Problems, policy and politics: making sense of Australia’s ‘ice epidemic’

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Funded by the Colonial Foundation Trust
The ‘ice epidemic’

- Late 1990s to late 2000s: escalating concern in Australia regarding methamphetamine
- Emergence of new, higher purity forms of methamphetamine (‘ice’) in the domestic illicit drug market prompted considerable alarm
- Media outlets reported that Australia was in the grip of an ‘ice epidemic’
- Captured the attention of policy-makers
- May 2008 - Ministerial Council on Drug Strategy (MCDS) endorsed the National Amphetamine-Type Stimulant (ATS) Strategy which aimed to “reduce the availability and demand for illicit amphetamine-type stimulants and prevent use and harms across the Australian community”
The dominant policy paradigm?

- The ‘ice epidemic’ could be squeezed into dominant paradigm of policy making
- Dominant policy paradigm: linear process of authoritative problem solving
- E.g. Bridgman and Davis’ ‘policy cycle’ (2007) adhere to this paradigm:
  Policy making as a rational and coherent, step-by-step process by which governments solve defined problems

But...

- Misleading as it denies the messiness, ambiguity and complexity of the policy making process in the real-world (Everett, 2003)
- Limits discussion of alternative perspectives (Colebatch, 2005, 2006)
- Arguably more pertinent re complex and controversial policy domains e.g. illicit drug policy/‘wicked problems’ (Rittel & Webber, 1973)

- The question:
  How can we more critically make sense of this process?
Policy processes: Kingdon’s ‘multiple streams’

- Alternative perspectives suggested:
  Policy making as an ongoing, complex set of interactions amongst multiple players, often with competing objectives (e.g. Cohen, March, & Olsen, 1972; Haas, 1992; Heclo, 1974; Hoppe, 2010; Sabatier, 1988, 1991)

- Kingdon (2003) conceptualises ‘multiple ‘streams’ through which participants may influence the policy process:
  
  **Problem stream:** issues come to the attention of people in and around government
  
  **Policy stream:** a “policy primeval soup” where ideas and solutions are formed, developed, rejected and selected
  
  **Political stream:** public opinion, election results, and the demands of interest groups in the political environment

  ‘Coupling’, ‘policy windows’ and ‘policy entrepreneurs’
Aims

- 1) To describe the emergence of methamphetamine as a policy issue in Australia from the late-1990s to the late-2000s as the foundation of our case study

- 2) To apply Kingdon’s ‘multiple streams’ theory as a framework to examine the policy development process in this case study, analysing how the methamphetamine issue came to be defined as a problem, the proposed policy solutions and the political context, identifying the possible coupling of these streams and the notions of ‘policy entrepreneurs’ and ‘open policy windows’

- 3) Through this analysis, we aim to critically consider to what extent Kingdon’s model offers a useful explanation of the drug policy process

We do so with a view to better understanding the process and context of drug policy development, with a particular interest in the implications for evidence-informed policy and practice.
Methods

- Sources were selected to allow for specification of a variety of policy knowledge: by reference to the Australian (Illicit) Drug Policy Timeline: 1985-2011 (Hughes, 2011) and the summit papers produced by the National Leadership Forum on Ice, 2006

- Published academic papers, grey literature, government reports, policy announcements and media sources which were referred to in the Timeline as key events or referenced in the summit papers were retrieved (sample period 1996 to 2009)

- All documents and sources were collated and a timeline of events was constructed

- Kingdon’s ‘multiple streams’ approach was then used to analyse the timeline: source documents were classified as a source of policy knowledge, categorised within the problem, policy or politics streams

  Kingdon’s theory applied to the timeline, examining the development of methamphetamine policy in each of the three streams and also looking for the coupling of the streams, the presence of policy entrepreneurs and the emergence of policy windows
Timeline of events: ‘ice epidemic’

Late-1990s to early-2000s:

1996: Federal election: beginning of ‘the Howard Years’
1997: Drug policy focus on heroin; Howard overturns ACT heroin trial;
   ‘Tough on Drugs’ (departure from emphasis on ‘harm minimisation’)
1996-2002: Law enforcement agencies detect increasing domestic production of
   methamphetamine (clan labs); and increased importation
2002: Federal government establish the National Precursor Working Group ($5.4m)
2002: Topp et al. Illicit Drug Reporting System (IDRS) tracks emergence of potent
   forms of methamphetamine amongst Sydney’s IDU;
   Note no clear response available through treatment services (geared towards
   opioid treatment)
2001: Small substitution treatment pilot studies conducted (Shearer, et al., 2001).
Timeline of events: ‘ice epidemic cont.

