

# Key policy challenges to improve the health of people who use drugs



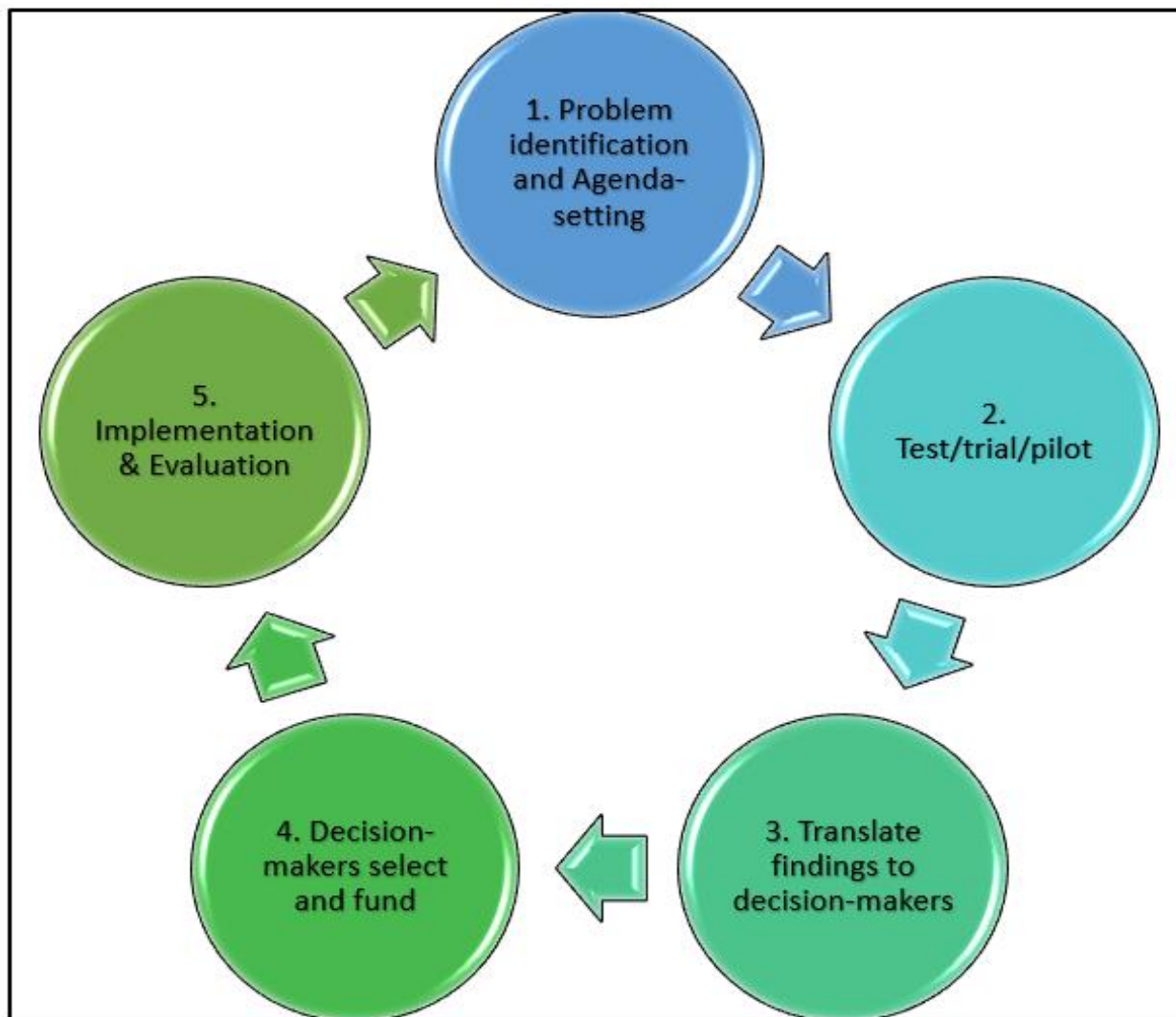
**Professor Alison Ritter**  
**Drug Policy Modelling Program, UNSW Sydney**

