



FACULTY OF LAW

The intersection between science and policy:

The case of the development of Belgian drug policy between 1996 and 2003

By

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ABSTRACT

[English]

Since the late 20th century, *evidence-based policy* has become the benchmark by which policies are judged. However, the assumption that policy should reflect accurate factual knowledge rather than political biases has no basis in reality. In heavily politicised domains, rational, instrumental frameworks are devalued in favour of those focusing on political/symbolic ways of knowledge utilisation, power relationships and interactions between various players in the policy-making process. Against such a background, criminologists also became concerned with their own commitments to the policy-making process: the idea of *public criminology* has gathered momentum in a number of fields.

This dissertation wishes to contribute to the (theoretical) debate on *knowledge utilisation* and *public criminology* and aims to provide a critical analysis of the *evidence-based* thinking by detailing the modalities of knowledge utilisation (theoretically guided by Weiss' three-folded typology) in both policy processes (Parliament and Government), the role of the media and interest groups in the science-policy nexus and the ways scientists manage the relationship between their academic activities and policy-making (*public criminology*). Using a case study of the development of Belgian drug policy between 1996 and 2003, a qualitative methodological approach has been selected: a (critical) discourse analysis of specially selected newspaper articles and policy documents and interviews with 55 key informants.

The ideal of *evidence-based policy* clearly faces significant challenges: the relationship between science and policy is neither rational nor exclusive. Through scientists performing *public roles* as *observer-turned player* or *policy advisor*, scientific knowledge informs policy (*conceptual use*) rather than constituting a rational foundation for policy-makers. Examples of *political/symbolic use* can also be found: policy-makers readily distorted scientific arguments which were detrimental to the chosen policy direction. Scientific knowledge has been just one element in the policy-making process characterised by competing interests, electoral ambitions and international frameworks. Even scientific knowledge has its limitations: several instances of the misuse of science by scientists are observed. While interest groups are not as engaged in the science-policy nexus, media coverage appears to be a valuable instrument by means of which policy-makers may receive (and use) scientific knowledge.

[Dutch]

Sinds het einde van de 20ste eeuw wordt beleid stevast getoetst aan de kernidee van het *evidence-based* denken. De assumptie dat wetenschappelijk onderzoek een invloed dient uit te oefenen op het uitstippelen van het beleid door beleidsmakers is aannemelijk, maar de relatie tussen onderzoek en beleid is in werkelijkheid niet zo rechtlijnig. In politiek en maatschappelijk geladen beleidsdomeinen wordt aangenomen dat politiek/symbolisch kennisgebruik, machtsrelaties en interacties tussen (beleids)actoren een belangrijke rol spelen. In dit verband ontwikkelde zich onlangs, onder de noemer 'publieke criminologie', een debat over de publieke rol van criminologen alsook over hoe de kloof tussen de 'academische' criminologie en het publieke en politieke discours kan worden overbrugd.

Dit doctoraatsonderzoek wenst bij te dragen tot de (theoretische) debatten inzake kennisgebruik en publieke criminologie en beoogt een kritische analyse van het *evidence-based* denken aan de hand van een studie van de vormen van kennisgebruik (geïnspireerd door de theoretische modellen van Weiss) in beleidsprocessen (Parlement en Regering), de rol van de media en belangengroepen in deze relatie en de manier waarop wetenschappers hun publieke rol waarnemen en beoordelen (*publieke criminologie*). De casestudy inzake de ontwikkeling van het Belgische drugsbeleid tussen 1996 en 2003 hanteert een kwalitatief methodologisch opzet: een (kritische) discoursanalyse van beleidsdocumenten en krantenartikels en diepte-interviews met 55 relevante sleutelfiguren.

Strijdig met de kernidee van het *evidence-based* denken, toont dit onderzoek aan dat de relatie tussen wetenschap en beleid rationeel noch exclusief is. *Publieke rollen als observer-turned-player of policy advisor* hebben een belangrijke functie om het politieke bedrijf te informeren (*conceptueel kennisgebruik*). Ideaaltypisch en rationeel kennisgebruik is eerder beperkt in tegenstelling tot politiek-symbolisch gebruik: beleidsmakers selecteerden wetenschappelijke kennis om hun ('korte-termijn') belangen te behartigen. Wetenschappelijke kennis vormt, naast o.a. conflicterende belangen, electorale ambities en het internationale kader, slechts één van de bronnen op grond waarvan beleidsmakers handelen. Ook wetenschappelijke kennis zelf kent beperkingen: enkele voorbeelden hebben het misbruik van wetenschappelijke kennis door wetenschappers aangetoond. Belangengroepen hebben eerder een beperkte invloed op de interactie tussen wetenschap en beleid terwijl de media een waardevol kanaal zijn waarlangs wetenschappelijke kennis ingang vindt bij beleidsmakers.

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LIST OF ABBREVIATIONS

ACZA	Algemeen Centrum Ziekenhuis Antwerpen
AFIT	Association Francophone des Intervenants en Toxicomanie
AGALEV	Flemish Green party
BCCO	Belgian Cannabis Consumers' Organisation [<i>Belgische Cannabis Consumenten Bond</i>]
BIRN	Belgian Information Reitox Network
BMCDDA	Belgian Monitoring Centre for Drugs and Drug Addiction
CA	Conversation Analysis
CAD	Centrum voor Alcohol en andere Drugproblemen
CATI	Computer-Assisted Telephone Interviews
CCAD	Comité de Concertation sur l'Alcool et les Autres Drogues
CJLAO	A citizen just like any other [<i>Citoyens Comme les Autres</i>]
CDA	Critical Discourse Analysis
CDH	French-speaking Christian Democrats
CORA	Radical Anti-Prohibitionist Coordination
CSC	Cellules Communistes Combattantes
CUNIC	Centre Universitaire de Liège
CVP / CD&V	Flemish Christian Democrats
DHCo	Heroin Delivery under Control
DP	Discursive Psychology
EBM	Evidence-Based Medicine
EBP	Evidence-Based Policy
ECCAM	Evaluation of Crisis and Case Management
ECOLO	French-speaking Green party
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction
EU	European Union
EUROPOL	European Police Office
FPS	Federal Public Services
FEDITO	Fédération Wallonne des Institutions pour Toxicomanes
FJIAC	Federatie Jongeren Informatie en Adviescentra
HBSC	Health Behavior School-aged Children studies
HIS	Health Interview Survey
HIV	Human Immunodeficiency Virus
ICWG	Inter-Cabinet Working Group
IDDI	Illicit Drug Diversion Initiative
IDRC	International Development Research Centre
INCB	International Narcotics Control Board
INTERPOL	International Police Office
LSD	Lysergic Acid Diethylamide

MC	Ministerial Circular Letter
MP	Member of Parliament
MSOC	Medical-Social Treatment Centres for drug users
OCDEFO	Office Central chargé de la lutte contre la Délinquance Economique et Financière Organisée
OSTC	Federal Office for Scientific, Technical and Cultural Affairs
PMA	Para-Methoxy Amphetamine
PRL-FDF-MCC	French-speaking Liberals
PS	French-speaking Socialist party
PSC	French-speaking Christian Democrats
PWG	Parliamentary Working Group on drugs
RCT	Randomized Controlled Trials
RIZIV	Rijksinstituut voor ziekte- en invaliditeitsverzekering [<i>Social Security Administration</i>]
ROSITA	Roadside Testing Assessment
SODA	Stedelijk Overleg Drugs Antwerpen
SP / SP.A	Flemish Socialist party
THC	TetraHydroCannabinol
ULB	Université Libre de Bruxelles
ULg	Université de Liège
UN	United Nations
VAD	Association for Alcohol and other Drug Problems [<i>Vereniging voor Alcohol- en andere Drugsproblemen</i>]
VLASTROV	VLaams STRaathoekwerk OVerleg
VLD / OpenVLD	Flemish Liberals
VU/VU&ID	Flemish Nationalists
WHO	World Health Organisation
WIV	Scientific Institute of Public Health
WODC	Wetenschappelijk Onderzoek- en Documentatiecentrum
XTC	Ecstasy

PUBLICATIONS ARISING FROM THIS WORK

- ▶ Tieberghien, J. (2015). 'Evidence-based' drugsbeleid en het belang van de media. *Verslaving*, 11(1), 30-40.
- ▶ Tieberghien, J. (2014). 'Interviewing 'elites' in examining the science-policy nexus: some methodological reflections'. In G. Potter, M. Wouters and J. Fountain (Eds.), *Drugs in Europe: change and continuity* (pp.123-138). Lengerich: Pabst Science Publishers.
- ▶ Tieberghien, J. (2014). "Publieke criminologie' onder de loep: de rol van wetenschappelijk onderzoek in de ontwikkeling van het Belgische drugsbeleid (1996-2003)". In L. Pauwels & G. Vermeulen (Eds.). *Update in de Criminologie VII: Actuele ontwikkelingen inzake EU-justitiebeleid, cannabisbeleid, misdaad en straf, jongeren en jeugdzorg, internationale vrede , veiligheid en gerechtigheid, gewelddadige extremisme & private veiligheid en zelfregulering* (pp. 90-107). Antwerpen: Maklu.
- ▶ Tieberghien, J. (2014). The role of the media in the science-policy nexus. Some critical reflections based on an analysis of the Belgian drug policy debate (1996-2003). *International Journal of Drug Policy*, 25(2), 276-281.
- ▶ Tieberghien, J. (2014). 'The triangle of science, policy and media in the Belgian drug policy debate'. In J. Fountain, M. Wouters & D.J. Korf (Eds.). *Snapshots of social drug research in Europe* (pp. 42-44). Lengerich: Pabst Science Publishers.
- ▶ Tieberghien, J. & Decorte, T. (2013). Understanding the science-policy nexus in Belgium: an analysis of the drug policy debate (1996 – 2003). *Drugs: Education, Prevention and Policy*, 20(3), 241-248.
- ▶ Tieberghien, J. (2012), 'Beleidsmakers komen van Venus, wetenschappers van Mars? Een kritische blik op een complexe relatie tussen drugsbeleid en wetenschappelijk onderzoek'. In L. Pauwels & G. Vermeulen (Eds.), *Update in de criminologie. Actualia Strafrecht en Criminologie 2012 (Reeks Gandaius, VI)*. Antwerpen: Maklu.

INTRODUCTION

Background of the study

Researchers often wonder what becomes of the results of their research. So did I. The idea for this dissertation came from drug research that I have been working on in recent years. I was involved in monitoring drug use trends at the local level for the city of Antwerp, which aimed to provide information for an *evidence-based* policy concerning prevention, harm reduction and treatment as well as to stimulate the (ongoing) dialogue between policy-makers and a broad range of stakeholders (Tieberghien and Decorte, 2009). Over the course of my involvement in this research, I presented findings to a broad range of stakeholders including police officers, treatment practitioners and local policy-makers, and I felt optimistic about inspiring some small policy changes. However, through informal conversations with some stakeholders and drug users, I had an increasing number of reservations about the potential impact of my research findings on the local (drug) policy context. Generally, I started to wonder *if* and *how* scientific knowledge can play a role in the drug policy-making process or, in other words, how the science-policy nexus in the drug policy field actually works. This dissertation is devoted to this particular issue.

Since the late 20th century, *evidence-based* policy has become the benchmark by which policies are made and judged. It has been promoted as the ideal model of policy as it is distinct from policy where intuitive appeal, tradition and politics determine policy (O'Dwyer, 2004; Hughes, 2007). In theory, demand for ***evidence-based policy (EBP)*** should be a matter of common sense: scientists produce evidence, which then takes priority over competing factors in the policy-making process. The EBP account assumes a linear, rational connection between science and policy, where policy-making is seen as an *authoritative choice* with scientists *speaking truth to power* (Wildavsky, 1979). Randomised Control Trial's (RCT's) and systematic reviews are considered as the most high-quality evidence in the *evidence hierarchy* as they indicate the effectiveness of policy and programmes (what matters is what works). Some other forms of scientific knowledge as well as knowledge derived from practitioners' experiences are perceived to be unsystematic and lacking rigour. The increasing focus on EBP has been advocated for by numerous scientists, who have argued that policy should be based on high-quality scientific knowledge. International networks such as the *Campbell Collaboration* have been developed with this in mind (Berridge, 2002; Devroe, Deschamps and Hannes, 2008).

Increasingly, however, critics have countered the notion of *evidence-based* policy-making. They have argued that the *evidence-based* movement obscures the dynamic nature of scientific

knowledge and, accordingly, reduces the debate on the science-policy nexus to rather zero-sum accounts: a policy is *evidence-based* or *evidence-free* (Hammersley, 2005; Monaghan, 2011; Bergin, 2013). Scholars have also argued that scientific knowledge as such is far more contested (e.g. yielding contradictory or sometimes unreliable findings) than is assumed by the positivist view generated by the *evidence hierarchy* (Lancaster, 2014). At the same time, scholars have emphasised that the *evidence-based* movement ignores the fact that policy-making is far more messy and interactive than is acknowledged and involves more actors than just those in the domains of evidence and policy (Rich, 1997; Smith, 2013). Thus, some fundamental questions remain unanswered. How exactly does scientific knowledge contribute to the policy-making process? How do policy-makers see the role of scientific knowledge? Which other types of information compete with scientific knowledge in the policy-making process? What is the particular influence of other actors such as the media and interest groups?

Unpicking and investigating these particular issues has concerned a number of scholars before and since the debate about *evidence-based* policy-making emerged. A considerable body of work (called **knowledge utilisation literature**) has accumulated within the political science domain, much of it in the 1970s and early 1980s. Theoretical frameworks of *knowledge utilisation* explored the questions of when, why and under what circumstances scientific knowledge influences the policy-making process. While the early paradigm of the *two communities* thesis offered a rather pessimistic view on the connection between two fundamentally different worlds separated by a huge gap (Caplan, 1979), Carol Weiss, a prominent author in this field, identified several **modalities of use** (*instrumental, conceptual, political/symbolic*) in her work regarding knowledge utilisation and policy-making (Weiss, 1979). Instead of *instrumental* utilisation, representing an approach where scientific knowledge has a direct bearing on policy, scientific knowledge was more often found to be used *conceptually* (i.e. delayed and diffused use of information in policy-making) and *politically/symbolically* (i.e. policy-makers using scientific knowledge in a selective way to delay actions, for example waiting for research results or convincing sceptics about the value of a measure). Assuming that scientific knowledge can influence policy under particular circumstances and through different modalities, these knowledge utilisation models illustrated the complexity of the relationship between science and policy and were not supportive of the current *evidence-based* movement. The idea of rational, direct utilisation of scientific knowledge is assumed to be somewhat naïve and too idealistic. In addition to Weiss' typology, the literature on knowledge utilisation contains many convincing accounts of why research does not have a strong direct influence on policy, including those based on differences in goals, priorities, languages, time scales and career paths (Caplan, 1979; Landry, Amara and Lamari, 2001; Burssens, 2007; Smith, 2010). Scientific knowledge appeared to be just one type of

information competing with other types of information as well as with political considerations (Weiss, 2001; Garland, 2001; Kingdon, 2002; Reimers and McGinn, 1997; Lindquist, 2001; Rich, 2001; Muscat, 2008; Strydom, et al., 2010). As a result, several scholars have turned their back on the principle of *evidence-based* policy, in favour of a more nuanced account such as *evidence-informed* or even *evidence-aware* policy (Young, et al., 2002; Dobrow, Goel and Upshur, 2004).

Heavily politicised or mediatised policy areas were not typically part of the studies of *evidence-based* policy-making. For a long time, attention on the science-policy nexus focused on the health sector (due to its emergence as *evidence-based medicine*) but more recently the focus has moved to other policy areas including criminal (juvenile) justice (Farrington, 2006; Farrington, et al., 2006; Freiberg and Carson, 2010; McNeill, et al., 2012) or migration (Brans, et al., 2004; Bak Jørgensen, 2011). As the notion of *evidence-based* policy has become part of the common policy lexicon in the **drug policy field**, similar questions were being asked by scholars in the context of drug policy (Bourgeois 2000; Stevens and Rhodes, 2011; Stevens and Ritter 2013). The interest in studying the interaction between science and policy in the field of drugs emerged particularly in Australia, the UK and Canada (Erickson, 1998; Duke, 2001; Hall, 2004; Lenton, 2004; Lenton, 2007; Hughes, 2007; Hall, 2008; Bickford and Kothari, 2008; Monaghan, 2009; Ritter, 2009; Hughes and Stevens, 2010; Macleod and Hickman, 2010). Except for two studies focusing on how drug policy-makers access scientific knowledge (Bickford and Kothari, 2008; Ritter, 2009), others analysed knowledge utilisation in one or more cases, like the development of a policy or a new policy measure (e.g. new legislation, the implementation of safe injecting rooms or treatment of heroin dependence, and so on). Building on Weiss' three-folded typology (Weiss, 1979), data was mainly gathered through interviewing key policy-makers and through analysing documents (policy debates, media reports, etc.).

These international studies critically challenged the notion of *evidence-based* drug policy and showed that **political/symbolic use of scientific knowledge** (i.e. scientific knowledge is considered ammunition for political sides; it can be used to silence the arguments of the opposition or to support ideas which policy-makers have already adopted) appears highly prevalent in this policy area, characterised as it is by intense media scrutiny of policy-making and conflicts between competing interests. Accordingly, rational frameworks of policy-making (*evidence-based* policy-making) were devalued in favour of assumptions on the power relationships and interactions/networks between various players in the policy-making process (*evolutionary* model – *processual* model; Stevens, 2007a; Monaghan, 2011). Scientific knowledge was understood to play a role in the interactive *process* of policy-making and not just in the *outcome* of policy formulation (Johnson, et al., 2004; MacGregor, 2010). In a similar vein, in the drug policy field, dis-

discussion arose over the definition of scientific knowledge. How policy-makers perceive scientific knowledge may itself be politically loaded (Monaghan, 2011; Stevens, 2011). Additionally, given the strong emotions and opinions surrounding the use of illicit drugs and the high media profile that drug use attracts, the **media** and **interest groups** (e.g. drug user organisations) were considered to be *strong facilitators* of the science-policy nexus. However, thus far, their particular roles in the science-policy nexus have rarely been studied.

This dissertation follows these critical stances on *evidence-based* drug policy, arguing that the discourse ought to move beyond the linear, rational connection between science and policy and beyond the notion of science and policy as two distinct domains. The existing case studies are an interesting starting point for further (comparative) analysis (Nutley, Walter and Davies, 2007). Nevertheless, most knowledge utilisation literature in the drug policy field clearly originates from countries with a two-party system, and is thus not representative of the science-policy interaction in a multi-party system as exists in Belgium (Babor, et al., 2010; Tonry, 2010). Thus, the question remains whether the development of Belgian drug policy is, just like in other international studies, actually informed by scientific knowledge and other factors such as political interests, institutional rules, personal experiences, newspapers, and so on.

Criminological relevance of the study

Criminology is a multidisciplinary field of study which often intersects with the field of political science. It has always found itself in close proximity to the state and its political needs: for instance, criminologists have challenged official discourses and the exercise of power, or have been interested in the influence of media depictions of crimes and crime rates on policy-making (Walters, 2003; Garland, 2011; Bauwens, et al., 2013). Historically, however, the tradition within criminological research has been to concentrate on offenders, deviant populations and the powerless, those who have been excluded or forced to the margins of the society (Becker, 1967; Foucault, 1976). Except for *critical* social research, the focus has hardly been on those in positions of power in relation to the processes of policy-making and the science-policy nexus (Van Swaaningen, 2001; Duke, 2002; Young, 2011). Criminologists are usually not familiar with policy-making processes, and the world into which scientific knowledge must be integrated if we would like to influence policy-makers (Petersilia, 2008; Stevens, 2011). According to Rock (2010), "*All too often, criminologists have not interrogated with any curiosity or diligence what takes place in the private sphere as policies are formed. They have not peered into the black box of the political process but have become observers after the event when policies are neatly packaged, discursively tidied up, agreed and coherent.*" (p.758). It is imperative that criminologists at least be interested in what is done with scientific knowledge in the policy-making process (Chan,

2000; Wacquant, 2011). In other words, the science-policy nexus needs to be approached in a *critical* and *reflexive* manner, from within or exposed to profound observation by criminologists.

Nowadays, there is growing criminological interest in understanding how and why policy takes the direction that it does (Jones and Newburn, 2007), especially in relation to the political and social relations of knowledge production (i.e. some type of knowledge may systematically be neutralised or marginalised by social controls/powers: *deviant knowledge*) (Walters, 2003; Allen, 2007). With the rise of the *evidence-based* policy framework, criminologists have become increasingly concerned with the nature of their own commitment to the policy-making process (Van Swaaningen, 2009). For instance, the idea of *public criminology*, an articulation of the idea that criminology's purpose is to contribute to a 'better' politics of crime and its regulation, has gathered momentum in a number of fields (Wacquant, 2011; Loader and Sparks, 2011). In particular, public criminology is a distinct approach that criminologists may or may not choose to adopt (Loader and Sparks, 2011). The notion that research should be carried out to influence the public or policy-making remains controversial. Some scientists feel quite strongly that research should not be limited or directed by the demands of policy-makers while others argue that providing research for the benefit of policy-makers is legitimate (Carden, 2004). Understanding how much and what type of impact a public role might have on the policy-making process requires reflection on the way in which that process actually unfolds in a particular case.

Research objectives and research questions

This dissertation joins the debate about how the knowledge utilisation process works in a heavily politicised and mediatised policy domain. Examples of the modalities through which scientific knowledge contributes to the drug policy-making process and illustrations of the ways in which scientists can be engaged with policy-makers may be of interest for the theoretical debate on *knowledge utilisation* and *public criminology* but also for those who aim to grasp a reasoned understanding of the *evidence-based* thinking in the field of drugs.

I aim to contribute to the development of theory in these areas by combining theoretical contributions with empirical data from an in-depth case study of the development of Belgian drug policy between 1996-2003. Although, in the last decade, empirical interest in the science-policy nexus has grown in several (criminological) policy domains, including Belgium (Devroe, 2002; Brans, et al., 2004; Vande Walle, 2010; Smet, 2013), very little is known about whether and how the main political institutions (i.e. Parliament and Government) in a parliamentary democracy such as Belgium use scientific knowledge in the drug policy-making process, and which other factors are at play.

The **aims of this study** are to describe and to understand whether and how scientific knowledge (and other competing (f)actors) contributed to the development of Belgian drug policy between 1996-2003. Taking into account the theoretical considerations and the characteristics of the drug policy field in particular, I want to explore if *political/symbolic utilisation* (and other types of knowledge utilisation like *instrumental* and *conceptual utilisation*) is particularly prevalent in the *process* of drug policy-making (Parliament and Government). What counts as scientific knowledge or, in other words, how scientific knowledge was perceived by policy-makers will also be one of the empirical topics to be addressed. Furthermore, since it was suggested in the literature that other factors (such as political considerations) also play a role, I want to examine which other types of information have competed with scientific knowledge in this case. Given the important roles of the media and interest groups in drug policy debates, I also aim to look at how interest groups as well as the (mis)representation of scientific knowledge in the media may, or may not, have an influence on the contribution of scientific knowledge to the drug policy-making process.

Accordingly, the study addresses three **research questions**:

1/ How has Belgian drug policy been developed between 1996 and 2003?

2/ How did scientific knowledge contribute to the development of Belgian drug policy between 1996 and 2003?

2.a./ Through which modalities did scientific knowledge contribute to the drug policy-making process?

2.b./ What has counted as scientific knowledge in this particular drug policy-making process?

2.c./ Is there a difference in the role played by scientific knowledge within the main political institutions (i.e. Parliament and Government)?

2.d./ Which other types of information competed with scientific knowledge in this particular drug policy-making process?

3/ What is the particular influence of the media and interest groups on the contribution of scientific knowledge to the development of Belgian drug policy between 1996 and 2003?

Framework and methods

I first provide a brief understanding of the *conceptual framework* of this study (see also Part I, Chapter Three) which is based on relevant concepts put forward by previous studies. The object of the study is the *knowledge utilisation process*. I draw on the three-folded typology of Weiss (1979), a commonly cited theoretical framework, who identified in her work on knowledge utili-

sation and policy-making three models of knowledge utilisation (*instrumental, conceptual, political/symbolic*). Instead of a direct, linear impact of scientific knowledge on drug policy ('utilisation as outcome'), scientific knowledge may seep into the policy-making process in unexpected and more subtle, indirect ways ('utilisation as process'). The notions of *contribution* or *utilisation* (instead of *impact*) are adopted to encompass not only the direct, instrumental use but also its more indirect/conceptual uses. In addition to Weiss' political/symbolic model, and of particular interest in a heavily politicised policy domain, I examine if and how power mechanisms play a role in the knowledge utilisation process (*evolutionary model*; Stevens, 2007a) and how scientific knowledge itself is conceptualised in the policy-making process (e.g. how do policy-makers see the role of scientific knowledge? What counts as scientific knowledge?) (*processual model*; Monaghan, 2011). Furthermore, understanding the modalities through which scientific knowledge contributed to the development of Belgian drug policy between 1996 and 2003 also incorporates exchange or linkage issues between science and policy. Building on the knowledge exchange literature (Kingdon, 2002; Rich, 2001; Muscat, 2008; Strydom, et al., 2010), I also seek to understand and describe the barriers and facilitating mechanisms of knowledge utilisation related to scientific knowledge; barriers/facilitators related to the policy-making process; and shortcomings/facilitators in the links between those two.

The complexity of the knowledge utilisation process is assumed to be related to the *characteristics of scientific knowledge* (e.g. unsuitability to policy-makers' needs, academic format of communication, contradictory findings) and the *levels of engagement of scientists* as well (Rich, 2001; Haines, Kuruvilla and Borchert, 2004). *Scientific knowledge* is just one part of what might be considered 'evidence' (Nutley, Walter and Davies, 2007). In my study, I apply the notion of scientific knowledge to refer to scientific research executed by academics who work in university or college departments as well as to scientific discourse of an academic. Reflecting on *public criminology*, scientists may take different positions in the policy-making process (e.g. they may refrain from involvement or they may play a more active role) (Loader and Sparks, 2011). How scientists perceive and handle these engagements themselves may have an influence on the ways their findings or knowledge are utilised (Lampinen, 1992).

In examining the different modalities through which scientific knowledge has contributed to the *policy-making process*, this study adopts the framework of policy-making as a *structured interaction* (including Parliament and Government). Policy-makers include members of the Federal Government as well as Members of Parliament (Senate and Chamber of Representatives) and their representatives. In contrast with the members of the Federal Government who are responsible for law-making, budgetary allocations and so on, Members of Parliament (MPs) sometimes

just show that they are engaged by or concerned about an issue by submitting parliamentary questions or interpellations, but they do not have the competence to initiate concrete policy measures (Reisigl, 2008). Including both the Parliament and the Government may demonstrate how utilisation of scientific knowledge interacts with the institutional and individual characteristics of policy-making (e.g. budgets, values and opinions of political parties, the type of political system, *tacit* knowledge of individual policy-makers) in a more in-depth way (Geeroms, 1978; Weiss, 2001; Black, 2001; Burssens, 2008). The few studies that reflect on whether and how knowledge utilisation may differ between the Government and the Parliament have provided contradictory results (Johnson, et al., 2004; MacGregor, 2012).

As the field of drugs is considered to be characterised by intense media attention, the *media* is assumed to be a *strong* facilitator of knowledge utilisation in drug policy debates (Duke, 2001; Hughes, 2009; Monaghan, 2009). The media can be seen as a rather ambiguous concept which includes several forms of communication: newspapers, television, radio, internet, etc. (McCombs and Reynolds, 2009). In this study, I use the concept of 'media' to refer specifically to the print media, newspapers/magazines in particular. Newspapers and magazines offer practical advantages: e.g. they are easier to collect than audio-visual data, and they have a more permanent character than web material (Mautner, 2008).

Interest (or advocacy) groups give voice to a particular segment of the general public (Marteache, 2013; Matthew-Simmons, Sunderland and Ritter, 2013). This concept refers to a variety of groups of people with shared beliefs and goals in a particular policy area: civil society associations, NGOs or third sector organisations, alliances, coalitions and networks of existing organisations, professional associations of lawyers or law enforcement officers, and user groups (Tops, 2001; Hall, 2004; Lancaster, Ritter and Stafford, 2013; EMCDDA, 2013). In this study, interest groups include the associations advocating for drug users' rights as well as groups representing parents or ex-drug users who advocate against drug use. This type of interest groups may be of particular interest to the study of the science-policy nexus in the drug policy field, especially because (ex-)drug users are the direct objects of drug policy (Lenton, 2004; Bergin, 2013).

To answer the research questions, it is necessary to adopt a comprehensive *methodology*. This study adopts a *qualitative methodological approach*. In particular, the research questions will be investigated through a close examination of the use of scientific knowledge in policy documents (i.e. Parliament and Government) on the one hand, and in media documents (i.e. newspapers and magazines) on the other hand. I will particularly focus on: the textual elements that characterise (differences between) discourses (e.g. the terminology and definition(s) of drug use or drug pol-

icy options used); how players are represented in the text and from which perspective or viewpoint; how scientific knowledge has been represented; and the various types of knowledge utilisation. This information will be augmented by interviews with key informants to increase our understanding of documentary material and to fill gaps or clarify/explore grey areas. Elite-level interviews may help to better understand the complex reality of knowledge utilisation as experienced by the actors involved and their appreciations of what counts as scientific knowledge in the drug policy-making process (Daniels and Lewin, 2008). In addition to existing studies of the science-policy nexus in the drug field which mainly involve policy-makers (MacGregor, 2013), I will include the perspectives of scientists, journalists and members of interest groups as well.

Structure of the report

This dissertation is organised into an Introduction and three Parts. Part I provides a theoretical and methodological framework for the study. The notion of *science-policy nexus* is further developed in **Chapter One**. The chapter describes the historical origins and evolution of the thinking on the relationship between science and policy. Attention is given to the *evidence-based* movement and the discussion that sparked across social science disciplines (sociology, criminology, anthropology, ...) about the need to engage with the public domain (Burawoy, 2005; Loader and Sparks, 2011). Furthermore, the chapter critically examines theoretical models of knowledge utilisation as well as the models of policy-making to demonstrate the different ways scientific knowledge can be used in the policy-making process. The linkages between these theoretical models and their shortcomings are identified and debated. In addition, this chapter outlines the barriers and facilitators of the relationship between science and policy. The review of theoretical and methodological approaches is useful translating these issues into the drug policy area in **Chapter Two**. **Chapter Three** describes the conceptual framework, the research design and the methods (including a Critical Discourse Analysis of Norman Fairclough and elite interviews) through which the data for this study are collected. Finally, a full description is presented of the limitations and the challenges the researcher was faced with during data-collection and data-analysis.

Guided by the literature and the conceptual framework addressed in Part I, the second part is centred on the empirical results of the Critical Discourse Analysis and elite interviews. The findings from the interviews are used to further explore and test the findings from the discourse analysis and to develop a more comprehensive understanding of how the nexus is viewed by the key players. Chapters One to Five are concerned with the developments of Belgian drug policy between 1996 and 2003. I will chronologically address the history of Belgian drug policy and legislative framework before 1996 (**Chapter One**), the Parliamentary Working Group on drugs

(1996-1997) (**Chapter Two**), the intermezzo between 1997 and 2000 (**Chapter Three**), the Federal Drug Policy Note (2001) (**Chapter Four**), and the reform of Belgian drug law (2002-2003) (**Chapter Five**).

The aim of the **Final Conclusions** is twofold. First, I provide a synthesis to pull together the various topics and examples that have been discussed. Second, the empirical results are framed within the wider theoretical and methodological perspectives which have been discussed in the first part of this dissertation. In the Final Conclusions, I attempt to provide a critical analysis of the *evidence-based* thinking by detailing the modalities of scientific knowledge (*Weiss' three-folded typology*) in both policy processes (Parliament and Government), the role of the media and interest groups in the science-policy nexus and the ways in which scientists perceived and managed the relationship between their academic activities and policy-making (*public criminology*).

Improvident reliance on the principle '*evidence-based policy-making*' is a big hurdle to be faced in increasing the rationality of the policy-making process. Covering the challenges and opportunities of the interaction between science and policy, I demonstrate instrumental, conceptual and political/symbolic use of scientific knowledge in the development of Belgian drug policy between 1996-2003, and the influence of the researcher's *public role*, including positions of power or lack thereof, on the policy-making process involving not only scientific knowledge but also interests, electoral ambitions, and so on. While interest groups are not as vigorous, the media prove to be a valuable linking mechanism between science and policy, influencing the public's and policy-makers' understanding as well as the content of the debate.

PART I Literature review and methodology

Chapter 1 Science – policy nexus: from knowledge utilisation models to *evidence-based* policies

To gain a better understanding of the science-policy nexus in the drug policy arena, it is crucial to first consider certain issues central to this topic. After examining the historical origins and evolution of the thinking on the relationship between science and policy (§1), this chapter will address the theoretical models of the science-policy nexus (§2) as well as empirical studies detailing the (problematic) features of the interaction between science and policy (§3). The particular roles of the media and interest groups in the science-policy nexus are identified in §4.

1. Increasing attention for the science-policy nexus

Attention on the relationship between science and policy is not new. Historically, there has been a growing interest in the political and social relations of knowledge production (Walters, 2003; Allen, 2007). More recently, in association with an *evidence-based* movement, a discussion sparked across social science disciplines (sociology, criminology, anthropology, ...) about the need to engage with the public domain (Burawoy, 2005; Loader and Sparks, 2011). In this section, I address the origins of the interest in the science-policy nexus as well as more recent debates about *evidence-based* policy and the *public role* of scientists.

1.1. Historical origins of the interest in the science-policy nexus

An early view of the science-policy nexus included the idea that scientific rationality could serve as a key to problem-solving (Hoppe, 1999). For some time, the idea of an independent, truth-seeking scientist who conducts his or her work in virtual isolation from societal and political influences was instrumental in the protection of scientists from political interventions (Hoppe, 1999; Jasanoff, 2006). As a result, scientists attempted to establish scientific objectivity in the measurement and quantification of social phenomena (e.g. criminal behaviour) and sought to identify explanations for individual or social causes that determined this behaviour. However, enthusiasm was followed by increasing disillusionment about science's capacity to address complex social issues. In particular, the notion of scientific knowledge as the driving force of policy-makers and social progress was challenged as early as mid-20th century when both World Wars and an economic crisis strongly impacted upon public belief in scientific rationality (Walters, 2003; Hammersley, 2013). As the 1960s progressed, it was gradually acknowledged that scientific knowledge was fallible as a result of its frequently inconclusive and ambiguous conclusions. In other words, there was a relative consensus that scientists do not possess absolute *truth* about social phenomena: in fact, their assumptions can have a strong effect on the results

they find (Head, 2010). Furthermore, it was more strongly argued that policy was being determined by powerful groups rather than by scientific rationality (Walters, 2003). This shift initiated a change in critical thinking about the role of the state, society and the public at large (Carrabine, et al., 2004) as well as the role that scientific knowledge may play in the policy-making process. For instance, Weiss (1991) characterised the increasing interest in the science – policy connection as follows: '*If they (social scientists) no longer claim to find 'truth' about 'reality', what is their role in the policy process?*' (p.309). Within this context, the tradition of knowledge utilisation studies began (see also below, §3). During the 1970s-1980s, the link between science and policy was contextualised in models of *knowledge utilisation* (see §2).

1.2. Revived attention: evidence-based policy (EBP)

Interest in the use of scientific knowledge for policy-making purposes revived in the late 1990s. From then onwards, the popular label *evidence-based policy* has strongly influenced the discourse on the relationship between science and policy. *Evidence-based policy* is frequently promoted as the ideal in policy. Davies (2004) defined *evidence-based policy* as '*an approach that helps people make well-informed decisions about policies, programmes and projects by putting the best available evidence from research at the heart of policy development and implementation*' (p. 3). Marston and Watts (2003) suggested that the concept of *evidence-based policy* is '*a powerful metaphor in shaping what forms of knowledge are considered closest to the 'truth' in decision-making processes*' (p.145). This distinguishes it from policy governed by intuitive appeal, tradition or politics (O'Dwyer, 2004).

The *evidence-based policy* concept is actually derived from the 1970s *evidence-based medicine* framework, whose philosophical origins go back to the mid-19th century (Reimer, Sawka and James, 2005). *Evidence-based medicine (EBM)* includes the thoughtful integration of the best available evidence coupled with best practices of medical expertise. This original framework gained prominence as the *what works* approach (Sackett, et al., 1996; Marston and Watts, 2003; Behague, et al., 2009). Gradually, this approach has also been advocated for and adopted in other fields of professional activity, such as nursing, social work, probation, human resource management, education and substance abuse treatment (*evidence based practice*) (Miller, et al., 2006; Santisteban, Vega and Suarez-Morales, 2006; Jack, et al., 2011). Since the late 1990s, the focus changed from *evidence-based practice* to evidence's influence in non-clinical arenas, such as public policy. A prominent example is the UK New Labour Government's commitment to *evidence-based policy-making* as a key part of its strategy of 'Modernization through managerialization' in 1997 (Monaghan, 2011). Generally, the growing interest in the area of *evidence-based policy* led to several additions to the (criminological) literature (Sherman, 2003), including in Belgium

(Devroe, 2002; Brans, et al., 2004; Devroe, 2010; Vande Walle, 2010; Smet, 2013) (see also below, §3.3.).

The goal of basing a policy on scientific knowledge is to eliminate decisions based on bias or arbitrary grounds (Montuschi, 2009). But despite its popular appeal, this approach faces some fundamental challenges, in the criminological domain in particular (Burssens, 2007). First, a common critique has been that the EBP account assumes a linear, rational connection between science and policy while in fact it is far more complex, and involves actors outside the domain of evidence and policy. In particular, the EBP paradigm ignores the realities of policy-making (such as e.g. parliamentary terms and timetables, and policy-making procedures) and the scientific community. Policy-makers have to take into account several considerations (such as affordability, salience, or public response) and are not always able to act rationally, a foundational concept in EBP (Head, 2010). The decisions they have to make are often more complex and affected by institutional, cultural or political factors (Hammersley, 2013). At the same time, researchers do not always communicate their findings clearly or prefer to remain distant from public debates (cfr. *Public criminology*, see §1.3.) (Head, 2010). Taking these criticisms into account, some authors have advocated replacing the *evidence-based* ideal with softer approaches such as *evidence-informed*, *evidence-aware*, *evidence-influenced* or *evidence-inspired* to underline a more reasonable view of the science-policy nexus (Sanderson, 2009; Hammersley, 2013). This reassessment of EBP concludes that evidence can *inform* policy rather than constitute a foundation for policy-makers (Head, 2010). However, some advocates of this more pragmatic position caution of the risk of undermining efforts for stronger use of scientific knowledge in the policy-making process (Sanderson, 2009).

Second, what constitutes *best evidence* is based on the assumption that some types of research provide more and better scientific knowledge than others (*evidence hierarchy*) (Nelen, 2008; Nelen, 2010a; Hammersley, 2013). Emerging as it has from evidence-based medicine, the concept *evidence based* policy assumes that policy-makers are generally best served by studies that use *experimental and quasi-experimental research designs* with good measures (Randomised Control Trials – RCT). A softer variant is the claim that a better understanding may emerge from *systematic reviews*. Some hierarchies place this type above RCT's, since these often combine data from multiple RCT's (Pawson, 2006; Head, 2010). Systematic reviews, which have become very popular in the criminological domain nowadays (Farrington, 2006; Devroe, Deschamps and Hannes, 2008; Freiberg and Carson, 2010; McNeill, et al., 2012) can be particularly well used because they are a high-level overview of the best available evidence about the effectiveness of policy and programs ('what matters is what works'). Organisations such as the *Campbell Collab-*

oration (C2) have been developed with this in mind. Created in 2002, it is an international research network that helps policy-makers and practitioners to make well-informed decisions by preparing, maintaining and disseminating systematic reviews on education, crime and justice, and social welfare¹ (Devroe, Deschamps and Hannes, 2008). With this emphasis on evaluation, innovative strategies to *mandate* the use of this type of evidence has been adopted recently: for example, some applicants for federal program funds in the United States are required to show that their program has been scientifically evaluated and proved successful (Weiss, et al., 2008).

While experimental trials and systematic reviews have been and continue to be perceived as providing reliable sources of evidence, some forms of scientific research as well as knowledge derived from practitioners' experiences are automatically portrayed as unsystematic and lacking rigor. Although controlled studies and systematic reviews might be useful in evaluating a given intervention or policy and such research is increasingly popular in the criminological research field, too many policy questions cannot be answered with this approach (Burssens, 2008; Clear, 2010). For instance, like other criminological topics, drug use is a complex phenomenon that cannot be studied and fully understood by only using (quasi-) experimental designs or systematic reviews (Kraus and Korf, 2005). These methods disregard the context or sociological meaning of a finding (Stevens, 2011)². For instance, qualitative research and expert opinions are required to analyse how different drug policies create, recreate and reinforce social inequality and power structures (Snertingdal and Basberg Neuman, 2010).

Furthermore, the notion of *evidence-based* policy-making, with the centrality of its evidence hierarchy, can be perceived as a kind of reaffirmation of the positivist view (Marston and Watts, 2003; Naughton, 2005; Hammersley, 2013). Lancaster (2014) questioned the fixed and stable premise of *evidence-based* policy endeavour, suggesting that the concepts of evidence and thus *evidence-based* policy are always social constructs. From the postmodernist or social constructivist point of view in social research, social reality can never be objectively known. It is argued that the concept of evidence is more contested than it appears: it often fails to cumulate systematically resulting in fragmented data or yields contradictory or otherwise untrustworthy findings (Naughton, 2005; Weiss, et al., 2008; Monaghan, 2008b). Formulating conclusions or setting operational goals in research will always remain a somewhat uncertain task (Fountain and Korf, 2007; Burssens, 2008). Thus, a strong research base with rigorous findings is simply not viable in many areas (Head, 2010).

¹ The Belgian department is called the Belgian Campbell Group.

² Stevens (2011) uses the image of *datasources* to point at researchers with "a very small theoretical brain and a huge methodological body" and a lack of "considering their application to the real lives of the people from whom they have been extracted" (p.30).

1.3. Public criminology: recent translation of EBP-thinking

Within the framework of the debate around the role of science in policy-making, social scientists became more and more concerned with the nature of their own commitment to the policy-making process (Van Swaaningen, 2009). Braithwaite (2005) termed this translation of the EBP-thinking *public social science*. However, it was sociology as a discipline that played a pioneering role in this debate. In particular, Michael Burawoy (2005) championed initiatives to give sociology a public voice. A **public sociology** has to translate scientific knowledge to other arenas (e.g. public, policy-makers, professionals) in order to establish a dialectical relationship. On the one hand, it allows a scientist to contribute to public and political discussions, while, on the other hand, scientists can learn from the experiences of their public in order to broaden their insights and ideas about social phenomena. However, it is assumed that public sociology is but one of four different types of sociology that also include: *professional sociology* (i.e. focus is on academic peers and producing/discussing academic knowledge and theoretical paradigms; instrumental knowledge), *policy sociology* (i.e. focus is on serving clients in solving a problem, mostly involving a contract), and *critical sociology* (i.e. focus is on examining the fundamental assumptions of the professional approach; reflexive knowledge). Professional and critical sociology focus on an academic audience while policy and public sociology have an extra-academic audience. Nevertheless, the distinctions made are less straightforward than they have been portrayed: scientists can belong to more than one type and they may change their approach during their career (Nijmeijer, 2009; Loader and Sparks, 2010). Indeed, Burawoy's typology has incited much criticism. For instance, critics feared that the discipline of sociology was being diminished by the contaminations of the public/policy side. At the same time, it has been argued that all engaged in sociology ought to be critical, as this is a core element of professionalism (Ericson, 2005). This thinking was incorporated into the criminological debate under the banner *public criminology* (Chancer and McLaughlin, 2007; Engbergesen, 2008; Garland, 2011³).

Before I address the current *public criminology* debate, it is important to note that this discussion is not entirely new but rather actually reinvigorated several older debates. As criminological knowledge is located in three major social settings: (1) the world of social science, (2) the world of policy-making and (3) the world of mass media and the public, circuits for its use and exchange may be extensive (Garland and Sparks, 2000). Discussing and even acting on the problem of crime belongs to a diverse network of actors and agencies, some inside the state, but many outside of it. For instance, crime and crime policy are often subject to intense, sustained attention by the popular media and politicians (Dixon, 1995; Loader and Sparks, 2011).

³ Garland (2011) described a similar three-fold typology: policy-oriented criminologist, academic sociologist of crime and a critical criminologist.

First of all, criminological research does not take place in a political vacuum; it has always found itself in close proximity to the state and its political needs (Walters, 2003; Garland, 2011; Bauwens, et al., 2013). The relationship between **knowledge and power** has explicitly been studied in the work of Michel Foucault.⁴ In the later work of Michel Foucault (*genealogy*), the government is understood to be not simply a political institution but rather a form of activity aiming to shape, guide or affect the conduct of some person or persons (Gordon, 1991). The criteria of what constitutes knowledge, what is to be excluded and who is designated as qualified to know, involves acts of power. For instance, the selective management of scientific knowledge in the government is a vital component in the manufacture of legitimate authority (Naughton, 2005; Foucault, 1972). Researchers form part of the regime of power/knowledge/truth for each society, because they constitute the space that produces, reproduces, legitimates and disseminates knowledge/discourse approved as true. Influenced by this work, some authors like Garland (2001)⁵, Walters (2003) and Moore (2008) supported the concept of *deviant knowledge* to make a distinction between knowledge upheld as sophisticated, relevant and useful, and knowledge upheld as marginalised, neutralised and disregarded by policy-makers. Thus, deviant knowledge refers to knowledge that is critical of the state crime-control apparatus or challenges the existing social and political order (Walters, 2003). As a result, these types of knowledge may be systematically neutralised or marginalised by social controls/powers (e.g. state controlled research institutions or funds). In other words, it is suggested that policy-makers may use techniques of neutralisation to rationalise their position choosing to neglect or dismiss findings which do not support their political agenda (see also the *political/tactical model*, §2.4.1.). These techniques can be contextualised within political frameworks (macro-level) and within day-to-day problems that researchers endure (micro-level). They include: the politics of winning grants and contracts; restricted and proceduralised access to information; negotiating and bargaining for independence; the use of contracts to legalise control and restrict academic freedom; censorship of written work; failure to publicly release research findings, etc. (Walters, 2003).

⁴ The work of Michel Foucault developed from the early text on madness ('Madness and Civilization') over the studies 'Order of Things' and 'Discipline and Punishment' to the final study of sexuality ('History of Sexuality'). The first period has been described as a period of *archaeological* investigations, while the later studies have been seen as *genealogical* analyses. This evolution considered a transformation from a descriptive/historical perspective on discourses towards a greater critical consideration of the interface between discursive and non-discursive practices and the power-knowledge nexus (e.g. why and how discourses occur).

⁵ With the publication of 'The Culture of Control', Garland (2001) pointed to some important currents of change in crime policy over the last 30 years: the decline of the rehabilitative ideal; the re-emergence of punitive sanctions and intensive control mechanisms; an increase in the emotional tone of crime policy as the fear of crime became a prominent cultural theme; the return of the victim; a focus on the protection of the public; the reinvention of the prison, etc. A focus on repression and punishment may therefore be considered as a resistance to the curtailment of their decision-making power by the power of the scientists, lobbyists or advisors. Populist language and a simplification or distortion of problems may influence the fear of crime and may raise expectations that the government is able to secure the citizens (Garland, 2001; Nelen, 2010b).

Likewise, in 'Whose Side Are We On?', Becker (1967) pointed to the notion of *hierarchy of credibility* to refer to the accepted view that any tale told by those at the top intrinsically deserves to be regarded as the most credible account. In other words, it refers to the fact that some people, especially those in socially responsible positions, have more power to define what is true than others (Goode and Ben-Yehuda, 1994). Thus, credibility and the right to be heard are differentially distributed through the ranks of the system. As a result, research taking into account the viewpoints of powerful groups ('superordinates') will be considered more true than research focusing towards the interests of subordinates (Becker, 1967). '*When a researcher tells the story from the perspective of the underdog and challenges the conventional, established, official view of a problem, and perhaps reveals the shortcomings, limitations of responsible officials in the policy, courts, etc. that story is inherently subversive in effect as it challenges the dominant power structure*' (Carrabine, et al., 2004, p.22). Therefore, Becker (1967) called for researchers to acknowledge their personal or political commitments and to be on their guard against any bias in their research. He concluded that '*Whatever side a researcher is on, he must use techniques impartially enough that a belief to which he is especially sympathetic could be proven untrue.*' (p.246). In fact, his central question 'Whose Side Are We On?' now resonates in the recent debate about the public engagement of scientists (Bloor and Wood, 2006).

Secondly, the debate about public engagement is associated with a heating up of the public and media discourse in relation to crime in recent years. Media are accused of failing to provide the public with objective and complete accounts of criminality and of distorting policy-makers' understanding of the direction of public opinion (Green, 2008). Barak's call for a **newsmaking criminology** aimed to encourage criminologists to share their knowledge with the general public through the media, to increase the public's exposure to overlooked crime topics, alternative perspectives on existing problems and informing and altering the discourses of crime, justice and punishment in order to influence the shape of policy (Barak, 2007; McLaughlin and Muncie, 2013). Within this framework, Groombridge (2007) argued that '*If criminologists don't do criminology in public – which means the media now – then the media will do it for them.*' (p. 473). Likewise, Henry and Milovanovic (1996) argued that criminologists must use media to ensure maximum impact of scientific knowledge on policy development. Criminologists can do this by '*actively challenging silences, identifying omissions and resurrecting the eliminated through participating in the making news stories about crime*' (p.216). According to Barak (2007) criminologists may take four roles: as an expert, as a crime reporter or journalist, as a subject or as a critic towards media representations. The concept of public criminology goes beyond the traditional concerns with the role of media, but this point may raise questions about the public role of scientists as well as the role of the media in the science-policy nexus.

While these issues show how interest in the public roles of criminology gradually developed, the concept of **public criminology** first emerged around 2007. Multiple calls have been launched arguing that, as criminology flourished in the academy, its influences on policy development as well as on public knowledge about realities of crime and justice seemed to be decreasing (Garland and Sparks, 2000; Currie, 2007; Chancer and McLaughlin, 2007; Tonry, 2010; Loader and Sparks, 2011). In other words, *'in times as ours when 'crime talk' flourishes, its voice seems – somehow, somewhere – to get lost'* (Daems, 2008; p.241). Loader and Sparks (2011) defined this situation as a *successful failure*. Some have argued that this marginalised role, in times when the need for criminological insight and understanding has become more and more urgent, is the result of both the diverse (pluralist) nature of the perspectives that criminologists have to offer and the lack of methodological rigour. In particular, a wide range of perspectives are represented in the field, as criminologists do not necessarily share a common language or theoretical perspective (Garland, 2011). This makes criminology rather vulnerable in a world of political scepticism (Dixon, 1995; Rock, 2010). Furthermore, Chancer and McLaughlin (2007) argued that criminological issues are often linked with electoral themes and therefore mediated and contested by a range of actors. Findings that are contradictory or out of touch with the needs of policy-makers may lead to confusion or so-called *endarkenment* (instead of *enlightenment*; see also below) (Weiss, 1986). From the perspective of the scientific community, Currie (2007) pointed to the increasing pressure to publish in peer-reviewed journals at the expense of efforts to disseminate findings towards a non-academic public.

Taking these issues into account, numerous debates have taken place exploring, defining, and addressing the varying roles criminologists may choose or have chosen to play in public work (Daems, 2008; Uggen and Inderbitzin, 2010; Tonry, 2010; Monaghan, 2014). In particular, several objectives and responsibilities of *public criminology* were advocated as a response to the challenges mentioned above (Rock, 2014). Most reflections on public criminology focus primarily on the discipline's contribution to the policy-making process (as an exception, Fichtelberg and Kupchik (2011) have studied the discipline's contribution to the public opinion at-large). Criminologists strongly differ in their opinions on public engagement, which range from a total absence from the public domain, the recognition of a dual role (being a participant in public and political debates as well as an independent producer of scientific knowledge), to positions as public intellectuals (Deflem, 2005; Chancer and McLaughlin, 2007; De Haan, 2008; Bauwens, et al., 2013). In other words, some supporters of *public criminology* say that criminologists, with an independent, academic agenda (i.e. not influenced by political statements, election programs, etc.), must become better at *communicating* findings to external audiences in order to overcome false representations in public and policy (Currie, 2007; Carrabine, et al., 2009) while others

advocate a strategic *call for action* which involves, for example, building up networks with policy-makers or journalists.

The latter school of thought is strongly criticised by those who believe that public criminology can be considered as an implicit call for a stronger embedded criminology, in which social scientists tend to conform to the realities of power and generally accept the definitions of politicians as to what constitutes the most serious social problems (instead of a focus on independent scientific progress). For instance, Allen (2007), De Haan, (2008) and Van Swaaningen (2009) warned that criminologists have already been increasingly bound to the state as a result of restructuring of research funding over the last decades. They argued that, from the early 1980s onwards, most social research has been conducted under contract to government departments and moulded to the needs or priorities of the funders to focus on facts (instead of on theoretical insights) and questions about *what works* (instead of *how it works*). Likewise, Walgrave (2008) stated that: *'Criminologists must be aware that governments use criminology as a menu. They choose what best satisfies their political hunger. They select out, or manipulate through selective financing, what they can use to support political options chosen beforehand. Very often, it is not criminology that is orienting policy, but policy that is orienting and canalizing criminology.'* (p.3). The most outspoken critic of public sociology (and thus public criminology) is Prof. Dr. Mathieu Deflem. He criticised the idea heavily by means of comparing it with a Marxist sociology oriented towards politics instead of science. The danger, as he stated, is sociology turning into political activism (Deflem, 2005). Despite these different opinions, there is consensus that *if* criminology is to play a role in shaping the public debate, a better understanding of the policy-making process is an important first step. This study aims to be a modest contribution towards this understanding.

This debate has further been animated by the publication of a book entitled 'Public Criminology?' (Loader and Sparks, 2011) and its reviews (Wacquant, 2011; Daems, 2011; Hammersley, 2013). Loader and Sparks (2011) avoided the debate between advocates or opponents by means of reflecting on the *sociology of criminological engagement*. They offered a subjective typology of modes of engagement comprising three *cool* types (the scientific expert, the policy advisor and the observer-turned-player) and two *hot* types (the social movement theorist/activist and the prophet) (Wacquant, 2011). Daems (2011) classified this as a distinction between *airco-criminologists* and *pyro-criminologists*.

Table 1: Typology of modes of criminological engagement

Types	Description
Scientific expert	The scientific expert focuses on the production and dissemination of scientific knowledge and does not go beyond infrequent participation in formal advisory structures. The scientific expert uses knowledge and methodological skills to answer questions of policy-makers in a nuanced and well-considered way.
Policy advisor	The policy advisor does a great part of their research on (short-term) contracts for the government, and perceives it as a responsibility to bring scientific knowledge to policy-makers through formal advisory structures or even informal contacts (behind the public scenes)
Observer-turned player	The observer-turned player takes up the opportunity to participate directly to the development of policy (e.g. as a representative of a Minister). This type is colloquially described as an expert who is getting his or her hands 'dirty'.
Social movement theorist	The social movement theorist colloquially supports a critical/alternative discourse placing knowledge and skills at the service of those who are marginalised. This type does not go beyond infrequent participation in formal advisory structures.
Lonely prophet	The lonely prophet focuses on theoretical engagement and the big picture while philosophising about social changes and movements. This type also does not go beyond infrequent participation in formal advisory structures.

Source: Loader and Sparks, 2011

Loader and Sparks (2010) further argued that each of these types of engagement allows simultaneous memberships of both groups: policy-makers and scientists. At the same time, it is acknowledged that one researcher may adopt different roles through his/her career. Their thinking about criminological engagement ended with the introduction of the concept of *democratic underlabouring*. This refers to an acknowledgement that in a democracy, criminological knowledge should compete with other discourses (as a participant in the policy-making process) but does not have the automatic right to guide policy. A more modest view with respect to the rules of politics and competition is supported. *Public criminology*, then, provides an articulation of the idea that criminology's purpose is to contribute to a better politics of crime and its regulation (Loader and Sparks, 2011; Tonry, 2010).

Notwithstanding the reference to criminology in their title, Loader and Sparks (2011) provided a useful account of the general engagements between (social) science and the policy-making process, especially in relation to this study. However, as a general comment on their work, even though Loader and Sparks acknowledged that scientific knowledge may be just one of many elements in the policy-making process, they focus on individual actors while ignoring the more fundamental institutional issues of the policy-making process (e.g. how policy is made) and scientific community (e.g. managerial make-up of the university, the overt and covert intrusion of

the concerns of politicians) (Wacquant, 2011). Furthermore, they lacked any reflection on how academics perceive and manage the relationship between their academic activities and policy-making. Academics also often seem to rely on extra-scientific means of persuasion which can jeopardise their credibility (Daems, 2008). According to Uggen and Inderbitzin (2010), it is important to be aware of *airport criminologists*. These scientists, public criminologists in particular, fly around as consultants and experts while losing sight of their scientific knowledge base (e.g. by means of misrepresenting their expertise). As such, providing accurate information may prove to be a challenge (Lackey, 2007).

2. Models of the science-policy nexus

Except for some recent (analytical) reflections within the framework of *public criminology*, there are few criminological precedents for an empirical study of the science-policy nexus (see also below, §3.3.). Given this scarcity, there has been a tendency and indeed necessity to borrow conceptual frameworks, particularly from political science and knowledge utilisation literature (Berridge, 2004; Brewster, 2014). This also applies to the case study. Accordingly, I first address some classifications in the diffuse concepts of *knowledge* and *evidence* (§2.1. and §2.2.). Second, I explore the ways the science-policy nexus has been conceptualised and assessed in early paradigms (§2.3.). These conceptualisations influenced some of the issues related to the types of knowledge utilisation which I will discuss in the following section (§2.4.). Subsequently, I examine existing models of the science-policy nexus, focusing on the policy-making process itself (§2.5.). Exploring *policy-making* is necessary to better understand how scientific knowledge is used and to identify the determinants of utilisation of social science research knowledge (Bekkers, et al., 2004).

2.1. Conceptual classifications in knowledge and evidence

In the relevant literature, the terms *knowledge*, *science*, *research*, *data*, *evidence* and *information* are often used interchangeably (Rich, 1997; Nutley, Walter and Davies, 2007). Definitions are therefore difficult and complex. A significant part of the evidence-based policy debate revolves around the way *evidence* is defined. In much of the literature, the term *evidence* is often reduced to *scientific knowledge* which informs or develops policy in a wide range of areas (health, education, criminal justice, etc.). In particular, scientific knowledge obtained through randomised controlled trials or systematic review is argued to be the gold standard approach. Reflecting on the concept of *evidence*, evidence-based policy is often seen as synonym for *science-based* policy. By contrast, some authors argued that *scientific knowledge* means just one form of evidence in the EBP account (Garretsen, Brouwersa and Van de Goora, 2010). Therefore, they stressed the role of other actors who inform the policy process. For instance, Head (2008) distinguished three

lenses of *evidence* on the assumption that the design, implementation and evaluation of policies involve three actors: policy-makers, scientists and professional practitioners. As a result, he mentioned political knowledge, scientific knowledge and practical implementation knowledge. *Political knowledge* concerns the know-how, analysis and judgment of political actors while *scientific knowledge* is the product of systematic analysis of current and past conditions and trends. *Practical implementation knowledge* refers to the practical wisdom of professionals in their communities of practice. According to Head, these three lenses may help to understand the evidence base of the policy debate (Head, 2008).

Additionally, there is considerable confusion between the concepts of *data*, *information*, *research* and *knowledge*. Lindquist (2001) distinguished data, information (or analysis) and knowledge (or science). *Data* is seen as raw material, *information* is considered as refined data which contains an added value to the user, and *knowledge* is information which has been validated. Bowen and Zwi (2005) distinguished research on the one hand and knowledge/information on the other hand. Here, *research* refers to empirical evidence, analytic studies, qualitative studies, case reports, etc. *Knowledge/information* stands for results of consultation processes with networks, published documents or reports (including policy evaluations and statistical analyses). Weiss also made a distinction between scientific knowledge and research. *Scientific knowledge* is defined as consensually accepted information by the scientific community, involving research evidence (Weiss, 1991; Brans, et al., 2004). *Research* is interpreted in the context of utilisation. She distinguished three types of research (ideas and criticism, data and findings, and arguments and briefs for policy action). *Research as ideas* is perceived to be more general. In this case, research is likely to be influential at the early stages of policy discussion. *Research as data* is described as taking a technocratic view of research, and is likely to be influential in situations of consensus. *Research as argumentation* takes an advocacy position and is used when a decision has already been made. Reimers and McGinn (1997) did not use the concept *scientific knowledge* but instead distinguished four *research* approaches, as they implied different questions, answers or purposes (Neilson, 2001). They distinguished academic research, planning research, instrumentation research and action research. *Academic research* tests hypotheses drawn from the conceptual framework and *planning research* uses statistical analysis to generate patterns of relationships among variables. Repeated trial and error methods in preparing a new curriculum is related to *instrumentation research*. Finally, the focus of *action research* is on outcomes rather than on knowledge of how to achieve them.

By contrast, Webber examined to the political dimension of knowledge with concepts like *political knowledge* and *policy knowledge* (Webber, 1991). *Political knowledge* consists of information

about public opinion, party competition, coalition strategy and ethical, ideological or political considerations of policy alternatives. *Policy knowledge* refers to technical, focused, systematic analysis of policy inputs and outputs of government and their effects on society. In other words, policy-makers need a broad range of knowledge that link together information and explanations from various domains (or subfields). Here, *research* competes with other types of information like policy-maker (personal) *knowledge*, journalistic *knowledge* and clinical *knowledge* (or practitioners' experience). Within this framework, several types of *research* are distinguished: policy research (i.e. studies that attempt to explain a specific policy), policy oriented research (i.e. studies not undertaken to study a problem but which have applications for explaining how a policy works) and disciplinary research (studies that contribute to academic knowledge in understanding the background within which a policy operates).

Despite these different theoretical classifications of knowledge and evidence, there is consensus that scientific knowledge is just one of many the types of information influencing the policy-making process (Davis and Howden-Chapman, 1996; Trostle, Bronfman and Langer, 1999; Hall, 2004; Brambila, et al., 2007; Lenton, 2007; Hughes, 2007; Daniels and Lewin, 2008; Hall, 2008; Monaghan, 2009; Macleod and Hickman, 2010; Hughes and Stevens, 2010). Even though the interpretation of *scientific knowledge* sometimes differs, it is generally perceived as something produced by the scientific community which may include (several types of) research as well as knowledge provided by scientists, for example in consultations. In this study I do not distinguish between types of scientific knowledge (e.g. data, information, knowledge) but I use the broad concept of scientific knowledge to refer to research on the one hand and knowledge of scientists on the other. Using a strict typology (e.g. between data, information, research and knowledge) may run the risk of oversimplification and is not easy to maintain in any empirical research of knowledge utilisation processes. It is unlikely that such complex typologies can be shared with any degree of stability during the study (Nutley, Walter and Davies, 2007). The intention to discuss scientific knowledge in general is also motivated by the fact that attaching these labels already involves a subjective act (e.g. when does data turns into information or knowledge?).

2.2. The concept of utilisation: process or outcome?

The claim that policy-makers should *use* the findings of scientific research is legitimate. But what is meant by *use*? Knowledge utilisation has been variously conceptualised following the diffuse interpretation of *knowledge* elaborated before: information utilisation, use of knowledge, research utilisation, knowledge utilisation or knowledge use. However, in general, I can make a primary distinction between utilisation as an *outcome* and utilisation as a *process* or, in other

words, between respectively *impact* and *utilisation* (Mulder, et al., 1991; Oh, 1997; Rich, 1997; Brans, et al., 2004; Dobrow, Goel and Upshur, 2004).

In many examples, researchers try to determine the direct effects and to establish causal links without trying to understand how scientific knowledge may have a particular influence (Carden, 2004). Utilisation as an *outcome* can be considered as a narrow and deterministic view on knowledge utilisation. The principle is that knowledge automatically produces an effect on a policy or decision. The underlying assumption is that if an idea/finding is good enough, it will be used (Nutley, Walter and Davies, 2003). Utilisation is considered as the specific (direct or rational) outcome of research on policy (Webber, 1991; Lampinen, 1992), and is therefore also called *impact* (cfr. EBP notion).

Utilisation can also be interpreted in a broad sense, whereby scientific knowledge may play a role in the process of policy-making rather than just in the outcome of policy formulation. From this perspective, researchers look out for any unexpected and more subtle, indirect ways in which scientific knowledge may seep into the policy-making process (utilisation as *process*). In other words, the main point of the *process* approach is that scientific knowledge has been received and read, and that information is judged to be relevant or valuable. It does not imply that action has been undertaken but rather that scientific knowledge in some way has contributed to a new or advanced thinking about a problem. For instance, Krastev (2000) and Neilson (2001) described utilisation as the power to change the prevailing paradigm. Such a broad definition refers to a more realistic approach of utilisation as a consideration with an indirect, more subtle impact (Rich, 1997).

This primitive distinction between utilisation as outcome or process can be linked with models of knowledge utilisation, respectively with the so-called *instrumental* (i.e. direct use of information in policy-making) and the *conceptual* use (i.e. delayed and diffused use of information in policy-making) of information (see also below, §2.4.1.). This study adopts the framework of utilisation as a *process*, as I am interested in the different modalities through which scientific knowledge may seep into the policy-making process (including Parliament as well as Government), not just in decision-making.

2.3. The two communities thesis

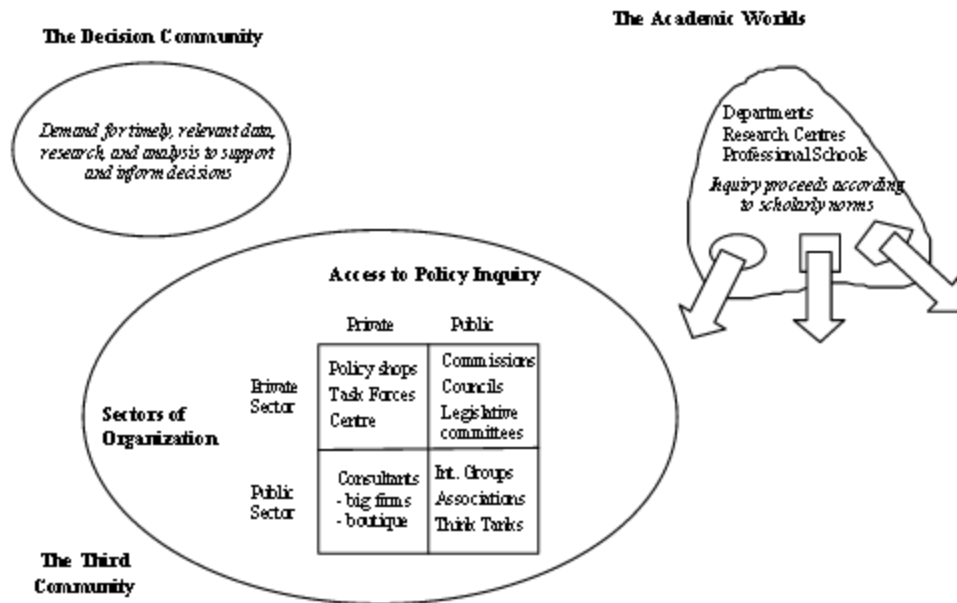
The earliest paradigm concerning the science–policy connection, developed by Caplan (1979), describes scientists and policy-makers as part of *two communities* with different world views, values, language, etc. separated by a huge gap. The two communities thesis has had a powerful

influence on the ways in which the relationship between science and policy has been and continues to be understood. The central principle of the thesis is that policy-makers rarely make use of scientific knowledge. Explanations for the failure of the connection between science and policy are dedicated to the gap between researchers and policy-makers.

Even though the two communities thesis has inspired the development of *knowledge utilisation* models (Weiss, 1979; Nutley, Walter and Davies, 2003; Landry, Amara and Lamari, 2001; Hoppe, 2005; see below, §2.4.1.) as well as *knowledge exchange* models (sometimes referred to as *knowledge translation/brokering* models)⁶ which aim to identify remedies for bridging the gap (Nutley, 2003; Brans, et al., 2004; Mitton, et al., 2007; Curran, et al., 2011; see also below, §2.6.), the two communities thesis has some important shortcomings. While it provided the basis for much thinking about the science-policy nexus, it utilises a rather simplistic model which ignores other actors (e.g. media, interest groups). It is indeed important to acknowledge that a different set of actors is involved in the policy-making process especially when studying how knowledge is (not) used in the policy-making process (Sabatier, 1998; Sutton, 1999; Kingdon, 2002) (see below, §2.5.). In a response to this critique of the two communities thesis, Lindquist (2001) introduced the concept *third community*. In an attempt to embrace more actors with an interest in policy, the *third community* includes intermediary institutions standing aside the knowledge producers (academic worlds) and knowledge consumers (decision community) such as think tanks, political consultants or advisers, commissions, councils, media or journalists.

⁶ *Knowledge exchange* literature is the general overarching concept, or according to Ottoson and Hawe (2009), a metaphorical umbrella. Both *knowledge translation* and *knowledge brokering* focus on particular elements of the exchange literature. In particular, knowledge translation refers to the translation of technical findings into more readily consumable language, while knowledge brokering focuses on the active mediators in the relationship between policy-makers and scientists (Goldfeld, 2010). Each of these concepts has to be distinguished from *knowledge transfer/diffusion* literature. *Knowledge transfer* literature applies a different focus: it is all about how and why certain ideas or policies spread internationally (Dolowitz and Marsh, 2000). This falls outside the scope of this study.

Figure 1: Third community model of Lindquist



Source: Lindquist, 2001

However, treating two or three communities as separate entities, still minimises the heterogeneity within scientists and policy-makers. Ginsburg and Gorostiaga (2001) claimed that a focus on communities can be seen as an ideal-type as it does not take into account simultaneous memberships of these groups (Monaghan, 2011). Researchers can potentially perform a variety of influencing roles within the policy process such as performing as experts or advisors (see also *public criminology*; Loader and Sparks, 2011). For example, both professors in criminology Petersilia (2008) and Stevens (2007b and 2011) worked in a government department for a particular length of time.

2.4. Knowledge utilisation typologies

As stated above, there has been increasing interest over the last decades in what has become known as the science-policy nexus. In the mid 1970's social scientists started to study the use or non-use of research in policy decisions (Webber, 1991; Weiss, 1995). Unlike the two communities thesis, several authors refused to accept the simple dichotomy between use and non-use, aiming to uncover alternative modes of knowledge utilisation (Landry, Amara and Lamari, 2001; Hoppe, 2005; Ottoson and Hawe, 2009). Various theoretical models described throughout the literature review go a considerable way in explaining why and how knowledge can be utilised.

2.4.1. Meanings of knowledge utilisation

Weiss, by far the most prominent author in this field, identified seven *meanings* (or *models of knowledge utilisation*): the *knowledge-driven* and the *problem-solving* model, the *political* and *tactical* model, the *interactive*, the *enlightenment* and the *intellectual* model (Weiss, 1979; Nutley, 2003). She believed that the utilisation of social sciences in policy development is a highly complex phenomenon that can be perceived in a large number of different ways.

Table 2: Overview of meanings of use

Meanings of use	outcome/process	Scientific knowledge is only guiding factor
Knowledge-driven	outcome	yes
Problem-solving	outcome	yes
Political	outcome	no
Tactical	outcome	no
Enlightenment	process	yes
Interactive	process	no
Intellectual	process	no

Source: adopted from Monaghan (2011)

The first two models, the *knowledge-driven model* and the *problem-solving model* apply a linear, instrumental approach. This approach represents the typical understanding of the science-policy nexus, which is based on the expectation that policy-makers will make direct use of scientific knowledge to make policies more effective. In this linear account scientific knowledge is considered to be the only guiding factor for policy-making, leaving aside the fact that utilisation also may involve issues of (political) power and media imperatives. It is clear that this idealised approach represents the central principles of the *evidence-based* or *what works* notion. The *knowledge-driven* model places scientific knowledge at the forefront, as an instrument to illuminate opportunities that are relevant for policy. For instance, in physical science, new scientific application may (immediately) contribute to policy. Examples of this model in the social sciences are rather scarce. More common (but still rare) is the *problem-solving* model. Where policy is already in place, scientific knowledge may help to select a promising policy response/solution or policy-makers may commission additional research to fill the knowledge gap.

The *political* and the *tactical* approach, characterised by the selective use of scientific knowledge to satisfy the short-term interests of policy-makers, also incorporates two models. Its underpinning is still linear and tends to focus on the policy-makers and not on other groups who also may be able to influence policy. In particular, in the *political* model scientific knowledge is considered as *ammunition* or *persuasion*. According to this principle, policy-makers will *cherry pick* scientific knowledge that supports their own position (Hope and Walters, 2008), while scientific knowledge that contradicts policy interests will be ignored (Klein Haarhuis, Hagen and Scheepmaker, 2009). For instance, scientific knowledge can be used to silence the arguments of the opposition or to support ideas that colleagues have adopted earlier (Lampinen, 1992). In the *tactical* model, however, policy-makers may use scientific knowledge merely as a *tactic* for delaying action or decision-making (Weiss, 1979; Nutley, 2003). For instance, policy-makers are able to postpone policy actions/decisions by stating that they are awaiting the results of ongoing research (Duke, 2003). Each of the examples where scientific knowledge is used in a political/tactical way are regularly termed as *policy-based evidence making* (in contrast with the EBP notion).

The *enlightenment* model implies that scientific knowledge may permeate policy-making indirectly (e.g. through media or interest groups) and gradually. The idea of scientific knowledge cumulatively influencing the climate in which policies are made is also sometimes called a *limestone* approach (Stevens, 2007a). In other words, the impact of research is like the action of water on limestone: it is not predictable where it will come out. The slow trickle of ideas that find their way into policy-making is also sometimes called *knowledge creep* (Willinsky, 2000). Thus, in general, this model offers a dynamic perspective of the science-policy nexus and it emphasises how research can be conceived as part of the process of policy-making (utilisation as *process*).

Scientific knowledge can also influence the policy-making process as part of an interactive search for knowledge. Policy-makers may search for information from social scientists as well as from administrators, practitioners, planners, journalists, interest groups, etc. Thus, the *interactive model* assumes that scientific knowledge is not the only factor influencing the policy-making process and believes that the relationship between policy and science is iterative, dynamic and long-term.

In the *intellectual* model, scientific knowledge is considered as a part of the intellectual pursuits of the society. Scientific knowledge is characterised as another dependent variable running side by side with policy, philosophy, journalism, history, law and criticism (Weiss, 1986). Science and policy influence each other and are both being influenced by the broader social context. For in-

stance, policy interests, stimulated by a wider social concern, may result in offering funding for research. Results may then shape ways of thinking by policy-makers and society in general (Nutley, Walter and Davies, 2007).

Weiss' knowledge utilisation typology has been applied widely as the central theoretical framework in many studies on the science-policy nexus. Even though these typologies may be very helpful in structuring data analysis and interpretation, some caveats need to be borne in mind. First of all, these models assume a voluntarist attitude of policy-makers and scientists: both have the intention to maximise the use of scientific knowledge. Of course, in reality such an approach rather ignores the institutional context of policy-making (e.g. party hierarchies) (Flitcroft, et al., 2011) as well as the levels of engagement of scientists (Haynes, et al., 2011b).

Secondly, utilisation cannot be readily classified in types: e.g. a single study may be used in different ways. These models have to be interpreted as parallel processes rather than contrasting classifications. Therefore, some authors started to view knowledge utilisation as a continuum rather than in terms of static types. Placing the types of utilisation along a spectrum, Greenberg and Mandell (1991) suggested a continuum across two dimensions: (1) a concrete/conceptual dimension (i.e. ranging from the use of findings to make decisions to the intangible and conceptual influence) and (2) a substantive/elaborative/strategic dimension (i.e. defining the extent to which research influences an action or serves to legitimate a decision). Nutley, Walter and Davies (2007) also supported the idea of a two-way continuum ranging from conceptual to instrumental uses of research. However, even though they recognise the dynamic nature of knowledge utilisation, they overlook the importance of strategic or political ways of utilisation. Finally, the *political/tactical* model leaves unanswered the question of what constitutes proper use. Some authors support the view that symbolic use reflects the *bad* use of knowledge while instrumental and conceptual use includes *good* ways of utilisation (Suchon and Dianmantopoulos, 1994). However, in general, the knowledge utilisation models only have been focused on addressing the selective ways of use and far less attention has been paid to *misuse* of scientific knowledge (Nutley, Walter and Davies, 2007).

