacts with authorities and international contacts. A total of 1849 doping tests were made in Finland in 2000, slightly over half of them during the training period.

The work of the Finnish Anti-doping Committee should be further developed. It is essential that the Committee's work is independent, reliable and effective. Especially when doping occurs in a sports federation, as now in the ski federation, the common interest of the athletes, coaches and the elected leaders to cover up is immense. This was the rationale at the international level for setting up the World Anti-Doping Agency WADA.

Although Liite and the Anti-doping Committee have done creditable work in Finland, it would clarify anti-doping activities if they were a clearly independent operation. This is why **the Taskforce proposes that doping testing and relevant educational activities, information and research be formed into a separate association, organised like WADA. This would imply the division of the association into two sections of similar size: government representatives and sports organisation representatives.**

Unlike WADA, which is a foundation, this would be an association, and could, for instance, be called the Finnish Anti-doping Association, because the government would provide the funding, just as it has largely financed the Anti-doping Committee .

The board of the association would then constitute a new Finnish Anti-doping Committee . Each party to the board, the government and the sports organisations, would appoint half of its members. The members should be experts on doping, who, in anti-doping work, would represent their own expertise and the Anti-doping Association, not their background organisations.

The Anti-doping Committee should create a clear action model and communication scheme, as well as a contingency arrangement for crisis situations. The Committee would take care of doping testing and relevant information, as well contribute to anti-doping education. For instance, an educational package geared to sports federation physicians would be needed. The Committee would follow developments in the field as it has done so far.

The number of doping tests conducted in Finland is fairly high, but needs to be further increased to reach the number estimated by IADA (International Anti-doping Agreement) to be sufficient for Finland, namely 2500 tests annually.

Collaboration with the Finnish Society of Sport Medicine and with the operations which would remain in Liite would also be important. The Committee should carefully update the booklet on prohibited and permitted substances and the corresponding net site. These must not contain errors.

The Committee should have a full-time accountable director and other necessary staff, which should be agreed upon with the present Liite.

**The Taskforce proposes to the Ministry of Education that the funding of the Anti-doping Committee be increased with a view to achieving the recommended number of 2500 tests annually and to hiring the director and necessary staff for the new Anti-doping Committee . At the same time, the Taskforce proposes that the Ministry of Education and Liite negotiate and agree on the practical implementation of the proposals put forward above.**

\*\*

## **6. SEPARATION OF FUNDS ALLOCATED FOR VOLUNTARY ACTIVITIES AND TOP-LEVEL SPORTS**

### **6.1. General**

The Lahti doping cases have resulted in a need to look at anti-doping work in the Finnish sports movement as a whole. In 1998 the Finnish Sports Federation SLU set up an ethics commission. On its initiative, the Federation resolved on 21 March 2001 to intensify anti-doping work in all its member organisations. The decision includes eight points, which in many ways correspond to the proposals put forward by the Enquiry Taskforce in this report. Some of them will be discussed in more detail below. The SLU decision is appended to this report.

It is no simple task to create an effective doping control and to maintain comprehensive anti-doping activities. SLU has over 70 sport-specific federations under it; in some of them doping is a major concern, but in others the problem is sporadic, even non-existent.

In all sports, the majority of athletes train and compete cleanly. Generalisations do not do justice to clean sports or to clean athletes. Yet, there are serious problems, to a different degree in different sports. They have to be tackled adequately.

Therefore, it is necessary to reconsider how doping activities are targeted, although the Taskforce fully agree with the SLU Board when they say that they regard the need to intensify anti-doping work as the common concern of the sports movement.

### **6.2 Divergence of top-level sports and voluntary activities**

A number of conclusions can be drawn from the Lahti doping cases.

This enquiry has found that in the Finnish Ski Federation the interface between the elective leadership and the professional coaches and athletes is inadequate. All those interviewed noted that the elective leadership and coaching are completely separate, except in economic matters. As a result, the elected leaders did not feel a sense of responsibility about doping, which they considered to be the concern of the practical operators.

The Taskforce know of no doping case revealed in Finland for which the elective leadership has taken responsibility.

The value worlds of the elective leadership and professional sports also appear to have diverged. The elected officials, including the delegates and most club managers, have not

been – and had no desire to be – aware of the methods used in top-level sports in today's world. No official discussion has been conducted on this issue.

On the initiative of the coaching management, the elective leaders have set targets for the number of medals and the results to be achieved and thus created pressures for coaches and athletes, promising bonuses and other benefits for great achievements. After this, they have left it to the coaches and athletes to realise them.

