Drugs and Alcohol Today

The privileged role of researchers in "evidence-based" policy: implications and engagement of other voices
Alison Ritter

Article information:

Users who downloaded this article also downloaded:

For Authors

About Emerald www.emeraldinsight.com

The privileged role of researchers in "evidence-based" policy: implications and engagement of other voices

Alison Ritter

Professor Alison Ritter is based at Drug Policy Modelling Program, University of New South Wales, Sydney, Australia.

Abstract

Purpose – *This paper starts from the familiar premise of evidence-based policy, and examines the active role that researchers play in policy development processes. The interactive nature of much research translation immediately suggests the need to consider the dynamic way in which problems come to be understood, which is explored in this paper. Furthermore, the integration of research knowledge with the knowledges of "ordinary" citizens is a key challenge. The paper aims to discuss these issues.*

Design/methodology/approach – *This paper represents a synthesis of recent studies conducted by the author and her colleagues along with other drug policy literature.*

Findings – *The interactive and dialogic processes that researchers engage with, whether as knowledge brokers or participants in elite policy development forums, have implications for how policy problems (and solutions) come to be constituted. Four perspectives and theoretical approaches are briefly outlined: research design; policy processes; problematization; and critical social sciences analyses. These offer different ways of seeing, understanding and analyzing the relationship between problems, policy solutions and the policy processes. Yet all have lessons for the ways in which research evidence and researchers constitute policy. This needs to sit alongside the role of other drug policy stakeholders – notably the "ordinary" citizen. It is argued that the elite role of research can be tempered with engagement of ordinary citizens. While it can be challenging to reconcile general public views about drugs with the evidence-base, deliberative democracy approaches may hold some promise.*

Originality/value – *This paper draws together a number of central themes for drug policy processes research: where the evidence-based policy paradigm intersects with participatory democracy; how problems are constituted; and the privileged role of research and researchers.*

Keywords *Public opinion, Evidence-based policy, Democracy, Policy processes, Problematization, STS*

Paper type *Research paper*

Introduction

Since the late 1990's, the evidence-based policy paradigm (Bowen and Zwi, 2005; Lin and Gibson, 2003; Nutley *et al.*, 2007) has provided a framework for considering the ways in which research findings can influence policy decision making such that better, more effective public policies are implemented. It is founded in the medical evidence-based practice movement – clinicians achieve better outcomes when the interventions they provide are grounded in an evidence-base (Bero *et al.*, 1998; Grimshaw *et al.*, 2012). Evidence-based policy has much to be applauded: it strives for a technical-rational approach to policy making, which may be particularly welcome in areas with moral potency, such as illicit drugs policy. It acknowledges the many ways in which research can be used in the policy-making process (e.g. Weiss, 1977, 1979), and in most writings is at least alert to the challenges of policy processes. The focus is on the

researcher – the ways in which the researcher can be a better translator or disseminator of evidence. The extensive literature on "bridging the know-do gap," knowledge translation, technology transfer and dissemination are replete with strategies and examples of how to enhance the likelihood that research is taken up within policy (e.g. Campbell *et al.*, 2009; Cherney *et al.*, 2012; Oliver *et al.*, 2014). To date, however, there has been little systematic investigation into what forms of translation into policy are most effective. In a review of the effectiveness policy knowledge translation strategies Moore *et al.* (2011) located 106 papers of relevance, of which 59 were descriptive, 42 conceptual and only five were intervention studies. And most of the intervention studies found marginal or non-significant results. It appears that the call for policy knowledge translation has yet to be complemented with a parallel evidence-base regarding those strategies.

One of the frequent criticisms of the evidence-based policy paradigm is its failure to account for the dynamic policy processes, and the multiple, oft-times conflicting influences on policy, from a wide range of stakeholders. This paper examines the role of researchers as one active voice in policy-making processes, and the highly interactive nature of those roles, as knowledge brokers, or participants in roundtables or summits. Furthermore, there are different ways in which researchers engage with a policy problem: variously how researchers come to define, or represent, or construct or constitute the policy problem. These four perspectives shed light on the active role of researchers. Rather than passive purveyors of knowledge (or "truth") researchers are active in shaping both solutions and the ways in which the problem comes to be understood. Thus researchers are privileged – in the valorization of evidence and knowledge itself; in the elite participation in policy processes and relations; and in the construction of the problem. How this then intersects with the other voices within policy landscapes and our notions of democracy command attention.