Accordingly, some authors took on the task of refining Weiss' work on meanings of knowledge utilisation (Landry, Amara and Lamari, 2001; Nutley, 2003; Hoppe, 2005; Hoppe 2009). In many cases, these elaborations remained limited to the implementation of another terminology. For instance, Nutley (2003) identified four main types of knowledge utilisation. Next to the instrumental and conceptual use (comparable to Weiss' classification), they distinguish (1) *mobilisation of support* whereby research is an instrument of persuasion and (2) *wider influence*, which

refers to the impact of research for policy paradigms or belief communities. Nevertheless, it is clear that the first addition is strongly linked with the *political* model, while the second shows similarities with the *conceptual* or *enlightenment* model. However, some efforts have proved to be very fruitful in modelling the science-policy nexus.

Cross et al. (2000) further developed the *political* and *tactical* model with the introduction of the *status* model, which refers to the use of a well-stocked portfolio of commissioned research as a status symbol for policy agencies. Stevens (2007b and 2011) and Monaghan (2011) respectively developed the *evolutionary* model and the *processual* model, arguing that Weiss' models contain no information about how researchers get their research noticed by policy-makers and which selection mechanisms are used by policy-makers. According to Stevens (2011), this typology '*does not include issues of power in the filtering process through which research passes into policy and so does not predict systematic bias in the use of evidence*'. As both models are of particular relevance to the drug policy field, they are further discussed in chapter 2.

2.4.2. Chain of utilisation

A different set of typology interprets knowledge utilisation as an ongoing process incorporating a series of stages/steps, rather than describing the avenues through which modalities knowledge may be used. As an example, Dobrow, Goel and Upshur (2004) identified three *stages* of knowledge utilisation: (1) introduction of evidence (i.e. availability and accessibility of evidence), (2) interpretation of evidence (i.e. synthesis, evaluation and assessment of evidence) and (3) application of evidence (i.e. interpretation of evidence to support or justify decision). However, the most well-known stage model is that of Knott and Wildavsky (1980). The original scale consisted of 7 stages whereby the first four stages (reception, cognition, reference and effort) are related to individual activity. The other three levels were policy process accomplishments (adoption, implementation and impact) (Knott and Wildavsky, 1980).

Landry, Amara and Lamari (2001) further elaborated the scale, including six cumulative stages: transmission (inputs transmitted to policy-makers, stakeholders, citizens,...), cognition (inputs read, seen and understood), reference (inputs cited or referred to in public debate and policy deliberations), effort (policy-makers have made an effort to adopt recommendations), influence (results have influenced policy choice and decision) and application (results gave rise to implementation and elaboration in policy practice). Other scales (e.g. the Larsen information utilisation scale, the Hall stages of concern scale, the Hall levels of use scale, the Johnson evaluation utilisation scale, the Pelz and Horsley knowledge utilisation index, etc.) also adopt similar concepts and stages (Landry, Amara and Lamari, 2001; Ottoson and Hawe, 2009). Examining

knowledge use as various levels or stages in a *chain of utilisation* (Landry, Amara and Lamari, 1999) raises the idea of knowledge utilisation as a cumulative process in which, for instance, consistent conceptual use may stimulate instrumental forms of utilisation in the long run. Another benefit is that a scale operationalises knowledge utilisation as a complex process that goes through a number of stages. However, these stage models offer a strictly linear sequence (i.e. a next stage of utilisation can only be reached when the previous one is achieved) while utilisation is in fact often more iterative. Furthermore, they fail to uncover political/strategic uses of knowledge as well as the importance of context (Nutley, Walter and Davies, 2007).

2.5. Models of policy-making and knowledge utilisation

Numerous definitions attempt to cover the concept of *policy-making* (Devos, et al., 2009). For instance, Howlett and Ramesh (1995) pointed to '*a complex phenomenon consisting of numerous decisions made by numerous individuals and organizations in government. These decisions are often shaped by earlier policies and frequently are linked closely with other seemingly unrelated decisions*' (p.3). Kingdon (1995) defines this as a '*set of processes, including at least the setting of an agenda, the specification of alternatives from which a choice is to be made, an authoritative choice among those specified alternatives and the implementation of a decision*' (pp. 2-3). Although authors adopted different perspectives when defining policy-making, all of these definitions include the idea of a set of complex political processes or interactions of which the most crucial and final is the choice of a programme or solution to realise goals (Neilson, 2001). The complexity of the policy-making process refers to the different interests and diverse range of powerful players coming from different perspectives.

In the literature, some models conceptualise how the policy process works as well as the role that scientific knowledge might then play (Hanney, et al., 2003). These models of policy-making may be useful for understanding how science and policy may connect (e.g. use may differ on how the policy-making process is structured) and are thus largely linked with the knowledge utilisation typologies (Nutley, Walter and Davies, 2007). Generally, these frameworks or narratives are grouped in three (overlapping) accounts (Neilson, 2001; Carden, 2004; Stone and Maxwell, 2005; Nutley, Walter and Davies, 2007; Monaghan, 2009; Stevens and Ritter, 2013). This overview is not exhaustive; I focus on the most prominent models. As each of the models below has its limitations and specifications, it is interesting to note that some authors developed an alternative conceptual framework by combining elements from several of these models (Walt and Gilson, 1994; Trostle, Bronfman and Langer, 1999; Liberatore, 2001; Dobrow, Goel and Upshur, 2004). Given the overview of these models below, I will emphasise which elements have been providing input for the conceptual framework of my study.

Table 3: Overview of models of policy-making

Models of policy-making	Description
Authoritative choice (rational/vertical)	<ul style="list-style-type: none"> • Policy-makers as single actors confronting a problem • Scientific knowledge as instrumental • <i>Evidence based</i> policy-making
Structured interaction (horizontal/pluralist/political)	<ul style="list-style-type: none"> • Multiple participants and diffuse authority in the policy-making process • Focus on relationships and interactions • Influence scientific knowledge through participation in commissions, informal contacts, etc.
Narrative	<ul style="list-style-type: none"> • Processes of problematisation and social construction • Scientific knowledge is part of problem construction and framing

Source: adopted from Stevens and Ritter (2013)

2.5.1. Rational or vertical approach: policy-making as authoritative choice

The rational or vertical approach outlines policy-making as a problem solving process which is rational, balanced, objective and analytical. It assumes that policy-makers go through each logical stage of the process (agenda – alternatives – implementation – evaluation), and carefully consider all relevant knowledge (Sutton, 1999). It is also assumed that the authoritative policy *elites* (i.e. government officials) are the only actors involved neglecting actors external to the policy-making process (e.g. media, interest groups, ...). The role of the researcher is to research and present all of the policy options for policy-makers in order to encourage them to examine each of the options (Neilson, 2001). This common understanding of the way in which policy-making process works is consistent with *evidence-based* policy thinking. In this framework, the stage approach towards knowledge utilisation (i.e. *chain of utilisation*) as well as the instrumental models of knowledge utilisation (e.g. Weiss' knowledge-driven model or problem-solving model) have obtained significant importance (see also above, §2.4.4.). However, this *speaking truth to power* approach is subject to substantive critique: it is perceived as too simplistic, mechanistic sequential for the process of both knowledge utilisation and policy-making which is, in reality, much more arbitrary and complex. In other words, *truth* is contingent and *power* is dispersed and mediated by a wider set of actors (Hird, 2009). Additionally, some authors characterise this belief in technocracy as naïve in its assumption that objective knowledge can be produced (Fraser and Moore, 2011).

2.5.2. Political or horizontal/pluralist approach: policy-making as structured interaction

Alternative, so-called political/horizontal/pluralist approaches perceive the policy-making process as more diffuse as it involves bargaining, conflicts and negotiation and the *dispersal of au-*

thority/power through various spheres and levels of the political arena (e.g. in a country, policy-making is not restricted to the national level; regional and local government are also involved) (Monaghan, 2009). For instance, policy-making is not an authoritative process but a theatre where a variety of actors interact with each other (Stevens and Ritter, 2013). Accordingly, decisions can be seen as the outcome of the interplay between diverse participants. Scientific knowledge is just one of the sources used by these multiple stakeholders.

In this respect, knowledge utilisation may be more problematic or complex when compared to the rational model where utilisation is assumed. As will become clear, the political/horizontal/pluralist approach can be seen as an umbrella term covering various views on the nature of policy-making (and knowledge utilisation) (Neilson, 2001). Focusing on interaction and allowing the input of a range of (internal and external) actors in the policy-making process, this approach has also been termed *governance*. The concept points to the growing influence of non-state actors and thus, a policy-making process incorporating a greater range of players than those traditionally considered policy-makers (Weiss, 2000; Sanderson, 2009; MacGregor, Singleton and Trautmann, 2014). These accounts are consistent with my approach of the science-policy nexus.

Lindblom's **incrementalist model** (or the model of *muddling through*) is an early example of alternative approach of the policy-making process (and knowledge utilisation) (Lindblom, 1959). Policy-making is seen as an interactive process as this approach compels actors to share their interests and views amongst each other. In an attempt to reduce uncertainty, conflict and complexity, policy-makers take small incremental steps towards policy change (instead of fundamental, instrumental changes) (Neilson, 2001). In this respect, they tend to choose options that differ only marginally from existing policy (Sutton, 1999). Within this model, a greater role for (political) interest, values etc. is acknowledged; scientific knowledge can be one of the many sources that influence policy-makers. As the conceptual as well as political/tactical uses of knowledge fits with this *muddling through* process, this interpretation of policy-making contrasts sharply with the EBP movement. There are, however, some limitations to this model (Monaghan, 2009). For instance, the incrementalist model does not explain how ideas are selected to be put on the agenda ('agenda setting'). As this model only focuses on small changes to policy, another critique is that it leaves researchers just on the side-lines of the policy-making process (ignoring any intense involvement of scientists in the policy-making process, see also §1.3.; public criminology).

Kingdon presented the **multiple streams or agenda setting model**⁷ (Kingdon, 2002; Bekkers, et al., 2004; Devos, et al., 2010). Kingdon's model focuses on the flow and timing of policy action. It's the strength of this approach is that it helps to analyse why and how some subjects and/or alternatives are considered for the policy agenda (Kingdon, 2002; Nilunger Mannheimer, Lehto and Östlin, 2007). In particular, the stream model defines policy-making as the connection between three streams: the problem stream, the policy stream, and the political stream (Neilson, 2001; Brans, et al., 2004).

The *problem stream* includes the process of problem recognition. Various factors may focus attention on a problem or issue of concern and its importance. In other words, it focuses on the political recognition of policy problems where problems come to the attention of policy-makers (Radaelli, 1995). The *political stream* comprises elements such as the national mood, organised political interests and government through the influence by people, political parties and political ideologies, and can either include or exclude certain issues from the agenda. The *policy stream* refers to the process of the presentation of ideas, generated by a policy community, and the development of alternatives. Proposals may be selected on the basis of criteria like feasibility, harmonisation with dominant norms and susceptibility of politicians. Participants such as scientists are not directly involved in just one of the three streams but can be involved in each of them. Thus, research must be completed in order for policy-makers to pay attention to their ideas, proposals and solutions. Knowledge utilisation is rather unpredictable and may enter into policy-making from a variety of different sources.

The key to understanding agenda setting lies in the connection between the three streams. When this connection occurs, Kingdon spoke of the opening of a *window of opportunity* (Bekkers, et al., 2004; Nilunger Mannheimer, Lehto and Östlin, 2007). At such moments, *policy entrepreneurs* (e.g. individuals championing a particular solution or intervention) may play a particular role in forging the connection. Sometimes a window closes when the problem is assessed as solved, or when there is a change in government. Because of its dynamic, unpredictable view of the policy-making process and knowledge utilisation, this model fits with the *enlightenment* model, in which scientific knowledge may gradually influence shifts in thinking or ideas (Nutley, Walter and Davies, 2007). A general drawback of this model is that little account is given to the actual minutiae of the policy-making process and, in particular, the conflict that occurs in the political arena (Monaghan, 2009). Additionally, as windows of opportunities for policy change

⁷ This model is based on the garbage can model developed by Cohen, March and Olsen (1972). The garbage can model assumes that decision-making is neither rational nor incremental and supposes rather coincidental congruence between problems, solutions and choice opportunities.

open infrequently and briefly, the impact of research on policy needs to be evaluated over a long time period (Lenton, 2004).

Unlike Kingdon, who focused on how issues arise onto the legislative agenda, some modelling is concerned with the ways in which **power and influence** are exercised in policy (Foucault, 1972; Dissanayake, 1992; Ritter and Bammer, 2010). For instance, there may be many mechanisms used by policy-makers to influence the distribution and consumption of research (e.g. making administrative difficulties; requesting to rewrite sections of the report; delaying the release of the findings, etc.) (Walters, 2003).

Weiss (1999 and 2001) developed an iterative model of policy-making about the influence of Ideology, Interests, Information, and Institutional rules in policy-making. She acknowledged that as research findings move into the policy-making process, they are shaped by, and have to contend with competing beliefs and values (Lindquist, 2001). The distribution of power determines whose ideology, interests, information and institutional rules will be dominant. By *ideology* Weiss meant policy-makers' basic values, political orientation, principles, etc. that underlies their approach. Policy-makers are expected to act in accordance with their political ideology. *Interests* reflect for the most part self-interests like re-election, budget increases,.... *Institutional* matters refer to the organisation and context where policy-makers function, and may set powerful constraints on what is possible. *Information* may include research evidence, personal experiences, anecdotes, media reportage, etc. Scientific knowledge is just one type of information, competing with other types of information as well as ideology, interests and institutional rules (Weiss, 2001). The ways in which groups (including politicians, practitioners and researchers) represent their membership, their relative power and influence are key to understanding policy-making process. In sum, power, ideology and interests often stand in the way of scientific knowledge being influential (Weiss, 1999; Ritter and Bammer, 2010).

While the models above still focus on the centrality of the policy-making process (and thus have a stronger link with the rational/vertical approach), **policy networks models** have a more pluralist account, being concerned with the powerful role played by a wider range of actors. Networks are considered an important means for enabling and encouraging knowledge and information sharing. Analysis of policy networks may be particularly useful as it illustrates how groups both influence the policy process and reflect the relative status and power of the various interests (Duke, 2003). In terms of knowledge utilisation, this model suggests that scientific involvement is important for knowledge utilisation as they may feed more directly into the policy-making process. In other words, policy networks models can be seen as related to Weiss' inter-

active model (Hanney, et al., 2003). The concept of policy network is used as a label for the different types of involvement. Four types of networks are distinguished in the literature: (1) issue networks, (2) epistemic communities, (3) policy communities and (4) advocacy coalitions. They may be conceived as on a continuum differing in terms of level of integration, type of membership and the role that scientists may play (Sutton, 1999; Neilson, 2001; Nutley, Walter and Davies, 2007).

An *issue network*, initially put forward by Hecló (1978), is characterised by participants with conflicting interests and little consensus in terms of problem definition or the outcomes of policy interventions (Nutley, Walter and Davies, 2007). It is their (non-professional) knowledge of the issue that makes them an expert in the area under debate and that binds this kind of network. Issue networks are the least integrated type of policy networks. They are characterised by a large number of participants and members are free to participate and leave almost at leisure (Monaghan, 2009).

An *epistemic community*, defined by Haas (1992), is considered as a network of professionals with recognised expertise in a particular domain or issue area. Scientific knowledge is the key variable defining epistemic communities (Radaelli, 1995). Policy-makers turn to epistemic communities for advice when faced with uncertainties or sensitive matters. In other words, this approach focuses on expert actors in the policy-making process who share their belief in the legitimacy and value of bodies of knowledge in supporting policy-making. Knowledge is their source of power in shedding light on a problem as well as developing policy (Nutley, Walter and Davies, 2007).

Policy communities, emerging in Kingdon's policy stream, consist of specialists from a range of backgrounds both inside and outside the policy-making process (e.g. interest groups, practitioners, scientists,...). While epistemic communities coalesce around expertise and scientific authority, policy communities are based on common understandings of problems or the policy-making process in a policy domain. They operate independently of the wider political sphere (Nutley, Walter and Davies, 2007).

Advocacy coalitions, a concept based on the advocacy coalition framework (ACF) of Sabatier and Jenkins-Smith, consist of people (elected and agency officials, interest group leaders, researchers, media etc.) who share a set of basic values, causal assumptions, and problem perceptions (Sabatier, 1998). Coalitions are characterised by three belief systems: deep core, policy core and secondary aspects. The *deep core* system is comprised by basic ontological and normative be-

liefs, the *policy core* is basic commitments and causal perceptions across the entire policy domain, and *secondary aspects* concerns narrowly held beliefs concerning the seriousness of the problem. Deep core beliefs are very resistant to change while secondary beliefs are most conducive to change. This model assumes that coalitions seek power to translate its core beliefs into policy. Usually, two or four coalitions are part of the political system at any given time. According to this approach, policy change occurs through the interaction between wide external changes or shocks to the political system and the success of the ideas in the coalitions, which may cause actors in the advocacy coalitions to shift allegiances (John, 2003). Here, the goal of science may not be to directly influence policy but rather to improve the quality of the debate or evidence and introduce a shift in beliefs (which is partly linked with the *enlightenment* model) (Sabatier, 1998).

2.5.3. Policy-making as a narrative

Perceiving policy-making as a narrative directs attention towards processes of problematisation (e.g. how the problem was defined and understood? By whom?). Within this framework, policy-making is seen as an arena where variety of actors contest meaning, and scientific knowledge may contribute to the construction of the problem (Hajer, 1995; Bacchi, 2009; Fraser and Moore, 2011; Stevens and Ritter, 2013; Lancaster, 2014). Such a social-constructivist perspective (e.g. policy is constructed through language and discourses of several actors) is adopted by the policy narratives model.

The policy narratives model sees the policy-making as a process constructing a problem rather than responding to a problem. In particular, it emphasises how language or discourse shapes the policy agenda (Roe, 1991). In this model, centrality is not given to external events that cause policy change, but rather how these events are perceived. The stories or discourses help to simplify complex issues on which policy-makers can base their decisions. Such stories even persist in the face of empirical evidence to the contrary: counter-narratives are necessary to counter policies (Sutton, 1999; Neilson, 2001). Using a policy narrative model may help to gain a deeper understanding of how policy is made and which discourses arise, compete and emerge, but is less informative about the perceptions of policy-makers and/or scientists as to whether or not scientific knowledge is (not) used in the policy-making process, which is focus of this study (Neilson, 2001; Bak Jørgensen, 2011).

2.6. Knowledge exchange/linkage models

Following along the lines of the earliest paradigm concerning the science – policy nexus, the two communities thesis, models were developed about how to bridge the gap between both. Although clearly related to the models of knowledge utilisation (the importance of interaction or exchange between both worlds, for example, fits well with the interactive model of Weiss), these models focus on knowledge exchange and linking, or in other words, the role of boundary organisations/arrangements (e.g. consultancy, advisory boards, etc.) and the policy-making process rather than types of knowledge utilisation as such (Lomas, 2000). In other words, their starting point is the view that there is a missing connection between science and policy.

Knowledge exchange/linkage models describe a continuum of boundary arrangements endorsing three principles: (1) primacy of policy (e.g. politicians have the first and the last say), (2) primacy of science (e.g. science dominates politics; policy-makers are dependent on scientific procedures, techniques and thinking) and (3) dialogue or debate between science and policy. Even though these models (and terminologies) are rather confusing and overlapping, I tried to reconstruct the most important elements alongside two axes: primacy versus dialogue (Wittrock, 1991; Hoppe, 2005; Hoppe, 2009; Smet, 2013).

Table 4: Models of knowledge exchange/linkage

Primacy (linear)	Dialogue (interactive)
Primacy for policy <ul style="list-style-type: none"> • bureaucratic model • organisational interests model • engineering model • demand pull model 	<ul style="list-style-type: none"> • advocacy models (adversarial model; dispositional or discourse coalition model) • learning models (model of pure learning; coping model)
Primacy for science <ul style="list-style-type: none"> • science push model • dissemination model • enlightenment model • technocracy model 	

Source: adopted from Hoppe (2005); Landry, Amara and Lamari (2001); Smet (2013)

In general, according to the principle of primacy, utilisation follows a linear sequence from supply of research advances to utilisation by policy-makers and practitioners (*rational or linear model*, see also §2.4.1.). Supporting **primacy of policy**, I generally distinguish the bureaucratic model, the organisational interests model, the engineering model and the demand pull model. In the *demand pull model*, knowledge utilisation depends only on the needs of the politicians. The

more researchers try to focus on the needs of policy-makers, the more their research will be used (Landry, Amara and Lamari, 2001; Ottoson and Hawe, 2009; Cherney and MacGee, 2011). It is clear that the emphasis lies on instrumental/rational use of scientific knowledge. A variant of the demand pull model is the *organisational interests model*. This model assumes that organisational structures, rules and norms are essential determinants of knowledge utilisation (Lampinen, 1992; Oh, 1998). Thus, research needs to fit with these issues in order to guarantee a problem solving policy-making process which is rational, balanced, objective and analytical. Furthermore, political responsibility and divergence between politics and science are considered in the *bureaucratic model*. In this model, the recruitment and mobilisation of expert knowledge from society to policy is highlighted. Here, scientists are often incorporated into state institutions and loyal instrumental input is promoted (Hoppe, 2005; Hoppe, 2009). In a similar vein, the *engineering model* stresses political responsibility. However, unlike the bureaucratic model, policy-makers are on top and experts on tap. Scientists are less formally bound to the government. Instead, policy-makers formulate knowledge questions and assign detailed research projects to scientists. Even though the gap between both communities is bridged through contracts/projects, policy-makers still manage the priorities and funding of these research programmes (Wittrock, 1991).

Primacy of science is considered in several other knowledge exchange/linkage models. The *science push model* stresses the supply of advances in research findings as the major determinant of knowledge utilisation. In other words, the central assumption is that scientific knowledge as such (and its quality or content) is the determinant of knowledge utilisation in the policy-making process. A variant is the *dissemination model*, which analyses knowledge utilisation with the recourse to two determinants: the types of research results and the dissemination effort (Landry, Amara and Lamari, 2001). Furthermore, the *enlightenment model* emphasises a gap between politics and science and opts for primacy of science. Knowledge slowly trickles down to the political domain. Politicians walk in darkness and scientists in daylight; science is crucial for progress. However, it is still the decision of politicians to use scientific knowledge. Scientists reject any responsibility for knowledge exchange, dissemination or application. Finally, primacy of science and strong convergence between science and policy characterise the *technocracy model*. As their goals are the same, scientific knowledge holds the power and politics legitimises it. In this model, scientists act as administrators or central policy-makers on vital positions of power.

Some models do not presuppose primacy but **dialogue**. The emphasis on dialogue or debate between science and policy suggests that knowledge utilisation depends on various interactions between researchers and users rather than on linear sequences. The more sustained and intense

the interaction between researchers and users, the more likely there will be utilisation. This approach explains utilisation by types of research and scientific disciplines, needs and organisational interests of users, dissemination and linkage mechanisms (Landry, Amara and Lamari, 2001; Ottoson and Hawe, 2009). In the literature, they speak of advocacy models and learning models (Hoppe, 2005; Hoppe, 2009).

The *advocacy model* considers the societal functions of politics and science as analogous but divergent. This model includes two approaches: the adversarial and dispositional approach. In the *adversarial model*, scientific arguments serve as political ammunition to improve the quality of the political debate. In other words, science is part of the political struggle in which scientists advocate for a particular policy direction. The role of science in the *dispositional or discourse coalition model* is to provide (new) concepts which may function as conceptual bridges between knowledge and policy. Boundary arrangements are made by means of producing texts, documents, procedures, overlapping memberships by experts and policy-makers, etc. Several coalitions exist and each of the coalitions in a given policy area share a particular discourse or belief system (cfr. advocacy coalition model of Sabatier, see above, §2.5.2.).

In the policy-oriented learning models, politics is a forum for debate (and not an arena, as in the advocacy model). Convergence and dialogue are more important than in advocacy models (Brans, et al., 2004). All actors, even policy-makers, are considered scientists, in a sense, engaged in a process of social learning through social debate. Two learning models are distinguished: the model of pure learning and the coping model. The *model of pure learning* considers the policy process as a sort of research process. First, a policy or policy program is viewed as a set of hypotheses about the causal links between certain (collective, organisational) acts and a specified (desirable) future state of affairs. Second, policy-making is social experimentation: close monitoring of the degree of goals achievement can help to eliminate errors gradually. Finally, policy-makers evaluate the problem-solving capacity of policy programs. In the *coping model*, the focus is on interactive processes of problem coping. Policy change is considered as a search process through trial-and-error, threatened by the political inclination to try and the political constraint not to fail. While policy-makers, interest groups and the public primarily rely on their common sense, only from time to time they allow scientists to have an input (Wittrock, 1991; Hoppe, 2005; Hoppe, 2009).

3. Empirical research unravels conceptual models and relationship problems

Since the end of the 1960s, various scientists have attempted to conceptualise the science-policy nexus into models (Schryer-Roy, 2005), as I discussed in §2. Later on, empirical study began on the relationship between science and policy. In particular, social scientists started reviewing the policy-making process in an attempt to map and increase the uptake and use of their research by policy-makers. Before I discuss the results of those studies, I must investigate the underlying (conceptual and) methodological issues and characteristics.

3.1. Product versus process design

The 1970s and early 1980s can be judged as the starting point of empirical study of and thought on knowledge utilisation (Bogenschneider and Corbett, 2010). Scientists gave a great deal of thought to the way policy-making was done and how scientific knowledge fit into the policy-making process. Following the early theoretical assumptions elaborated in detail above (Caplan, 1979), many early studies viewed knowledge utilisation as a linear pipeline from knowledge producers to knowledge users, an *instrumental* process whereby findings will be used directly by policy-makers to adapt their policy or to take action (*outcome or product design*). Furthermore, there was little recognition that policy-makers had to take into account other knowledge from other sources. Although this is a reductive approach, many of the researchers who worked on the original empirical studies held such beliefs. These early international studies were skewed strongly towards quantitative research methods, thereby focusing on surveys among policy-makers and/or scientists or bibliometric analyses of academic citations in policy documents.

Through these early studies, researchers were finding that research was not having much influence on policy decisions. Many disillusioned scientists published articles in professional journals bemoaning the neglect of their work. Along with these concerns came the recognition that measurements of research *impact* cannot be limited to examples of direct, instrumental use of research within a single decision point. Neither can it rely on the traditional mechanisms of measuring academic success, such as academic citations or publications and memberships of advisory groups (Brambila, et al., 2007).

In the past decade, many researchers have sought to use methods which better reflect the reality of the policy-making process and the dynamic role that research plays within it (Ritter and Lancaster, 2013) (*process design*). Leaving aside some exceptions (e.g. Landry, Lamari and Amara,

(2003) who examined knowledge use as various levels or stages in the chain of utilisation; Mulder et al. (1991) preferred to analyse and count references in policy documents), many authors (i.e., Webber, 1991; Weiss, 1995; Rich, 1997; Oh, 1997; Elliot and Popay, 2000; Linquist, 2001; Ottoson and Hawe, 2009) left the strict focus on the rational/instrumental model of policy-making, with its positivistic epistemological foundation, and became sympathetic towards the emerging view that recognises the roles of knowledge and context, and acknowledges the difficulties in reconciling them in the context of policy-making processes (O'Dwyer, 2004; Brambila, et al., 2007). Therefore, an interactive approach, linked to interpretivism and the critical paradigm, was recognised as a better approach to the science-policy nexus (Hunter, 2009). Equally, regarding utilisation as a process (instead of utilisation as outcome), use may mean that information has been received and read, that information is judged to be relevant or valuable. In other words, as with the *enlightenment* or *conceptual* model, this does not imply that information has been understood and that action has been undertaken but rather implies that information in some way has contributed to a decision, an action or thinking about a problem (Rich, 1997). Gradually, the perspectives of and the interactions between policy-makers, as well as researchers and the third community (e.g. media, think tanks,...), were also integrated. They argued that the dichotomous construction of the science-policy nexus as *two communities* is not useful in analysing and understanding how and when knowledge is used by policy-makers (Brans, et al., 2004; Bacchi, 2008). Parallel to these reconsiderations came a rethinking of methods for studying research use. Scientists began to realise that the fixed survey form, with its fixed questions and constrained choices of answers, was not necessarily the only way to go. As a consequence, scientists increasingly favoured qualitative inquiry and interviews in particular (Linquist, 2001; Carden, 2004).

3.2. Methods for studying the science-policy nexus

As a result of the changing conceptual framework, a variety of methodological approaches has been employed to measure knowledge utilisation in the policy-making process. I distinguish surveys, documentary analysis, case studies, narrative analysis, interviews and ethnographic studies.

A common method to measure knowledge utilisation is a **survey**, which asks respondents (at different levels of the government, in different positions of power) to provide what information they acquired and used (Sorian and Baugh, 2002; Klein Haarhuis, Hagen and Scheepmaker, 2009). Surveys may lead to observation of a large number of individuals, at all stages of knowledge production and utilisation. (Landry, Amara and Lamari, 1999; Smet, 2013). A survey may also help to measure the extent of knowledge utilisation. For instance, Caplan (1979) sur-

veyed 204 policy-makers about the extent of their interactions with scientists while Landry, Lamari and Amara (2003) conducted a mail survey of 833 government officials from Canadian government agencies. In another study, a survey of 292 policy-makers was used to determine policy-makers' formal and informal methods of acquiring information about health policy issues (Sorian and Baugh, 2002). Some studies explored the views of researchers (instead of policy-makers): Cherney and McGee (2011), for example, replicating the study of Landry, Lamari and Amara (2003), surveyed 1,229 Australian academic sociologists and criminologists about the different stages of utilisation of their research. In a recent Belgian study about the use of social science in the policy-making process, both policy-makers (97) and social scientists (641) were surveyed (Smet, 2013). In each of these studies, respondents could say 'strongly agree', 'mostly agree', 'mostly disagree', or 'strongly disagree'; they could give a numerical response; or provide other short-form answers. An important critique on this self-report method is that respondents use their own definitions of use (Rich, 1997). Other important limitations are that respondents may tend to reply in a manner that will be viewed favorably by others (social desirability bias) and that the statements about (indirect) knowledge utilisation cannot be measured accurately (Weiss and Bucuvalas, 1980; Landry, Lamari and Amara, 2003; Klein Haarhuis, Hagen and Scheepmaker, 2009; Smet, 2013).

Analysing (policy) documents/reports (e.g. content/discourse analysis, citation/bibliometric analysis) is less prevalent as single method (Rich, 1997). As the availability of such information is usually very limited, documentation is more often used as background information (Elliott and Popay, 2000; Lindquist, 2001; Daniels and Lewin, 2008; Dobrow, Goel and Upshur, 2006). However, some authors supported the usefulness of document analysis as a single method, especially when a variety of documents is involved such as (1) documents including discussions, debates or conversation, (2) documents including formal articulations of policy and (3) media documents (Ritter and Lancaster, 2013).

Methods of (in-depth) **interviewing** are often used to reconstruct processes and depict nuances of knowledge utilisation (Trostle, Bronfman and Langer, 1999; Elliott and Popay, 2000). In particular, interviews may help to explain the perceptions of policy-makers and/or researchers as to the extent to which scientific knowledge informs public policy (Neilson, 2001). In most cases, only officials from different levels and hierarchies are interviewed (Linqvist, 2001; Carden, 2004). Researchers from different institutions and other relevant actors (i.e. journalists, members of interest groups, practitioners) are less frequently interviewed in order to understand the science-policy nexus. Exceptionally, Trostle, Bronfman and Langer (1999) interviewed 67 researchers and policy-makers from different institutions and levels of responsibility in order to

examine the relationship between health research and policy. Similar, Elliot and Popay (2000) conducted 28 interviews with lead health authority managers, researchers and community development workers. Haynes et al. (2011b) focused only on researchers, interviewing 36 peer-nominated and highly influential Australian public health researchers.

Most authors agree that **case studies** are the approach best suited to understanding the science-policy nexus (Carden, 2004). Case studies allow to answer *how* and *why* questions whereas surveys or other methods mainly help to answer *what* questions. Although case studies lack external validity, a this approach is chosen most frequently (Elliott and Popay, 2000; Landry, Amara and Lamari, 2001; Brans, et al., 2004). In most studies, a number of cases are selected where there is at least some interaction between researchers and policy-makers. For example, in their study on the impact of research on migration on public policies, Brans et al. (2004) selected two policy domains: (1) education and (2) labour market. Bak Jørgensen (2011) selected the migration policy of two countries as two cases, comparing the role of expertise in migration policy in Denmark with that of Sweden. Furthermore, the WODC (Wetenschappelijk Onderzoek- en Documentatiecentrum) as well as the IDRC (International Development Research Centre) conducted a study about the utilisation of research results originating from WODC or IDRC projects (Carden, 2004; Klein Haarhuis, Hagen and Scheepmaker, 2009). The IDRC study, for instance, addressed what constitutes policy influence, to what degree and in what ways research has influenced policy and what factors and conditions have facilitated or inhibited the potential to influence policy. Twenty-five case studies were the heart of the strategic evaluation: they concerned a literature review; a review of project reports and programming documents; an inventory of evaluations conducted; and interviews with senior staff (Linguist, 2001; Carden, 2004).

Few studies examine the science-policy nexus from a **narrative analytical** perspective (Rich, 1997; Oliver, et al., 2014), however, such an analysis could assist in studying how discourses can be identified as ways of defining and analysing problems. Some examples, however, considered how scientific discourse has influenced how policy is made and which policy discourse is adopted. Their approach was to analyse the effects of discourse (instead of to the content or sources of the text). For instance, Bak Jørgensen (2011) focused on the role of social scientists in the social construction of policy narratives about migration, particularly its influence on agenda setting and conceptual rethinking of immigrant integration policies. In a similar vein, Jacob (2006) analysed the utilisation of two academic narratives about innovation policy in policy discourse by examining policy representations of the problem issued by one Swedish agency. Lastly, Hoppe (2009) explored the extent to which policy-makers' discourses do (not) show similarities to the academic typology of boundary work.

Finally, and even more exceptionally, an **ethnographic study** of the use of evidence in policy-making has been conducted (Petersilia, 2008; Stevens, 2011). As policy process is typically examined through analysis of its outputs or accounts given by policy-makers, there is a real paucity of direct examination of the policy process. To illustrate, Petersilia (2008), working as a policy advisor on correctional reform in California, observed the work of colleagues and their interactions with other special advisers to the Californian Governor.

3.3. Focus on health domain

The science-policy nexus can be considered an overarching theme that is of interest in many countries and many policy domains (Estabrooks, et al., 2008). As a result of the growth of the concepts of *evidence-based medicine* and *evidence-based practice*, it is somehow logical that most empirical studies on the interface between policy and knowledge focus on the **health (clinical) domain** (Harries, Elliott and Higgins, 1999; Tomson, et al., 2005; Gagliardi, et al., 2008; Hyder, et al., 2011). Common policy themes where the science-policy nexus is studied include cancer screening, AIDS, cholera, family planning, immunisation, mental health, social care, surgical intervention. The research focus mostly lies in the translation of findings and links among researchers and policy-makers, including the mechanisms which facilitate or impede knowledge utilisation (Davis and Howden-Chapman, 1996; Harries, Elliott and Higgins, 1999; Sorian and Baugh, 2002; Trostle, Bronfman and Langer, 1999; Tomson, et al., 2005; Brambila, et al., 2007; Daniels and Lewin, 2008; El-Jardali, et al., 2012).

More recently, the interface between policy and knowledge has also been studied in social, economic and environmental policy domains (Carden, 2004; Hoppe, 2009). In this study, I am for the most part interested in the efforts on the **criminological domain**. Leaving aside the valuable analytical reflections of, for instance, Chan (1995), Loader and Sparks (2011), in the (public) criminological field, the complex relationship between science and policy, as well as the engagements of scientists in the public and political domain, are rarely approached from within or exposed to profound observation by criminologists (Tonry, 2010; Wacquant, 2011). Or, as Loader and Sparks (2011) argued: *‘Studies of the recent political uses of knowledge are much needed in the field of crime and punishment and [...] acquiring a working understanding of the ‘contexts of reception of criminological knowledge (and how they are structured and operate)’ is essential to effectively gearing criminology and policy.’* (p.12). All too often, criminologists have been observers after policies are decided and implemented instead of examining to the so-called *black box* of the policy-making process, where the formation of these policies takes place (Rock, 2010). Attention to public and policy processes is too rarely given, probably due to the methodological

complexity of studying the science-policy nexus (Ritter and Lancaster, 2013) and the fact that criminological issues have a rather high symbolic content (Brereton, 1996).

However, I have found some exceptions addressing topics like criminal (juvenile) justice policy (Brereton, 1996; Marston and Watts, 2003; Petersilia, 2008; Freiberg and Carson, 2010; Devroe, 2010; Vande Walle, 2010), the emotional well-being of young people (Ottoson and Hawe, 2009) and migration (Brans, et al., 2004; Scholten, 2011). While drug policy has also shared these tendencies (Berridge, 2002), studies about the science-policy nexus in the drug policy area are discussed in detail in chapter 2.

In a context in which migration issues are often thought of in terms of security and social problems, the issue of the linkage between science and policy has become topical. For instance, in the UNESCO MOST (Management of Social Transformations) programme, the purpose is to transfer relevant social science research findings and data to policy-makers and other stakeholders. As a result, this programme established a number of research projects in several countries (Brans, et al., 2004). In Belgium, a research project was funded by the Belgian Federal Science Policy Office and aimed to evaluate the impact of research about migration on public policies. It measured the extent to which policy design in the field of migration has rested on the results of scientific knowledge (in agenda setting and policy formulation); the role of researchers in the implementation of policies in the field of migration (policy implementation); and how knowledge utilisation between scientists, policy-makers and stakeholders may be improved (Brans, et al., 2004). The project has followed the framework of inquiry suggested by UNESCO research programme and used, among others, the agenda setting theory of John Kingdon (1995).

Scholten (2011) also examined the science-policy nexus in the context of the development of immigrant policy. He focused on the role of research in Dutch policy structures by distinguishing between various models of knowledge utilisation (Weiss, 1979). The central theme of his work was the relationship between various structures of science-policy nexus and the framing of immigrant integration policy in the Netherlands over the past three decades. As a final example, Bak Jørgensen (2011), adopting the policy narratives model, investigated the role of expert knowledge in migration policy in Denmark and Sweden.

Some studies have analysed the use of research evidence in criminal (juvenile) justice policy, particularly in the field of crime prevention (Farrington, 2006; Freiberg and Carson, 2010; McNeill, et al., 2012). First of all, Brereton (1996) studied the role that scientific knowledge can play in shaping policy and practice in the Australian criminal justice system, focusing on the

mechanisms of the policy process as well as the utility of scientific knowledge. Marston and Watts (2003) criticised the emergence of the evidence-based policy discourse in Australia by examining the foundations of the evidence-based claims in policy documents or reports concerning criminal juvenile justice policy. Furthermore, by means of an analytical assessment of the youth justice programme, Goldson (2006) also tried to find out if the policy-making in the youth justice sphere is evidence-based. Furthermore, Brants (2002) studied the use of criminological empirical studies and theories in election programs of political parties in the Netherlands. As a *public criminologist* (contributing to the inner workings of state government), Petersilia (2008) studied the relationship between research and policy on the California prison reform, specifically about how criminologists can utilise knowledge to influence policy choices.

Finally, even though the interest in studying the science-policy nexus in Belgium is rather limited, three relevant Belgian initiatives are worth mentioning. Vande Walle (2010) studied the use of evaluation studies in the Belgian criminal justice policy-making process, reflecting on the models of Weiss (1979), while Devroe (2010) analysed the knowledge base of the Belgian criminal justice policy over a period of 15 years (between 1995 and 2008). Smet (2013) examined the extent and nature of the utilisation of social scientific research in general in Flanders.

3.4. Empirical results

Understanding knowledge utilisation is difficult: it is a complex task to demonstrate how outputs such as scientific knowledge affect outcomes and policy impacts (Rich, 1997). Assessments are difficult due to the multiplicity of actors and the dynamics of policy processes (Ritter and Lancaster, 2013). Empirical studies also often use different terms to refer to similar concepts (e.g. the notions knowledge/policy, science/policy or research/policy are used as interchangeable concepts) (Berridge and Stanton, 1999; Bekkers, et al., 2004) or a distinction between basic⁸ versus applied research is often not made (Weiss, 2001; Smith, 2010). Methodologically, the measurement and specification of use (e.g. utilisation as outcome vs. utilisation as process) and the checklists of variables (e.g. research products, policy contextual factors, dissemination and links between researchers and policy-makers) are diffuse. At the same time, some studies focus on particular researches or research programs while others take a policy on a particular topic or a particular policy measure to assess knowledge utilisation. Finally, I found a predominance of Anglo-Saxon examples (e.g. United States, Canada, Australia and the United Kingdom) which suggests that extrapolation of these results to another country or policy domain is limited (e.g.

⁸ Basic (or fundamental, bottom-up) research is driven by a scientist's curiosity or interest in a scientific question. Applied (or top-down) research, on the other hand, is designed to solve practical problems of e.g. policy-makers, rather than to acquire knowledge for the scientific community (Devroe, 2002).

due to the differences in political system or the sensitivities of the matter) (Tonry, 2010; Hyder, et al., 2011; El-Jardali, et al., 2012).

However, while the debate about the methodological framework is still ongoing (Ritter and Lancaster, 2013; Tieberghien, 2014b), there is some consistency between empirical results (Landry, Lamari and Amara, 2003; Smet, 2013). A distinction can be made between studies focusing on knowledge utilisation typologies (*knowledge utilisation* literature) and studies focusing on the concept of the interface between researchers and policy-makers (*knowledge exchange* literature).

3.4.1. Results about knowledge utilisation

Empirical studies measuring the use of knowledge in policy-making in a particular policy domain on the local or national level operationalised Weiss' knowledge utilisation typology by developing a three-folded classification system distinguishing the *instrumental model*, the *political/symbolic model* and the *enlightenment model* (Lester, 1993; Chan, 1995; Brereton, 1996; Rich, 1997; Oh, 1997; Sorian and Baugh, 2002; Hanney, et al., 2003; Amara, Ouimet and Landry, 2004; Smet, 2013; Stevens, 2007; Monaghan, 2008a; Head, 2010; Freiberg and Carson, 2010).

Table 5: Three-folded typology of knowledge utilisation

Three-folded typology	Meanings of utilisation	Description
Instrumental	<ul style="list-style-type: none"> • knowledge driven model • problem-solving model 	This model represents the typical understanding, a rather static approach, of the science-policy nexus. It assumes that scientific knowledge has a direct bearing on policy.
Enlightenment / conceptual	<ul style="list-style-type: none"> • interactive model • enlightenment model • intellectual model 	A dynamic perspective of the science-policy nexus is supported in this model. Scientific knowledge can be conceived as part of the process of policy-making. Utilisation must be considered as a series of events or processes which may (not) lead to a specific action/decision
Political/symbolic	<ul style="list-style-type: none"> • political model • tactical model 	Offering a more strategic approach of knowledge utilisation, in this model, scientific knowledge is considered as ammunition for political sides. It can be used to silence the arguments of the opposition or to support ideas, which the policy-makers have already adopted.

Even though there is considerable variation between studies, according to the interpretation and conceptual framework used, there is generally least evidence for instrumental use of research (Chan, 1995; Brereton, 1996; Weiss, et al., 2008). International studies mainly agree about the rather *incremental* impact of scientific knowledge in the policy-making process (*enlightenment/conceptual* use) and its *political/symbolic* use (Young, et al., 2002; Bak Jørgensen, 2011). For instance, Chan (1995) pointed to Braithwaite's 'reintegrative shaming theory' which has been adopted in pre-trial programs aimed at diverting juvenile offenders as an example of the *enlightenment* function. Some Belgian (criminological) studies on the science-policy nexus also revealed that although direct use was intended by policy-makers, more examples of indirect utilisation were observed (Vande Walle, 2010; Smet, 2013). Furthermore, Marston and Watts (2003), analysing the use of research evidence in criminal (juvenile) justice policy, pointed to the risk that evidence-based policy becomes a means for policy elites to increase their *strategic* control (*political/symbolic* model). They concluded that the (often causal) assumptions of the juvenile justice research preclude what might be considered a reasonable evidence-based approach of policy-making.

Equally, Goldson (2010) found arguments that the policy trajectory concerning youth justice systems moved in an opposite direction to the route outlined by research knowledge. Likewise, Brants (2002), examining the use of criminological empirical studies and theories in election programs of political parties in the Netherlands, concluded that criminological insights are used selectively by political parties and that criminologists have to be conscious of the normative and political implications of theory and research. In terms of the types of utilisation altogether, empirical studies conclude that *conceptual* use is more frequent than *political/symbolic* utilisation with *instrumental* use found less frequently. For instance, Landry, Lamari and Amara (2003), conducting a mail survey of 833 government officials from Canadian government agencies, concluded that 53% of the research have never influenced decisions, whereas 9% have usually or always influenced decisions. Similarly, through a survey of 833 government officials, Amara, Ouimet and Landry (2004) found that 12% of the respondents reported instrumental use while 16% reported symbolic use and 22% conceptual use. Similar results were found by means of qualitative inquiry. For instance, Petersilia (2008), taking up the role of an *embedded* criminologist, concluded that scientific knowledge does not drive crime policy directly but rather conceptually or politically. Each of these studies clearly supports the usefulness of a *process design* instead of an *outcome design*. At the same time, these results suggest that the types of utilisation must indeed be considered as *complementary* rather than as contradictory dimensions.

Given the typology of the *chain of utilisation*, most studies make general comments on the policy-making process. They argue that the complexity of the policy-making process cannot easily be divided in particular phases, or that such a focus may lead to an unrealistic simplification of the policy-making process and may face the difficulties identifying the transition from one phase to another (Teisman, 2001; Devos, et al., 2009). Nevertheless, some studies have attempted to study knowledge utilisation in several phases of the policy-making process, taking into account the *chain of utilisation* (Penninx, 1988; Lampinen, 1992; Landry, Amara and Lamari, 2001) or have focused on one particular phase, such as agenda-setting (Kingdon, 2002; Brans, et al., 2004). For example, Lampinen (1992) distinguished (a) *awareness*, (b) *politisation*, (c) *institutionalisation* and (d) *evaluation* which he respectively linked with knowledge utilisation models like (a) *conceptual* use, (b) *political/conceptual* use, (c) *conceptual/political/instrumental* use, (d) *conceptual/instrumental* use. Results of these empirical studies applying the chain of utilisation have provided no consensus. While it is sometimes assumed that scientific knowledge can play an equal role in each phase, others argue that the degree of knowledge utilisation is the largest in the first phases (e.g. agenda setting) and decreases in the final phases of policy-making (Penninx, 1988; Lampinen, 1992; Landry, Amara and Lamari, 2001; Cherney and MacGee, 2011). In this study, I aim to examine the contribution of scientific knowledge at both the parliamentary and governmental level, with the expectation that the relationship between science and policy may differ across the policy-making process.

3.4.2. Results about barriers and facilitators regarding the science-policy nexus

The positive or negative interaction between researchers and policy-makers is perhaps the most frequently addressed topic in studies of the science-policy nexus, either as part of a knowledge utilisation study, or as a knowledge exchange study as such (Mitton, et al., 2007; Head, 2010). Exchange or linkage issues incorporate the idea that there are two different worlds or communities that have to be bridged (*two communities thesis*) and pay more attention to the contextual issues (which are rather lacking in the knowledge utilisation models).

The obstacles to interactions between research and policy are frequently classified into three categories: shortcomings/barriers related to research(ers); shortcomings/barriers related to policy-makers or the policy-making context; and shortcomings/barriers in the links between those two. Both barriers and facilitators are linked with organisational characteristics (position, length of career, incentive system) on the one hand, and individual characteristics (individual needs and perceptions) on the other (Oh, 1997; Oh, 1998). The question of how research results fail to influence policy-making has also led to thinking about the mechanisms to enhance the understanding of the dynamics at play (Wagner, 1991; Lavis, et al., 2003; Jacobson, Butteril and

Goering, 2003; Schryer-Roy, 2005). As will become clear, some of these barriers/facilitators are linked with the knowledge utilisation models as well as models of policy-making.

Many empirical studies highlight **barriers** for **policy-makers** to the use scientific knowledge, such as limited budgets (e.g. economic context); timing mismatch (i.e. scientific research can take years to complete whereas policy issues often rise rapidly to the top of the political agenda); and the level and complexity of the policy-making process. From the perspective of the policy-makers, research findings are but one contributory source that is filtered into policy-making (Weiss and Bucuvalas, 1980; Ritter, 2009). Policy-makers take into account the rules of the game of which they are at least partially aware (Stevens, 2011).

Other powerful, legitimate elements are at the table too. For instance, policy-makers need to deal with values and opinions of political parties (e.g. some parties, especially liberal and socio-democratic, seem to be more devoted to the value of scientific knowledge than others (Devroe, 2002)); the characteristics of the policy system (e.g. single-party system, two-party system or multi-party system; government party versus opposition); political climate (e.g. moral panic, windows of opportunity); elections; affected stakeholders; and the general public (Wagner, 1991; Kingdon, 2002; Lenton, 2004; Bowen and Zwi, 2005; Mitton, et al., 2007; Ritter, et al., 2007; Huston, 2008; Klein Haarhuis, Hagen and Scheepmaker, 2009). Each of these elements may determine how a social problem is constructed, how questions are asked, what answers are expected and if or how scientific knowledge plays a role (Berridge, 2002; Hartnoll, 2004). For instance, a multi-party system seems to stimulate more knowledge utilisation than a single or two-party system (Weiss, 1999) and findings that fit with ideology and party interests are more likely to be used (Nutley, Walter and Davies, 2007).

Next to *organisational and political factors*, the preparedness of the *individual policy-maker* to use research results, his/her prior knowledge, experience and beliefs are also crucial (Lavis, et al., 2003). This so-called *tacit* knowledge is knowledge acquired by individuals implicitly, through performing personal and professional activities (Smet, 2013; Richardson, 2013). For instance, policy-makers with more education and experience of research will be more in favour of using research.

Research contexts also shape the uptake of research. From the **researcher's** perspective, a **barrier** is the dissonance between what is rewarded within the academic community and what is valued by policy-makers (Nutley, Walter and Davies, 2007; Ritter, 2009). As writing policy-oriented briefings is not recognised as valuable work within the academic world, many academ-

ics argue that dissemination and engagement with policy-makers is not their role (see also *public criminology*, §1.3.). For instance, a study of Landry, Amara and Lamari (1999) found that nearly 50% of the Canadian scholars in social science reported that they usually or always transmit their research findings to policy-makers and practitioners. However, due to the decreasing research funding nowadays, there is a growing pressure to produce policy relevant research. Stronger attachment to the commissioning authorities may diminish the independent capacity of academia to provide a space in which innovative ideas can be developed (Smith, 2010).

Next to the *system characteristics in which researchers work*, most common complaints are related to the *characteristics of scientific knowledge*: unresponsiveness to policy-makers' needs (e.g. research findings may be not relevant enough for practice-based issues and policy-makers prefer to use findings from the accepted body of knowledge instead of new, recent findings (Weiss, et al., 2008)); fragmented data; the academic format of communication (e.g. concise and jargon free communication is preferred; actionable messages are preferable to long research reports); and evidence that fails to cumulate or yields contradictory findings (an ongoing source of frustration for some policy-makers) (Lavis, et al., 2003; Weiss, et al., 2008). For instance, in the study by Sorian and Baugh (2002), policy-makers estimated that 49% of the information they receive is not relevant to their current work. Furthermore, conflicting recommendations by different authors may lead to uncertainty and this can be exacerbated by, for instance, selective use of evidence by powerful interest groups or by the media (Mulder, et al., 1991).

The presence of each of these barriers also depends on the social science discipline and research approach. According to Landry, Amara and Lamari (2001) the professional social sciences (social work, health and employment) lend to higher levels of utilisation than the disciplinary social sciences (economics, political science, sociology, criminology and anthropology). The research approach (quantitative versus qualitative methodology) also plays a role (Rist, 1981). Even though qualitative research may contribute by means of determining the problem definition or identifying unintended consequences of decisions (Rist, 1981), politicians usually ask questions about the size of the problem and whether this is growing or not, so that prevalence and incidence values are the order of the day (Muscat, 2008). In accordance with what I have discussed above, within the evidence-based framework many believe that qualitative research does not count as research unless it is embedded in a randomised clinical trial (RCT) (Denzin and Giardina, 2008). In a similar vein, many authors have emphasised that systematic reviews of relevant evidence must be designed to ensure that policies and practices are informed by rigorous, transparent, up-to-date evaluations of relevant empirical evidence (Sorrell, 2007; Devroe,

2002). In light of the barriers above, many facilitating strategies have been documented. In particular, it has been stressed that scientists have to invest in giving policy-makers briefings regularly, in providing short summaries, in respecting the time frame of policy-makers and in establishing or maintaining a reputation of objectivity and credibility.

The **links between researchers and policy-makers** concern the way in which knowledge is disseminated and transmitted (*linking mechanisms*). Knowledge must be distributed from the producer to the policy-maker so that it can be used in making policy decisions (Webber, 1991; Jacobson, Butteril and Goering, 2003). The critical element is the existence and power of effective linkage or boundary arrangements among researchers and policy-makers (Van Eijk and Hartkamp, 1992; Landry, Amara and Lamari, 1999; Landry, Amara and Lamari, 2001), in which strong (e.g. personal, long-term connection, policy networks) and weak (e.g. media, working groups, conferences, interest groups,...) links are distinguished (Wagner, 1991; Lampinen, 1992; Nutley, Walter and Davies, 2007; Weiss, et al., 2008; Head, 2010). Referring to the latter (weaker) links, media or interest groups may be actively involved in underpinning future policy options with studies that criticise existing policy or suggest alternative policies. Strong factors related to the links between researchers and policy-makers include relationships of scientists with potential users of their research and the scientists' credibility (National Center for the Dissemination of Disability Research, 1996; Haynes, et al., 2012). Policy-makers do not always have ready access to research results and they tend to accept guidance, information, and ideas from sources they know and trust. Accordingly, Hird (2009) and Haynes et al. (2012) emphasised the importance of a personal connection (i.e. to talk with each other) instead of focusing on the written research. Likewise, Ritter (2009) found that the most common source of research evidence in the policy-making process was through the policy-maker directly contacting an expert.

An important aspect of building these relationships is the scientists' credibility. For instance, Sorian and Baugh (2002) reported that a majority of the respondents (84%) said they trust some sources of information more than others (e.g. a high-profile scientist). Landry, Amara and Lamari (2001) even agreed that the greater the number of publications, the greater the use of the expert's knowledge. While there is a general consensus that interaction and communication between researchers and policy-makers are key issues in improving knowledge utilisation, little is known about how policy-makers access research concretely and how *trust* relationships are precisely formed (Ritter, 2009; Haynes, et al., 2012). Equally, detailed examples of scientists who have effectively operated in this particular way are rather rare (Bammer, et al., 2010). As I focus on the utilisation of knowledge, including scientific research as such, as well as the scientific

discourse of academics, this study considers the role played by scientists in the processes of policy-making and the policy-maker's approach towards researchers.

4. Roles of the media and interest groups

In this study, I am particularly interested in certain actors (i.e. media and interest groups) standing alongside knowledge producers (academic world) and knowledge consumers (policy community). While scientists are considered to be relatively 'hidden' actors, the media and interest groups are far more public and visible. As the literature about the role of media in the science-policy nexus is rather lacking, I examine the interplay between the media and policy as well as the link between the media and science in order to get a better view of the role that the media may play in the science-policy nexus (§4.1.). Finally, the importance of interest groups is discussed in §4.2.

4.1. Media and the science-policy nexus

The media, a rather ambiguous concept, may include several forms of communication: newspapers, television, radio, internet, etc. (McCombs and Reynolds, 2009). At the same time, the role of the media may depend on the subject (e.g. sensational themes receive most attention), the medium (newspaper, television), period (pre-electoral, non-electoral), concerned politicians, type of agenda (government, parliament, party), and so on. Regarding the links between media and policy/science, I first address the **influence of the media on the policy-making process**. Existing studies have already highlighted a number of roles.

First, according to key media theories, the media can be perceived as a powerful player because of its ability to present issues through selection and salience, so called *framing*, and the ability to indirectly shape individual and community attitudes towards risk, known as *priming* (McCombs and Shaw, 1972; Lancaster, et al., 2011). Thus the media can unintentionally, as a result of the characteristics of news production (e.g. limited space, driven by publicity and economic concerns), or strategically, make a significant contribution to how people think by influencing what they think about (Entman, 1989; Lancaster, et al., 2011).

Second, as policy-makers aim to understand what the public values and considers important, the media may also feed into political debate and policy-making (Scheufele and Tewksbury, 2007; McCombs and Reynolds, 2009). For instance, some researchers noticed that media has more

influence on the *symbolic* policy agenda⁹ (e.g. interpellations and oral questions in the parliament) than on the *substantial* agenda (e.g. actual decision-making). However, studies about the precise role of the media in *setting the political agenda* often yield contradictory results, as the influence of the media in political agenda-setting strongly depends on the type of issue covered, the specific media outlet, the kind of coverage and the features of the political system at stake (Kingdon, 2002; Walgrave and Van Aelst, 2006). The role of the media in *shaping policy* is even more disputable (Chan, 1995). Nevertheless, some examples suggested that media may play a key role in precipitating policy change. They suggest that the media creates the news and provides images which can lead to widespread public panic (Goode and Ben-Yehuda, 1994). For instance, following media-generated panic, newly emerging psychoactive substances (like mephedrone and so-called *legal highs*) shot to prominence in the political agenda in a matter of months, demanding action from the government. Eventually, this resulted in a change in the legal status of these substances in some countries (Bright, et al., 2013; Lancaster, et al., 2010; Van Hout and Brennan, 2011; Dabrowska and Bujalski, 2013).

Scientific knowledge is just one of the elements at work in the **media**. As researchers have long been interested in the media's coverage of their field and individual work, naturally the question of if and how *scientific knowledge* is really used in the media has received some attention (McQuillan and Tse, 1996; Hijmans, Pleijter and Wester, 2003; Reed, 2001). This ranged from studies measuring how much and how accurately scientific knowledge was reported in the media, to the discursive processes involved in the representation of science in the media.

Even though some authors argued that the number of mistakes in media coverage remains small and that scientists are too quick to blame the media for inaccurate coverage (Condit, 2004; Bubela and Caulfield, 2004), several authors have stressed the prevalence of technical/graphical problems, inaccuracy of data, the lack of contextual information, the urge to sensation, the personification of science, and so on. Technical/graphical problems refer to the (in)correct presentation of percentages or numbers. Text formatting requires the selection of the most important issues with eye-catching titles. In other words, the process of summarising into a limited space (with e.g. a suggestive title) may produce a significant shift in the content of the text and the public interpretation thereof (Veneu, Amorim and Massarani, 2008). Inaccuracy of data mostly results from a lack of clarification of purpose and key concepts, and the level of journalists' com-

⁹ In the literature, a distinction between two types of agenda is sometimes made: the *substantive agenda* and the *symbolic agenda*. The substantive agenda deals with law making, budgetary allocations, sanctioning, nominations, and so on. In contrast, symbolic agendas have no real policy consequences (Walgrave, Soroka and Nuytemans, 2008).

prehension. The media always have to find an angle for the news item or feature article (Reed, 2001).

Furthermore, studies have shown that scientific facts are less important than moral beliefs and ideological standpoints to journalists and that, as a result, methodological and contextual information about the research is commonly omitted (Malone, Boyd and Bero, 2000; Carvalho, 2007). Equally, bibliographic information is almost never included, and science is often presented too simplistic and one-sided.

Moreover, the media often casts a critical eye over science and assessing the competences of some scientists. Additionally, media coverage of scientific knowledge is often reduced to the researcher as such. The personification of science results in a focus on the authority of researchers more than on the quality of the scientific research (Malone, Boyd and Bero, 2000).

Finally, studies around the media coverage of scientific knowledge revealed that scientific research is often used selectively. For instance, Kennedy and Bero (1999) found that although research on the harmful effects of passive smoking accumulated strongly, media coverage of the research maintained that this body of knowledge was controversial. At the same time, tobacco industry representatives who criticised the research methods of scientific studies, were quoted more often than researchers.

Brossard (2009) tried to clarify this particular relationship between media and science by distinguishing several *selection mechanisms* employed by the media. Obviously, geography may be a factor in media coverage of a topic. In particular, local, regional or national pride may explain why some international studies or other regional studies are not mentioned. Secondly, the chance of scientific research being covered depends on the degree of actual interest in the topic. The researcher's individual reputation plays a decisive role too. Selection is often based on the nature of the understanding between the scientist and journalist. Fourth, journalism's focus on sensationalism and drama and the direction of its editorial agenda also influences the selection of scientific research. Additionally, it is often considered that journalism and science are two communities separated by the academic style of research articles which make them inaccessible for journalists; the lack of rigor among journalists; the different time frames in the media and the scientific world; and so on (McQuillan and Tse, 1996; Maillé, Saint-Charles and Lucotte, 2010). It is clear that the barriers and mechanisms that impede and/or facilitate knowledge utilisation in the media are similar to those regarding the utilisation of knowledge in the policy-making process (see above, §3.4.2.).

Given the central role of the **media** in policy and science, this issue is of considerable importance for those who aim to better understand the **complexity of the nexus**. Even though the importance of the media's role in the policy-making process is widely acknowledged, the issue of whether and how the media actually affects the science-policy nexus remains empirically understudied. Some studies (Weiss and Singer, 1988; Wagner, 1991; Lampinen, 1992; McArthur, 1999, Lenton, 2004; Lancaster, et al., 2011; Haynes, et al., 2011b; Ritter and Lancaster, 2013; Smet, 2013) generally suggest that the media may act as a *linking or facilitating mechanism* between those who wish to influence policy (e.g. scientists and interest groups) and the actual policy-makers, for example, once research findings have been covered by the media, they might be harder to ignore. On the other hand, it is also acknowledged that disseminating scientific knowledge through the media might entail risk as the media often provides misinformation or unbalanced stories, leading to a distortion of perception and the construction of dominant overarching narratives (Carvalho, 2007; MacGregor, 2012). For example, media's distorted attention on the crack cocaine epidemic in the late 1980s led to concern about drug abuse nationwide and generated support for the radical right-wing political agenda (Hartman and Golub, 1999). While scientific knowledge debunked the various myths arising from this media scare and presented a rather different picture, media stories did not correct any mistaken claims which led to governments stepping up its *war on drugs*, especially towards dangerous groups living in ghettos (Reinarman and Levine, 1997).

4.2. Role of interest groups

The value of community participation in policy and practice has already been recognised in (criminological) literature (Tewksbury and Lees, 2007; Beyers, Eising and Maloney, 2008). For instance, Kingdon (2002) assessed that an interest group, a group of people with shared beliefs and goals in a particular policy area (e.g. a drug user organisation), may have an important role in holding the policy-makers accountable by means of trying to insert their preferred alternatives into the discussion.

Central to the challenge of interest groups is the introduction of their real-life experiences into the policy debate. Through different mechanisms (e.g. participation in hearings, media involvement, demonstrations), interest groups may directly or indirectly seek to affect the policy-making process (Leiden, 1995; Chari, Hogan and Murphy, 2010). For instance, by means of the media, interest groups may aim for power, public support or opposition, public awareness of the issue and finally the formulation and acceptance of a solution to a problem (Becker, 1967; Goode and Ben-Yehuda, 1994). If they are part of a policy network (e.g. issue network model; see also above, §2.5.2), members of interest groups can be particularly powerful by providing the

network with valuable insights (Hanney, et al., 2002). For instance, Epstein (1996) reported about the successful participation of activists in the construction of scientific knowledge about AIDS. By setting up partnerships with scientists, professionals and policy-makers and learning the language of these experts, activists succeeded in presenting themselves as credible advocates. As a result, Members of Parliament may sometimes turn to interest groups for assistance in analysing or evaluating bills or resolutions. In this way, interest groups may influence the language or direction of bills and subsequent discussions (Leiden, 1995). Nevertheless, it is generally assumed that they have a rather limited ability to influence the policy-making process, especially as they tend to be less organised, have fewer resources, and may be less familiar with engagement in policy advocacy (Porter and Hicks, 1995).

How the activities of interest groups may, or may not, have an impact on the contribution of scientific knowledge to the policy-making process is still unclear. One general statement on their role in the science-policy nexus was made by Weiss (1986) who speculated that interest groups may be a key channel for the flow of scientific knowledge, and so may provide an important route for research entering into the policy-making process.

5. Conclusion

The common understanding of *knowledge utilisation* is that scientific knowledge has a direct bearing on the policy-making process (utilisation as an outcome; *evidence based policy*). However, theoretical frameworks and empirical studies have shown that knowledge utilisation is far from instrumental. It has been found that different types of knowledge utilisation interact as parallel, complementary processes. Scientific knowledge is mostly used in a *conceptual* way (i.e. delayed and diffused use of information in policy-making) and sometimes in a *political/symbolic* manner (Amara, Ouimet and Landry, 2004). Viewing utilisation from the simple dichotomy between (instrumental) use and non-use does not offer a full explanation of utilisation. Equally, breaking down the process of utilisation into linear series of stages/steps (*chain of utilisation*) fails to uncover alternative forms of utilisation. As a result, **Weiss's three-folded knowledge utilisation typology** (1979), distinguishing rational/instrumental use, conceptual/enlightenment use and political/symbolic use has proven to be very influential in the knowledge utilisation literature and has been frequently applied to studies of the science-policy nexus. However, it is recognised that Weiss's typology leaves other questions unanswered. For instance, when and why is scientific knowledge used? Which other types of information compete with scientific knowledge?

The literature review highlighted the factors which influence whether and how scientific knowledge is used. Recognising the **context of policy-making** is imperative to understanding how scientific knowledge is used (Flitcroft, et al., 2011). Ways of thinking about policy-making have followed the same path as the thinking about knowledge utilisation. The view of the policy-making process as an *authoritative choice*, focusing on the outcome of policy-making, has been rejected in favour of the examination of policy-making as a *structured interaction* between internal and external actors. An interactive approach is considered to be the best guide to understand the processes through which scientific knowledge is used in the policy-making process. Hence, it is important to study how scientific knowledge may seep into the policy-making *process* (including Parliament as well as Government), not just in the *outcome* of policy formulation (Government). Likewise, examining the role of external actors such as the media or interest groups is considered important to better understand the complexity of the nexus.

Following the interactive approach, a substantial body of work has revealed key barriers to and enablers of knowledge utilisation. Policy-makers need to deal with *institutional* barriers such as budgets, timing (e.g. *windows of opportunity*), values and opinions of political parties, type of policy system (multi vs. single party system), elections, affected stakeholders and the general public. The *individual* policy-maker's basic values, political orientation, *tacit* knowledge are also expected to play an impeding role.

The complexity of the knowledge utilisation process is also found to be related to the nature of **scientific knowledge** and the characteristics of the scientific community. For instance, the dissonance between what is rewarded within the academic community and what is valued by policy-makers, as well as the particular characteristics of scientific knowledge (e.g. unsuitability to policy-makers' needs, fragmented data, academic format of communication, contradictory findings, qualitative vs. quantitative research) may act as important barriers. Even though scientific knowledge is commonly perceived as research executed by academics who work in university or college departments, the literature review made clear that it is important to examine the different levels of engagement of scientists. The *two communities thesis*, characterising scientists and policy-makers as part of opposing but homogenous communities, is no longer supported in the literature. Scientists who are concerned with their engagement in the policy-making process can potentially perform a variety of *public* roles within the policy process, such as performing as *scientific experts*, *policy advisors*, *observer-turned players*, *lonely prophets* or *social movement theorists/activists*. However, in the literature it is still unclear how scientists themselves perceive and handle these engagements. Therefore, it is necessary to use the notion of scientific

knowledge to refer to scientific research as such, as well as to the scientific discourse of an academic.

Some **linking mechanisms** through which scientific knowledge may influence the policy-making process were also discussed. Establishing networks and active (recurrent) engagements by scientists in the policy-making process are understood to be *strong* facilitators of knowledge utilisation. Other engagements by scientists (e.g. participation in conferences) as well as the media and interest groups are considered as *weak* linking mechanisms between science and policy. These mechanisms certainly capture some of the complexities of knowledge utilisation and facilitate the better understanding of the science-policy nexus.

A variety of **methodological approaches** has been employed to measure knowledge utilisation in the policy-making process. Along with the changing theoretical framework came the recognition that measurements of knowledge utilisation cannot be limited to examples of direct, instrumental use. Drawing on an interactive approach, many researchers have sought to use methods which better reflect the reality and dynamics of the interaction between science and policy. Clearly, previous studies favour a qualitative inquiry, interviews, document analysis and case studies in particular.

This chapter examined the *science-policy nexus* and how it has been conceptualised and assessed. Several *sensitising* concepts¹⁰ were identified through this literature review and provided the first steps in answering the research questions of the study. In the following chapter, I will examine if and how these concepts can be applied to the drug policy area. The *conceptual framework* of this study will be discussed in Chapter 3.

¹⁰ Blumer (1969) argues that sensitising concepts “gives the user a general sense of reference and guidance in approaching empirical instances [...] sensitising concepts merely suggest direction along which to look” (p. 148).

Chapter 2 Science – policy nexus in the drug policy area

Building on the first chapter, I will go on to apply these theoretical and methodological considerations to the drug policy area. Drugs are a politicised and mediatised topic which may lead us to believe that the science-policy nexus is even more complicated in this context. Is scientific knowledge being used to inform drug policies (reflecting instrumental or conceptual research use according to Weiss's model) or rather to provide support for political ideals (in line with Weiss's notion of political/symbolic use)? Which barriers or facilitators regarding the science-policy nexus in the drug field are found? What is the particular role of the media and interest groups?

In order to answer these questions, I first describe the specificities of the topic of drugs, and of drug policy and drug research in particular (§1). Secondly, I address the science-policy nexus in the drug policy area (§2). In particular, I will discuss two models of knowledge utilisation in the drug field (§2.1.) and the main results of empirical studies on the science-policy nexus in this area (§2.2.). The role of media and interest groups is elaborated in §3.

1. Drugs: a politicised and mediatised topic

Over the past 40 years, drugs and drug use have shifted from marginal phenomena to a situation in which they are widely sampled and used (South, 1999). Likewise, awareness of and ideas about drugs have also been changing. Clearly, as long as drug use was seen as pertaining to marginalised and minority groups, it was possible to confine it to a limited place on the policy agenda (Gusfield, 1975). Defining social problems in such a fashion is a way of depoliticising problems. In other words, the psychologising or medicalising of drug use can draw attention away from institutional or structural aspects of the issue (Gusfield, 1975).

In recent years, serious drug problems have become increasingly connected with a number of other social issues, such as high crime rates (Garland, 2001; Seddon, Ralphs and Williams, 2008). These changes may have played a crucial role in shaping responses to drug use. Drugs pose a substantial threat to society, affecting public health but also potentially generating crime, disorder, poverty, etc. Accordingly, drug policy debates focused on the prevention or reduction of the damage that drug use cause to the public good (Strang, et al., 2012). Gradually, it was also recognised that 'drugs' were pervasive in society and particularly amongst young people (instead of among marginalised populations only). Drug use moved from exceptional to being part of everyday life (South, 1999). Subsequently, this was labelled with the of the term normalisation (Par-

ker, Aldridge and Measham, 1998). Referring to drugs as a problem of everyday life or by magnifying existing problems (e.g. crime rates, poverty,...) politicians soon exploited and inflamed feelings of unease and made it a political issue (Boekhout van Solinge, 2002).

By creating fear and heightened concern about deviant stereotypes or evil wrongdoers out of proportion to the threat posed to society, the media may generate *moral panics* as well as create *outsiders* in society and, thus, force policy-makers to react even more firmly (Goode and Ben-Yehuda, 1994; Mosher and Atkins, 2007; UKDPC, 2010) (see also below, §3). Drug policy is considered to be one of the most polarised areas of public debate, and the media tends to emphasise this polarisation (Lenton, 2007).

In the following paragraph (§1.1.), I examine the evolution as well as variation in the way drugs are defined as a problem in drug policy, taking into account historical and international issues. Then, as policy discourse may reflect (changes in) scientific discourse, the nature of drug research is discussed (§1.2.).

1.1. Drug policies: international perspective

Drug policy can be seen as a field of government activity, consisting of a set of laws and programmes, government sponsorship of scientific research, monitoring initiatives, etc. (Babor, et al., 2010). While drug use has taken different forms and has been introduced at different times, the approval or disapproval of certain types of drugs has differed greatly in time and place. Together with the changes in and spread of drugs in society, awareness and ideas about drugs and the ways of how to cope with drug use have been changing. The process of policy-making does not occur in a vacuum but is affected by ideological divisions and several domains (i.e. criminal justice, health and education) or scientific disciplines (e.g. criminology, public health, sociology of deviance, anthropology, etc.) (MacCoun and Reuter, 2001; Bergeron and Fortane, 2010; Singleton and Rubin, 2014). It is also a policy area which is framed by historical and international developments (Tops, 2001; Eisenbach-Stangl, Moskalewicz and Thom, 2009), as I will further elaborate below.

By the early 20th century, drug use became a socially unaccepted activity (Boland, 2008). It was believed that drug use inevitably leads to addiction as well as crime, and was therefore a dangerous threat to society. Two sets of views on the response to drug use emerged: care through health and social care systems (reflecting a medical view on drugs including concepts like *addiction, disease*), and control through the criminal justice system. However, under enormous pressure from the US government and some powerful allies, law enforcement became practically the

only means through which governments attempted to control drug use and trafficking (Levine, 2003). Medical treatment of those experiencing problems as result of addiction remained limited. Political leaders and governments throughout the world supported drug prohibition and constructed a global drug prohibition system, later on regulated by three UN conventions (the 1961 Single Convention on Narcotic Drugs, the 1971 Convention on Psychotropic Substances and the 1988 Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances). Illustrative too is President Nixon's use of the concept *War on drugs* in 1971, which spread all over the world. Clearly, at that time, the politically accepted and correct norm was to use harsh anti-drug language and rhetoric of a *drug free* world (Boekhout van Solinge, 2004). Bergeron and Griffiths (2006) have noted that scientific knowledge on both the nature and the scale of the problem accompanied the prohibition in the first place. But drug prohibition activities were also found useful for other agendas: drug prohibition provided governments with the rationale for additional police and military powers, and as drug addiction, abuse, and even usage could be blamed for any social problem, its prohibition united political opponents (Garland, 2001; Seddon, Ralphs and Williams, 2008).

Throughout the 1980s, the *War on drugs* was seriously called into question by the heroin epidemic all around the world, with many new heroin users tending to be young and unemployed. Even though this first encouraged support for a policy of strict law enforcement, its close link with the outbreak of AIDS among injecting drug users led to a shift in policy. Hence, a harm reduction approach (with the installation of methadone substitution programs, needle exchange projects, etc.) was incorporated in many countries during that period. Parallel with this development, recreational drug use (especially cannabis but also ecstasy, LSD or amphetamines) during the 1980s and early 1990s was increasing and changing in youth cultures. Some commentators even suggested that drug use had become *normalised* among certain youth groups (Parker, Aldridge and Measham, 1998). The fact that the drug situation was no longer restricted to problematic drug users raised more questions about the effectiveness of the strict prohibitive *War on drugs* (MacCoun and Reuter, 2001). As a result, a growing number of countries began to divert the focus away from zero-tolerance towards a better balance between suppression and protection of public health (Jelsma, 2008).

In particular, at the end of the 20th century, there was a trend among some (European) countries towards the development of a public health movement (Reinarman, Cohen and Kaal, 2004). Within this framework, Belgium also developed a drug policy based on public health principles instead of a simple focus on judicial solutions (Federal Government, 2001; BIRN, 2002). At the same time, drug policies in many countries evolved from the criminalisation end of the drug

prohibition continuum towards a more regulated and tolerant approach (Shinner, 2009). As an example, debates on the depenalisation or decriminalisation of drug use sparked off in several countries (e.g. in Spain, Portugal, the UK, ...) (Hughes and Stevens, 2012). These debates reflected the idea that drug users should not be imprisoned because of their use, and that alternatives provided by law enforcement were preferable. Despite this trend, nations still adopted a wide variety of policies towards the control of illicit drugs. In particular, some nations still treated drugs primarily as a problem for law enforcement while others focused on prevention and education (Babor, et al., 2010), reflecting the two central narratives of drug policy (i.e. drug use as a problem of crime vs. drug use as a problem of health) (Bourgois, 2000). Nevertheless, this movement constituted the first step away from the dominant drug policy paradigm advocated by the United States, which was prohibition based on punishment.