Civic activities and top-level sports must, in fact, be appraised from different premises. Finnish society and the Finnish public want athletes to keep up with the international world class in sports and to succeed, which today demands a professional approach both to coaching and to competing and training. But at the same time, voluntary activity keeps to the traditional methods in encouraging the general public, especially young people, to practise sports without such ambitions.

In most federations, progress has been rapid. In 1999 there were 809 full-time professional athletes in Finland, of whom 206 were non-Finns, and 675 part-time professionals (SLU estimate). Federations have about 100 professional coaches. The number of athlete managers was estimated at 106.

The clearest divergence between top-level sports and voluntary activity is found in ice hockey, in which the élite have moved to the Ice Hockey League. As a result, the primary task of the Ice Hockey Association is to develop non-professional activities and competitions in ice hockey. In football (soccer), the Veikkausliiga League has evolved in a similar manner, albeit to a lesser extent. This limited company has become the prevalent operational unit in other sports as well. In 1999 sport was provided by 88 companies in addition to the clubs. The best players are no longer necessarily members of their clubs, but player-employees under contract to them.

On 8 September 2000 Risto Nieminen, acting as a one-man committee, made a proposal for principles to be used in separating voluntary activities and business activities, especially as regards sports bodies.

Despite the fact that top-level competitive sports and voluntary activities are diverging, these sectors need each other. Where this trend will lead naturally depends on the sports movement itself. Society has a role in financial aid and in legislation governing sports; especially professional athletes' taxation and social security have required separate legislative measures. The sound principles of the sports movement are important to society as a whole. The doping crimes to be included in the Criminal Code show that society has become more and more aware of the negative effects of doping.

### **6.3 Effect of the divergence on state aid**

In state aid to sports organisations, such separation has not taken place to the degree needed. Aid to top-level sport, which constitutes a large portion of the state aid to sports federations, goes through two tracks: in the form of state aid to federations and through the National Olympic Committee. For instance the Finnish Ski Federation receives FIM 4.52 million in state aid in 2001, in addition to which they receive an estimated 2.97 million through the Olympic Committee.



The second committee on government subsidies for sports organisations noted (Ministry of Education committee reports 44:1996, p. 13; in Finnish only) that the subsidies granted to sports organisations are primarily intended to support recreational and fitness sports. However, separating voluntary activities and professional sports is by no means straightforward.

According to the Ministry of Education decision concerning the granting of state aid in 2001, the recipients of government subsidies must conform to the regulations of the Finnish Anti-doping Committee, and the Ministry may take action if this condition is not met.

In the foregoing, the Taskforce proposed that this action take the form of a reduction of FIM one million from the state grants allocated to the Ski Federation in 2001. This measure would primarily affect the Federation as a whole, that is, both top-level sports and voluntary activity.

Doping control should be targeted at the group in which doping is a serious problem, that is, top-level sports. In voluntary activity, anti-doping work is vital as well – the Taskforce endorse all the measures taken by the Finnish Sports Federation SLU in this respect - but doping control should focus on top-level sports.

**In the opinion of the Taskforce see, it would clarify the system of state aid to sports organisations if the financial support of top-level sports were channelled solely through the Finnish Olympic Association.** Nearly all federations representing top-level sports are members. But the Olympic Association should then include in its activities those federations which are not yet members but which can be seen to provide top-level sports. This would require amending Paragraph 4 of the Olympic Association regulations.

The Finnish Olympic Association is a service organisation specialising in top-level sports. It received FIM 16.4 million in state aid in 2001. In addition, sports grants and personal coaches' grants are allocated through the Olympic Committee, totalling FIM 3.7 million.

The state aid to federations amounted to FIM 76.725 million in 2001. The share determined for top-level sports is 25%, or some FIM 19 million. The aid is distributed among the federations according to international success, the number of countries participating, certain quality factors and general interest in particular sports.

The great majority of these federations are also members of the Finnish Olympic Association and receive almost the same sum through the Olympic Committee as in direct subsidy.

If the financial support of top-level sports were channelled through the Olympic Committee, as the Taskforce proposes, it would be allocated to sports at the discretion of the Olympic Committee. Full agreement about this allocation could never be achieved, but, as an expert unit, the Olympic Committee would be the best body to do it.

At the same time, the criteria for allocating state aid to federations should further take account of competitive activities in Finland and participation numbers, the number of players in a series, etc., as well as international cooperation, competition travel and other international expenses. The financial aid allocated to top-level sports would thus comprise support and development of coaching and training, as well as training for and participation in the Olympic games.

A solution like this would also allow doping control to be targeted better than now. In terms of doping control, voluntary activity takes no priority. Not can it with any reason be blamed for the failure in doping control. On the other hand, voluntary activity must continue to have a central role in doping education.