Knowledge brokers, elite participants

In the evidence-based policy paradigm, researchers function as knowledge brokers. "Knowledge brokers" are those people who provide the bridge between the knowledge (or research evidence) and the decision makers. Lomas (2007) defines knowledge brokerage as "all the activity that links decision makers with researchers, facilitating their interaction" (Lomas, 2007). As an ongoing dialogue between researchers and decision makers, the knowledge-broker model provides the opportunity for both specific collaborative research and ongoing interactions across content domains (Ward *et al.*, 2012). Knowledge brokers require a set of specific attributes: entrepreneurial (networking, problem-solving, innovating), a trusted and credible reputation, clear communications skills, and to be culturally astute. The activities of knowledge brokers are diverse, including the formal transmission of research findings to decision makers in briefings, summary reports as well as submissions to government and parliamentary enquiries, participation in committees and informal dialogue. Being accessible and available appears to be a key feature (Ritter, 2009).

Interactive or relational aspects are common in knowledge brokerage. This is perhaps best demonstrated in participatory dialogue policy processes such as "roundtables." Roundtables are a common mechanism for bringing together researchers and other opinion leaders to discuss and develop policy options. "Roundtables" have been demonstrated as highly valued in the policy-making process (ANSZOG, 2007). Roundtables aim to bring together a diverse group of people to reflect multiple perspectives. They are highly interactive and aim to provide a safe place, with a neutral facilitator, and the application of Chattam House rules. In Australia, policy makers nominated roundtables as the preferred mechanism of knowledge translation (ANSZOG, 2007).

Roundtables are commonly deployed in drug policy. For example, policy developments in relation to "recovery" have used roundtable mechanisms in both the UK and Australia (ANCD, 2012; UKDPC, 2008). In the UK it was called a "consensus group" (and comprised 16 people), and in Australia a "roundtable" (and comprised 18 people). In both cases, researchers were represented, along with practitioners, professional organizations, advocacy groups and consumers. Multiple perspectives were thus encouraged, although this is tempered with the

small number of participants. Consumer representatives were involved in both meetings, but it is unclear how the diversity of lived experience of people who use drugs and consumers of drug treatment fed into these processes, and how the value of their contributions was weighed against that of scientific accounts. As we noted in our analysis of these two dialogue processes (Lancaster *et al.*, 2015), the authority of the resultant policy documents rested in the authority vested in the commissioning organizations (the UK Drug Policy Commission and the Australian National Council on Drugs) and "their status as independent, apolitical bodies providing 'evidence-based' advice" (Lancaster *et al.*, 2015, p. 617). The overall framework for these roundtables was within the evidence-based policy paradigm and the authorizing processes which privilege "evidence."

Given such dynamic, relational processes where researchers are active agents, such as knowledge brokers, or as participants to roundtables and other policy dialogue processes, it is essential to consider how researchers bring assumptions and worldviews to the policy process. Hoppe (2010) notes that the focus in policy making is concentrated on the solutions or options part of the process, rather than problem identification and problem representation. There appears to be a natural fit then – if policy focusses on solutions and options, then researchers have a particular role to play in deriving, testing and evaluating the options and solutions (both pre-implementation and post-implementation). However, problem identification and the ways in which the problem is understood have significant bearing on the options considered. Given the notion that researchers are privileged in various ways, critical examination of the constitution of problems by researchers is vital.

Defining, selecting, representing, constructing or constituting the problem

Research and researchers are active in the ways in which drug problems come to be defined, framed, selected, represented, constructed or constituted. Each of these different words ("defined, framed, selected, represented, constructed, constituted") stands for, and is used with reference to particular theories or approaches to understanding the dynamic ways in which problems come to the fore, or indeed come to be. Any single research study generates a particular understanding of a problem, facilitating a definition or frame (the research design approach). Extending this to the ways in which problems come to be selected and represented can be seen in the models of policy processes. Going a step further, critical social science approaches consider the ways in which drug problems are actively constituted. Brief descriptions of these different approaches follow.

At its most simple, the research design itself shapes the understanding of the policy problem (and potential solutions). Researchers are active in selecting the questions that get asked, as opposed to those that are not asked; the choice of outcome measures; and the approach to data analysis, whether quantitative or qualitative. Together these research design choices create a body of knowledge around policy problems that can often be taken for granted as existing independently from the research process.

Examining problem construction from within a policy processes model reveals another angle to problem construction: as Kingdon (2003) has articulated, policy comes into being as a result of a simultaneous concordance between the problem stream, the policy stream and the politics stream. Within this active, fluid process possible solutions arising from the policy stream need to be matched with a "problem" from the problem stream. Our analysis of Australian policy for crystal methamphetamine, and the way in which the problem of crystal methamphetamine comes to be defined and selected (whether as a new drug with uptake by previously non-drug using young people, or as a drug which has emerged within the existing injecting drug using population) can influence the ways in which solutions are seen as possible, applicable and acceptable (Lancaster *et al.*, 2014a). It is the coupling of the predominant policy solution (in this example law enforcement responses) with the prevailing politics (a conservative government) which comes to be appropriately matched with a problem definition (widespread methamphetamine use) (Lancaster *et al.*, 2014a). Here the problem arises out of the policy processes as described by Kingdon, where the policy solutions and politics need to match a problem definition.