Nowadays, the variety of approaches still exists. On the one hand, it is argued that the *War on drugs* has failed and that fundamental reforms in national and global drug control policies, such as the decriminalisation and destigmatisation of people who use drugs, are urgently needed (Global Commission on Drug Policy, 2011). Some new approaches to drug control are being tested: e.g. the legalisation of cannabis supply in Uruguay and some US states (Singleton and Rubin, 2014). On the other hand, some countries are evolving in the opposite direction. For instance, recent developments in cannabis policy in both the UK and the Netherlands seem to show a toughening attitude which may indicate a move towards a *culture of control* (Garland, 2001). While cannabis was reclassified from Class B to Class C in 2004, British policy-makers decided to revert to the former classification in 2009 (Seddon, Ralphs and Williams, 2008; Monaghan, 2011). According to Stevens and Measham (2014), the drug policy strengthening recently has been extended by the practice of banning new psychoactive substances like mephedrone. In the Netherlands, a set of stricter criteria were introduced for coffee-shops in 2012 and 2013 (Wouters, 2013; Brewster, 2014).

1.2. Drug research: understanding the drug phenomenon

Scientific knowledge can be seen as a frame within which representations of the reality of drug use are depicted (Reinarman, 2005; Noorman, 2005). Just as the interpretation of scientific knowledge by policy-makers is influenced by values, ideology or underlying world views, scientific assumptions are intermingled with moral judgments or perceptions. Within this framework, policy-making may influence the paradigmatic focus of research, its funding and impact but research results may also further establish the dominance of a particular policy (Allen, 2007; Bright, et al., 2008; Moore, 2008).

Some decades ago, the knowledge base on the subject of drugs was extremely limited. Drug use did not become a significant research topic in Europe until the 1970s, when its importance in the policy agenda increased (Hartnoll, 2004). Existing drug research focused on physical or genetic deficiencies of individuals as an explanation for the phenomena, such as criminality or mental illness (Mosher and Akins, 2007). Drug use (like homosexuality, insanity and criminality) was considered a disease. Addiction was viewed in the same way as traditional medical problems (Reinarman, 2005; Herzog, et al., 2009). The deterministic concept of disease focused on the individual and failed to answer questions about why and how patterns of drug use develop differently in various communities under a wide range of social, political and economic conditions. As a result, political use of this concept was leading to simplified conclusions about causes and claims about potential scientific solutions. Thus, this *biomedical and clinical research* offered little foundation for public policy on prevention, health promotion, etc. (Hartnoll, 2004).

In the late 1960s and 1970s, things started to change: the first attempts to estimate the prevalence of drug use (especially cannabis) were made and more concerns were raised about opiate addiction, which led to clinical studies on prevention, health promotion or harm reduction. As a result, *public health and epidemiological perspectives* became more important in drug research. These paradigms reconceptualise drug use as a socially infectious condition, and focus on both risk and protective factors. This approach is linked with a psychiatric understanding of drug use: e.g. it was assumed that a psychiatric individual was more susceptible to the *infection* of addiction (Mold, 2007). Within this framework, epidemiological research played an important role and was used to analyse the spread of infectious diseases in a population (e.g. AIDS). Policy responses were oriented towards control and coercion (e.g. prohibition, stigmatisation drug users, compulsory treatment,...). At the same time, from the 1970s onwards, drug use started to be perceived as a social phenomenon among youth culture (instead of a marginalised phenomenon). Accordingly, drug research from a *sociological approach* started to expand too. This paradigm assumes that the drug phenomenon is shaped by social reactions to it. For instance, in the deviance and labelling theory drug use (i.e. deviant behaviour) and the characteristics of drug users are seen as a consequence of policy rather than as intrinsic to drug use per se (e.g. Becker, 1967; Young, 1971; Agar, 1973).

The increase in heroin use and the number of AIDS-infections during the 1980s had an impact on the drug research approach. *Epidemiological* studies became more dominant, introducing drug indicators (e.g. treatment demand, deaths, market indicators,...) but also *social* research on risk patterns among hidden populations, for example among injecting drug users, expanded further (Hartnoll, 2004). While the dominant methodological approach in drug research remained

quantitative, there was an increasing receptivity to the qualitative paradigm emphasising the importance of a holistic understanding of drug use, thereby investigating behaviours in their natural setting and exploring narratives provided by members of the group (Sloboda, 2005). The value of this type of research is that it may help to reach and research hidden populations, to understand the experience and meaning of drug use and to understand the social contexts of drug use (Korf, 2013).

While drug research continued to focus on heroin, AIDS and hidden populations, gradually, in the 1990s, attention was given to other (new) drugs (e.g. cocaine and synthetic drugs) and the emphasis has shifted from local (e.g. multi-city study) to national (e.g. national projects), European and international levels. An important milestone for the consolidation and development of drug research was the installation of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). Becoming operational in 1995, it built on earlier pioneering work at national level and launched several projects. The EMCDDA established 5 key indicators: 1) prevalence and patterns of drug use among the general population; 2) prevalence and patterns of problem drug use; 3) drug-related infectious diseases; 4) drug-related deaths and mortality of drug users and; 5) demand for drug treatment. Since then, REITOX National Focal Points are responsible for the data collection on ongoing and concluded studies through its network of partners. The national focal point is enforced yearly to prepare a national report in order to disseminate information on drug-related research findings to different audiences.

From the mid-1990s onwards, most (European) countries established a sound empirical (epidemiological) basis of research (Stimson, 1997; EMCDDA, 2008). The strong growth and variety of drug research is also illustrated by the increasing numbers of addiction journals, career professionals, specialised research centres, international conferences and scientific publications relevant to drug policy (Muscat, 2008). Much emphasis is still placed on identifying how many people use drugs, how often and what they use, as well as on target groups or individuals for preventive interventions (groups which show the highest relative and attributable risk for onset of a problem are the appropriate targets for primary prevention programs) or the effectiveness of interventions for the prevention or treatment of drug abuse (*what works?*) (Sloboda, 2005; Eisenbach-Stangl, Moskalewicz, Thom, 2009).

Next to the strong focus on the public health and epidemiological perspective, drug research has been developed in varying ways (Korf, 2013). There has been a growing emphasis on issues like crime and public order, accountability and efficiency of policy, harm reduction, drug markets and national legislations. Clearly, an amount of drug research has now been carried out from

economic and legalistic/repressive perspectives. Within this framework, some drug researchers have studied the evolution of political responses to drug use, the historical origins of the international conventions and particular national policies and legislations. A substantial part of these studies concentrated on cannabis (Korf, 2008; Decorte, Potter and Bouchard, 2011). This focus was related to the debates about the national drug strategies towards cannabis which sparked off at the end of the 20th century (e.g. in Spain, Portugal, the UK and Belgium). With the growth and expanding diversity of drug research, a variety of methodological approaches have been further developed and implemented (e.g. experimental studies, survey research, mortality or morbidity statistics, qualitative research, online data collection methods, and so on) (Babor, et al., 2010; Korf, 2013). Even though epidemiological research still is the predominant approach, qualitative research, reporting the insider's views of their research participants, struggles for equal legitimacy.

Given that research on drug use evolved in different ways and at varying rates in different countries, I would like to make a short note about drug policy and research in Belgium. As I have stated, the extent and nature of drug research is often linked with how and when drugs came to be seen as a topic requiring attention, depending on issues that have dominated the drug policy agenda (Bergeron and Fortane, 2010). Unlike most countries where drug research started to take off in the 1970s or at least at the beginning of the 1980s, drug research in Belgium started slowly, beginning in the 1990s. Or, as an EMCDDA report from the early 1990s, stated, in Belgium, “*drug research has a low priority on the political agenda*” (Kenis, 1997, p.33). Things really started to change when drugs appeared on the political and media agenda in 1996 (e.g. with the installation of the Parliamentary Working Group on drugs). Increased attention to the drug phenomenon by policy-makers, scientists and media therefore provides a perfect starting point for my case study.

2. Science-policy nexus

The nature of drug research, their focus, paradigms and methodological approaches developed over a long period of time. Until the 1960-70s, drug policy was grounded on moral assumptions (Hughes, 2007). Supported by the increasing research efforts of international organisations like the EMCDDA, the *evidence-based* policy thinking also increasingly affected debates about drug policy (Hartnoll, 2004; EMCDDA, 2008; Korf, 2013; Lancaster, 2014): on the one hand, questions about *what works* and effectiveness of, for example, law enforcement were raised; on the other hand, efforts were made to increase the uptake of scientific knowledge in the policy-making process. For example, the current drug strategies and action plans of most Member States include references to scientific knowledge (EMCDDA, 2008).

Given that debate in the drug policy field is often contested, part of a heated controversy or subject to rapid change, the notion of *evidence-based* policy was soon labelled as having less relevance (MacGregor, 2013). In particular, drug policy carries great *symbolic value* as research findings may become elements in value-based arguments (Ritter, 2009; Room, 2005; Fitzgerald, 2005). Instead of a strict rational relationship between research and policy, it is assumed that *evidence-based* arguments are more likely to be used as weapons in emotive debates (Head, 2010). For instance, Dixon (1995) stated that “*Drug policy is a prime example of the limited contribution which criminology is currently allowed to make to public policy.*” (p.3). Wodak (2008) also stated that “*in drug policy, what is effective is often unpopular while what is popular is often ineffective*” (p.227). Such points of view, whereby the policy-making process is considered an *un-evidenced-based mess*, are frequently adopted in the drug policy domain (Monaghan, 2008b). Therefore, there has been a need for studies which consider the alternative ways of knowledge utilisation to move beyond those zero-sum statements of *evidence-based* policy.

In the following paragraphs, I discuss some theoretical models of knowledge utilisation that were developed for the study of knowledge utilisation in heavily politicised policy areas (§2.1.) as well as the existing empirical studies of the science-policy nexus in the drug policy area (§2.2.).

2.1. Models of knowledge utilisation in the drug policy field

Stevens (2007a) and Monaghan (2011) argued that existing theoretical models were insufficient to conceptualise the science-policy nexus in the drug policy field. Some newer models have been advocated: the evolutionary model and processual model.

In a similar vein to the *conceptual model (enlightenment)*, the **evolutionary model** views utilisation as a *process* and not just as an outcome. Unlike the *political* and *tactical* model, this model tends to focus not only on the policy-makers but also on the social structure as important in supporting selection in the use of scientific knowledge. In this respect, there is recognition that the media or interest groups may play a role in influencing what is permissible in policy-making. Furthermore, one of the strengths of the model is that it pays attention to the power dynamics in the policy-making process. Except for an emphasis on power dynamics in Weiss’ *iterative* model on competing interests shaping the policy-making process (see also above, §2.5.), this issue is largely neglected in existing models of knowledge utilisation or policy-making. The evolutionary model assumes that there is a Darwinian *survival of the fittest* evidence in the policy-making process: e.g. as some evidence may fit the interests of the powerful groups, and others may not, evidence without a powerful supporter will not be used. Several arguments and processes of

selection of scientific knowledge are distinguished, which may help to explain the (preservation of the) relative power of some groups (Stevens, 2007a). A first mechanism is *trawling*, which means that policy-makers select the beneficial evidence and ignore the rest (which is similar what others have called *cherry-picking*). Second, policy-makers can *farm* for evidence, whereby powerful actors focus attention on evidence that supports a given policy. A third mechanism is called *flak*, creating disquiet about evidence which is detrimental to a particular policy direction. Finally, a *strain* mechanism includes the imposition of strain on researchers who produce irrelevant evidence. Monaghan (2011) put forward an important downside of this evolutionary model. He argued that the evolutionary model has an understanding of a linear deterministic form of utilisation and policy-making as an *authoritative choice*. He argues that even evidence that fits with the interests of the powerful groups may not be used if the political conditions are not favourable. In other words, Monaghan refutes that policies move towards a fixed point: *evidence-based* or not.

Based on a case study of the (re)classification of cannabis in the UK, Monaghan (2011) tentatively advocated a synthesis of the *enlightenment* and *evolutionary* model. Drawing on the evolutionary model, the **processual model** shares the approach of the selection mechanisms (Stevens, 2007b). However, it does not support the deterministic view of utilisation focussing on the outcome of policy formulation. Instead, as this model accepts that evidence is not the only player in the policy-making process and that the policy process is of an ad hoc, back and forth nature, with multiple groups interacting and competing in shaping policy (policy-making as *structured interaction*), the model can be thought of as related to the *enlightenment* model (Monaghan, 2009). Additionally, the processual model also provides a more nuanced account of the nature of evidence. It is put forward that the concept of evidence itself must be seen as contested and in a constant state of flux. Taking each of these considerations into account, the science-policy nexus in a heavily politicised policy area is described as uncertain and unpredictable.

2.2. Empirical studies

2.2.1. Design and methods

Empirical studies focusing on the understanding of the interaction between science and policy have long been scarce in the drug field (Bergin, 2013). However, interest in this interaction has recently emerged, especially in the UK, Australia and Canada (Musto and Sloboda, 2003; Lenton and Allsop, 2010; Macleod and Hickman, 2010; Hughes and Stevens, 2012; Stevens and Measham, 2014). In Belgium, research about knowledge utilisation in the drug area is still lacking (Tieberghien, 2013). Most knowledge utilisation literature in the drug policy field clearly

originates from countries with a two-party system, and is thus not representative of the science-policy interaction in a multi-party system as exists in Belgium.

Most studies, except for those focusing on how drug policy-makers access scientific knowledge (Bickford and Kothari, 2008; Ritter, 2009), analysed knowledge utilisation in one or more cases (*case study design*) by using a *process design*. A case may be, for example, the historical development of a policy (Duke, 2001; MacGregor, 2013), the policy process at a given time (Stevens, 2011) or a new policy measure (e.g. new legislation, the implementation of safe injecting rooms or treatment of heroin dependence, ...) (Erickson, 1998; Lenton, 2004; Hall, 2004; Lenton, 2007; Hughes, 2007; Hall, 2008; Monaghan, 2009; Hughes and Stevens, 2010; Zampini, 2014).

Together with growing recognition of the importance of *qualitative methods* in studying the science-policy nexus (see also above, §3.2.), similar interest has developed in the drug field. Analysis of policy and media documents has been regularly conducted. For example, Lenton (2007 and 2004) discussed the *evidence base* of changes to the legal status of cannabis in Australia using a variety of sources: citations of research publication in government reports or parliamentary debates; media statements by members of the government; references in political party policy statements; official correspondence and invitations to join government working groups; written testimonials from member of parliament and other key stakeholders, and so on. Similarly, Wood, et al. (2008) also used documents (policy documents, media,...) to describe the Canadian Government's rejection of the findings from the evaluation of the safer injecting facility. Finally, Bennett and Holloway (2010) analysed the extent to which the UK drug strategy is evidence-based by examining research evidence cited in policy documents to determine which of the findings were said to have been used and the way in which they were (mis)interpreted.

In addition to document analysis, the *method of interviewing key policy players* is used frequently in order to reconstruct processes and depict nuances of knowledge utilisation (Ritter and Lancaster, 2013). The general focus lies on the perceptions of the policy-makers. For instance, Duke (2001) analysed the interplay between research and the historical development of prison drugs policy within its political, economic and social contexts, drawing on semi-structured interviews with key policy players. As another example, Hughes (2007 and 2009) assessed the role of evidence in the development and implementation of the Illicit Drug Diversion Initiative (IDDI) in Australia using data from interviews with 16 key informants working in the Australian drug policy arena. Clearly, most studies do not take into account the role of scientists, journalists or members of interest groups. The study of MacGregor (2013) can be seen as a very valuable exception: 50 interviews were carried out with MP's, police officers, journalists, researchers etc.

Methodologically speaking, I also observed one *ethnographic study* acknowledging how policy-makers use evidence in a range of social policy and criminal justice areas (Stevens, 2011). Undoubtedly, such a privileged position provides a unique view of the inner workings of a policy department, which is rarely observed.

Finally, taking into account their process design and qualitative methodological approach, most studies examine the extent and nature of knowledge utilisation in both the *parliamentary and governmental policy-making process*. For instance, studies involving a document analysis often concerned documents and frameworks produced by the Government as well as submissions and reports of the Parliament or joint committees (Lenton, 2004; Ritter and Lancaster, 2013). Studies which took the effort to interview policy-makers often selected respondents with differing degrees of involvement in the policy process, some involved in direct decision-making, while others are involved in commissions, inquiries or consultation (Monaghan, 2009; MacGregor, 2013). However, some exceptions focus on just one particular phase: parliamentary processes (Erickson, 1998; Tomson, et al., 2005; Reuter and Stevens, 2007) or governmental policy-making (Stevens, 2007; Bennett and Holloway, 2010).

2.2.2. Results about the interplay between science and policy

The role of scientific knowledge in policy development is in drug policy studies mainly studied using Weiss' three-folded typology (Duke, 2001; Monaghan, 2009; Stevens, 2011).

I found some examples of the way in which scientific knowledge has succeeded in being useful (*instrumental*) to policy (Edwards, Strang and Jaffe, 1993; Fountain, 2000). For instance, an epidemiological study, published in 1950, that demonstrated the connection between the rise in lung cancer and the habit of smoking led to a new policy agenda for smoking. Furthermore, a needle exchange evaluation in 1987 gauged whether such approach would be an appropriate means of dealing with the threat of AIDS. The research concluded that the exchange worked and was an important factor in unlocking governmental support for harm reduction and needle exchange services.

Despite these examples of direct use of knowledge, most authors agree that the relationship between science and policy does not make use of the logical connections between them, and the rational application of findings in policy in particular (Edwards, Strang and Jaffe, 1993). I noted some examples of *conceptual use of scientific knowledge*. For instance, Hall (2008) argued that the role that research played in the development of a national cannabis policy in Australia in

2006 has exemplified the *enlightenment* model (Weiss, 1995). In particular, evidence has produced slow changes over three decades in conceptual understandings of cannabis use.

A significant theme that arose in these studies is that scientific knowledge has been used *selectively (or not used)* to fit the (personal/political) preferences of those in power (Griffiths and McKetin, 2005; Stevens, 2007b; Hall, 2008; Monaghan, 2009; Bennett and Holloway, 2010; Brewster, 2014). Stevens (2007b and 2010) concludes that evidence is used in a selective, narrative way based on ideology, in that it supports systematically asymmetrical relations of power. Similarly, research of Hughes (2007 and 2009), assessing the role of evidence in the development and implementation of the Illicit Drug Diversion Initiative (IDDI) in Australia, showed that while policy-makers were supportive of the IDDI as a pragmatic response to drug users, they contend that implementation has suffered through a selective and variable emphasis upon scientific knowledge. Wood, et al. (2008) also concluded that ideology triumphed over evidence: the Federal Government disregarded the recommendations derived from a scientific evaluation about injecting facilities. Storbjörk (2014) argued that scientific knowledge was selectively used to support arguments both in favour of and opposing the reform of the Swedish substance abuse treatment system, in line with the findings above.

The *misuse of data* also came through. For instance, Rossi (2002) critically analysed a drug report of the United Nations Drug Control Programme. Apparently, the data taken from several publications was misinterpreted (Rossi, 2002). Rather similar, Olsson (2009) critically reviewed an UNODC report by evaluating the empirical facts referred to and the main conclusions drawn about the success of the Swedish drug policy. He concluded that the scientific basis behind the report was flimsy, if it existed at all. For instance, prevalence data was presented without distinguishing between medical, experimental, occasional and problematic use. The UNODC report also claimed that the Swedish drug policy caused a decrease in drug use. Other alternative explanations, like employment rates, health consciousness, etc. were not even analysed. Serving as another example, Griffiths and McKetin (2005) described some common misuses of epidemiological research about drug use. Two of the most common misuses reported were generalizing from a non-representative sample (for example when researchers generalise from clinical or jail samples) and measuring one thing and generalising to another (for instance when researchers confuse the epidemiology of drug use with the epidemiology of drug abuse). Equally, Hughes and Stevens (2012) highlighted the misuse of evidence in the case of the Portuguese decriminalisation. They concluded that divergent policy conclusions were derived from selective use of epidemiological data, which belied the largely positive implications of the Portuguese decriminalisation of illicit drugs.

In the light of the *political/symbolic* model, one study also revealed another challenger of knowledge utilisation (and *evidence-based* policy-making) in the drug policy field. By means of a reflection on the debate about the classification of ecstasy in the UK, Monaghan, Pawson and Wicker (2012) illustrated that scientific knowledge is sometimes side-stepped by policy-makers playing the *card of precaution* in order to postpone action.

Because the majority of the studies focus on the policy-making process in general without making a clear distinction between *stages or phases*, it is difficult to draw conclusions on this issue. The few studies that do reflect on the differences between, for example, the Government and the Parliament, have provided contradictory results. An empirical study of alcohol policy-making found that research was more influential in the early stages than in the later stages of policy-making. This finding supports the Kingdon's agenda setting theory (Johnson, et al., 2004). In contrast, MacGregor (2010) found that drug expertise (i.e. scientific experts and practitioners) may play an equal but different role in the two worlds of the Government and the Parliament.

Furthermore, the **barriers and mechanisms** facilitating the utilisation of knowledge as discussed above, can also be applied to the drug field (Berridge and Thom, 1996; Ritter and Bamber, 2010; Oliver, et al., 2014). The *characteristics of the policy-making process* most frequently identified include the limitations in policy-makers' capacity to evaluate research evidence; financial constraints; political ideology; the policy-maker's interest; electoral cycle, and; their preference for the existing body of knowledge instead of new knowledge. For instance, according to Berridge and Thom (1996) and Muscat (2008), the selection of drug policy options seems to depend on political ideology and public opinion. Likewise, in the case of treatment of heroin dependence (1990-2001) in Australia, Hall (2004) noted that research has a mixed impact on policy as the interface between research and policy depends on policy-maker interest and the availability of funding. Additionally, Macleod and Hickman (2010) analysed the available evidence on the health effects of cannabis and reviewed the factors that may have influenced public discourse and policy decisions. The researchers concluded that the strongest evidence of a possible causal relation between cannabis and schizophrenia emerged more than 20 years ago, and that the strength of more recent evidence may have been deliberately overstated by political opponents (as part of the political game). Finally, several authors agreed that the policy-maker's background determines if he/she places more or less importance on a particular subject and its evidence base (Zampini, 2014).

Many barriers related to the *characteristics of research* have also been documented: the ambiguity and uncertainty of research, the lack of notes or short summaries of research or the reputa-

tion of the researcher (Hall, 2004; Wood, et al., 2008, Bennett and Holloway, 2010). For instance, in his commentary from a policy-maker's perspective, Gregrich (2003), in his position as Chief of the Treatment Branch (Office of National Drug Control Policy) pointed to a number of issues that limit the usefulness of researchers' work. One of the issues relates to format. Format issues include the manner in which research reports are presented (e.g. language) and their often equivocal nature. Furthermore, it is argued that the relationship between science and policy is frequently linked with quantitative (epidemiological) research. The quantitative domination is often underpinned and preserved by greater funding, greater scientific credibility of methodological approaches and more numerous researchers and projects (Moore, 2008). Reuter (1993) has pointed out that *"for conscientious policy-makers dealing with drug problems at the national and local levels, prevalence estimation ought to be a fundamental element of sensible decision-making"* (p.167). The role of qualitative research in relation to drug policy is much more uncertain. Berridge and Stanton (1999) highlighted the fact that policy interests may package a message from qualitative research but that qualitative research, by its very nature, is rarely so specific about guiding policy (Fountain, 2000; Denzin and Giardina, 2008).

A common challenge is also to establish linking mechanisms in a manner that fosters systematic action (Elliott and Popay, 2000; Gregrich, 2003). This refers to taking into account the timeframes of both researchers and policy-makers (e.g. research findings are not often presented to policy-makers at the times of greatest receptivity: the beginning of a legislature, budget development cycle, etc.). In particular, Gregrich (2003) noted some practical steps researchers can take to make their work more accessible, and useful, to policy-makers and practitioners. These practical steps involve making effective contact to educate and influence while respecting the values, insights and the limited time of policy-makers. Duke (2001) and MacGregor (2013) also agreed that drug researchers should become more active agents in all stages of the policy process in order to stimulate the interplay between research and (drug) policy. Having long-standing relationships with key players inside and outside the policy-making process as well as participating in fora or committees are also considered to be of great importance (Lenton, 2007; Lenton and Allsop, 2010). This is in accordance with the few studies that focus on how policy-makers get access to sources of research evidence in their drug policy-making, instead of on how policy is actually made in terms of interactions between evidence and policy (Bickford and Kothari, 2008; Ritter, 2009). The most popular way through which evidence accesses the policy-making process is by means of policy-makers seeking advice from an expert and consulting technical reports. It has been reported that the advantages of consulting an external expert include the speed with which the information can be obtained and the ability of an expert to syn-

thesis the (often contrary) evidence. Consulting academic literature or relying on internal expertise or policy documents are least frequently found approaches.

3. Roles of the media and interest groups

The diversity of participants in the policy process is widely acknowledged in these empirical studies: references are made to politicians, academics, interest groups, media, police, and so on. **Media** is considered to be one of the most important influencing factors in drug policy debates, even though whether the media is driving policy or vice versa is rather unclear. For instance, several researchers have already argued that the media may fuel drug scares as well as increase curiosity in a new drug or stigmatise particular drug users (Goode and Ben-Yehuda, 1994; Lenton, 2007; Mosher and Atkins, 2007; Taylor, 2008). The emergence of methamphetamine use and production in Canadian media provides one such example. Media coverage was found to have fuelled public fear and speculation by using terms such as *epidemic* and *plague* to describe the prevalence of this drug (Boyd and Carter, 2010).

Even though the role of the media in determining drug discourse is widely acknowledged, limited research has been conducted in examining the particular role of the media in the science-policy nexus in the drug area. I would submit that drug research is rather attractive to the media because anything related to drugs tends to be automatically newsworthy. However, existing studies on the influence of the media on the drug policy-making process have made only general statements (Lenton, 2004). For instance, Hall (2008) argued that the impact that research evidence has had on Australian cannabis policy has been largely constrained by the media framing the debate as a choice between two competing fields, critics and defenders of prohibition. Given the central role of the media in drug policy debates, this issue is of considerable importance for those who aim to better understand the complexity of the nexus in the drug policy area.

The idea that **interest groups** (civil society associations, NGOs or third sector organisations, alliances, coalitions and networks of existing organisations, professional associations of lawyers or law enforcement officers, or user groups) can play a role in drug policy-making is also recognised (Tops, 2001; Hall, 2004; Bergin, 2013; Lancaster, Ritter and Stafford, 2013; EMCDDA, 2013). Ritter (2011) explicitly argued that “*Drug policy is a perfect example of a complex social problem, without obvious solutions, driven by highly emotional arguments and strong interest groups.*” (p.3). However, as with the role of the media, details about their particular influence have been largely missing in the knowledge utilisation studies in the drug policy area. Nevertheless, some general statements about associations advocating for drug users’ rights as well as groups presenting parents or ex-drug users advocating against drug use, have provided us with

an avenue for further investigation of this issue in this study. For instance, Lenton (2004) considered the support by cannabis users to be one of the many conditions that could be seen necessary for the cannabis law reform in Western Australia. Additionally, of particular relevance is a recent EMCDDA report on drug policy advocacy organisations in Europe (EMCDDA, 2013; O’Gorman, et al., 2014). This report described the tools used by these groups to influence drug discourse: participation in media debates, policy forums or conferences were reported as the most useful mechanisms while activist strategies, such as demonstrations and marches, were employed less frequently.

4. Conclusion

Both the compounded social problems associated with drug use (e.g. crime, poverty) and drug use becoming normalised instead of being a marginalised phenomenon led to drug use gradually becoming a subject of political debates. Accordingly, drug research sparked off in the 1970s and has been growing since. The dominant perspectives surrounding drug research moved from the frameworks of psychiatry and psychology of dependence (biomedical and clinical paradigms) to public health concerns with epidemiology (public health paradigms) and law enforcement priorities concerning control (legalistic/repressive paradigms). An important push for drug research was provided with the installation of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) during the 1990s. One of its aims was to identify gaps in knowledge in order to strengthen the research base for promoting *evidence-based* policy (Stimson, 1997; Hartnoll, 2004). Accordingly, theoretical and empirical interest in how the science-policy nexus in the drug field actually works has been rapidly expanding in recent years.

The qualitative methodological design of each of these studies, including interviews, document analysis and case studies, as well as their **interactive approach** (policy-making as a *structured interaction*) illustrate their large interest in the policy processes, interactions and engagements between policy-makers, scientists and other actors. It is assumed that scientific knowledge may play a role in the *process* of drug policy-making (Parliament and Government) instead of in the outcome.

An overview of the existing literature on knowledge utilisation in the drug field indicates that the science-policy nexus is more complicated here than in other domains (see Chapter 1). Applying Weiss’ three-folded typology (1979), studies have shown that the nature of knowledge utilisation is mainly politicised: while scientific knowledge is most often used **politically/symbolically**, illustrations of instrumental or conceptual use were rather limited. Examples of the misuse of data as well as the use of the *precautionary principle* to postpone action also

underline the high prevalence of political/symbolic utilisation. Supporting the idea that the political context is very important in the science-policy nexus in the drug policy area, several authors made useful additions to Weiss' three-folded typology. It is recommended by Stevens' evolutionary model (2007a and 2011) and Monaghan's processual model (2011) that studies about the science-policy nexus in the drug field have to examine which powerful selection mechanisms are used by policy-makers and how scientific knowledge itself is conceptualised in the policy-making process.

Furthermore, existing studies revealed that the **barriers** regarding the utilisation of scientific knowledge, which were documented in chapter 1, also apply to the drug policy field. In a similar vein, there is consensus that establishing networks or having relationships with key players inside and outside the policy-making process are strong **facilitators** of knowledge utilisation in the drug field. In the context of the current study, a profound examination of the role of the media and interest groups seems important for those who aim to better understand the complexity of the nexus in the drug policy area. **Media** is considered to be one of the most important influencing factors in drug policy debates. The idea that associations advocating for drug users' rights as well as groups representing parents or ex-drug users advocating against drug use play a role in drug policy-making is also recognised. In other words, in the drug policy field, the media and these **interest groups** are considered to be *strong facilitators* of the science-policy nexus. However, except for some recent work (O'Gorman, et al., 2014), their particular role in the science-policy nexus has rarely been studied.

Chapter 2 explored the origins of the *evidence-based* drug policy thinking and how the science-policy nexus has been defined and assessed in this particular field. The issues proven to be of particular relevance in studying the science-policy nexus in the drug field strongly supported the construction of the conceptual framework of this study (outlined in Chapter 3).

Chapter 3 Research design and methodology

Previous chapters have detailed the literature on the nature of policy processes and the assessments regarding whether and how scientific knowledge informs (drug) policy. In this chapter, I first discuss the conceptual framework of this study, explaining *sensitising concepts* that were identified through the literature review (§1). Then, I turn to the research design and methodology. The conceptual framework proved to be particularly helpful, for example in selecting a case and in structuring data analysis and interpretation. Subsequently, in this chapter, I address the ontological and epistemological assumptions underlying my study (§2) and illustrate why I adopted a qualitative approach in order to obtain the kind of data I am looking for (§3). Then, I present the technical design of this study (§4) and the two data collection methods (§5). Finally, data analysis (§6) and validity and reliability (§7) are discussed.

1. Conceptual framework

According to Miles and Huberman (1994), “A conceptual framework explains, either graphically or in narrative form, the main things to be studied – the key factors, constructs or variables – and the presumed relationships among them.” (p. 18). Below, I explain the *sensitising concepts* that were identified through the literature review and will be studied in this dissertation in order to answer the three research questions.

1/ How has Belgian drug policy been developed between 1996 and 2003?

2/ How did scientific knowledge contribute to the development of Belgian drug policy between 1996 and 2003?

2.a./ Through which modalities did scientific knowledge contribute to the drug policy-making process?

2.b./ What has counted as scientific knowledge in this particular drug policy-making process?

2.c./ Is there a difference in the role played by scientific knowledge within the main political institutions (i.e. Parliament and Government)?

2.d./ Which other types of information competed with scientific knowledge in this particular drug policy-making process?

3/ What is the particular influence of the media and interest groups on the contribution of scientific knowledge to the development of Belgian drug policy between 1996 and 2003?

Theoretical analyses and empirical studies have shown that the knowledge utilisation process is neither rational nor instrumental. Different types of knowledge utilisation interact as parallel, complementary processes. In this study, I examine through which **modalities** scientific knowledge contributed to the development of Belgian drug policy between 1996 and 2003. I draw on **Weiss' three-folded typology** (*rational/instrumental; political/symbolic; conceptual/enlightenment*) because of the high usage in the knowledge utilisation literature inside and outside the drug field. Therefore, the studies which recently emerged in the drug field may serve as interesting cases for making (careful) comparisons with the findings of this study.

Based on existing studies, I expect *political/symbolic utilisation* to be particularly prevalent in the context of drug policy given the strong emotions and opinions surrounding the use of illicit drugs and the high media profile that drug use attracts. Therefore, in addition to Weiss' political/symbolic model, I examine if and how power mechanisms play a role in the knowledge utilisation process (**evolutionary model**) and how scientific knowledge itself is conceptualised in the policy-making process (**processual model**; e.g. how do policy-makers see the role of scientific knowledge? what counts as scientific knowledge?). Likewise, I will examine the misuse of scientific knowledge and other political/symbolic strategies (e.g. precautionary principle) that were observed in previous empirical studies.

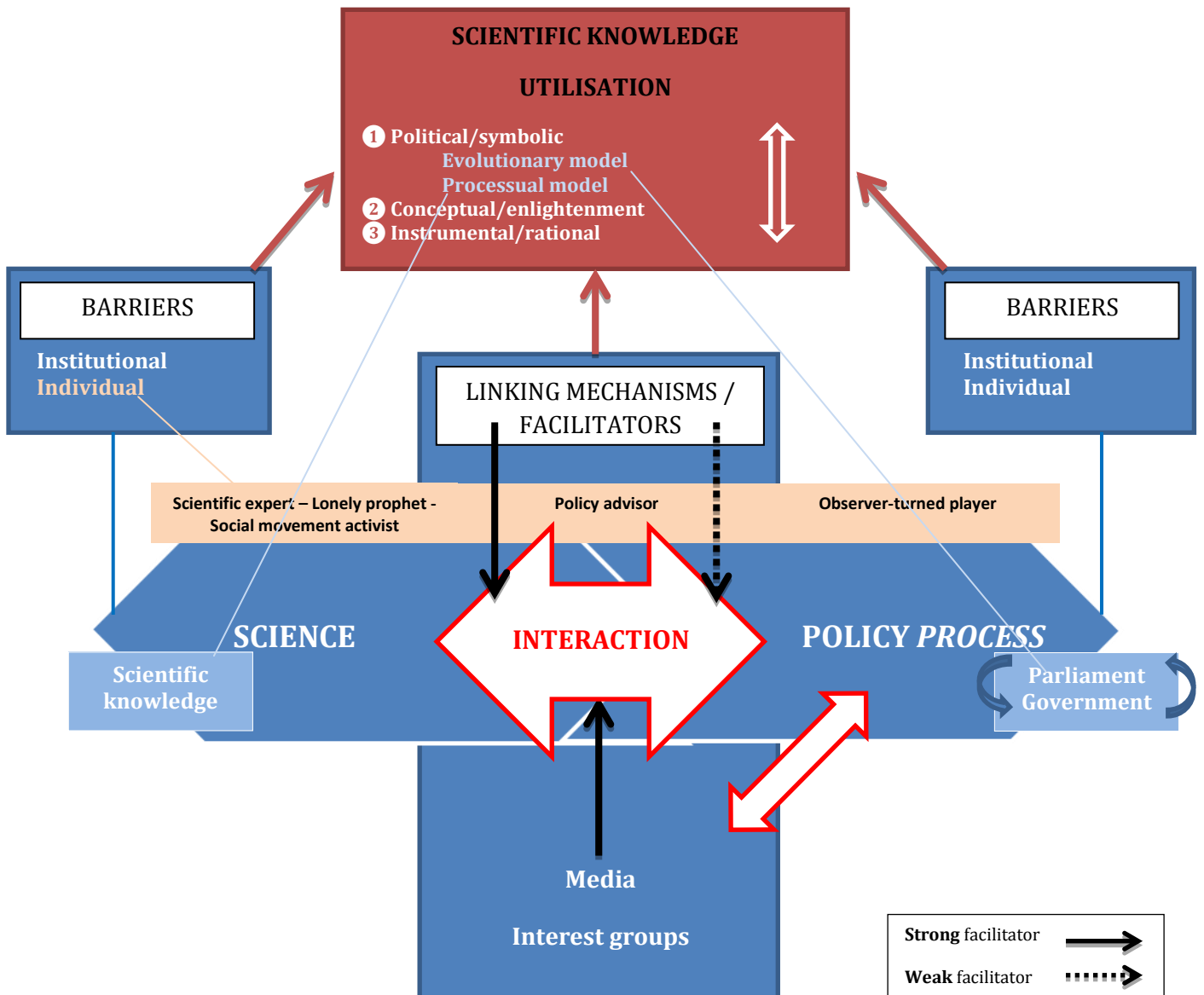
The literature review also made clear that different models of policy-making correspond to the different types of knowledge utilisation. It highlights how scientific knowledge can be used differently depending on whether the policy process is conceived as an authoritative *choice* (*rational/instrumental*) or as interactive, with multiple (f)actors influencing the policy-making *process* (*rational/instrumental; political/symbolic; conceptual/enlightenment*). This study adopts the framework of policy-making as a *structured interaction*, as I am interested in the different modalities through which scientific knowledge contributed to the **policy-making process** (including Parliament as well as Government). Little is known about whether and how the main political institutions (i.e. Parliament and Government) in a parliamentary democracy such as Belgium use scientific knowledge in the drug policy-making process and which (f)actors are at play.

A focus on policy processes and **interactions** between policy-makers, scientists and other actors assumes that scientific knowledge may be just one of a multitude of factors to influence the policy-making process. This study fits into the knowledge exchange literature in that I seek to describe and understand the **barriers and facilitating mechanisms** regarding knowledge utilisation in the Belgian drug policy-making process. In addition to Weiss' three-folded typology, I take into account the *institutional and individual characteristics of policy-making* (e.g. budgets,

windows of opportunity, values and opinions of political parties, the type of policy system, *tacit* knowledge of individual policy-makers). The complexity of the knowledge utilisation process is assumed to be related to the nature of *scientific knowledge* and the *levels of engagement of scientists* too. Therefore, in this study, **scientific knowledge** refers to scientific research as such as well as to scientific discourse of an academic. Scientists may take different public positions in the policy-making process (*scientific experts, policy advisors, observer-turned players, lonely prophets* or *social movement theorists/activists*) which may influence the ways in which their findings or knowledge are utilised. This study will examine how scientists themselves perceive and handle these engagements. In accordance with the literature, I expect to find that establishing networks or having relationships with key players inside and outside the policy-making process are *strong facilitators* of knowledge utilisation.

The **media** and **interest groups** are also expected to play a decisive role. Previous studies have shown that media and associations advocating for drug users' rights as well as groups presenting parents or ex-drug users advocating against drug use may act as *strong* facilitators of knowledge utilisation in the drug policy field. However, details about their particular influence have been largely missing in the knowledge utilisation studies in the drug policy area. This study aims to offer a modest contribution towards this understanding.

Figure 2: Conceptual framework



2. Ontological and epistemological assumptions

2.1. A diversity of paradigms

Guba and Lincoln (in Denzin and Lincoln, 1994) distinguished several competing paradigms (e.g. positivism, critical theory, constructivism,...) which can be placed on a continuum. Paradigms are viewed as basic belief systems based on ontological (What is the form and nature of reality?), epistemological (What is the nature of the relationship between the knower or would-be knower and what can be known?) and methodological (How can the inquirer go about finding out whatever he or she believes can be known?) assumptions (Walliman, 2011).

There are several broad and diverse traditions but, while sharing several assumptions, I discuss them in terms of two broad traditions. In a *positivist view* of the world, reality exists independently of what anyone knows, thinks, or believes about it (Rubin and Rubin, 2005). Science is seen as the way to get at truth, to understand the world well enough so that we might predict and control it (Mortelmans, 2009). In this context, positivists deal with explaining causal relationships and most importantly direct cause and effect relationships. The positivist paradigm also denies the historical and social context (e.g. existing power relations in society). Scientific inquiry is seen as the core knowledge production process. Positivism is not valuable in studying complex, changeable social processes containing a variety of actors. It strips away context and meaning (Rubin and Rubin, 2005). Another claim made in these traditions is that research produces objective and value-free knowledge. Knowledge obtains the status of truth which is separated from the opinions and values of the researcher.

A contrasting composition of traditions is associated with a *(social) constructivist or interpretive perspective*. This tradition views knowledge as socially constructed and dependant on circumstances. According to Schwandt (2000), "*Knowledge is not disinterested, apolitical, and exclusive of affective and embodied aspects of human experience, but in some sense ideological, political, permeated with values.*" (p.198). This perspective assumes that social reality is produced and reproduced through actions and interactions between people and their world, and developed and transmitted within an essentially social context. Social reality is not determined, it is socially constructed (Hebberecht, 2002). Multiple versions of the same event can be true at the same time (Rubin and Rubin, 2005). In other words, this approach values multiple realities that people have in their minds (Golafshani, 2003). It also maintains that scientific research is not the result of an objective understanding of the natural world. Rather, science has a social component, which makes it subject to an array of influences (e.g., demographic characteristics of scientists, organisational processes, social and cultural context in which research is developed, etc.) through which knowledge is certified (Davies, 1997; Guston, 2000). In this view, knowledge ob-

tained by research can be considered as partial and relative (to the researcher's view and values) (Rubin and Rubin, 2005).

Alternative approaches, taking a position between both main traditions, provide arguments for a *critical framework*: there is no objective or value-free knowledge (the researcher and the object of research are assumed to be interactively linked; (social) constructivist perspective) and power inequities and value systems have to be acknowledged (Guba and Lincoln, 1994). The social reality is historically shaped through the social, political, cultural and economic context and is the result of human action. This framework assumes that some interpretations (i.e. those of the more powerful and dominant groups) are taken as more valid than others. The focus is on the role of the state, society and the public at large which offers a framework for analysing how behaviour is problematised and controlled by the government through different kinds of actions and reactions (Hebberecht, 2002). In other words, the critical framework adds the view that all perspectives are ideologically influenced. It is their epistemological position that most differentiate the critical framework and the constructivist approach from the positivist view (Guba and Lincoln, 1994).

2.2. Choosing an approach

This study does not put a primacy on scientific knowledge as the source of truth but regards social science research as disassociated from reality, and the findings of research as an abstraction. Ontologically, I doubt the existence of an objective reality. Social reality is not given or determined, it is *socially constructed*: there are only socially bound perspectives on reality (Guston, 2000; Hebberecht, 2002). This approach provides a helpful perspective to understand the beliefs, values and perceptions of different actors and the processes of interactions among these individuals. I do not separate the world of research and the world of policy-making but see knowledge and policy as interrelated. The very idea of two *autonomous* communities (Caplan, 1979) has not captured how the policy process shapes and modifies how or why scientific knowledge is used, abused or ignored (Stone, 2001). Simple *linear* models, studying the rational or instrumental approach of policy (and the science-policy nexus), have also been criticised because the social context in which the process occurs is neglected (Sutton, 1999; Neilson, 2001; Devos, et al., 2009). Most interestingly, they criticise the current notion of *evidence-based* policy which relies on positivist, rationalist assumptions (Bacchi, 2009). Thinking about the science-policy nexus from a social constructivist tradition is valuable to explore different perspectives of knowledge utilisation as well as how particular kinds of knowledge come to be seen as useful and valid, by whom and in what contexts. Constructivist researchers address the multiple mech-

anisms and avenues for informing the policy process (even from the sidelines) (Lancaster, 2014).

Furthermore, I regard drug use, the focal theme of the study, as a social construct. The concept of drug use is constructed by socially institutionalised definitions. Debates about drug use are not a simple reflection of the properties of the drug itself but they rather reflect the nature of society (Dingelstad, et al., 1996). Scientists, the media and policy-makers play a role in constructing drug use. On the one hand, while the scientific world aims to discover and name the problem and construct 'proof' through appeal to scientific knowledge, the media may be responsible for the process of commanding attention and legitimating the claim. On the other hand, policy-makers are able to invoke action and mobilise support (White, 2008).

In general, this study is essentially applying an interpretive approach (social constructivism), including critical concerns. The process of policy-making is concerned with the power to make decisions, to control resources or to control people's behaviour (Watkins, 1994; Stevens, 2011). Similarly, the choice of what counts as scientific knowledge and who is considered as authoritative or trustworthy involves acts of power (McNay, 1994). Hence, I acknowledge the likelihood that scientific knowledge may be used strategically by dominant groups (Huberman, 1994). Policy can be seen as an ideological construct in favour of particular powerful groups and scientific arguments may help to reproduce this (Letherby and Jewkes, 2002).

3. Qualitative methodological approach

Traditionally, a (*social*) *constructivist or interpretive* approach implies the application of qualitative methods, as opposed to quantitative methods (Morgan, 2007; Mortelmans, 2009). Qualitative methods allow us to explore a phenomenon in order to generate a richer understanding of the full range of opinions and experiences on this phenomenon (Mortelmans, 2009; Decorte and Zaitch, 2010). In other words, these methods seek to understand a given topic from the perspectives of the population it involves (*insider's view – emic perspective*) while capturing the historical and social context, instead of taking an *outsider (etic)* perspective. The distinction between qualitative and quantitative research methods has also been classified as the distinction between subjective versus objective, between idiographic versus nomothetic, between exploration and understanding versus prediction and control (Creswell, 2009).

This study adopts a qualitative methodological approach in order to understand the complexity of the knowledge utilisation process. Qualitative measures may provide us with information or access to meanings and choices regarding the knowledge utilisation process and allows us to

delve into parts of this process. Previous studies on knowledge utilisation in the drug field also argued that these how and why questions are best answered through qualitative research methods. Quantitative methods would reduce knowledge utilisation to variables and causal relationships, without providing insight into the experiences, beliefs, values that actors and networks attribute to the science–policy nexus (Landry, Lamari and Amara, 2003). Then, the object of study would be quantified: the focus would be on the frequency and extent of knowledge utilisation and the phenomenon would be cast into categories (assuming that it is a homogenous, unchanging, or static concept). Furthermore, answers to questions in a quantitative questionnaire may be expected to be unreliable because the firm structuring of questions may influence the answers received (Huber and Power, 1985). Respondents may tend to reply in a manner that will be viewed favourably by others (e.g. about political utilisation of scientific knowledge; *social desirability bias*). Statements about (indirect) knowledge utilisation cannot be studied adequately as each respondent has his/her own definitions of use (Rich, 1997; Landry, Lamari and Amara, 2003; Klein Haarhuis, Hagen and Scheepmaker, 2009). However, qualitative methods have their disadvantages as well: it is more difficult to determine the validity and reliability of data (e.g. it is tricky for qualitative researchers to make generalisations from a sample to a population; researchers' bias (like e.g. subjectivity) are unavoidable) and qualitative research methods often require a lot of time and/or money while a rather small number of respondents is reached (Hammersley and Gomm, 2008; Decorte and Zaitch, 2010).

4. Technical design: Case study

A case study design is an appropriate strategy of research to obtain an in-depth view of a social phenomenon in its (naturally occurring) context, over a certain period and by means of the descriptions and explanations of the population under study (Bloor and Wood, 2006). As I will elaborate below, this design is particularly useful to describe and understand how scientific knowledge contributed to the development of Belgian drug policy between 1996 and 2003.

4.1. Why a case study design?

A case study serves the purpose of identifying **complex processes** (Yin, 2003; Bloor and Wood, 2006). In particular, a case study design provides a *thick description* that is essential for a detailed and holistic understanding of the context and processes within a particular setting and time period (Gerring, 2007; Swanborn, 2008). This is very suitable for this study, as the science-policy nexus involves complex and dynamic interactions between policy-makers, scientists and other key players like the media or interest groups. Likewise, in the literature, I found that it is difficult to adequately trace the flow of information from the time it enters the policy-making process to the time that some action/decision is taken, unless the policy domain is monitored for

at least a *long period* (Sabatier, 1998; Lindquist, 2001; Kingdon, 2002). A case study allows us to study the phenomenon intensively over a long-term time period.

Second, a case study design is preferred when **how and why questions** are posed. I have argued earlier that I want to describe *how* scientific knowledge contributed to the Belgian drug policy-making process. In particular, I will explore *how* actors (i.e. members of the Parliament, members of the Government, media, scientists, interest groups) and factors (i.e. characteristics of scientific knowledge, political context, budget, etc.) influence *why* (or why not) scientific knowledge contributed to this process (Yin, 2009).

Furthermore, **previous research** on the science-policy nexus also showed that a case study design is an approach highly suited to understand the nexus (Landry, Amara and Lamari, 2001; Brans, et al., 2004; Elliott and Popay, 2000; Carden, 2004; Monaghan, 2009; Zampini, 2014; Brewster, 2014). As stated above, most of these studies analyse knowledge utilisation in one or more cases. An example of a case may be the historical development of a policy (e.g. prison policy, cannabis policy, migration policy, ...) (Duke, 2001; Brans, et al., 2004) or a new policy measure, for example the establishment of new cannabis legislation; the implementation of safe injecting rooms or treatment of heroin dependence; the implementation of the Illicit Drug Diversion Initiative (IDDI),... (Lenton, 2004; Lenton, 2007; Hughes, 2007; Hughes and Stevens, 2010; Hall, 2008; Hall, 2004; Monaghan, 2009; Macleod and Hickman, 2010). Some researchers prefer to study more than one case. Two or more research projects are sometimes selected as cases (Elliott and Popay, 2000; Carden, 2004). Similarly, Bak Jørgensen (2011) investigated the role of expert knowledge in migration policy in two countries (cases): Denmark and Sweden.

Finally, no matter how many cases are included in a study (e.g. a single or limited number of cases), a case study design always runs the risk that the number of cases will not be sufficient to reduce the generalisation problem. However, advocates of the case study have responded to this criticism by claiming that the kind of generalisation is rather analytical or theoretical. Yin (2003) states that "*case studies [...] are generalisable to theoretical propositions and not to populations or universes. In this sense, the case study [...] does not represent a 'sample', and in doing a case study, your goal will be to generalise theories (analytical generalisation) and not to enumerate frequencies (statistical generalisation)*" (p.10). In contrast with statistical generalisation that demonstrates the validity of an argument for statistical populations or universes, **analytical generalisation** aims to create and expand theoretical frameworks that should be useful in analysing similar cases (Swanborn, 2003; Bloor and Wood, 2006; Gerring, 2007). Thus, case studies, by providing a depth and richness that are indispensable to social sciences, have a general rele-

vance and are able to generate ideas and theoretical conclusions about the science-policy nexus in the drug field.

4.2. *The development of Belgian drug policy between 1996 and 2003: why this case?*

The selection of case(s) is crucial to the purpose of each case study design (Swanborn, 2003; Bloor and Wood, 2006; Gerring, 2007). Whereas much research focuses on a single case, often chosen because of its unique characteristics, the multiple-case study design allows the researcher to explore the phenomena under study through following a replication logic. The conceptual framework, identified through the literature review, assisted me in selecting a case for my study.¹¹

First of all, existing studies on the science-policy nexus sometimes focus on a *type of research* (e.g. evaluation research) or on studies conducted within a *research institute or programme*. However, it is difficult to measure the impact or influence relative to a single, research project. As research projects generate several effects, it is rather impossible to distinguish the impact of a particular research project from that of other influences with which the findings get mixed (Hanney, et al., 2003; Ritter and Lancaster, 2013). Selecting a *policy area, policy debate or policy measure* may facilitate some assessment of the science-policy nexus because it may identify how far the policy-making process has been informed by scientific knowledge taking into account contextual issues.

While some researchers studied a *historical case* (e.g. the (re)classification of cannabis in the UK (Monaghan, 2009), or the historical evolution of prison drug policy (Duke, 2002)), others examined *contemporary issues* in the science-policy nexus, such as the perception of policy-makers or researchers about the way research results are used under the present circumstances. Choosing a historical case has however some methodological advantages. Leaving aside the reality that some information may be lost due to memory bias, retrospective recalls about a historical, heavily politicised case offer the researcher a clear cut-off point for analysis and undoubtedly ensure that the answers of interviewees are less influenced by the current (political and public) context (cfr. *social desirability*) (see also below, §5.3.3.). A study about the perceptions regarding current use of scientific knowledge in the Belgian drug policy-making process would have been biased by the political developments when I started my PhD. Belgium was locked in a political impasse

¹¹ Next to the case of the development of Belgian drug policy between 1996-2003, we, initially, selected a second case (i.e. the development of the local drug policy in the city of Antwerp) but the aim of achieving a manageable case for detailed analysis brought this study back to one case.

between 2010 and 2011. After the elections in June 2010, policy-makers failed to produce a new government until the end of 2011.

Furthermore, the specific period of the development of Belgian drug policy (1996-2003) provides a *critical case*¹² for examining the contribution of scientific knowledge in the drug policy area. In other words, the case can be seen as useful in replicating or extending theory by filling conceptual categories (Denzin and Lincoln, 2003). The aim is to understand through *which modalities* scientific knowledge contributed to the Belgian drug policy-making *process* (and not just in the *outcome* of policy formulation). Additionally, according to the literature, *windows of opportunities* may open infrequently and briefly. These key arguments supported the selection of this particular case. I have chosen the period between 1996 and 2003 because drugs appeared on the political and media agenda in 1996 (*window of opportunity* opened) and increasingly attracted the attention of policy-makers, scientists and media until 2003. Processes of interaction and engagement between these actors have been observable in this case. Between 1996 and 2003, drug policy has been the subject of *debate* and *interaction* between the majority and the opposition parties within the Belgian Federal Parliament¹³ and Government¹⁴ and between *policy-makers, scientists, the media* and *interest groups*. Clearly, this case allows the detailing of the contributions of scientific knowledge to both processes (parliamentary and governmental). Similarly, as the drug phenomenon quickly and repeatedly gained media attention between 1996 and 2003, the selection of this case also makes it possible to study the role of the media (and interest groups) in improving or hampering the science-policy nexus. Likewise, a respondent mentioned that the development of the drug policy in Belgium (1996-2003) can be seen as a case in which each of those actors were explicitly engaged.

¹² Nevertheless, I am aware that choosing a case that has the greatest amount of discussion about the topic under study might bias the results in favor of showing the strongest links between science, policy (and media or interest groups).

¹³ The Federal Parliament (consisting of two assemblies, the Chamber of Representatives and the Senate) is an obligatory point of passage as it performs several important functions: e.g. law-making and political control. In the Chamber of Representatives as well as the Senate several commissions and meetings are held. Important issues like voting on bills, amendments and motions or deliberations on bills and budgets are almost always dealt with in plenary meetings, consisting of all elected members of the Parliament. Obviously, members of the Parliament in an oppositional position may play a very active role here (and their statements might even be slightly overrepresented). Standing Commissions can decide to set up a working group charged with hearing experts, conducting searches and seizing documents. An example of a working group is, for example, the Parliamentary Working Group on drugs (PWG).

¹⁴ The so-called Copernicus reforms of the Government (1999-2003) aimed to decrease the powerful (political) role of the Ministerial Cabinets and to give the civil servants of the Administration ('Federal Public Services' (FPS) at the federal level or 'Departments' at the federate level) a more decisive role. As a result, the Ministerial cabinet was replaced by a personal secretariat of the Minister, a policy council ('beleidsraad') and a policy cell ('beleidsvoorbereidende cel'), which together formed the policy-making bodies of the member of the Government. The secretariat is situated on the level of the Minister while the cell is situated on the level of the Administration. The policy council forms the bridge between the Minister and the Administration. However, the neutral cell situated in the Administration remained the powerful and political player of the Minister (cfr. Ministerial Cabinet). In practice, it just meant a change of name (Devos, 2006).

"I think you selected a perfect time period. At that time, the political debate was very vivid, political parties had contacts with interest groups, the issue got a lot media coverage, etc. Now, the attention is rather absent on each level" (Respondent 29, policy-maker).

5. Data collection methods

In a case study design, researchers often use a variety of data collection methods in order to reach a holistic understanding of the phenomenon (Swanborn, 2003; Kohlbacher, 2006; Creswell, 2009). In this study, two data collection methods are used. The objective is not so much to place one kind of data against another but to use them in conjunction with one another.

Critical Discourse Analysis (§4.1.) is concerned with the contribution of scientific knowledge present in recorded talk (e.g. media, official statements of the parliamentary/governmental debate). It has benefits in drawing a critical but rich picture of an issue (e.g. use of scientific knowledge) within a particular setting (e.g. media, policy debates), and in revealing taken-for-granted and hidden values, positions and perspectives (McLaughlin and Muncie, 2013).

Retrospectively exploring experiences of policy-makers, scientists, journalists and members of interest groups by means of *semi-structured interviews* (§4.2.) further enhanced our understanding of the processes of knowledge utilisation, and the (informal) interactions between the multiplicity of actors, networks and contextual issues in particular.

5.1. Critical Discourse Analysis of policy and media documents

The analysis of documents (i.e. letters, notes, invitations, meeting reports, newspaper articles, etc.) is described as a major method of social research (Mason, 1996). Documents are of particular importance for qualitative research because access can (sometimes) be easy and at low cost, because the information provided may not be available in oral form and because documents may give historical insight (Hodder, 2003). According to Mortelmans (2009), documents may be used as background information or as source of information about incidents and events. Although documents are a non-negligible source, they are never a complete representation of the real discussion or activity (Silverman, 2006; Mortelmans, 2009). Documents are always written with a specific purpose and for a particular audience in a specific setting.

In this study, I use documents as a source of *background information* to explore the chronology of the development of the Belgian drug policy between 1996 and 2003. Secondly, I acknowledge that documents represent rather partial accounts which require *critical assessment*. Such analy-

sis may assist in critically examining the policy and media discourse about drug policy and if and how the central actors used scientific knowledge or other types of information.

Before I focus on the general characteristics of a Critical Discourse Analysis (§5.1.2.) and the particular approach that I have adopted to study the science-policy nexus in the development of Belgian drug policy between 1996 and 2003 (§5.1.3.), I briefly address the definition and the different types of discourse analysis (§5.1.1.).

5.1.1. What is a discourse and a discourse analysis?

Discourse is a complex term, and is not defined consistently.¹⁵ Generally speaking, it is assumed that discourse is not a neutral communicative resource which reflects reality in transparent ways. The concept of discourse implies that *truth* is socially constructed through talk (McLaughlin and Muncie, 2013). The focus of discourse analysis¹⁶ is any form of written or spoken language, such as a conversation (e.g. interview), a newspaper article or policy document. A discourse analysis is suitable for looking at *what is said* but also at *how something is expressed (emic perspective or insider's view)*.¹⁷ The emergence of meaning is always considered a matter of interaction processes between people and texts (*intertextuality*; the use of text in other texts such as a newspaper article referring to a scientific report; see also below, §5.1.3.). These interaction processes may in some cases focus on the micro-level of conversations (e.g. *Discursive Psychology (DP)*¹⁸, *Conversational Analysis (CA)*¹⁹) but sometimes also on the broader (social or historical)

¹⁵ While some authors understand discourse as the “*language that is structured according to different patterns that people’s utterances follow when they take part in different domains of social life*” (Jørgensen and Phillips, 2002, p.2), others offer a critical approach considering causes and consequences of broader, historical, contexts and changes (Wodak and Krzyzanowski, 2008). According to Michel Foucault (1972): “*we shall call discourse a group of statements in so far as they belong to the same discursive formation [...] Discourse is made up of a limited number of statements for which a group of conditions of existence can be defined. Discourse in this sense is not an ideal, timeless form [...] it is, beginning to end, historical – a fragment of history [...] posing its own limits, its divisions, its transformations, the specific mode of its temporality*” (p.117).

¹⁶ The general label of *discourse analysis* is mostly applied to both formal linguistic techniques as well as theoretical propositions of, for example, Laclau and Mouffe or Foucault (Torfing, 1999). However, a distinction is sometimes made between *discourse analysis* and *discourse theory*, with the latter notion particularly referring to the theoretical propositions. In the following paragraphs, I will use the general label *discourse analysis*.

¹⁷ Offering a different perspective of theorising and analysis, *content analysis* is essentially seen as a quantitative method consisting of counting the numbers of occurrences per category. This type of analysis assumes that there is a relationship between the frequency of content and meaning and, therefore, fits more within the positivist research tradition (Krippendorff, 2013).

¹⁸ Discursive psychology (DP) considers that human thinking (e.g. reasoning, emotions) is an inherently social activity ingrained in one’s use of language. For instance, reasons are seen as mental constructions made within the context of a person’s larger social and cultural world view and his or her need to convey a particular image of the self (Bagozi and Dabholkar, 2000). In other words, DP studies the identities, minds and selves within naturally occurring discourse. As discursive psychology also analyses talk between people, it has similar assumptions like Conversational Analysis (CA) (Wetherell, Taylor and Yates, 2001a).

¹⁹ Conversation Analysis (CA) is frequently used to study discourse in speeches or talks because this method focuses on discourse in social interactions or day-to-day conversations. This type concentrates on the talk itself and what people do when they talk while context is relatively unimportant.

context (e.g. Critical Discourse Analysis (CDA), Foucauldian discourse analysis) (Wetherell, Taylor and Yates, 2001b; Wodak and Meyer, 2001).

5.1.2. Critical Discourse Analysis (CDA)

Taking into consideration the conceptual framework (and research questions) of this study, a Critical Discourse Analysis can be very useful. It is a **critical** mode of analysis: a researcher should exercise a high degree of scepticism in the reading and interpretation (Mason, 1996). Foucault (1981) stated that: *“a critique does not consist of saying that things aren’t good the way they are. It consists of seeing on what type of assumptions, of familiar notions, of established, unexamined ways of thinking the accepted practices are based”* (p.456). Drawing on a (critical) social constructivist approach, documents are properly used as a topic, not as a resource. Analysing and understanding the science-policy nexus does not only require a textual analysis of what an individual says or writes (e.g. are references to scientific knowledge made?, how is scientific knowledge used?). I also aim to explore how scientific knowledge itself has been conceptualised in the policy-making process (e.g. which scientific research is considered useful? who is considered as knowledgeable expert?). As argumentation and persuasion are involved, scientific knowledge may (or may not) find its way into policy through power struggles (Szarka, 2004).

A central notion in most critical work on discourse is that of **power**, and more specifically on how power relations are exercised and negotiated in discourse (Bacchi, 2009). Van Dijk (2003) argues that all levels and structures of context, text, and talk may be controlled by powerful groups. For instance, dominant groups may play a prominent role in determining crime and crime control where the power of dominant groups may be integrated in laws or rules and, thus, control the acts and minds of the dominated groups (Van Dijk, 2003). In a similar vein, drug policy can be considered as a political-ideological construction (Hebberecht, 2009). While policy-makers dominate or control political discourse, the same can also be said for other discourses: e.g. journalists control media discourse and academics control scientific discourse. *“Power does not belong to particular agents such as individuals or the state or groups with particular interests; rather, power is spread across different social practices”* (Jørgensen and Phillips, 2002, p.13). Each powerful position does presuppose a privileged access to a particular resource such as money, status or knowledge/information. For instance, rich people may obtain and maintain power because of their money whereas professors may achieve power based on their knowledge or credibility (Van Dijk, 2003). In relation to the science-policy nexus, this may work in two ways: on the one hand, deciding who is trustworthy or qualified to advise in the policy-making process involves acts of power (Van Dijk, 2003; Acevedo, 2007). For instance, a medical policy discourse may come to constitute particular objects as distinct and factual as well as to qualify a doctor as

a particular trustworthy individual with knowledge and authority (*processual model*; Monaghan, 2011). On the other hand, within the struggle between different knowledge claims, it is assumed that scientific knowledge that is structured and institutionalised through policy discourse is likely to attract the support of powerful groups (*evolutionary model*; Stevens, 2007b).

The relationship between **text and context** is also an important theme in a Critical Discourse Analysis. Meyer (2001) mentions that the notion of context is crucial for CDA as this includes historical, political and ideological components. As a result, to understand the text, it is important to incorporate elements of context into the analysis of texts. For instance, the characteristics and procedures of the Federal Parliamentary debate may influence and affect what constitutes scientific knowledge and how it is used (e.g. in submitting questions or interpellations, one may expect that MPs of opposition parties will use scientific knowledge selectively to support their case and disprove that of others).

Furthermore, a Critical Discourse Analysis allows one to make a **bridge between micro level and macro level** instead of focusing on the micro-level (e.g. this is the focus in Conversation Analysis) or on the macro-level (e.g. Foucauldian discourse analysis assumes that discourses can only be understood with reference to their historical context). For instance, a CDA focuses on speeches or interactions in the Parliament (discourse at the micro-level), while taking into account that this may enact or be a constituent part of legislation or the reproduction of power at the macro-level as well.

Leaving aside these general characteristics, some *criticisms* towards the method and perspective of Critical Discourse Analysis (CDA) are worth mentioning. Carvalho (2008) criticised the large focus on policy discourse while media discourse is frequently ignored. Furthermore, it is argued that the concept of Critical Discourse Analysis is in itself an abstract label that is relatively open-ended.²⁰ Rogers (2004) mentioned that “*Approaches to CDA may vary at the ‘critical’, ‘discourse’ and ‘analysis’ sections of the method, but must include all three parts to be considered a CDA.*” (p.1). Despite these differences, the work of Foucault had a significant influence on the general framework of Critical Discourse Analysis. Foucaults’ *archaeology* (What are the rules for the

²⁰ Different types of Critical Discourse Analysis exist. Some critical analysts focus on linguistic details (e.g. patterns in vocabulary, intertextuality) (Wodak and Meyer, 2001) or on the cognitive basis of representations (e.g. Van Dijk). According to Van Dijk (2001) “*Cognition involves both personal as well as social cognition, beliefs and goals as well as evaluations and emotions, and any other “mental” or “memory” structures, representations or processes involved in discourse and interaction.*” (p.97-98). A critique of this approach is that such mental states and processes are private or personal and that a study of discursive social interaction should attend to the public dimensions of text and talk. Others (e.g. Norman Fairclough) are interested in the relationship between different levels of social practices.

formation of a discourse?) and *genealogy*²¹ (How do discourses change historically? What role do these discourses play in the political decision?) focused on the identification of a number of typical discourses and, in particular, on which thoughts underlie these problem representations. Foucault's way forward was to examine the effects of discourses (and less the content and sources of discourse) (Bacchi, 2009). Furthermore, his macro-sociological analysis of social practice was rather abstract and did not provide a particular methodology for the close analysis of specific texts (Fairclough and Fairclough, 2012).

5.1.3. Critical Discourse Analysis framework of Norman Fairclough

In this study, I apply the Critical Discourse Analysis framework of Norman Fairclough. This approach oscillates between a textually oriented analysis (content) and a focus on macro-sociological analysis (context) (Fairclough, 2003). In particular, with the aid of the approach of Fairclough (2003), discourse is seen as *the use of language as a form of social practice*, meaning that discourse is inherent in every social action and interaction. The *dialectical* relationship between different levels of social practices (e.g. media coverage, parliamentary/governmental decisions, academic discourse) and between discourse and other elements of social life (e.g. relations of power) are two of his main points (Fairclough and Fairclough, 2012). For Fairclough, a textual analysis alone is not sufficient for discourse analysis as it does not shed light on the links between texts and societal and cultural processes (Jørgensen and Phillips, 2002). Discourse is also seen as the product of power because it embodies what is understood to *make sense*, to be *true* or to yield *authority* (Burchell and Foucault, 1991; Fraser, et al., 2004). Likewise, his focus on *intertextuality* (i.e. the use of text in other texts such as a newspaper article referring to a scientific report; see also below) may allow one to identify which texts and voices are included (and excluded) in a given text (Fairclough, 2003). Such an approach systematically describes the various strategies of text, and relates these to the social or political context (Hajer, 1995; Vianello, 2011). Therefore, in the literature, this approach is identified as a suitable way for analysing policy as well as media discourses (Fairclough, 1998; Mautner, 2008; Thomas, 2009).

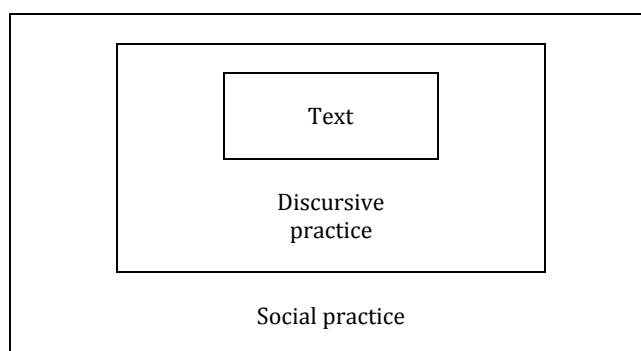
Furthermore, Fairclough's approach represents the most developed methodological framework for CDA (Jørgensen and Phillips, 2002). In a search for a *methodological framework* suited to systematically structure and analyse the multitude of data included in the policy and media documents, it appeared that few Critical Discourse Analysts developed clear methodological tools

²¹ The work of Michel Foucault developed from the early text on madness ('Madness and Civilization') over the studies 'Order of Things' and 'Discipline and Punishment' to the final study of sexuality ('History of Sexuality'). The first period has been described as a period of *archaeological* investigations, while the later studies have been seen as *genealogical* analyses. This evolution considered a transformation from a descriptive/historical perspective on discourses towards a greater critical and explanatory consideration of the interface between discursive and non-discursive practices and the power-knowledge nexus (e.g. why and how discourses occur).

for empirical research of specific texts (Jørgensen and Phillips, 2002; Bacchi, 2009). Critical Discourse Analysts generally agree that a discourse analysis consists of detailed and repeated reading of the text in an attempt to identify categories, themes, ideas, views, roles, and so on, within the text itself. The analysis may then result in an overview of structuring concepts, ideas and categorizations, story lines, metaphors, etc. (Wetherell, Taylor and Yates, 2001a). A clear methodological framework can be perceived as a fruitful starting point, especially because interpretations of the data are always subjective: another researcher may interpret the same documented data differently (Wetherell, Taylor and Yates, 2001b, Fairclough, 2003).

Fairclough's method of CDA consists of a 3-dimensional framework: (1) textual analysis (e.g. description of the content, sentence structure and text structure, vocabulary, social actors (who speaks?), ...); (2) discursive practices (e.g. production and interpretation of the meaning of the text, context of the author, intertextuality, ...), and; (3) social practices (e.g. relation between the text and discursive practices and the wider society). Some refer to this framework as exercises in description, interpretation and explanation where the last phase refers to the dialectical relationship between discourse and society, for which Fairclough claims affinity with Foucault (Fairclough, 2003).

Figure 3: Fairclough's three-dimensional framework



Source: Fairclough (1992, p.73)

Fairclough (2003) developed a checklist of 12 analytical tools. These tools are: social events, genre, difference, intertextuality, assumptions, semantic or grammatical relations between sentences and clauses, speech functions and grammatical mood, discourse, representation of social events, styles, modality and evaluation. Here, a dichotomy of *internal* relations to text and *external* relations to text is often used to make a distinction between an internal analysis rather focusing on the (linguistic aspects of the) text and an external analysis rather paying attention on

the context (Fairclough, 2003). In particular, analysis of the internal relations includes analysis of linguistic details as semantic, grammatical, vocabulary, phonological relations. External relations refer to relations between one text and other texts which are external to it: **social events, genre, difference, assumptions, discourse, representation of social events, intertextuality, styles, modality** and **evaluation**. A researcher must make his/her own choice in applying these tools depending on the research questions and the topic under study (Joye, 2011). In our study, of the twelve tools, I will only focus on the 10 tools related the external relations of texts (i.e. relations with other elements of social events, practices and structures). I did not focus on internal relations such as semantic, grammatical, vocabulary, phonological relations or speech functions as applied by the purely linguistic tradition of discourse analysis (Wodak and Meyer, 2001). According to Jacobs (1998), a focus on internal elements in e.g. parliamentary debates may reveal bias. Parliamentary documents are written representations of oral debates which means that some spoken details may have been changed while writing these down. Hesitations or slips of the tongue are removed. Thus, a better strategy is to examine the content of the text, the general discursive patterns and social context rather than linguistic details as semantic, grammatical, vocabulary, phonological relations. Below, while focusing on three aspects (the source of the document, its context and the text itself), I elucidate each of the selected 10 tools in more detail (see also Appendix I).

Source of the document refers to the type of publication/document, title, publication date, author(s) and the authority of the author(s) (i.e. who says it and on what grounds?).

Context refers to the nature of the document, its goal(s)/objective(s), the target population (audience), publication form, role in the parliamentary/governmental debate, etc. Documents and texts always need consideration of the social context as they do not exist separately from the rest of the social world. They are embedded in **social events** (Fairclough, 2003). The central issue is: to which social event or chronology of social events does the particular text belong? For example, in this case, a distinction can be made between parliamentary and governmental actions where texts are considered as elements of these social events. Within this framework, I also consider the **genre** of the text or document. A genre is a type of text or language used in the performance of a particular social practice. In other words, how does the text or interaction fit within and contribute to social action and interactions in social events? For instance, the genre of media texts, following Norman Fairclough, may recontextualise the arguments which policymakers have put forward (Wodak and Krzyzanowski, 2008). Also the discursive genre of parliamentary/governmental debates has its specificity: on the one hand, politicians aim for mobilising the public (to achieve a lot of votes) and on the other hand they aim for positioning them-

selves towards professional opponents (Jacobs, 1998). Both genres are therefore linked: for example, members of the Parliament know that they always speak on the record and that the press is keeping an eye on them.

In studying and analysing *texts* I will consider several elements. A **discourse** is a particular way of representing some part of the world. As stated above, different social groups often have different (alternative or competing) discourses. Related to the topic under study, I look for several competing discursive systems: e.g. biomedical/clinical discourse, public health discourse, sociological discourse, legalistic/repressive perspectives (Hartnoll, 2004). **Difference** is fundamental to social interaction. For instance, in this study, differences may exist regarding terminology or discourse about drug use/cannabis. Within the policy-making process, the orientation of difference in the text may vary too: an openness to difference, an accentuation of difference and conflict or power, an attempt to resolve difference, a focus on solidarity or a consensus. Similarly, a discourse contains certain (implicit) **assumptions**. There are different types of assumptions: existential assumptions (i.e. assumptions about what exists, characterised by using classificatory categories), prepositional assumptions (i.e. assumptions about what is or may be), value assumptions (i.e. assumptions about what is good and/or bad) and ideological assumptions.

It is also important to examine which persons are represented in the text and from which perspective or viewpoint (e.g. whether they present themselves in support of or against a statement/discourse, or where no clear position is taken). The tool **styles** are linked to social identities. Using this tool, I will study the way people present themselves (e.g. do they perceive themselves as experts or as having authority? are they part of a network?) and which position they take (e.g. *dual roles*: a policy-maker may use his role a parent to support some arguments; a *public role* ranging from scientific experts to policy advisors, observer-turned players, lonely prophets, or social movement theorists/activists).

Representations of scientific knowledge are also studied. It is interesting to consider the choices made in describing, quoting and portraying scientists, scientific knowledge and the interpretation of scientific research. Regarding to the tool **evaluation**, my analysis focuses on statements concerning good/bad or (un)desirable, affective attributes of scientific knowledge (e.g. qualitative – quantitative data; theme/topic; terminology; quality judgments). Similarly, the tool **modality** concerns the question: how do texts assess scientific knowledge in terms of truth and necessity? is more power and authority attributed to scientists than to other actors? which voices are included and excluded? A particular discourse may come to constitute particular experts or type of experts with authority.

Furthermore, the emphasis also lies on the **representation of social events**. It is relevant to examine which contextual elements (e.g. political context, international discussions), related to the social events under study, are represented in the texts and which are the most salient, in this case, in the development of Belgian drug policy between 1996 and 2003.

Examining how texts draw upon, incorporate, (re)contextualise and dialogue with other texts, is called **intertextuality** (Fairclough, 2003). In other words, this refers to making use of text in other texts (e.g. a newspaper article refers to or makes use of results in a scientific report). The meaning and content of any text or statement is shaped by what has happened before (e.g. the dissemination of scientific research findings, the publication of a newspaper article, a particular policy decision or debate), as well as in anticipation of future responses. Focusing on intertextuality allows one to identify if and how scientific knowledge is used (*rational/instrumental, conceptual/enlightenment* and *political/symbolic*) and which other types of information competes with scientific knowledge (Fairclough, 2003).