As regards top-level sports, the National Olympic Committee should keep a firm hold on anti-doping work, which is an essential part of today's top-level sports. The Olympic Committee would be more effective than 70 federations or the Finnish Sports Federation in tackling problems which arise. Indeed, the Olympic Committee Board decided on the action it will take to intensify anti-doping on 8 March 2001.

#### **6.4 Anti-doping physician**

It transpired in Lahti that there was neither cooperation between the sports physicians nor any supervision. Top-level sports need a competent physician to supervise the activities of the federations' physicians, to educate them in doping matters and to provide doping expertise for the federation and its coaches. In addition, this person could be assigned general medical tasks relating to top-level sports.

For the reasons cited above, the most appropriate procedure would be for the National Olympic Committee to hire such a physician, for instance under the title of consultant. The tasks of the Finnish Anti-doping Committee also include information and education, but it must act as a neutral organ independent of the sports organisations. This is required above all in testing. Consequently, the most appropriate place for the anti-doping consultant would be the Olympic Committee, which is mainly responsible for top-level sports.

It would be left to the Ministry of Education to determine to what extent the separation of top-level sports and voluntary activities and the intensified anti-doping measures to be taken by the National Olympic Committee would require additional state aid to the National Olympic Committee. This would require further scrutiny.

#### **6.5 Proposals**

**The Taskforce proposes that the Ministry of Education issue a Resolution to redefine the conditions for state aid, so that top-level sports and voluntary activities would receive funds separately, and appoint a committee to determine how the conditions for state aid should be re-formulated in view of the proposals of the Taskforce.**

### **7. REHABILITATION OF THE INTERNATIONAL REPUTATION OF FINNISH SPORTS**

What has been done, cannot be undone. In sports history, Finland will always be linked with blood doping. Finland has to see to it that this doping scandal will also be recorded as a turning point in the annals of sport.

The way in which Finland is now conducting the enquiry into the Lahti doping cases and what measures it will take to eradicate doping are followed closely in international sport circles, especially in WADA, in which Finland holds an important position.

Once branded with doping, it is difficult to undo. In the opinion of the Taskforce, everything possible must be done to reinstate Finland's sports reputation in the world.

**This report and the measures proposed for preventing doping in the future have to be convincing.** The measures proposed are not intended to sweep the problem under the carpet, but to change sport structures in Finland in a way which will make the inroads of doping significantly more difficult. The fact that the **report is also published in English** enables Finland to show internationally what it has learned and is doing to step up anti-doping measures.

**Openness in the handling of doping cases** will be vital in the future as well. Finland must now be exemplary in this. This report constitutes an opening in this direction. The Lahti cases show clearly that doping should be discussed among sports organisation leadership, who should assume responsibility for anti-doping activities in their federations.

A proposal for including provisions on doping crimes in the Criminal Code has recently been submitted to Parliament. This amendment – when passed by Parliament in the autumn, as it now seems likely – is an excellent example of more stringent anti-doping activities. Under the amendment, the legal responsibility for administering doping substances to athletes rests with coaches and physicians - in which the Taskforce fully concurs. This will greatly influence the behaviour of coaches and physicians, who up to now have been largely outside doping control. The Taskforce recommends that the **Ministry of Education publishes a brochure on the doping statutes in English** for use in international contexts and to be distributed as an international example of the new measures taken by Finland in anti-doping work.

In conclusion, it is worthwhile noting that the essential thing in the future will undeniably be to prevent **new doping cases**. This has been the aim for some time, but the Lahti cases showed that the means used have not always been adequate. This report and the proposals put forward in it are also geared to this end.

The Taskforce hope that if anything has been learnt from the Lahti doping cases it will lead to substantially more rigorous anti-doping work in Finland. Finland must continue to participate actively in international anti-doping work both within WADA and in intergovernmental contexts. In anti-doping work, international activities are essential, because the problems, such as those described in this report, are common to sport.

In sports, people must believe that the end – sportive and often also economic success – does not justify the means, i.e. doping. Effective anti-doping policies and stringent national and international doping control must make this tenet a reality in sports.

7.3.2001

12/043/2001

### Appointment of an enquiry taskforce

On this date, the Ministry of Education has set up an international enquiry into the large-scale use of doping by Finnish skiers at the Nordic World Championships in Lahti. The enquiry taskforce shall

1. investigate the role of skiers, coaches, physicians and the Finnish Ski Federation leadership, and others if need be, in the use of controlled substances;
2. investigate how cross-country skiing is organised in the Finnish Ski Federation and what its cost structure is;
3. make proposals for financial and other sanctions which the Government should impose as a result of the incident;
4. explore ways to intensify anti-doping work in Finland. With regard to this, the taskforce shall include an action model for the sports federations;
5. review what research relating to cross-country skiing has been undertaken at the Research Institute for Olympic Sports (KIHU) and elsewhere, and make necessary proposals based on this;
6. assess the structure of the Finnish Anti-doping Committee and make necessary proposals;
7. deliberate what can be done to reinstate the reputation of Finnish sports in the international sports movement; and
8. look into other matters possibly relating to the matter in hand.