A third way of considering problem constitution is through the lens of governmentality (following Foucault) and the work of Bacchi on "problematisation" (Bacchi, 2009, 2015). This approach takes us a step further to examine the underlying, often hidden problematizations within policy. As Bacchi notes "The ways in which issues are problematized – how they are produced or constituted as 'problems' – are central to governing processes" (Bacchi, 2015, p. 3). Application of this problematization approach in relation to the ways in which policies on "recovery" constitute the problem of drugs and the people who use them reveals a focus on dependence (rather than drug use *per se*), conditional citizenship and different ways of representing the person who uses drugs (Lancaster *et al.*, 2015).

Finally, researchers from critical social science have applied theorists such as Latour, Law, Stengers and others to analysis of the "collateral realities" created and sustained (made, produced and maintained) to constitute and keep the problem "stable" (Fraser *et al.*, 2014). From a Science and Technology Studies (STS) perspective, Fraser *et al.* (2014) argue that the collateral realities created by the scientific discourse on drugs produce the problem of addiction. They demonstrate this across three areas: methamphetamine, alcohol and obesity. The STS perspective has much more to say about the issues raised here than this brief summary.

Each of these four perspectives and theoretical approaches (research design; policy processes; problematizations; and critical social science analyses) offer different ways of seeing, understanding and analyzing the relationship between problems, policy solutions and the policy processes. This can be seen as a process of defining and selecting or one of constructing and constituting the problem. Yet all speak to and have lessons for the ways in which research evidence and researchers themselves actively constitute policy.

The potential contribution of these perspectives can be seen in a brief examination of policy responses to alcohol-related violence in Sydney, Australia. There was a critical incident in Sydney in July 2012 when an 18 year old man (Thomas Kelly) died in the night club district, as a result of a blow to the head (Lancaster *et al.*, 2012; Quilter, 2013). Taking the Kingdon (2003) approach, this could be seen as a policy window of opportunity where the policy solutions and politics need to match the problem. The problem could have been defined as one of alcohol consumption, public drunkenness and alcohol-related violence; it could have been defined as one of polydrug use; one of public safety; or one of hyper-masculinity in Australian male culture which may or may not have anything to do with alcohol consumption. How the problem comes to be specified varies depending on which stakeholder is proposing the solution. In this particular case, there were a number of parties engaged in the policy debate: for example the police who largely defined the problem as one of public disorder; politicians who largely defined the problem in terms of a binge drinking culture; the alcohol industry proposing that the problem should include illicit drugs (arguably shifting the process away from alcohol), and the alcohol research community who defined the problem as one of alcohol consumption more broadly (Lancaster *et al.*, 2012). The potential policy solutions depend on how the problem comes to be defined. Thus, one potential solution was more police resources to improve public safety; another solution was reduction in alcohol availability (through changes to closing times and lockout laws); another solution was interventions to reduce violence (aggression management). In this instance, the policy solution that rose to the surface and was implemented was largely focussed on a range of measures to increase alcohol controls in licensed venues (transport and public safety initiatives were also included) (NSW Government, 2013; Quilter, 2013). It does not matter that there may have been a poor match between the incident (the person killed had not been drinking, and the alcohol consumption of the offender was unknown at the time), nor that apparently neither of them had entered licensed venues.

From a problematization perspective (Bacchi, 2009), the policy problems and the corresponding solutions are "neither self-defining" nor "fixed and agreed upon" but rather constructed by discourse and participants within the process (Colebatch, 2010, p. 32). Bacchi (2009, p. xiii) argues that we need to "examine the problem representations that lodge within policies and policy proposals." Examining some of the specific policies which arose from the Kings Cross event can reveal insights into how the problem, and the people concerned, are constituted. For example, one policy response was new legislation (The Law Enforcement (Powers and Responsibilities) Amendment (Kings Cross and Railways Drug Detection) Act 2012

(NSW Government, 2012) which significantly expanded the capacity to use drug detection dogs to stop, search and detain individuals across the Kings Cross precinct. The assumption underlying this policy is that the problem is illicit drugs, and moreover consumption of illicit drugs rather than trafficking or wholesale distribution. Using Bacchi's approach, the policy responses also appear to have silenced issues around violence, notwithstanding some expert comments (Tomsen, 2012). Tellingly as at July 2013, none of the policy measures specifically addressed violence, with the arguable exception of enhanced CCTV coverage (NSW Government, 2013) for which the research evidence is very mixed (for example Cerezo, 2013; McLean et al., 2013). In these brief examples, analysis of the policy responses in Kings Cross from a problematization approach which analyses the policy solutions, reveals insights into taken-for-granted assumptions, what is silenced and the way in which policy produces and constitutes the problem and citizens (in this case, participants in the night time economy).