Generally, my analysis consisted of a detailed and systematic reading of the policy and media documents in an attempt to identify the external relations of the texts (i.e. the role of scientific knowledge in argumentative structures as well as the practices through which these utterances were made) (Burchell and Foucault, 1991; Hajer, 1995). It is a way of moving beyond the actual words to draw a rich and critical picture of an issue (e.g. use of scientific knowledge) within a particular setting (e.g. governmental/parliamentary debate) and of the emphasis it is given within a group or community (Wetherell, Taylor and Yates, 2001a). I particularly focused on: the textual elements that characterise (differences between) discourses (e.g. the terminology and definition(s) of drug use or drug policy options used and the use of existential, prepositional, value assumptions); how players are represented in the text and from which perspective or viewpoint; how scientific knowledge was represented: e.g. statements about the nature, type and quality judgements of this researches, the relationship of scientific knowledge to other forms of information available, the players/networks referring to or discussing these scientific results and their motivations, and the various types of knowledge utilisation.

5.1.4. Sample of documents

My case study, of the development of Belgian drug policy covering the period between 1996 and 2003, offers many examples of communication activities (interviews, press conferences, leaks, leaflets, parliamentary interpellations) of which I study its reflection in documents. Of course, I had to clearly select the documents involved in the discourse analysis. According to Phillips and Di Domenico. (2009) this choice is difficult but decisive: *“The difficulty for discourse analysts,*

then, is how to identify a manageable, relatively limited corpus of texts that is helpful in exploring the construction of the object of analysis.” (p.560).

The work in collecting and analysing the policy and media documents was completed by one researcher over a thirteen month period (between July 2011 and October 2012). Successively, I analysed the parliamentary/governmental discourse (first phase) and the media discourse (second phase).

Parliamentary/governmental discourse (Phase 1)

Policy documents included formal, publicly available expressions of strategy and statements of intent made by the Federal Government, as well as parliamentary discussions. Given the selected case, the databases of the Federal Government and Parliament were searched²², first using general key words like *drugs, drug use, substance use*, but eventually refined key words such as *drug policy, Parliamentary Working Group on Drugs, Federal Drug Policy Note, and drug/cannabis law reform*. A strategy used to ensure that all relevant documents were retrieved for analysis, to prevent the exclusion of documents that might be marginally important, and to balance the narratives selected included an additional search with the keywords *legalisation, decriminalisation, depenalisation*, as these words were included in most of the initially selected documents. This search resulted in a total of 164 policy documents, which I have analysed. Governmental documents involved are rather scarce (due to the unpublicised character).

Media discourse (Phase 2)

Print media are rich sources of data for social scientists (Mautner, 2008). Print offers real practical advantages (e.g. easier to collect than audio-visual data, more permanent than web material) as well as benefits related to the method (e.g. if you are interested in the content and sources of discourses, the major newspapers and magazines are obvious sources to turn to). In this study, media analysis examined Belgian (including Flemish as well as Walloon) newspaper articles. In particular, the analysis covered the main Belgian newspapers and magazines: *Gazet Van Antwerpen, De Morgen, De Standaard, De Tijd, Het Belang van Limburg, Het Laatste Nieuws, Het Nieuwsblad, Het Volk, Knack - Le Vif/L'express, Trends - Tendances, L'Avenir, La Dernière Heure, L'Echo, Les Echos, Grenz Echo, La Libre Belgique, Libération, La Meuse, La Tribune, Le Soir*.

Most of the articles published in the Flemish or Walloon newspapers were collected from online media databases. In particular, the articles published in the Flemish newspapers were collected

²² The documents of the Senate and Chamber of Representatives are available online since, respectively, 1995 and 1988.

from the Mediargus database and articles published in the Walloon newspapers were collected from the Pressbanking database. However, as these databases have only been available since the end of the 1990s, the search was completed by examining archives (which was a very time-consuming process). A total number of 1,067 articles were selected (using the same search strategy as with policy documents) and analysed.

5.2. *Semi-structured interviews with elites*

Entering the worlds of those involved in the debate and engaging them in an interview is seen an appropriate way to the understanding of the knowledge utilisation process. Interactions between actors, contextual developments, informal initiatives, networks, conflicts and strategies also have to be taken into account (Trostle, Bronfman and Langer, 1999; Elliott and Popay, 2000).

Interviewing is a qualitative research technique that involves conducting individual face-to-face conversations with a number of respondents, to explore their perspectives on a particular idea or phenomenon (Decorte and Zaitch, 2010; Creswell, 2009). Interviews are useful to get detailed information about a person's thoughts or to explore new issues in-depth. They provide much more detailed information than through other data collection methods, such as quantitative surveys. Furthermore, interviews also provide a more confidential atmosphere: people may feel more comfortable having a personal conversation as opposed to filling out a survey (see also above, §3). However, conducting a number of interviews is a time-consuming activity because of the time it takes to contact respondents, conduct interviews, transcribe them, and analyse the results (Mortelmans, 2009).

5.2.1. Definition of elites

Social scientists rarely *study up*, they have traditionally identified with the disadvantaged or underprivileged, believing that to understand the latter will eventually *empower* them (Hertz and Imber, 1995; Smith, 2006). Likewise, drug research has tended to focus on the objects of policy like drug users (e.g. Becker, 1967; Young, 1971; Agar, 1973; Parker, Aldridge and Measham, 1998) instead of on those involved in the development of drug policies such as policy-makers, scientists or professionals working in the drug field (Duke, 2002; Hartnoll, 2004). Exceptions are analyses of drug markets or law enforcement and evaluations of interventions that have sought to involve or engage stakeholders such as police officers, judicial agencies and/or staff in treatment organisations etc. (e.g. Ruggiero and South, 1995; Hartnoll, 2004; Korf, et al., 2005).

Elites have been the focus of definitional squabbles that vary across a range of domains and, as a result, there is much confusion and debate surrounding this concept (Littig, 2009). In economics, elites are sometimes regarded as occupying positions at the top of the employment and income pyramid (Woods, 1998; Harvey, 2010). Others define elites as persons who hold strategic positions within a social network like, for example, senior management positions or leading consultants (Welch, et al., 2002), or people occupying positions of influence within policy and political networks (Neal and McLaughlin, 2009). Common elements comprise: having direct or indirect decisional power, having great insight in specific knowledge and/or holding information difficult to explore by other methods. However, in this way, a different range of people may be perceived as elites: policy-makers, scientists and professionals. In other words, what constitutes an elite is socially and, in case of elite interviewing, scientifically constructed (Bygnes, 2008).

While I do not believe, in line with Rice (2010), that it is possible to clearly segregate people into dualistic categories of elite and non-elite, I agreed to the use of the term to give some meaning to those who can best answer my particular research questions. In this study, I use the term elites to describe those people who are in positions of power in relation to the processes of drug policy-making. This rather broad definition, adopted from Duke (2002), acknowledges that in addition to overt indicators of power (e.g. policy-makers) there are also more hidden sites/actors of power and influence (e.g. police officers, judges, prevention workers, journalists, scientists or interest groups) (Cochrane, 1998). Existing studies mostly engage policy-makers from different levels and hierarchies while the thoughts and experiences of researchers or other relevant persons (i.e. media, interest groups) are less frequently involved (Carden, 2004; Lindquist, 2001).

5.2.2. Sampling

The discourse analysis allowed us to identify which actors played an important role in the development of Belgian drug policy. Respondents were selected on the basis of what they might know to help the researcher fit in pieces of a puzzle (Aberbach and Rockman, 2002). A selection on the basis of the researcher's own judgment about which will be the most useful, is called theoretical sampling or purposive sampling (Bloor and Wood, 2006). According to Strauss and Corbin (1998) **theoretical sampling** may be defined as *"data gathering driven by concepts derived from the evolving theory and based on concept of 'making comparisons', whose purpose is to go to places, people, or events that will maximize opportunities to discover variations among concepts and to densify categories in terms of their properties and dimensions"* (p.201). In other words, theoretical sampling evolves during the process of a research, rather than being fully predetermined at the beginning of a research. It is a suitable technique for exploring new or unchartered areas.

Initially, 62 actors were identified and selected by means of the analysis of policy and media documents. However, 8 respondents²³ explicitly refused to cooperate, 3 respondents has already passed away since and the contact details of one respondent (who was part of an interest group) were not found. Most refusing respondents felt they were not sufficiently knowledgeable about the subject (anymore) while two respondents refused because of their medical health conditions. In case a respondent refused to cooperate or at the end of each interview, I always asked them to provide names and contact details of others they thought were important for me to interview. By means of using the *snowball* technique (Farquharson, 2005) I succeeded in contacting 5 additional respondents who worked on a lower level (e.g. ministerial cabinets/ employees of MPs). This simple question not only helped me to *snowball* but also generated interesting data on who knew who, who valued who and who networked with who (which is important when studying the science-policy nexus). Experts on a lower level also appeared to have much detailed knowledge.

Eventually, a total of **55 individuals** were interviewed over an eight-month period between January and December 2013, including fifteen members of Parliament, two employees of members of Parliament, eight members of the Federal (and Regional) Government, eight employees of members of the Federal (and Regional) Government, six scientists, six journalists, four members of interest groups, and six professionals working with drug users. Taking the selection into account, a clear limitation of this sample (and a recommendation for further research) is the underrepresentation of civil servants of the Federal Administration (Federal Public Services (FPS)). As civil servants of the FPS do not come and go with the Minister but have a permanent tenure (regardless of the political colour of the Minister), their perceptions could also have been very interesting.

Theoretical sampling, a hallmark of grounded theory methodology, is a useful technique which continues until the point of theoretical saturation (Bloor and Wood, 2006). The literature talks about **theoretical saturation** when no new data is emerging from the data collection tools but rather confirms previous ideas. In my study, theoretical saturation occurred after about 50 interviews (which was more or less consistent with my sample of 55 interviews). At the same time, it gradually became clear that the most important actors involved in my case had been interviewed. The request to provide names and contact details of others they thought were important for me to interview directed me more and more to the same individuals already included in the study.

²³ These eight respondents concern 1 practitioner and 7 policy-makers. Four of them were French speaking and four Dutch speaking actors.

5.2.3. Topic list

In this study, I conducted semi-structured interviews with open-ended questions. About 54 respondents were interviewed face-to-face; I had to resort to a telephone interview with one respondent as he was working abroad.

According to Conti and O'Neil (2007), semi-structured interviews seem the most appropriate approach in studying elites, as this may focus their responses on the specific topics of interest and accommodate the short amount of time offered for the interview. These semi-structured interviews were guided by a topic list which was prepared beforehand, and which provided a framework for the interview. My topic list or interview guide was based on the topic list used in the study of Monaghan (2008a) and Duke (2002) and augmented by themes raised during the analysis of the policy and media documents. In this study, the topic list was available in both languages (Dutch or French) and tailored (but still comparable) for each type of actor: members of the Government, members of the Parliament, scientists, journalists, members of interest groups. The interview schedule covered key themes such as the particular role of the interviewee in the debate, the content of the debate, the role played by scientific knowledge, ideological/political motives, media and interest groups in the parliamentary and governmental debates, and their perception about the *evidence-based/evidence-informed* characteristic of the development of Belgian drug policy (see also Appendix II). Following a cyclic-iterative process, the topic list was sometimes slightly adapted based on new information from previous interviews.

5.3. Challenges of access, knowledge and power in interviewing elites

5.3.1. Retrospective accounts

Prior research shows that retrospective recall of events and attitudes yields reliable data despite errors attributable to faulty memory (*memory bias*) (Golden, 1992; Mortelmans, 2009). Indeed, it often appeared that it was difficult for the respondents to remember exact dates or names over such a long period of time. When conducting the interviews, respondents often made remarks such as "*I do not know, it has been a long time*" or "*It is history for me, it is amazing how much detail is gone*". Accordingly, many interviewees asked for some clarification from the interviewer. Of course, when I was asked this question, I tried to avoid any suggestive information focusing on the description of facts or dates retrieved from the documents (e.g. the participation of an interviewee in parliamentary commissions). Nevertheless, talking about the historical case seemed to be very helpful in refreshing their memories. As the interview progressed, interviewees started to remember more and more details and examples.

5.3.2. Negotiating and maintaining access

Following advice established in the literature (Duke, 2002), a formal **letter** was sent introducing the research project and requesting their cooperation with the research. I did not contact all participants at the same time (I contacted them when I was free for the next few days as some of them may have replied to me straightaway). Neither did I start with the most central key actors, in order to gain experience and confidence. However, this way of making contact proved unsuccessful, given the popularity of the internet and social media. Except for retired policy-makers and the most senior active policy-makers, most respondents did not respond to my request until I contacted them by e-mail or telephone.

"I received your letter but it got lost between the other mail. Is there a particular reason why you contacted me by means of a letter?" (Respondent 11, practitioner).

On one occasion, my institutional affiliation had explicit negative implications in gaining access. However, I succeeded in convincing the respondent to participate by stressing my academic neutrality.

"I really do not agree with the viewpoints of your supervisor and your institute and I have questions about the usefulness of my contribution to your research." (Respondent 3, member of interest group).

For this project, I selected elites on the basis of their privileged knowledge and ability to best answer my questions. Even though Welch, et al. (2002) warn researchers not to go only for the most senior or top-level people, my discourse analysis only revealed the **most visible (and most powerful) respondents**, for example, Ministers. Gaining access to these top policy-makers was an ongoing process throughout the fieldwork and involved multiple levels of barriers such as personal secretaries or spokespersons. As it is critical not to be put off by spokespersons or secretaries (Peabody, 1990; Harvey, 2010), I tried to personalise the research problem without academic jargon by making it clear why I was interested in their views and experiences.

On making contact with respondents, I left open the possibility to view the **topic list** prior to the interview as this could stimulate access and trust (Duke, 2002). Some respondents (especially policy-makers) asked me to send the topic list in advance in order to prepare themselves. In combination with their lack of time, these short but well-prepared interviews often resulted in a high quality and focused interview which filled in some parts of the puzzle. In one case, I felt that the topic list was checked out carefully in order to identify any critical questions. A personal secretary (of a still active Minister) asked me to specify some of my questions from the topic list.

She was particularly interested in the questions focusing on the ideological and political motives (see Appendix II).

Even though respondents agreed to participate, **actually meeting them** proved difficult. Very often the interview was cancelled or rescheduled at the last minute. The use of a smartphone proved to be very useful. As elites are expected to be available 24/7, they naturally assumed this of the researcher. On a number of occasions, for example, interviewees turned up late (e.g. one respondent let me wait for 1.5 hours) which challenged my ability to be flexible (e.g. to attend a subsequent interview) and not to become distracted. However, in general, it is my opinion that the problems around negotiating and maintaining access to elites often have been exaggerated in the literature. Gaining access was in some cases difficult but mainly because some of the individuals involved in the development of Belgian drug policy-making process had retired or changed jobs. This difficulty is linked with the problem of getting contact details and not with gaining access as such.

5.3.3. Interview setting and knowledge

Firstly, as a researcher, it frequently appeared useful to keep abreast of **current (political) events**. As stressed by Hunter (1995), news items may form a useful lead for the interview. Several issues actually permeated through informal discussions within the interviews and provided further insights into the politics and dynamics of the way in which policy processes work. For instance, newspaper articles about hundreds of young Europeans fighting with rebel forces in Syria led to discussions about political responsibility, parliamentary questions and representations of policy-makers in the media.

Secondly, the **interview venue**, i.e. where interviews are conducted, may determine the level of formality and the type of information respondents are prepared to disclose (Harvey, 2010). Indeed, in my experience, when the interview was held outside the respondents' office, the conversation tended to be more informal and the respondents were more prepared to disclose details. When the interview took place in a more formal setting, it was useful to avoid *behind-the-desk* scenarios and to hold the interview either around a table or on comfortable chairs or sofas in the room. This helped to place myself and the respondent in more physically equal and neutral positions.

Although qualitative methods are attractive to addressing complex and personal issues, persuading them to tell me something about their personal view was indeed not easy. These respondents (especially active ones) are still part of the societal debate in which they experience

direct or indirect decisional power. For instance, I am aware that the period of conducting interviews (between January - December 2013) was marked by a number of political and policy discussions and/or changes (i.e. local elections were held in October 2012 and federal/regional elections were held in May 2014). This could have been an important reason why **responses** given may have been '**guarded**' and represent the views of a political party or institution rather than of the individuals themselves. In some interviews, I generally felt that a (still active) respondent shut down questions and emphasised certain matters and neglected others. Retired interviewees or those who stepped down from their powerful positions were clearly less reticent to talk to me.

"I can easily talk about the issues and networks as I am no longer part of the 'game'." (Respondent 16, practitioner).

A good solution to avoiding errors in interpretation and to get as complete, honest and nuanced a story as possible from the respondent was a thorough preparation for the interview and research into the background of the interviewees. Likewise, I often tried to put forward the focus on an intellectual discussion instead of an organisationally or politically oriented dialogue, and changed the scale of my question in order to move away from the somewhat public view towards more personal narratives.

5.3.4. Role of interviewer

As described by Duke (2002) and Hertz and Imber (1995), the researcher may have to oscillate between **knowledgeability and naivety**. In my study, interviews were organised around central themes, but individually tailored and crafted for the respondent. My honesty about gaps in my knowledge and my willingness to draw on the expertise of respondents had consequences for either being dismissed or taken seriously by elites.

"The interview is finished? I want to congratulate you. It is an extensive and complex case but you've mastered it." (Respondent 41, policy-maker).

Nevertheless, I found it difficult to correct errors in the stories of respondents without appearing to be arrogant or suggestive. In those examples, I replied in a careful way, appearing to be a knowledgeable insider balanced against being an amateur outsider who is keen to learn. Only one respondent really got their facts wrong. This respondent provided wrong information and I politely tried to point to the chronology of the debate, analysing if the respondent was (un)consciously providing wrong information. As an interviewer one has to anticipate and have good knowledge of the case and the respondent's role within the event being studied. In my ex-

perience, this approach not only makes the interviewer appear credible, it also ensures that the respondent cannot offer a completely false account of events without it being queried. In one case, however, I was called unexpectedly and asked if the interview could take place within 30 minutes. This meant that I had limited time to prepare the interview and formulate my specific questions. It was a stressful moment but my flexibility and my detailed knowledge of the field of research were appreciated and therefore helped to conduct a rather high-quality interview.

Secondly, interviews were held with the oral *informed consent* of the participants. An informed consent ensures that respondents' participation is voluntary and informed, based on adequate briefing given to the participants about the details of the project (e.g. purpose of the study, privacy, anonymity and confidentiality, identity of the researchers, etc.). Even though every researcher has a responsibility regarding **anonymity and confidentiality** (Decorte and Zaitch, 2010), these assurances are more difficult when researching a well-defined but small-scale policy system. Elite respondents are particularly interested in knowing 'who else you have spoken to?' (Hunter, 1995). When I was asked this question, I tried to give vague answers because I felt that any information of this nature would impair my assurances of confidentiality and anonymity. In many cases, the respondents already knew who I had interviewed and had discussed my research and its value with other participants, putting me in a rather awkward and powerless position. For example, some respondents clearly stated that they had contacted someone (who turned out to be another respondent).

"I called X this morning and he told me that you already interviewed him and Y. I wanted to recommend those people, but you already found them." (Respondent 37, policy-maker).

Finally, respondents were asked if I could record the interview in order to facilitate the conversation and to minimise loss of information. Respondents mostly talked freely about their experiences. However, there were some who showed extreme caution. They often mentioned "*this is off the record now*" or "*don't quote me on that*". In one case, a respondent clearly felt uncomfortable in answering the questions. After the recording, he started to talk more openly. Only two respondents (a policy-maker and a member of an interest group) were unwilling to talk *on the record* even if anonymity was assured. They did however want to impart information to me. These two interviews were reconstructed by means of notes that I tried to complete as soon as possible. Additionally, some respondents provided me some confidential documentation afterwards which also gave me the impression that they did trust me sufficiently.

5.3.5. Power mechanisms

In qualitative methodological discussions, it is often said that there is an imbalance of power between the researcher and the participants. The question is: does the researcher still hold power over his participants when *studying up*? (Aguiar, 2012). First of all, the practice of **checking out** the researcher appeared to be a common feature of research on elites. Several respondents made some remarks during the interview which revealed that they (or their spokesperson) had reviewed my profile on the university website. They also tested me as a researcher by asking and examining whether I had read various documents. My honesty and knowledgeability helped me to gain their trust and get to their personal accounts of the case.

"Your research is already in the final stage, I saw it on the website [...]. I noticed you already checked those documents. OK, then you know what the important issues were. I don't need to elucidate them anymore." (Respondent 27, policy-maker).

Furthermore, I was aware of the real danger that respondents may take over **control of the interview**, thinking that whatever they said would be relevant or important to my research (Conti and O'Neil, 2007; Neal and McLaughlin, 2009). Indeed, elites sometimes dictated the interview with only anecdotal and illustrative information. Furthermore, it appeared to be common that elites start posing the researcher tricky questions about the findings or made remarks about the research or researcher.

"You already analysed a lot of pages. The art will be to make a selection and draw a line. You will have to find a point of view by which you demonstrate you know the particular domain and the domains that are linked." (Respondent 17, policy-maker).

Only on a few occasions did my attempts fail to steer the interviewee back to the relevant topics. Although much of what the respondent was saying was interesting and relevant to my research, my core set of topics was not covered in any systematic way on those occasions.

Elites, even those who had stepped down from official duties, are busy and value their time (Peabody, et al., 1990). Elites clearly felt they donated their precious time to me, which demonstrated the power relationship between interviewer and interviewee. For example, as most of the respondents work within tight **time frames**, some interviews were held during lunch breaks or between meetings in the evening. Similarly, even though time limitations were part of the process in negotiating *getting in*, they sometimes directly dictated the end of the interview even though there was some time left. In one case, a spokesperson was attending the interview in order to keep an eye on time; she made the interviewee aware when 15, 30 and eventually 45

minutes had passed. The effective strategy here is to create a set of priorities as to what to focus on if unexpected situations emerge where *time is up*.

Finally, some emphasised their powerful position by mentioning that I had to be grateful that they were able to talk to me. Pointing to the interruptions by phones ringing, employees or colleagues with urgent questions, one respondent said to me at the end of the interview:

"You are lucky that I found some time to participate in your research. As you have seen, I am very busy and, actually, I really don't have time for things like this." (Respondent 27, policy-maker).

5.3.6. Language

Another difficulty was related to the language of the interviewer and the respondents. Eleven respondents were French-speaking while forty-four interviewees spoke Dutch, which is the native language of the researcher. The selection of a larger amount of Dutch-speaking experts occurred purposefully (based on the discourse analysis) and not because of pragmatic reasons. Although French is not the researcher's mother tongue, her French-speaking abilities as well as the use of a translated topic list assured the quality of the interviews.

6. Data analysis

Data analysis is the most crucial aspect of qualitative research (Miles and Huberman, 1994). By means of analysing the data, qualitative researchers continually must attempt to gain a deeper understanding of the phenomenon they have studied in order to refine their interpretations. The analysis phase is a cyclic, continuous process (Noaks and Wincup, 2004).

It is important to classify the data analysis approach in terms of whether it is *inductive* or *deductive* or both (Creswell, 2009; Decorte and Zaitch, 2010). Deductive analysis starts with theoretical perspectives or concepts as the basis for data analysis, while inductive analysis lets the analytic themes emerge from the study of the data. The current study is shaped by using both inductive and deductive perspective. The theoretical perspectives (theoretical sensitivity) together with the existing body of knowledge provided me with *sensitising concepts* like, for example, types of scientific knowledge utilisation (instrumental, conceptual, political/symbolic, evolutionary, processual), linking mechanisms/facilitators, institutional or individual barriers, the media or interest groups (*deduction*). I am aware that an extensive literature review that precedes the collection and analysis of data may lead to certain preconceptions. However, I tried to apply a rather exploratory perspective (instead of a confirmatory perspective) in which I explored which themes emerged from the documents or the interviews. Thus, alongside the deduc-

tive approach, I strived to look at the data for undiscovered patterns or emergent understandings (*inductive approach*). As stated by Corbin and Strauss (2008), “*At the heart of theorizing lies the interplay of making inductions (deriving concepts, their properties, and dimensions from data) and deductions (hypothesizing about the relationships between concepts).*” (p.56).

The analysis of the **documents** (i.e. policy documents and media articles) used traditional manual methods of examining the data. Practicalities apart (e.g. while some files were secured from editing, others were too large to import into a qualitative data analysis programme), qualitative data analysis programmes (e.g. NVivo, MAXQDA) are only considered useful in the early stages of a discourse analysis (e.g. to structure texts, to search them and to assist in rudimentary coding). It is assumed that software cannot assist enough to get to the deep level of analysis that is required for a discourse analysis (MacMillan, 2005).

The documents were printed and I read through them with a highlighter in my hand. Reading printed texts instead of reading on the screen made the task of analysing and coding easier. My analysis consisted of a detailed (re)reading of the documents. Relevant fragments were highlighted and given one or more corresponding codes. Subsequently, patterns and explanations in these codes were derived. During the coding process, I also regularly wrote down some memos for certain sections of the text (e.g. notes of how a paragraph in the text is linked with the *sensitising concepts* or methodological issues). Data were then organised chronologically (from 1996 to 2003) and thematically according to the central (theoretical) concepts of the study (e.g. types of scientific knowledge utilisation, representation of scientific knowledge and experts, other types of information, barriers and facilitating mechanisms). As will become clear in the following Part, segments of actual data are presented in the form of citations in the text.

The digital recording from each **interview** was transcribed in full. While the full transcription of all interviews was a time-consuming process, it engaged the researcher in the process of deep listening, analysis and interpretation right from the beginning. In contrast with the discourse analysis, qualitative data analysis software NVivo was used to analyse these interview data. When an interview was transcribed, the transcript was immediately imported in Nvivo in order to start with the coding. Adopting an open or exploratory perspective, none of the codes I retrieved from the manual discourse analysis were imported in Nvivo in advance. Data was subsequently coded and categorised to eventually find links with the *sensitising concepts* (e.g. types of scientific knowledge utilisation, representation of scientific knowledge and experts, other types of information, barriers and facilitating mechanisms, media, interest groups). Thoughts on how fragments or codes were linked with the *sensitising concepts*, methodological issues or results of

the discourse analysis were written down in memos. Analysis of the interview data followed a cyclic process in which an accumulation of interview data and of codes was supported. Data were eventually also organised chronologically (from 1996 to 2003) and thematically according to the central (theoretical) concepts of the study.

The findings from the interviews are also supported by narrative statements (i.e. quotes). I do not give details of the institution respondents were working in, or the particular topics they were working on, where that could lead easily to their identification. Therefore, a number and a general typology (policy-maker, journalist, scientist, member of interest group) has been assigned to each respondent as a means of protecting identities in line with relevant **ethical obligations** in conducting social research (Decorte and Zaitch, 2010).

7. Reliability and validity of the empirical results

Qualitative research is always a matter of interpretation (Yin, 2003), even more so since the reliability and validity of this study depended entirely on the cogency of one researcher's arguments. Transparency regarding data analysis strategies is necessary to ensure reliability and validity of data. **Reliability** is the extent to which research produces the same results when replicated (Bloor and Wood, 2006). In particular, this refers to the following questions: would another researcher on reanalysing the data come to the same conclusion? (*internal reliability*) or would another researcher obtain similar results when replicating the original study? (*external reliability*). For this study to be reliable, I reported about my methodological/theoretical choices, analytical procedures and processes as completely and truthfully as possible (see above).

Furthermore, each (qualitative) researcher aims to say that the final conclusions accurately reflect what they were studying (*internal validity*). External **validity** refers to the way in which empirical results can be applied to other situations, contexts, populations, etc. A case study design aims for *analytical generalisation* (see also above, §4.1.). Several strategies were employed to strengthen the validity of the empirical results. First, during the coding of the documents and interviews, I constantly wrote memos about the codes and their definitions. This is to avoid any shift in *meaning of the codes* during the process of coding.

Second, I provide *thick descriptions* (e.g. by using quotes or narrative statements) to allow transferability of the findings to other studies (case-to-case transferability). However, choosing quotes involves an element of subjective judgment. A researcher must be aware of *cherry-picking* quotes that support their personal views instead of theoretical concepts (Sandelowski, 1994; Wodak and Kryzyzanowski, 2008). I tried to counterbalance any subjective judgment by

means of checking for negative, contradictory proof as well as selecting representative quotes (from various participants) as evidence of a prevailing opinion or trend.

I am also reflexive about other *researchers' bias*. My age and gender may have played a role in conducting elite interviews (Walford, 1994). I am aware that being a female (pregnant) researcher may have been an advantage in being perceived as *harmless*, especially because I am relatively young, not in a senior position, and my key actors were predominantly older men. Additionally, as the study is based on a case study in a policy field consisting of a rather limited pool of researchers, the research activities of my supervisor and some members of the guidance committee were included in my analysis. I tried to maintain neutrality by not favouring one research project or researcher above the other. To discuss research projects and researchers in terms of good or bad would be to miss the point, because the goal of the study is not to distinguish the impact of particular research projects (see also above, §4.2.). This study aims to examine and understand how far and through *which modalities* the policy-making process has been informed by scientific knowledge, taking into account contextual issues.

Finally, different methods have different strengths and weaknesses, but if these methods result in converging findings then a researcher can be reasonably confident that one is getting a valid result (Swanborn, 2003; Kohlbacher, 2006). **Triangulation** includes the use of multiple methods, data or investigators which may lead to a higher validity (Creswell, 2009). The case study consists of two data collection methods used in conjunction with one another. Discourse analysis of either policy documents or newspaper articles, is very useful for analysing historical material and may become an even more powerful tool when combined with other research methods such as interviews. Interviews may provide information about what is not publicly available (e.g. informal discussions or debates that are held behind closed doors) or may reveal implicit uses of (scientific) research or experts (as the absence of a reference does not simply imply that a particular research is not used). Interpretations resulting from the discourse analysis were gradually tested against associated literature about the case and the results of the interviews. Similarly, the data retrieved from interviews were continuously contrasted with the results from the discourse analysis.

8. Conclusion

I argue that taking a (critical) constructionist view on reality is a helpful approach in examining complex, changeable social processes containing a variety of actors. It allows the researcher to understand how beliefs, values, problem perceptions of different actors and networks as well as

power mechanisms influence the ways that scientific knowledge is used within policy processes, what constitutes scientific knowledge and who is designated as qualified to know.

Based on this assumption, a qualitative methodological approach is most suitable. I intend to approach the science-policy nexus as *an interactive process* where several actors construct meaning and actions. A quantitative methodological approach would focus on the frequency and extent of knowledge utilisation ignoring the historical and social context (e.g. existing power relations in society) and the phenomenon would be casted into fixed categories (assuming that scientific knowledge is a homogenous and static concept).

In order to contribute to knowledge utilisation literature in the drug field, a case study is an appropriate technique for intensively studying complex processes and interactions within a particular setting and time period and for answering how and why questions. Making use of this conceptual framework, identified through the literature review, the case of the development of Belgian drug policy between 1996 and 2003 was chosen. During the specific episode of the development of Belgian drug policy (1996-2003) drugs appeared on the political and media agenda (*a window of opportunity* opened) and increasingly attracted the attention of policy-makers, scientists, media and interest groups.

I used two data collection methods. First, the Critical Discourse Analysis consisted of a detailed and systematic reading of 164 *policy documents* including formal, publicly available expressions of strategy and statements of intent made by the Federal Government, as well as parliamentary discussions. *Media* analysis examined a total number of 1,067 Belgian (including Flemish as well as Walloon) newspaper articles. In both cases, I used the methodological framework of Norman Fairclough because it has been proven to be useful for the analysis of policy and media documents and provides clear methodological tools. In particular, this study focused on the textual elements that characterise (differences between) discourses, how players are represented in the text and from which perspective, how scientific knowledge was represented, the relationship of scientific knowledge to other forms of information available, and the various types of knowledge utilisation. Nevertheless, I argued that discourse analysis is always a matter of interpretation, especially because it depends entirely on the cogency of one researcher's arguments and bilingual abilities.

Therefore, additionally, *semi-structured interviews* with policy-makers, scientists, journalists and members of interest groups allowed the researcher to be more reflective of the reality of the policy-making process and the dynamic role scientific knowledge plays within it. A total number

of 55 elite interviews helped to better understand the interactions between multiple actors, contextual developments, informal initiatives, networks, conflicts and strategies. In my experience, however, there also seem to be some important challenges in interviewing elites. Usually in the relationship between researcher and interviewee, the researcher is the one with the higher status. On the contrary, elites tend to reverse the power relationship between researcher and interviewee by indirectly trying to subvert the position of the researcher. For example, elites, being used to speak in public and defending their views, tried to take control over the conversation by starting to pose the researcher tricky questions about the findings or by making remarks about the research or researcher. Moreover, elites, their power structures and the issues with which they deal, do not stand apart from their organisational or political context. An interviewer is hostage to different agendas and power struggles in the course of fieldwork.

Finally, it is important for qualitative studies, not at least for case studies, to emulate *reliability and validity*. In this study, several strategies were employed to strengthen the (internal/external) reliability and validity of the empirical results. For this purpose, reflexivity and sensitivity towards the individual research processes was shown. I reported about my conceptual framework, methodological choices, analytical processes and researcher's bias as completely and truthfully as possible. Furthermore, by using both data collection methods (Critical Discourse Analysis and elite interviews) in conjunction with one another, the information gathered has been contrasted and reinterpreted constantly.

Part II Results of the empirical study

Prologue

In this part we outline the empirical results of our case study with an in-depth view of the development of Belgian drug policy between 1996-2003, with particular focus on the role of scientific knowledge and which other (f)actors were at play.

The description of the results detailed in the subsequent chapters follows the structure of the development of Belgian drug policy, taking into account three milestones. In order to contextualise the development of Belgian drug policy, **chapter 1** focuses on the history of Belgian drug policy and its legislative framework before 1996. While the drug issue entered the legislative framework with Belgian law criminalising certain drugs and drugs possession (1921), the foundations of modern Belgian drug policy were laid down in the first half of the 1990s.

Chapter 2 discusses the first milestone: the Parliamentary Working group on drugs (1996-1997), which was established by the Federal Parliament in order to develop a clear and timely view on all aspects of the Belgian drug phenomenon. The Parliamentary Working Group asked national and international experts, working in all domains of drug policy, to convey their analysis and to give clear recommendations to the Federal Government.

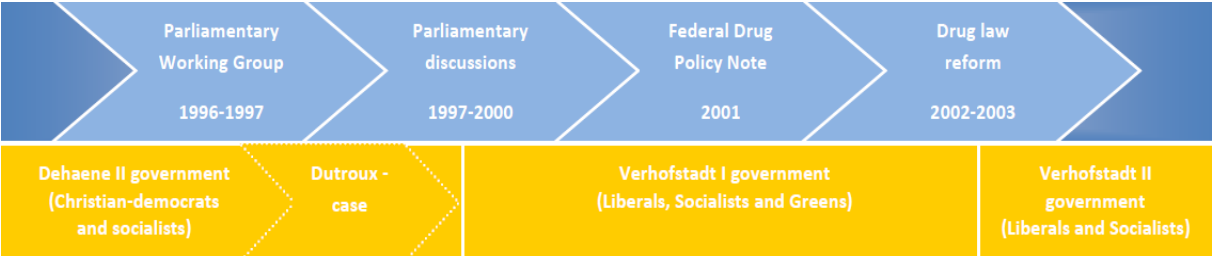
Chapter 3 focuses on the turbulent intermezzo between 1997 and 2000. At the end of the nineties, the entire Belgian drug debate was overshadowed by the Dutroux case (i.e. a paedophilia scandal) as well as by the resulting focus on reform of the judicial authorities and the police ('Octopus reforms'). Meanwhile, in 1999, Belgian voters rejected the longstanding Coalition Government of Christian Democrats and Socialists and voted a six-party Coalition into power consisting of the Flemish and Francophone Liberals, Socialists and Greens led by Flemish Liberal Leader Guy Verhofstadt (1999-2003).

Gradually, the drug issue re-entered the political agenda in Belgium. The Belgian Government further elaborated the principles and recommendations of the Parliamentary Working Group and established the first (and current) national drug strategy (Federal Drug Policy Note) in 2001. The Federal Drug Policy Note is considered as the second milestone in the development of the Belgian drug policy between 1996 and 2003 and is addressed in **chapter 4**.

As the direction of Belgian drug policy determined the policy priorities and thus the legislative and prosecution framework, we assess the reform of Belgian drug law (2003) as the third milestone in the development of Belgian drug policy (**Chapter 5**). This reform is one of the major

initiatives, and definitely the one most discussed by MPs, members of the Government, media and others (and therefore relevant for this study).

Figure 4: Brief overview of the developments of Belgian drug policy and the composition of the Coalition Governments between 1996 and 2003



Chapter 1 History of Belgian drug policy and its legislative framework before 1996

Before focusing on the period of our interest (1996-2003), we briefly elaborate the historical evolution of Belgian drug policy and the Belgian legislative framework. Some important political and/or scientific impulses have had certain consequences for both. The Belgian legislative and prosecution framework (e.g. Laws, Ministerial Circular Letters,...) addresses the enforcement and prosecution of the drug phenomenon. Belgian drug policy has no juridical value but determines the policy priorities (and thus the legislative and prosecution framework).

1. From 1921 until 1975: early developments

The basic Belgian law concerning the traffic in toxic substances, hypnotics, narcotics, disinfecting and antiseptics dates back to 24 February 1921. The criminalisation of drugs and drug possession was largely influenced by the international developments (Guillain, 2003), the Belgian anti-alcoholic movement supported by Minister of Justice Emile Vandervelde and the social defence framework (De Ruyver, 1988).

At the end of the 19th and the beginning of the 20th century, policy-makers started to believe in scientific rationality as a key to solving problems (Hoppe, 1999). The positivist school (e.g. Lombroso), who adopted a more empirical, scientific approach, claimed to have discovered the existence of criminal types whose behaviour was determined by their biological, psychological, and social environment rather than based on a rational calculus (individual responsibility). Positivists concentrated upon the criminal rather than the crime. The criminal justice system had to determine whether or not the offender was the perpetrator of an act and then to apply to him measures to protect the society from dangerous and habitual criminals (social defence). The Belgian criminal justice system owes much to the influence of Adolphe Prins, who embodied this movement in Belgium. The doctrine of social defence focused on crime as a human (individual) as well as social problem, not easily addressed by legal regulation. Punishment should not only deter criminal offenses but should also aim for the resocialisation (and re-education) of the offender (Christiaensen, 1993). This doctrine influenced several Belgian Ministers and was at the origin of the first Belgian drug law. Within the framework of the state's responsibility to protect the community (at the end of the 19th century), as an elected member of the Parliament, Emile Vandervelde's opinion was that alcoholism perpetuated the social misery of the working classes and immobilised social and economic relations. This prepared the ground for future legislation in Belgium (De Ruyver, 1988). The Law of 29 August 1919 (also known as the Vandervelde Law)

prohibited the sale and consumption of alcohol in drinking-houses, while consumption at home was allowed (under certain circumstances). Concerns were soon raised that the alcohol prohibition had led to a shift to the use of other drugs like cocaine and morphine even though studies showed that the increase in drug taking was rather a consequence of World War I and appeared among the higher classes (De Ruyver, 1988; Fijnaut and De Ruyver, 2014). Nevertheless, Minister Emile Vandervelde also supported a strong response to the use of other drugs than alcohol, which directly led to the realisation of the new Belgian Law of 24 February 1921 (De Ruyver, 1988; Fijnaut and De Ruyver, 2014).

In the same period, international attention focused on the drug phenomenon at the Opium Conferences in Shanghai and The Hague (De Ruyver, 1988). Like several other countries, Belgium ratified the International Opium Convention in 1912 because of the moral value inherent in this international commitment and the importance of being associated with it. Although there was little anxiety about a drug use problem at the time of the International Opium Convention in 1912, some concerns were raised at the time of the ratification (De Ruyver, 1988; Todts, 2004). For instance, some registrations showed that 2-3% of Belgian prisoners (in some prisons: 6%) were addicted to cocaine. As a result, for the first time emotions were running high in the parliamentary debate: *"The Government is almost completely disarmed by the fatal drug abuse that occurs in all classes of our population."* (Hand. Kamer 1920-1921, 21 December 1920, 108/1). Ratification required Belgium to take action, which it did with the Law of 24 February 1921 and the Royal Decree of 31 December 1930 (Cesoni, 2008; Fijnaut and De Ruyver, 2014).

For several years, the Law of 24 February 1921 was an instrument against drug trafficking and drug addiction. However, more than alcohol use, the drug phenomenon is a complex, international phenomenon. The internationalisation of the production of drugs continued to grow and there was an increasing mobility on the demand side (De Ruyver, Vermeulen and Vander Beken, 2002). During the following period, influenced by the strong prohibitive advocacy by the United States, several multilateral drug control treaties were established. The United Nations Single Convention on Narcotic Drugs (New York, 1961) was an important consolidation of these multilateral drug control treaties and the prohibitionist international drug control system. In other words, this convention streamlined and tightened the controls on the production, use and distribution of illicit narcotics (De Ruyver, Vermeulen and Vander Beken, 2002). In particular, possession of cannabis was placed under the strictest control regime in the Convention (similar to cocaine and heroin), on the basis that it was widely abused. The 1961 treaty also created the International Narcotics Control Board (INCB) to collate the parties' legal drug requirements and to monitor legitimate trade.

In the 1960s, drug use exploded around the world, most notably in developed Western nations. As the increase was closely related to the pervasive use and availability of synthetic, psychotropic substances such as amphetamines, barbiturates, and LSD, the United Nations Convention on Psychotropic Substances (Vienna, 1971) was established. Dealing with psychotropic substances next to narcotics, it formed a companion instrument of the 1961 Convention (De Ruyver, Vermeulen and Vander Beken, 2002).

In Belgium, media increasingly reported about the surprising rise in drug use among the population (De Ruyver, 2005). In his analysis of the criminal policy of Socialist Minister of Justice Alfons Vranckx (SP, Flemish Socialists), De Ruyver (1988) showed that drug policy-making was primarily based on emotional and political motivations inspired and stimulated by the media. Scientific input into the policy-making process received less attention mainly because, in this period of social and economic reconstruction (after two World Wars and an economic crisis), it was argued that scientific knowledge was fallible (De Ruyver, 1988). For instance, the stepping stone theory (Cohen and Sas, 1997), which argues that people who use alcohol or marijuana will probably go on to use drugs such as cocaine or heroin, was the basis of the framework regarding drugs. Although this theory was widely rejected by scientists because of the lack of evidence supporting any causality claim, it won a lot of support among policy-makers, media and the public opinion (De Ruyver, 1988; De Ruyver, 2005). Furthermore, other initiatives taken by criminologists to discuss and improve the relationship between science and policy were largely ignored. For instance, a Dutch working group, under the leadership of professor Louk Hulsman, discussed the direction of the drug policy in 1971. The working group expressed their concerns about the misinformation generated by the selective attention put forward by media, public opinion and policy-makers (De Ruyver, 1988). As a second example, in 1978, a conference entitled 'Criminal law and scientific research' was organised by several scientists in order to get a view of and to improve the existing cooperation between science and police, justice and the prison system (Geeroms, 1978). Another important initiative was the publication of the book 'Drugs: substances, people and society' during the emotional polemic about drug use in the 1960-1970s. Casselman, De Schepper and Nuyens (1971) strongly believed in relevance, utility and application of academic wisdom. The authors provided an innovative, multidisciplinary policy perspective on drugs taking into account: the drug, set and setting (instead of a pure repressive approach) (Zinberg, 1984; Goethals, Hutsebaut and Vervaeke, 2005). Nevertheless, during the 1960s and 1970s, the problem of drug use in Belgium was mainly created and maintained by media and policy-makers as well as inspired by the *War on drugs* framework of the United States (De Ruyver, 1988). Panicked reactions had no profound scientific base, except for some official

statistics which simply represented the criminal justice system's ability to detect, define and process criminal action (Fijnaut and De Ruyver, 2014).

Except for some small modifications (i.e. penalising some new products like LSD or amphetamines), few changes were made to the Belgian legislative, prosecution or policy framework between 1921 and 1975. However, due to an increasing fear of an uncontrollable drug epidemic at the international level and Belgium's ratification of the United Nations Single Convention on Narcotic Drugs (New York, 1961) as well as the United Nations Convention on Psychotropic Substances (Vienna, 1971), Belgian policy-makers decided to implement a more severe legislative framework in the 1970s (Todts, 2004). In Belgium¹, there was little discussion about the idea that all illegal drugs had to be treated in the same way (Fijnaut and De Ruyver, 2014).

The basic Belgian law of 1921 was modified by the Law of 9 July 1975 due to a growing concern by the judicial authorities about drug use and its punishment. Possession of drugs remained prohibited; the concept of aggravating circumstances (i.e. drug use by minors; drug use in group, etc.) was implemented; a denunciation clause was integrated; cannabis was classified like other illicit drugs, and; a strong enforcement of drug trafficking was the main focus (De Ruyver, 1988). Minister of Justice Alfons Vranckx (SP, Flemish Socialists), who submitted the original proposition together with Minister of Public Health Louis Namèche (PS, French-speaking Socialists), did question the point of punishing drug use, looking into the socio-cultural factors behind use and advocating treatment solutions for users. In particular, by means of the introduction of some amendments, he aimed for the adoption of compulsory treatment strategy for drug users in the criminal justice system (De Ruyver, 1988). However, eventually, the amendment establishing compulsory treatment was rejected and replaced by an extension of the modalities of the Law of 29 June 1964 regarding probation towards drug users.² As a result, the Law of 9 July 1975 was somehow caught between two stools: a stronger enforcement agenda, and a desire for a different approach – that of treatment and rehabilitation for drug users (Cesoni, 2008).

Despite international and national efforts, drug problems seemed to increase all over the world during the 1980s. In Belgium, a growing fear of the rising drug problem was caused by an enormous increase in prosecutions across several jurisdictions, the fast spread of infectious diseases

¹ At that time, the Netherlands took the first step in the opposite direction. The debate about the Dutch drug policy sparked off and resulted in the Opium Act (1976) making a distinction between soft drugs and hard drugs.

² While, according to art. 3 and 8 of the Law of 29 June 1964, the person concerned should not have been earlier sentenced to a criminal sentence or a prison sentence of more than 12 months, art. 9 of the Law of 9 July 1975 noted that, in case of offences for personal use or of drug use in group, judicial antecedents were no impediments for probation (Mahieu, 2004; Wet van 29 juni 1964 betreffende de opschorting, het uitstel en de probatie, B.S. 17 juli 1964).

(HIV, hepatitis B and C) among intravenous drug users, increasing feelings of insecurity for the criminal consequences of drug use and a decreasing belief in justice (e.g. because of the lacking police and judicial actions towards the *Gang of Nijvel*³) (Todts, 2004). In other words, drug use was increasingly considered as a major cause of crime and social infectious diseases and a source of fearfulness in some neighbourhoods (Cartuyvels and Hebberecht, 2002).

In this context, in 1988, the United Nations Convention against illegal traffic in narcotic drugs and psychotropic substances was established (Vienna, 1988). This Convention provided additional comprehensive measures against drug trafficking, including provisions against money laundering and the diversion of precursor chemicals. Additionally, in 1985, the Schengen Agreement, which was directed towards the free movement of persons, goods and services, was established. One of the goals of this Agreement was to improve the cooperation between judicial and police services in the EU. Some elements focused specifically on the drug issue (Guillain and Marchand, 1998). In particular, the 1985 Schengen Agreement stipulated that the five original Schengen countries (Belgium, Luxembourg, the Netherlands, Germany and France) had to target illegal drug traffic vigorously as well as to coordinate their actions efficiently. In this context, the Schengen Agreement also aimed to harmonise the legislation on drugs among the Schengen countries. However, this original compromise proved to be inadequate: the harmonisation of legislation on drugs appeared to be a stumbling block as it was not clear which national legislation or practice should be adopted as the standard (e.g. a Liberal policy of the Netherlands or a stricter policy of France). Ongoing debate, with France taking the lead, speculated about the negative consequences of Dutch drug policy (Fijnaut and De Ruyver, 2008; De Ruyver, et al., 2010). As a compromise, the 1990 Schengen Convention, applying the 1985 Schengen Agreement, adopted some new stipulations (Articles 70-76). For instance, a permanent working group was set up in order to monitor the situation in the Schengen area. Furthermore, a political solution to the harmonization issue was found by invoking the former UN drugs conventions. In particular, Member States were expected to take criminal and/or administrative measures to tackle illegal production and trafficking of drugs (including cannabis) as well as possession for the purpose of illegal sale or export. At the same time, a general agreement was included stating that if a country's drugs policy deviates from that of others, all parties must take measures to limit the impact of this discrepancy on those other countries.⁴ Here, only an implicit link was made to the *coffee-*

³ During the 1980s, the *Gang of Nijvel* carried out a number of very violent and bloody raids on supermarkets in which a total of 28 people were killed. The unsolved killings by this criminal gang together with the poor and chaotic communication between police and justice, threatened the legitimacy of the entire police and justice system and caused a moral panic.

⁴ The possible (negative) impact of the liberal policy of the Netherlands on the drug policy in Belgium is a frequently heard argument in the debate about the drug policy in Belgium during the nineties. For example, it was argued

shop model of the Netherlands. Nevertheless, until the Schengen Convention was formally ratified in 1995, the discussions continued, especially regarding the (negative consequences of the) divergent policy of the Netherlands and its formal recognition by the other Schengen countries. As an interviewee argued, these international debates certainly influenced the further developments of Belgian drug policy.

“The Benelux discussions, the Schengen discussions, the European discussions, etc. all had an influence on the development of the policy. They created a kind of awareness, insight and pressure to undertake things. In particular, to make decisions that comply with the international framework.”
(Respondent 39, policy-maker).

2. Beginning of the 1990s: focus on insecurity

The report of the Parliamentary Inquiry Commission on the struggle against banditism and terrorism⁵ had prompted the Federal Government Martens VIII (1988-1991), a coalition of CVP/PSC, SP/PS, VU (i.e. Coalition of Flemish and French-speaking Christian Democrats, Flemish and French-speaking Socialists and Flemish Nationalists), to take action. In 1990, the programme for maintaining order, the safety of the citizens and curbing crime (i.e. **Pinksterplan** or Whitsuntide Plan) was announced. Within this framework, the Federal Minister for Internal Affairs, Louis Tobback (SP, Flemish Socialists), outlined a *prevention* policy under which the local administrative authorities were held responsible for the expansion and implementation of an integrated, local prevention policy (Beyens, et al., 2001; Cartuyvels and Hebberecht, 2002). The implementation of the Pinksterplan was facilitated by the Federal elections of 24 November 1991 (so-called **black Sunday**). The rise of the extreme right parties (Vlaams Blok (Flemish extreme right party), Front National (French-speaking extreme right party)) in the large and medium cities was a tangible illustration of the growing political legitimacy problem. As a result, the 1992 Federal Government Policy Statement, put forward by the new Prime Minister Jean-Luc Dehaene (CVP, Flemish Christian Democrats) in the House of Representatives, emphasised the importance of securing the safety of the citizens (Federal Government, 1992). An improvement of the relations of the community with the police was seen as one of the major means to restore confidence. Shortly thereafter, *security contracts* (hinged on a prevention section as well as a police section) were drawn up with the country's five largest cities (e.g. Antwerp, Brussels, Charleroi, Liege, Ghent) and *prevention contracts* (only a prevention section) were implemented in 23

that an explosion in the coffee-shop market and a Europe without borders (according to the Schengen Convention) has led to an increasing amount of foreign (Belgian) drug tourism to the Netherlands (Fijnaut and De Ruyver, 2014).

⁵ A combination of the unsolved killings of the Nijvel Gang and the acts of terrorism of the 'Cellules Communistes Combattantes' (CSC) in the 1980s posed problems for the entire criminal law system. This resulted in the creation of a Parliamentary Inquiry Commission on the struggle against banditism and terrorism in 1988.

towns that were less problematic when it came to security. By means of subsidising projects, the Federal Government (i.e. Ministry of Internal Affairs) aimed to help the cities fight insecurity and to improve living conditions in neighbourhoods. Within this framework, the Permanent Secretariat for Prevention Policy⁶ was established in 1994. This body was put in charge of supporting, coordinating and evaluating these **security and prevention contracts**. (Cartuyvels and Hebberecht, 2002). The security and prevention contracts were renewed and the number of contracts grew during the following years.

Interest in the use of illegal substances was one key element of the security policy as envisioned by the 1992 Government Agreement. In the 1992 Government Agreement, put forward by the new Prime Minister Jean-Luc Dehaene (CVP, Flemish Christian Democrats), it was stated that *“Drug use causes an increasing amount of criminality. The struggle against drug traffic must be oriented towards the supply and demand of drugs and must contain a better prevention, a more efficient repression and a better medical treatment in prisons.”* (p.8). Some large cities (especially in the French-speaking part of Belgium: Liege, Charleroi, Mons) were confronted with a steep increase of frequently occurring crime which seriously affected the quality of life in a number of neighbourhoods (Guillain, 2003). Even though this was not backed up by scientific data, police officers supported the idea that problematic drug users were responsible for the increase in crime and in public nuisance. A statement of a respondent illustrates this point:

“Based on a lot of discussions with police officers it was assumed that drug problems were the underlying cause of many burglaries, car thefts,... which were hot topics at that time.” (Respondent, 25, policy-maker).

At the same time, drug use (especially *new* drugs like XTC) became more visible in certain (youth) cultures (BIRN, 2000). Accordingly, **media attention** focused on drug use in mega-clubs as well as on the link between drug use and crime due to the high political attention to crime and insecurity at that time (Guillain, 2003).

There was an increasing pressure for a comprehensive drug policy caused by the intensification of the supply of both legal and illegal drugs (in quantity as well as variety), an increasing mobility of the demand side, and the supposed increase in drug-related property crimes. This particular pressure together with the availability of government funds inspired the formalisation of drug prevention and security contracts between the Federal Government and the cities. Accord-

⁶ The Permanent Secretariat for Prevention Policy was integrated in the ‘Algemene Directie Veiligheid- en Preventie’ in 2003.

ingly, a new development was that localities could request additional subsidies to finance new projects linked to the *security contract*, such as support for alternative criminal sentences (section justice) or the prevention of drug addiction (section drugs) (Hebberecht, 2004). In particular, the municipalities were allowed to install projects with regard to drug prevention, drug treatment and local drug coordination (Verslag namens de Parlementaire Werkgroep belast met het bestuderen van de drugproblematiek, *Parl.St. Kamer*, 1996-1997, 1062/1-3; De Ruyver, et al., 2004). For instance, the emergence of local medical-social treatment centres for drug users (MSOC), ambulant drug treatment centres and outreach projects were financed through contracts with the Ministries of Interior and Social Affairs. Also (smaller) municipalities without a security (or prevention) contract had the opportunity to implement projects related to drug prevention or drug treatment and to recruit staff like outreach workers or prevention workers (these contracts were called **drug plans** or **drug plan contracts**) (Hebberecht, 2009). The Government began to fund more services in response to research findings related to e.g. the efficiency of distribution of methadone to heroin addicts (De Ruyver, Van Bouchautte and Reisinger, 1993) or the link between poverty, drug use and criminality (De Ruyver, et al., 1992). While these contracts were financed by the Belgian Federal Public Service Home Affairs as responses to crime and delinquency, drug treatment and prevention logically became part of the security discourse applied by the Federal Government. Initially, this caused some commotion among drug treatment and prevention workers.

“These drug plans [...] at first, the whole (especially Flemish) drug treatment and prevention sector was highly outraged because of the link with security. Eventually, they realised that the Government offered a golden opportunity to strengthen the treatment and prevention field.” (Respondent 25, policy-maker).

Generally, for the first time, attention was paid to the **problem of drugs as a social and health problem**. Due to the increase in problematic drug use in major cities (often linked with intravenous use, HIV, mortality), political interest raised in low threshold harm reduction initiatives like medical-social treatment centres for drug users (MSOC) (BIRN, 2002; Todts, 2004), needle exchange projects (e.g. a pilot project was set up in 1993 in Antwerp; Kinable, et al., 1994)⁷ and maintenance therapy for drug addicts (i.e. methadone)⁸. All respondents acknowledged the importance of this change in discourse, as one of them illustrated in this point:

⁷ The results of this pilot project were very positive, but the legal context and the political climate at that time impeded the implementation of the project in Flanders. In 2000, needle exchange projects were formalised by a Royal Decree (5 July 2000) and finally operationalised in 2001.

⁸ At that time, there were large differences between the more liberal practices in Brussels and the French-speaking part on the one hand, and the more cautious Flemish region, where maintenance treatment was still exceptional and where therapeutic communities were still influential, on the other hand.

“Those drug plans included a very important movement, not only towards developing drug treatment, methadone substitution and MSOC’s but also towards stimulating the cooperation between drug treatment centres.” (Respondent 16, practitioner).

Exemplary too is the initiative of senators Lallemand and Erdman. They proposed a bill in 1991 altering Article 3 of the drug law to state explicitly that substitution treatment prescribed by a physician cannot be punished.⁹ Likewise, a conference was set up in 1994 by the Minister of Public Health, Jacques Santkin (PS, French-speaking Socialists), together with the medical (and academic) world, in order to reach a consensus about methadone maintenance. According to conditions included in the *Consensus document*, substitution treatments had to be perceived as a responsible and effective approach to opiate dependence. In particular, the conference agreed on what should be expected during treatment: a reduction in the consumption of drugs and the use of needles; an improvement of therapeutic ‘compliance’, and; an improvement of the socio-professional skills of drug users and a reduction of delinquent activities (Hoge Gezondheidsraad, 2000). Furthermore, a reduction in HIV transmission risks as well as a decrease of overdoses, hepatitis, complications and mortality was expected. This conference played an important role in opening up the discussion about the organisation of legal substitution treatments. The actors involved turned progressively towards a more positive approach of this kind of treatment, but it was only in 2002-2003, with the Law of 22 August 2002 and a Royal Decree of 28 March 2003, that a definition and practice of substitution treatments as well as the goals they should pursue were formalised.

Another initiative also showed that drugs gradually became a topic on the policy agenda. In 1993, Minister of Justice Melchior Wathelet (PSC, French-speaking Christian Democrats) took a more severe approach, pointing to increasing drug use, fear of the escalation of *soft* drugs to *hard* drugs (Guillain, 2003) and feelings of insecurity. He issued guidelines pertaining to a common prosecution policy with regard to narcotic substances (De Ruyver, et al., 2004). By means of the **Ministerial Circular Letter of 5 May 1993**, the Minister of Justice instructed Public Prosecutors to respond to every instance of (problematic) use regardless of type of drugs. Although Belgian law had not penalised the *use* of drugs as such, the Public Prosecutors had to proceed on the assumption that *possession* is the prerequisite for use, and possession of drugs (irrespective of type and quantity) is in itself an offence constituting valid grounds for prosecuting the user (Vander Laenen, 2001). Increasing workloads and creating an increasing number of conscientious objectors (i.e. social workers, prosecutors), the implementation of these guidelines ap-

⁹ Voorstel van wet tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdoovende middelen, ontsmettingsstoffen en antiseptica (ingediend door Mr. Roger Lallemand and Mr. Fred Erdman), *Parl.St.* Senaat 1991-1992, nr. 447/1.

peared unsuccessful (Dienst Strafrechtelijk Beleid, 1996). Additionally, many cannabis users ended up in prison, and there was a lack of uniformity in the application of the prosecution policy.

The legitimacy of the criminalisation of drugs gradually entered the **parliamentary debate** (Chamber of Representatives and Senate)¹⁰ too (Kaminski, 2003b). From the beginning of the 1990s there had been an increasingly widespread clamor on the international level for a change in the laws controlling drugs, with cannabis the most plausible candidate for reform (MacCoun and Reuter, 2001). In the Belgian context, two members of the Parliament, Mr. Frans Lozie and Mr. Michiel Maertens (AGALEV-Ecolo, Flemish and French-speaking Greens), launched a bill in the Parliament in 1993 concerning the revision of the Drug law of 1921 and the decriminalisation¹¹ of cannabis possession (*Hand. Senaat 1993-1994*, 30 november 1995, 871/1). Similarly, another MP, Mr. Johan Van Hecke (CVP, Flemish Christian Democrats), submitted a proposal to establish a parliamentary working group charged with studying the drug problem in Belgium and developing an appropriate and coordinated drug policy (*Hand. Kamer 1992-1993*, 30 april 1993, 989/1).

3. Federal Action Plan Toxicomania-Drugs (1995)¹²

On 3 February 1995, the Government approved the **Federal Action Plan Toxicomania-Drugs (ten-point plan)** in order to offer a reply to the complex and changing drug phenomenon. This ten-point plan was intended to define action priorities on drugs, which could then serve as a starting point for the establishment of concrete initiatives (Kabinet van de Eerste Minister, 1995). However, surprisingly, the plan did not propagate an integrated or global perspective. A respondent clarified:

¹⁰ Like the Chamber of Representatives, the Senate is a forum for reflection. Members of the Senate may take the initiative to put forward written or oral questions, resolutions and bills. Both assemblies exercise similar powers, but only the Chamber can sanction the Government politically. For example, the members of the Senate do not have the power to control the Federal Government by means of interpellations (Van der Hulst, 2010).

¹¹ The concept *decriminalisation* is often confused with the concept *depenalisation*. In this study, we follow Room et al. (2010) by using the term *decriminalisation* to refer to 'prohibition with civil penalties'. Thus, criminal penalties are removed from the law while administrative penalties are still possible (e.g. Portugal). *Depenalisation* involves maintenance of criminal penalties in the criminal law, yet removing or shortening the periods of incarceration, or reducing fine amounts, as possible sanctions (e.g. Belgium, Germany, Denmark and the Netherlands). *Legalisation* means that the specified forms of behaviour are no longer offences dealt with under the law, yet it is often still governed by different tools of regulatory law.

¹² The concept *toxicomania* refers to the *security discourse* that was common at that time (Guillain, 2009).

“Those 10 points... If you have read them, then you know that they are not the product of a clear vision on drug policy. The plan rather includes an enumeration of ‘points that they have to take care of’. The installation of medical-social treatment centres for drug users is just one example.”
(Respondent 50, scientist).

The 10 action points of the Federal Action Plan Toxicomania-Drugs were (1) to allocate to social security the material benefits that were confiscated in the fight against drug trafficking, (2) to improve the training of prison personnel with regard to the problem of drug addiction, (3) to develop needle exchange programmes, (4) to extend the power to close down establishments where drug crimes are committed, (5) to establish medical-social treatment centres for drug users (MSOC's)¹³, (6) to combat recreational drug use, (7) to extend scientific research (e.g. epidemiological research and the scientific evaluation of the medical-social treatment centres for drug users), (8) to optimise the treatment of drug users, (9) to extend the measures to reduce the supply of drugs and (10) to establish research into the consequences of drug use for road safety.

Only **six of these action points were realised, with differing success** (De Ruyver, et al., 2004). The training of prison personnel was financially supported in 1995 and 1996 and afterwards rather ad hoc (caused by a lack of continuity in funding). Applying the harm reduction approach, an exchange programme for syringes was formally organised in November 1998. Furthermore, the programme to combat recreational drug use was not fully developed. Some local projects focusing on the prevention of experimental and recreational use among youth in nightlife were established in 1998, but not continued. Research into the consequences of drug use for road safety was developed in 1995 with the Belgian Toxicology and Trauma study (Charlier and Plomteux, 1998). Likewise, in 1999, a study into the consequences of drug use for road safety (ROSITA) was conducted. A law (9 April 1999) regarding drug use in road traffic was implemented as a result of both studies. The Belgian Institute for Road Safety also started to organise *prevention campaigns* about the consequences of drug use (especially alcohol) in road traffic (e.g. BOB – Wodca).

Additionally, some *medical-social treatment centres for drug users* (MSOC's) to treat problematic drug users were established in 1997. The Federal Action Plan Toxicomania-Drugs (1995) advocated for a sharp increase in public expenditures for drug treatment centres (within the frame-

¹³ The installation of medical-social treatment centres for drug users (MSOC's) was largely inspired by the network of low-threshold (methadone) programs in Amsterdam. Mr. Johan Vande Lanotte is considered as the driving force of the ten-point plan and the installation of medical-social treatment centres for drug users (MSOC's) in particular (Fijnaut and De Ruyver, 2014).

work of social security standards) (De Ruyver, et al., 2004). Next to funding for residential care, more diversity was stimulated by supporting day centres, crisis centres and low threshold services. These low threshold services were initially located in Antwerp, Brussels, Charleroi, Genk, Ghent, Liege, Mons and Ostend.¹⁴ The establishment of the medical-social treatment centres for drug users can be seen as one of the most important policy engagements in the development of Belgian drug policy between 1996 and 2003.

Finally, an increased credence was given to scientific knowledge as an instrument of developing drug policy. While drug research became internationalised (EMCDDA was installed in 1993 and operationalised in 1995)¹⁵, the importance of a scientific base was explicitly underlined in the Federal Action Plan Toxicomania-Drugs. Soon, this action point resulted in policy-funded research (i.e. useful inventory of drug research in Belgium and its neighbouring countries; Van Daele, et al., 1996). An evaluation of the activities of *medical-social treatment centres for drug users* (MSOC's) followed: research teams from the universities of Ghent and Liège prepared a manual with uniform methodology and evaluation criteria for an assessment and, in 1998, the assessment took place on the basis of this manual (Pelc, et al., 2001). The plan can be perceived as one of the first explicit steps in the development of an interest in (and influence of) policy-funded research and evaluation research about drugs in particular.

The realisation of those six action points was stimulated by the 1995 Federal Government Policy Statement (Vander Laenen, 2001). The same centre-left Coalition of Flemish and French-speaking Christian Democrats and Socialists (CVP/PSC, SP/PS) was re-installed in June 1995 and corresponding with the 1992 Federal Agreement, Prime Minister Jean-Luc Dehaene (CVP, Flemish Christian Democrats) re-emphasised the need for a comprehensive national drug policy in Belgium in his 1995 Federal Government Policy Statement. In particular, the increasing effort to prevent drug use among youth, the extension of treatment for drug users (e.g. medical-social treatment centres for drug users), the increase of repression against drug traffic and the development of a scientific base for drug policy were stressed as important elements. Anticipating the media focus on cannabis policy (and on the usefulness of the criminalisation of drugs in particu-

¹⁴ After an evaluation of the MSOC's (1999), an MSOC in Vlaams-Brabant was established.

¹⁵ The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) played an important role in initiating the science – policy debate. Established in Lisbon in 1993, the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) was given the task of providing the EU and its Member States with a factual overview of European drug problems and a solid evidence base to support the drugs debate (Stimson, 1997; Hartnoll, 2004). Under the influence of this movement, most European countries gradually started to establish an empirical basis of (epidemiological) research (Stimson, 1997; EMCDDA, 2008). As a result, more and more, references of research were introduced into the drug policy documents (i.e. national drug strategy or action plan) in many European countries (EMCDDA, 2008).

lar), the 1995 Federal Government Policy Statement explicitly emphasised that the legalisation of drugs was not an acceptable solution and that a legal framework around the medical prescription of methadone had to be developed.

4. Scientific knowledge: still lacking but on the increase during the nineties

For a long time, drug use was confined to a limited place on the policy agenda (Gusfield, 1975). During the nineties, throughout Europe (and the rest of the world) more and more initiatives were taken to identify gaps in knowledge and to strengthen the research base (Stimson, 1997; Hartnoll, 2004). In Belgium, the Federal Action plan Toxicomania-Drugs (1995) gave the first important impulse to the extension of the scientific research base. However, studies about drug use in Belgium remained rather scarce and fragmented (Van Daele, et al., 1996).

So far, existing Belgian studies described (some aspects of) the drug situation in Belgium, mainly focusing on etiological and epidemiological questions (Kaminski, 2003a). Worth mentioning are several school population surveys at the regional and local level (e.g. Casselman, et al., 1984; Goyvaerts, Van Hal and Teugels, 1992; De Ruyver, Van Daele and Coolsaet, 1991) next to the official statistics (e.g. number of drug overdoses, number of confiscations, number of prisoners because of drug-related crimes) and some utilisation (registration) studies (e.g. Bijmens, Nienlandt and Hauglustaine, 1985; Vandenbroele, et al., 1989). In particular, the reported growth of cannabis (and ecstasy) use among youth and adolescents¹⁶, and the observed increase in the demand for treatment of problematic cannabis use increased the interest in epidemiological studies and risk factor research focusing on cannabis initiation and intensive use of cannabis (VAD, 2000; BIRN, 2000). Several risk factors were identified: parent-child relationship, peer influence, academic integration, etc. Following the increasing number of youth population surveys, information on the situation of drug use in the general adult population started to develop in 1995, especially after a CATI health monitoring survey was conducted in Flanders (in 1996 the survey started in the French Community).¹⁷ Ethnographic studies were limited in Belgium.

Another stream of (often policy-funded) research included studies focusing on the trajectories of drug users within the criminal justice system or on the state of the art and the efficiency of dis-

¹⁶ Cannabis was the most commonly used illegal drug in Belgium in the mid-nineties. About 14.9% of the school population had at least tried the drug in 1994. Increases of the use of cannabis were reported in 1996 (19.6%). A major issue for young people's drug use was the emergence of so-called 'dance drugs', including ecstasy. Lifetime prevalence of ecstasy use increased from 4.1% in 1994 to 5.6% in 1996 (BIRN, 2000).

¹⁷ Regarding cannabis use, one observed that the Flemish life-time prevalence of 1994 (5.8%) followed the global increasing trend during the nineties (as observed in other European countries). Information on use of other drugs by adults was limited (BIRN, 2000).

tribution of methadone to heroin addicts (De Ruyver, Van Bouchautte and Reisinger, 1993).¹⁸ Other important initiatives included a study of the link between poverty, drug use and criminality (De Ruyver, et al., 1992); a study of the goals and mission of street work (De Ruyver, et al., 1996); a study focusing on discotheques, house music and nuisance (Vercaigne and Walgrave, 1995), and; (qualitative and quantitative) studies of the judicial actions towards drug users (or secondary criminalisation) (De Pauw and Lempereur, 1990; Christiaensen and Goethals, 1994).

A very important initiative came from a scientist in his capacity as a *policy advisor* (Minstrom, 1997; Loader and Sparks, 2011)¹⁹. Prof. Dr. Brice De Ruyver picked up the growing need to establish a comprehensive national drug policy in Belgium. From 1993, an **annual conference 'Drug policy 2000'** was organised in order to develop and stimulate the interaction between practice, science and policy (De Ruyver, et al., 1995). The scientific organisation committee was composed of several scientists, practitioners and a representative of the Government. During these national conferences several drug-related topics were discussed. The topics addressed clearly followed the main interests of the media and policy-makers. Because of the importance of the international framework, comparisons with Dutch drug policy were made regularly (De Ruyver, et al., 1996). The first conference was organised in 1993 and stimulated discussions about epidemiology, prevention, justice and treatment from a variety of perspectives. In 1994, the central themes were more specified and included: integrated drug policy, recreational drug use, international struggle against drug traffic, development policy and drug production, drug treatment, police and justice. The third conference 'Drug Policy 2000' (held in October 1995) was mainly devoted to the action points of the Plan Toxicomania-Drugs: outreach work; recreational drug use; drug tourism and nuisance; harm reduction initiatives (which was also linked with the 1994 Consensus Conference); driving under the influence of medication and illegal drugs; registration and monitoring; drug treatment during detention; the development of an integrated and integral drug policy, and; the difficulties with regard to the cooperation between the criminal justice system and treatment services (De Ruyver, et al., 1996). The problems with the application of the 1993 Ministerial Circular were also addressed for the first time.

Such conferences encouraged a greater role of scientific knowledge in the policy-making process. On the one hand, the conference was attended by several actors (policy-makers, scientists, practitioners, journalists) which made it possible to stimulate debate about (different) ideas as

¹⁸ As studies showed rather high prevalences of hepatitis B and C (while HIV-seroprevalence among drug users remained low in Belgium), the set-up of low threshold centres was considered as a possibility to improve access to treatment (including methadone substitution) and to support risk reduction interventions (EMCDDA, 2000).

¹⁹ The role of scientists in the public/political debate is part of a heated discussion among scientists (cfr. *public sociology* or *public criminology*).

well as cooperation between (Dutch-speaking and French-speaking) practitioners, scientists, policy-makers and journalists. These important and highly attended conferences set and kept this particular issue high on the political and public/media agenda. Those conferences can be perceived as one of the *incremental* steps opening a *policy window* (Kingdon, 2002). They lead to the widespread attention and shared concern that some type of action was required. On the other hand, these conferences provided some interesting multidisciplinary input for the Parliamentary Working Group on drugs (1996-1997).

"Those conferences were the mecca of politicians, scientists and practitioners. It was a kind of movement of people who had finally found each other. The conferences also gave a lot of input to the debate in the Parliamentary Working Group on drugs as it can be considered as a sort of prolongation of these debates." (Respondent 9, practitioner).

Additionally, some scientists acted as *policy advisors* through the attendance of study groups from political parties. From the beginning of the 1990s, when interest in the drug issue gradually increased, several study groups from political parties invited scientists (and practitioners) to develop a party policy on drug policy (which was then integrated in parliamentary and governmental actions). Such engagement of scientists goes behind the public scenes but can be seen as another (successful) route to bringing scientific knowledge to the policy-making process and to establish an interaction between science (and practice) and policy. For instance, as will become clear, many participating scientists (and practitioners), were also picked up in the PWG (see below, Chapter 2).

"Experts did not have to be members of the party but they had to express their sympathy with our points of view [...] In a study group, they try to influence the conclusions and notes from their perspectives [...] Of course, they search for a study group from a political party that is most compatible with their vision. [...] It is more effective to take part in a study group when you want to influence policy-making." (Respondent 29, policy-maker).

Even though the technical skills and know-how of scientists were brought into the debate, this engagement was also influenced by the political context. For instance, a scientist who participated in the study group from two majority parties simultaneously, ended his engagement when one of the political parties became part of the opposition. Likewise, due to their link with the Catholic 'Brothers of Charity', members of the organisation 'De Sleutel' tended more to engaging in the study group from the Flemish Christian-Democratic party (CVP).

5. Conclusion

The drug theme entered the Belgian legislative framework at the beginning of the 20th century. In particular, the basic Belgian law relating to the traffic in toxic substances, hypnotics, narcotics, disinfectants and antiseptics dates from 24 February 1921. The first steps in developing a Belgian drug policy were, however, laid in the 1990s. The increase of the supply of both legal and illegal drugs (in quantity as well as variety), an accumulative mobility of the demand side, and the supposed increase in drug-related property crimes led to a need for a comprehensive drug policy. This particular pressure together with the availability of government funds led to the creation of *drug prevention and security contracts* between the Federal Government and the cities. Even though projects initially were set up from a crime prevention perspective, these contracts gradually broadened the discourse on drug problems and treatment. For the first time, drugs were considered as a social and health problem and a harm reduction approach was incorporated. Support for initiatives like needle exchange, methadone maintenance (as a result of the 1994 Consensus Conference) and medical-social treatment centres for drug users demonstrated this change.

The *Federal Action Plan Toxicomania-Drugs (1995)* can be considered as another move towards the development of a comprehensive Belgian drug policy. On 3 February 1995, the Government approved this ten-point plan in order to define action priorities on drugs, which could then serve as a starting point for the establishment of concrete initiatives. However, so far, the 10 action points of the Federal Action Plan Toxicomania-Drugs has not yet propagated an integrated or global perspective.

While the theme of drugs was increasingly prominent in the political forum from the beginning of the nineties, the contribution of scientific knowledge into the policy-making process remained limited. Several **barriers** to the integration of scientific knowledge in the policy-making process are observed. On the one hand, drug research in Belgium was rather fragmented and restricted to a small number of epidemiological youth studies and policy-funded studies. On the other hand, feelings of insecurity (as a result of a steep increase of frequently occurring crime and nuisance), an increasing visibility of drug use in certain (youth) cultures and increasing fear for a uncontrollable drug epidemic at the international level dominated the debates. Stimulated by attentive media coverage and the aftermath of the election victory of the Flemish extreme right party Vlaams Blok in 1991 (Black Sunday), emotions largely determined the policy-making process until then.