# Overview

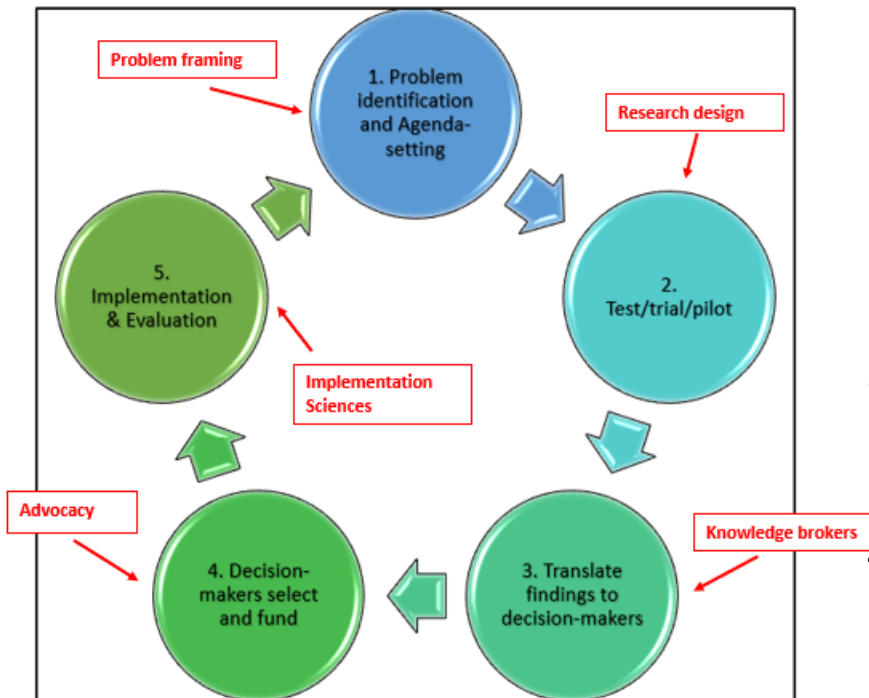
---

- Choices:
  - What are the policy challenges (eg stigma and discrimination, drug laws etc)?
  - What's wrong with our view of policy-making?
- 20 minutes
- Have chosen the second option!
- Start with the virtuous policy cycle....

# The virtuous policy cycle



# What we know about the parts of the policy cycle



## 1. Problem identification & agenda setting

- Problem framing
- Create agenda

## 2. Test/trial/pilot

- Empirical methods
- Research co-design

## 3. Translation

- Knowledge brokers
- Evidence synthesis; dialogue methods

## 4. Decision-makers

- Advocacy; “killer graph”
- Political influence

## 5. Implementation

- Implementation Sciences
- Barriers & enablers; settings and context

### Examples:

- HCV test and treat
- COVID-19 vaccines
- New opioid assisted treatments (eg long acting injectables)



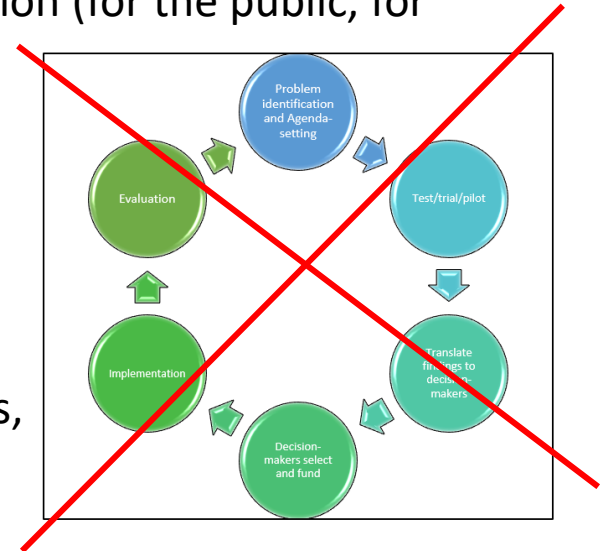
# Drug policy....