Irrespective of which of the above approaches is taken, the message for researchers is the same. Researchers occupy a privileged position in policy development – as knowledge brokers and experts called to advise on critical incidents such as the King Cross death. The ways in which the solutions are actively matched to, and force the shaping of the problem; or the subtle impacts of problem construction and representation that are contained within policy solutions are powerful. To be unaware of the role of values and fail to see all research as inherently political assumes that research deals with "truths" or "facts" that reside independently from the researchers who generate them and the political and social context within which they exist. As Bacchi exhorts (Bacchi, 2009), we should reflect on our own problematizations.

The argument thus far has focussed on the privileging of evidence as one type of knowledge, the highly interactive nature of policy processes, and the active role and associated responsibility that researchers have in policy development. There thus may be some comfort in being reminded that researchers are only one stakeholder to policy. The Kings Cross case example highlights other stakeholders, including law enforcement, the alcohol industry, interest groups and the "ordinary" citizen. Thomas Kelly's family became advocates, established a foundation and proposed a number of actions to reduce alcohol-related violence (Thomas Kelly Youth Foundation, 2013). Furthermore, as the valorization of science has increased, and the evidence-based policy paradigm is in full flight, we need to ask ourselves how we value knowledge other than traditional "scientific" knowledge, and how the voices of ordinary citizens can be meaningfully incorporated into policy processes.

The voices of other stakeholders – the "ordinary" citizen

There are multiple stakeholders and active voices within drug policy, including politicians, public servants, people who use drugs, community groups, industry, practitioners and other experts. In addition, the ordinary citizen or general public are a stakeholder to drug policy. The role of public opinion in policy formation has been well-documented (Burstein, 2003; Page and Shapiro, 1983) with potentially bi-directional effects (as a prelude to policy change, or as a consequence of policy change). Given the influences of public opinion, there is a need to consider how the general public are and can be engaged as a stakeholder in policy development processes. Indeed, there is a connection between the privileging of research evidence within policy processes as objective and independent, and the way in which the public and ordinary citizens are viewed. As Jasanoff eloquently states: "The practices of depoliticization that bound science off as an apolitical space often go hand in hand with the construction of lay publics as scientifically illiterate, and hence unfit to participate fully in governing societies in which scientific knowledge matters" (Jasanoff, 2013, p. 26).

Hoppe (2010) notes the concerns about the engagement of the ordinary citizen in policy making: "longstanding views on the capacity for informed, rational political judgement by the average voter or typical citizen are rather pessimistic" (p. 28). This arises from perceptions about the lack of skills in responsible political judgement and/or the complexity of modern policy making such that citizens "outsource" that role to elected officials (p. 28).

Illicit drugs policy needs to come to terms with the engagement of the ordinary citizen, however, complicated (and uncomfortable) that may be. For example, the Indonesian government recently

(April 29, 2015) executed two Australian men who were convicted of trafficking heroin (Andrew Chan and Muyran Sukumaran). The views of "ordinary" Australians have been diverse: while a significant number have expressed dismay and moral outrage at the death penalty (The Mercy Campaign, 2015), in early 2015 between 38 and 52 percent were in support of executions for drug trafficking (Lowy Institute, 2015; Roy Morgan Research Ltd, 2015). The extent of support depends on the poll, but demonstrates a diversity of views, and confronts the issue of engaging the views of "ordinary citizens" in policy development. Moral disagreement is highlighted in this example. There are likely to be other reasons for the lack of engagement with "ordinary citizens," including time, resources or political risks, but these have yet to be documented for illicit drugs policy. This is an important future research agenda.

The ordinary citizen includes people who consume drugs. Table I (taken from Lancaster et al., 2013) provides the percentage of Australians in support of three illicit drug policies: needle and syringe programs, regulated injecting rooms and legalization of heroin use. As can be seen, there is majority support for needle syringe programs (53 percent), and very low support for legalization of heroin (5.5 percent). The high "don't know" response suggests that for some in the community they have insufficient experience or exposure to the issues to form a view. This highlights the difference between citizens without and with direct experience of the policy issues (such as Thomas Kelly's family as noted earlier, or people who use drugs). We have argued that the opinions of people who use drugs are centrally important (Lancaster et al., 2014c) given that they are the direct subject of the policies and experience their effects directly. The views of people who inject drugs stand in contrast to those of the general population, as can be seen in Table I. The vast majority support needle syringe programs, and regulated injecting rooms and a majority support the legalization of heroin use. There are significant challenges in integrating a multiplicity of views and contrasting knowledge into policy.