Several initiatives served as an important breakthrough regarding the **contribution of scientific knowledge to the drug policy-making process**. An increased attention to scientific knowledge as an instrument of developing drug policy was evident in the Federal Action Plan Toxicomania-Drugs (1995). This initiative can be seen as one of the first explicit steps in the development of an interest in (and influence of) policy-funded research and evaluation research about drugs in particular. At the same time, scientists themselves, taking up their public role as *policy advisor* (Loader and Sparks, 2011), made efforts to bring available scientific knowledge to conversations and debate on issues of drug policy. For instance, the highly attended national conferences 'Drug Policy 2000' engaged the debate between scientists, practitioners and policy-makers with their criticism and enthusiasm for knowledge about the drug phenomenon and possible policy solutions. Those conferences can be seen as one of the initiatives improving the utilisation of scientific knowledge in the policy-making process. The participation of some scientists in study groups from political parties may have encouraged the input of scientific knowledge in the policy-making process as well. Clearly, those scientists – who had the skills to carry scientific knowledge into the public and political debate – facilitated the interaction between science and policy.

With this history in mind, we will discuss the Parliamentary Working Group on Drugs (1996-1997), the first milestone in Belgian drug policy between 1996-2003, in the next chapter.

Chapter 2 Parliamentary Working Group on drugs: 1996-1997

The debate about the development of Belgian drug policy has several roots. Firstly, the emergence of drug use and drug problems among small groups started to affect the lives of youth and general populations. Throughout the European Union, cannabis was the most commonly used illegal drug in the nineties. Depending on the country, from 5.8% to 20.30% of the population had at least tried the drug. Increases in the use of other drugs like ecstasy, amphetamines and LSD were also reported (EMCDDA, 1995). Secondly, the multidisciplinary and complex nature of drug problems demanded a nationally coordinated response incorporating prevention, treatment and law enforcement. Each of the previously mentioned events in Belgium (e.g. Federal Action Plan Toxicomania-Drugs; national conferences 'Drug Policy 2000') and elsewhere (e.g. international trend to review national drug strategies; EMCDDA, 1997) provided the background for some (even though rather isolated) *incremental steps* gradually opening a *policy window*²⁰ (Kingdon, 2002). As a result, around mid-1990s, Belgium engaged in a profound debate on the development of a national drug policy with the creation of the Parliamentary Working Group on drugs (PWG).

1. Installation of the Parliamentary Working Group on drugs (PWG)

The Belgian drug *policy window* was opened by Mr. Patrick Moriau, a MP of the French-speaking Socialist party (PS). He emphasised publicly in the French-speaking newspaper *Le Soir* (17 November 1995) that he would submit a proposal to *depenalise* (and in a later stage *legalise*) cannabis possession (in contrast with the repressive Belgian law). This initiative was inspired by his personal experiences as mayor (of the city Chapelle-les-Herlaimont in the Walloon Region), by the public awareness of a still increasing drug phenomenon as well as by the fact that the implementation of the Ministerial Circular Letter of 5 May 1993, which instructed Public Prosecutors to add a consequence (e.g. prosecution, praetorian probation,...) to every violation (making no distinction between types of drugs), impeded a uniform prosecution policy among Public Prosecutors (De Ruyver, et al., 2004). Although it was only a threat (in the end, he did not submit his proposition), his statement opened up the debate on drugs and drug policy in Belgium.

²⁰ The Multiple Streams model (Kingdon, 2002) seeks to explain policy changes by means of, respectively, the presence of powerful and competing policy networks or the importance of context like political climate, timing (e.g. when a window of opportunity (policy window) opens) and changing realities. Even though *incident or crisis-driven* policy-making regularly occurs (Beyens, et al., 2001), remarkable incidents have not been decisive in shaping political action in this particular case.

“The idea of a proposal was launched but it was never the goal to submit the proposition. The only goal was to create a debate and this turned out well [...] Actually, it has advanced this political and public debate [...] Sometimes, in politics, you have to force things [...] I am also convinced that without media, there wouldn't have been a debate nor a Parliamentary Working Group.” (Respondent 41, policy-maker).

Several newspapers picked up the decisive article and published the core of it the day after. With headlines like *“PS wants to legalise cannabis”* (18 November 1995, Flemish newspaper *Gazet van Antwerpen*), they immediately created a climate in which concepts like ‘danger’, ‘death’ or ‘disease’ were linked with the concept of *legalisation* of cannabis (instead of *depenalisation* which was argued by MP Moriau). In presenting their particular thesis, journalists tended to prefer finding an authority who confirmed their analysis, often citing football players or musicians. In this case, the whole issue of what media regards as a so-called authority on drugs is questionable.

At that time, several (ex-)drug users (together with some like-minded practitioners and scientists) were united in **interest groups** advocating for drug users’ rights. For instance, the BCCO (*Belgian Cannabis Consumers’ Organisation*) played an active role in the Flemish part of Belgium while in the French-speaking part of Belgium, interest groups *A citizen just like any other* and *Association against the prohibition* were active. These interest groups took advantage of media attention in an attempt to publicise their ideas and to persuade the public and policy-makers to share their point of view. For instance, BCCO showed up in the newspapers as several protests were organised in order to promote *legalisation* of cannabis. In hoping to stimulate the discussion, they also published their own magazine ‘The Paper’, and forwarded international newspaper articles (e.g. concerning the opinion of the Beatles towards cannabis) to the Flemish newspapers.

*“One of the reactions on our appeal came from the Belgian Cannabis Consumers’ organisation (BCCO). The Bond sent us some newspaper cuttings from which we chose the two most supportive.” (21 November 1995, Flemish newspaper *Belang van Limburg*).*

Additionally, they took advantage of the ‘Kim Saadeldin’ incident. This 16-year old youngster and member of the BCCO, Kim Saadeldin, who was locked up in a youth institution because of cannabis possession, died of natural causes during his imprisonment. While the Flemish media falsely linked the death of youngster Kim Saadeldin with the dangers of cannabis use, the interest group BCCO used this incident to plead against imprisonment of recreational users of cannabis.

“Obviously, there was a need for a public debate and we forced it by means of our actions [...] His death caused a lot of indignation and the media attention which followed gave us a boost in popularity. We were invited for television programmes, debates, etc. everywhere in Flanders.” (Respondent 23, member of interest group).

At the same time, interest groups tried to influence the parliamentary debate on the drug issue by making some (often selective) contacts with MPs (scientists or practitioners were hardly consulted).

It is clear that the media (and interest groups) played a significant role in empowering the *enlightenment* function of scientific knowledge in our particular case (Tieberghien and Decorte, 2013). In particular, media coverage initially shaped political action (and a focus on scientific knowledge) in Belgium. The media succeeded in placing (and keeping) an item on the political agenda, which in turn increased the likelihood of action on the part of the Federal Parliament and the Government. In accordance with Lenton (2004), it seems that once a topic is covered in the media, it is harder to ignore for policy-makers.

“If a topic gets a lot of media attention, it is really not done for the MPs to not pay attention to this issue in the parliamentary debates.” (Respondent 6, policy-maker).

Accordingly, some MPs formulated and submitted particular questions and interpellations. Other MPs wrote a letter to the President of the Chamber of Representatives (Letter of MP Claude Eerdekens (French-speaking Socialists (PS)) regarding the drug problem in Belgium, 27 November 1995) or submitted a proposition to establish a Parliamentary Inquiry Commission or a temporary Commission (*Hand. Kamer 1995-1996, 13 november 1995, 230/1*) by referring to the 1995 Federal Agreement (which re-emphasised the need of a comprehensive and efficient national drug policy in Belgium) and the evolving drug phenomenon. Vague references to scientific knowledge were used as ammunition (*political/symbolic* utilisation): *“We have a mass of scientific information, legal data and advice from professionals working with drug users and the public” (Hand. Kamer 1995-1996, 13 november 1995, 230/1)*. Although these initiatives applied to all legal and illegal drugs, an underlying focus on cannabis was identified (in line with the high media coverage of the cannabis issue and the ongoing discussion in the Netherlands): *“A temporary Commission should decide whether a tolerance policy or a legalisation/regulation of (1) use/possession or (2) use/possession/sale/production is most appropriate” (Hand. Kamer 1995-1996, 13 november 1995, 230/1)*.

Eventually, the Conference of Presidents²¹ decided to establish a Parliamentary Working Group. A working group has the task of collecting information about the state of the art of a phenomenon as well as to formulate some recommendations which may change the state of the art (Staelraeve, 2003). In accordance with the *political/symbolic* model (Weiss, 1979; Nutley, 2003), some respondents considered this action by the Parliament as a strategy of the majority to keep the political responsibility away from the Government (and thus for delaying real decision-making).

"The use of hard or soft drugs in our country is a highly topical issue. A major public debate on drugs, particularly on soft drugs, sparked off in the last few days [...] The Parliament should take a prominent role in discussing a topic which arouses a great deal of emotions and anxiety in society [...] Some initiatives were taken by individual MPs. The Parliament has the task to examine the drug phenomenon, without presupposing any legal actions²² (my emphasis)." (Memorandum of the Parliamentary Working Group).

"It has been a trick to keep the discussions away from the Government [...] The Government had an excuse not to take any initiatives or measures in one or another direction as the Parliament was working on the topic." (Respondent 4, policy-maker).

The creation of a Parliamentary Working Group on drugs was approved on 17 January 1996 by the Conference of Presidents based on the advice of the Presidents of the (standing) Commissions of Justice, Internal Affairs and Public Health.²³ After the approval, the working group was established on 25 January 1996.

The chairman of the working group was Mr. Louis Vanvelthoven (SP, Flemish Socialists). First and second vice-president were respectively Mr. Daniel Bacquelaire (PRL-FDF, French-speaking Liberals) and Mr. Marc Verwilghen (VLD, Flemish Liberals) who was replaced by Mr. Jef Valkeniers (VLD, Flemish Liberals) on 30 January 1997²⁴. Secretary of the Parliamentary Working Group was Mr. Jacques Lefevre (PSC, French-speaking Christian Democrats). Both Mr. Mau-

²¹ The Conference of Presidents is one of the most important bodies of the Chamber of Representatives. It consists of the President and the Vice-Presidents of the Chamber, former Presidents of the Chamber who are still members of the Chamber, the fraction leaders and a member of each fraction. The Conference meets weekly to discuss the day-to-day business and the work of the Chamber (Devos, 2006).

²² 'without presupposing any legal actions': refers to the 1995 Federal Government Policy Statement which emphasised explicitly that the legalisation of drugs was not an acceptable solution in a search for the development of an efficient drug policy. Likewise, an underlying focus on cannabis can be identified here.

²³ President of the Commission of Justice: Mr. Marc Verwilghen (VLD, Flemish liberals), president of the Commission Internal Affairs: Mr. Charles Janssens (PS), president of the Commission Health Affairs: Mr. Louis Vanvelthoven (SP, Flemish Socialists).

²⁴ Mr. Marc Verwilghen was appointed to the Parliamentary Inquiry Commission Dutroux.

rice Minne (PS, French-speaking Socialists) (as he replaced Mr. Charles Janssens (PS, French-speaking Socialists) on 22 April 1996) and Mr. Jo Vandeurzen (CVP, Flemish Christian Democrats) were responsible for the writing up of the report. The Parliamentary Working Group on drugs was further composed of representatives of several political parties seated in the Commissions of Justice, Internal Affairs and Public Health.²⁵

2. Bottom-up approach

The PWG aimed to study the complexity and multidisciplinary nature of the drug phenomenon to determine the future orientation of Belgian drug policy. It was the first time that the drug phenomenon was studied thoroughly, focusing on prevention, treatment and repression. Members of the PWG relied on experts to get an idea of good practices as well as of scientific findings regarding the drug phenomenon. Through a bottom-up approach, the PWG aimed to translate the advice of experts into useful policy recommendations.

2.1. Composition of the PWG

In the Parliamentary Working Group on drugs (1996-1997), a total of 59 national and international experts²⁶, working in various domains of drug policy (epidemiology, prevention, treat-

²⁵ One member of each fraction in these Commissions was involved: Mr. Jan Van Erps and Mrs. Ingrid Van Kessel (CVP, Flemish Christian Democrats), Mr. Patrick Moriau (PS, French-speaking socialists), Mr. Willy Cortois (VLD, Flemish liberals), Mr. Dany Vandebossche (SP, Flemish socialists), Mr. Filip De Man (Vlaams Blok, Flemish extreme right party), Mr. Frans Lozie (AGALEV, Flemish Greens). Each of these members were qualified to vote. Some non-voting members (e.g. Mrs. Anne-mie Vandecasteele (VU, Flemish Nationalists) also participated in the PWG.

²⁶ The following experts were consulted in the PWG: Prof. Dr. M. Bogaert (Heymans Institute for Pharmacology, UGent), Prof. Dr. A. De Leenheer (Toxicology, UGent), Prof. Dr. A. Noirfalise (Toxicology and Bromatology, ULG), Prof. Dr. J. Casselman (Academic Psychiatric Centre Bierbeek, KULeuven), Prof. Dr. I. Pelc (University Hospital Brugmann), Prof. Dr. G. Reginster-Hanneuse (ULG), Mr. R. Hartnoll (EMCDDA), Mr. M. Morival (Doctor, WHO), Mr. A. Perissino (Doctor, EMCDDA), Prof. Dr. B. De Ruyver (Institute for International Research on Criminal Policy, UGent), Mr. A. Labrousse (Director Observatoire géopolitique des drogues), Mr. Willy Bruggeman (Assistant coordinator EUROPOL), Prof. Dr. C. Fijnaut (KULeuven), Mr. A. Morel (Medical Director Le Trait d'Union), Prof. Dr. P. Cohen (Department Social Geography, University of Amsterdam), Mr. P. Duinslaeger (National magistrate), Mr. B. Dejemeppe (Public Prosecutor Bruxelles), Mr. C. De Winter (Director Programme Drugs Police), Mr. T. Marchandise (Public Prosecutor Charleroi), Mr. M. Vansnick (Belgian Institute for Road Safety), Mr. I. Carmen (Public Prosecutor Louvain), Mr. D. Delhauteur (Director Safety Contracts, City of Liege), Mr. J. Vanwingh (Director Prison Sint-Gillis), Mr. F. Van Mol (Medical Director, Algemeen Bestuur Strafinrichtingen), Mr. R. Mertens (Director Prison Dendermonde), Mr. V. Libert (Director project Praxis-Verviers), Mr. R. Bosmans (Administrator CAP-ITI, aide psychologique et sociale aux toxicomanes incarcérés et sortants de prison), Mr. J. Spreutels (Advocate and President Cel Financiële informatieverwerking), Mr. B. De Bie (Officer Police, Departement economical criminality and finance), Mr. J. Doraene (Officer Police, Director Office Central chargé de la lutte contre la Délinquance Economique et Financière Organisée (OCDEFO)), Mr. F. Lequarré (Doctor, Centre d'analyses transdisciplinaires drogues), Mr. P. Bastin (Director Infor-drogues, Association qui offre de l'information, de l'aide, des conseils à tout un chacun confronté d'une façon ou d'une autre, de près ou de loin, à la problématique des drogues), Mr. S. Todts (Doctor, MSOC Free Clinic), Mr. G. Vanhalle (Vice president Algemene Pharmaceutische Bond), Mr. F. Buntinckx (Doctor Wetenschappelijke Vereniging voor Geneeskunde), Mrs. I. Montulet (Febecoop, expertise centre social economy), Mr. J. Lafontaine (Doctor and coordinator Wetenschappelijke Vereniging voor Geneeskunde), Mr. G. Cahuana (Vice Pres-

ment, repression) were asked to convey their analysis and their recommendations. The experts can be divided into three categories: 12 scientists, 44 practitioners and 3 representatives of interest groups of ex-users.²⁷ The first category included national and international scientists, selected from different countries (related to the importance given to the international framework) and different angles: pharmacology, epidemiology, criminology, etc. Practitioners were selected from police (6), justice (9), treatment services (19) and prevention services (10). Some of these practitioners occupied a *dual position* in the PWG. Practitioner Mrs. Jacqueline Paisse contributed twice: once as a member of the department prevention of the treatment service 'Clips Liège', and a second time as a representative of the treatment service *Association Francophone des Intervenants en Toxicomanie* (AFIT). Mr. Eric Picard occupied an official role as an individual medical expert as well as an unofficial one, as a member of the interest group CORA (Radical Anti-Prohibitionist Coordination).

Next to these experts, some members (and 3 of their representatives) of the Federal and Federate Government²⁸ were also invited and heard in the PWG. Both levels were represented due to the complexity of competences related to drug policy (e.g. prevention actions are situated at the federate level).²⁹ In particular, 6 members of the Federal or Federate Government were heard in the discussion: Mrs. Wivina Demeester-Demeyer (Flemish Minister of Health, CVP, Flemish

ident Andesraad van cocaproducten), Mrs. M.Geirnaert (Coordinator Vereniging voor Alcohol en andere Drugproblemen), Mr. L. Bils (Director CCAD, Comité de Concertation sur l'Alcool et les autres Drogues (CCAD), Mr. E. Servais (Coordinator ASL, Arbeitsgemeinschaft für Suchtvorbeugung und Lebensbewältigung), Mr. F. Curtet (Psychiatrist), Mr. Marcel Van Hex (Director CAD, Centrum voor Alcohol en andere Drugproblemen Limburg), Mr. P. Van der Kreeft (Director vzw Leefsleutels voor jongeren), Mrs. J. Paisse (member Clips Luik, Centrum Geestelijke Gezondheidszorg), Mrs. M. Dal (Prospective Jeunesse Bruxelles, centre d'étude et de formation actif dans le domaine de la prévention des risques liés aux usages de drogues, dans une dynamique de promotion de la santé), Mr. A. Figiel (Neuropsychiatrist and Director ALFA, Centrum Geestelijke Gezondheidszorg), Mr. E. Picard (Doctor Midrasch Brussel, Drug Rehabilitation Clinic), Mr. D. Van de Putte (Doctor Psychiatric Hospital Ziekeren), Mr. M. Firket (Doctor START, Service Transdisciplinaire d'Aide à la Réadaptation des Toxicomanes Liège), Mr. M. Reisinger (Psychiatrist In-dépendance absI), Mr. C. Coenegrachts (Pluralistisch Overleg Welzijnswerk (POW)), Mr. H. Wolf (VLASTROV), Mr. P. Terreyn (Belgian Cannabis Consumers' Organisation), Mr. J. Blanquaert (Belgian Cannabis Consumers' Organisation), Mr. D. De Vleeschouwer (A citizen just like any other), Mr. G. Vereecke (Doctor - inspector RIZIV - social security administration), Mrs. J. Paisse (Vice President AFIT, Association francophone des intervenants en toxicomanie), Mr. J. VanRusselt (Director FEDITO, Fédération wallonne des institutions pour toxicomanes), Mr. J. Bertels (Prevention Assistant FJIAC, Federatie Jongeren Informatie en Adviescentra).

²⁷ In order to use a clear terminology, I will make a distinction between categories of experts (scientists, practitioners, representatives of interest groups) when applying a quotation.

²⁸ Mr. Kris Van Limbergen (Secretary Prevention Policy of Ministry of Internal Affairs), Mr. Claude Debrulle (General Director Administratie van de strafwetgeving en van de rechten van de mens van het departement justitie), Mr. Lucien Nouwynck (Adviser Criminal Policy Service, Ministry of Justice), Mrs. Wivina Demeester-Demeyer (Flemish Minister of Health), Mr. Stefaan De Clerck (Minister of Justice), Mr. Johan Vande Lanotte (Minister of Internal Affairs), Mr. Laurette Onkelinx (Minister-president French-speaking Community), Mr. Yvan Ylieff (Minister of Science Policy) and Mr. Karl-Heinz Lambertz (Minister of Youth, Media and Social Affairs of the German speaking Community).

²⁹ There are a lot of key actors and departments involved in the drug issue on the federal level and federate levels (Federal Government, 2001a).

Christian Democrats), Mr. Stefaan De Clerck (Federal Minister of Justice, CVP, Flemish Christian Democrats), Mr. Johan Vande Lanotte (Federal Minister of Internal Affairs, SP, Flemish Socialists), Mrs. Laurette Onkelinx (Minister-president of the French-speaking Community, PS, French-speaking Socialists), Mr. Yvan Ylief (Federal Minister of Science Policy, PS, French-speaking Socialists) and Mr. Karl-Heinz Lambertz (Minister of Youth, Media and Social Affairs of the German speaking Community, PS, French-speaking Socialists). Although it was the goal of the PWG to study the phenomenon thoroughly, this selection is in accordance with the prevailing *discourse* in studying the drug phenomenon during the 1990s: a focus on (in)security and a predominance of domains like Interior Affairs and Justice. Both the federal Minister of Social Affairs and the federal Minister of Public Health were not heard in the PWG.

“The working group heard the colleagues of the Federal Government, responsible for the departments of Justice and Internal Affairs, for a good reason. Unfortunately, the PWG failed to obtain the advice of the Ministers of Social Affairs and Health. That surprised me a little bit. I think we could have made an important contribution.” (Mr. Marcel Colla, Federal Minister of Public Health, SP, Flemish Socialists; Hand. Kamer 1996-1997, 24 juni 1997, 175).

The members of the PWG also selected **3 additional members** during their first meetings: 2 (so-called external)³⁰ experts (Prof. Dr. Brice De Ruyver, scientist Ghent University; Mr. Claude Stoclet, director of treatment services NPO Consult (Bureau d'études et d'interventions en toxicomanie) and AFIT (Association Francophone des Intervenants en Toxicomanie) and the advisor of the Cabinet of the Prime Minister (Mr. Jérôme Glorie). The two (so-called 'external') experts had the task of attending the hearings, reporting on them and exploring possible ways of thinking about the drug phenomenon in Belgium. The selection of a Dutch-speaking and a French-speaking external expert was inspired by the need for parliamentary equilibrium as well as by their complementary expertise: Prof. Dr. Brice De Ruyver applied a scientific approach from a juridical and criminological angle while Mr. Claude Stoclet represented the practitioner's focus on prevention and treatment.

“In the French-speaking part, we were most concerned with the social, educational dimension of the phenomenon and Stoclet was selected from this perspective. The juridical dimension was more part of the debate in Flanders which was the approach of De Ruyver.” (Respondent 38, practitioner).

³⁰ Although each of the selected experts were external, the report of the PWG made a distinction between the invited experts. While scientists, practitioners, etc. were called experts in the report, Prof. Dr. Brice De Ruyver (Ghent University) and Mr. Claude Stoclet (Director of NPO Consult and president of AFIT) were called 'external experts'.

2.2. Selection of expertise

2.2.1. Personal networks/contacts

The selection and non-selection of expert advice can be seen as an integral part of the policy process. Or, according to McCann (2008) and Miller (1999), what counts as expertise is a question of power. In the PWG, the selection was made by the external experts (Prof. Dr. Brice De Ruyver and Mr. Claude Stoclet) as well as by the members of the PWG. Indeed, a lot of care was given to political (i.e. party policy, majority vs. opposition) and cultural/linguistic (e.g. Flemish MPs preferred the selection of Flemish experts) issues. Who was invited and heard, and who wasn't, also said something about the functional specialisation of the policy-maker involved. For instance, MPs with a medical background (e.g. qualified as a doctor) more often tended to select doctors or professors in toxicology or pharmacology. Several interviewees acknowledged that a thoughtful (but *political*) selection of experts was made.

"We selected people that we knew [...] Some were obvious, other were picked selectively. You search for authoritative experts [...] you have to select some issues and enlarge them, that is the trick. It is a game, which is the political side of such a PWG. We select those who suit us the most." (Respondent 4, policy-maker).

"We found some people who were to a lesser extent involved in the drug phenomenon but who were willing to support our position. Other parties also tried to select experts supporting their position." (Respondent 1, policy-maker).

Generally, it appeared that **personal contacts/networks** were at least as important (maybe even more) as the expertise and competence of experts. Policy-makers describe it as a fundamental task of scientists to make contacts and to establish networks with policy-makers. Once an expert appeared on the political stage (and his ideas and opinions were shared by one or more political families), often a (permanent)³¹ relationship with policy-makers is elaborated. Establishing networks and active (recurrent) engagements by scientists in the policy-making process are considered as facilitators of knowledge utilisation.

"You are not selected because of your knowledge and experience but because you know people and have several personal contacts." (Respondent 48, scientist).

"Everyone makes a list of experts and those who are mentioned on several lists are invited automatically. Yes...mostly one knows one or more experts personally [...] It is not only about the expertise of an expert but, yes, the access to policy or the contacts with policy-makers, both elements I think." (Respondent 35, policy-maker).

³¹ Or at least temporarily taking into account the duration of the legislature.

Therefore, it comes as no surprise that we observe a certain degree of overlap between the scientific organisation committee³² of the conference 'Drug Policy 2000' and the PWG. It works in both ways: participating experts become well-known among policy-makers but attending these conferences also allow experts to get to know the key policy players and to empathise with them.

"These conferences did build up a strong network (...) We had a good idea of who, in the French-speaking part as well as in the Dutch-speaking part, was involved in several domains." (Respondent, 50, scientist).

The selection is also linked with the attribution of research projects. If we look at the *policy-funded research projects* which were commissioned and funded by the Government in the 1990s, these research projects were allocated to the same pool of university professors as those who were selected as expert in the PWG (cfr. *policy advisors*; Loader and Sparks, 2011). As they were granted policy-funded studies, they were obviously perceived (and known) as experts in this domain by policy-makers. For instance, the studies 'Poverty, drugs and criminality' (1992) and 'Desirability of methadone maintenance treatment' (1993) were allocated to Prof. Dr. Brice De Ruyver (UGent) and another study 'Inventory of epidemiological data in Belgium and in some neighbouring countries' (1996) to Prof. Dr. Brice De Ruyver (UGent), Prof. Dr. Joris Casselman (KULeuven) and Prof. Dr. Alfred Noirfalise (ULg). A study creating a manual for the evaluation of the medical-social treatment centres for drug users (MSOC) (1997) was also allocated to Prof. Dr. Brice De Ruyver (UGent) and Prof. Dr. Alfred Noirfalise (ULg). The evaluation of the MSOC's (1999) was allocated to Prof. Dr. I. Pelc (ULB), Prof. Dr. B. De Ruyver (UGent), Prof. Dr. J. Casselman (KULeuven), Prof. Dr. A. Noirfalise (ULg) and Prof. Dr. C. Macquet (ULg) (Bullens, et al., 1999).

Interviewees also argued that when *media* pushes forward certain public credible experts, they may have a greater chance of being integrated in the personal networks of the policy-makers. For instance, activities such as protests by interest groups as well as extensive media coverage in the period before the PWG resulted in more progressive policy-makers selecting these interest groups. Respondents also stressed the role of media in selecting scientists.

³² Some members of the scientific organisation committee were not invited and heard in the PWG: Dr. Stan Ansoms (Association for Alcohol and other Drug Problems, VAD), Mr. Jean Bertrand (Comité de Concertation sur l'Alcool et les Autres Drogues, CCAD), Mr. Ruud Bruggeman (employee Trempoline), Mr. Freddy Carlier (Director Police Academy), Mr. Wim Depreeuw (Inspector Prison administration), Mr. Christian De Vroom (Judicial Police), Mr. Guy Goyvaerts (SODA), Dr. Jean-Pierre. Jacques (Director 'Le projet Lama'), Mr. Albert Schleiper (Centre Universitaire de Liège, CUNIC), Mr. Karl Van Cauwenberghe (Public prosecutor Antwerp), Mrs. Nadine Van Coppenolle (Director Police Charleroi, section youth), Baron Paul Van der Straten Waillet (Director Trempoline), Mrs. Ann Vandesteene (Advisor Prison Administration), Mr. Patrick Zanders (Director Police).

"It is logical that the people who pose statements in media will be heard in advisory commissions. In that way the selection of experts is influenced by the media." (Respondent 40, policy-maker).

2.2.2. Types of public engagement

In accordance with Loader and Sparks (2011), scientists performed a variety of influencing roles in the PWG. Prof. Dr. Brice De Ruyver can be seen as a privileged member of the PWG which is linked with the particular public role of an *observer-turned player*. On the one hand, he was introduced and heard as an expert of European drug policy and of the drug phenomenon as national and international security problem. On the other hand, Prof. Dr. Brice De Ruyver, together with Mr. Claude Stoclet, was also appointed to integrate the findings from the hearings into a report and, secondly, to write a draft of the final conclusions and recommendations. This draft served as a starting point in the political discussion about a Belgian drug policy among the members of the PWG (see also below, §5). Based on his expertise (e.g. coordination of (policy-funded) research projects) and networks (e.g. through the organisation of the annual conferences, the participation in the study group from the Flemish Socialists (SP)), he was given the opportunity to participate directly in the development of the drug policy, and in particular in the activities of the Parliament.

In addition, some scientists, stressing the independent characteristics of science, did not go beyond their participation in the PWG. These so-called *scientific experts* only gave a presentation and replied to questions for information but were not proactively seeking for engagement outside the formal advisory structure (PWG).

"I tried to formulate clear recommendations. Maybe this is not good enough and maybe I should participate in the policy-making process. The question is then, to what extent is your scientific research compromised or does one have the impression it is compromised?" (Respondent 24, scientist).

Social movement theorists/activists took up a similar role as scientific experts. However, in participating in the PWG, these scientists put forward a more critical, alternative discourse towards the drug phenomenon and drug policy (see also below, §4).

Several *policy advisors* aimed to inform (public and political) debate (Loader and Sparks, 2011). They were doing a large part of their research on (short-term) contracts for the Government (see above) and perceived it as their task to bring scientific knowledge into parliamentary debates or Commissions and/or to become advisors of MPs. These policy advisors also established good contacts with professionals (e.g. police, outreach workers, ...). Some of this engagement

also goes behind the public scenes: e.g. those scientists also participated in a study group from a political party (see also above, §1.3., Part I).

"First, I tried to influence the highest level of the policy-making process but that was not successful. It is better to work bottom-up, talking with associations and MPs in order to climb up. I also have found other ways to distribute information, I have attended a lot of conferences, etc. That is the role of a scientist. Of course, I understand that some scientists do not do this [...] Eventually, I played a role." (Respondent 52, scientist).

3. Hearings of experts and members/representatives of the Government

Experts were asked to make an inventory (*status questionis*) of the multidimensional aspects of the phenomenon, such as: health risks; implications for security and public order; judicial elements, such as (inter)national drug trafficking and drug-related criminality, and; social and economic factors (Verslag namens de Parlementaire Werkgroep belast met het bestuderen van de drugproblematiek, *Parl.St. Kamer*, 1996-1997, 1062/1-3). Several references to the action points of the Federal Action Plan Toxicomania-Drugs (1995) were made.

It is important to note here that the hearings of the 59 experts (over a period of 2 years) were alternated with some working visits and a demonstration of a drug detection device. At the meeting of 18 February 1997, Dr. Luc Beaucourt (University Hospital Antwerp) demonstrated the Barringer drug-detection device. This device can quickly detect both drugs and explosives. Furthermore, working visits to Amsterdam (9-10 April 1996), Bern-Zürich (15-16 April 1996), Ghent –Oosterzele –Ruislede (20 May 1996), Brussels (21 May 1996) and Charleroi (28 May 1996) were organised. At each working visit, the MPs had the opportunity to talk with some practitioners and/or local policy-makers. Respondents evaluated these working visits as very informative towards the discussion.

3.1. Content of the hearings

In the expert hearings, it was recognised that we live in a drug-taking society. The (international) increase of the prevalence rates of drug use (cannabis and ecstasy in particular)³³, the increase of registered drug addicts and the diversification of the supply were reported. Based on the diverse contributions of scientists and practitioners, it became clear that the drug problem had to be perceived as a complex phenomenon covering various aspects of life and has multiple

³³ Cannabis remained the most frequently used substance (18 % of those aged 15 to 64 have tried cannabis at least once; about 6 % of those aged 15 to 64 have used cannabis in the past 12 months). Amphetamine, ecstasy and cocaine use increased moderately over the 1990s as a whole, with ecstasy use more evident than amphetamine or cocaine use among young adults (EMCDDA, 2000). The trends observed in Belgium were very similar to those noticed in other countries of the European Union.

dimensions: health problems (e.g. health risks), social problems (e.g. unemployment, poverty) and security problems (e.g. relationship between drug use and criminality). Repeated references were made to the relationship between drug use and truancy, family situation, violence, traffic accidents, criminality, marginalisation and poverty. In accordance with the Federal Action Plan Toxicomania-Drugs (ten-point plan), a number of scientists and practitioners pointed to the need for an **integral and integrated policy**, with a focus on a social and health approach. Members/representatives of the Government were also in favour of an integrated and integral Belgian drug policy. They acknowledged the complexity of the drug phenomenon (as a social and health problem; see also security and prevention contracts) and confirmed the recommendations of the experts to develop a realistic approach (regarding prevention, methadone treatment, etc.). The Minister of Internal Affairs Johan Vande Lanotte (SP, Flemish Socialists), in his (rather conservative) contribution 'Freedom - Happiness', discussed the several pillars of an integrated drug plan separately (i.e. prevention, treatment and repression) and acknowledged that a coherent and homogenous drug policy may succeed in decreasing drug use in society. Each of the elements discussed were rather similar to those appointed by scientists and practitioners.

In terms of the demand for drugs, several (inter)national epidemiological/pharmalogical experts, practitioners and members/representatives of the Government raised concerns about the lack of reliable numbers or registrations and the lack of (funding for) epidemiological studies on drug use. They stressed the fact that more **epidemiological studies** were necessary in order to produce the necessary reliable and comparable data. Furthermore, the development of a better and uniform registration system among treatment centres was strongly recommended. They also regularly referred to the necessity of the creation of the Belgian Monitoring Centre for Drugs and Drug Addiction (BMCDDA) in order to assemble all registrations, evaluations, scientific researches or related information on the drug phenomenon in Belgium (even though a sound epidemiological base seems to be a prerequisite here). Epidemiological experts, consulted within the framework of the PWG, also underlined the need to study the drug phenomenon comprehensively, focusing on drug, set and setting. Here, it was stated, ethnographic research methods could introduce valuable, qualitative information.

By means of a detailed overview of the prevention initiatives and projects in Belgium, the importance of prevention was stressed by several practitioners from prevention services and members/representatives of the Government. It was stated that total abstinence was not a feasible goal in a drug taking society. Realistic goals of **prevention**, such as increasing initiation age (e.g. they argued that the use of alcohol-tobacco was initiated at the age of 11 years while the age of initiation of other drugs (now 15 years) is decreasing) and decreasing the incidence of driving

under influence were put forward. For this purpose, several practitioners and members/representatives of the Government supported the need for a full professional statute for prevention workers as well as the elaboration of prevention projects. A wide range of person-centered (general health promotion and education, increase social skills and learning to deal with risks) and structural (poverty reduction, social policy) measures were recommended.

Regarding **treatment**, the need for more initiatives, a diversification of the supply and an intensive network approach (also between social services and specialised drug services) was stressed. Many practitioners, as well as the members/representatives of the Government, recommended the establishment of a wide range of facilities ranging from low threshold, harm reduction initiatives to high-threshold, drug-free therapeutic programs. Representatives of interest groups also added their preference of establishing consumption rooms. Opting for a multi-disciplinary approach, it was argued by treatment practitioners that the specialised drug abuse treatment had to be integrated into the existing network of social and medical facilities. The importance of the medical and psychological support and social reintegration through e.g. employment, sport or culture was also emphasised. Furthermore, many practitioners, representatives of interest groups and members/representatives of the Government underlined the need for a legal basis of, for example, methadone treatment and needle exchange. In case of methadone treatment, these practitioners recommended involving doctors, psychiatrists, pharmacists, etc. supported by training as well as by expertise from the medical-social treatment centres for drug users (MSOC's). Additionally, it was argued by several practitioners that heroin-addicted inmates should also have access to substitution treatment and that primary and secondary prevention had to be extended given the large size of drug use in prison. The need for a prison drug policy was stressed.

Regarding the **supply** of drugs, several scientists and practitioners stated that international drug production and traffic increased and diversified (e.g. links with weapon traffic) strongly the last decades. They found support for these statements in the reports of Europol and Interpol as well as in the reports of the International Narcotics Control Board (INCB), a control organ which monitors the implementation of the United Nations drug control conventions (1961, 1971, 1988). Belgium was perceived as production and transit country being confronted with drug tourism, local production, users as well as dealers and criminality/nuisance. As a result, the experts (scientists and practitioners) as well as members/representatives of the Government recommended a good international cooperation, an involvement of Belgium at international fora, an increased police-justice cooperation, etc. To tackle local nuisance, it was suggested that a consultation between police, justice and the Government was necessary. Finally, to tackle drug traffic,

there needed to be more effective targeting of the criminal profits from money-laundering and a legal framework for special investigation methods. The results of the Dutch Commission Van Traa³⁴ which were presented in the PWG by expert Prof. Dr. Cyrille Fijnaut provided some input about the possibilities and limitations of special investigation methods in Belgium.

The hearings also addressed the debate on **criminal interventions towards drug users and small-scale production and traffic**. Several Public Prosecutors presented the number of arrestees, confiscations and drug cases in their district. Clearly, there was a lack of uniformity in prosecuting drug users. A person who was prosecuted for the possession of 500 grams of cannabis in one district may have not been prosecuted in another district. Furthermore, other practitioners (e.g. directors of prisons) stated that there had been a strong increase in the number of drug users/addiction among the prison population since the seventies (from 1% until 40-50% in the mid-1990s). Practitioners from social services and prisons also emphasised overpopulation, degrading circumstances and the lack of care for and supervision of drug addicted prisoners. Eventually, many practitioners, scientists as well as members/representatives of the Government recommended that prison be the *ultimum remedium* and that alternative measures (as well as the cooperation between justice and treatment) had to be supported in order to guide problematic drug users more easily towards treatment.

Particular attention was paid to the *criminalisation of cannabis possession*. This topic was heavily discussed by scientists, practitioners, representatives of interest groups and members/representatives of the Government. The bottom line was that most scientists, practitioners and representatives of the interest groups nuanced the dangers and risks of cannabis use. Likewise, the Minister of Internal Affairs Johan Vande Lanotte (SP, Flemish Socialists) placed cannabis in the first (least dangerous) category of drugs. Presenting cannabis as a relatively harmless substance was a tactic deployed in the debate on the (anti-)prohibition of cannabis possession. Several practitioners stated that prohibition of cannabis possession had rather negative consequences on prevention. In particular, it was argued that prohibition did not allow any distinction between drugs, the relationship between drug user and drug and the level of addiction. During the discussion, several scientists elucidated that this debate was strongly directed by international UN and European conventions and the 1995 Governmental Declaration. Similarly, learning

³⁴ In 1994, the Dutch Parliament decided to establish a Parliamentary Inquiry Commission under the supervision of Maarten Van Traa. The so-called Van Traa Commission examined the complexities of criminal investigation methods in the field of organised crime in the Netherlands. Its aim was to develop a general legal and organisational framework for investigations with regard to organised crime. Within this framework, an external research team, chaired by Prof. Dr. Cyrille Fijnaut, was asked to present a well-founded picture of the problems of organised crime in the Netherlands (Black, et al., 2001; Woodiwiss, 2014).

from the Dutch experience, agreement grew among several scientists and practitioners that introducing coffee-shops in Belgium should never be an option. The flood of foreign drug tourists resulted in an increase of the number of coffee-shops as well as in their development into commercial enterprises that did not respect the tolerance criteria. Moreover, this resulted in an increase of nuisance in the major Dutch cities and municipalities at the borders (which was against article 71 of the Schengen Convention), an explosive growth of the illegal cannabis production and a spread of illegal selling points for drug tourists. The Dutch Government acknowledged the adverse implications and changed direction in 1995 with the Drug Note *'The Dutch drug policy, continuity and change'*. Priority was given to the control of and fight against these unforeseen effects of the tolerance policy (Fijnaut and De Ruyver, 2008). The working visit of the PWG to Amsterdam further revealed that the Netherlands took some additional measures to counter the effects of the coffee-shop model: a harsher approach of drug traffic, nuisance and criminality; the quantity of soft drugs was reduced from 30 grams to 5 grams; the number of coffee-shops was decreased, and; a more intensive prevention and treatment policy was established, etc.

"A solution like the Dutch coffee-shop model is not recommended as a part of the traffic and profits are not controlled by the Government (which is an opportunity for mafia)." (Mr. Philippe Bastin, practitioner; Report of the PWG, p.466).

"Dutch policy-makers are aware of the negative consequences of their tolerance policy. Gradually they closed coffee-shops as they were not able to control the demand." (Prof. Dr. Brice. De Ruyver, scientist; Report of the PWG, p.126).

However, differentiation between cannabis and other illegal drugs and between possession for personal use and possession for profit, was perceived to be necessary to increase the effectiveness and credibility of prevention initiatives and to decrease the number of prisoners arrested for cannabis possession for personal use. Several practitioners were in favour of a *depenalisation* of cannabis possession.³⁵

"I am neither in favour of a legalisation nor a decriminalisation [...] The opportunity principle offers the possibility to focus on individualisation. This seems preferable." (Mr. Willy Bruggeman, practitioner; Report of the PWG, p.135).

³⁵ The concept *decriminalisation* is often confused with the concept *depenalisation*. In this study, we follow Room, et al. (2010) by using the term *decriminalisation* to refer to 'prohibition with civil penalties'. Thus, criminal penalties are removed from the law while administrative penalties are still possible. *Depenalisation* involves maintenance of criminal penalties in the criminal law, yet removing or shortening the periods of incarceration, or reducing fine amounts, as possible sanctions. *Legalisation* means that the specified forms of behaviour are no longer offences dealt with by (criminal or civil) law, yet it is often still governed by different tools of regulatory law.

"I plea for a depenalisation of the use of soft drugs. If soft drugs are used in group, the users can be imposed with a prison sentence. Prison only makes it worse, they will get addicted [...] Prison sentences have to be abolished." (Mr. Geert Vanhalle, practitioner; Report of the PWG, p. 519).

In his elucidation, Minister of Justice Stefaan De Clerck (CVP, Flemish Christian Democrats) supported the prohibition of cannabis possession as a kind of threshold. A revision of the 1993 Ministerial Letter - which did not make any distinction between types of drugs - or, ideally, a law reform was, however, supported by the Minister of Justice Stefaan De Clerck (CVP, Flemish Christian Democrats).³⁶ The Minister of Internal Affairs Johan Vande Lanotte (SP, Flemish Socialists) perceived the drug problem as a problem of social inequality. He assumed that the Government always has the responsibility to offer opportunities to youngsters. In pursuing this, it was argued that a criminal approach had to be retained (as part of prevention and giving the correct signal). Accordingly, differentiation in the prosecution of cannabis possession was recommended by the Minister (a harsh approach of drug traffic and avoiding a criminal reaction against drug users). It was noted that a risk assessment should not only look at the type of product, but also at the personality of the user, the environment, the amount and frequency of use and the potency of the product.

Finally, some scientists and practitioners recommended the *decriminalisation* or *legalisation* of cannabis possession. The representatives of the interest groups claimed to be in favour of decriminalisation as well (based on their personal experiences and some vague references to scientific knowledge). For example, on 21 January 1997, Mr. Michel Hancisse (interest group *Radical Anti-Prohibitionist Coordination* (CORA)) submitted a petition for a plea for the decriminalisation of the possession and use of drugs. Remarkably, the Flemish Minister of Health Wivina Demeester-Demeyer (CVP, Flemish Christian Democrats) - while recommending a multidisciplinary approach and pleading against a tolerance policy like in the Netherlands (because of the link with hard drugs) - was in favour of a decriminalisation as this makes it possible for drug users to talk about problems.

"Decriminalisation does not mean that cannabis users will start to use other drugs. This is not supported by our data." (Prof. Dr. Peter Cohen, scientist; Report of the PWG, p.175).

"Removing the illegal status of cannabis, giving it an acceptable social dimension, should be the bold - road that our policy-makers have to take." (Mr. Rene Bosmans, practitioner; Report of the PWG, p.345).

³⁶ A new drug law was not realised in the 1995-1999 legislature but instead a new Ministerial Circular was published in May 1998 (which replaced the 1993 Ministerial Circular Letter).

"The Minister pleads for an integral and integrated approach of the problem together with a decriminalisation of experimental and soft drug use." (Mrs. Wivina Demeester-Demeyer, Flemish Minister of Health, CVP, Flemish Christian Democrats; Report of the PWG, p.792).

3.2. Contribution of scientific knowledge to the hearings

3.2.1. Deconstructing scientific discourse: truth?

Scientists' discourses in the PWG were largely fed by (foreign) epidemiological data and insights based on the most visible groups and indirect indicators. In presenting their knowledge in the Parliamentary Working Group on drugs, scientists typically adopted a rather technocratic objectivist manner: by means of numbers/statistics. It referred to what the police or justice system discovered or/and those groups who are known by treatment: crime statistics, conviction statistics, emergency unit statistics, number of alcohol and drug controls, etc. This means that the focus was on a disproportionately large number of serious and chronic cases. Accordingly, a lot of attention was paid to risks and causality. Next to *epidemiological studies*, some Belgian *policy-funded studies* also provided data about the nature and extent of drug use in Belgium. For example, the ongoing inventory of the drug research in Belgium and its neighboring countries like the Netherlands, Great Britain and France (Van Daele, et al., 1996), the study of Prof. Dr. Brice De Ruyver (*Poverty, drug use and criminality*; 1992) and the research project of Mrs. Conny Vercaigne and Prof. Dr. Lode Walgrave (*Youth between (sub)cultures and business: a study focusing on discotheques, house music and nuisance*; 1995) were frequently mentioned in the PWG and were used to describe the percentages of cannabis and XTC use and drug-related crimes. Finally, which scientific knowledge was presented during the hearings also depended on cultural and linguistic differences. For instance, French-speaking scientists more often referred to scientific knowledge produced and advocated by French-speaking scientists from Belgium or abroad.

In line with Jasanoff (1990) and Boland (2008), we observed that scientists presented their knowledge as 'speaking truth to power'. For example, we found that scientists mostly used prepositional assumptions (i.e. assumptions about what is or can be or will be the case; 'truth') and active verbs without any references. For instance, 'cannabis use leads to...', 'it is determined that 90% of the drug addicts...', 'the prevalence of poly drug use has increased', 'the war against drugs caused a lot of suffering', '50% of youth has experimented with drugs'. This presentation does not allow of course any independent judging of the quality and scope of the research used. Practitioners added nuance to their own knowledge/experience in making a distinction between personal experiences with the target groups (e.g. parents, addicts) or other practitioners (e.g. police officers, treatment experts) and scientific research. They explicitly stated that they do not have the goal of a scientific study or analysis. Practitioners often presented themselves as taking

into account (international) literature when elaborating their ideas. By means of a **bibliography** or a lot of **footnotes**, they tried to speak *truth*, just as much as scientists. In other words, scientific knowledge was seen as something more accurate and authoritative. A particular factual claim of a scientist was often regarded as true because it has been put forward by those who are considered competent to speak the 'truth'.

"I do not pretend to provide a scientific analysis. I'll try to prove everything on the basis of facts, numbers and especially daily contacts with prisoners and staff members." (Mr. Jef Vanwingh, practitioner; Report of the PWG, p.309).

3.2.2. Misuse of scientific knowledge

In their efforts to possess and speak *truth*, we found that we must be cautious regarding the knowledge some scientists brought into policy debates. Although scientists regularly expressed their awareness of the importance of a careful presentation and interpretation of scientific results (especially numbers)³⁷, some seem to jeopardise their credibility. Uggen and Inderbitzin (2010) called scientists, criminologists in particular, flying around as consultants and experts while losing sight of their scientific research base, *airport scientists*. During the hearings, some scientists **neglected the main principles of scientific research** by not taking into account, for example accurate methodological designs or unambiguous terminologies. Terminological impurities (e.g. a comparison of percentage users of hashish and percentage of users of cannabis, a comparison of drug prevalence rates while neglecting that some rates only focused on cannabis use and others on the use of cannabis, ecstasy and cocaine) and neglecting statistical significance in studying the relationship between cannabis use and truancy were two such problems. In another example, studies using different methodologies were compared. In particular, a scientist compared an opinion poll of a newspaper to a population survey among youth in order to get comparable and valuable results. He mentioned that *'a school population survey can be compared to the opinion survey carried out by the newspaper Le Soir in 1980 as this research was set up in a similar method'*. Another scientist stated: *'These numbers are the result of a methodological approach that is not really satisfactory from a scientific point of view. Nevertheless, they show that the use of multiple illicit substances has increased'*. Juggling numbers or scientific results was also found. Scientific results were distorted in several ways, which were often very subtle: e.g. making blunt interpretations, false generalisations and causalities. For instance, one scientist made a false interpretation regarding poly drug use. In particular, he mentioned that *'90% of drug addicts uses several substances'* while the original research concluded that *'90% of the daily heroin*

³⁷ They criticised official numbers as they tell more about the activities of the service instead of real increase/decrease. Population surveys (i.e. opinion polls and surveys among the general population and school populations) were criticised due to their limited methodological quality and/or comparability.

users are poly drug users'. Another scientist replied to the questions of the members of the PWG 'We found that truant youth use twice as many illegal drugs' while he originally stated in the hearing that 'non statistical significant numbers showed that 28,5% of truant youth ever used cannabis'.

We also found that, in attempting to support their case and demonstrate their credibility, scientific results were distorted by practitioners in several ways. For instance, a practitioner stated that

"Surveys show that 20% of young students aged between 12 and 18 in the Brussels Region use illegal drugs. Assuming that most users are adults between 18 and 45 years old, it is therefore appropriate to double 20% to 40%. In this way one may conclude that at least 40% of the population of the Brussels Region smoke cannabis." (Mr. Philippe Bastin, practitioner; Report of the PWG, p.426).

Sometimes prevalence data was presented in another way to how it was originally found. For instance, a practitioner heard in the PWG, Mr. Jef Vanwingh, stated that

"As drug users constituted 1 to 1.5% of the total population of prisoners in the beginning of the 1970s, their share increased up to 40 and 50% (original source mentioned: up to 40%), depending on the sources (my emphasis)." (Mr. Jef Vanwingh, practitioner; Report of the PWG, p.307).

3.3. Other factors at play in the hearings

3.3.1. Political context

Members of the PWG regularly asked the experts about their perception on the 'best' policy option or the option leading to the 'best results'. The 'right' policy option was conceived by the members of the PWG as the option that could deal the most with their concerns about prevalence rates, overdoses, drug-related criminality and overcrowded prisons. Within this discourse, attention was often given to the causal relationships between e.g. drug use and criminality, drug use and ethnic minorities, etc. Representatives of the Government also attached importance to (foreign) scientific knowledge. Generally, references were made to (criminal) statistics and Belgian policy-funded studies or publications of Belgian scientists (for instance, De Ruyver, et al., 1992; Vercaigne and Walgrave, 1995). Also references to foreign studies (especially regarding the Dutch situation), the application of international conventions or the consequences of prohibition were made. The focus of policy-makers is mostly on **numbers or statistics**, (wrongly) assuming that this type of scientific knowledge always represents objectivity and authoritative, truth-producing data. For instance, the Federal Minister of Justice Stefaan De Clerck (CVP, Flem-

ish Christian Democrats) mentioned that *“numbers may illustrate the importance of a phenomenon”* (p.798). The importance of numbers was also mentioned in the interviews:

“Numbers are the only objective source which can provide data for policy-makers.” (Respondent 51, policy-maker).

“Numbers are religious; if you present these, you are telling the truth regardless whether these numbers are correct.” (Respondent 11, practitioner).

“Exact science, numbers and statistics, are science. Sociology, human rights, law, etc. are no science in my opinion.” (Respondent 14, policy-maker).

Whereas scientists may be familiar with the conditions of scientific uncertainty (e.g. in the PWG, the scientific uncertainty about the link between cannabis and dependence was stressed by Prof. Dr. Alfred Noirfalise), members of the PWG sought certainty and deterministic solutions. Even though scientific knowledge was considered as authoritative, it was also criticised in the PWG as being weak, contradictory, too late and still evolving, and thus producing uncertainty (which is supportive of the ‘two communities thesis’ and its barriers between two different worlds; Caplan, 1979). Additionally, interviewees also stressed the lack of neutrality of scientific knowledge. They pointed to the inherent (technical) limitations of scientific studies and the existence of deceptive studies. It became clear that some policy-makers had difficulties in handling the contradictions in research or the lack of adequate (Belgian) data.

“There is a large spectrum of viewpoints within scientific research [...] Scientific knowledge is important but each scientist has his own opinion. Scientists often have the presumption to think they know best.” (Respondent 44, policy-maker).

“It is not because a professor supports an opinion that you automatically have to believe that the particular opinion is completely true.” (Respondent 10, policy-maker).

“Scientific research is not always available or methodologically correct. It also does not always allow us to answer questions clearly or to draw conclusions.” (Respondent 34, policy-maker).

As a result, in the PWG, representatives of the Government easily distorted some scientific arguments by criticising them as irrational or incorrect (a tactic of creating ‘flak’; evolutionary model; Stevens, 2007a; see Part I, Chapter 2). For instance, the Minister of Internal Affairs Johan Vande Lanotte (SP, Flemish Socialists) stated that *“There is no rational argument to determine the line between innocent and dangerous drug use”* (p.827). Similarly, even though several scientists underlined the disproof of the stepping stone theory in the hearings, the Minister of Justice

Stefaan De Clerck (CVP, Flemish Christian Democrats) noted: *“It is a real danger that youngsters would start with other illegal drugs, if cannabis became freely available”* (Report of the PWG, p.795). Mr. Kris Van Limbergen, the advisor of the Cabinet of the Minister of Internal Affairs, also ignoring the scientific disproof of this theory, argued that *“recreational drugs may be very tempting as so-called step-up drugs”* (Report of the PWG, p.668).

Furthermore, the contribution of the members/representatives of the Government in the PWG influenced the final direction of the policy debate. Members of the PWG reported that they always had to take into account their *party policy* when asking questions to the experts involved. It is important to note that the hearings of the members/representatives of the Government *as such* can be seen as highly influential towards the (final) direction of the debate. Those particular hearings dictated the opinions and direction of the members of the PWG (who were of the same political color). Party policies were carefully considered and weighed during the hearings of the PWG (and following political debate). Several respondents underlined the limited power of the Parliament (in comparison with the Government) in directing or developing policy. They explained:

“Eventually, the party had to take a position which is supported by its party members [...] An expert is rather ‘independent’, we always have to take into account our political background.” (Respondent 35, policy-maker).

“There was a lot of interaction between MPs and members of the Cabinet. Yes, the Ministers more or less determined our speech.” (Respondent 7, policy-maker).

Exemplary too is the discussion about the contribution of Mr. Lucien Nouwynck, the advisor of the Minister of Justice Stefaan De Clerck (CVP, Flemish Christian Democrats). Based on the findings of the French Commission Henrion³⁸, he provided a more moderate view and pleaded for a pilot project which would implement a controlled regulation for a short time period. His progressive perspective was rather remarkable, taking into account his membership of the rather conservative Christian Democrats and the 1995 Governmental Declaration. This position was not at all appreciated by the Flemish Christian Democrats (and hampered the relationship with the Minister):

“The Flemish Christian Democrats were furious, really furious about his intervention because he was the representative of the Minister of Justice at that time.” (Respondent 25, policy-maker).

³⁸ In 1994, the Minister of state for social, health and urban affairs, Mrs. Simone Veil, appointed a Commission, headed by Robert Henrion, to examine and reconsider the French drug policy (Boekhout van Solinge, 1996; Nathanson, 2009).

In their discourse in the PWG, policy-makers made use of several *political tactics* to attain greater authority, or a higher position or to favour certain electorates. For instance, members of the Government (consciously) made incorrect interpretations in order to find support for their opinion in the PWG. Cannabis is not legalised in the Netherlands, in contrast to what was frequently stated. Minister of Internal Affairs Johan Vande Lanotte argued: “*In the Netherlands, they make complaints about the consequences of hasty legalisation*” (p.853). The misuse of terminology has fuelled clear misconceptions about the reform. An interviewee described that:

“A differentiation in the political discourse is not simple. Differentiation among academic discussions is not at all absorbed in policy debates.” (Respondent 22, policy-maker).

Finally, Belgian policy-makers are also responsible for the *international* aspects of their policy competences. Given the elucidation of the international UN and European framework in the PWG by several scientists, the significance of some (alternative) approaches of scientists, practitioners or representatives of interest groups was rather limited. For instance, right from the beginning, the argument of a thorough liberalisation of cannabis policy was refuted as this was prohibited by several international drug control treaties, strongly supported by the international community (see also above, §3.1.).

3.3.2. Media coverage

Even though media coverage ignited the political debate, media interest decreased slightly during the hearings in the PWG. A journalist explained:

“I wanted to attend all the hearings but it was not possible. At that time, we had to write two or three articles each day. A devastating pressure to achieve.” (Respondent 8, journalist).

Several excerpts of the hearings were provided by Flemish as well as French-speaking newspapers. We found some differences in the type of information presented. The Flemish newspapers detailed the *epidemiological data* put forward by Prof. Dr. Joris Casselman and Prof. Dr. G. Reingerster-Hanneuse as well as the scientific research regarding the European drug policy conducted and presented by Prof. Dr. Brice De Ruyver. The French-speaking newspapers mostly reported about the hearings of the Federal Ministers (e.g. Federal Minister of Justice Stefaan De Clerck (CVP) and Federal Minister of Internal Affairs Johan Vande Lanotte (SP)) and the opinion of several French-speaking practitioners, like Mr. Christian Figiel (Neuropsychiatrist and Director Centre L’Alfa, Centrum Geestelijke Gezondheidszorg) and Mr. Jacques Van Russelt (Director FEDITO, Fédération wallonne des institutions pour toxicomanes). Also *French-speaking* ‘external expert’ Claude Stoclet (before he was sacked by the PWG) and instigator MP Patrick Moriau (also called

'Monsieur Drogue' in the French-speaking media) repeatedly reported in the media on their participation and experiences. The French-speaking newspapers clearly applied another (more *progressive*) attitude towards the drug phenomenon. MPs and experts, presented in these newspapers, rejected the rather conservative statements of Federal Minister of Justice Stefaan De Clerck (CVP, Flemish Christian Democrats) and Federal Minister of Interior Affairs Johan Vande Lanotte (SP, Flemish Socialists). A newspaper clearly worked as a powerful selection device in determining what is scientific knowledge, and who are the authorised agents of knowledge (Carvalho, 2007; Tieberghien, 2014a). Interviewees pointed to the different political landscape (which was largely linked with the popularity of the rather progressive party PS in the Walloon region and the rather conservative party CVP in Flanders) as well as the language difference.

"That is the way it works. As a Flemish journalist, you will cite Flemish experts instead of French-speaking experts. This situation led to an enlarging gap between both parts. That is a reflex of journalists. If you can choose between a Flemish and French-speaking expert, you pick the Flemish one because it is more linked with your audience." (Respondent 8, journalist).

Alongside the selective representations of the hearings, media also informed the public (and thus policy-makers) in a rather 'coloured' way. For instance, media included naked statements which fell short because they provided no contextual elements: although numbers were presented in the PWG, it was only stated in the press that cannabis was used the most widely. Furthermore, drugs were very often spoken about in terms of 'soft drugs' versus 'hard drugs', and often the general concept 'drugs' was used to refer to one drug like cannabis. In addition, concepts like 'legalisation', 'depenalisation', 'decriminalisation' and 'tolerance policy' were regularly used without differentiating between each of them. Equally, media did not make a distinction between the use and possession of cannabis, in spite of the important juridical difference: in Belgium, drug possession is prohibited while drug use is not. A journalist explained:

"Newspapers, media, are more in favour of explicit opinions so, as a result, the debate is narrowed: is it allowed or not? Can my son smoke joints? Can it be sold?" (Respondent 45, journalist).

Nevertheless, in the hearings of the PWG, MPs and representatives of the Government often relied on the media coverage. These framings seemed to be an important resource in supporting assumptions. For instance, Federal Minister of Internal Affairs Johan Vande Lanotte (SP, Flemish Socialists) used a newspaper article from Mr. Pino Arlacchi (former Director-General of the United Nations Office, current member of the European Parliament) in the Italian newspaper *L'Espresso* as a support for his statements about the drug policy in the United States. Flemish Minister of Health Policy Wivina Demeester-De Meyer acted similarly.

"Drugs in the United States (the end of fatalism). The following data are to a large extent derived from the article of the rather famous 'Pino Arlacchi' in 'L'espresso' of 16 April 1996 (my emphasis)." (Mr. Johan Vande Lanotte, Federal Minister of Internal Affairs, SP, Flemish Socialists; Report of the PWG, p.815).

"Ms Demeester-De Meyer declares that the way the drug problem is shown in the media often goes together with a lot of sensation. For example, a daily newspaper recently published a brochure in which a direct plea was made for the legalisation of drugs. However, the Minister acknowledges that the arguments used for that purpose make her believe even more that legalisation is not a solution (my emphasis)." (Mrs. Wivina Demeester- De Meyer, Flemish Minister of Health Policy, CVP, Flemish Christian Democrats; Report of the PWG, p.791).

4. Report of the hearings

Together with the end of the activities (hearings as well as the working visits) of the PWG in June 1996, attention to the drug issue sharply decreased. The explosion of the **Dutroux paedophilia case** in August 1996 caused a great deal of feelings of insecurity among the Belgian people and changed the focus of the political and media debates (see also Chapter 3, §1.2.). Nevertheless, 'external experts' Prof. Dr. Brice De Ruyver and Mr. Claude Stoclet started their task of integrating the opinions and statements of the experts and members of the Government in a report and (in a second phase) to present a draft of the final conclusions and recommendations to the members of the PWG.

Rather quickly, a discussion was generated regarding the working document by Mr. Claude Stoclet. According to the French-speaking media, his draft was assessed too inadequate and too much in favour of the anti-prohibitionist approach. Similarly, some interviewees expressed that:

"He was too progressive and as such not acceptable for some of them. He failed in finding a consensus among the Flemish members." (Respondent 29, policy-maker).

A letter from MP Frans Lozie directed to the president of the PWG, Mr. Louis Van Velthoven, confirmed that the report of Mr. C. Stoclet got two unsatisfactory reviews. The report was considered too vague and inconcrete regarding the current state of the art and potential solutions (Letter of MP Frans Lozie (Flemish Green party AGALEV) regarding the working document of Mr. Stoclet, 6 december 1996). The document also contained a large (and rather progressive) focus on cannabis policy (prohibition versus anti-prohibition) while mainly holding back on other issues such as prevention and treatment (Working document on the PWG provided by Mr. Claude Stoclet, n.d.). In the end, 'external expert' Mr. Claude Stoclet was sacked and the task of reporting on the expert hearings was assigned solely to the other 'external expert' Prof. Dr. Brice

De Ruyver. Nevertheless, when looking at the final conclusions (see also below, §5), we found references to issues addressed by Mr. Claude Stoclet in his first draft. For instance, the notion of a *third way* was originally stated by Mr. Claude Stoclet in his first draft: “*We need to find a third way between security and a controlled liberty*” (*Working document on the PWG provided by Mr. Claude Stoclet, n.d.*).

The summarising report and its bibliography provided a clear and careful integration of most of the good practices and recommendations of the scientists, practitioners and members of the Government. The new frameworks for the understanding of the drug problem provided during the hearings clearly altered the language and the discourse. Generally, an integral and integrated perspective, taking into account prevention, care and repression, was adopted. The hearings generated a clear expression of the social and health discourse with the emergence and development of the harm reduction movement and the *ultimum remedium* philosophy instead of a strict security discourse: “*the working group believes that it is neither useful nor effective to apply a criminal procedure in case of violations of the drug law*” (p.1004).

Through the hearings of the PWG, scientific knowledge involved really *enlightened* the development of Belgian drug policy. In other words, scientific knowledge contributed to the percolation of (new) ideas and concepts and the development of a substantial body of knowledge. For instance, the policy-funded study of De Ruyver et al. (1992; *Poverty, drug use and criminality*) and the study of Vercaigne and Walgrave (1995; *Youth between (sub)cultures and business: a study focusing on discotheques, house music and nuisance*) both served as strong support for, respectively, the argument that (problematic) drug users in the criminal justice system had to be oriented more towards treatment, and the argument that prevention initiatives have to pay special attention to youth, smart drugs and the consequences of drug use for road safety.

The summarising report also addressed the debate on the criminalisation of cannabis possession. Clearly, scientific knowledge played a role. Supported by the framework of the international UN-conventions, the 1990 Schengen Convention, the (scientific) evaluations of the Dutch policy and various kinds of (academic) reports from abroad (mostly referring to the situation in France and the Netherlands, but also focusing on the *War on drugs* in the United States), it was argued that a differentiation and individualisation of the criminal intervention, taking into account the specific situation (cannabis versus other illegal drugs; experimenting, problematic use, personal use, dealing with profit), could help to increase the effectiveness and credibility of prevention initiatives and to decrease the number of prisoners arrested because of cannabis pos-

session for personal use. Accordingly, a *de facto depenalisation*³⁹ of the possession of cannabis for personal use was proposed.

However, if we perceive *use* as simply pointing to the names of and references used by the consulted practitioners and scientists, the bibliography of the summarising report displayed a lack of sensitivity to the views of *critical* contributors focusing on the largely unproblematic characteristic of drug use, the usefulness of self-control strategies or the *decriminalisation* of cannabis possession (e.g. Prof. Dr. Peter Cohen, scientist (domain sociology); Mr. Alain Morel, practitioner social/health; Mr. Peter Terreyn, third community; Mr. Jean Blankaert, third community; Mr. Lucien Nouwynck, advisor of Minister of Justice Stefaan De Clerck, CVP) or contributors who did not articulate their points of view (e.g. Yvan Ylieff, Federal Minister of Science Policy, PS, French-speaking Socialists; Karl-Heinz Lambertz, Minister of Youth, Media and Social Affairs of the German speaking Community, PS, French-speaking Socialists).

This finding fuels the debate about the role of an *observer-turned player* in the policy-making process (Loader and Sparks, 2011).⁴⁰ As this public role of a scientist seems by far a very effective means to advance *evidence-informed* drug policy-making, it clearly is a thin line between the role of a neutral/external expert and a policy-advocating expert. While we certainly agree that the draft of the final conclusions and recommendations (see below, §5) needed to provide a sufficient base for policy debate, we do think that the summarising report with the findings from the hearings had to retain autonomy/neutrality completely explicating the alternative, critical voices too. Several respondents tried to clarify why critical discourses (of e.g. *social movement theorists/activists*; Loader and Sparks, 2011) only succeeded in heating up the political climate and, accordingly, why the summarising report tended to offer and tailor advice in accordance with the preferences of the policy-makers (cfr. *evolutionary model*).

“Scientific research is not always usable for policy-makers. For instance, there were some critical voices [...] if there are too many differences in opinion with the leading policy-makers, it is difficult to play a role.” (Respondent 5, policy-maker).

³⁹ *Depenalisation* involves maintenance of criminal penalties in the criminal law, yet removing or shortening the periods of incarceration, or reducing fine amounts, as possible sanctions. An important distinction between different types of alternatives is the differentiation between *de facto* and *de jure*, or in other words, between changing the law that applies (*de jure*), or by modifying the way the law is used or applied in the various stages of the criminal justice system (*de facto*) (Room, et al., 2010).

⁴⁰ Loader and Sparks (2011) colloquially describe the role of an *observer-turned player* as an expert who is *getting his hands dirty*.

"Of course, this report is to a certain extent coloured. Political conclusions were already determined from the beginning. Some elements need to be stressed, others were rejected. It makes no sense to integrate findings that are supporting a totally different view than the view policy-makers want to end with [...] The expert has to take a neutral point of view [...] but some issues indeed have been left out." (Respondent 4, policy-maker).

"Policy-makers have followed the debates, they know the sensitivities and possibilities and, within this framework, the expert has to write a report [...] If the expert does the proper thing by including critical voices too, the political discussion is certainly hampered. It is his task to elucidate the political debate [...]" (Respondent 50, scientist).

5. Draft of final conclusions and recommendations discussed by the PWG

Mid-February 1997, 'external expert' Prof. Dr. Brice De Ruyver presented a draft of the final conclusions and recommendations aiming to find political support among the members of the PWG.⁴¹ While the hearings of the experts were public, the working group met behind closed doors. One of the respondents described:

"After the hearings, a report was produced and the final conclave started. The PWG met behind closed doors [...] From the morning until the evening, a debate took place. The debate was inspired by a draft of conclusions made by the professor." (Respondent 1, policy-maker).

Meeting behind closed doors was appreciated by MPs involved as this allowed a profound discussion instead of a mediatised discussion (given the rather strong link between media and the parliamentary process).

"It was a good thing that those meetings were not public because when the attendance of journalists is allowed, politics certainly would prevail." (Respondent 7, policy-maker).

5.1. Political struggle

In debating the final conclusions and recommendations, the **political context** clearly prevailed. The majority (Government Dehaene II) was composed of a Coalition between Christian Democrats and Socialists (CVP-PSC-SP-PS). The electoral power of the conservative Christian Democrats together with the viewpoint of Flemish Socialist party which was largely marked by individual (rather conservative) statements of Minister of Interior Affairs Johan Vande Lanotte (see

⁴¹ The presentation of the final draft took until mid-February 1997 as Prof. Dr. Brice De Ruyver was appointed as an expert in the Parliamentary Inquiry Commission Dutroux on 26 October 1996. The House of Representatives installed a Parliamentary Commission on 17 October 1996 to examine what had gone wrong with the Dutroux enquiry. After a 17-month questioning of police officers and examining of magistrates in public hearings, the Commission uncovered a lot of deficiencies and judicial flaws.

also his contribution to the PWG, §3.1.)⁴², made that the Flemish political scene represented a rather conservative approach. On the contrary, in the French-speaking part of Belgium, the (rather progressive) Socialists were the largest majority party. Eventually, this particular composition of the political scene (majority versus minority; Dutch-speaking part versus French-speaking part) played an influential role in the final parliamentary debate about conclusions and recommendations. In other words, debate over the objectives of Belgian drug policy was inherently political. Some respondents described this as follows:

"The draft became subject of discussion due to the characteristics of the political decision-making process [...] it is always a struggle about symbols and sensitivities of the political parties." (Respondent 29, policy-maker).

"The Flemish Christian Democrats (CVP) could not agree with certain elements (...) The draft of Prof. Dr. De Ruyver created a lot of discussions. I know that Flemish Christian Democrat Vandeurzen rejected some paragraphs (...) CVP was apprehensive about a too liberal direction." (Respondent 42, policy-maker).

Amendments on the draft of Prof. Dr. Brice De Ruyver concerned remarks with respect to grammatical changes as well as content. Inherent to the political context is the (even more) difficult discussion about the wording and formulations. For instance, some small phrasings about e.g. the installation of Houses of Justice, the definition and interpretation of prevention, the inefficiency of forced treatment, etc. were discussed and revised (CVP-Kamerfractie, 1997).

Remarks concerning content included the importance of developing a policy regarding legal drugs like medication, alcohol and tobacco (next to illegal drugs) and smart drugs, the continuity of prevention initiatives, the elaboration of the cooperation between justice and treatment services, etc. However, in line with the persistent⁴³ focus on cannabis, most political discussion was again centralised around the (formulation of the) criminal interventions on drug use and cannabis in particular. Initially, the report of Prof. Dr. Brice De Ruyver recommended a *de facto de-*

⁴² Minister Johan Vande Lanotte took a more conservative point of view in comparison with the rather progressive voices of the Flemish Socialists. Policy-making largely depends on individual policy-makers (their interest, education, research receptivity, ...). See also Weiss (1999) and Landry, Lamari and Amara (2003).

⁴³ A focus on cannabis was already elaborated from the beginning. Initially, the policy debate (and the installation of the PWG) was provoked by a statement in the media focusing on the criminalisation of cannabis (see also above, §1). Furthermore, several elements generated a continuation of this fixation on cannabis: it appeared to be the most commonly used illegal drug in the nineties, it was part of the discussion at the international level, it provoked a highly emotional public and media debate (with an increasing power of interest groups), it was part of many political/cultural discussions between different political parties (who were very concerned with how their electorate would perceive their position), it became a topic on the agenda of the fourth conference 'Drug policy 2000' (1996) and a need for a change was underlined during the hearings of the PWG (e.g. the 1993 Ministerial Circular proved to be not efficient at all).

penalisation of cannabis possession for personal use by means of issuing a new Ministerial Circular Letter (in substitution for the 1993 Ministerial Circular Letter of Minister of Justice Melchior Wathelet (PSC, French-speaking Christian Democrats)). However, the original message was weakened as a result of the discussion among the members of the PWG. The concept *de facto depenalisation* was removed and the final conclusion only mentioned the *lowest prosecution priority for cannabis possession for personal use*, unless it causes public nuisance or in case of a problematic user. Members of the CVP-PSC (Flemish and French-speaking Christian Democrats) took the lead in deleting the ambiguous phrasing in order to avoid discussion about the (anti-)prohibition of drug use (within the framework of the international conventions) as well as any comparisons with the criticised Dutch drug policy of tolerance.

“The elimination of depenalisation was supported by the CVP because of its connection with the concept of legalisation. Of course, both concepts mean different things but their demand was related to communication issues and public opinion.” (Respondent 7, policy-maker).

Within this framework, members of the CVP-PSC (Flemish and French-speaking Christian Democrats) suggested including the concept and definition of *problematic use*⁴⁴. Accordingly, the final conclusions and recommendations defined problematic use as *“the problematic nature of use depends on the drug and the nature of use”* (p. 1004). Another recurring issue during the development of Belgian drug policy relates to the determination of number of grams for personal cannabis use. At that time, Flemish and French-speaking Christian Democrats refused to determine a quantity for personal use (even though Prof. Dr. Brice De Ruyver initially argued that *“obviously, it is necessary to determine what amount can be considered as quantity for personal use”* (p.19, De Ruyver, 1997). A respondent clarified:

“The number of grams... CVP refused to determine the number of grams. If one decided to limit the use to five grams, this should mean that four grams is not harmful. CVP rejected any quantification.” (Respondent 42, policy-maker).

Scientific knowledge (mainly including epidemiological data and policy-funded studies) sometimes was used as a resource in this political struggle. However, it was prone to political/symbolic utilisation. In particular, interviewees underlined that the broad spectrum of views involved in the PWG permitted policy-makers to *select* or misuse studies or expertise for their own purposes.

⁴⁴ A concept which was discussed heavily in the following years because of its lack of clear definition, even by the Christian Democrats themselves when they ended up in the opposition after 1999.

"I think it is difficult to find a direct connection between science and policy. MPs do listen to those experts but rather selectively. However, in general, those hearings had an important influence on the general direction of the debate [...] Contradictions are not heard depending on your point of view. You listen selectively [...] you search for the scientist who supports your arguments. Yes, expertise is often used in a tactical, selective way." (Respondent 7, policy-maker).

"Many points of view were presented in those hearings: from the international context to the prevention policy. These elements really informed the drug policy debate in working towards an integrated drug policy with different pillars such as repression, treatment and prevention [...] However, the huge amount of documentation and the different points of view among selected experts also determined that each of the members heard what they wanted to hear." (Respondent 40, policy-maker).

Furthermore, we can say with certainty that scientific knowledge competed with other sources of information in this struggle. The expertise of **practitioners** was very influential because of their practical *hands-on* experience and close ties with MPs. The fact that scientific knowledge is not focused on the practical day-to-day issues but is considered abstract and fragmented (not multidisciplinary) might explain the use of knowledge produced by other groups (see also MacGregor, 2010). It was clearly assumed that huge gaps in scientific knowledge remain and that practitioners may have a better sense of crucial real-world information (and practice-based research)⁴⁵ that scientists do not fully appreciate.

"Policy-makers attach more importance to a report of practitioners than a scientific report. They easily argue that these viewpoints are just developed by unworldly scientists. Scientists are often labelled as people working in an ivory tower, which makes it easier to take scientists less seriously." (Respondent 29, policy-maker).

This political struggle was indirectly aggravated by **media coverage** at that time. In particular, Belgian cannabis policy was described as a tolerance policy, making an incorrect comparison with the Dutch cannabis policy (*coffee-shop* model). This media coverage provoked the reactions of several politicians (e.g. Louis Tobback, SP, Flemish Socialists) and MPs (e.g. Jef Valkeniers, VLD (Flemish Liberals); Dany Vandenbossche, SP (Flemish Socialists); Anne-mie Vandecasteele, VU (Flemish Nationalists)). Members of the Christian Democrats (e.g. MP Jo Vandeurzen, CVP, Flemish Christian Democrats) reacted furiously in the Flemish media against any tolerance policy and the terminology *de facto* *depenalisation* as they were very concerned with how their electorate (and the public opinion in general) would perceive and respond to this direction (even

⁴⁵ This type of research does not meet the traditional scientific research standards but rather standards related to its usefulness for practitioners.

though there were no elections)⁴⁶. Likewise, the *power* of the media can be blamed because of its assumption of a *5 grams limit* in line with the Dutch policy.