---

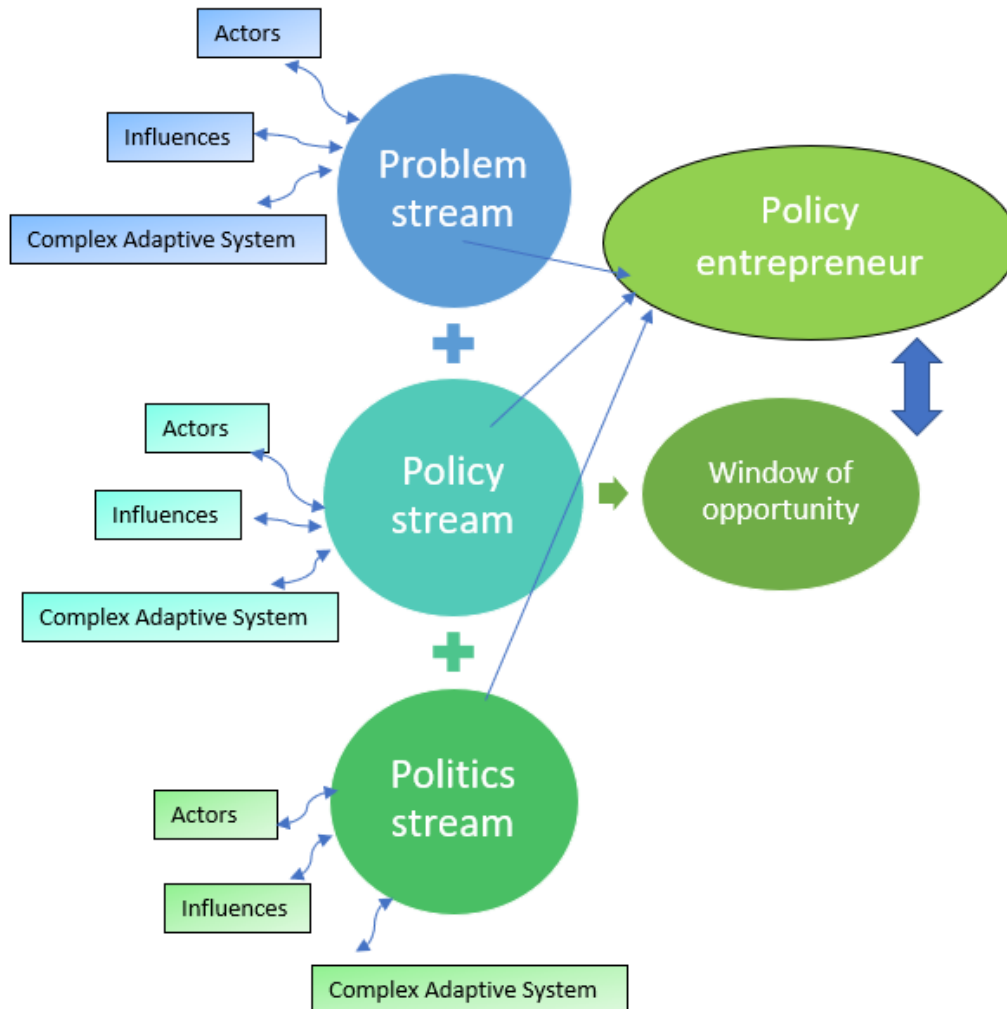
- Problem identification
  - Can't agree on problem, no shared goals
- Test/trial/pilot
  - Most methods not suitable for policy (eg RCTs), poor data
- Translation
  - Evidence not so clear
  - Killer graphs largely missing
- Decision-making
  - Stigma, discrimination
  - No shared goals
- Implementation
  - Complex implementation environments
- BUT, more importantly the virtuous policy cycle is not a good depiction of policy processes....