Another challenge is the relationship between public opinion and research evidence – the views of ordinary citizens can conflict with research evidence. We observed this in our internet-based survey of young Australians attitudes toward alcohol and other drug policies (16 to 25 years of age, $n = 2,335$). Table II (taken from Lancaster et al., 2014b) shows the extent of support among this group to ten alcohol policies. As can be seen, young people oppose precisely those measures that alcohol policy research has shown to be most effective: increasing price, reducing outlets and reducing trading hours (Anderson and Baumberg, 2006; Anderson et al., 2009; Babor et al., 2003; Kypri and Langley, 2006). The disconnect between the opinions of young people and what research has shown to be effective policy responses calls into question how to balance the opinions and experiences of young people with the evidence-base to ensure policy responses are both effective and acceptable to the community most directly affected by these interventions.

Table I Opinions toward drug policy: general population and people who inject drugs		
Policy support for	General populations (NDSHS: n = 24,898)	People who inject drugs (IDRS: n = 839)
Needle and syringe programs		
Strongly support/support	53.0%	96.8%
Oppose/strongly oppose	12.8%	1.0%
Do not know enough to say	22.7%	1.8%
Regulated injecting rooms		
Strongly support/support	39.8%	80.5%
Oppose/strongly oppose	23.9%	8.6%
Do not know enough to say	22.7%	4.7%
Legalization of heroin use		
Strongly support/support	5.5%	54.9%
Oppose/strongly oppose	4.6%	33.1%
Do not know enough to say	81.9%	2.2%
Source: Lancaster et al. (2013)		

Table II	Young peoples views about alcohol policies				
		Support	Neither	Oppose	Do not know
Increasing the price of alcohol ($n = 2{,}326$)		16.9	11.8	70.5	0.8
Reducing the number of outlets that sell alcohol ($n = 2{,}319$)		19.6	14.3	65.6	0.6
Reducing trading hours for all pubs and clubs ($n = 2{,}315$)		18.4	12.1	68.7	0.8
Raising the legal drinking age ($n = 2{,}317$)		15.1	10.2	73.9	0.7
Stricter enforcement of the law against serving customers who are drunk ($n = 2{,}321$)		62.2	14.9	22.2	0.7
Banning alcohol sponsorship of sporting events ($n = 2{,}320$)		38.7	22.5	37.7	1.1
More severe legal penalties for drink driving ($n = 2{,}323$)		76.6	13.5	9.1	0.9
Limiting advertising for alcohol on TV until 9:30pm ($n = 2{,}318$)		55.5	23.1	20.3	1.1
Requiring information on national drinking guidelines on all alcohol containers ($n = 2{,}317$)		58.2	24.0	16.4	1.3
Increasing the size of standard drink labels on drink containers ($n = 2{,}314$)		54.4	29.5	14.2	1.9
Source: Lancaster et al. (2014b)					

Reconciling stakeholders: democracy?

As argued by Hoppe, it is the complex, unstructured problems, such as illicit drugs, that most call for deliberative democracy (as opposed to other forms of democracy, such as representative or procedural democracy – see Hoppe). Unstructured problems are characterized by low agreement on values and low certainty of knowledge – it is precisely these characteristics of illicit drugs policy that create fertile ground for engagement in deliberative democracy. This is most challenging, in light of the data provided (Tables I and II), and the example of the Bali Nine.

To take this challenge seriously entails working with participatory dialogue methods. Citizens' juries are one example of participatory dialogue processes which can integrate community views into policy development processes. This process of deliberative democracy involves a randomly selected but demographically representative panel of citizens, who are then provided with time and access to information such that they can deliberate and then form recommendations for action (McDonald et al., 2009; The Jefferson Center). In theory, a Citizens' Jury provides opportunity for the voice of everyday people, who then are enabled through information and dialogue to provide a deliberated and informed consensus view of the public policy issue at hand. A Citizens' Jury was one of the policy processes to emerge out of the Thomas Kelly incident (new Democracy Foundation, 2013).

Political theorists argue that interest in forms of deliberative democracy (including citizens juries) has emerged in response to the inherent social and economic inequalities within representative systems of government and the "widespread dissatisfaction with aspects of our contemporary political practices" (Smith and Wales, 2000, p. 51). Deliberative democracy in theory promotes legitimacy, trust and informed judgment through active participation and citizens' juries are designed to "approximate" this vision of citizen engagement by aiming to be "inclusive" if not strictly "representative" (Smith and Wales, 2000). However, as Smith and Wales (2000, p. 62) note, "[c]itizens' juries are not a panacea for all contemporary democracy's ills and need to be understood in a wider institutional and political context" (see Irvin and Stansbury, 2004).