"In order to have some sort of policy alignment with the Dutch policy, the five grams limit could be used as a criterion. The last Dutch drug note of September 1995 allows the same amount." (19 February 1997, Flemish newspaper De Morgen).

A smaller response came from **interest groups**. A demonstration was announced by interest group *Association against the prohibition* together with many French-speaking treatment centres (also supported by MPs Patrick Moriau (PS, French-speaking Socialists) and Vincent Decroly (Ecolo, French-speaking Greens) as well as by French-speaking scientists, practitioners, etc. in order to advance the drugs debate and to plead in favour of a legalisation of cannabis. It became clear that interest groups may be perceived as rather isolated (and local) initiatives. There never appeared to be mutual connections between Flemish and French-speaking interest groups even if they were like-minded (e.g. *BCCO* and *Association against the prohibition*). A limited (policy) power of interest groups may be one of the results. Several respondents explained that even though interest groups were not decisive in the policy-making process, public debates obviously influenced the arguments taken up in the debates of the PWG (especially by progressive political voices).

"If interest groups take some action by a public demonstration, you are touched. You listen to these representatives as they have public and media attention. As you know, a problem only exists when media coverage is generated." (Respondent 35, policy-maker).

5.2. Final conclusions and recommendations

The final conclusions and recommendations of the PWG reflected how the thinking about the drug phenomenon has evolved. The compromise among most parties⁴⁷ can be seen as an outcome of a powerful *discursive struggle* between social and public health concerns and of law enforcement considerations, and international obligations concerning control. On the one hand, arguments were related to concerns about the health of youth, the stepping-stone theory and the compliance with the Conventions of the United Nations (1961-1971-1988) and the 1990 Con-

⁴⁶ The next elections were held in 1999.

⁴⁷ Nine members agreed and two withheld their support for these final conclusions and recommendations. Motivations of both of these members of the PWG concerned the recommendations regarding the substitution of methadone, the usefulness of compulsory treatment and the lowest prosecution priority for cannabis and its future direction (i.e. member of *Vlaams Blok* (Flemish extreme right party) argued in favour of total prohibition, the member of *AGALEV* (Flemish Greens) did plead for more steps in the direction of legalisation, regulated by the Government). As will become clear below, topics like methadone and cannabis prosecution policy will also be part of the discussion in the following phases.

vention of Schengen. On the other hand, it was commonly argued that prohibition leads to stigmatisation and is counterproductive to public health and well-being. Eventually, the decision to develop a *normalisation policy*⁴⁸, a so-called *third way* between prohibition and anti-prohibition, was representative of the compromise. The PWG marked a trend towards the emergence and the development of drug use as an issue of public health rather than of criminal justice (which included an important formalisation of the change in discourse raised by the 1995 Federal Action Plan Toxicomania-Drugs). Prevention had to be the first goal and a criminal approach towards drug users was supported by a so-called *ultimum remedium* philosophy. This approach was a more rational and human alternative to the former repressive *War on drugs* approach.

As one of its main conclusions and recommendations, the PWG set out some guidelines for an *integral and integrated drug policy* as fragmentation of powers between the Federal, community and regional, provincial and local levels required both vertical and a horizontal policy coordination (which is the precursor of the 2002 cooperation agreement between the Federal Government and the federate entities and the establishment of the General Drugs Policy Cell; see also below).

Concerning *epidemiology and evaluation*, the need for quantitative and qualitative studies among the general population and among special and at risk populations was re-emphasised.⁴⁹ The PWG also recommended a better use of the available epidemiological studies. Evaluation of implemented measures (e.g. treatment methods, health care institutions, cares circuits and prevention techniques) was also recommended.

The recommendations regarding *prevention* focused on the reduction of drug use and the decrease of the number of drug users by means of structural and person-oriented prevention. They paid special attention to youth, psychoactive medicines, smart drugs and the consequences of drug use for road safety. The final conclusions of the PWG also emphasised the need for a professional statute for prevention workers. As prevention workers are employed at several levels, also some form of coordination was recommended.

Moreover, according to the final conclusions and recommendations of the PWG, the *provision of care* to drug users needed to be customised. For this purpose, they recommended the extension

⁴⁸ A policy where the drug phenomenon is considered to be a permanent social reality (*Parl.St. Kamer, 1996-1997, 1062/3, p.992*).

⁴⁹ The need to extend scientific research such as epidemiological studies and evaluations (e.g. evaluation of the medical-social treatment centres for drug users) was already stressed in the Federal Action Plan Toxicomania-Drugs (ten-point plan) (1995).

and development of good practices ranging from low-threshold facilities to therapeutic programs. Besides, these facilities needed to collaborate, they had to be coordinated and integrated in the existing network of facilities and had to be equipped with a uniform registration system. Other related elements were the promotion of the cooperation between justice and treatment and the stimulation of harm reduction initiatives other than substitution treatment.

The main issue of *repression* in these recommendations was the fight against illegal drug production and traffic. Supported by the so-called *ultimum remedium* philosophy, problematic drug users in the criminal justice system had to be oriented more towards treatment (e.g. alternative measures must be stimulated). Measures to combat the use of drugs in prison also had to be instituted. For instance, the PWG agreed that the organisation of substitution treatments for addicted prisoners and the creation of drug free units in prison needed to be elaborated. The final conclusions and recommendations of the PWG also supported the distinction between cannabis and other illegal drugs by giving the *lowest prosecution priority* for the possession of cannabis for personal use, unless it causes public nuisance or in case of a problematic user.

6. Aftermath of the PWG: plenary meeting

On 5 June 1997, the PWG reported its final conclusions and recommendations to the Chamber of Representatives (Verslag namens de Parlementaire Werkgroep belast met het bestuderen van de drugproblematiek, *Parl.St.* Kamer, 1996-1997, 1062/1-3). As a result, a plenary meeting was organised on 24 June 1997 (*Hand.* Kamer 1996-1997, 24 juni 1997, 175). In this plenary meeting, each member of the Chamber (majority as well as opposition) had the opportunity to ask questions and make some remarks about the final conclusions and recommendations of the PWG. Members of the PWG also had the opportunity to discuss their vote. Even though MPs from the opposition parties (like Vlaams Blok and AGALEV/Ecolo) took the opportunity in the plenary meeting to stress once again why they withheld their support⁵⁰, the real policy power of this parliamentary debate remained limited. The importance of the multidimensionality of the drug

⁵⁰ Both the Greens (AGALEV-Ecolo) and the Flemish extreme right party Vlaams Blok submitted a motion. The greens (AGALEV-Ecolo) submitted a ten-point reasoned motion in order to plea in favour of a more liberal cannabis policy (e.g. with a controlled distribution of the government), a reinforcement of the international struggle against drugs production and traffic and an integration of drug policy in other policy domains (e.g. education, culture,..). In his reasoned motion, Mr. Filip De Man (Vlaams Blok, Flemish extreme right party) pointed to his aversion to methadone treatment and to the negative consequences of a more liberal cannabis policy. He argued that a liberalisation of cannabis will lead to more (problematic) users, that teenagers buying and using drugs will become younger, that a liberalisation will lead to an increase of traffic victims, that the large majority of our citizens is against legalisation, depenalisation or decriminalisation, and that a liberalisation is against international obligations, etc.

phenomenon requiring an integrated and integral approach was largely supported by the majority of the MPs in the PWG.

Accordingly, a poor turnout in the plenary meeting resulted in a discussion between members of the PWG.⁵¹ Only 3 additional people attended the meeting: Mr. Michel Moock (PS, French-speaking Socialists), Mrs. Martine Schüttringer (Ecolo, French-speaking Greens) and Federal Minister of Public Health and Pensions Marcel Colla (SP, Flemish Socialists). After an introduction to the main conclusions and recommendations of the PWG, several members took the opportunity to ask questions and make some remarks. The debate ended with a short contribution of Minister of Justice Stefaan De Clerck (CVP, Flemish Christian Democrats) stressing his aim to further elaborate the conclusions and recommendations of the PWG regarding judicial matters (which would, among other things, result in a new Ministerial Circular in 1998; see below, Chapter 3, §2).

7. Conclusion

The Parliamentary Working Group on drugs can be perceived as the **first milestone** in the development of Belgian drug policy. It was the first time the drug phenomenon was studied seriously by policy-makers. Priority was given to a systematic approach with a proper assessment of existing and new alternatives. The PWG aimed at translating the needs and aspirations as well as good practices discussed by (inter)national experts (i.e. scientists, practitioners, representatives of interest groups, representatives of the Government) into useful policy recommendations. Next to topics such as drug epidemiology, prescription and substitution of methadone and/or heroin, prison policy, international drug production and traffic, a large part of the discursive struggle between social and public health issues and law enforcement concerns and international obligations concerning control considered the legitimacy of the criminalisation of drugs. Eventually, the PWG led to an agreement among most parties about the development of an integral and integrated approach, where multiple and different actors (prevention, care, repression) need to integrate and work together. It was for the first time that it was formally stated that the drug problem had to be perceived as a complex, multidimensional phenomenon that covers various aspects of life. The final conclusions and recommendations of the PWG expressed that preven-

⁵¹ Many members of the PWG attended the plenary meeting: Mr. Louis Vanvelthoven (SP, Flemish socialists), Mr. Maurice Minne (PS, French-speaking socialists), Mr. Jo Vandeurzen (CVP, Flemish Christian Democrats), Mr. Jan Van Erps, Mrs. Ingrid Van Kessel (CVP, Flemish Christian Democrats), Mr. Willy Cortois (VLD, Flemish liberals), Mr. Jef Valkeniers (VLD, Flemish liberals), Mr. Danny Vandebossche (SP, Flemish socialists), Mr. Daniel Bacquelaîne (PRL-FDF, French-speaking liberals), Mr. Jacques Lefevre (PSC, French-speaking Christian Democrats), Mr. Filip De Man (Vlaams Blok, Flemish extreme right party), Mr. Frans Lozie (AGALEV/Ecolo), Mrs. Anne-mie Vandecasteele (VU, Flemish nationalists) and Mr. Vincent Decroly (AGALEV, Flemish Greens). Also Minister of Justice Stefaan De Clerck (CVP, Christian Democrats) joined the plenary debate.

tion had to be the first goal and a criminal approach towards drug users was supported by the so-called *ultimum remedium* philosophy.

This episode in the development of Belgian drug policy has shown how scientific knowledge contributed to a formal advisory structure at the parliamentary level. Through the PWG, it became clear how scientists (so-called *scientific experts* and *policy advisors*) managed the relationship between their academic activities and policy-making. While scientific drug research was still rather scarce in Belgium, **scientists' discourses** in the PWG were largely fed by data (numbers and statistics) derived from (foreign) epidemiological and policy-funded studies. Scientists were *speaking truth to power* by using prepositional assumptions (i.e. assumptions about what is or can be or will be the case; truth) and active verbs without any references. However, we found that we must be cautious regarding the knowledge that scientists brought into policy debates. A nuanced account of the nature of scientific knowledge is necessary (i.e. *processual model*). Several forms of misuse of science by scientists were distinguished during the hearings (e.g. using ambiguous terminologies or ignoring statistical significance). As participating in a formal advisory structure allow scientists to control which message is provided and how it is absorbed in the political setting, it is important that scientists involved in the policy-making process take the responsibility of providing correct information and to be aware of becoming so-called *airport scientists* who are flying around as consultants while losing sight of their scientific research base (Uggen and Inderbitzin, 2010). If scientists misrepresent their expertise they are involved in, there is less hope for well-informed coverage in the policy-making process.

Policy-makers attached importance to policy-funded studies or (foreign) academic research giving a quantified view on the drug phenomenon (numbers or statistics) assuming that scientific knowledge represents authoritative, truth-producing data. In this context, scientific knowledge contributed to the PWG through **different modalities**. The new frameworks for the understanding of the drug problem provided by scientists (and practitioners as well) clearly altered the discourse in the drug policy-making process. In other words, scientific knowledge *enlightened* the development of Belgian drug policy: it contributed to the percolation of common ideas and concepts (e.g. related to the prevention projects towards youth or related to the orientation of (problematic) drug users in the criminal justice system towards treatment) and the development of a substantial body of knowledge. An important role was played by an *observer-turned player*, a scientist who wrote the summarising report of the hearings as well as prepared the draft of the final conclusions and recommendations. Such a public role is by far the most effective means of advancing an *evidence-informed* drug policy, but also raises questions about the thin line between the role of a neutral/external expert and a policy-advocating expert. The 'ex-

ternal expert' could not retain his autonomy/neutrality completely: in order to provide a sufficient base for policy debate, the summarising report with the findings from the hearings tended to offer and tailor advice in accordance with the preferences of the policy-makers (cfr. *evolutionary model*). For instance, if we perceive *use* as simply pointing to the names of and references used by the consulted practitioners and scientists, the report and its bibliography provided a clear and careful integration of most of the good practices and recommendations of the scientists, practitioners and members of the Government but displayed less sensitivity to the views of more critical accounts (of e.g. *social movement theorists/activists*).

Simultaneously, findings also match the theoretical assertions about policy-makers' *political/symbolic* knowledge utilisation (Weiss, 1979; Stevens, 2007a). Vague references to scientific knowledge were used as ammunition to support the installation of the PWG. Furthermore, according to some respondents, the creation of a PWG (and thus a thorough study of the phenomenon) has to be seen as a strategy of the majority to keep the political responsibility away from the Government (and thus for delaying real decision-making). Additionally, during the debate of the final conclusions and recommendations, the broad spectrum of views of experts involved permitted policy-makers involved in the PWG to select studies or expertise to support their arguments (as an instrument to enact power).

Scientific knowledge has been just one element in the PWG competing with other types of information. **Barriers** to knowledge utilisation can be attributed to the institutional characteristics of the political setting (e.g. political party instructions, majority versus minority issues, the international framework (i.e. Dutch drug policy, the international drug control conventions), etc.) as well as to the individual experiences (their interest, education, research receptivity) of policy-makers. One clear example is the adaptation of the recommendation regarding cannabis policy. Members of the conservative parties took the lead to delete the phrasing '*de facto depenalisation of cannabis possession for personal use*' in order to avoid discussion about the (anti-)prohibition of drug use as well as any comparisons with the Dutch drug policy of tolerance. Accordingly, the final report of the PWG recommended the *lowest prosecution priority* for the possession of cannabis for personal use, unless it caused public nuisance or in the case of a problematic user. Likewise, it became clear that the selection of (inter)national experts in the PWG strongly depended on political (i.e. majority versus opposition, party policy) and cultural/linguistic (e.g. Flemish MPs preferred the selection of Flemish experts) motives and the functional specialisation of MPs (e.g. MPs with a medical background tend to select doctors or professors in toxicology or pharmacology). The characteristics of scientific knowledge also seemed to operate as a barrier of knowledge utilisation. In the PWG as well as by several interviewees, it was clearly

assumed that scientific knowledge is often inconclusive or fragmented and not focused on the practical day-to-day issues (which reflects the *two communities thesis* assuming a fundamental gap between science and policy; Caplan, 1979), while practitioners may have a better sense of crucial real-world information (and practice-based research)⁵² that scientists do not fully appreciate. In a similar vein, the utilisation of data derived from other non-academic sources: e.g. official (prison or police) statistics or reports supplied by an international organisation (e.g. EMCDDA, WHO) was observed.

An important **facilitator** to knowledge utilisation includes the relationships and networks between scientists and policy-makers. In selecting scientists to be involved in the PWG, it appeared that *personal contacts/networks* were at least as important (maybe even more) as the expertise and competence of experts. It also became clear that, due to the importance of personal contacts/networks, once a (scientific) expert appeared on the political stage (and his ideas and opinions were shared by one or more political families) a relationship with policy-makers was established. If scientists want to play a role in the policy-making process, they have to make themselves visible and create networks outside the academic world. Attending conferences (where a mix of expertise is invited), building contacts with (employees of) policy-makers through research projects (e.g. guidance committees) or attending study groups from political parties may be seen as important ways to be selected in formal advisory structures at the parliamentary level.

A strong role of the **media** is noted. The public and political commotion regarding the newspaper article presenting the story of MP Patrick Moriau (PS, French-speaking Socialists), increased the likelihood of the Federal Parliament taking action (i.e. the establishment of a PWG). Media coverage, therefore, succeeded in generating public reaction (e.g. several interest groups were established), setting as well as keeping an item on the political agenda and, most importantly, in empowering the *enlightenment* function of scientific knowledge (via the PWG). Unfortunately, right from the start, media coverage reduced the complexity of the discussion in the PWG to one topic: cannabis policy (which persisted during the whole period). Furthermore, newspapers worked as a powerful selection device in determining the authorised agents of knowledge. In particular, it became clear that when media pushes forward certain experts, they may have a greater chance of being integrated in the personal networks of the policy-makers and of being selected as expert in formal advisory structures at the parliamentary level. In addition, media as such also seemed to be an important resource in supporting assumptions or ideas. MPs as well

⁵² This type of research does not meet the traditional scientific research standards but rather standards related to its usefulness for practitioners.

as representatives of the Government frequently used media statements in supporting their view or advancing certain policy initiatives.

Finally, several associations advocating for drug users' rights (*Belgian Cannabis Consumers' Organisation; A citizen just like any other; Association against the prohibition*) took advantage of the media attention preceding the PWG in an attempt to spread their ideas and to persuade the public and policy-makers to share their point of view. Initiatives, ranging from huge media coverage, the organisation of demonstrations, making contacts with MPs, etc. even led to some members of the PWG selecting these **interest groups** as experts to be invited to the hearings. It is clear that, together with the media, they have played a role in the empowerment of the *enlightenment* function of scientific knowledge and that they have influenced the arguments taken up in the political struggle (especially by progressive political voices). However, the discourse of the members of interest groups was mostly supported by personal experiences instead of references to scientific knowledge. Thus, these interest groups were not important linking mechanisms in the science-policy nexus during this period.

By detailing the first milestone in the development of Belgian drug policy between 1996 and 2003, the Parliamentary Working Group on drugs, we have documented through which modalities scientific knowledge contributed to the PWG and which other types of information competed with scientific knowledge. The following chapter will illustrate how these issues apply during an era in which other topics than drugs became more central to the political agenda.

Chapter 3 Intermezzo: 1997-2000

After the Parliamentary Working Group on drugs (PWG), the general attention to the drug issue decreased. The Dutroux case and ensuing reforms of the judicial authorities and the police ('Octopus reforms') as well as the creation of a new governmental Coalition led to a turbulent time period. Simultaneously, at the international level, several interesting debates developed.

1. General (inter)national context

1.1. International frameworks

Internationally, while continuing (modest) rises of drug use (i.e. cannabis, amphetamines, ecstasy, cocaine and heroin) were observed⁵³, the drug problem was increasingly viewed in a broader social context including drug prevention, reduction of drug-related harm and crime deterrence (EMCDDA, 2000).

For a long time, drugs were scarcely discussed within the framework of the European Community.⁵⁴ It was not until the Treaty of Maastricht (1992) that drugs, along with many other new subject areas, were brought within the European Union's competence (Boekhout van Solinge, 2002). The European Union focused on the consolidation of common measures for combating drug addiction and drug trafficking, for promoting international cooperation and for supporting the efforts of the United Nations. The 1997 Amsterdam Treaty was a reconfirmation of the 1992 Maastricht Treaty but also determined for the first time that the highest priority should be given to the reduction of drug-related harm (De Ruyver, Vermeulen and Vander Beken, 2002). Article 152 aimed at cooperation in order to stress the objective to reduce the drug-related health damage alongside the traditional cooperation in the prevention field. This article provided a judicial basis for the Member States to implement *harm reduction* strategies. Following the UN conventions, these provisions also required the application of criminal sanctions on the supply side. On

⁵³ Cannabis remained the most frequently used substance (18% of those aged 15 to 64 had tried cannabis at least once; about 6% of those aged 15 to 64 had used cannabis in the past 12 months). Amphetamine, ecstasy and cocaine use increased moderately over the 1990s as a whole, with ecstasy use more evident than amphetamine or cocaine use among young adults (EMCDDA, 2000). Between 1 and 5% of those aged 16 to 34 had taken amphetamines and/or ecstasy. Between 1 and 6 % of those aged 16 to 34 and 1 to 2% of schoolchildren had tried cocaine at least once. Several studies and evaluations of treatment or prevention programmes, on effectiveness of repressive measures, studies of specific risk-groups (prisoners, youngsters out of school), ethnographic research were running (see also §6). The trends observed in Belgium were very similar to those noticed in other countries of the European Union (BIRN, 2000).

⁵⁴ This is in spite of some interesting initiatives preceding the formal decision that drugs should indeed be an EU-issue (Treaty of Maastricht): the Stewart-Clark Committee (1985-1986) and the European Committee to Combat Drugs (CELAD) (1989) (Boekhout van Solinge, 2002; Fijnaut and De Ruyver, 2014).

the demand side, there were no explicit requirements in relation to the criminalisation of the use and possession for personal use.

Furthermore, following the implementation of the 1990 Schengen Convention, the Inter-parliamentary Advisory Council of the Benelux countries provided a report about drug policy in Benelux in November 1998. While describing the different drug policies, the Dutch coffee-shop model was not openly discussed in the report as the organisation of the supply of cannabis still appeared to be a huge stumbling block. However, in accordance with the conclusions of the Parliamentary Working Group on drugs (1996-1997) in Belgium, the recommendations of the Benelux report clearly showed agreement about the importance of a *normalisation policy*, as a third way between a prohibitionist and anti-prohibitionist policy (Inter-parliamentary Advisory Council of the Benelux countries, 1998; Fijnaut and De Ruyver, 2008). The notion 'normalisation policy' has been decisive for the further developments of Belgian drug policy (see below, Chapter 4).

In addition to the Drug Note of 1995 (*The Dutch drug policy, continuity and change*), the Dutch Government published its official paper *Pathways to the back door* in April 2000 which addressed the problems of drug tourism, the professionalisation and commercialisation of home growers and organised crime (and the problem of the supply side of the coffee-shop model) publicly. For the first time, it was also acknowledged that these side effects were not just a national issue but resulted in negative consequences for neighbouring countries (cfr. Article 71 Schengen Convention). The international pressure on the Dutch liberal drug policy increased and this situation confirmed the rejection of this model by Belgian policy-makers (Fijnaut and De Ruyver, 2008; De Ruyver, et al., 2010). An interviewee described:

"The negative consequences of the Dutch policy became more and more visible: drug tourism, increasing drug supply, crime and nuisance. Belgium decided not to copy the drug policy of the Netherlands [...] The discussion about coffee-shops was immediately finished. Around 2000, the paper 'Pathways to the back door' confirmed the scale of the problem once more." (Respondent 50, scientist).

1.2. Turbulent time period in Belgium

At the end of the nineties, the entire Belgian drug debate was overshadowed by the 'Dutroux paedophilia case'.⁵⁵ The failure of the Belgium's political and criminal justice system was dis-

⁵⁵ Marc Dutroux kidnapped, tortured and sexually abused six girls aged between 8 and 19. He was arrested in August 1996: two girls were rescued from an underground dungeon and four were found buried in his garden. This case led to intense criticism of the Belgian police and justice system. Causing anguish among the Belgian people, a pro-

cussed at length. A Parliamentary Inquiry Commission, also referred to as the Dutroux Inquiry Commission (October 1996-April 1997)⁵⁶, was created to investigate possible police and judiciary incompetence and corruption. In the political (and media) discussion, the focus shifted to reforms of the judicial authorities and the police. This debate gained new momentum with the escape of public enemy number one, Marc Dutroux, on 23 April 1998. Although Marc Dutroux was caught within a few hours, the political world felt that quick and decisive action was necessary to restore trust in police and justice. Dutroux's escape not only prompted the resignation of three officials: the Belgian State Police Chief, Willy Deridder, the Minister of Justice Stefaan De Clerck (CVP, Flemish Christian Democrats) and the Minister of Internal Affairs Johan Vande Lanotte (SP, Flemish Socialists). At the same time, the leaders of the four governing parties and of the four opposition parties started the so-called Octopus negotiations under the presidency of Prime Minister Jean-Luc Dehaene (CVP, Flemish Christian Democrats).

2. Ministerial Circular Letter of 8 May 1998: answer to the recommendations of the PWG

The Parliamentary Working Group on drugs (PWG) revealed several negative consequences of the 1993 Ministerial Circular Letter which did put some pressure on the Minister of Justice Stefaan De Clerck (CVP) to take action. Initially, the Minister of Justice Stefaan De Clerck (CVP), together with the College of Prosecutors-General, developed a new Ministerial Circular Letter modifying the action of the judicial authorities. However, after the Minister of Justice Stefaan De Clerck (CVP) resigned his place was taken by his fellow party member Tony Van Parys. He launched the Ministerial Circular Letter in May 1998 (also called 'De Clerck-Van Parys' Ministerial Circular Letter). This initiative kept the drug issue on the political agenda within the turbulent time period.

"Despite of the turbulent period, the Minister of Justice was more or less obliged to adapt the Ministerial Circular Letter of 1993. The PWG had clearly pointed at several problems." (Respondent 50, scientist).

test march was held through Brussels by 300,000 people. In 2004, Marc Dutroux was convicted and imprisoned for life (Cartuyvels, Delpérée and Delwit, 1997).

⁵⁶ In a Parliamentary Commission of Inquiry (e.g. Dutroux Inquiry Commission, Parliamentary Inquiry Commission on the *Gang of Nijvel*), witnesses, as well as interpreters and experts, take an oath and are subject to the same obligations as when questioned by a so-called investigation judge. A Parliamentary Committee of Inquiry can also conduct searches and seize documents. Commission of inquiry at which witnesses or experts are heard are public, unless the committee decides otherwise. Furthermore, the committee is obliged to report in a given time to the plenary meeting. The plenary meeting then votes on motions submitted in the report of the Commission of Inquiry (Fijnaut, Huyse and Verstraeten, 1998; Devos, et al., 2009).

The new directive (of 8 May 1998) replaced the guidelines of the Ministerial Circular Letter of 5 May 1993 which did not distinguish between types of drugs and was based on the premise that every violation had to lead to a consequence (e.g. prosecution, praetorian probation, etc.). Following the final conclusions and recommendations of the PWG, the Ministerial Circular Letter of 8 May 1998 pursued a more realistic and contemporary drug prosecution policy. For the first time a distinction was made between the prosecution policy with regard to cannabis and other illicit drugs. It was argued that “*cannabis products are substances that cause fewer health problems*” (Ministerial Circular Letter of 8 May 1998, nr. COL 5/98, p.2). The Ministerial Circular Letter instructed Public Prosecutors to give the lowest priority to the prosecution of cannabis possession for personal use⁵⁷, unless the use causes public nuisance (defined as environmental pollution, noise, verbal aggression, use or being under the influence of drugs in public space)⁵⁸ or in case of problematic use (defined as sustained regular use, dependence, addiction, lack of socio-economic integration or crises; in such a case, orientation towards treatment is recommended)⁵⁹. Provided there were no aggravating circumstances, the police officer (taking his subjective assessment into account) had to make a *simplified process-verbal*. A list of these records was then sent to the Public Prosecutor biweekly or monthly. The 1998 Ministerial Circular further asked the Public Prosecutors to be severe in the case of retail sale but to take into consideration (by reducing the punishment) the case in which the only purpose of the sale was to finance one’s own use.

The 1998 Ministerial Circular followed the conclusions of the PWG by reemphasising that the possession of illegal drugs remained punishable and that the lowest prosecution priority was given to the possession of cannabis for personal use. However, the details about the application of the Ministerial Circular Letter (e.g. a clear definition of concepts) remained unclear. The new directive ignored the fact that vague notions like *public nuisance* and *problematic use* were heavily criticised by both the academic world and practitioners (Kaminski, 1998). At the same time, regular registrations by the Public Prosecutor formed the main criterion to determine persistent regular use of cannabis. Problematic use was therefore rather linked with the risk of being controlled by the police. As we will discuss in detail below, an evaluation study demonstrated these problems clearly (see Chapter 4).

⁵⁷ Generally defined as the limited possession for personal (single or occasional) use (Ministerial Circular Letter nr. COL 5/98, p.4).

⁵⁸ Public nuisance is defined for the first time (no definition was integrated in the final conclusions and recommendations of the PWG).

⁵⁹ Even though the final conclusions and recommendations of the PWG vaguely defined problematic use as “*the problematic nature of use depends on the drug and the nature of use*”, the 1998 MC did not succeed in obtaining a more clear definition of problematic use.

The new Ministerial Circular Letter, presented in May 1998, resulted in a slight (but short) increase of the public (and political) attention to the drug issue (see also below, §5; *Hand. Senaat 1997-1998*, 7 mei 1998, 1-183; *Parl.St. Kamer 1997-1998*, nr. 1571/1). We also observed that information was released to the media in advance of an official press release. On 18 April 1998, French-speaking newspaper *Le Soir* (the same journal that provoked the debate by the article about Patrick Moriau's proposition) reported a scoop regarding the stipulations of the new Ministerial Circular:

*"Cannabis: room for a little tolerance. Stefaan De Clerck reveals new circular letter about drugs."
(18 April 1998, French-speaking newspaper Le Soir).*

The news scoop was then picked up by several Flemish and French-speaking newspapers. As a result, the Ministerial Circular Letter was already extensively discussed and criticised in the Flemish and French-speaking newspapers before the official presentation on 21 April 1998. This situation complicated the debate. On the one hand, the media provoked some wrong assumptions. For instance, French-speaking newspaper *Le Soir* as well as Flemish newspaper *De Morgen* both wrongly reported that the quantity for personal use was determined to be five grams, similar to the Dutch policy.

"It was the responsibility of the policy-makers to develop a clear Ministerial Circular Letter [...] The press translated the Ministerial Circular Letter and added a certain number of grams, which was never included in the first place. As a result, the public discussion and confusion arose." (Respondent 22, policy-maker).

On the other hand, we found almost each newspaper guilty of using false terminology (and thus increasing confusion among the public). Many times it was mistakenly argued that cannabis (mostly called *soft drugs*) was tolerated (expressed as tolerance policy) and, in other words, that cannabis users were not to be prosecuted anymore. Clearly, in media coverage, scientific definitions were less important than facts and clear messages. An interviewee explained:

"I am a lawyer but the public debate has to be simple. In many newspapers, these concepts were used wrongly. A juridical nuance is not interesting. The bottom-line is: is it allowed or not?" (Respondent 45, journalist).

3. Federal elections: June 1999

With Federal (and regional) elections on 13 June 1999 lying ahead and the power and status of political actors at stake, media coverage and parliamentary activity increased. Accordingly, some

MPs used the media to favour electorates and attain a higher authority. The main **focus of the election campaign** (and accordingly media coverage and parliamentary debate) was mainly on the Dioxin Affair⁶⁰ which was revealed only two weeks before the elections (Dewachter, 2001; Frogner and Aish, 2003).

Nevertheless, in order to win some votes, MP Van Quickenborne said that he would smoke a joint in the Senate if he got elected. *“Vincent Van Quickenborne enjoys smoking a joint. He promises to smoke a joint if he got elected. He invites his colleagues to do the same”* (28 May 1999, Flemish newspaper *Het Laatste Nieuws*). Others used the media to place themselves in a positive light by demonstrating the importance they afforded to scientific knowledge. For example, efforts in stimulating scientific knowledge regarding drug use were regularly emphasised in the media. *“Flemish Minister W. De Meester aims to take these numbers into account. She commissioned a survey among youngsters in secondary schools”* (30 October 1998, Flemish newspaper *Belang van Limburg*). This is linked with the **status model** of Cross et al. (2000) which assumes that policy-makers use a well-stocked portfolio of commissioned research as a kind of status symbol. Given this kind of references, it seems necessary to differentiate Weiss’s political/symbolic model (Weiss, 1979). Favouring evidence-informed policy can be seen as a rather strategic stance.

Furthermore, an initiative worth mentioning is the common strategy of both Dutch- and French-speaking practitioners of drug treatment and prevention of developing a **Policy Memorandum** (Memorandum group, 1999). This document described the bottlenecks of each organisation and the cooperation between the organisations as well as their wish list for the future. In this document, obviously linked with the final conclusions and recommendations of the PWG, they pleaded for the clarification of the 1998 Ministerial Circular Letter, the development of a uniform registration system, the improvement of the collaboration between justice and treatment, the establishment of a prison policy, the establishment of a forum for a better cooperation and coordination between different policy actors, and so on. One French-speaking organisation, Fedito Wallonia, emphasised 3 additional elements: (1) a debate about legalisation should be reopened; (2) prison life should be improved; and (3) pros and cons of therapeutic communities should be reassessed in detail. This exemplified the rather different discourses between the (rather progressive) French-speaking part of Belgium and the (rather conservative) Dutch-speaking part of

⁶⁰ Dioxins (i.e. by-products of industrial chemical processes) were introduced into the Belgian food supply through contaminated animal fat used in animal feed. This animal feed was supplied to Belgian, French and German farms and, accordingly, resulted in a Belgian (and European) food safety scandal. Public and media criticism towards the Belgian Government was raised (Casey, Lawless and Wall, 2010).

Belgium. On the threshold of the federal elections, the document⁶¹ was first provided to the MPs who took part in the PWG (which resulted in the endorsement of Mrs. Ingrid Van Kessel (CVP, Flemish Christian Democrats) and Mr. Dany Vandebossche (SP, Flemish Socialists)) and secondly, to all outgoing MPs in the Chamber of Representatives and Senate (in order to get some issues in the party programmes and the new Governmental Declaration). After the new Government had taken place, the document was sent to the Ministerial Cabinets⁶². The Policy Memorandum can be considered as an important lobbying instrument, as was described in the accompanying letter:

"This Memorandum is endorsed by almost every organisation. The drug issue is a public concern. There is need for a repressive as well as for a curative and preventive component. When establishing the latest, this Policy Memorandum can be an important policy instrument." (1999 Policy Memorandum Drug treatment and prevention).

Scientists were not explicitly involved. However, if we assume that personal contacts/networks exist between practitioners and scientists (e.g. through attendance of study groups or conferences), some scientists may have influenced the development of the Policy Memorandum indirectly.

4. First Verhofstadt Government (1999-2003): a historical switch

An important change was established on 13 June 1999. Although the Prime Minister had come from the Christian Democratic Party for many years, in the 1999 Federal elections, a Coalition led by Flemish Liberal Leader Guy Verhofstadt was voted into power. The first Verhofstadt Government (1999-2003) was a *six-party Coalition* between the Flemish and French-speaking Liberals, Socialists and Greens. The green parties moved to the majority for the first time. Conversely, Christian Democrats moved from a long-standing majority position towards the opposition. At the same time, an increased availability of finances (De Ruyver, et al., 2004) and political and

⁶¹ Even the preliminary version of the document was sent to a member of the Chamber of Representatives in order to get some feedback and stimulate parliamentary acceptance.

⁶² The so-called Copernicus reforms of the Government (1999-2003) aimed to decrease the powerful (political) role of the Ministerial Cabinets and to give the Administration a more decisive role. As a result, the 'Ministerial cabinet' was replaced by a personal secretariat of the Minister, a policy council ('beleidsraad') and a policy cell ('beleidsvoorbereidende cel'), which together formed the policy-making bodies of the member of the Government. The secretariat is situated on the level of the Minister while the cell is situated on the level of the Administration. The policy council is the bridge between the Minister and the Administration. However, Verhofstadt II changed some fundamental Copernicus decisions (Royal Decree 19th July 2003). The 'neutral' cell situated in the Administration remained the powerful and political player of the Minister (cfr. Ministerial Cabinet). In practice, it just meant a change of name (Devos, 2006).

public attention for ‘new’ themes were observed. Many respondents felt that a historical switch was introduced. This has largely influenced the development of Belgian drug policy.

“Euphoria prevailed: ‘it will be better’. Regarding the drug issue, we had the feeling that we finally could make some progress towards a more efficient policy.” (Respondent 20, policy-maker).

“I am convinced that the outcome of the drug policy and the drug law in particular would not have been the same with another Coalition led by the Christian Democratic Party.” (Respondent 51, policy-maker).

Table 6: Composition of the Belgian Government and Parliament (1996 – 2003)

	Government Dehaene II	Government Verhofstadt I
Start date	23 June 1995	12 July 1999
End date	12 July 1999	12 July 2003
Number of parties	4	6
Composition Coalition	CVP PSC PS SP	VLD PS PRL-FDF-MCC SP Ecolo AGALEV
MPs majority	82 MPs	94 MPs
MPs opposition	68 MPs	56 MPs

The 1999 *Federal Government Policy Statement*, put forward by the new government, addressed a number of so-called ‘ethical topics’, including drugs (alongside e.g. euthanasia). The new Government expressed their intention to develop a coherent drug policy. Even though it has long been the exclusive domain of Justice, the drug issue was clearly addressed from a public health approach (Federal Government, 1999). Likewise, it was underlined that science was an important resource in policy-making (as an answer to the lack of scientific research in Belgium, highlighted in the PWG). Within this framework, the Verhofstadt I Government stressed that the Federal Government had the task of presenting an *evaluation report* to the Parliament regarding the current drug policy within six months. This report had to include an evaluation of (1) the implementation of the Ministerial Circular Letter of 8 May 1998, (2) the implementation of the final conclusions of the PWG and (3) some experiences of other countries (see also §4.1.). Its final goal was to allow the Federal Government to develop, together with the Federal Parliament, a coherent (*evidence-based*) drug policy in Belgium. In this way, the 1999 Federal Government

Policy Statement, a powerful guiding tool in a legislature, already announced some important steps towards the realisation of a coherent drug policy.

“The 1999 Federal Government Policy Statement played an important role. If this document includes certain measures, the Government feels obliged to execute these during the legislature.”
(Respondent 52, scientist).

As another example, Prof. Dr. Brice De Ruyver became the security advisor to Prime Minister Guy Verhofstadt in April 2000. Assistance in the development of a coherent Belgian drug policy was one of his main assignments. His prominent role in the policy-making process (at the governmental level in particular) is quite unique in the Belgian (drug policy) context (see also below, Chapter 4) and confirms the intention of the new Government to allocate a larger role to scientific knowledge in the policy-making process.

4.1. Evaluation report

With regard to the development of Belgian drug policy, the policy-funded evaluation study aiming at studying the progress of Belgian drug policy as well as the experiences of other countries (De Ruyver, et al., 2000) was one of the most important realisations during the intermezzo. The Minister of Justice Marc Verwilghen had to coordinate the evaluation described in the 1999 Federal Government Policy Statement (Federal Government, 1999). In particular, he outsourced the evaluation of the implementation of the final conclusions of the PWG, and of the experiences of some other countries, to an external research team⁶³ while the evaluation of the implementation of the Ministerial Circular Letter of 8 May 1998 was commissioned to the *Criminal Policy Service [Dienst Strafrechtelijk Beleid]* (Hand. Kamer 1999-2000, 13 juni 2000, 716/1, p.81).⁶⁴ The allocation of this evaluation to Prof. Dr. Brice De Ruyver (and Prof. Dr. Joris Casselman) can be seen as a reflection of his expertise and networks (due to the organisation of the national conferences ‘Drug Policy 2000’) as well as of his large role in the PWG (*observer-turned player*; see Chapter 2, §2.2.2.). The evaluation study (De Ruyver, et al., 2000), handed over on 12 January 2000, concluded that some priorities of the 1995 Federal Action Plan Toxicomania-Drugs as well as a small number of recommendations of the PWG (1996-1997) were elaborated. While we addressed the realisations of the action points of the Federal Action Plan Toxicomania-Drugs above

⁶³ The external research team conducting this evaluation research consisted of Prof. Dr. Brice De Ruyver (Ghent University) and Prof. Dr. Joris Casselman (KULeuven).

⁶⁴ The Criminal Policy Service (Dienst Strafrechtelijk Beleid) is responsible for advice and support regarding the drug policy matters in the field of Justice (e.g. drug-related crime, drug use in prisons). It is also responsible for collecting and analysing scientific research as well as guiding (and sometimes conducting) research projects regarding criminal policy topics.

(Chapter 1, §3), in the following, we discuss to what extent the recommendations of the PWG were met.

At the local level, some *structures of consultation and coordination* were developed. For example, the city of Antwerp (i.e. Local Coordination Drugs Antwerp) played a leading role (De Ruyver, et al., 2000, p.9).

The *collaboration between justice and treatment* required cooperation protocols and agreements considering and respecting the different goals and principles of both sectors (e.g. professional confidentiality). Some protocols were already developed by the Centra voor Alcohol en andere Drugsproblemen (CAD-Limburg) together with the local justice officers in order to improve the collaboration without compromising confidentiality (De Ruyver, et al., 2000, p.26-27). At the same time, it was stated that the 'houses of justice' (established in 1999, but not fully operationalised yet) increasingly played a connecting role in the collaboration between the criminal justice system and drug treatment (De Ruyver, et al., 2000, p.38).

In zooming in on the development of *epidemiological and evaluation* research and *registration systems*, attention on the drug phenomenon in Belgium increased slowly. While registration systems (e.g. 'Flemish registration of drug use' by the VAD) were initiated, some research initiatives were established: the development of a model framework for alternative measures towards (problematic) drug users in the criminal justice system (1997-1998) and a qualitative (ethnographic) study of cocaine users in Antwerp. However, knowledge about of the drug phenomenon (e.g. about drug consumption and drug-related problems) remained rather incomplete (De Ruyver, et al., 2000, p.20).

As noted above, on 8 May 1998, a new *Ministerial Circular Letter* (also called 'De Clerck-Van Parys' Ministerial Circular Letter)⁶⁵ was published. The evaluation report demonstrated several problems. This new Ministerial Circular Letter served as an illustration of the compromise between a public health and repressive/legalistic discourse. On the one hand, it was recognised that drug use is a matter of public health while on the other hand, justice (instead of social workers) had the responsibility of 'objectively' measuring the problematic⁶⁶ nature of drug use. Furthermore, the study stressed that the inclusion of vague notions like 'public nuisance' and

⁶⁵ The Minister of Justice Stefaan De Clerck (CVP) developed the Ministerial Circular Letter of 1998. However, he resigned after the escape of Marc Dutroux in April 1998. His place was taken by his fellow party member Tony Van Parys who eventually launched the Ministerial Circular Letter in May 1998.

⁶⁶ "Problematic use includes, among other things, sustained regular use, dependence, addiction, lack of social-economic integration or crisis situations" (p.4).

'problematic use' and 'limited possession for personal (single or occasional) use'⁶⁷ as well as a wide range of possible interventions (dismissal, referral to court, alternative options like praetorian probation, mediation, ...) resulted in arbitrariness and a lack of uniformity in prosecutions by different Public Prosecutor's offices. The prosecution of cannabis possession ranged from five grams in one district to fifty grams in another (De Ruyver, et al., 2000, p.41-48). Even though the number of police records related to drugs decreased from 20.400 in 1999 to 14.225 in 2000, the qualification 'use and possession of drugs' was still applied in 60% of the police records related to drugs. About 70% of these records were referring to cannabis (De Ruyver, et al., 2004).

Other recommendations of the PWG were not yet met entirely, including the establishment of an integral and integrated drug policy with a vertical and a horizontal policy coordination; addressing the fragmentation of funding; a legal framework for methadone treatment; the increase of interest in psychoactive medicines or smart drugs within the framework of prevention; the development of scientific research about drug-related criminality and nuisance, and; the development of a prison drug policy, etc.

4.2. Federal Safety and Detention plan: drug nuisance and criminality (2000)

Despite the aim of providing a public health approach, drug policy was initially classified under the competences of the Minister of Justice, Marc Verwilghen (VLD, Flemish Liberals). On 1 October 1999, the new Government appointed Minister of Justice Marc Verwilghen to develop a Federal Security plan⁶⁸. An Inter-Cabinet Working Group (ICWG) was installed (see also below, Chapter 4, §2) and took the advice of scientists (e.g. Prof. Dr. M. Cools, Ghent University) and practitioners for granted. For instance, the Minister of Justice Marc Verwilghen invited some practitioners.

"I contacted the employees of the Ministerial Cabinet of Minister of Justice Marc Verwilghen. They were prepared to arrange a meeting to discuss the memorandum and to elucidate the Federal Safety and Detention plan." (Internal communication Memorandum group, 6 December 1999).

When presenting his 2000 Budgetary Note, Minister of Justice Marc Verwilghen, specified that the highest priority had to be given to (individual and social) drug prevention, in particular in the field of health, education, research and training (*Hand. Kamer 1999-2000*, 12 november

⁶⁷ These notions had been heavily criticised by both the academic world and practitioners (Kaminski, 1998). For instance, it was not at all clear what amount had to be considered as possession for personal use (De Ruyver, et al., 2000; p.41).

⁶⁸ In the Government Policy Statement, the preliminary name 'Federal Safety plan' was used. In a following stage, the 'Federal Safety and Detention plan' was developed.

1999, 198/13, p.52). However, the first version of *Federal Safety and Detention plan* included several measures and projects regarding drug-related nuisance and crime and reflected a *legal-istic/repressive* discourse (instead of a *public health* approach) (Guillain, 2003). Respondents illustrated this point too:

“The initial Federal Security plan focused on issues of security like e.g. drug supply. There were no links with an integral approach taking into account the premise of public health.” (Respondent 50, scientist).

The French-speaking Socialists as well as the French-speaking and Dutch-speaking green parties reacted furiously and, accordingly, on the Council of Ministers of 27 January 2000, the development of a coherent drug policy was entrusted to the Minister of Public Health Magda Aelvoet (Flemish Green party AGALEV).

“The Minister of Justice wrote a Note and presented it to the Council of Ministers. However, this Note did not follow the public health approach put forward by the PWG and the Federal Governmental Declaration. The Council of Ministers did ask Minister of Public Health to write another Note [...] They blew the whistle on Verwilghen.” (Respondent 20, policy-maker).

The final version of the *2000 Federal Safety and Detention plan* of the Federal Government summed up the priorities for Belgian integral security policy (*Hand. Kamer 1999-2000, 13 juni 2000, 716/1; Devroe, 2002*). In the section on drug-related nuisance and drug-related crime, it was stressed that an Inter-Cabinet Working Group (under the coordination of Federal Minister of Public Health) had to develop an *integrated and integral drug policy*⁶⁹. The goal was to launch the first national drug strategy in November 2000; it was finally established in January 2001 (see also below, Chapter 4, §3). Alongside the section on drug-related nuisance and drug-related crime, the theme of drugs also came to the forefront by discussions on topics like international cooperation in the struggle against drug trafficking, prevention of drug use in schools, in traffic or among hooligans, secondary and tertiary prevention of drug addicts, extension of alternative measures towards drug users, analysis and prevention of supply and traffic of drugs at metropolitan level (*Hand. Kamer 1999-2000, 13 juni 2000, 716/1*). Clearly, the *2000 Federal Safety and Detention plan* was inspired by some of the conclusions and recommendations of the PWG. The fact that the attention given to the drug issue remained rather limited and, particularly, did not reflect a public health discourse, increased the pressure on the Government to develop the first national drug strategy.

⁶⁹ The importance of the development of an integrated and integral drug policy was already stressed in the PWG.

“About 99% of that plan concerned the implementation of the recommendations of the Parliamentary Inquiry Commission (Dutroux Inquiry). Some topics were related to the drug issue but that was really a minimum [...] Drugs were no priority for Public Prosecutors, their focus lied on organised crime.” (Respondent 17, policy-maker).

“The Federal Safety and Detention plan was finished in 2000. If this plan would have been the only initiative based on the PWG, it would be terrible. The only focus was on the supply and the profit. These limitations did put some pressure on the Government to develop a Federal Drug Policy Note.” (Respondent 50, scientist).

5. Attention for drugs and drug policy in parliamentary activities and media

Within this turbulent framework, we observed some parliamentary and media activity regarding the drug issue. Even though the general attention to the drug issue decreased, the aftermath of the Parliamentary Working Group on drugs, the launch of the new Ministerial Circular Letter of 8 May 1998, the 1999 Federal Government Policy Statement and the 2000 Federal Safety and Detention plan grabbed the attention of the MPs and journalists.

Making use of their capacity to monitor and control the activities of the Government and aiming for (individual) recognition among the public (and their electorate), the opposition MPs posed **questions**⁷⁰ or submitted **interpellations**⁶⁷, **resolutions**⁷¹ or **bills**⁷². Within this framework,

⁷⁰ Members of the Chamber of Representatives may submit written questions as well as oral questions. In contrast with interpellations, these questions are always directed to one Minister and cannot lead to the resignation of the Government or a particular Minister (Devos, 2006; Van der Hulst, 2010). In the plenary meetings as well as in the standing Commissions of the Chamber of Representatives (not in the Senate), members may intervene with a parliamentary interpellation. An interpellation requires one or more Ministers or the Government to explain some act or policy. Interpellations can be followed by a motion (Devos, 2006). (*Hand. Kamer 1996-1997*, 24 juni 1997, 175; *Hand. Kamer 1996-1997*, 26 juni 1997, 178; *Hand. Kamer 1996-1997*, 22 september 1997, 393; *Hand. Kamer 1997-1998*, 22 maart 1999, 774, 1-2; *Hand. Kamer 1998-1999*, 15 juli 1999, 003, 63; *Hand. Kamer 1998-1999*, 16 juli 1999, 005, 135; *Hand. Kamer 1999-2000*, 15 december 1999, 0025/037; *Hand. Kamer 1999-2000*, 15 december 1999, COM 074, 9-13; *Hand. Kamer 1999-2000*, 25 januari 2000, COM 094, 5-9; *Hand. Kamer 1999-2000*, 15 juni 2000, 061, 16; *Hand. Kamer 1999-2000*, 4 juli 2000, COM 255, 18; *Hand. Kamer 1999-2000*, 9 november 2000, 081, 12; *Hand. Senaat 1997-1998*, 7 mei 1998, 1-183; *Vr. en Antw. Kamer*, 9 oktober 1998, nr. 49/B152 (Vr. nr. 951 F. Van den Eynde); *Vr. en Antw. Senaat*, 12 januari 1999, nr. 1-90, 4733 (Vr. nr. 1479 M. Olivier); *Vr. en Antw. Senaat*, 4 januari 2000, nr. 2-6, 201 (Vr. nr. 170 V. Van Quickenborne); *Vr. en Antw. Senaat*, 4 januari 2000, nr. 2-6, 203 (Vr. nr. 171 V. Staveaux-Van Steenberghe); *Vr. en Antw. Senaat*, 18 januari 2000, nr. 2-7, 236 (Vr. nr. 191 V. Van Quickenborne); *Vr. en Antw. Kamer*, 4 februari 2000, nr. 50/22, 2415 (Vr. nr. 67 F. Van den Eynde); *Vr. en Antw. Senaat*, 20 juli 2000, nr. 2-67, 11 (Vr. nr. 2-333 V. Van Quickenborne); *Vr. en Antw. Senaat*, 20 juli 2000, nr. 2-67, 15 (Vr. nr. 2-334 L. Caluwé).

⁷¹ Submitting a resolution can be seen as a general instrument of a member of the Chamber of Representatives to express his/her view point about a topic about which one has little to say. Mostly, a resolution concerns a reaction regarding a foreign political situation or event (Devos, 2006; Van der Hulst, 2010). For instance, a resolution was submitted by members of the green parties: Mr. Vincent Decroly (Ecolo, French-speaking Greens), Mrs. Martine Schüttringer (Ecolo, French-speaking Greens), Mr. Frans Lozie (AGALEV, Flemish Greens), Mr. Olivier Deleuze (Ecolo, French-speaking greens) and Mr. Jef Tavernier (AGALEV, Flemish Greens). They provided arguments in favor of a revision of the international conventions (Voorstel van resolutie waarbij de Belgische regering wordt verzocht op de Algemene Vergadering van de VN in juni 1998 te bevorderen dat de internationale verdragen op het

the discursive struggle with the different interpretations of the drug problem was demonstrated again. By some MPs, drugs was seen as *deviant* and a *threat for society*. They referred to a legalistic definition of drugs included in the international conventions and national legislation. Conversely, some progressive voices argued that drug taking is a self-regarding act, and accordingly not a matter for governments. The parliamentary focus was clearly on the most controversial topic: the cannabis prosecution policy. We found that scientific knowledge/experts as well as the media and the political context played a role in the arguments provided in these interpellations, questions, bills and resolution.

5.1. Scientific knowledge and scientists

Those who participated in the parliamentary debates often stressed their aim of taking into account scientific knowledge (cfr. *status model*). Two MPs introduced their bill as follows:

"It is our intention to develop a coherent policy based on objective scientific research, independent of ideologies [...] The claim that cannabis use causes a loss of motivation is disproven by recent scientific research." (Mr. Vincent Van Quickenborne and Mr. Patrik Vankrunkelsven, MPs VU&ID, Flemish Nationalists; Parl.St. Senaat 2000-2001, nr. 2 - 585/1).

Scientific knowledge mostly concerned *numbers* (from policy-funded studies or epidemiological research), completed with non-academic reports of international organisations (e.g. EMCDDA, WHO) or conclusions of international Commissions (e.g. British Wootton Commission (1969), Canadian LeDain Commission (1970), Dutch Baan Commission (1972), French Roques Commission (1997)...).

gebied van drugs worden herzien (ingediend door Mr. Vincent Decroly, Mrs. Martine Schüttringer, Mr. Frans Lozie, Mr. Olivier Deleuze and Mr. Jef Tavernier), *Parl.St. Kamer 1997-1998*, nr. 1571/1).

⁷² Voorstel van wet tot regeling van de teelt, de distributie en de verkoop van cannabis (ingediend door Mr. Vincent Decroly, Mrs. Martine Schüttringer and Mr. Frans Lozie (Flemish and French-speaking Green party)), *Parl.St. Kamer 1996-1997*, nr. 1186/001; Voorstel van wet tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica, ten einde het gebruik van cannabis uit het strafrecht te halen (ingediend door Mr. Patrick Moriau and Mr. Thierry Giet (both PS, French speaking socialists)), *Parl.St. Kamer 1999-2000*, nr. 0727/001; Voorstel van wet tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsmiddelen en antiseptica, ten einde het bezit van cannabis en derivaten ervan gedeeltelijk uit het strafrecht te halen (ingediend door Mr. Daniel Bacquelaine and Mr. Olivier Chastel (both PRL-FDF, French speaking liberals)), *Parl.St. Kamer 1999-2000*, nr. 0461/001; Voorstel van wet tot verstrenging van de straffen zoals bepaald in de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica (ingediend door Mr. Filip De Man and Mr. Gerolf Annemans (both Vlaams Blok, Flemish extreme right party)), *Parl.St. Kamer 1999-2000*, nr. 0389/001; Voorstel van wet tot regeling van de teelt, de distributie en de verkoop van cannabis (ingediend door Mr. Vincent Decroly, Mr. Paul Timmermans, Mrs. Zoé Genot and Mrs. Simonne Leen (Flemish and French-speaking Green party)), *Parl.St. Kamer 1999-2000*, nr. 0780/001; Voorstel van wet tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica (ingediend door Mr. Vincent Van Quickenborne and Mr. Patrik Vankrunkelsven (both VU&ID, Flemish Nationalists)), *Parl.St. Senaat 2000-2001*, nr. 2 - 585/1.

"A recent study of smoking behavior among young people, carried out by the University of Ghent, confirms the survey conducted by OIVO in 1995 [...] According to the French Roques Commission only few cannabis users are problematic users [...] Taking into account the recent report of the EMCDDA and Europol statistics, cannabis appears to be the most commonly used illicit drugs in the EU." (Mr. Vincent Decroly, Mr. Paul Timmermans, Mrs. Zoé Genot and Mrs. Simonne Leen, MPs Flemish and French-speaking Green parties; Parl.St. Kamer 1999-2000, nr. 0780/001).

As in the example above, scientific research was often presented without naming the author or institution ('research shows', 'research confirms', 'some authors mention', 'the literature shows', etc). Footnote references and bibliographies were rarely included and often incomplete (wrong order, no author, no place of publication, no page numbers, etc.) or out-of-date.

"All the research that in recent years has been conducted (including in the annual police statistics) points in the same direction" (Mr. Filip De Man and Mr. Gerolf Annemans, MPs Vlaams Blok, Flemish extreme right party; Parl.St. Kamer 1999-2000, nr. 0389/001).

"All researchers and clinicians agree on some points, namely [...], but on no medical ground. (Footnote): CONNER C., « Marijuana and alcohol use in pregnancy », Drug Intelligence and Clinical Pharmacy, 18(3): 233-4, Mars 1984; « Encyclopédie médicochirurgicale, Toxicologie, Pathologie professionnelle, Dépendance vis-à-vis des drogues illicites » 16-001-G-60, pp. 8,9; ESCOHOTADO A., « Histoire élémentaire des drogues. Des origines à nos jours », Ed. Du Léopard, Paris, 1995 ; DEWEY W., « Cannabinoid pharmacology », Pharmacol. Rev., 1986, 38, pp. 151 - 178 ; FRIED P., MAKIN J., « Neonatal behavioural correlates of prenatal exposure to marijuana, cigarettes and alcohol in a low risk population », Neurotoxicology and Teratology, 9(1): 1-7, 1987, Jan-Feb, HOLLISTER L., « Health aspects of cannabis », Pharmacol. Rev., 1986, 38, pp. 1-20, JOHNSON M., MELVIN L., « Cannabinoids as therapeutic agents », CRC Press, 1986, pp. 121-145 [...] (Mr. Patrick Moriau e and Mr. Thierry Giet, MPs PS, Walloon socialists; Parl.St. Kamer 1999-2000, nr. 0727/001).

These footnotes also revealed that the reports of those studies were not consulted in detail and that the Internet was an easy source in the search for supporting research. This finding is in accordance with Ritter (2009) who found that the third most frequently mentioned source used by policy-makers was the Internet (notably Google and websites of national research centres). The most common way of getting access to scientific knowledge was through contacting an expert. Indeed, in this study, MPs mentioned to turn to scientists for advice or background information. Consulting archives or libraries was considered too time-consuming.

"Cannabis can be distributed by pharmacies (1) [...] Inhalation of marijuana smoke relaxes the muscles within the body (5) (Footnote): See www.maripharm.nl." (Mr. Vincent Van Quickenborne and Mr. Patrik Vankrunkelsven, MPs VU&ID, Flemish Nationalists; Parl.St. Senaat 2000-2001, nr. 2 - 585/1).

"After a while, you have a network of experts that you can consult. You can ask these scientists questions but they also send you information. That is the way it works." (Respondent 35, policy-maker).

Purposefully searching for scientific knowledge or scientific advice provoked *political/symbolic* utilisation. The selection of scientific knowledge or scientific advice tended to depend on the political ideology of the MP and the personal preferences/networks/education (similar to the selection of experts in the PWG). For instance, an MP with a medical background was more in favour of consulting and referring to doctors or psychiatrists, while former academics more tended to consult scientific experts.

"I had to search everything that was in favour of our point of view. It was no objective, scientific study, no [...] MPs have to impress and present themselves as capable [...] Parliamentary work rather involves 'action-reaction' instead of a long-term study [...] Everyone has his side of the story and his truth [...] you hear what you want to hear and you use it in your story." (Respondent 42, policy-maker).

"I worked as an academic, I knew most of the professors. Of course, then, you know who to consult." (Respondent 22, policy-maker).

There were some examples of *cherry-picking* (or *trawling*; Stevens, 2007a) of scientific knowledge. For instance, although scientists, practitioners and MPs agreed in the PWG that there was no scientific evidence in favour of the *stepping stone theory*, this argument was ignored by some MPs. They assumed that there was a quite strong link between alcohol use and cannabis use and between cannabis use and the use of other illegal drugs. The existence of a connection between the use of cannabis and the use of other illegal drugs was one of the most cited arguments in favour of a repressive approach.

"We are starting to find some indications, concerning alcohol, for possible genetic predisposition, but it is certainly not enough to claim that there is or isn't a steppingstone theory. It is too early to say." (Mr. Jan Van Erps, MP CVP, Flemish Christian Democrats; Hand. Kamer 1996-1997, 24 juni 1997, 175).

Furthermore, there were some examples where scientific knowledge was **misused or misinterpreted**. First of all, *juggling with numbers or scientific results* was a common practice. For instance, the prevalence rates of cannabis use among young people were used to argue about the prevalence of cannabis use among the Belgian national population.

"Cannabis use in Belgium. The use of cannabis in Belgium is lower than the European average. [...] one out of five European youngsters has experimented with cannabis." (Mr. Vincent Van Quickenborne and Mr. Patrik Vankrunkelsven, MPs VU&ID, Flemish Nationalists; Parl.St. Senaat 2000-2001, nr. 2 - 585/1).

Additionally, conclusions from ongoing or finished studies in other countries were fully or partially *transposed* to the Belgian situation, without taking into account the different contextual elements. The only condition was that these studies have proven the particular point of view.

"The conclusions of international studies, quoted by the respected Member, can be transposed completely or partly to the Belgian situation [...] the studies conducted abroad are useful and the side effects are acceptable." (Mr. Marcel Colla, Federal Minister of Public Health SP, Flemish Socialists; Hand. Kamer 1996-1997, 24 juni 1997, 175).

5.2. Political setting

The parliamentary process is a political game between majority and opposition where party policies and internal party hierarchies play a role⁷³. **Political tactics/strategies** are often used to enhance or disprove the credibility of the opinions or sources offered. For instance, MPs made use of rather *extravagant vocabulary* and *metaphors*. Members of the Flemish extreme right party Vlaams Blok were regularly termed as *preachers*, while members of the green parties (AGALEV/ECOLO) were called *drug prophets*. Similarly, some MPs used personal (ad hominem) insults. An interviewee explained:

"The drugs prophets played tactically very well. Something that would not have been thinkable one or two years ago [...] Mr Lozie, you are a very intelligent person and you have developed all your arguments in a very constructive, premeditated and sophisticated way. I can't cope with this level" (Mr. Filip De Man, MP Vlaams Blok, Flemish extreme right party; Hand. Kamer 1996-1997, 24 juni 1997, 175).

"It is indeed insulting, that is correct. But that is part of the parliamentary culture. I succeeded in dealing with it because it is just part of it." (Respondent 7, policy-maker).

Furthermore, since the concept *de facto depenalisation* was replaced by the *lowest prosecution priority for cannabis possession for personal use*, MPs confusingly (and often consciously) referred to the liberalisation of cannabis as a *de jure depenalisation*, a *decriminalisation* and even a *legalisation*. For instance, MP Filip De Man (Vlaams Blok, Flemish extreme right party) argued

⁷³ For instance, so-called *backbenchers* (i.e. they sit in the rows of seats behind the frontbench including the more powerful and experienced MPs and Ministers) have less power than *frontbenchers* and get less opportunity to submit a question or interpellation.

that “Regarding soft drugs, expert Arlacchi agrees that the proposed legalisation of cannabis use is a bad solution” (*Hand. Kamer 1996-1997, 24 juni 1997, 175*). Accordingly, one of the primary talking-points of the Federal Minister of Justice in answering the questions and the interpellations involved clarifying that the Belgian Government was not talking about legalisation or decriminalisation.

The strategy of projecting the effects of criminalisation or legalisation based on analogies of experiences of other places (e.g. the Dutch *coffee-shop model* policy versus the American *War on Drugs*), so-called *policy platonism* (MacCoun and Reuter, 1997), was also commonly used. For instance, it was stated by some MPs that the depenalisation of cannabis possession will increase the demand (*Hand. Kamer 1999-2000, 13 juni 2000, 716/1*). Arguments were supported by the 1997 Amsterdam Treaty, the report of the Inter-parliamentary Advisory Council of the Benelux countries as well as the Dutch policy paper ‘*Pathways to the back door*’.

Additionally, an appeal to *emotions* was another important strategy. It involved inciting emotions in people in order to persuade them that a particular statement or argument is true or false, independent of the scientific evidence. As in the example below, drug use was often linked with committing suicide, HIV, death and criminal organisations.

“Drugs are the direct cause of crimes and social or health problems (absenteeism, car accidents, HIV)[...] Important enough to break the taboo and think about solutions” (Mr. Filip De Man and Mr. Gerolf Annemans, MPs Vlaams Blok, Flemish extreme right party; Parl.St. Kamer 1999-2000, nr. 0389/001).

Equally, cannabis use was repeatedly presented as society's enemy victimising young people.

“In the Parliament, the game is played in a political way. Children or youngsters are often involved in the arguments.” (Respondent 29, policy-maker).

Finally, the use of *personal opinions or experiences* (so-called *tacit* knowledge) rather than rational arguments was common practice. Many Members of Parliament complemented their role as MP with other roles (*dual role*). For instance, participants made references to their role as a doctor, as a parent or as a practitioner (e.g. health worker, animator).

“As a physician, I also believe that...” (Mr. Jef Valkeniers, MP VLD, Flemish Liberals; Hand. Kamer 1996-1997, 24 juni 1997, 175).

"When I was a youth worker, I often participated in debates with parents, to talk about drugs"
(Mrs. Martine Schüttringer, MP Ecolo, French-speaking Green party; *Hand. Kamer 1996-1997*, 24 juni 1997, 175).

5.3. Media coverage and interest groups

Internal conflicts and financial disputes rapidly decreased the power of the interest group *Belgian Cannabis Consumers' organisation* (the interest group was set up in 1994 and ceased to exist in 1998). Other **interest groups** (e.g. *A citizen just like any other* and *Association against the prohibition*) were not as vigorous anymore in promoting their ideas and persuading policy-makers through the media.

The **media** continued to provide the context for (public and) political discussion about Belgian drug policy: the time and the space spent on the *cannabis issue* resulted in (the public and) policy-makers evaluating the development of Belgian drug policy along the cannabis dimension (*priming*; McCombs and Shaw, 1972). For instance, MPs (and the public) believed that there were two positions: either cannabis use is harmless (or at least less harmful than alcohol), and hence it should be decriminalised (if not legalised); or cannabis is harmful to health, and therefore its use should continue to be prohibited.

The media coverage of the debate depended on which part of the country one lived in or which newspaper one read. The Flemish media paid far more attention to the drug phenomenon than the French-speaking media. At the same time, both parts of the country presented the debate differently. The Flemish media discourse was largely informed by a biomedical/clinical discourse (see Part I, Chapter 2) inspired by articles focusing on health problems (e.g. the relationship between cannabis use and cancer or the risks of heart attack). For instance, the Flemish newspaper *De Morgen* reported "14.000 drug addicts end up in hospitals each year" (23 December 1998, *De Morgen*). Likewise, the Flemish newspaper *De Standaard* implied that "Cannabis also contains more carcinogens than tobacco. Three joints are equivalent to 20 cigarettes." (1 December 2000, *Flemish newspaper De Standaard*). On the other hand, the French-speaking media had rather a more nuanced but critical approach, largely focusing on the unproblematic nature of persistent (cannabis) use. "The challenge is to speak the truth [...] It was previously demonstrated that there are a lot of myths [...] Overdose and the risks of a hepatitis C pandemic are often discussed but self-control strategies of drug use, proven to be successful, not." (21 November 2000, *French-speaking newspaper Le Soir*). Interviewees agreed that the differences in the political landscape as well as the characteristics of the news production (e.g. driven by publicity/sensationalism) played an important role here.

"The editors were interested in the cannabis issue, not in the other drug policy issues. They argued that the public was only interested in the cannabis discussion." (Respondent 46, journalist).

"The differences between the Flemish and Wallon media were large. Politically, a Flemish Minister did not appear in a French-speaking newspaper [...] There were also two different public opinions with different topics at play [...] Citizens only read one newspaper. The message they receive is fragmented." (Respondent 45, journalist).

5.3.1. Link media – parliamentary activity

Media coverage triggered several interpellations and questions (i.e. MPs used media statements as an introduction to their question or interpellation) but the media was used to support bills or resolutions. The following examples of an MP introducing his question and of MPs supporting their bill, illustrate this point:

"The Flemish newspaper De Morgen (20 July 1998) reported that police officers tolerated the use of soft drugs during the Gentse Feesten [...] Can you confirm this? Who is responsible for this tolerance policy? Is this in accordance with the law? (Mr. Francis Van den Eynde, MP Vlaams Blok, Flemish extreme right party; Vr. en Antw. Kamer, 9 oktober 1998, nr. 49/B152).

"[...] the average age at which youngsters start using illegal drugs has dropped from 15 to 12 years, in the last two years. (De Standaard, March 17 1999). Accordingly, people even start talking about prevention in kindergarten!" (Mr. Filip De Man and Mr. Gerolf Annemans, MPs Vlaams Blok, Flemish extreme right party, Parl.St. Kamer 1999-2000, nr. 0389/001).

Generally speaking, the media appeared to be a useful source of information for the opposition MPs: it informed them about what happened in the policy-making process. Newspapers were checked in order to *set the parliamentary agenda*. The accuracy of the media message was not taken into account (even if the sensationalists, emotive media discourse clearly fuelled misconceptions about the debate; see also §5.3.2.).

"There was a lack of information. [...] In the opposition, we mostly acted and reacted via the media. We had to create news or to react on newspaper articles. The media coverage was our only source of information." (Respondent 42, policy-maker).

The symbiosis between both worlds provided a powerful position for the media in (de)constructing success of policy-makers. The media interest in the activities of MPs guaranteed that (opposition as well as majority) MPs verbal or written reactions can pass the media gates and become news. An active search for media attention was a means of obtaining a higher public/political authority. Being aware that they speak for the public, MPs mostly formulated

their statements (one-liners) with the utmost caution (especially in sensitive matters like drug policy).

"Media and politics? The media is very important. Without media attention, a MP does not exist. [...] How are MPs elected? [...] MPs prefer an inaccurate coverage instead of no media coverage [...]." (Respondent 7, policy-maker).

5.3.2. Coverage of scientific knowledge in the media

Newspaper articles frequently included academic as well as non-academic sources: expert opinions, police statistics, emergency cases, practice-based research and (inter)national prevalence studies. On the one hand, newspapers included scientific knowledge as a response to an event that had taken place or was brought to attention. For example, the Flemish newspaper *De Morgen* reported: "... according to a study commissioned by the Ministerial Cabinet, which the newspaper could consult,..." (18 November 1998, Flemish newspaper *De Morgen*). On the other hand, scientific knowledge was presented as factual information by the media itself. "An American study has shown that 10% of the people who have ever experimented with drugs get addicted" (14 May 1998, Flemish newspaper *Gazet van Antwerpen*).

The presentation of scientific knowledge in the media was often inaccurate or distorted. First of all, newspapers commonly omitted methodological and contextual information. Prominence was given to very general and vague labels of scientific knowledge.

*"This is supported by findings of the US National Institute of Mental Health." (8 July 1998, Flemish newspaper *De Morgen*).*

*"A recent publication of a French report argues that cannabis may be less harmful than tobacco" (17 July 1998, French-speaking newspaper *Le Vif*).*

Equally, journalists often represented a rather simplistic and one-sided story by referring to someone (e.g. scientist, practitioner or former drug user) who confirmed their story. Journalists seemed to not pass up their story by displaying research results or experts which would contradict it. For instance, even though the *stepping-stone theory* has proved to be unsustainable and lacking any real evidence base, this perspective still trickled down into the media discourse without comment.

*"Studies in the U.S. have shown that one in 10 of 18 year-old youngsters gets addicted. In other words, the progression from soft to hard drugs is much easier than a few years ago." (27 February 1999, Flemish newspaper *Het Nieuwsblad*).*

Furthermore, in slow news periods, some newspapers took the opportunity to *recycle* scientific knowledge that had been published earlier. While it had been discussed before in Flemish newspapers De Standaard (July 1997) and Gazet van Antwerpen (October 1997), another Flemish newspaper presented the particular registration study (regarding the number of prosecutions in Flanders) as 'new' in April 1998. *'While presenting the new Ministerial Directive [...] Antwerp researchers announced that the number of booked drug users has never been so high' (28 April 1998, Flemish newspaper De Morgen)*. Although these results were old, newspapers presented them as new (by using active verbs) which may generate the impression among the public (and policy-makers too) that a new study confirms the conclusions that were made earlier (as they only get two separate snapshots).

Journalists countered these problems by pointing to the personal approach of the journalist involved (which is never neutral) as well as to the characteristics of news production (e.g. limited space, driven by publicity/sensationalism and economic concerns):

"A journalist is never neutral even when he tries to be objective [...] Also the selection of experts was not totally neutral [...] Media did not succeed in reporting in an objective, precise or complete way. This was mainly because of the lack of time and the difficulty of reporting information correctly. The topic of drugs as such is also very complex [...] The phenomenon evolved quickly, scientific knowledge evolved, society evolved. So, it was difficult to stay up-to-date." (Respondent 53 journalist).

"I search for experts who are knowledgeable about the topic. I also read other journals to find out what they write about the topic. That is often the way it works in journalism [...] One time, I remember, my editorial chief forbade me to speak to someone because he was too much in favour of depenalisation." (Respondent 54, journalist).

Given the strong link between the parliamentary process and the media, the media operated as *linking mechanism* or *knowledge distributor* between science and policy. Parliamentary activities (especially *bills* and *resolutions*) were regularly supported by scientific knowledge that was framed in newspapers (thus as an indirect reference). In particular, we found that scientific knowledge which was repeatedly or extensively included in the newspapers, had a significant chance of playing a role in the parliamentary activities. An MP introduced his question as follows:

"On 18 December 1999 I have read in the Flemish newspaper 'Het Belang van Limburg' that American research has confirmed that cannabis contains more carcinogens than tobacco" (Mr. Francis Van Den Eynde, MP Vlaams Blok, Flemish extreme right party; Vr. en Antw. Kamer, 4 februari 2000, nr. 50/22, 2415).

However, the inclusion of scientific knowledge as represented by the media was highly prone to *political/symbolic utilisation*. The lack of any contextual information in media coverage (e.g. ‘some researchers explain’) as well as the selective inclusion of scientific knowledge, both resulted in policy-makers *picking and choosing* (also called *trawling*; Stevens, 2007a) what was most supportive of their discourse. Even though scientists admitted that media coverage is a way to exert some pressure on policy-makers (e.g. entering the public debate may give the scientist the label of credible expert; see also above), they remained rather hesitant about using media as an instrument to influence policy-makers. In other words, scientists who engaged in the public debate and shouted loudly with rather simple messages, were rarely conclusive. Their advice, however, became an instrument in the political game. Interviewees assumed that establishing a good relationship with some journalists was one way to solve this problem.

“The relationship with the media is difficult. On the one hand, media coverage of scientific knowledge was often wrong, but on the other hand, you can take advantage of it [...] If we obtained some interesting results, we used the media to influence the policy-making process in a certain way [...] I always tried to establish a good relationship with journalists. You have to be able to trust their writing.” (Respondent 24, scientist).

6. Scientific knowledge: progress is initiated

Scientific knowledge regarding the drug phenomenon in Belgium increased slowly during the intermezzo (De Ruyver, et al., 2004). The Verhofstadt I Government stimulated the development of scientific research and evaluation. In addition to the evaluation study of De Ruyver et al. (2000), several initiatives were taken (Devroe, 2010). First of all, the Belgian Federal Science Policy Office (previously known as the Federal Office for Scientific, Technical and Cultural Affairs (OSTC)) established research programmes in support of socio-economic (1995-2000) and judicial policy themes (1997-1998). In later years, a ‘Social Cohesion’ research programme (2000-2004) was also established. These research projects, commissioned by the Belgian Federal Science Policy Office, included a study regarding drug use in prisons (1999-2000; social and economic research programme), an inventory of drug-related research (1995-1996; social and economic research programme) (De Ruyver, et al., 1997; Verslag namens de Parlementaire Werkgroep belast met het bestuderen van de drugproblematiek, *Parl.St.* Kamer, 1996-1997, 1062/1-3; see also above), a study about the public expenditures of Belgian drug policy (2000-2004, research programme ‘social cohesion’), and so on.

Even though drug research in Belgium remained rather fragmented and incomplete, general trends observed in Belgium were very similar to those noticed in other European countries: an increasing drug use with cannabis being the most used drugs and young adults reporting higher

rates of cannabis and ecstasy use⁷⁴, a stable but high level of hepatitis B and C among intravenous drug users and an increase in cannabis treatment demands (EMCDDA, 1999; EMCDDA, 2000).