# What's wrong with it

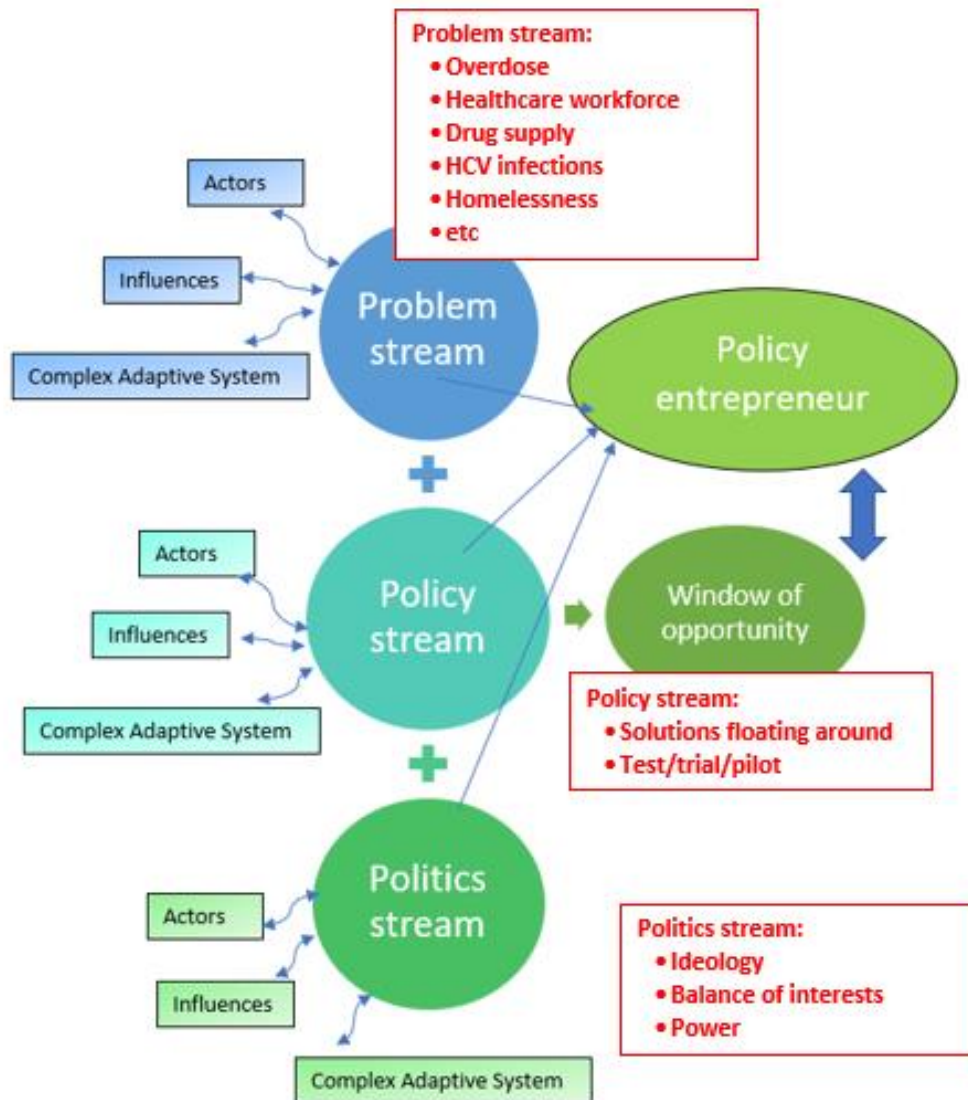
- Assumes a technical-rational model of policy making
- Virtuous cycle appeals because it is a reassuring description (for the public, for politicians, for researchers)
  - Policy as a form of official problem-solving
- Fails to account for the (vast) theory on policy processes (political science, public policy)
- Misses the dynamic iterative interactions between actors, ideas, institutions, and networks of policy advocates
- Values are not surfaced
- Overvalues/privileges research and evidence, and under-appreciates policy problems and solutions as constructions



## It looks a little bit more like this....



- Three streams, operate independently
- Each are complex adaptive systems (of their own)
- Policy reform happens when a window of opportunity opens
- Requires a policy entrepreneur, whose task is to match problem and solution, with politics of the day



Example: crystal methamphetamine policy

Problem = 1. harms from crystal meth use in marginalised pop; or 2. population prevalence of use

Solutions = 1. harm reduction/treatment; 2. policing

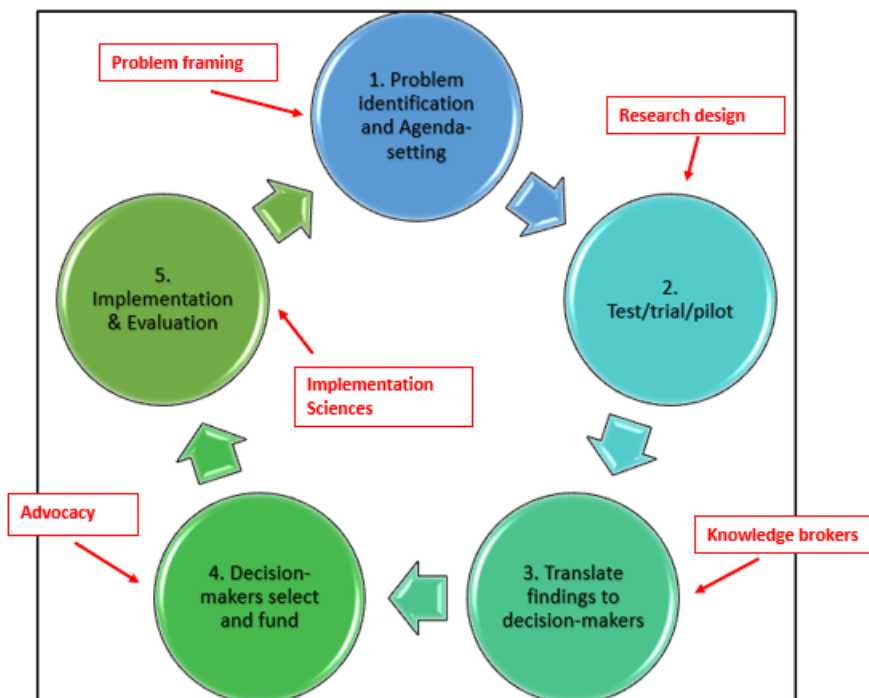
Politics = law and order

Policy result = supply reduction/law enforcement (problem selected was pop use, solution selected was policing)