Another way of thinking about democracy and stakeholder engagement is through the notion of "publics." Houberg and colleagues (Houborg and Frank, 2014; Houborg and Bjerge, 2015) draw on John Dewey's conception of "publics" as situational and particular, and describe the development of two different publics in relation to harm reduction services in Copenhagen. This analysis provides insights into how a monolithic notion of the "general public" is misplaced, and that particular policy development processes facilitate the emergence of different publics (with consequent policy implementation differences). Understanding which "publics" are

activated in any one policy process seems to offer promise for a more nuanced articulation of "democracy" and its processes.

The key difference between participatory and deliberative democracy approaches and the knowledge broker and dialogue processes, such as roundtables mentioned earlier is that the former privilege researchers and other opinion leaders. In the two recovery policy documents analyzed by Lancaster *et al.* (2015) the opinions were those of the invited stakeholders representing a range of practitioners, disciplines and perspectives (Lancaster *et al.*, 2015) yet they were a privileged few, known to the two organizations as opinion leaders or "specialised knowledge producers" (Lancaster *et al.*, 2015). The very nature of democracy is one where a multiplicity views are valued. We can encourage drug policy processes to engage with and embrace some of the deliberative democracy approaches, highlighting the interpersonal and interactive nature of these along with the need for openness, transparency and trust (Jasanoff, 2013).

Conclusions

The prevailing evidence-based policy paradigm facilitates and privileges research knowledge in the policy development process. Interactive and dialogic approaches, such as knowledge brokerage, have moved us beyond the passive knowledge translation and dissemination focus of earlier translation literature. Acknowledgement of the dynamic and interactive nature of such policy engagement brings with it understanding of researchers as active agents, rather than passive purveyors of knowledge. In this context, it can perhaps be easier to see the ways in which problems come to be defined, selected, represented or constituted and stabilised. Whether the analysis takes a policy processes approach (such as examining the active coupling of policy solutions with problems, Lancaster *et al.*, 2014a) or a critical social science approach (such as the ontological politics of Law, Fraser *et al.*, 2014) researchers have a responsibility to be mindful of this. The way in which the problem of illicit drugs comes to be constituted is not limited to researchers. All stakeholders constitute the problem.

The voices of "ordinary" citizens should be incorporated into policy making, and we require strategies and processes for doing this along with a commitment to such stakeholder engagement. The extent to which deliberative democratic processes are perceived to conflict with or undermine existing policy development processes, underpinned by the evidence-based policy paradigm and engagement of an elite, inclusive of researchers, remains to be seen. It is entirely plausible that the engagement with "ordinary" citizens including those directly affected by drug policies may enrich and enhance both the policy deliberations and policy implementation.

References

ANCD (2012), *1st Recovery Roundtable Report*, Australian National Council on Drugs, Canberra.

Anderson, P. and Baumberg, B. (2006), *Alcohol in Europe: A Public Health Perspective*, Institute of Alcohol Studies, London.

Anderson, P., Chisholm, D. and Fuhr, D.C. (2009), "Effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol", *The Lancet*, Vol. 373 No. 9682, pp. 2234-46.

ANSZOG (2007), "Enhancing ANZSOG's contribution to better government", available at: www.anzsog. edu.au/userfiles/files/Publications/ANZSOG_20071000_Enhancing_ANZSOGs_Contribution_to_Better_ Government.pdf (accessed November 2, 2015).

Babor, T., Caetano, R., Casswell, S., Edwards, G., Giesbrecht, N., Graham, K. and Rossow, I. (2003), *Alcohol: No Ordinary Commodity. Research and Public Policy*, Oxford University Press, New York, NY.

Bacchi, C. (2009), *Analysing Policy: What's The Problem Represented To Be?*, Pearson Education, Sydney.

Bacchi, C. (2015), "Problematizations in Alcohol Policy: WHO's 'Alcohol Problems'", *Contemporary Drug Problems*, Vol. 42 No. 2, pp. 130-47. doi: 10.1177/0091450915576116.

Bero, L.A., Grilli, R., Grimshaw, J.M., Harvey, E., Oxman, A.D. and Thomson, M.A. (1998), "Closing the gap between research and practice: an overview of systematic reviews of interventions to promote the implementation of research findings (Alison Ritter (post-GECAFS paper submission))", *British Medical Journal*, Vol. 317 No. 7156, pp. 465-8.