The taskforce may divide its work into an international and a national part.

It is hoped that the taskforce will put forward proposals for rectifying the situation and for a future line of action in Finnish world-level sports.

As background material for the enquiry, the Finnish Anti-doping Committee will be requested to provide an analysis of doping cases previously detected in skiing.

Counsellor Lauri Tarasti will be invited to chair the taskforce, and the members will be Dr Tapio Kallio, Specialist in Sport Medicine, and Mr Philippe Verbiest, as the World Anti-Doping Agency appointee.

The secretary of the taskforce will be Sirpa Irpola. At the Ministry of Education, the work of the taskforce will be coordinated by Director Timo Haukilahti and Senior Adviser Hannu Tolonen.

The taskforce is appointed for a period from 5 March to 15 May 2001.

The chairman of the taskforce will be paid FIM 20 000 and the members FIM 15 000; the secretary will be paid according to the committee practice. The fees shall be paid after the inquiry has been completed. In addition, the taskforce will be recompensed for travel, where necessary.

The expenses relating to the inquiry taskforce shall be paid from sub-item 29.01.21 (va34916).

Minister of Culture

Suvi Lindén

Senior Adviser

Hannu Tolonen

DISTRIBUTION:

Counsellor Lauri Tarasti  
Dr Tapio Kallio  
Mr Philippe Verbiest  
Ms Sirpa Irpola

FOR INFORMATION:

Political Advisers to the Ministers  
Director General Kivistö  
National Sport Council  
Ministry of Education committee register  
Ministry of Education Communications and Public Relations  
Ministry of Education Financial Service/Accounting



**The implementation of proposals of the Finnish Sports Federation to intensify the anti-doping work**

1. The Board of the Finnish Sports Federation proposes that the Ministry of Education report on the state and results of the national doping control of the immediate past, and estimate these results in light of relevant international information.
2. The Board decided to prepare an amendment to the statutes of the Finnish Sports Federation to be presented at the 2001 autumn meeting. The amendment shall oblige member organisations to report to the Board imminent problems related to sports culture which have occurred in their spheres of activity.
3. The Board assigned the competence centre of the Finnish Sports Federation, in co-operation with sectors developing educational content and realising education, the preparation of a total reform increasing ethical responsibility in sports, with focus on ideological education of young athletes and their supporters in ethical questions.
4. The Board supports the Finnish Olympic Committee's development work to introduce an Anti-Doping Pass in Finland. The Board proposes that the development work be carried out in co-operation with the Finnish Anti-Doping Committee and the athletes' funds.
5. The Board proposes to the Ministry of Education, the Finnish Olympic Committee and the Finnish Anti-Doping Committee that national seminars on the prevention of doping and on common regulations for sports organisations be organised, where the main target groups are member organisations, mainly national sports federations and the highest elected representatives.
6. The Board decided in the spring, in co-operation with the Finnish Anti-Doping Committee and the Finnish Olympic Committee, to establish a network composed of actors influential in elite sport. At the initial stage, the aim is to register doctors of the national sports federations and responsible trainers, who will be given updated information on anti-doping and sports jurisprudence. Subsequently, the network may be extended to include, among others, the athletes' personal trainers, physicians and managers.
7. The Board proposes that the Ministry of Education establish and secure the ethical foundation for sports medicine research and the ethical principles of sports doctors in co-operation with the Finnish Medical Association.

The Board assigned the competence centre of the Finnish Sports Federation, in co-operation with sectors implementing coaches' education, preparation of the investigation of the ethical content of coaches' education.

8. The Board appeals to the boards of the national sports federations to intensify their anti-doping work and to establish their own anti-doping programmes. The Ethics Committee of the Finnish Sports Federation functions as a co-operational body between the Ministry of Education, the Finnish Olympic Committee, the Finnish Anti-Doping Committee and the Finnish Sports Federation, and supports the anti-doping work of the national sports federations.

The Board proposes that the Ministry of Education reserve sufficient funds for the Finnish Anti-Doping Committee, the national sports federations and other sectors implementing anti-doping work to carry out effective activity and evaluate anti-doping work in the distribution of result-based government subsidies.

*The Board of the Finnish Sports Federation finds it essential that anti-doping work be intensified as a joint activity of the entire sports movement. Therefore, it is important that all societies and sectors participating in the activity create a detailed overall plan by means of which the tasks and responsibilities of the different sectors will be clarified.*