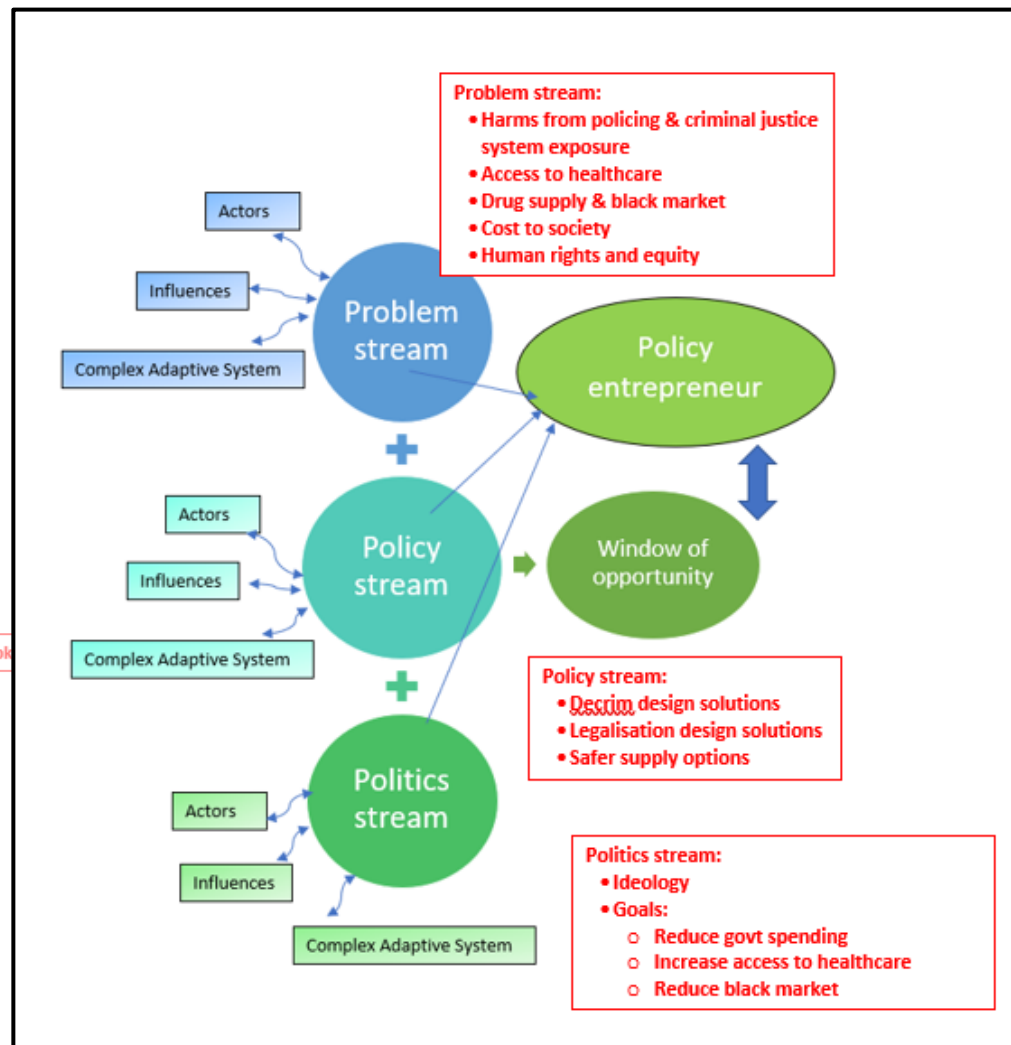
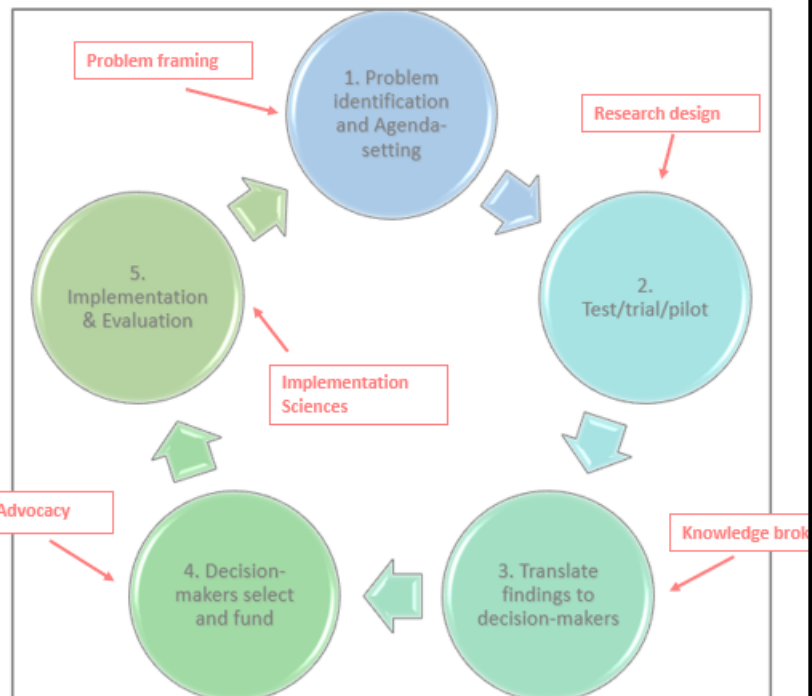
(Why knowledge brokers don't work)