Bowen, S. and Zwi, A.B. (2005), "Pathways to 'evidence-informed' policy and practice: a framework for action (David McDonald (done))", *Public Library of Science – Medicine*, Vol. 2 No. 7, p. e166.

Burstein, P. (2003), "The impact of public opinion on public policy: a review and an Agenda", *Political Research Quarterly*, Vol. 56 No. 1, pp. 29-40.

Campbell, D.M., Redman, S., Jorm, L., Cooke, M., Zwi, A.B. and Rychetnik, L. (2009), "Increasing the use of evidence in health policy: practice and views of policy makers and researchers", *Australia and New Zealand Health Policy*, Vol. 6 No. 21, pp. 21.

Cerezo, A. (2013), "CCTV and crime displacement: a quasi-experimental evaluation", *European Journal of Criminology*, Vol. 10 No. 2, pp. 222-36. doi: 10.1177/1477370812468379.

Cherney, A., Head, B., Boreham, P., Povey, J. and Ferguson, M. (2012), "Perspectives of academic social scientists on knowledge transfer and research collaborations: a cross-sectional survey of Australian academics", *Evidence & Policy*, Vol. 8 No. 4, pp. 433-53.

Colebatch, H.K. (2010), "Giving accounts of policy work", in Colebatch, H.K., Hoppe, R. and Noordegraaf, M. (Eds), *Working for Policy*, Amsterdam University Press, Amsterdam, pp. 31-43.

Fraser, S., Moore, D. and Keane, H. (2014), *Habits: Remaking Addiction*, Palgrave MacMillan, Hampshire.

Grimshaw, J.M., Eccles, M.P., Lavis, J.N., Hill, L.S.J. and Squires, J.E. (2012), "Knowledge translation of research findings", *Implementation Science*, Vol. 7 No. 50, p. 50.

Hoppe, R. (2010), *The Governance of Problems*, The Policy Press, Bristol.

Houborg, E. and Bjerge, B. (2015), "Policy, drug consumption facilities and conviviality", paper presented at the ISSDP, Ghent.

Houborg, E. and Frank, V.A. (2014), "Drug consumption rooms and the role of governance and politics in policy processes", *International Journal of Drug Policy*, Vol. 25 No. 5, pp. 972-7.

Irvin, R.A. and Stansbury, J. (2004), "Citizen participation in decision making: is it worth the effort?", *Public Administration Review*, Vol. 64 No. 1, pp. 55-65. doi: 10.1111/j.1540-6210.2004.00346.x.

Jasanoff, S. (2013), "The politics of public reason", in Baert, P. and Rubio, F.D. (Eds), *The Politics of Knowledge*, Taylor and Francis, Hoboken, NJ, pp. 11-32.

Kingdon, J. (2003), *Agendas, Alternatives, and Public Policy*, 2nd ed., Longman, New York, NY.

Kypri, K. and Langley, J. (2006), "Splitting the alcohol purchase age: Gambling with youth health", *Drug and Alcohol Review*, Vol. 25 No. 4, pp. 293-95.

Lancaster, K., Duke, K. and Ritter, A. (2015), "Producing the 'problem of drugs': a cross national-comparison of 'recovery' discourse in two Australian and British reports", *International Journal of Drug Policy*, Vol. 26 No. 7, pp. 617-25.

Lancaster, K., Hughes, C.E., Chalmers, J. and Ritter, A. (2012), "More than problem-solving: critical reflections on the 'problematisation' of alcohol-related violence in Kings Cross", *Drug and Alcohol Review*, Vol. 31 No. 7, pp. 925-7. doi: 10.1111/j.1465-3362.2012.00516.x.

Lancaster, K., Ritter, A. and Stafford, A. (2013), "Public opinion and drug policy in Australia: engaging the 'affected community'", *Drug and Alcohol Review*, Vol. 32 No. 1, pp. 60-6.

Lancaster, K., Ritter, A. and Colebatch, H. (2014a), "Problems, policy and politics: making sense of Australia's 'ice epidemic'", *Policy Studies*, Vol. 35 No. 2, pp. 147-71.

Lancaster, K., Ritter, A. and Matthew-Simmons, F. (2014b), *Young People's Opinions about Alcohol and Other Drug Policy*, Australian National Council on Drugs, Canberra.

Lancaster, K., Sutherland, R. and Ritter, A. (2014c), "Examining the opinions of people who use drugs towards drug policy in Australia", *Drugs: Education, Prevention and Policy*, Vol. 21 No. 2, pp. 93-101. doi: 10.3109/09687637.2013.838211.

Lin, V. and Gibson, B. (Eds) (2003), *Evidence-Based Health Policy: Problems and Possibilities*, Oxford University Press, Melbourne.