During this intermezzo, the three **'Drugs Policy 2000' conferences** took place. Each of these conferences clearly included matters recently addressed by the Parliament and/or Government. For instance, in 1997, during the fifth conference, a lot of attention was given to the final report of the PWG which was submitted a few months before. Panel sessions concerned topics like the professional statute of prevention workers, the controlled substitution of heroin, and the lowest prosecution policy for cannabis possession. Similarly, during the seventh conference (1999), the emphasis was on the development of an integrated and coordinated drug policy, the implementation of prevention projects on schools and drug treatment in prison, and the international enforcement of drug traffic. The programme of this conference clearly took into account the issues stipulated by the 1999 Federal Government Policy Statement. Due to the close link with the political agenda, these conferences provided an ideal forum to discuss particular issues among scientists, practitioners and (sometimes) policy-makers as well as to build up a (new) network (i.e. in the 1999, a six-party Coalition led by Flemish Liberal Leader Guy Verhofstadt was voted into power). At the same time, policy-makers were allowed to test their policy against the views and opinions of practitioners and scientists. According to some interviewees, these particular conferences influenced drug policy discourse and served as precursors of the coordination structures like the Drug Health Policy Cell and the General Drugs Policy Cell (see also Chapter 5).

"Those conferences [...] really exercised the minds and stimulated interaction. I think that the consciousness of shared responsibility eventually has led to more cooperation which, in the next phase, has expanded to the Drug Health Policy Cell and the General Drugs Policy Cell [...] It also stands for the foundation and development of a broader discourse: it is not only justice but also treatment and public health." (Respondent 26, practitioner).

7. Conclusion

Between 1997 and 2000, the subject of drugs was largely overshadowed by the debates over the reorganisation of the entire police and justice system and the Dioxin Affair. However, some important political and/or scientific movements have had certain consequences for the development of Belgian drug policy and the interaction between science and policy in particular.

⁷⁴ The lifetime prevalence of cannabis use in the adult population increased from 1994 to 1999 from 12.8% to 20.8%. At the age of 15-16 years, the proportion of life time users increased from 14.9% (1994) to 23.7% (1998). Cannabis treatment demands raised from 3.8% (1993) to 14% (1998). The rates of HBC and HCV infections were stable at respectively 24% (HBC) and 38-52% (HCV) of tested IVDUs (having injected at least once) (BIRN, 2000).

First of all, it became clear how scientific knowledge was used or regarded by members of the **Government**. Except for the launch of a *new Ministerial Circular Letter* in April 1998, many recommendations of the PWG were not implemented during the intermezzo. The Ministerial Circular Letter followed the conclusions of the PWG: possession of illegal drugs remained punishable, and the lowest prosecution priority was given to the possession of cannabis for personal use. For the first time, a distinction was made between the prosecution policy with regard to cannabis and to other illicit drugs. However, consistent with the *political/symbolic utilisation* of scientific knowledge (Weiss, 1979), the Ministerial Circular Letter ignored the fact that vague notions such as ‘public nuisance’, ‘problematic use’ and ‘limited possession for personal (single or occasional) use’ were heavily criticised by academics (and practitioners) (Kaminski, 1998). Consequently, the inclusion of these vague notions (as well as a wide range of possible interventions) continued to result in arbitrariness and a lack of uniformity in prosecutions by different Public Prosecutor’s offices (De Ruyver, et al., 2000). In a similar vein, on the threshold of the Federal elections in 1999, policy-makers used scientific knowledge rather strategically. In order to please their electorates and gain authority, some of them used a well-stocked portfolio of commissioned research to demonstrate that they attach importance to scientific knowledge. Clearly, given this context, it is advisable to classify this type of use, termed *status model* in the literature (Cross, et al., 2000), into Weiss’s knowledge utilisation framework as a sub-type of political/symbolic utilisation (Weiss, 1979).

In 1999, Belgian voters rejected the longstanding Coalition Government of Christian Democrats and Socialists and voted into power a Coalition led by Flemish Liberal Leader Verhofstadt. This change turned out to be an important *facilitator* of the development of a public health drug policy. It also increased the credence given to scientific knowledge as an instrument of developing drug policy. On the one hand, it was the Minister of Public Health who was eventually given the responsibility of developing an integrated and integral drug policy. On the other hand, the Verhofstadt I Government emphasised the importance of scientific knowledge as a resource in policy-making (*evidence-based policy*). Accordingly, the number of initiatives funded by research programmes of the Belgian Federal Science Policy Office slowly increased. One of the most important developments was the evaluation of the final conclusions of the PWG and the Ministerial Circular Letter of 8 May 1998 (De Ruyver, et al., 2000). This evaluation study was assigned to Prof. Dr. Brice De Ruyver (and Prof. Dr. Joris Casselman) as a reflection of his expertise and networks (due to the organisation of the national conferences ‘Drug Policy 2000’) as well as his important role in the PWG (as an *observer-turned player*; Loader and Sparks, 2011). Furthermore, Prof. Dr. Brice De Ruyver became the security advisor to Prime Minister Guy Verhofstadt in April 2000. The prominent role of this scientist in the policy-making process (at the govern-

mental level in particular) is quite exemplary and unique in the Belgian (drug policy) context, and will be discussed in Chapter Four.

Secondly, this turbulent intermezzo also illustrated the different modalities through which scientific knowledge contributed to the **parliamentary process**. Making use of their capacity to monitor and control the activities of the Government, opposition MPs engaged in the discursive struggle between social and public health issues and law enforcement concerns. MPs who submitted questions, interpellations, resolutions, bills or resolutions often used scientific knowledge (mainly including data from policy-funded studies or epidemiological research) to support their arguments. In particular, MPs selected scientific knowledge on the basis of their political ideology and their personal preferences/networks/education (*political/symbolic utilisation*). In most cases, **scientific knowledge** was presented *without naming the author or institutions*. When *footnotes* and a *bibliography* were included, it became clear that these references were often incomplete or out-of-date. Instances where scientific knowledge was *misused or misinterpreted* (e.g. making facile interpretations, false generalisations and causalities) were also observed in the parliamentary debates. Given the prevalence of these examples, Weiss's political/symbolic model (Weiss, 1979) seems to be too simplistic: it fails to distinguish between instances where research is truly being used as opposed to where research is being misused or misinterpreted.

Institutional characteristics of the political setting and the individual experiences of policy-makers impacted on the use of scientific knowledge in the parliamentary process (**barriers**). Parliamentary debates consisted of bargaining and negotiation using whatever arguments that could be mustered in support of their position. Over the months of the parliamentary debates, the use of *political tactics* occurred. MPs used rather extravagant vocabulary and metaphors to support their arguments, or relied on their personal opinions or experiences more often than on scientific knowledge. A similar strategy was inciting an emotional response in people in order to persuade them that a particular statement or argument was true or false. Another barrier to knowledge utilisation in the parliamentary process can be attributed to the *international framework*. While using non-academic reports of international organisations (e.g. EMCDDA, WHO) or conclusions of international drug policy papers (e.g. the Inter-parliamentary Advisory Council of the Benelux countries (1998), Dutch policy paper 'Pathways to the back door' (2000), ...), compliance with the (developing) international framework was a frequent argument in the political debates in refuting scientific advice.

Furthermore, policy-makers (Government and Parliament) commonly mentioned turning to scientists from their *personal network* for advice or background information (see also Ritter,

2009). Interaction with policy-makers was likely to improve the utilisation of scientific knowledge in the policy-making process. The conferences 'Drugs Policy 2000' provided a useful setting to discuss the issues central to parliamentary or governmental debates among scientists, practitioners and (sometimes) policy-makers as well as to maintain or build up a (new) network. In particular, given the new Coalition, these conferences worked as a **facilitator** of the science-policy nexus: scientists got to know the new key policy players and were able to build relationships with them (or their representatives). Exemplary too is the initiative of practitioners on the threshold of the 1999 elections. Dutch- and French-speaking practitioners united their concerns and interests related to budgets or staff in a Policy Memorandum (Memorandum group, 1999). This seemed to be a successful strategy. The distribution of the Policy Memorandum resulted in a hearing of these practitioners by the Minister involved. Similarly, the Policy Memorandum underpinned some arguments of MPs in the parliamentary debates.

While **interest groups** were not as vigorous during the intermezzo, a significant cooption of media issues in the parliamentary debate was observed. For instance, by means of triggering questions or interpellations in the Parliament, the **media** directed the parliamentary discourse towards the cannabis issue (*priming*; McCombs and Shaw, 1972). Media also influenced the value placed on scientific knowledge in the parliamentary debates. On the one hand, media statements seemed to be an important resource in supporting assumptions (instead of scientific knowledge). On the other hand, the media frequently acted as a source of scientific knowledge. However, due to the characteristics of news production (e.g. limited space, driven by publicity/sensationalism and economic concerns), media coverage did not provide a true reflection of the scientific results (e.g. incorrect or vague references, lack of accuracy of percentages) but rather generated *political/symbolic utilisation* by MPs. In spite of this, we observed that media operated as a strong *linking mechanism* between science and policy. It became clear that scientific knowledge which was included in the press stood a good chance of playing a role in parliamentary activities. Thus, the media may be an important *facilitator* of the science-policy nexus at the parliamentary level, since most research fails to go beyond academic publications.

In 2000, the drug issue gradually re-entered the political agenda in Belgium. The Belgian Government proceeded to translate the final conclusions and recommendations of the PWG into an official policy document. We will discuss the development of the first national drug strategy (2001), the second milestone in Belgian drug policy between 1996-2003, in the following chapter.

Chapter 4 The Federal Drug Policy Note (2001)

An Inter-Cabinet Working Group (ICWG) had been set up in order to develop the first national drug strategy (as was directed by the *1999 Federal Government Policy Statement* and the *2000 Federal Safety and Detention Plan*). The Federal Drug Policy Note, the second milestone in the development of Belgian drug policy between 1996 and 2003, was eventually adopted by the Government on 19 January 2001 (Federal Government, 2001a). With the launch of the Federal Drug Policy Note, there was finally an official document putting forward the goal of a *coherent* and *comprehensive* Belgian drug policy. What followed was a chaotic and confusing political and media debate.

1. First national drug strategy: the official elaboration of the recommendations of the PWG

The Federal Drug Policy Note (2001) indicates that the drug phenomenon is considered to be a permanent social reality (i.e. *normalisation* policy). Accordingly, in the framework of an *integral and integrated policy*⁷⁵, a discourse with a purely criminal focus was officially replaced by a discourse where the drug problem was primarily considered a *problem of public health*. The Federal Drug Policy Note covered both illicit and licit drugs and different Federal Ministers were considered responsible for the implementation of the national drug strategy⁷⁶ (De Ruyver, et al., 2004; De Ruyver, et al., 2007). The main priorities of the Federal Government were to reduce the number of drug users, the physical and mental effects related to drug use, and the effects of the drug phenomenon on the society. Accordingly, three pillars were put forward: (1) prevention of drug consumption; (2) harm reduction, treatment and re-integration, and; (3) law enforcement as the last resort (Federal Government, 2001a; p.7). This approach, supported by the first Verhofstadt Government (1999-2003), was in line with the final conclusions and recommendations of the PWG and international trends (e.g. Inter-parliamentary Advisory Council of the Benelux countries (1998); European Action Plan to Combat Drugs 2000-2004⁷⁷).

⁷⁵ 'Integral' refers to the idea that drug phenomenon is multidimensional and, therefore, all its aspects must consequently be tackled. 'Integrated' means the involvement of and (vertical as well as horizontal) harmonisation between all relevant actors representing the different aspects (De Ruyver, et al., 2009).

⁷⁶ The Minister of Public Health, Food Chain Safety and the Environment, the Minister of Internal Affairs, Minister of Justice, Minister of Social Affairs, Minister for Social Integration, Minister of Mobility and Transport (traffic safety) and the Minister for Small Businesses, Self-Employed, Agriculture and Science policy.

⁷⁷ The European Action Plan to Combat Drugs 2000-2004 stressed the need for international cooperation, integration of drug control and priority to health, education, research and training activities and instruments to combat social exclusion. The European Action Plan to Combat Drugs 2000-2004 also clearly indicated the need to emphasise the imperatives of public health (De Ruyver, Vermeulen and Vander Beken, 2002).

The first national drug strategy consists of three distinguishable parts. The *first part* captured the recommendations of the PWG (p.8-14). The *second part* described the actual state of the drug problem and captured recommendations of the PWG that had already been implemented by the time the policy was created (p.14-31). The *third part* contained five action points (based on the three pillars of the Federal Drug Policy Note) and followed the same construction as the first two parts (p.31-68): (1) a global and integrated approach; (2) evaluation, epidemiology and research; (3) prevention; (4) health care, harm reduction and reintegration, and; (5) repression. The execution of the action points received a substantial budget input: €12.4 million was made available for preventive or treatment projects, the creation of the General Cell Drugs, research, and so on. (De Ruyver, et al., 2004). In accordance with the recommendations of the PWG, the Federal Drug Policy Note dictated the use of this budget in favour of domains other than repression (e.g. prevention, treatment). Nevertheless, some initiatives were still considered too expensive (e.g. the creation of residential time-out projects, the establishment of a controlled heroin maintenance project) (Internal communication Memorandum group, 26 October 2000).

The first action point stressed the need for cooperation and coordination between different policy actors which was already emphasised by the Parliamentary Working Group on drugs (PWG). In pursuing a **global and integrated approach**, the establishment of a *Health Policy Cell* and a *General Drugs Policy Cell* was one of the most important action points (Federal Government, 2001a; p.31). Within the framework of the Federal Drug Policy Note, the *collaboration between justice and treatment* (and thus the alternative measures towards drug users in the criminal justice system) was promoted as well. Furthermore, it was stated that Belgium had to be involved in *international relationships and collaborations*: EMCDDA, WHO (as national counterparts of European alcohol action plan / WHO-Europe), Pompidou working groups and European Union projects (Intereg-, Euregio-, Multicity- projects). Finally, in order to manage the diversity of actors and funding sources, the need for a *detailed overview of the public expenditures* was underlined. For instance, the importance of the study 'Belgian Drug Policy in numbers' (2000-2004, research programme 'social cohesion') was stressed (Federal Government, 2001a; p.15).

In accordance with the recommendations of the PWG (and the priorities of the Federal Safety and Detention Plan), the Federal Drug Policy Note included references to the Governments' (future) investment in **research and evaluation**. It was argued that policy-makers needed reliable and accurate data about the nature and the extent of the drug phenomenon in order to formulate policy priorities, plan adequate interventions, and evaluate long-term policy (Federal Government, 2001a). Even the concept *evidence-based* was adopted. The Federal Drug Policy Note aimed for the development of (1) *uniform registrations* of problematic drug users and (2) *epide-*

miological research of drug use among general populations, school populations or at-risk populations. The evaluation study of medical-social treatment centres for drug users (MSOC's) was referred to as one important illustration of this particular action point (Federal Government, 2001a; p.40-41). Likewise, it was argued that questions on drug use had to be included in the national Health Interview Survey (HIS) of 2001.⁷⁸ Furthermore, the Minister in charge of the Federal Science Policy received an annual budget to organise and manage a research programme supporting decision-making in the field of illegal drugs. The *transformation of the national Focal Point* (i.e. Scientific Institute of Public Health (WIV)) into a Belgian Monitoring Centre on Drugs and Drug addictions (BMCDDA) was also recommended. The BMCDDA had to fulfill the tasks requested by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) as well as further developing the Early Warning system.

A third objective was to enhance **prevention**, a competence of the Federate governments. In accordance with the recommendations of the PWG, the Federal Drug Policy Note included a number of actions (e.g. conferences, prevention campaigns, etc.) regarding *the use of psychoactive medicines, the problem of driving under the influence of drugs and the alcohol/tobacco policy* (Federal Government, 2001a; p.41-46).

The Federal Drug Policy Note also aimed to develop a more integrated legal framework for **treatment, harm reduction and reintegration** through local care networks (*care circuits*) and *case management*. In these networks, some populations had to receive particular attention: e.g. *youths* or psychiatric patients with drug problems (*double diagnosis*). Similar ambitions related to the urgent need for an increase in the capacity of *crisis care* centres and better organisation of *aftercare* for former drug addicts. It was also determined that collaboration between justice and treatment had to be improved through cooperation protocols and agreements considering and respecting the different goals and principles of both sectors (e.g. professional confidentiality) (Federal Government, 2001a; p.33). Finally, the Federal Government advocated the need to re-think the *international conventions* in order to produce a realistic response to cannabis use and to elaborate harm reduction initiatives. Regarding the harm reduction initiatives, the Federal Drug Policy Note (2001) also included the Federal Government's aim to evaluate controlled heroin maintenance-projects (the establishment of a controlled heroin maintenance project was out of the question) (Federal Government, 2001a; p.54-55).

⁷⁸ The questions on drugs were indeed included in the national Health Interview Survey (HIS) of 2001. The number of questions on drug use were however limited: two questions on cannabis prevalences and two questions on XTC-amphetamines (see also below, Chapter 5).

In the field of **repression**, the recommendations formulated by the PWG were included: the criminal response was primarily aimed at the *illegal production and the trade of raw materials, against synthetic drugs and against the cocaine and heroin trade and to the public nuisance*. At the same time, the approach towards drug users was supported by the so-called *ultimum remedium*. The focus was on a differentiation and individualisation of the criminal intervention, taking into account the specific situation (cannabis versus other illegal drugs; experimenting; problematic use; personal use; dealing with profit, and so on). In accordance with this point of view, the Federal Government planned to *amend the Belgian Narcotic Drug Law of 1921* on two counts (Federal Government, 2001a; p.58). First, a distinction between cannabis and other illegal drugs was supported and secondly, the qualification ‘use of illicit drugs in a group’ had to be eliminated. The modalities concerning the distinction and the prosecution policy had to be outlined in a Ministerial Circular Letter. It was stated that the Ministerial Circular Letter had to be based on the recommendations of the PWG and had to meet the conditions stipulated by the evaluation study (De Ruyver, et al., 2000). Accordingly, the Federal Drug Policy Note put forward that the term ‘public nuisance’ referred to *‘the use in the presence of minors or in situations of public nuisance as provided in art. 135, § 2, 7 of the New Community law’*⁷⁹; that problematic use included *‘a user’s pattern that can no longer be controlled, that is reflected in for example drug dependency⁸⁰, drug-related crime, ...’*; and; that quantity for personal use referred to *‘a quantity of which one can say that it is not intended for supply’*. Based on these considerations, it was recommended that, in the case of possession of an amount of cannabis for personal use by an adult, without the presence of public nuisance or problematic use, the police were obliged to enter a simple, anonymous registration of the facts. Problem users of cannabis or other illegal drugs needed to be diverted to a *judicial case manager* who directs the user to (drug) treatment. Treatment workers then give *therapeutic advice* on whether treatment is recommended and, depending on the advice, the Public Prosecutor may decide to proceed with prosecution or not, or to apply alternatives such as transaction⁸¹, mediation or praetorian probation. Thus, although the Minister of Public Health was assigned as the coordinator of the Inter-Cabinet Working Group (see below), the control remained firmly in the hands of police and the justice system.

⁷⁹ This law concerns the local administrative sanctions. It gives the municipalities the possibility of adding behaviours described as public nuisance to their police regulations and respond to those offences with administrative procedures (Wet van 13 mei 1999 betreffende de invoering van de gemeentelijke administratieve sancties, B.S. 10 juni 1999).

⁸⁰ This included a reference to the DSM-IV which provides a common language and standard criteria for the classification of mental disorders.

⁸¹ A transaction is a unilateral offer by the Public Prosecutor to pay a certain amount of money within a limited time.

Furthermore, the Federal Drug Policy Note also emphasised the importance of a more *scientific elaboration of the concepts of drug-related criminality and nuisance* (in addition to the fragmented statistics) (Federal Government, 2001a; p.25). Finally, in accordance with the final conclusions and recommendations of the PWG, the development of a *prison drug policy* was recommended. In pursuing this, attention had to be given to the prevention of drug use in prison, the organisation of substitution treatment, the creation of drug free units, and so on.

2. An Inter-Cabinet Working Group (ICWG): the development of the Federal Drug Policy Note

The Federal Government, under the coordination of Federal Minister of Public Health Magda Aelvoet⁸² (following the public health approach), started working on a national drug strategy in 2000. An Inter-Cabinet Working Group (ICWG)⁸³ including (representatives of) the Federal Ministers of Justice, Internal Affairs, Social Affairs, Economic Affairs and Public Health was established on the request of the Council of Ministers. The representative of the Prime Minister, security advisor Prof. Dr. Brice De Ruyver, participated in the ICWG (see also below, §2.1.1.). He acted as a dynamic and proactive mediator between the representatives of the different Coalition partners in order to keep the discussion going. His research expertise, his (inter)national network, and his key position as the security advisor to Prime Minister Guy Verhofstadt enabled him to play a prominent role.

“Prof. Dr. Brice De Ruyver was in close contact with the Minister of Justice Marc Verwilghen and he listened to the different powerful actors of each Coalition partner. The Prime Minister Guy Verhofstadt, the Liberals and the Socialists also listened to him. He had a lot of influence.” (Respondent 49, policy-maker).

Ministers do not have the time to be intensively involved in every topic. Entrusting their technically and politically skilled representatives with this task, the Federal Drug Policy Note was for a large part developed without the direct participation of the Ministers.

⁸² Magda Aelvoet (AGALEV, Flemish Greens) was Vice-Minister and Minister of Consumption Affairs, Public Health and Environment during the Verhofstadt I Government (1999-2003). However, she resigned in 2002 as a result of a scandal related to the controversial supply of weapons to Nepal.

⁸³ As the preparation and writing of the Federal Drug Policy Note really took place in the Inter-cabinet Working Group (as a fundamental preparation of the final discussion in the Council of Ministers (in case of consensus) or the Inner Cabinet (in case no consensus is reached)), it can be perceived as a main actor in the decision-making process. The Inner Cabinet chaired by the Prime Minister constitutes a forum in which Coalition parties reach major decisions on conflictual matters, which the Council of Ministers then formally ratifies (Brans, De Winter and Swenden, 2009). It is important to note that, as a result of the so-called Copernicus reforms of the Government (1999-2003), an Inter-Cabinet Working Group is now called a Policy Coordination Working Group.

Many action points of the Federal Drug Policy Note were decided easily. Three topics challenged the cohesion of the Coalition partners (Internal communication Ministerial Cabinet, 17 January 2001). First, in the ‘drug plans’ (see Chapter 1, §2), the *funds* related to treatment were assigned to the Minister of Interior Affairs. It was proposed to assign these funds to the Minister of Public Health instead, to be more in accordance with the public health approach. As became clear in the Federal Drug Policy Note, this particular assignment of funds eventually became the responsibility of the Minister of Public Health in close cooperation with the Minister of Interior Affairs.

Secondly, the *division of budgets among the action priorities* was also debated among the Coalition partners in the Government. Consequently, as a (preliminary) solution, the Federal Drug Policy Note did not include any concrete budgets on most action points.

Thirdly, the main point of discussion was the *direction of the cannabis prosecution policy*. A political (discursive) struggle developed between the Coalition partners. Regardless of any individual disagreements among policy-makers, the French-speaking Socialists and the Flemish and French-speaking Green party were in favour of a more far-reaching liberalisation. The other Coalition partners like the Flemish Socialists (SP), the French-speaking Liberals (PRL-FDF-MCC) and the Flemish Liberals (VLD), were opposed to what they called ‘a too liberal policy’.

Below, we address the (f)actors that influenced the ICWG and, thus, the development of the Federal Drug Policy Note.

2.1. Scientific knowledge and scientists

Between meetings of the ICWG, representatives of the Federal Ministers often consulted (inter)national scientists to get some background information, unravel a problem, determine clear definitions (e.g. of legalisation or depenalisation) or support or refute an argument in the discussion. Scientific knowledge was perceived as a necessary resource in the policy-making process, useful in the development of a policy and in the evaluation of policy choices.

“Scientific knowledge is necessary to understand a problem and how to tackle it. [...] Essentially, it is a search for the truth and accuracy.” (Respondent 37, policy-maker).

“Scientists and practitioners were not invited into the Inter-Cabinet Working Group, but we always tried to prepare ourselves and to check which issues were of any importance, which decisions were supported or not, which initiatives worked or not [...] Concepts like legalisation, depenalisation, decriminalisation... it was the task of scientists to elucidate these concepts clearly.” (Respondent 20, policy-maker).

If we perceive *use* as simply including references to scientists and scientific studies, several examples were found. Some publications and conference contributions of (inter)national scientists were included (Federal Government, 2001a; p.57). Equally, the Federal Drug Policy Note included references to the 1994 Consensus Conference and the national conferences 'Drug Policy 2000' (Federal Government, 2001a; p.53). However, as with the Parliament, some of the references to scientific knowledge or experts were labelled in a general manner.

"Ethnic minorities who abuse illicit drugs are apparently underrepresented in some treatment services [...] A lot of research on this topic exists." (Federal Drug Policy Note; p.48).

"Research, Belgian experiments and foreign experiences stressed the desirability of case management in substance abuse treatment." (Federal Drug Policy Note; p.49).

2.1.1. Types of knowledge utilisation

We found several types of knowledge utilisation (Weiss, 1979) in the activities of the ICWG. First of all, through the hearings of the PWG, scientific knowledge *enlightened* the development of Belgian drug policy. The final conclusions and recommendations of the PWG (also outlined in the *first part* of the Federal Drug Policy Note) provided the fundamental, but at the same time rather determining, framework for a debate within the ICWG. This can be considered as an indirect pathway through which scientific knowledge seeped into the policy discourse (cfr. *conceptual utilisation*). Likewise, the *conceptual* influence of highly attended national conferences 'Drug policy 2000' on the Federal Drug Policy Note was noted.

"The report of the PWG and the evaluation study [...] The Federal Drug Policy Note had to be in accordance with these documents [...] We did not have to start 'from scratch.'" (Respondent 50, scientist).

"I am sure that the discourse of the Federal Drug Policy Note is inspired by the conferences 'Drug Policy 2000' and especially by some scientific conclusions. There certainly was an influence which was then included in the political debate." (Respondent 36, policy-maker).

Secondly, the evaluation study '*Belgian drug policy in the year 2000: state of the art 3 years after the recommendations of the PWG*' (De Ruyver, et al., 2000) clearly inspired the ICWG (Federal Government, 2001a). The *second part* of the Federal Drug Policy Note (p.14-31) described the main conclusions of the evaluation study (De Ruyver, et al., 2000) detailing the actual state of the drug problem and capturing recommendations of the PWG that had already been implemented by the time the policy was created. Despite the multiple factors that may affect the ICWG (see below), the recommendations of the evaluation study were influential in determining the specif-

ic policy actions by the Federal Government (*third part Federal Drug Policy Note*; see above, §1). The evaluation study fitted with the mood of the time and answered the questions which were at the top of the political agenda since the PWG (1996-1997). For instance, the evaluation report stressed that, in order to finally realise an *integral and integrated drug policy* with a vertical and a horizontal policy coordination, “*the establishment of a General Drugs Policy Cell must be considered as necessary and crucial*” (De Ruyver et al., 2000, p.8). Accordingly, the establishment of a *General Drugs Policy Cell* was one of the most important action points of the Federal Drug Policy Note in pursuing a global and integrated approach (Federal Government, 2001a, p.31). As another example, inspired by the particular recommendations of the evaluation study regarding *the problem of driving under the influence of illegal drugs and medication* (De Ruyver et al., 2000, p.13-15, 23)⁸⁴, the Federal Drug Policy Note included a number of actions (e.g. prevention campaigns, implementation of drug tests, etc.) (Federal Government, 2001a, p.43). Also the persistent concern about the lack of reliable numbers or registrations and the lack of (funding for) epidemiological studies on drug use was re-emphasised in the evaluation study (De Ruyver et al., 2000, p.20-21). In the Federal Drug Policy Note, the Federal Government eventually demonstrated commitment and responsiveness: e.g. by means of establishing a research programme supporting decision-making in the field of illegal drugs (Federal Government, 2001a, p.37-41).

As this evaluation study gave direction to Belgian drug policy, and finally led to action/implementation by the Federal Government, we may perceive this as an example of *instrumental knowledge utilisation*. Although this is the most typical interpretation of the science-policy nexus, it is the least common example of knowledge utilisation (Edwards, Strang and Jaffe, 1993; O’Dwyer, 2004; Brambila, et al., 2007). The fact that an evaluation study fulfills this particular role fits with the literature on *evidence-based policies* (Devroe, Deschamps and Hannes, 2008). As stated by Devroe (2002), ‘*evaluation studies lead to direct measurable and usable results for policy-makers*’ (p.181).

The use of this evaluation study had been promoted by the role of Prof. Dr. Brice De Ruyver. As the security advisor to Prime Minister Guy Verhofstadt, Prof. Dr. Brice De Ruyver acted as a so-called *observer-turned player* (Loader and Sparks, 2011). He was able to function equally well in both the academic and political world and speak both languages fluently. Such a role required a substantial transition by the scientist, who moved from a position of absolute ‘outsider’ to a knowledgeable ‘outsider’.

⁸⁴ “*It is advisable to address the use of medications and illegal drugs in traffic*” (p.13). “*In addition to the repressive approach, there should be more attention to prevention*” (p.23). References regarding the national conference ‘Drug Policy 2000’ and the study into the consequences of drug use for road safety (ROSITA - 1999) were included (p.14).

"A scientist has to be aware that he is a technician, not a politician. A scientist presents his knowledge and expertise but he remains a technician. A scientist does not determine the direction of the policy [...] Working at the governmental level is special: the aim is to unite the representatives of the Ministers and to decide." (Respondent 50, scientist).

Having a privileged position, he gradually discovered how policy was made and who or what exerted the most influence. His role enabled him to promote the utilisation of his own scientific research and that of others in the political arena.

"The importance of the evaluation study? This is certainly linked with the 'Brice De Ruyver' factor; he was standing alongside the Prime Minister." (Respondent 15, journalist).

"The evaluation study was very important. The content of the report and the permanent dialogue with the researchers were used to advance the debate." (Respondent 34, policy-maker).

However, we also found that some recommendations of the evaluation study were used in a more *political/symbolic* way. It was recommended that the Federal Drug Policy Note resolve the lack of uniformity in prosecutions of cannabis possession between different Public Prosecutor's offices. The evaluation study attributed a large part of this problem to rather vague notions such as 'public nuisance', 'problematic use' and 'limited possession for personal (single or occasional) use' (De Ruyver, et al., 2000, p.41). However, we observed an important shortcoming in the efforts to address this deficiency. Although the Federal Drug Policy Note introduced new definitions⁸⁵, they still remained too blurry and open to interpretation by police officers, prevention workers, social workers and the general public (Durieux, 2002; Guillain, 2003; Decorte, et al., 2005). In other words, we found a rather *political/symbolic* utilisation: in the Federal Drug Policy Note reference was made to the Governments' investment in the research, by way of demonstrating commitment and responsiveness. Nevertheless, the vagueness of these notions was not resolved. It is clear that the impact of the *observer-turned player* on the facilitation of knowledge utilisation by policy-makers is also limited.

In a similar vein, Prof. Dr. Brice De Ruyver promoted the utilisation of other (international) scientific research. Taking into account that policy-makers are also responsible for the *international* aspects of their policy competences, several (inter)national drug policy studies (with special

⁸⁵ As stated in §1, the Federal Drug Policy Note put forward that the concept 'public nuisance' referred to 'the use in the presence of minors or in situations of public nuisance as provided in art. 135, § 2, 7 of the New Community law'; that 'problematic use' included 'a user's pattern that can no longer be controlled, that is reflected in for example drug dependency, drug-related crime, ...'; and; that 'quantity for personal' use referred to 'a quantity of which one can say that it is not intended for supply'.

attention to the cannabis policy) were compared (Federal Government, 2001a, p.57-58).⁸⁶ Furthermore, the analysis of drug policies in other European countries (the Netherlands, France, Germany, Luxembourg, the United Kingdom), included in the attachment of the Federal Drug Policy Note, was very much a result of the promotion by this *observer-turned player*.

"I remember that we took into account some international studies of drug policies in European countries and the prevalence rates provided by the EMCDDA. Brice De Ruyver joined the Inter-Cabinet Working Group to stimulate the debate. He also urged more scientific support." (Respondent 20, policy-maker).

In general, these analyses had an influence on the development of the Federal Drug Policy Note. For instance, the Federal Drug Policy Note adopted a positive appraisal of the Dutch decentralised approach of drug nuisance and addiction treatment towards foreign people. The positive Dutch and German experiences with regard to the controlled supply of heroin were also taken into account, even though it was noted that there was no support for experiments with controlled heroin maintenance in Belgium. Likewise, the modalities concerning cannabis policy were also discussed within this framework. Here, again, we noticed *political/symbolic utilisation*. Although the prevalence rates related to problematic drug use, drug deaths, infection diseases and police arrests were presented accurately, these data were accompanied with a rather political interpretation of their level (low, high, moderate). For instance, numbers related to Dutch drug policy were presented as follows:

"Estimates on national prevalence of problematic drug use in the age category of 15-54 years: 2.8-3.2 per thousand (low); Trend in the number of deaths because of drugs: slightly rising; Prevalence of HIV infections among intravenous drug users: 2.0-2.6 % (numbers are vague); Arrests because of infringements on the drug legislation: increasing rapidly." (Attachment Federal Drug Policy Note).

⁸⁶ References in the Federal Drug Policy Note: De Ruyver, B., 'Medisch en recreatief gebruik van cannabis, het juridisch kader in europees en V.N. perspectief.', Vlaams Parlement, September 2000, Brussel, 15p.; Ministerie van Justitie Nederland, Notitie gedoogbeleid cannabis., 2000, p. 8.; DE NAUW, A., 'Drugs', A.P.R., 1998, p. 4.; Silvis, J., 'De internationale juridische speelruimte voor Nederlands drugbeleid.' in Blom, T.; De Doelder, H. en Helsing, D.J. (eds.), Naar een consistent drugbeleid. Een congresverslag. Deventer, 1996, p. 221-223; Arnao, G., 'The Single Convention and drug policy reform.' The International Journal of Drug Policy, Vol. 10, No. 3, 1999, p. 173; Krajewski, K., 'How flexible are the United Nations drug conventions?', The International Journal of Drug Policy, Vol. 10, No. 4, 1999, p. 332; United Nations, Commentary on the United Nations Convention against illicit traffic in narcotic drugs and psychotropic substances 1988, United Nations, New York 1998, p. 85-89; DORN, N. en JAMISON, A., 'Room for manoeuvre. Overview of comparative legal research into national drug laws of France, Germany, Italy, Spain, the Netherlands and Sweden and their relation to three international drugconventions, (based on research by an international team Yann Bisiou (France), Tom Blom (The Netherlands), Lorenz Böllinger (Germany), Maria Luisa Cesoni (Italy), José Luis de la Cuesta and Isidoro Blanco (Spain), and Josef Zila (Sweden)), London, 2000, 24p; DE RUYVER, B., Medisch en recreatief gebruik van cannabis, het juridisch kader in europees en V.N. perspectief, Vlaams Parlement, september 2000, Brussel; EMCDDA, jaarverslag over de stand van de drugsproblematiek in de Europese Unie, Lissabon 2000.

However, such direct comparisons between national policies cannot be made because these data are affected by differences in definition, methodology and statistical units (persons, offences, and arrests) and changing drug policies (e.g. introduction of harm reduction measures) or laws (Kraus, et al., 2003; Decorte, et al., 2009). This resulted in a political debate based on a rather meaningless representation of problematic drug use, drug deaths, infections, diseases and police arrests in each of these countries.

Furthermore, instead of actually participating in the ICWG, some scientists acted as *policy advisors* (Loader and Sparks, 2011). These scientists were on the sidelines of the ICWG. In order to inform the (public and political) debate, they brought in scientific knowledge through personal contacts with the Minister (or his/her representatives). This allowed for a flow of scientific information to the policy-making process (and stimulated *conceptual* utilisation).

“That scientist was not an official advisor of the Cabinet but he kept close contacts with the policy-makers. He had a very large political network, also in the French-speaking part of Belgium. It was useful to talk with him in order to get access to the French-speaking Ministers and to get a scientific update.” (Respondent 34, policy-maker).

Indeed, Ministers (or their representatives) reported turning to their own trustworthy network of scientists with recognised expertise and authoritative claims in drug policy. In other words, they tended to pay careful attention to those *policy advisors* who (1) were known as appropriately discreet (e.g. taking into account media leaks; see below, §2.4.1.) and (2) who had the capacity to enlist supporters behind their claims, to legitimatise their arguments as authoritative, and to present themselves to the public and policy-makers as someone who could give voice to science. An important issue here is that scientists are assumed to engage with journalists (and the public) as well.

“Policy-makers do not primarily consult scientists because of their knowledge [...] No way. They consult scientists because of their public presence. [...] A scientist who is seen as an expert by the general public lends credibility to the arguments of policy-makers.” (Respondent 50, scientist).

“Who is considered an expert? From the public point of view, it is someone who is more knowledgeable than others. From the scientific point of view, it is someone who is more known than others and has many publications. From a political point of view, an expert is someone who is publicly known and who is likely to meet their expectations.” (Respondent 48, scientist).

It is important to note that an individual relationship with a scientist could result in either a decrease or an increase of knowledge utilisation. Some scientists may act as a lever in promoting

the use of research findings but others might not be fully supportive of their recommendations on research, rather acting out of personal motives (cfr. *airport scientists*; Uggen and Inderbitzin, 2010). A focus on individual relationships also limits the policy-maker's access to the broad spectrum of (sometimes conflicting) scientific insights (and promotes *political/symbolic utilisation*). The individual background, education or experiences of the Minister (and his/her representatives) often (partly) determines who is and who is not included in their personal network. For instance, scientists were mostly sought within their own education and region: Flemish policy-makers were in favour of consulting Flemish experts.

2.1.2. Characteristics of scientific knowledge

Several characteristics of scientific knowledge were said to impede the interaction between scientists and policy-makers and the use of scientific knowledge in the ICWG. The idea that policy-makers and scientists operate in two different worlds and speak two different languages was often stressed (*two communities thesis*; Caplan, 1979). The issue that academic careers are geared towards and reward academic publications, rather than involvement in the policy-making process (Nutley, Walter and Davies, 2007) was a recurring topic in the interviews. Furthermore, interviewees stated that scientists apply a certain degree of nuance in their arguments while policy-makers often think in terms of practical solutions.

"A scientist is different. The degree of truthfulness is important for scientists. In a political setting, it is not always about truthfulness. The goal of policy-makers is to decide, no matter what." (Respondent 5, policy-maker).

Furthermore, whereas scientific studies can take years to be completed, policy issues often rise rapidly to the top of the political agenda (e.g. one legislature only lasts for four years) (Weiss and Bucuvalas, 1980; Ritter, 2009). The consequence of the fact that scientists and policy-makers operate under very different time-frames was clearly illustrated in the preparation of the final discussion in the Council of Ministers on 18 January 2001. A member of the Ministerial cabinet argued:

"A study of three ULB professors argued that legalisation is consistent with the international UN-conventions. They however acknowledged that their study only shows 'preliminary' results of a 'quick' study. [...] In other words, their study is worthless." (Internal communication Ministerial Cabinet, 17 January 2001).

The translation of scientific knowledge into policy principles was considered an even more complex process. Policy-makers argued that reports should be brief, and contain useful information

in comprehensible language (see also Weiss, et al., 2008). Ministers (and their representatives) only have time to read a summary or even one page of a study. A lengthy report or publication is simply not read. In this context, policy-makers easily turn to their personal network for customised advice. Scientists also seem to be aware of the need to better translate the results of their research into policy implications.

“There is no time, decisions must be made quickly. It is impossible to read the whole report [...] I do not have time to read 200 pages. Good studies need to be apprehensible.” (Respondent 36, policy-maker).

“Scientists have to measure and to develop knowledge. However, policy-makers often do not understand the policy implications of a study. It is mostly descriptive, unfortunately.” (Respondent 52, scientist).

2.2. Political context

The discussions in the ICWG were affected by both institutional and individual characteristics of the political context. For instance, the representatives of the Ministers in the ICWG had the complex task of reconciling the opinion of their Minister and the viewpoint of their political party. In pursuing this, they had to bear in mind the differing opinions about cannabis policy among individuals from the own party as well (see also Public Debate in Chamber of Representatives below, §3.2.). Likewise, they also had to deal with the (representatives of the) Federate Ministers for a number of issues at stake. *Individual characteristics/experiences* of the Minister were definitely influential, especially in such heavily politicised discussions.

“The situation was chaotic. Opinions differed within political parties, between Ministers, etc. [...] In the Inter-Cabinet Working Group, members had several agendas and different Ministers were involved. This state of affairs certainly complicated the discussions.” (Respondent 17, policy-maker).

“The national drug strategy was developed in the Inter-Cabinet Working Group. Sometimes a particular Minister disagreed with decisions negotiated by his representatives [...] Consequently, the topic reappeared on the agenda and representatives had to start all over again.” (Respondent 20, policy-maker).

Furthermore, several *institutional characteristics* of the political setting also played a role. When it comes to policy-making, drug policy is just one priority. The Federal Drug Policy Note had to be considered as a kind of political compromise between the Coalition partners. Several examples illustrate this assumption.

First of all, policy-makers need to take into consideration the international aspects of their policy competences. Therefore, accordance with the *international framework* (e.g. 1990 Schengen Convention, the 1995 Dutch Drug Note and the official report ‘*Pathways to the backdoor*’) was one of the most compelling arguments. It is also within this framework that the input of the analysis of some drug policies in European countries was considered important (see also above, §2.1.1.). As another example, the United Nations contacted the representatives of the Minister of Public Health Magda Aelvoet to express their concern about the trend in some European countries, including Belgium, of laws becoming less rigorous. Afraid to be isolated internationally, a member of a Ministerial Cabinet argued, in the preparation of the final discussion in the Inner Cabinet on 18 January 2001:

“Legalisation means resigning from the international conventions. Juridically, the reasoning is water-tight (several international experts support this argument). The Ministerial Cabinets of the Minister of Labour Onkelinx, the Minister of Mobility Isabelle Durant and the Minister of Public Health Magda Aelvoet are in favour of a broad interpretation [...] The Government has to decide if they should resign from the conventions. Then, the Government runs the risk of feeling the heat at the European level. Such a decision will have consequences on other policy debates too. No other country has taken this step.” (Internal communication Ministerial Cabinet, 17 January 2001).

Eventually, the particular phrase in the Federal Drug Policy Note that ‘*the Federal Government is an advocate of the need to rethink the international conventions in order to produce a realistic response to cannabis use as well as the establishment of harm reduction initiatives*’ (p.46) reflects the political compromise.

“The Flemish Greens claimed to include a phrase which supported the revision of the international conventions together with like-minded European partners. In this way, the Flemish Greens still hope to proceed towards a legalisation or regulation.” (Internal communication Ministerial Cabinet, 17 January 2001).

Secondly, the determination of the maximum limit of the *number of grams* for personal use was also heavily debated. With the discussion of the final conclusions and recommendations of the PWG in 1997 in mind⁸⁷, the Verhofstadt I Government also had difficulties in determining what amount had to be considered as for personal cannabis use. Some Coalition partners (Flemish Socialists (SP), Flemish Liberals (VLD) and French-speaking Liberals (PRL-FDF-MCC)) did not want to determine a number of grams. Others (Flemish Greens (AGALEV), French-speaking Greens (Ecolo) and French-speaking Socialists (PS)) initially introduced a maximum of 15 grams

⁸⁷ Flemish and French-speaking Christian Democrats refused to determine a quantity for personal use (see above, Chapter 2, §5.1.).

of cannabis and a maximum of five female cannabis plants (Guillain, 2003). However, this was not approved. In order to reach an agreement, the Prime Minister suggested a '5 gram limit'.

"The option of a '5 gram limit' is developed by order of the Prime Minister to convince the French-speaking Socialists (PS). The Minister of Labour Mrs. Laurette Onkelinx is in favour of legalisation and this suggestion is rather persuasive." (Internal communication Ministerial Cabinet, 17 January 2001).

Eventually, a compromise was found to convince the French-speaking Socialists (PS). The Federal Drug Policy Note recommended a legislative change and the development of a new Ministerial Circular Letter in order to guide judicial, administrative authorities and the police in tackling (local) drug issues, drug-related crime and nuisance.

2.3. Practitioners

Practitioners played an important role in the ICWG. Through the distribution of the Policy Memorandum in 1999 (see also before, §2.1.1.), they tried to influence the development of the Federal Drug Policy Note. Indeed, there was a rather large overlap between the Federal Drug Policy Note and the statements included in the 1999 Policy Memorandum (Memorandum group, 1999). For instance, several issues were (partly or entirely) addressed: the establishment of a forum for better cooperation and coordination between different policy actors (cfr. General Drugs Policy Cell); better cooperation between judicial actors and treatment workers; the development of initiatives like needle exchange and methadone substitution; the development of a uniform registration system among treatment centres, and; the clarification of the 1998 Ministerial Circular Letter.

"There were a lot of issues integrated in the Federal Drug Policy Note. The 1999 Policy Memorandum strongly influenced the development of the Federal Drug Policy Note in 2001. It became clear that policy-makers listened to the practitioners." (Internal communication Memorandum group, 26 October 2000).

Additionally, some practitioners became members of the Ministerial Cabinet (e.g. magistrates, lawyers). Their presence promoted the translation of their particular day-to-day experiences and their needs related to budgets or staff into the policy-making process.

"I wrote a large part of the Federal Drug Policy Note. Practitioners had a lot of influence [...] They succeeded in determining some details and applying their vision [...] I could not delete phrasings but I could influence the particular modalities [...] This certainly influenced the development of the Federal Drug Policy Note [...]." (Respondent 16, practitioner).

2.4. Media coverage

2.4.1. A succession of events: tumultuous...

During the activities of the ICWG, media coverage (of the cannabis policy) gradually increased. A conference on recreational and medical use of cannabis organised by the Flemish Nationalists (VU-ID) in September 2000 gave an additional boost.

“Recent research has shown that smoking one joint is comparable to smoking four to six cigarettes. The risk of developing lung cancer is similar.” (Prof. Dr. Arnold Vlietinck in Flemish newspaper Gazet van Antwerpen, 22 September 2000).

“127 offenders of cannabis-related crimes. This is an increase of 20%.” (27 September 2000, Flemish newspaper De Tijd).

Media coverage further exploded in November 2000. A **preliminary version of the Federal Drug Policy Note** was **leaked** to the press on 10 November 2000. Leaking to the media is a common political strategy of a dissatisfied Coalition partner to hamper (and steer) the policy-making process. Even though the Minister of Health Magda Aelvoet (AGALEV, Flemish Greens) repeatedly stated that the leaked note only contained preliminary thoughts, a heavily mediatised and political storm developed. It became clear that the controversy mainly occurred in Flanders where the two sides, the Minister of Justice Mark Verwilghen and the Minister of Public Health Magda Aelvoet, faced each other.

“The Minister of Public Health Magda Aelvoet said that the international Schengen Agreement is not an obstacle [...] Earlier, the Minister of Justice Marc Verwilghen said that Schengen does constitute an obstacle.” (17 November 2000, Flemish newspaper Het Laatste Nieuws).

The controversy intensified when **MP Frans Lozie (AGALEV, Flemish Greens)**, as an individual political strategy, announced at an international conference that the Flemish Green party aimed to legalise all illegal drugs. The Green party AGALEV quickly blew the whistle on the MP: the Minister of Health Magda Aelvoet (AGALEV, Flemish Greens) called it a ‘wrong communication’ and a ‘big mistake’. A journalist explained:

“I remember that I received a phone call from their spokesman refuting the statements of Frans Lozie. The spokesman clearly said that these statements were not in accordance with the ideas of the Flemish Green party. They were in favour of the legalisation of cannabis, not of all illegal drugs.” (Respondent 15, journalist).

Additionally, on 25 November 2000, Flemish newspaper *De Morgen* (again a Flemish whistleblower) published a **letter** by **Minister of Health Magda Aelvoet** (AGALEV, Flemish Greens). In this letter, addressed to the secretary of Ecolo (French-speaking Greens), she supported the *decriminalisation* of cannabis and the *depenalisation* of other illegal drugs. The controversy and the confusion only increased. The general problem with this media communication (especially in the Flemish media) was that it caused confusion between what was only an intention and what had already been decided. *“The possession and the production of five grams of cannabis no longer prosecuted”* (6 December 2000, Flemish newspaper *De Tijd*). At the same time, media coverage created confusion by juggling with the concepts ‘legalisation’, ‘depenalisation’ and ‘decriminalisation’. The media clearly were more interested in provoking controversy by emphasising stereotypes and publishing sensational headlines (instead of substantive discussions and reflections).

Accordingly, this media discourse, issue coverage and media leaks influenced the public’s (mis)understanding of the debate. An opinion poll commissioned by French-speaking newspaper *Le Soir* and conducted by an university team (Prof. dr. Rene Patesson and Pascale Steinberg) between August and October 2000 (during the discussions in the ICWG) confirmed that 56,2% of the respondents did not know that cannabis use was prohibited. Flemish (and young) respondents in particular thought that cannabis use was tolerated (Patesson and Steinberg, 2000).

2.4.2. ...but not decisive

The media did not play a vital role in shaping policy, or in other words, there was no direct influence of the media coverage on the activities of the ICWG. However, policy-makers were interested about how the public (and their electorate) viewed and assessed policy decisions (e.g. the developments of the Federal Drug Policy Note). The fact that an embargo was put on the preliminary drafts of the Federal Drug Policy Note (taking into account the local elections on 8 October 2000) also exemplifies the political sensitivity of the debate. Another illustration is the demand of the French-speaking Liberals (PRL-FDF-MCC) at the Inner Cabinet in December 2000 to postpone the decision on the Federal Drug Policy Note. They preferred to consult with their electorate first. Eventually, the decision was indeed postponed to mid-January 2001, which further stimulated the sensational public/media debate (see also below, §2.4.1.).

“The French-speaking Liberals asked for a postponement of the final decision. This led to the policy-making process occurring in two phases. Meanwhile, there were some media leaks about the cannabis issue and indeed the debate did get off the rails.” (Respondent 37, policy-maker).

Similarly, in December 2000 (in particular after the Inner Cabinet held on 6 December 2000), Minister of Public Health Magda Aelvoet tried to produce order out of chaos by hiring a spokes-

man, Mr. Paul Geerts, for a couple of months. His first assignment was to deal with the ongoing, misleading media communication. Mr. Paul Geerts expressed:

“The decision of the Council of Ministers in December 2000 to postpone the debate increased the controversy [...] One of my first tasks was to call journalists and to explain the state of the art. In this way, they were well-informed about the developments [...] Unfortunately, I never succeeded in rectifying the miscommunication.” (Mr. Paul Geerts, contracted spokesman of Minister of Public Health Magda Aelvoet).

The media discourse influenced the informal discussions between Coalition partners or obliged Ministers to formulate some public statements and to answer a parliamentary question/interpellation.

“The political debates took place in the Inter-Cabinet Working Group. Media coverage was not a topic. Of course, indirectly, one is concerned with what their electorate thinks about the issue. But it has never been my experience that the media discourse guided or reversed a certain policy decision.” (Respondent 37, policy-maker).

Finally, reflecting on the media as a *distributor* of scientific knowledge to Members of Parliament (see above, Chapter 3, §5.3.2.), our analysis showed that media coverage of scientific knowledge was not necessarily a precondition for playing a role in the ICWG. For instance, the evaluation study conducted by Prof. Dr. De Ruyver and Prof. Dr. Casselman (De Ruyver, et al., 2000), which gave direction to Belgian drug policy and could be perceived as an example of *instrumental* knowledge utilisation, was not repeatedly or extensively covered by the media.

2.5. Interest groups

In the anticipation of the decisions to come, a French-speaking interest group, *Anti-Prohibition League [La Liaison anti-prohibitionniste]*, announced several debates and demonstrations regarding Belgian cannabis policy. An interest group of parents of drug users, named *SOS Addicted [SOS Verslaafd]* (the precursor of *Parents against Drugs [Ouders tegen Drugs]*; see below §4), also appeared in the media. By employing a rather emotional discourse, the latter interest group misinterpreted concepts like *legalisation* and *decriminalisation* and misrepresented scientific knowledge. For instance, they supported the stepping stone theory and exaggerated the prevalence rates of drug use.

"The legalisation of soft drugs will cause a snowball effect. Many youngsters will gradually use other, stronger, drugs too. It is a real danger. [...] 18% of all youngsters in Tienen have experimented with drugs. How are the questionnaires being filled in? We think that over 75% of all youngsters already have used drugs." (19 December 2000, Flemish newspaper Het Laatste Nieuws).

Similar to the impact of the media discourse on the Governmental debate, the influence of interest groups on the actual policy-making process was rather limited. Some interest groups were consulted by a representative of the Minister of Public Health to articulate their points of view. However, generally, interest groups were not successful in influencing the ICWG (and thus the development of the Federal Drug Policy Note (2001)). This point was recognised by policy-makers as well as the members of interest groups.

"Using the media is a communication strategy of those interest groups. They did not influence policy-making; they did not make any impression." (Respondent 37, policy-maker).

"We criticised the detention of cannabis users. We underlined the problem, but we did not provide a good solution. Maybe that is why we did not have any substantial influence." (Respondent 23, member of an interest group).

2.6. Parliamentary activity: resolutions/bills

High media activity, causing confusion and complications, influenced the *parliamentary agenda*. During the activities of the ICWG, MPs submitted some questions/interpellations and a resolution, particularly on cannabis policy⁸⁸. None of these parliamentary activities had a direct influence on the ICWG. Ministers just had to answer questions/interpellations or to vote bills/resolutions.

"Most Ministers considered the answering of questions as a waste of time [...] Some of them took these questions or interpellations seriously, others did not. The real decision-making power is in the hands of the Government, the Cabinets, the Ministers. The Parliament is not powerful at all." (Respondent 25, policy-maker).

However, some opposition MPs had an indirect impact. It appeared that several practitioners, who were involved in the ICWG (see above, §2.3.), had close contacts with MPs from the Flemish and French-speaking Christian Democrats (CVP and PSC).

⁸⁸ *Hand. Kamer 1999-2000, 16 november 2000, 083, 7; Hand. Kamer 2000-2001, 7 december 2000, 086, 6-9; Hand. Kamer 2000-2001, 19 december 2000, COM 338, 12-13; Hand. Kamer 2000-2001, 11 januari 2001, 102, 19; Voorstel van resolutie over de herziening van de internationale drugsverdragen (ingediend door Mr. Vincent Van Quickenborne and Mr. Patrik Vankrunkelsven), Parl.St. Senaat 2000-2001, nr. 2-584/1.*

“The development of the Federal Drug Policy Note is also influenced by the Flemish Christian Democrats. I had a lot of contact with MP Jo Vandeurzen and I was involved in the debates about the national drug strategy. I dare say that their points of view actually influenced the debate.” (Respondent 9, practitioner).

“On the Flemish side, the Flemish Christian Democrats were part of the opposition. [...] They were in close contact with several practitioners.” (Respondent 4, policy-maker).

3. Official publication of the Federal Drug Policy Note on 19 January 2001

Eventually, on 19 January 2001, a press conference announced the official launch of the Federal Drug Policy Note. The press conference was characteristic of the difficulties of the Government in providing clear messages, especially regarding whether and when the possession of cannabis for personal use was allowed or not (Gelders and Vander Laenen, 2007). The Minister of Justice Marc Verwilghen (VLD, Flemish Liberals) stated that *‘it is wrong to claim that Belgium has implemented a depenalisation’* and that *‘the possession and use of cannabis by minors will always be considered as problematic’*. The Minister of Public Health Magda Aelvoet (AGALEV, Flemish Greens) softened this statement by saying that *‘a minor of 16 or 17 who smokes cannabis at home, without causing nuisance or without being in a problematic situation, will not be prosecuted’*. Clearly, this latter statement was juridically wrong: the particular cannabis regulation in the Note only applied for adults. These confusing and conflicting statements caused huge misunderstandings and it was a source of frustration for the Verhofstadt I Government that the public debate again focused on the cannabis issue (while ignoring the other elements of the Federal Drug Policy Note). Their fear was that the Federal Drug Policy Note would be interpreted as a *tolerance policy*. A similar position was taken by the Christian Democrats in the Dehaene II Government (1995-1999) when discussing and communicating about the final conclusions and recommendations of the PWG (see also above, Chapter 2, §5.1.).

“The Flemish Christian Democrats were really afraid that the conclusions of the PWG would be interpreted as a Belgian example of a tolerance policy. [...] The same happened when the Liberals presented their Federal Drug Policy Note.” (Respondent 50, scientist).

“The notion of a ‘tolerance policy’ was not supported. In Flanders, tolerance was perceived as approval, or as a message that everything was allowed.” (Respondent 37, policy-maker).

The Federal Government, with the Minister of Public Health Magda Aelvoet (AGALEV, Flemish Greens) taking the lead, decided to launch an information campaign (Federal Government, 2001b). The campaign aimed to shed some light on both policy and the status of the legislation, and to clarify the future penal policy with regard to cannabis (e.g. the implications for minors).

On 10 February 2001, the Federal Government launched the first part of their information campaign through a media advertisement. Later, in May 2001, an information brochure (i.e. 600,000 leaflets) was circulated through secondary schools, police offices, justice houses, courts, treatment services, post offices, town halls, libraries and through the website of the Ministry of Public Health. The 24-page brochure presented the Federal Drug Policy Note along the format of Frequently Asked Questions.

The launch of the Federal Drug Policy Note and the information campaign led to a strong increase in media and parliamentary attention to the drug topic (cannabis policy in particular). Concerned about how their electorate would perceive the Federal Drug Policy Note, the Minister of Public Health and the Minister of Justice were also actively involved in these debates.

3.1. Media and interest groups: increasing polarisation and confusion

The Federal Drug Policy Note and the information campaign determined the headlines of the Flemish and French-speaking **media**. Commotion first emerged from the confusing communication of both Ministers at the press conference. Politicians with a long political career such as Louis Tobback (SP, Flemish Socialists) involved themselves in the debate by criticising the stipulations regarding cannabis policy (23 January 2001, Flemish newspaper *Het Laatste Nieuws*). Members of the opposition parties (CVP, Flemish Christian Democrats – Vlaams Blok, Flemish extreme right party – VU&ID, Flemish Nationalists) regularly appeared in the media. For instance, members of the Flemish extreme right wing party Vlaams Blok announced their own brochure *'Against the drug prophets'* criticising the policy choices of the Verhofstadt I Government (De Man, 2001). The Minister of Secondary Education of the French Community, Mr. Pierre Hazette (PRL-FDF, French-speaking Liberals), announced a Ministerial Circular Letter on 1 February 2001 reminding that cannabis use is strictly forbidden in schools.

Dutch- and French-speaking drug treatment and prevention practitioners also actively participated in the media debate (Guillain, 2003). They pointed at the ambiguity of the Federal Drug Policy Note and the cannabis prosecution policy in particular.⁸⁹ The media did not hesitate to polarise the discussion.

⁸⁹ The Association for Alcohol and other Drug Problems (VAD), the Flemish umbrella organisation, published a document detailing their point of view in order to contribute to the public debate and policy-making. The document stressed the need for a clear juridical framework taking into account the limited health risks of cannabis use, the different opinions of youngsters and adults and the polarised debate about cannabis. French-speaking associations also pointed to the ambiguity of the Federal Drug Policy Note (Guillain, 2003). For instance, the association *InforDrogues* argued that the Federal Drug Policy Note introduced a 'liberalisation' message but, at the same time, maintained a criminal approach with a lack of uniformity. Likewise, the *Fédération wallonne des institutions pour*

"The discussion was presented in black-and-white, drugs were bad or drugs were good. One had to prohibit, one had to depenalise. It was very binary. The reality is much more complex but yes, this is the media." (Respondent 53, journalist).

While the French-speaking newspapers announced a *depenalisation*, the Flemish newspapers created headlines that cannabis use was *fully tolerated*:

"Depenalised possession and consumption of cannabis." (19 January 2001, French-speaking newspaper Echo).

"The personal use of cannabis is tolerated. Cannabis depenalised by default." (19 January 2001, French-speaking newspaper Le Soir).

"The use of cannabis completely free." (19 January 2001, Flemish newspaper Belang van Limburg).

"Belgian policy of tolerance more tolerant than that of the Netherlands." (19 January 2001, Flemish newspaper De Morgen).

The information campaign did not resolve the confusion (Gelders, 2006). For instance, the brochure did not stress that a new bill had yet to be developed and adopted by the Parliament. Several newspapers reported on the positive and negative elements of the new drug law while there was no new law at all. *"The new drug law is better than the old one" (6 March 2001, Flemish newspaper Het Nieuwsblad).*

At the same time, themes like the increasing THC content in cannabis, the increasing prevalence rates of use, and the health risks of cannabis use were increasingly captured in several quotations. For instance: *"Cannabis is twice as strong as 10 years ago" (2 March 2001, Flemish newspaper Het Laatste Nieuws).* Likewise, the precautionary principle⁹⁰ was mentioned for the first time: *"Faced with such a number of health risks, we have to make an appeal to the 'precautionary principle'" (28 March 2001, French-speaking newspaper Le Soir).*

Accordingly, amongst the public, emotions were running high. For instance, several readers' opinions were dominated by an emotional discourse (with a mistaken appeal against the legalisation of cannabis and a focus on the stepping stone theory). Several schools also announced to set-up a campaign against the legalisation and decriminalisation of cannabis. The 'Druglijn', as part of the Association for Alcohol and other Drug Problems (VAD), confirmed this public concern. They reported an increasing number of calls in 2001, especially related to the topic of can-

toxicomanes (Fédito) criticised the vagueness and inconsistency of the notions 'problematic use' and 'public nuisance', which were already included in the 1998 MO of Van Parys.

⁹⁰ When a policy-maker is faced with a multiplicity of information and finds it difficult to identify the appropriate options for their particular situation, there is a tendency to invoke the precautionary principle (Singleton, et al., 2014).

nabis (VAD, 2003). However, in terms of prevalence trends, the use of cannabis, ecstasy and amphetamines stabilised among adults as well as among youngsters (BIRN, 2002).

It is in this context that the creation of the **interest group** *Parents against Drugs [Ouders tegen Drugs]* was noted. The president of the interest group was Mrs. Josefien Smits whose son died due to a drug overdose at the end of the nineties. Several like-minded parents of (ex-)drug users (together with some practitioners and scientists) joined the interest group and the members increasingly and proactively expressed their opinion in the media. Clearly, most interest groups were driven by the public and political attention. *“Mother of a drug-addicted daughter angry about the statements of Senator Van Quickenborne of the Flemish Nationalist party” (31 January 2001, Flemish newspaper Het Nieuwsblad)*. Consequently, through the media, this interest group succeeded in heating up and polarising the debate even more.

3.2. Parliamentary debates

The official launch of the Federal Drug Policy Note immediately provoked some parliamentary activity. Several members of the Chamber of Representatives submitted interpellations regarding the content of the Federal Drug Policy Note (*Hand. Kamer 2000-2001, 30 januari 2001, 106, 1-56*). Accordingly, it was decided to organise a public debate in the Chamber of Representatives on 30 January 2001. The public debate prompted some MPs to submit several motions⁹¹ (*Hand. Kamer 2000-2001, 30 januari 2001, 0025/172, 1-3*). Later on, the launch of the information campaign once again led to the submission of a high number of parliamentary questions and interpellations.⁹²

⁹¹ A first *reasoned motion* was submitted by Mr. Jo Vandeurzen (CVP, Flemish Christian Democrats), Mr. Yves Leterme (CVP, Flemish Christian Democrats) and Mr. Jacques Lefevre (PSC, French-speaking Christian Democrats). These MPs criticised the compliance of the cannabis prosecution policy (as presented in the Note) with the international obligations and its lack of legal certainty. Mr. Filip De Man submitted a *motion of no-confidence* by arguing that the Ministers of Justice and Public Health had to be replaced. Some MPs from the majority (Mr. Daniel Bacquellaine, MR (French-speaking liberals); Mr. Hugo Coveliers, VLD (Flemish Liberals); Mr. Dirk Van der Maelen, SP (Flemish Socialists); Mr. Thierry Giet, PS (French-speaking Socialists); Mr. Jef Tavernier, AGALEV (Flemish Greens); Mrs. Michel Dardenne, Ecolo (French-speaking Greens)) submitted a *motion to go to the next item of the agenda* in order to avoid taking a position in the political struggle with the opposition parties.

⁹² *Hand. Kamer 2000-2001, 31 januari 2001, COM 373, 1-4; Hand. Kamer 2000-2001, 6 februari 2001, COM 376, 9-11; Hand. Kamer 2000-2001, 8 februari 2001, 108, 7-9; Hand. Kamer, 2000-2001, 13 februari 2001, COM 390, 4-6; Hand. Kamer 2000-2001, 20 februari 2001, COM 394, 17-21; Hand. Kamer 2000-2001, 7 maart 2001, COM 410, 12-17; Hand. Kamer 2000-2001, 8 maart 2001, 112, 13-15; Hand. Kamer 2000-2001, 15 maart 2001, 114, 6-7; Hand. Kamer 2000-2001, 29 maart 2001, 119, 12-13; Hand. Kamer 2000-2001, 19 april 2001, 121, 5-7; Hand. Kamer 2000-2001, 17 mei 2001, 125, 1-3; Hand. Kamer 2000-2001, 31 mei 2001, 130, 5-7; Hand. Kamer 2000-2001, 7 juni 2001, 132, 9; Hand. Kamer 2000-2001, 3 juli 2001, 517, 11-12; Hand. Kamer 2000-2001, 19 juli 2001, 158, 18-19; Hand. Kamer 2000-2001, 23 oktober 2001, 560, 32-35; Vr. en Antw. Kamer, 19 februari 2001, nr. 064 (Vr. nr. 309 A. Colen); Hand. Senaat 2000-2001, 1 februari 2001, 2-92, 21-23; Hand. Senaat 2000-2001, 8 februari 2001, 2-94, 27-30; Hand. Senaat 2000-2001, 15 februari 2001, 2-96, 8-9; Hand. Senaat 2000-2001, 22 februari 2001, 2-98, 9-12; Hand. Senaat 2000-2001, 8 maart 2001, 2-100, 25-27; Hand. Senaat 2000-2001, 29 maart 2001,*

Generally, in these parliamentary debates, little attention was given to the creation of a General Drugs Policy Cell, the importance of prevention initiatives, the value of methadone treatment in prison, and the creation of the Belgian Monitoring Centre for Drugs and Drug Addictions (BMCDDA). The parliamentary debate was soon narrowed down to the cannabis prosecution policy and exacerbated the existing tensions between majority and opposition as well as among the Coalition partners in the Government.

"The Parliament was not decisive. Some back-benchers used the controversial statements of the Minister of Public Health Magda Aelvoet [...] But generally, the Federal Drug Policy Note was not rejected in the Parliament." (Respondent 28, policy-maker).

3.2.1. Scientific knowledge and scientists

Similar to the parliamentary debates during the intermezzo (1997-2000), scientific knowledge was often attributed rather vaguely (e.g. 'doctors said', 'lawyers mentioned', 'literature showed', 'criminologists argued', etc.).

"The literature on harm reduction reveals that the implementation of harm reduction initiatives is possible without changing the international drug conventions." (Mr. Jo Vandeurzen, MP CVP, Flemish Christian Democrats; Hand. Kamer 2000-2001, 7 maart 2001, COM 410, 12-17).

Members of the Government used scientific knowledge when answering *questions and interpellations*. The consequence of the fact that scientists and policy-makers operate under very different time-frames was clearly illustrated.

"You referred to a research conducted by the Children's Hospital in Melbourne which shows that cannabis use leads to depression. This research will be soon published in an international journal? It would like to stress that it is difficult to access and consider a non-published research." (Mrs. Magda Aelvoet, Federal Minister of Public Health, AGALEV, Flemish Greens; Hand. Senaat 2001-2002, 19 maart 2002, 2-51, 2692).

Furthermore, they mostly used scientific knowledge commissioned by the Federal authorities (policy-funded research; e.g. regarding the relationship between drug use and traffic accidents). A focus on policy-funded research is somehow logical: they can gain credibility by referring to studies that they (or their predecessor) commissioned. In the context of the *status model* elaborated in the literature (Cross, et al., 2000), instances where scientific knowledge was referred to

2-104, 33-38; Hand. Senaat 2000-2001, 17 mei 2001, 2-114, 18-20; Hand. Senaat 2000-2001, 31 mei 2001, 2-119, 11-12; Hand. Senaat 2001-2002, 6 december 2001, 2-162, 16-18; Vr. en Antw. Senaat, 12 juni 2001, nr. 2/36 (Vr. nr. 1265 C. Nyssen); Vr. en Antw. Senaat, 9 oktober 2001, nr. 2/42 (Vr. nr. 1509 M. De Schampelaere); Vr. en Antw. Senaat, 6 november 2001, nr. 2/43 (Vr. nr. 1553 V. Van Quickenborne).

simply because of the government's desire to be *evidence-informed* seem to require the introduction of a new category in Weiss's political/symbolic utilisation model.

Scientific knowledge (e.g. inter(national) epidemiological data or international drug policy studies) was also used by Members of Parliament. Sometimes, the media served as a channel through which scientific knowledge was introduced into parliamentary debates (*indirect reference*).

"I would like to refer to the results of a recent survey of the Brussels University, published in the French-speaking newspaper Le Soir today." (Mr. Patrick Moriau, MP PS, French-speaking socialists; Hand. Kamer 2000-2001, 30 januari 2001, 106).

Several examples of *political/symbolic utilisation* of scientific knowledge were observed. MPs simply selected those studies or experts that advanced their political interests. For instance, MPs from the extreme right parties Vlaams Blok and Front National, who underlined a rather medical approach to the drug phenomenon, mainly referred to doctors or psychiatrists. Additionally, scientists or scientific studies which made conflicting opinions more apparent were excluded or criticised. For example, some MPs *ignored* scientific criticism on the stepping stone theory.

"Doctor Beaucourt refers to a national disaster, he is extremely shocked. Therefore, he gives speeches all over Flanders against the Government plans. He also airs his worries to the electorate of the Flemish extreme right party Vlaams Blok [...] Admit it, Minister: the stepping stone theory is correct. Chocolate cigarettes can lead to real ones. In a similar vein, the use of soft drugs can lead to hard drugs. I would like to hear your opinion (my emphasis)." (Mr. Filip De Man, MP Vlaams Blok, Flemish extreme right party; Hand. Kamer 2000-2001, 30 januari 2001, 106).

Sometimes, the *same study was interpreted differently*. One example concerned a study that compared the effect of alcohol and cannabis on driving behaviour. The results of this study assumed that the doses of cannabis sufficient to become 'high' is comparable with alcohol percentages of 0,3 – 0,7 in the blood. A balanced statement was formulated by the Minister of Justice Marc Verwilghen. Conversely, the statements made by Mr. Jos Ansoms and Mr. Jo Vandeurzen (both CVP, Flemish Christian Democrats; oppositional position) were less nuanced.

"This study mentioned that the influence of test doses of cannabis to get high is comparable to a blood alcohol concentration of 0.3- 0.7 (my emphasis)." (Mr. Marc Verwilghen, Federal Minister of Justice, VLD, Flemish Liberals; Hand. Kamer 2000-2001, 20 februari 2001, COM 394, 17-21).

“The University of Maastricht published a scientific report regarding the influence of cannabis use on driving behaviour [...] It is certain that smoking a joint is similar to a blood alcohol concentration of 0.2. (my emphasis).” (Mr. Jos Ansoms, MP CVP, Flemish Christian Democrats; Hand. Kamer 2000-2001, 20 februari 2001, COM 394, 17-21).

Finally, some MPs drew false conclusions by *ignoring the different time frames of science and policy* (Lindquist, 2001; Carden, 2004). A common statement was that the stipulations regarding cannabis policy in the Federal Drug Policy Note had led to an increase in the prevalence of cannabis use. Several MPs used scientific research to argue that cannabis use as well as the number of people driving under influence of cannabis had increased in the first half of 2001 (as a result of the Federal Drug Policy Note which was launched in January 2001).

“There has been an increase in driving under the influence of cannabis since the launch of the Federal Drug Policy Note in January 2001” (Mrs. Clotilde Nyssens, MP CVP, Flemish Christian Democrats; Vr. en Antw. Senaat, 12 juni 2001, nr. 2/36 (Vr. nr. 1265 C. Nyssen)).

Whereas policy issues often rise rapidly to the top of the political agenda and require quick answers, scientific research can take months or years to complete. As the parliamentary debates took place in the months following the launch of the Federal Drug Policy Note, it was not possible to draw conclusions like *‘cannabis use increased due to the Federal Drug Policy Note’* (Kinable, 2002).

3.2.2. Political context

The Federal Drug Policy Note closely followed the final conclusions and recommendations of the PWG. However, a political **struggle** occurred **between the opposition and the majority** or, in other words, between the members of the Verhofstadt I Government and the members of the previous one (Dehaene II Government).

“MPs were strongly opposed. Mr. Jo Vandeurzen was one of the most difficult opponents. He was an expert in public health matters. Based on his experiences in the PWG, he gave the majority a hard time in the Parliament. Those were sometimes difficult debates for the Government.” (Respondent 34, policy-maker).

Several MPs (from the majority as well as from the opposition) and members of the Government openly criticised the *hypocrite, dual role of the CVP, Flemish Christian Democrats*. For instance, some political opponents of the CVP (Flemish Christian Democrats) blamed the 1998 Ministerial Circular Letter of Tony Van Parys (CVP). The 1998 Ministerial Circular Letter was labelled the starting point of the normalisation of cannabis use (among youth).

"I want to stress the complete hypocrisy of the Flemish Christian Democrats. [...] They have been criticising the Federal Drug Policy Note. [...] Colleagues of the Flemish Christian Democrats, you started the discussion, for heaven's sake. They opened Pandora's box. The Verhofstadt I Government just implemented your thoughts." (Mr. Filip De Man, MP Vlaams Blok, Flemish extreme right party; Hand. Kamer 2000-2001, 30 januari 2001, 106).

MPs from the Flemish Christian Democrats used two strategies to refute the accusation of being hypocrite. On the one hand, they (wrongly) argued that the principles of the 'new' cannabis policy in the Federal Drug Policy Note were much more tolerant than the conclusions of the PWG. On the other hand, they held on to the decisions that were made in the former period. For instance, they regularly stressed that the recommendations of the PWG were approved by a majority.

The discussions exacerbated **existing tensions among the Coalition partners** in the Government too. Several MPs from the majority expressed their doubts about the Federal Drug Policy Note (which emphasises the importance of the individual in the policy-making process). While supporting the progress made, French-speaking MPs from the majority pointed to several inconsistencies in the Federal Drug Policy Note. Criticism became even more virulent on the side of Flemish MPs from the majority (SP, VLD). The answers given by the Minister of Justice and the Minister of Public Health brought little clarification.

"The 1998 Ministerial Circular Letter was criticised because of the vague notions 'problematic use' and 'use with nuisance', the last circular letter was vague. [...] The problems with these notions were not resolved." (Mrs. Fientje Moerman, MP VLD, Flemish Liberals; Hand. Kamer 2000-2001, 30 januari 2001, 106).

Political tactics played an important role. Opposition parties were very active in formulating *personal insults* and using *metaphors*. These strategies were used in order to undermine the credibility of the Government and the political majority in the Parliament. Very often MPs presented themselves as 'honest' or aiming for 'honesty' while, at the same time, pointing to the unfairness of political opponents. Having a central position in the drug/cannabis debate, both the Minister of Justice Marc Verwilghen and the Minister of Public Health Magda Aelvoet were blamed.

"Mrs Minister, I'm going to be honest with you. In the last year and a half, you have talked nonsense more than once. You have a practically flawless feeling for blunders and inaccurate communication." (Mr. Yves Leterme, MP CVP, Flemish Christian Democrats; Hand. Kamer 2000-2001, 30 januari 2001, 106).

Moreover, MPs in an oppositional position consciously stimulated the confusion by using *inaccurate terminology*. Many members of the Parliament did not make a distinction between the possession and the use of cannabis and between the concepts 'legalisation', 'depenalisation' or 'decriminalisation'.

*"It is astonishing that the Government has decided to no longer criminalise the use of cannabis."
(Mr. Jo Vandeurzen, MP CVP, Flemish Christian Democrats; Hand. Kamer 2000-2001, 30 januari 2001, 106).*

The discourse of the opposition parties and some majority parties often included concepts like 'youth', 'children', 'minors'. Here, MPs pointed to the increase of cannabis consumption among youth, to the accuracy of the stepping-stone story, and the establishment of coffee-shops in Belgium. Such *emotional assumptions* were not based on any scientific knowledge. Likewise, it was sometimes stated that the expertise as a parent was equally important as the expertise of a scientist.