Mid-2000s:

  ↑ supply and use of methamphetamine from the mid- to late-1990s
  ↑ presentations for methamphetamine-related harms
2005: Estimated 72,700 Australians were dependent (McKetin, et al., 2005)
2005: Parliamentary Joint Committee on the Australian Crime Commission (ACC) initiated an inquiry into Amphetamines and Other Synthetic Drugs
2006: ↑ Media attention -“terrifying” “ice epidemic”, Australia’s “greatest scourge”, Australia risked “losing a generation to the drug”
  ABC’s Four Corners ‘Ice Age’ investigation
2006: State and territories begin to pursue their own policy solutions
  e.g. NSW ban the sale, supply and display of water and ice pipes; $600,000 in funding to pilot two methamphetamine clinics in Sydney and Newcastle
2006: Ministerial Council on Drug Strategy (MCDS) endorsed the development of a National Amphetamine-Type Stimulant (ATS) Strategy
2006: Parliamentary Secretary for Health: “ice is now our number one target in the war on drugs”
Timeline of events: ‘ice epidemic’ cont.

Late-2006 to 2007:

2006: NSW Premier Iemma called for a national leadership summit: ‘National Leadership Forum on Ice’: brought together key experts from research, health and law enforcement; local and global trends in use, drug trafficking, domestic supply; prevention responses, treatment and other support responses. Focus on ‘ice’ specifically.

2007: Australian National Council on Drugs (ANCD): position paper (22 recommendations)
   Priority (1) treatment for methamphetamine dependence; (2) prevention;
   (3) Collaborative, coordinated national law enforcement responses

2007: Federal government committed significant budget resources to the ‘ice epidemic’:
   $37.9 million to law enforcement;
   $1.1 million to the National Strategy to Prevent the Diversion of Precursor Chemicals;
   $22.9 million through the Amphetamine-Type Stimulant Treatment Grants Program;
   $9.2 million to expand the National Drugs Campaign to include a focus on ice.

2007: National roll-out of Project STOP (online, real-time recording of pseudoephedrine sales)

2007: Public opinion shifting - 16.4% NDSHS said methamphetamine most associated with a ‘drug problem’

2007: Kevin Rudd led the Australian Labor Party to victory over the Howard Coalition
Timeline of events: ‘ice epidemic’ cont.

2008 and beyond:

2008: Report released: (Degenhardt, et al., 2008)

↑importation and domestic manufacture of methamphetamine from 1998 to 2006,

but at a population level methamphetamine use had not increased dramatically from 1993 to 2004;

Greater use and harms were largely concentrated amongst heavy, high-risk users

2008: ‘Guide for Frontline Workers’: “no medications have yet proven to be more effective than others in treatment” but “psychosocial treatments, especially CBT, should be a standard intervention in methamphetamine treatment" (Jenner & Lee, 2008)

2008: The Ministerial Council on Drug Strategy (MCDS) endorsed the first National Amphetamine-Type Stimulant (ATS) Strategy: emphasised the “knowledge gaps”

Beyond....

2009: No evaluation or renewal of the National ATS Strategy; some small amounts of recurrent funding allocated (e.g. $1m to National Precursor Strategy); some treatment initiatives (e.g. “Meth website” helping methamphetamine users self-manage some of the most common methamphetamine related issues, run by Turning Point)
Kingdon’s multiple streams

Problem stream:

2 problem definitions emerged:

1) Researchers: harms were largely concentrated around heavy, high-risk users

2) Four Corners/Media: the ‘ice epidemic’/‘crisis’/ ‘a generation lost’

Interpretation of indicators: “The data do not speak for themselves”
Kingdon’s multiple streams cont.

Policy stream:

‘Policy primeval soup’

e.g.
- Banning glass ice pipes
- Precursor regulation and Project STOP
- Treatment: CBT; methamphetamine clinic pilots; pharmacotherapy/substitution
- Social marketing campaigns

‘Natural selection’ - dynamics internal to the Policy Stream
Not all solutions were available, viable, worked through and ready to go
Kingdon’s multiple streams cont.