Lomas, J. (2007), "The in-between world of knowledge brokering", *BMJ*, Vol. 334 No. 7585, pp. 129-32.

Lowy Institute (2015), "New Lowy Insitute poll finds that 62% of Australians oppose the execution of Andrew Chan and Myuran Sukumaran", available at: www.lowyinterpreter.org/post/2015/02/16/New-Lowy-Institute-Poll-62-Australians-oppose-execution-of-Chan-and-Sukumaran.aspx?COLLCC=4057150653&COLLCC=4115000431& (accessed November 2, 2015).

McDonald, D., Bammer, G. and Deane, P. (2009), *Research Integration Using Dialogue Methods*, ANU E-Press, Canberra.

McLean, S.J., Worden, R.E. and Kim, M. (2013), "Here's looking at you: an evaluation of public cctv cameras and their effects on crime and disorder", *Criminal Justice Review*, Vol. 38 No. 3, pp. 303-34. doi: 10.1177/0734016813492415.

Moore, G., Redman, S., Haines, M. and Todd, A. (2011), "What works to increase the use of research in population health policy and programme: a review", *Evidence and Policy*, Vol. 7 No. 3, pp. 277-305.

NewDemocracy Foundation (2013), "City of Sydney – safe & vibrant nightlife", September 17, available at: www.newdemocracy.com.au/achievements/item/149-city-of-sydney-safe-vibrant-nightlife (accessed October 24, 2013).

Law Enforcement (Powers and Responsibilities) Amendment (Kings Cross and Railways Drug Detection) Act 2012 (NSW Government) (2012).

NSW Government (2013), *Nsw Government Update On The Response To Issues In Kings Cross*, NSW Government, Sydney.

Nutley, S., Walter, I. and Davies, H.T.O. (2007), *Using Evidence: How Research Can Inform Public Services*, The Policy Press, Bristol.

Oliver, K., Innvar, S., Lorenc, T., Woodman, J. and Thomas, J. (2014), "A systematic review of barriers to and facilitators of the use of evidence by policymakers", *BMC Health Services Research*, Vol. 14 No. 1, p. 2.

Page, B.I. and Shapiro, R.Y. (1983), "Effects of public opinion on policy", *The American Political Science Review*, Vol. 77 No. 1, pp. 175-90.

Quilter, J.A. (2013), "Responses to the death of Thomas Kelly: taking populism seriously", *Current Issues in Criminal Justice*, Vol. 24 No. 3, pp. 439-48.

Ritter, A. (2009), "How do drug policy makers access research evidence", *International Journal of Drug Policy*, Vol. 20 No. 1, pp. 70-5.

Roy Morgan Research Ltd (2015), "Australians think Andrew Chan & Myuran Sukumaran should be executed", Article No. 6044, available at: www.roymorgan.com/findings/6044-executions-andrew-chan-myuran-sukumaran-january-2015-201501270609 (accessed November 2, 2015).

Smith, G. and Wales, C. (2000), "Citizens' juries and deliberative democracy", *Political Studies*, Vol. 48 No. 1, pp. 51-65. doi: 10.1111/1467-9248.00250.

The Mercy Campaign (2015), "The Mercy Campaign", http://en.wikipedia.org/wiki/Mercy_Campaign (accessed June 7, 2015).

Thomas Kelly Youth Foundation (2013), "Take action", available at: http://thomaskellyyouthfoundation.org.au/take-action/ (accessed October 4, 2013).

Tomsen, S. (2012), "Blame it on the booze: mass drinking drives Sydney's violence", *The Conversation*, available at: http://theconversation.com/blame-it-on-the-booze-mass-drinking-drives-sydneys-violence-8385 (accessed October 30, 2013).

UKDPC (2008), *The UK Drug Policy Commission Recovery Consensus Group: A vision of recovery*, UK Drug Policy Commission, London.

Ward, V., Smith, S., House, A. and Hamer, S. (2012), "Exploring knowledge exchange: a useful framework for practice and policy", *Social Science & Medicine*, Vol. 74 No. 3, pp. 297-304. doi: http://dx.doi.org/10.1016/j.socscimed.2011.09.021.

Weiss, C.H. (1979), "The many meanings of research utilization", *Public Administration Review*, Vol. 39 No. 5, pp. 426-31.

Weiss, C.H. (Ed.) (1977), *Using Social Research in Public Policy Making*, Lexington Books, Lexington, MA.

Further reading

The Jefferson Center (2013), "The Jefferson Center", available at: http://jefferson-center.org/ (accessed October 24, 2013).

Corresponding author

Professor Alison Ritter can be contacted at: alison.ritter@unsw.edu.au