# Example of drug law reform



# Example of drug law reform



# Conclusions

---

- Policy making is rarely a technical rational process, governed by the virtuous policy cycle
- Policy making is messy, creative, relies on timeliness (windows)
- The process of finding and selecting the problem and matching it to a solution is an active one
- We need policy entrepreneurs
- Goals and values.....
- We need value-led policy dialogue (as much as we desire an evidence-led dialogue)

# Thank you

---

Professor Alison Ritter  
Drug Policy Modelling Program, Director  
Social Policy Research Centre  
UNSW, Sydney, NSW, 2052, Australia  
E: [alison.ritter@unsw.edu.au](mailto:alison.ritter@unsw.edu.au)  
T: + 61 (2) 9385 0236



Book

## Drug Policy

*By Alison Ritter*

Edition	1st Edition
First Published	2021
eBook Published	30 November 2021
Pub. Location	London
Imprint	Routledge
DOI	<a href="https://doi.org/10.4324/9781003224501">https://doi.org/10.4324/9781003224501</a>
Pages	188
eBook ISBN	9781003224501

# References

---

- Althaus et al. (2007) *The Australian Policy Handbook* (4<sup>th</sup> Ed). Sydney: Allen & Unwin
- Bornbaum, C. C., Kornas, K., Peirson, L., & Rosella, L. C. (2015). Exploring the function and effectiveness of knowledge brokers as facilitators of knowledge translation in health-related settings: a systematic review and thematic analysis. *Implementation Science*, 10(1), 162. doi:10.1186/s13012-015-0351-9
- Cairney, P., & Oliver, K. (2020). How should academics engage in policymaking to achieve impact? *Political Studies Review*, 18, 228-244. doi:10.1177/1478929918807714
- Kingdon, T. (2003). *Agendas, Alternatives, and Public Policy* (2nd ed.). New York: Longman.
- Lancaster, K., & Ritter, A. (2014a). Examining the construction and representation of drugs as a policy problem in Australia's National Drug Strategy documents 1985 to 2010. *International Journal of Drug Policy*, 25(1), 81-87. doi:10.1016/j.drugpo.2013.07.002
- Lomas, J. (2007). The in-between world of knowledge brokering. *BMJ*, 334(7585), 129-132. doi:10.1136/bmj.39038.593380.AE
- Ritter, A., Lancaster, K., & Diprose, R. (2018). Improving drug policy: The potential of broader democratic participation. *International Journal of Drug Policy*, 55, 1-7. doi:10.1016/j.drugpo.2018.01.016
- Ritter, A. (2015). The privileged role of researchers in 'evidence-based' policy: Implications and engagement of other voices. *Drug and Alcohol Today*, 15(4), 181-191.
- Ritter, A., & Lancaster, K. (2013). Illicit drugs, policing and the evidence-based policy paradigm. *Evidence & Policy*, 9(4), 457-472. doi:10.1332/174426413x662662
- Stevens, A., & Ritter, A. (2013). Editorial: How can and do empirical studies influence drug policies? Narratives and complexity in the use of evidence in policy making. *Drugs: Education, Prevention and Policy*, 20(3), 169-174. doi:10.3109/09687637.2013.793892