Political stream:

- National mood
  Political atmosphere in Australia in the early 2000s characterised by a ‘war on terror’ and unknown enemies; ‘Tough on Drugs’ and ‘drug war’ rhetoric from political leaders and media resonated

- Partisan political ideology
  ‘Ice epidemic’ emerged in the context of a shift towards a zero tolerance drug policy framework; aligned with the prevailing politics of Howard’s ‘Tough on Drugs’

- Changes of administration
  2007 change of government
  New Rudd Labor Government was focussed less on some of the issues that had consumed the Howard Government (such as the ‘Tough on Drugs’ policy framework) and more focussed on other policy reform agendas such as employment conditions and climate change
‘Coupling’

- ‘Policy window’ opened in the problem and politics streams: Ice epidemic ‘crisis’ created by the media; and the impending state and federal elections

- Neither the political events nor the emergence of a pressing problem specifies what is to be done; they open windows for advocates to push for specific ideas (from policy stream)

- ‘Coupling’ - Three streams came together at the National Leadership Forum on Ice in 2006. Drew together representatives from across the three streams (law enforcement, treatment sectors, researchers, politicians and policy makers) The Forum created an opportunity for entrepreneurs to define problems and push solutions
What happened?

National Amphetamine Type (ATS) Strategy (2008) reflects the timing of methamphetamine being fixed upon the decision agenda, and the confluence of policy knowledge across the three streams.

The ATS Strategy is reflective of the importance of the ‘available alternative’ in coupling solutions to problems.
   Policy solutions across all ‘four pillars’ were not ready and waiting in the ‘policy primeval soup’
   e.g. Treatment: focus on pharmacotherapy maintenance treatment, perhaps misguided?

Supply control interventions (such as Project STOP) were viable and ready to be implemented, while treatment options were still being worked through.

Proposed solution: Coordinated national responses to precursor regulation
   - politically feasible (in the context of the Howard era and ‘Tough on Drugs’ policy),
   - a fit with the national mood (in the context of increases in policing powers post-September 11)
   - technically feasible (by 2007 Project STOP had been piloted and was ready to be rolled out)
What happened next?

Policy windows do not stay open for long

- Participants may feel they have addressed the problem through decision or enactment; ‘brings down the curtain for the time being’

The endorsement of the National ATS Strategy as the outcome of the National Leadership Forum signalled that ‘something had been done’

No evaluation/renewal of the ATS Strategy:
- Agenda moved on under a new government?
- Or methamphetamine not a ‘problem’ anymore? Merely a ‘condition’?

Therefore we can conclude from the case study:
- Evidence of action through internal processes of the problem, policy and politics streams
- Knowledge in the three streams converged
- The policy decision arising from this convergence of streams reflects the availability of solutions at the time the policy window opens
- The policy outcome that can be understood as arising from this process was supply control (technically and politically feasible); a fit with a ‘crisis’ definition
Does Kingdon help us to more critically make sense of the drug policy process?

- Kingdon’s ‘multiple streams’ theory is a useful heuristic for understanding the development of methamphetamine as a policy issue in Australia in the last decade

- It provides a framework for analysing a policy process which is far from neat or logical (in contrast to rational, linear representations of the policy cycle that poorly describe a far messier social process)

- A “dynamic, irrational and unpredictable” model of the policy-making process (Nutley, Walter, & Davies, 2007)

- Key strength of Kingdon’s theory: acknowledges that policy formation is by nature “not always a ‘rational’ process” (Monaghan, 2011)
Key lessons

- Policy making is a constantly evolving process, developed through competing forces

- Problem definitions are not fixed but are constructed and change over time
  Kingdon does not suggest there is an unequivocal problem awaiting government action. The problem itself is created and defined through the process.

- Politics is integral to the process
  Researchers and experts may view politics as ‘contaminating’ the process of evidence-informed policy development but strategically understanding and working within these political forces is essential (especially for framing solutions and coupling them to problems when a window opens in the political stream)

- Policy solutions are about more than ‘what works’
  Politically, technically feasible ‘available alternative’ is crucial

- Policy process is a long process
  “when one starts to trace the history of a concern back through time, there is no logical place to stop the process...” (Kingdon, 2003)
  3 streams run *constantly* in parallel; policy making not about moments of enactment but about understanding a long, contested process
Thank you

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