*"You don't have to be a great psychologist or professor to know this. My children are 20 years old. In a discussion with youngsters about the use of drugs, the argument of 'authority' is taken down by the Government (my emphasis)."
(Mr. Jos Ansoms, MP CVP, Flemish Christian Democrats; Hand. Kamer 2000-2001, 31 januari 2001, COM 373, 1-4).*

Finally, arguments related to the renegotiation of international conventions were very often observed in the public debate. A common strategy was to project the effects of depenalisation, decriminalisation or legalisation of cannabis on the basis of *analogies to experiences of other countries* (cf. *policy platonism*). The Dutch coffee-shop model was frequently mentioned to support the idea that liberalisation may lead to drug tourism and an increase in drug use. The advantages of prohibition were supported by the American example of the *War on drugs*.

*"Depenalisation of the possession of cannabis may increase the demand. That is obvious. This is confirmed by the current developments in the Netherlands."
(Mr. Jo Vandeurzen, MP CVP, Flemish Christian Democrats; Hand. Kamer 2000-2001, 30 januari 2001, 106).*

3.3.3. Media coverage

There was a strong link between the parliamentary debate and media coverage. The news reports on the cannabis issue frequently triggered opposition MPs. In other words, interpellations and questions were quite clearly and strongly led by media content. For instance, an MP from the extreme right party Vlaams Blok used the media to introduce his interpellation.

"You don't have to believe me, but the newspaper headlines do not lie. I brought some with me. I quote 'Cannabis free', 'Cannabis use no longer a criminal offence', 'The use of cannabis completely free', 'Smoking joint in bars allowed' and 'Belgian policy of tolerance more tolerant than the Dutch one'. That is the message that is given." (Mr. Filip De Man, MP Vlaams Blok, Flemish extreme right party; Hand. Kamer 2000-2001, 30 januari 2001, 106).

Members of the Government and MPs from the majority used the media as well. For instance, MPs from the majority used media statements by political opponents to point to the hypocrisy of the Flemish Christian Democrats (as a result of switching from majority to an oppositional role). Even the Minister of Justice Marc Verwilghen and the Minister of Public Health Magda Aelvoet tried to refute the existing confusion by using media statements. This confirms once more that Ministers (and their representatives) were aware of the media coverage (see above, §2.4.2.).

"Like I said in an interview in 'Le Soir' [...]. Cannabis has a special status, but it is still an illegal drug." (Mrs. Magda Aelvoet, Federal Minister of Public Health, AGALEV, Flemish Greens; Hand. Kamer 2000-2001, 30 januari 2001, 106).

4. Mobilisation of interest group 'Parents against Drugs'

The existing tensions among the Coalition partners (heated by the media and parliamentary attention) as well as the ongoing debates about the reform of the police ('Octopus reforms') initially hampered any real progress of the realisation of the action points from the Federal Drug Policy Note.⁹³

"The unfortunate communication raised some tensions. That is the reason why it took so long before any legislative work was started [...] I have to say we also had a lot of work with other topics. There were a lot of discussions about the reform of the police [...] I also felt that the Government was totally fed up with the Federal Drug Policy Note." (Respondent 50, scientist).

Within this framework, statements of the Flemish **interest group** *Parents against Drugs* [*Ouders tegen Drugs*] regularly seeped into the discourse of some newspapers. For example, in September 2001, attention mostly focused on the first appearance of doctor Mireille Vergucht, a member of the interest group *Parents against Drugs* [*Ouders tegen Drugs*], in the newspapers. Clearly,

⁹³ The lack of progress was also felt by practitioners who tried to put some pressure on the Government. For example, practitioners, united in a Memorandum Group, took the lead in inviting a representative of the Minister of Public Health Magda Aelvoet. The representative made clear that – amongst other topics - long-term or permanent contracts for prevention/treatment workers could not be guaranteed and still depended on the funding of the 'drug plans' (Chapter 1, §2). Accordingly, stressing the importance of this particular action point in the Federal Drug Policy Note (Federal Drug Policy Note, p.34), they sent a letter to the Prime Minister Guy Verhofstadt, the Minister of Justice Marc Verwilghen, the Minister of Public Health Magda Aelvoet and the Minister of Interior Affairs Antoine Duquesne as well as to the presidents of the party factions in the Chamber of Representatives.

the media acted as an important communication tool for interest groups. However, by promoting urine tests among youngsters (to check for drug use), doctor Mireille Vergucht was often openly criticised by practitioners in the media. At the same time, the interest group was criticised by some (rather progressive) journalists. *“Federal Drug Policy Note does not legalise cannabis. J. Smits, president of the interest group Parents against Drugs [Ouders tegen Drugs], is not always well-informed about the goals of the Government” (1 June 2001, Flemish newspaper Het Nieuwsblad).*

In addition to their use of the media, they employed several other methods to gain more public (and political) attention. First, members of *Parents against Drugs [Ouders tegen Drugs]* gave lectures and distributed flyers in order to gain public support. Secondly, they actively tried to influence policy-making by making contact with (like-minded) members of the Parliament. Within this framework, they succeeded in convincing some MPs to submit questions or interpellations. In particular, the Flemish extreme right party *Vlaams Blok* was the only supporter of a radical interpretation of their message ‘say no to drugs’. Several interviewees stressed that the Flemish interest group *Parents against Drugs [Ouders tegen Drugs]* was financially and organisationally supported by this political party.

“We had contacts with the interest group, we were their only political representative. But they knew that they risked negative attention by cooperating with the Vlaams Blok [...] They were careful, we were careful because we did not want to limit their work. They really cooperated with us. Organising meetings, a demonstration etc.” (Respondent 14, policy-maker).

Thirdly, they collected signatures against legalisation and organised a large demonstration on 30 September 2001. Some political parties were represented: CD&V⁹⁴ (Flemish Christian Democrats), *Vlaams Blok* (Flemish extreme right party), Front National (French-speaking extreme right party). Several newspapers reported on this demonstration. *“More than 90% of the 3.000 demonstrators were Flemish people responding to the appeal of the interest group” (1 October 2001, French-speaking newspaper Le Soir).* As a result of the petition and demonstration, members of the interest groups were invited by the Prime Minister Guy Verhofstadt and the Minister of Public Health Magda Aelvoet. Even though they were heard and a dialogue was set up, all interviewees (members of interest groups as well as policy-makers) agreed that their efforts did not result in effectively influencing the Ministers (and their representatives) of the Verhofstadt I Government.

⁹⁴ The CVP became CD&V in September 2001.

"We organised a demonstration and, a couple of days later, we were invited by the Prime Minister Guy Verhofstadt [...] We were allowed to discuss our worries, but in practice, nothing changed [...] We were not decisive. We rang a bell but that's it." (Respondent 3, member of interest group).

While scientific expertise was valued by its 'objectivity' and practitioners by their 'day-to-day experience', interest groups were viewed as hopelessly driven by emotions. Furthermore, it was frequently argued that their organisation and arguments were not structured enough and that they united only a small number of citizens who did not necessarily represent the larger public. The reality of policy-making dictates that most policy decisions need to be acceptable to a majority of the voting population (Matthew-Simmons, 2011).

"Their emotional discourse influenced some people but it was not structured enough [...] Each story was touching but, as a group, they did have less impact." (Respondent 39, policy-maker).

Additionally, their actions popped up too late (the Federal Drug Policy Note was already developed and politically approved in January 2001) and there is no easy flow of information between the Parliament and the Government (these are rather two different worlds). Attempts to influence policy-making therefore remained limited to setting the parliamentary agenda instead of influencing the Inter-Cabinet Working Group (ICWG). In other words, they affected policy-makers on the level of the public feasibility of their policy choices instead of on the level of substantive argumentation in the ICWG.

5. Conclusion

The Federal Government translated the conclusions and recommendations of the Parliamentary Working Group on drugs (PWG) into the first national drug strategy in Belgium. The Federal Drug Policy Note, which I consider to be the second milestone in the development of Belgian drug policy between 1996-2003, stressed that the drug phenomenon is considered to be a permanent social reality (i.e. *normalisation* policy). Accordingly, in the framework of *an integral and integrated policy*, a discourse with a purely criminal focus was officially replaced by a discourse where the drug problem was primarily considered a *problem of public health* (Federal Government, 2001a).

The value of **scientific knowledge** was strongly acknowledged in the Federal Drug Policy Note. The concept *evidence-based* was adopted and it was decided that the Minister in charge of the Federal Science Policy received an annual budget to organise and manage a research programme. A budget increase of this kind can be seen as an important indicator of the efforts that

the policy-makers made in addressing the drug problem and in considering scientific knowledge as a priority.

Likewise, the **Federal Government** seemed to be comfortable with scientific knowledge in order to temper the ideas of opposition MPs in the Parliament and to shape the details of the policy they develop. Scientific knowledge contributed to the Inter-Cabinet Working Group (ICWG) through **different modalities**. First of all, the ICWG was strongly influenced by the concepts or perspectives provided by scientists in the PWG. This can be considered as an indirect pathway through which scientific knowledge seeped into the policy discourse (*conceptual utilisation*). Furthermore, as the evaluation study of Prof. Dr. Brice De Ruyver and Prof. Dr. Joris Casselman (2000) fitted with the mood of the time and answered the questions which were at the top of the political agenda since the PWG, the action points of the Federal Drug Policy Note followed the conclusions and recommendations of this evaluation study (De Ruyver, et al., 2000). In other words, this study led to action/implementation by the Federal Government (*instrumental utilisation*). The fact that an evaluation study fulfills this particular role fits with the literature on *evidence-based* policies (Devroe, Deschamps and Hannes, 2008). Thirdly, examples of *political/symbolic utilisation* were also noted. For instance, one of the objections of the evaluation study was that notions such as ‘public nuisance’ and ‘problematic use’ and ‘limited possession for personal (single or occasional) use’ included in the Ministerial Circular Letter of 8 May 1998 were too vague and created a lack of uniformity in prosecutions for cannabis possession. Even though the Federal Drug Policy Note demonstrated commitment and responsiveness by including a reference to the Governments’ investment in the evaluation study, the vagueness of the notions was not resolved at all (Durieux, 2002; Guillain, 2003). Additionally, members of the Government used scientific knowledge when answering questions and interpellations in the Parliament. They displayed commitment in the use of scientific knowledge in order to win political authority (see also MacGregor, 2010). Even though most of these references to scientific knowledge or scientists were formulated in a generalistic way (e.g. ‘based on a conference, we know’, ‘foreign studies explored’), we identified a high utilisation of the studies that they (or their predecessor) had commissioned. Termed *status model* by Cross et al. (2000), these examples of the government’s desire to be *evidence-informed* support the extension of Weiss’s political/symbolic utilisation model (Weiss, 1979).

The **parliamentary discussions** following the launch of the Federal Drug Policy Note and the information campaign resulted in a struggle over the discourse on cannabis policy between the Verhofstadt I Government and the previous Dehaene II Government as well as between individual MPs from the majority. Scientific knowledge (e.g. inter(national) epidemiological data, inter-

national drug policy studies) was one of the sources of information used by MPs. Similar to the contributions of the members of the Government, most of the references to scientific knowledge or experts were labelled generally (e.g. 'studies showed', 'experts explained'). In this context, we found in particular examples of *political/symbolic utilisation* of scientific knowledge. MPs simply selected those studies or scientists that supported their political interests. Scientific knowledge was also (consciously) misinterpreted (e.g. ignoring the different time frames of science and policy) in order to enhance their position in these debates. Clearly, Weiss's political/symbolic model has to include a distinction between instances where scientific knowledge is truly being used as opposed to when consciously misuse or misinterpretation.

Many other factors in addition to scientific knowledge were also driving the Inter-Cabinet Working Group (ICWG) and the following parliamentary debates. In other words, several **barriers** of knowledge utilisation were noticed. A large influence can be attributed to the *institutional and individual characteristics of the political setting*. The ICWG had the task of taking into account the opinions of the individual Ministers and the viewpoints of their political party as well as the international framework (i.e. Dutch drug policy, the international drug control conventions). The debate was clearly overshadowed by the disagreements between individual policy-makers within the same party, even within majority parties. For instance, as a political strategy of a dissatisfied Coalition partner, some preliminary drafts of the Federal Drug Policy Note were leaked to the media to hamper (and influence) the policy-making process. The use of political tactics (e.g. incorrect terminology, personal insults, emotional assumptions, metaphors) in the parliamentary discussions was also a tangible illustration of this point. The *characteristics of scientific knowledge* were reported to be important barriers of knowledge utilisation in the ICWG as well. The idea that policy-makers and scientists operate in two different worlds and speak two different languages was stressed (*two communities thesis*; Caplan, 1979). For instance, interviewees pointed at the fact that scientific research often takes years to complete while policy issues often rise rapidly to the top of the political agenda. The translation of scientific knowledge into a short, comprehensible report was considered to be an even more complex process. Furthermore, it was acknowledged that scientists always apply a certain degree of nuance in their arguments while policy-makers think in terms of practical solutions. In pursuing this, it is no surprise that high value was placed on *practitioner* knowledge. Their interests are not only related to more practical day-to-day experiences and concerns but were also well-argued and proactively put forward through a Policy Memorandum (Memorandum group, 1999).

Scientific knowledge was more likely to be used when it was introduced in the policy-making process (**facilitator**) (Loader and Sparks, 2011). In the Inter-Cabinet Working Group (ICWG),

Prof. Dr. Brice De Ruyver acted as an *observer-turned player* who was able to function equally well in the academic world and the policy-making process. His role as the security advisor to Prime Minister Guy Verhofdstadt enabled him to promote the utilisation of his own research and that of other researchers. In particular, he was of considerable value in enhancing the *instrumental* use of scientific knowledge (e.g. the evaluation study, international drug policy studies) in the ICWG. Furthermore, on the sidelines of the ICWG, several *policy advisors* facilitated the *conceptual* utilisation of scientific knowledge through personal relationships with the Ministers (or their representatives). Indeed, it often appeared that the Ministers (or their representatives) (selectively) consulted *policy advisors* from their personal network to get some background information, to unravel a problem or to support or refute some arguments in the discussion. In particular, they tended to turn to those scientists who were known to be appropriately discreet (especially in such a heavily mediatised domain) and had the capacity to convince public and political audiences. Clearly, when scientists want to act as *policy advisors*, they have to actively search for access to the personal networks of the Ministers (or their representatives). These scientists are assumed to engage with journalists (and the public) as well.

The launch of the first national drug strategy as well as the information campaign were both heavily debated in the **media**. In particular, the media discourse (characterised by a focus on cannabis policy and the harmfulness of cannabis use) exaggerated the incomplete and contradictory message of the Federal Government and, accordingly, further confused both the policy-makers' and the public's understanding of the debate. Several opinion polls confirmed these public concerns and misunderstandings (Patesson and Steinberg, 2000). At the same time, media discourse triggered the submission of a large number of questions, interpellations, resolutions or bills. Within this framework, the media operated as a kind of *knowledge distributor* between science and the parliamentary process (*facilitator*). Parliamentary activities were frequently supported by scientific knowledge (e.g. inter(national) epidemiological data or international drug policy studies) that was quoted in newspapers (thus as an *indirect reference*). The media did not play a vital role in shaping the Federal Drug Policy Note. However, Ministers and their representatives always take into account the media discourse, as they are driven by their concern about how the public (and their electorate) viewed and assessed their policy decisions.

The main audiences for **interest groups** were the media (and the public opinion) and MPs. Flemish interest group *Parents against Drugs [Ouders tegen Drugs]* was mobilised after the launch of the Federal Drug Policy Note. This resulted in several (emotional) presentations in media, the establishment of contact with MPs, a petition and the organisation of a demonstration. This interest group succeeded in heating up and polarising the debate even more. However,

their attempts to influence policy-making remained limited to bringing issues onto the parliamentary agenda. Their lack of influence on the Inter-Cabinet Working Group (ICWG) is the result of their deficient organisational and communication structure and reflects the fact that they only represented a small part of the public opinion. Furthermore, their mobilisation was initiated too late: the Federal Drug Policy Note was already developed and politically approved.

As one of the action points, the Federal Government planned to put the drug policy priorities into action by means of a new legal framework. The adaptation of the drug law (and the Ministerial Circular Letter), the third milestone in the development of Belgian drug policy between 1996 and 2003, is discussed in the next chapter.

Chapter 5 The reform of Belgian drug law (2002-2003)

According to the Federal Drug Policy Note, a global and integrated policy requires prevention, early detection and intervention, treatment including risk-reduction and repression. Repression towards the users, however, had to remain a last resort (*ultimum remedium*) (Federal Government, 2001a, p.7-8). In accordance with this point of view, the Federal Government planned to amend the Belgian Narcotic Drug Law of 1921 and, accordingly, to develop a new Ministerial Circular Letter. This action point was most heavily debated by MPs, members of the Government, the media and interest groups. The Federal Drug Policy Note provided the substantive framework for the juridical-technical debates regarding the reform of Belgian drug law in an Inter-Cabinet Working Group (ICWG) and the Parliament (both Chamber of Representatives and Senate). I consider the implementation of the new law (2003) (and the new Ministerial Circular Letter) as the **third milestone** in the development of Belgian drug policy between 1996 and 2003.

1. The implementation of the Federal Drug Policy Note between 2001-2003

Several recommendations of the Federal Drug Policy Note were implemented in the years following its launch. We first highlight two elements that are central to this study: the new drug law and the state of the art regarding scientific knowledge. In §1.3., the realisations related to coordination structures, prevention and harm reduction are discussed briefly.

1.1. New drug law: modifications to the 1921 Narcotic Drug Act

Criminal policy on drugs was anchored through an adaptation of the drug law (of 24 February 1921; see Chapter 1) and the Ministerial Circular Letter of 8 May 1998 (De Ruyver, Vander Laenen and Eelen, 2012). In particular, an important modification of the drug law was made by the Law of 4 April 2003 and the Law of 3 May 2003. These two laws were accompanied by the Royal Decree of 16 May 2003 and the Ministerial Circular Letter of 16 May 2003 which determined the prosecution policy (see below, §4).⁹⁵ As will become clear below, the modification fitted with the policy priorities put forward by the PWG (1996-1997) and the Federal Drug Policy Note (2001): the criminal justice response is primarily aimed at drug production and drug trade; problematic drug users who come in contact with the criminal justice system need to be promptly diverted to

⁹⁵ Because of technical reasons (related to the Articles 77 and 78 of the Constitution), the legislative initiative was divided into two bills (nrs. 1888 and 1889). Both drug laws (of 4 April and 3 May 2003) should also be considered as linked with a Royal Decree (16 May 2003) detailing the categories of infringements and a Ministerial Circular Letter (16 May 2003) determining the prosecution policy of cannabis. Each of the initiatives is complementary to the realisation of the new public health policy. As we may treat both laws and the Royal Decree as one entity, we will regularly use the concept new drug law to refer to this package.

(drug) treatment, making use of the existing legal provisions on different levels of the criminal justice system (De Ruyver, Vander Laenen and Eelen, 2012). Thus, a criminal procedure should be an *ultimum remedium*, and within the criminal system, imprisonment should be used as a last resort (Federal Government, 2001a; p.7; Van Gaever, 2003; Mahieu, 2005; Dangreau and Serlipens, 2007).

In the new drug law⁹⁶ (of 4 April 2003 and of 3 May 2003) and the Royal Decree (of 16 May 2003) a criminal approach was suggested, with a focus on the differentiation and the individualisation of the criminal intervention (cannabis versus other illegal drugs; experimenting, problematic use, personal use, dealing with profit). One of the most important changes concerned the new statute of cannabis being defined as another category of drugs with its own distinct regulations (i.e. the possession of an amount of cannabis, meant for personal use, by an adult (i.e. 18 years or older), without the presence of nuisance or problematic use will only lead to a registration by the police). 'Problematic use' was defined as the use that is linked with a level of dependence that disables users to control his/her use and that is expressed by psychological and physical symptoms. The definition of 'public nuisance' was provided by the broader definition of 'public nuisance' in Art. 135, §2 of the New Community Law⁹⁷. In particular, it was expressly stated that 'public nuisance', in accordance with the 1988 United Nations Convention against illegal traffic in narcotic drugs and psychotropic substances, referred to the 'possession of cannabis in a prison, education institute, public institute or in their neighbourhood as well as in meeting places of minors like schools, sport centre, etc'. Other changes implemented by the new drug law were that 'drug use in a group' was no longer punishable and that substances that could be used to produce illicit substances (so-called precursors), under article 8 of a European Council Regulation (n° 3677/90), were now incorporated as well.⁹⁸

⁹⁶ Wet van 4 april 2003 tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van giftstoffen, slaapmiddelen en verdoovende middelen, ontsmettingsstoffen en antiseptica (*B.S.* 2 juni 2003), en Wet van 3 mei 2003 tot wijziging van de wet van 21 februari 1921 betreffende het verhandelen van giftstoffen, slaapmiddelen en verdoovende middelen, psychotrope stoffen, ontsmettingsstoffen en antiseptica en van de stoffen die kunnen gebruikt worden voor de illegale vervaardiging van verdoovende middelen en psychotrope stoffen (*B.S.* 2 juni 2003).

⁹⁷ This law concerns the local administrative sanctions. It gives the municipalities the possibility of adding behaviours described as public nuisance to their police regulations and respond to those offences with administrative procedures (Wet van 13 mei 1999 betreffende de invoering van de gemeentelijke administratieve sancties, *B.S.* 10 juni 1999).

⁹⁸ The new drug law changed the title including substances that could be used to produce illicit substances (so-called precursors) as well: 'Wet van 3 mei 2003 tot wijziging van de wet van 21 februari 1921 betreffende het verhandelen van giftstoffen, slaapmiddelen en verdoovende middelen, psychotrope stoffen, ontsmettingsstoffen en antiseptica en van de stoffen die kunnen gebruikt worden voor de illegale vervaardiging van verdoovende middelen en psychotrope stoffen, *B.S.* 2 juni 2003'. Crimes concerning precursors are subject to the penalties specified in Art.2 quater of the drug law.

In this context, a distinction between infringements for *personal use* or infringements for *profit* (i.e. clear differentiation according to the intent) and between three categories of crimes was explicated. The *first* category involved the importation, production, transport, purchase, possession and cultivation of cannabis for *personal use*. The *second* category included the behaviour from category 1, but in cases of aggravating circumstances such as the presence of minors⁹⁹, problematic use or public nuisance. The *third* category included all violations of the drug law that were not included in the first or second category. Both category 2 and 3 were linked with an imprisonment (between 3 months and 5 years) as well as a fine (between 5.000 and 500.000 €). Other penalties were placed in category 1: first infringement (fine of 15-25 €), repeated infringement within one year (fine of 26-50 €), another repeated infringement within one year after the second infringement (imprisonment of eight days-one month and a fine of 50-100 €), in case of aggravating circumstances such as involvement of minors or criminal organisations (imprisonment of three months- one year and/or a fine of 1.000 – 100.000 €). Obviously, the commerce, production, export and importation of substances (for profit) remained forbidden, and retained their original punishments.

Furthermore, the new drug law allowed a broader application of the Law of 29 June 1964 concerning the conditional sentence, suspended sentence and probation (changed by the Law of 10 February 1994).¹⁰⁰ According to this law, a judge can decide to defer the pronouncement of a sentence or to postpone the execution of a sentence. Linking conditions to these decisions results in a 'probationary conditional sentence'¹⁰¹ or a 'probationary suspended sentence'¹⁰². While, according to art. 3 and 8, the person concerned should not have been earlier sentenced to a criminal sentence or a prison sentence of more than 12 months, art. 9 of the Law of 9 July 1975 already added that, in particular cases, judicial antecedents were no impediments for probation (see also above, Chapter 1, §1). The new drug law (of 3 May 2003) replaced art. 9 of the Law of 9 July 1975 by removing 'drug use in a group' (as this was no longer punishable). Simultaneously, the scope of art. 9 was extended. Art. 9 of the new drug law noted that, in case of offences for

⁹⁹ Even though the concept of aggravating circumstances (e.g. drug use by minors) was implemented by the Law of 9 July 1975, the Royal Decree (of 16 May 2003) underlined the importance of the protection of minors once more (B.S. 2 juni 2003, p.29935).

¹⁰⁰ Wet van 29 juni 1964 betreffende de opschorting, het uitstel en de probatie, B.S. 17 juli 1964. Wet van 10 februari 1994 tot wijziging van de wet van 29 juni 1964 betreffende de opschorting, het uitstel en de probatie, B.S. 27 april 1994.

¹⁰¹ Probationary conditional sentence means a judicial decision according to which the imposition of the sentence is suspended with the condition that the person complies with probation measures.

¹⁰² Probationary suspended sentence means that the judge pronounces a sentence but that the execution of the whole or a part of the sentence is suspended for a certain period, during which the person concerned must fulfil certain conditions.

personal use (i.e. the possession for personal use as well as the sale to finance one's own use)¹⁰³ without aggravating circumstances, judicial antecedents were no impediments for probation (Mahieu, 2004; Geenens, et al., 2005). In aiming to reduce user's physical and psychosocial problems that might accompany drug abuse and to protect society, this broader application allowed to guide problematic drug users more easily towards treatment (*ultimum remedium* philosophy).

In a similar vein, as the importance of individualised and continuous care and of cooperation between the criminal justice and the treatment system has been stressed in the Federal Drug Policy Note (2001) (Vander Laenen and Dhondt, 2003; Geenens, et al., 2005), the Royal Decree of 16 May 2003 formally introduced the terms *risk reduction* and *therapeutic advice*¹⁰⁴. The new concept of 'case-managers' for judicial and health matters, to be appointed by the Federal Ministers of Justice and Health respectively, was also introduced (see also Federal Government, 2001a, p.34, 49). On the one hand, the chronic and complex problems of many drug abusers and the lack of coordination and continuity of care were the main reasons for introducing *health case managers* (Vanderplasschen, et al., 2004). A *health case manager* was said to be responsible for the personal observation of problematic drug users who are guided to treatment (in order to enhance treatment access, participation and retention and to improve treatment results concerning drug use, employment, psychological problems or criminality) (Geenens, et al., 2005). Case-managers for health matters were implemented in 2002: a pilot project for the development of crisis units for drug addicts and the implementation the role of case manager within these units was initiated (Geenens, et al., 2005; see also below, §1.3.2.).

On the other hand, a *judicial case manager* had to bridge the gap between the criminal justice system and the (drug) treatment system, to inform magistrates about treatment possibilities for drug offenders, and to advise them about the desirability of coercion.¹⁰⁵ In particular, it was determined that, at every stage of the criminal justice system, magistrates had the opportunity (through a *judicial case manager*) to ask for therapeutic advice. The positive or negative advice of an independent *therapeutic adviser* (based on existing scientific, psycho-social and medical

¹⁰³ This was to stress the distinction between personal use and profit (i.e. clear differentiation according to the intent) (Mahieu, 2004).

¹⁰⁴ The title of the Royal Decree of 31 December 1930 was changed and now included the terms 'risk reduction' and 'therapeutic advice' (see also Todts, 2004).

¹⁰⁵ While the Royal Decree (16 May 2003) described the role of the *judicial case manager* as someone who assists in monitoring the drug problem and the people involved and supports the guidance of problematic drug users more easily towards treatment, the Ministerial Circular Letter (16 May 2003) adds that the judicial case manager should be in charge of the coordination of the treatment network in general (De Ruyver, et al., 2008a). Within this framework, the importance of agreements considering and respecting the different goals and principles of both sectors (e.g. professional confidentiality) was stressed.

knowledge) was to help the magistrate to assess the extent of problematic use and the need for treatment, taking into account the interests of the user as well as of the society. The lack of structural clarity together with a limited financial support¹⁰⁶ hampered its implementation for a long time (De Ruyver, et al., 2004). Nevertheless, worth mentioning are the pilot-projects like 'Test Care' (2005-2007), 'Drug Treatment Court' (2008), etc. which were established recently (De Ruyver, et al., 2008a; De Ruyver, Lemaître and Schoenaers, 2009; Luypaert, et al., 2007).¹⁰⁷ These pilot-projects aimed to divert drug offenders from different levels of the criminal justice system towards treatment: e.g. 'Test Care' at prosecution level and 'Drug Treatment Court' at sentencing level. The pilot-project 'Test Care' was initiated in the judicial district of Ghent in 2005 and the pilot-project 'Drug Treatment Court' started in 2008 in the judicial district of Ghent as well. Evaluation research has indicated that these pilot projects can be labelled as 'good practice' (De Ruyver, et al., 2008; Colman, 2009; Colman, et al., 2011). However, the planned and desired generalisation of these projects faces some capacity and financial obstacles (De Ruyver, Vander Laenen & Eelen, 2012).

Finally, based on the two laws (of 4 April and 3 May 2003) and the Royal Decree (of 16 May 2003), the Minister of Justice Marc Verwilghen, together with the College of Prosecutors-General, had the task of developing a **new Ministerial Circular Letter** detailing the prosecution policy. This Ministerial Circular Letter of 16 May 2003 eventually replaced the Ministerial Circular Letter of 8 May 1998 (see §4).

1.2. Scientific background: state of the art

The elaboration of evaluation, epidemiology and research was already one of the action points in the 1995 Plan Toxicomania. Emphasised once again in the Parliamentary Working Group on drugs (1996-1997) and in the Federal Drug Policy Note (2001), scientific research in Belgium was in gradual expansion.

First of all, we observed an increase of policy-funded drug research as a result of the implementation of the Federal Policy note in 2001. Budgets for drug research increased greatly from €445.975 in 1993 to €2.710.572 in 2002 (De Ruyver, et al., 2004). Since 2001, the Minister in charge of the Federal Science Policy received an annual budget to organise and manage a re-

¹⁰⁶ This is in contrast with the Federal Drug Policy Note which underlined that funding had to be reserved for the implementation of therapeutic advice and alternative sanctions (Federal Government, 2001a).

¹⁰⁷ Other examples are: project 'Clean' (Bruges), the 'Pol'-project (Mechelen), project 'Therapeutic consult' (Limburg), ... (Colman, et al., 2011).

search programme supporting decision-making in the field of illegal drugs.¹⁰⁸ The contribution to the decision-making process (especially regarding topics that were supposed to be acute, taking into account the prevailing political points of view) was an essential aspect of the programme. Likewise, the organisation of guidance committees to follow up the research project had to stimulate the interaction between scientists, policy-makers and practitioners. Even though this is an important step in order to develop Belgian drug research, this evolution also has a downside: it placed scientific researchers in a more dependent position (e.g. related to funding) and (personal) networks between scientists and policy-makers became even more valuable (see above, Chapter 2, §2.2.1.; those selected in formal advisory committees were partly similar to those conducting policy-funded research).

Furthermore, epidemiological research increased (BIRN, 2003). For the first time, in 2001, a module on illicit drugs was introduced in the National Health Interview Survey (HIS).¹⁰⁹ Moreover, Belgium (Flemish and French community) continued to take part in the Health Behaviour School-aged Children studies (HBSC) in 1993/94, 1997/98, 2001/02 too. Additionally, in 2002, evaluations of some syringe exchange projects were executed (De Maere, 2003; Hariga, Przyłuki and Van Lierde, 2002). Results showed that the use of cannabis was still by far the preferred drug among youth and adults and, according to the trends observed in school surveys, lifetime and last month prevalences of cannabis, had increased slightly among youngsters while prevalence rates of amphetamines and ecstasy use had decreased. Prevalence of hepatitis among drug users seemed to have stabilised. Even though some (new) initiatives were taken, the general amount and comparability of the data provided to the EMCDDA remained extremely weak in comparison with other European countries (De Ruyver, et al., 2004).

Equally, due to a recurrent lack of uniform and comparable registration systems, the newly created Belgian Monitoring Centre for Drugs and Drug Addiction (BMCDDA) (i.e. the Scientific Institute of Public Health (WIV), the Belgian focal point) initiated a study aiming at analysing the Belgian situation and making recommendations in order to improve and standardise the collection of the Treatment Data Indicator data. Eventually, a protocol agreement regarding *treatment de-*

¹⁰⁸ The first call (2002) resulted in an evaluation of substitution treatment, an evaluation of the adequacy between diagnosis and therapeutics (matching), a feasibility study for the evaluation of the treatment for dual diagnosis patients, a study of the effect of the long term use of cannabis, and a study regarding local drugs nuisance. In 2003, the focus was on themes like case management in substance abuse treatment and the criminal justice system, the concept of problematic drug use, heroin and substitution treatment, medicinal cannabis use, etc.

¹⁰⁹ This module included four questions regarding cannabis and amphetamines use. These questions were related to lifetime and last month prevalence (recent use) of cannabis and XTC/amphetamines use. The questionnaire was self-administrated and addressed to people over 15 years (Wetenschappelijk Instituut voor Volksgezondheid, 2002).

mand indicators was signed in 2005. The Federal Drug Policy Note also demanded that the Belgian Monitoring Centre for Drugs and Drug Addiction (BMCDDA) was responsible for the European Monitoring Centre for Drugs and Drug Addiction's (EMCDDA) request to further develop an *Early Warning System*. An early warning system on drugs (first for ATS (amphetamine-type stimulants) and later on for new synthetic drugs and psychotropic substances) had been developed in order to facilitate the collection and exchange of information between existing networks within Belgium and within other European countries.¹¹⁰ A Royal Decree (29 June 2003, *B.S.*, 14 July 2003) and a law (7 February 2014, *B.S.*, 10 March 2014) introduced the obligation for laboratories to report every discovery of dangerous substances.

Furthermore, in order to get a good understanding of the scientific state of the art regarding cannabis, its policy and the effects of cannabis use on health and behaviour, several Health Ministers (Mrs. Els Borst, the Netherlands; Mrs. Andrea Fischer, succeeded by Mrs. Ulla Schmidt, Germany; Mrs. Ruth Dreifuss, Switzerland; Mr. Bernard Kouchner, France; Mrs. Magda Aelvoet, Belgium) took the initiative to organise an international scientific conference on the subject of cannabis. The conference took place in Brussels, on 25 February 2002, and was hosted by Mrs. Magda Aelvoet within the framework of Belgian's EU presidency. The topics of discussion were the biochemical characteristics of cannabis (e.g. THC), the health consequences of use as well as the evolution towards more tolerant cannabis policies in various European countries (e.g. Switzerland, Spain, the UK). The focus of the conference clearly fitted within the *public health* approach of the Federal Drug Policy Note (2001) and the sustained concern about the international framework, the developing media discourse on THC concentration, harmlessness of cannabis (see above, Chapter 4, §3.3.3.) and the increasing importance of scientific knowledge. For instance, one of the conclusions of the conference clearly stated: "*We sincerely believe that science can help to ensure that cannabis policy gradually develops into an evidence-based policy*" (p.125).

Another conference, 'Drug policy 2000', was held in February 2003 during the parliamentary debates about the new drug law. The goal of the conference was to evaluate the state of the art regarding Belgian drug policy two years after the establishment of the Federal Drug Policy Note (De Biasio, De Ruyver and Schleiper, 2003). Despite the clear goal of this conference to keep the issue on the agenda and to test or evaluate policy measures, the drug law was already approved

¹¹⁰ In August 2001, two drug-related deaths (PMA, a synthetic drug related to ecstasy) raised some controversy in the media and the political arena. This incident resulted in the establishment of an Inter-Cabinet Working Group under the coordination of the Minister of Public Health. Accordingly, the creation of a Coordination Cell of synthetic drugs and the development of the Early Warning system (which was one of the action points of the Federal Drug Policy Note) were decided (Internal communication Ministerial Cabinet, 30 August 2001). It is clear that so-called *incident-driven decisions* by the Minister of Public Health Magda Aelvoet have led to the creation or elaboration of (new) systems in the short-term.

by the Chamber of Representatives at the time of the conference (the debates in the Senate were still ongoing).

1.3. Realisations related to the Federal Drug Policy Note (2001): coordination structures, prevention, harm reduction and repression

1.3.1. Integral and integrated drug policy

Belgium has clearly chosen an integral and integrated drug policy with both vertical policy coordination between different policy levels (federal, regional, provincial and local) in the domains of prevention, treatment and social policy, and horizontal coordination between the various policy domains and at the various levels (De Ruyver, Vander Laenen and Eelen, 2012).

Several structures to develop and monitor an integral and integrated drug policy were established (De Ruyver, et al., 2004). As a first step, a cooperation agreement between the Federal Government and the federate entities was signed in September 2002.¹¹¹ Accordingly, a **General Drugs Policy Cell** and the **Inter-Ministerial Conference on Drugs** became the fora for coordination and consultation in putting the global and integrated drug policy into practice (Inter-Ministeriële Conferentie, 2010). The *Inter-Ministerial Conference on Drugs* unites all Ministers at several policy levels with competence or part competence for aspects of the drug phenomenon in order to develop common policy objectives and harmonisation. As the starting point of the Federal Drug Policy Note was that drug use is a matter of public health, the Minister of Public Health is in charge of the integrated and integral drug policy and chairs the Inter-Ministerial Conference on Drugs (De Ruyver, Vander Laenen and Eelen, 2012).

The *General Drugs Policy Cell* became operational in 2010 and is comprised of a coordinator (Prof. Dr. Brice De Ruyver), a deputy coordinator (Dr. Claire Remy) and representatives of the authorised Ministers. This body prepares the decisions of the Inter-Ministerial Conference and guards the integrated character of the policy measures (De Ruyver, et al., 2004; De Ruyver, et al., 2007). The *General Drugs Policy Cell* consists of three supporting working cells: Drug Health Policy Cell, Control Cell and International Cooperation Cell (Inter-Ministeriële Conferentie, 2010, p.72). For instance, whereas the *General Drugs Policy Cell* focuses on all aspects of the drug phenomenon, the *Drug Health Policy Cell* is focused specifically on health aspects of the problem. Already on 30 May 2001, the various Ministers involved in Belgian drug policy signed a protocol agreement regarding the establishment of an integrated health policy on drugs (Inter-

¹¹¹ Wet van 11 mei 2003 houdende instemming met het Samenwerkingsakkoord tussen de Staat, de Gemeenschappen, de Gemeenschappelijke Gemeenschapscommissie, de Franse Gemeenschapscommissie en de Gewesten voor een globaal en geïntegreerd drugsbeleid, B.S. 2 juni 2003.

Ministeriële Conferentie, 2010). Accordingly, in order to stimulate and to gear policy initiatives regarding prevention and treatment towards drug users/addicts, the *Drug Health Policy Cell* was set up and became operational in June 2001. *Policy advisor* Prof. Dr. Isidore Pelc was appointed president of the Unit, which was comprised of the representatives of the (Federal and Regional) Ministerial Cabinets involved in this matter (and some practitioners were appointed as substitutes) (Cel Gezondheidsbeleid Drugs, 2002).

The fact that scientists who had long played a proactive role in the drug policy-making process (e.g. PWG, policy-funded research,...) were appointed as the presidents of the Drug Health Policy Cell and the General Drugs Policy Cell underlines the value of a public role as *observer- turned player* or *policy advisor* (Loader and Sparks, 2011). They obtained a privileged position to engage the interaction between science and policy and to generate an *evidence-informed* policy-making (see also below, §2). Given that the *General Drugs Policy Cell* became operational in 2010 and that the development of a coherent, integrated drug policy is an ongoing process¹¹², it would be interesting to investigate its role regarding the science-policy nexus in further research.

As another example of the development of a coherent, integrated drug policy, the criminal justice system aimed, when possible, to divert problem drug users to (drug) treatment (based on the *ultimum remedium* philosophy). In this context, the **cooperation between the criminal justice system and treatment services** gradually increased, not least because of the success of the ‘Test care’ and ‘Drug treatment court’ pilot projects, both in the judicial district of Ghent (see also §1.1.; De Ruyver, Vander Laenen and Eelen, 2012).

Finally, Belgian drug policy took into account international treaties and European policy plans and aimed to ensure consistency with **international and European policy**. In this context, several Intereg-, Euregio-, Multicity- projects had been established (Inter-Ministeriële Conferentie, 2010, p.30-32).

1.3.2. Treatment – harm reduction

The Federal Drug Policy Note aimed for the development of a more integrated legal framework for treatment, harm reduction and reintegration. Some of the action points were already realised in 2003. For instance, stimulated by the former methadone conference (1994) and the Federal Action Plan Toxicomania-Drugs (1995), a legal basis for substitution treatment in Belgium was finally established by the Law of 22 August 2002 (B.S. 1 October 2002). Accordingly, a medical

¹¹² On 25 January 2010, the Inter-Ministerial Conference on Drugs approved a joint declaration, which carries on the principles adopted in the Federal Drug Policy Note of 2001 (Inter-Ministeriële Conferentie, 2010).

practitioner could no longer be punished for using controlled substances for treatment. However, the application modalities defining the preconditions and registrations were still lacking (even though the Federal Drug Policy Note required a good registration system in order to prevent methadone shopping and to develop a coherent policy). A Royal Decree was eventually voted in the Parliament in 2004 (19 March 2004, B.S. 30 April 2004).

A harm reduction perspective was provided for the first time by the 1995 Federal Action Plan Toxicomania-Drugs. Since 2001, needle exchange programmes have been implemented throughout the country (Todts, 2005).

Furthermore, within this framework, the 'Rijksinstituut voor ziekte- en invaliditeitsverzekering (RIZIV – social security administration)' made a financing agreement with twenty-nine specialised rehabilitation services for drug addicts (e.g. medical-social treatment centres for drug users). Two target populations of the agreement were addicted parents and minor addicts (Inter-Ministeriële Conferentie Drugs, 2010, p.20).

Moreover, making use of the additional funding for drug treatment (De Ruyver, et al., 2004), three pilot projects were initiated at the end of 2002: (1) a pilot project for the intensive treatment of patients with dual diagnosis; (2) a pilot project for the development of crisis units for drug addicts and the implementation the role of case manager within these units; and (3) a pilot project for the implementation of the function of a care coordinator within the Consultation Platform Mental Health. Scientific evaluations of these pilot projects took place in 2004, contributing to the development of an *evidence-based* policy: e.g. through the evaluation, the capacity of crisis centers and for double diagnoses patients increased (Inter-Ministeriële Conferentie, 2010, p.11-14).

First of all, the goal of the pilot project on the intensive treatment of **patients with dual disorders** was to measure the feasibility of such an intensive treatment of the specific target group. These programs were evaluated within the framework of the research programme in support of the Federal Drug Policy Note. In accordance with a preliminary study including an overall evaluation study on treatment services for patients with dual disorders in 2002, the effectiveness of inpatient treatment programs for dually diagnosed patients was evaluated in 2004 (Van Ham and Sabbe, 2006). The evaluation study confirmed the effectiveness of the programs: positive results were found regarding psychological functioning, global functioning, drug use and the quality of life of the patients involved. The evaluation also demonstrated the usefulness of the role of a case manager in this context.

The Federal Minister of Public Health also supported the implementation of a **pilot project on crisis units and case management** in 2002. The pilot project aimed to integrate crisis units in existing care organisations in order to map the expectations and needs of the patients rapidly, to refine the diagnosis and to organise long-term care more efficiently. Later on (2008-2010), researchers evaluated this pilot project positively (Evaluation of Crisis and Case Management - ECCAM) (Bruffaerts, et al., 2011).

The development of a more integrated legal framework by means of care circuits and case management was studied through the establishment of another **pilot project** in 2002. Each Consultation Platform Mental Health made an appeal to all provinces to participate in the pilot project. The goal was to implement the function of a **care coordinator** within the Consultation Platform Mental Health in order to improve the consultation between the responsible provincial actors involved. Several Platforms decided to participate but, in 2012, the pilot project was halted.

Finally, the Federal Drug Policy Note (2001), in accordance with earlier developments (i.e. Methadone conference in 1994 and the PWG in 1996-1997), directed the Federal Government to evaluate controlled heroin maintenance-projects. Initially, the task of making an inventory of controlled heroin maintenance-projects was given to the Drug Health Policy Cell (Cel Gezondheidsbeleid Drugs, 2002) but, in a subsequent phase, the Federal Science Policy Office included this inventory and evaluation in the call for proposals of the research programme. As a result, the policy-funded study 'Heroin Delivery under Control: feasibility and follow-up study (DHCo)' started at the end of 2003 (Ansseau, et al., 2002). In 2007, the Minister of Justice Laurette Onkelinx and the Minister of Public Health Rudy Demotte (both PS, French-speaking Socialists) affirmed their commitment to a pilot project on 'Treatment Assisted by Diacetylmorphine' in the city of Liège between 2011 and 2013 (Inter-Ministeriële Conferentie Drugs, 2010; Demaret, et al., 2013).

1.3.3. Prevention

Prevention campaigns regarding the abuse of sedatives were launched in November 2002 and February 2003. The goal was to provide health care providers with information, interactive training and tools to assist patients and to provide answers for questions about the use of psychoactive medicines (Inter-Ministeriële Conferentie Drugs, 2010, p.14).

In the 1990s, the Belgian Institute for Road Safety organised **prevention campaigns** on the consequences of drug use (especially alcohol) in road traffic (e.g. BOB – Wodca). These initiatives

continued after the launch of the Federal Drug Policy Note in 2001 (Inter-Ministeriële Conferentie Drugs, 2010, p.37).

In 2002, the Flemish Government subsidised some new regional prevention workers (the number raised from 10 to 20) (Inter-Ministeriële Conferentie, 2010, p.43). However, within this framework (and despite the efforts of the Policy Memorandum Group), any long-term or permanent contracts were still not guaranteed. They still depended on the short-term funding of the 'drug plans'.

Generally, it became clear that, based on the detailed overview of the public expenditures of 2002, prevention received only 4% of the total budget while 54% went to repression, 38% to treatment and harm reduction, and; 3% to policy management. Research and epidemiology was the least financed area with only 1% of the total budget (De Ruyver, et al., 2004). This budget allocation was in contrast with Belgian drug policy priorities which suggested that prevention has the highest priority, followed by treatment and only then repression (*ultimum remedium*).

1.3.4. Repression

In the field of repression, several initiatives were taken next to the adaption of the Belgian Narcotic Drug Law of 1921. For instance, as the Federal Drug Policy Note (2001) stressed the need for a more **scientific elaboration of drug-related criminality and nuisance**, the Federal Science Policy launched several research projects within the framework of the research programme (Ponsaers, et al., 2005; De Ruyver, et al., 2008b).

Furthermore, in 2002, in accordance with the demand of the PWG (1996-1997) and the Federal Drug Policy Note (2001), the development of a **prison drug policy** gradually started in 2006. A *Central Steering Group Drug Policy* as well as *Local Steering Groups Drugs* in each prison were created. For the actual implementation and coordination, two Regional Coordinators of Drug Policy in Prisons were assigned. Furthermore, *drug free units* were gradually established in several prisons (e.g. Verviers (2007), Bruges (2009)) (De Ruyver, et al., 2004; De Ruyver, et al., 2007).

2. Towards a drug law reform: an Inter-Cabinet Working Group (ICWG)

The new drug law was developed by an Inter-Cabinet Working Group (created after the launch of the Federal Drug Policy Note). In accordance with the Federal Drug Policy Note (2001), the Minister of Justice Marc Verwilghen (VLD, Flemish Liberals), in close cooperation with the Minister of Public Health Magda Aelvoet, supervised the ICWG. The ICWG was guided by the same

principles that were stated above (see Chapter 4, §2). It was comprised of the technically and politically skilled representatives of the Ministers. Prof. Dr. Brice De Ruyver, as the security advisor to the Prime Minister, also participated in the ICWG mediating between the opposing points of view. While the substantive framework was determined by the Federal Drug Policy Note (2001), the ICWG mainly included a **juridical-technical discussion** about the new drug law.

2.1. Scientific knowledge and scientists

With the exception of the *observer-turned player* Prof. Dr. Brice De Ruyver (as security advisor to Prime Minister Guy Verhofstadt), scientists were less directly involved in the ICWG due to the juridical-technical nature of the discussion.

“Scientists were less involved. Clearly, the discussion was much more about the criminal law and its application in practice [...] It wasn't really a rational, scientific debate.” (Respondent 21, policy-maker).

The typical characteristics of scientific knowledge also provide a partial explanation. While some of the studies commissioned by the Federal Science Policy were certainly relevant to the drug law reform (e.g. ‘Case management in the substance abuse treatment and criminal justice system’, ‘study of the effect of the long term use of cannabis’, ‘Problematic drug use: a study of the operationalisation of the concept in a legal context’ and ‘Drugs and nuisance: a study of the phenomenon, control and effects of drug-related nuisances from various standpoint’), the results of these policy-funded research projects came too late to contribute to the development of a legal framework in 2002-2003. For instance, the research projects clarifying the concepts of ‘problematic drug use’ and ‘drug nuisance’ and gaining insight in the constitutive elements of these concepts, could have supported the determination of the notions ‘problematic drug use’ and ‘public nuisance’ in the new drug law (Decorte, et al., 2005; see also below, §2.2.). Likewise, the results of the study ‘Case management in the substance abuse treatment and criminal justice system’ could have been helpful in determining the position of case managers for judicial and health matters (Geenens, et al., 2005). Thus, one of the most common barriers between science and policy was observed: the long time period of conducting research versus the short policy-making time-frames.

“Scientific research is sometimes too late. Commissioned studies often provide answers to questions or problems that appeared before.” (Respondent 26, practitioner).

“Problematic drug use was a very difficult concept. We encountered the limitations of scientific knowledge. A definition of problematic use was not provided by scientific research in time.” (Respondent 34, policy-maker).

Although the evaluation study of De Ruyver et al. (2000) already pointed to the problems with the blurry definitions implemented in the 1998 Ministerial Circular Letter, the Government still did not succeed in clearly determining the notions 'public nuisance', 'user quantity' and 'problematic use'.

The newly coordinated Drug Health Policy Cell, under the presidency of *policy advisor* Prof. Dr. Isidore Pelc, discussed some preliminary policy documents (bill, Royal Decree, Cooperation agreement, etc.) and eventually formulated some advice in 2002 (Cel Gezondheidsbeleid Drugs, 2002, p.17). In this way, advice from the Drug Health Policy Cell may be inspired by scientific knowledge indirectly.

2.2. Political context

Policy-makers needed to deal with the values and the opinions of the political parties, the affected stakeholders and the general public. They have responsibilities, especially to their electorates and parties, and have to find compromises (Lenton, 2004; Ritter, et al., 2007). The ICWG included a negotiation of policy compromises that were acceptable to the Coalition partners.

"It is clear that everyone has tried to push forward his or her vision or ideas. The new drug law was a compromise." (Respondent 10, policy-maker).

Regarding cannabis possession for personal use, there were disagreements about the value of correctional sentences (and thus the assignment to the Correctional Court). The French-speaking Socialists (PS) and Greens (Ecolo), in favour of a liberal, progressive approach, were most obstructive (as they were in favour of the assignment to the Police Court and a fine of 15-25€ for the first category).

Furthermore, the fear of implementing a *tolerance* policy resulted in a debate about the aggravating circumstances related to the importation, production, transport, purchase, possession and cultivation of cannabis for personal use such as 'problematic use' or 'public nuisance' (Internal communication Ministerial Cabinet, 16 January 2002). These debates uncovered the recurrent political contradictions between the Coalition partners. From their rather liberal, progressive perspective, the French-speaking Socialists (PS) and Greens (Ecolo) and the Dutch-speaking Greens (AGALEV) did not want criminal prosecution of cannabis possession at all. On the contrary, the French and Dutch-speaking Liberals (MR and VLD) as well as the Dutch-speaking Social-

ists (SP.A)¹¹³ advocated the inclusion of the concepts of ‘problematic use’ and ‘public nuisance’ (which was most in accordance with the Federal Drug Policy Note (2001)). The definitions of ‘problematic use’ and ‘public nuisance’, two key notions guiding any decision about the criminal prosecution of cannabis possession, were debated once again. An attempt was made to better define these notions in order to make it clear how to use these in practice (e.g. by police officers).

“It was a difficult debate. A policy note with intentions is totally different from translating these intentions into a clear text [...] It was a politically and juridical-technically difficult debate. The discussion consisted of issues like the distinction between categories of crimes, the concepts like ‘nuisance’ and other ‘aggravating circumstances.’” (Respondent 36, policy-maker).

“This is inconsistent with the Federal Drug Policy Note. We avoided a tolerance policy. Accordingly, we underlined the importance of notions like ‘problematic use’ and ‘nuisance’. The lack of a differentiation is ridiculous and the Flemish Christian Democrats (CVP) are right when criticising this.” (Internal communication Ministerial Cabinet, 30 April 2002).

The international framework was also cited as an important political consideration. During the activities of the ICWG, some international pressure was felt. For instance, the International Narcotics Control Board (INCB) published a report in 2001 arguing that ‘adding another drug to the same category as alcohol and tobacco would be a historical mistake’ (INCB, 2001, p.37). An interviewee explained

“At the time of the Inter-Cabinet Working Group, a meeting was arranged with the head office of the INCB. We had to counter the misinterpretation and to explain the position of Belgium regarding international and European policy.” (Respondent 55, policy-maker).

Eventually, both the bill and the Royal Decree were sent to the Council of State for some external advice.¹¹⁴ Key comments of the Council of State were related to the sloppy language and the fundamental (and recurrent) problems about the definitions used. For instance, they commented on the vague notions of ‘problematic drug use’, ‘public nuisance’, ‘case manager for judicial and health purposes’ and ‘therapeutic advice’. The Government took the advice onboard. For instance, while the descriptions of ‘case manager for judicial and health purposes’ and ‘therapeutic advice’ were further detailed, the Government also decided to specify the notion ‘problematic

¹¹³ The SP became SP.A on 13 October 2001 (while also creating a cartel together with SPIRIT (Flemish Social-Liberal party) in November 2002).

¹¹⁴ The bill approved by the Council of Ministers was sent to the Council of State on 18 January 2002 (Internal communication Ministerial Cabinet, 30 April 2002). Likewise, the Council of Ministers decided on 28 March 2003 to send the Royal Decree to the Council of State.

use' with the additional phrase *'in the case the individual by means of his/her behaviour is a threat towards society and him/herself'*.¹¹⁵ Despite these efforts, the remarks of the evaluation study of De Ruyver et al. (2000) about the vagueness of these notions were still valid.¹¹⁶

2.3. Practitioners

The ICWG involved work from a host of people originating from outside the policy-making process. The inclusion of technical expertise (e.g. in law or criminal procedure) was seen as appropriate in a juridical-technical discussion with numerous issues in the field of practicability and feasibility (e.g. registration police officer, cooperation justice-treatment, etc.). Therefore, a significant role was played by practitioners. Similar to the development of the Federal Drug Policy Note, some practitioners (e.g. lawyers) became advisors to the Ministerial Cabinet. Some interviewees noted:

"I became the advisor to the Ministerial Cabinet. I was engaged to change the law. I already had some expertise related to the international conventions, I published some articles, etc. The Minister asked me to bring into practice the Federal Drug Policy Note and to develop a new drug law." (Respondent 55, policy-maker).

"Some lawyers were very helpful and supportive in the juridical translation of the policy options. They had a lot of knowledge about the national and international laws. They helped to decide what was possible, what was not, and how to implement this in practice." (Respondent 34, policy-maker).

Some practitioners indirectly influenced the ICWG. For instance, some prevention and treatment workers were heard by some members of the ICWG about the issue of 'therapeutic advice' (Roose, 2002). As another example, mentioned by several interviewees, the Council of Prosecutors General put a lot of pressure on the Minister of Justice about the clarity and workability of the cannabis prosecution policy.

¹¹⁵ Koninklijk besluit tot wijziging van het Koninklijk Besluit van 31 december 1930 omtrent de handel in slaap- en verdovende middelen alsmede van het Koninklijk Besluit van 22 januari 1998 tot reglementering van sommige psychotrope stoffen, *B.S.* 2 juni 2003.

¹¹⁶ Accordingly, on 28 November 2003, five non-profit organisations demanded the Court of Arbitration strike article 16 of the Law of 3 May 2003 (i.e. Article 16 *"The possession of an amount of cannabis for personal use by an adult, without the presence of public nuisance or problematic use, would only lead to a registration by the police"*) because the terms "public nuisance" and "problematic drug use" were too vague and in violation of the principle of legality. The Constitutional Court agreed and article 16 of the 2003 drug law (i.e. the article that caused most political commotion) was invalidated (Arbitragehof 20 oktober 2004, nr. 158/2004, rolrs. 2727 en 2850, *B.S.* 28 oktober 2004; Gelders and Vander Laenen, 2007).

“The development of the law occurred in consultation with the Council of Prosecutors General. It took longer than expected. There was some resistance [...] It was difficult to put the policy into practice. For example, the definitions of ‘problematic use’ and ‘nuisance’ were not clear.” (Respondent 37, policy-maker).

2.4. Media and interest groups

While the Government was deciding on the stipulations of the bill in the ICWG, the **media** continued to create confusion and polarisation on cannabis policy. Representative of this state of affairs was the manipulation of prevalence rates (indirect references). For example, some Flemish newspapers (*De Morgen*, *Het Laatste Nieuws* and *Gazet van Antwerpen*) reported a lifetime prevalence rate of 38% or 40% among the Belgian population (sample of 1.200 respondents) while the report mentioned lifetime prevalence of 21% among a representative sample of 3.311 respondents. As another example, the bill was often incorrectly called Federal Drug Note and it was implied that the tolerance policy was already approved.

“Federal Drug Policy Note finally decided.” (10 January 2002, Flemish newspaper De Morgen).

“The Government only tolerates smoking a joint at home [...] The Government developed a Note and three Royal Decrees to legally formalise the drug policy.” (10 January 2002, Flemish newspaper De Tijd).

The actual influence of media coverage on the ICWG remained limited to a high level of attentiveness of policy-makers towards the public opinion and their electorate. A clear media communication strategy was considered of particular importance due to the ambiguous communication about the Federal Drug Policy Note and the information campaign (January – May 2001) on the one hand and the looming elections (May 2003) on the other hand. Accordingly, Prof. Dr. Brice De Ruyver was appointed to report about the drug policy issues in the media.

“Prime Minister Verhofstadt learned from the previous communication about this topic. Together with the Minister of Justice and the Minister of Public Health, he entrusted this task to Prof. Dr. Brice De Ruyver. The message had to be clear. It was important to know the pitfalls and to know how the media operated.” (Respondent 50, scientist).

Interest groups also indirectly affected the policy-making process because of their strong link with the public opinion (and electorates of policy-makers). For instance, Flemish interest group *Parents against Drugs [Ouders tegen Drugs]* frequently made use of the media coverage. They stressed their concerns about the increase of cannabis use among youth and the addictive char-

acteristics of cannabis. Apart from that, there were hardly any initiatives or actions by interest groups during the activities of the ICWG.

“A joint is equal to an alcohol dosage of 0.8. Cannabis is addictive, some people use more and more. Accordingly their problems increase.” (27 February 2002, Flemish newspaper De Morgen).

An important exception was the active involvement of a member of the interest group *Anti-Prohibition League [La Liaison anti-prohibitionniste]* in the ICWG. This particular practitioner became an advisor of the Minister of Public Health Magda Aelvoet and was able to give voice to this interest group. This particular engagement may be the only effective way for interest groups to play a certain role in the policy-making process at the governmental level. However, in this case, having a small voice should be interpreted as having the opportunity to communicate/advise and engage in the *debate* and not as having the means to directly influence the *outcome* of the ICWG.

“Working in the Inter-Cabinet Working Group, I supported the rather radical perspective as a member of the interest group Anti-Prohibition League [La Liaison anti-prohibitionniste]. In the Inter-Cabinet Working Group, I tried to put forward their perspective while discussing the drug law [...] It was a juridical-technical discussion. In my opinion, the debate was influenced by the discourse of the interest group [...] I tried to get the most out of it (my emphasis).” (Respondent 55, policy-maker).

“[...] The practitioner supported the most radical points of view but he was well aware that some directions were not supported politically. [...] The broader application of the Probation Law was not a radical decision but it was an important step forward. He was actively involved in this debate in the Inter-Cabinet Working Group.” (Respondent 50, scientist).

2.5. Parliament

During the debates in the ICWG, MPs from the opposition parties put pressure on the Government by regularly asking questions about the state of the art regarding the new drug law (*Hand. Kamer 2001-2002, 10 januari 2002, 197, 15-16; Hand. Kamer 2001-2002, 21 februari 2002, 208, 32-33; Hand. Kamer 2001-2002, 28 februari 2002, 210, 11-13; Hand. Senaat 2001-2002, 16 mei 2002, 2-204, 22-23; Vr. en Antw. Senaat, 5 maart 2002, nr. 2/50 (Vr. nr. 1544 V. Van Quickenborne); Vr. en Antw. Senaat, 19 maart 2002, nr. 2/51 (Vr. nr. 1886 Y. Buysse)*). In particular, opposition party CD&V (Flemish Christian Democrats) sought to give the Government a hard time based on their experiences in the PWG: e.g. they were fully aware of the existing pitfalls and the political divergences. The strategy to put some pressure on the Government can be seen as a tactic to stimulate controversy among the Coalition partners but also as a way to keep the item

on the political and public agenda (as they believed they could benefit from these disagreements in the following elections). Indeed, an interviewee as well as the arguments of the ICWG showed the indirect influence of the opposition parties on the ICWG.

"The Inter-Cabinet Working Group took a while because of the contradictions between the Coalition partners and between several individuals within the same party. The opposition took advantage of these disagreements by regularly asking when the new drug law would be approved." (Respondent 17, policy-maker).

"Police and judicial actors look like fools. Why do they have to invest in crimes that are punished with a fine of 25 euros? Frankly, this is ridiculous. CD&V (Flemish Christian Democrats) rightly criticised this decision." (Internal communication Ministerial Cabinet, 30 April 2002).

3. Parliamentary process: time is almost up

Eventually, on 21 June 2002, a bill was submitted by the Government to the Parliament's Chamber of Representatives.¹¹⁷ Both bills and the Royal Decree were treated as a whole in the Chamber of Representatives and the Senate.¹¹⁸ The power of the Parliament in this particular phase should be put into perspective. On the one hand, the bill had already been heavily discussed and approved in the Inter-Cabinet Working Group (ICWG) and the Council of Ministers. On the other hand, the pressure of the end of the legislature was increasingly felt. Even though the opposition parties took their role seriously and put pressure on the Government, their discourse was soon buried by the voting mechanism (see below). As a result, the debates in the Chamber of Representatives and the Senate were rather *soft*.

"Generally, the parliamentary discussions were less important. There was an agreement in the Inter-Cabinet Working Group. At the same time, the end of the legislature was near. By all means, the new drug law had to be approved." (Respondent 36, policy-maker).

"The decisions about what is allowed and what is not, were made in the Inter-Cabinet Working Group. The Parliament had nothing more to add." (Respondent 13, scientist).

¹¹⁷ Wetsontwerp tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica en Wetsontwerp tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica, en van artikel 137 van het Wetboek van Strafvordering, *Parl.St.* Kamer 2001-2002, nr. 1888/001 en nr. 1889/01.

¹¹⁸ As we may treat both bills, the Royal Decree and Ministerial Circular Letter as one entity, we will regularly use the concept 'bill' to refer to this package of initiatives.

3.1. Debate in the Chamber of Representatives and Senate

The submitted bill included a request for *urgent debate* (because of the elections in May 2003). In the plenary meeting of the Chamber of Representatives on 20 July 2002, there was a discussion about the assignment of the debate to the Commission of Public Health or the Commission of Justice (still reflecting the *discursive struggle*) (*Hand. Kamer 2001-2002, 20 juli 2002, 260, 36-39*). Eventually, the Conference of Presidents decided that the bill had to be discussed in the Commission of Justice as well as in the Commission of Public Health with the primary role given to the Commission of Public Health (in accordance with the perception of the drug phenomenon as a matter of public health).¹¹⁹

3.1.1. Commission of Justice

Several meetings of the Commission of Justice took place between October and November 2002.¹²⁰ The vagueness of the definitions ‘public nuisance’, ‘user quantity’ and ‘problematic use’, the compliance with the international conventions, and the ambivalent role of the Flemish Christian Democrats (CD&V) were discussed. Responding to the (juridical) comments and questions, the Minister of Public Health Mr. Jef Tavernier (AGALEV, Flemish Greens)¹²¹, in cooperation with the representatives of both the Prime Minister and the Minister of Justice, disseminated two additional notes. The note clearly was interpreted differently by both Ministers. The internal divergences among the Verhofstadt I Government became clear once more.

“The Inter-Cabinet Working Group reached a political compromise. However, there were still different opinions among Coalition partners. Even during the presentation of the bill in the Commission of Justice, both Ministers approached the topic differently. Their approach was not supported by the same analysis. There was a difference between the medical-psychological and social analysis on the one hand and the juridical focus on the other hand.” (Respondent 10, policy-maker).

At the end of the debate, MPs from the political majority¹²² submitted positive feedback. At the same time, negative feedback was submitted by some opposition MPs (i.e. CD&V, Flemish Chris-

¹¹⁹ Verslag namens de Commissie voor de Volksgezondheid, het Leefmilieu en de Maatschappelijke Hernieuwing uitgebracht door de Heren Jacques Germeaux en Luc Paque, *Parl.St. Kamer 2001-2002*, nr. 1888/004.

¹²⁰ Verslag namens de Commissie voor de Volksgezondheid, het Leefmilieu en de Maatschappelijke Hernieuwing uitgebracht door de Heren Jacques Germeaux en Luc Paque, *Parl.St. Kamer 2001-2002*, nr. 1888/004, 245-292.

¹²¹ Magda Aelvoet (AGALEV) was Vice-Minister and Minister of Consumption Affairs, Public Health and Environment during the Verhofstadt I government (1999-2003). However, she resigned in 2002 as a result of a scandal related to the controversial supply of weapons to Nepal. Mr. Jef Tavernier replaced her.

¹²² Mrs. Fauzaya Talhaoui (AGALEV, Flemish Greens), Mrs. Fientje Moerman (VLD, Flemish Liberals), Mrs. Dalila Douifi (SP.A, Flemish Socialists), Mrs. Michel Dardenne (Ecolo, French-speaking Greens), Mrs. Karine Lalieux (PS, French-speaking Socialists), Mrs. Anne Barzin (MR), Mr. Jacques Germeaux (VLD, Flemish Liberals) and Mr. Thierry Giet (PS, French-speaking Socialists).

tian Democrats). They pointed to the importance of prevention and argued against a more tolerant cannabis policy. They stressed the harmfulness of cannabis, the confusing signals of the Government, the risk of increasing drug use and drug tourism and the lack of compliance with international conventions. A final voting resulted in the acceptance of the positive advice which was sent to the Commission of Public Health.

3.1.2. Commission of Public Health

The meetings of the Commission of Public Health¹²³ were held in December 2002 and January-February 2003 and included hearings with scientists (5), practitioners (16) and members of the interest group *Parents against Drugs [Ouders tegen Drugs]*¹²⁴ (3). A Commission may, within the framework of its legislative competences, seek the advice of individuals or institutions which do not belong to the Parliament and ask for some documentation (Van der Hulst, 2010). While the PWG aimed to get a *status questionis* of all aspects of the drug problem, the focus in the Commission of Public Health was solely on public health issues (in accordance with the approach supported by the Federal Drug Policy Note).¹²⁵

24 experts¹²⁶ were heard on 14-15 January 2003. These experts were **selected** according to the same principles as the selection of experts by the PWG (1996-1997) (Chapter 2, §2.2.1.). In se-

¹²³ In the Commission of Public Health, every political party was represented by one or more members: Mrs. Yolande Avontroodt (VLD, Flemish Liberals), Mr. Igor Philtjens (VLD, Flemish Liberals), Mr. Jacques Germeaux (VLD, Flemish Liberals), Mr. Hubert Brouns (CD&V, Flemish Christian Democrats), Mr. Luc Goutry (CD&V, Flemish Christian Democrats), Mr. Roel Deseyn (CD&V, Flemish Christian Democrats), Mrs. Anne-mie Descheemaeker (AGALEV, Flemish Greens), Mrs. Georges Gilkinet (Ecolo, French-speaking Greens), Mrs. Colette Burgeon (PS, French-speaking Socialists), Mr. Yvan Mayeur (PS, French-speaking Socialists), Mr. Robert Hondermarcq (MR, French-speaking Liberals), Mr. Philippe Seghin (MR, French-speaking Liberals), Mr. Koen Bultinck (Vlaams Blok, Flemish extreme right party), Mr. Guy D'Haeseleer (Vlaams Blok, Flemish extreme right party), Mrs. Magda De Meyer (SP.A), Mr. Luc Paque (CDH, French-speaking Christian Democrats) and Mrs. Els Van Weert (Spirit, Flemish Social-Liberal party).

¹²⁴ Parents of (former) drug users created the interest group *Parents against Drugs [Ouders tegen Drugs]*. Mrs. Josefien Smits, Mrs. Marjan Van Den Eynde, Mrs. Mireille Vergucht presented themselves as the representatives of thousands of parents and family members in a painful and difficult situation.

¹²⁵ Verslag namens de Commissie voor de Volksgezondheid, het Leefmilieu en de Maatschappelijke Hernieuwing uitgebracht door de Heren Jacques Germeaux en Luc Paque, *Parl.St. Kamer 2001-2002*, nr. 1888/004, 5-244.

¹²⁶ Experts were: Prof. Dr. G. Van Hal (Department Epidemiology and Social Medicine, Antwerp University), Prof. Dr. I. Pelc (Psychiatrist, Head of Department Psychiatry and Medical Psychology ULB and Director of the Laboratory Medical Psychology, Alcoholology and Drug Addiction), Prof. Dr. A. Noirfalise (Faculty of Medicine, University of Liège), Mrs. M. Geirnaert (Director Association for Alcohol and other Drug Problems, VAD), Mr. Marcel Van Hex (Director CAD Limburg), Mr. M. Tack (Coordinator Centre for Study, Prevention and Treatment of Alcohol disease and other toxomanias), Mr. P. Bastin (Director Infor-Drogues), Mr. D. Ballotta (EMCDDA), Mr. C. De Winter (Head of Federal Police – Central Department Drugs), Mr. F. Clarysse (Deputy Attorney Bruges), Mr. C. Visart de Bocarmé (Deputy Attorney Namur), Mrs. F. Biot (Head Department Local Police Charleroi), Mrs. J. Smits (Parents against Drugs [Ouders tegen Drugs]), Mrs. M. Van Den Eynde (Parents against Drugs [Ouders tegen Drugs]), Mrs. M. Vergucht (Doctor, Parents against Drugs [Ouders tegen Drugs]), Prof. Dr. J. Hulselmans (Doctor – Head Psychiatry ACZA-Stuyvenberg), Mr. J. Van Bouchaute (Doctor- Director MSOC Ghent), Mr. S. Zombek (Doctor- Director MASS

lecting these experts, the media and personal contacts/networks played an important role. For instance, the selection of members of the interest group *Parents against Drugs [Ouders tegen Drugs]* was clearly supported by MPs from the Flemish extreme right party *Vlaams Blok* (see also Chapter 4, §4). They intensively used the media to represent their actions (e.g. demonstration), to strengthen their position and to become more widely known amongst the public and policy-makers. *“Some members of the interest group Parents against Drugs reacted emotional. According to them, the government introduces a tolerance policy but doesn’t mind the drug use among minors” (28 November, Flemish newspaper De Tijd)*. Equally, the selected scientists and practitioners had regularly appeared in the media since the launch of the Federal Drug Policy Note (2001). As an example, *“The governmental communication on Belgian drug policy is confusing [...] That is said by Prof. Dr. Guido Van Hal” (13 November 2002, Flemish newspaper Gazet van Antwerpen)* and *“A joint replaces a cigarette more often, says Prof. Dr. Guido Van Hal.” (29 November 2002, Flemish newspaper Het Volk)*. An interviewee explained:

“In the Commission of Public Health, each MP made a list in accordance with the political party [...] The main issue is: ‘unknown, unloved’. Personal contacts played a role. This is also the case with the media. The same experts are selected over and over again. [...] Accordingly, the public and MPs often adopt the idea that there are only a limited number of experts in this matter.” (Respondent 35, policy-maker).

If we compare the selection of experts with those selected by the PWG, we observed some obvious overlap. However, clearly, medical practitioners and psychiatrists were now increasingly considered as experts in this matter. For instance, the selection of Prof. Dr. Jef Hulselmans (Doctor – Head Psychiatry Stuyvenberg Hospital) who elaborated upon the issues related to the link between cannabis and psychoses or schizophrenia, has to be understood in the light of the evolution of the Belgian drug policy debate. While none of these issues were discussed or elaborated upon in the PWG, this particular focus of the Commission of Public Health can be framed within the increasing scientific knowledge (e.g. about the harmfulness of cannabis)¹²⁷ and the sustained media coverage on the dangers of cannabis use, the increasing THC concentration and the in-

Brussels), Mr. J. Theuwen (Kompas), Mr. J. Maertens (Director De Sleutel), Mr. D. Vandeveld (Director De Kiem), Mr. Paul Van Deun (Director De Spiegel), Mr. G. Van Der Straeten (Director Trempline), Mr. A. Wouters (La Teignouse).

¹²⁷ During the 1970s and mid1980s, many clinical and experimental studies were established in order to measure the effect of cannabis on different vital organs and functions. Academics studied the somatic effects of cannabis intoxication and chronic cannabis use, the effects of cannabis on human and animal offspring and the effects on psychomotor and cognitive functions and mental health. As a result, the first studies on the association between intensive cannabis use and psychotic disorders date back from the beginning of the 1970s. Studies on the effect of cannabis use on schizophrenia were established in the late 1980s. The results of all these clinical and experimental studies were hotly debated among researchers at that time. However, these issues were not picked up in the PWG (instead cannabis was considered as a relatively harmless substance; see above). Since the beginning of the 21st century, there has been of profusion of writings on this topic (Vuillaume, 2008).

creasing prevalence rates since 2000-2001 (see also above, Chapter 3, §5.3. and Chapter 4, §3.3.3.). In *empowering the enlightenment function of scientific knowledge*, media coverage seemed to have increased the likelihood of policy-makers being more sympathetic towards the harmfulness of cannabis (linked with schizophrenia, the higher % of THC, etc.). In other words, the media encouraged the refutation of the arguments of the advocates of a liberal policy that cannabis use is harmless (*evolutionary model*; Stevens, 2007a). The correlation between early and regular cannabis use and the risk of developing schizophrenia, depression or other psychotic disorders featured increasingly in many parliamentary discussions from 2002-2003 onwards (*Hand. Kamer 2001-2002*, 21 februari 2002, 208, 32-33; *Hand. Senaat 2001-2002*, 19 maart 2002, 2-51, 2692).

Reflecting on the typology of Loader and Sparks (2011), most of the selected scientists acted as *scientific experts*. They used their knowledge and methodological skills to answer questions of policy-makers, without engaging in the policy-making process outside the Commission of Public Health.

"I did not take a position as a proponent or an opponent. I did not do that. I just presented some findings and that is it [...] They asked me as an expert, I did not take the initiative myself to get involved. That was not my goal." (Respondent 13, scientist).

"My contribution was illustrative. I gave some additional information. That's it [...] I was not searching for participation, I did not make any effort." (Respondent 24, scientist).

Similar to the Inter-Cabinet Working Group, the hearings focused on political issues like the definitions of 'problematic use' or 'public nuisance' and the compliance with the international conventions. The internal disagreements between the Minister of Justice Marc Verwilghen and the Minister of Public Health Jef Tavernier were outlined once more. For instance, they argued differently about the determination of 'quantity for personal use'. While the Minister of Justice mentioned in the Commission of Justice that a 'quantity for personal use' contains maximal five grams, his representative reported a maximum of 2,5 grams in the Commission of Public Health.¹²⁸ Minister of Public Health Jef Tavernier declared himself to be against any determination of a number of grams. Exceptionally, the hearings and the debate in the Commission of Public Health focused on other topics like the establishment of the Drug Health Policy Cell and some pilot projects (e.g. dual diagnosis treatment offer, crisis intervention and case-management,

¹²⁸ Verslag namens de Commissie voor de Volksgezondheid, het Leefmilieu en de Maatschappelijke Hernieuwing uitgebracht door de Heren Jacques Germeaux en Luc Paque, *Parl.St. Kamer 2001-2002*, nr. 1888/004, 236 and 280.

networks for integrated drug treatment programs), the cooperation agreement between the Federal Government and the federate entities, drug use in prison, therapeutic advice, the evaluation of methadone treatment, the lack of staff resources, the role of prevention (e.g. in education), etc. The latter topics were mostly highlighted by practitioners. MPs themselves were less concerned with these less 'political', though important, issues.

Both bills (with small revisions based on the amendments) were adopted on 11 February 2003.¹²⁹ Afterwards, the bills proceeded to the plenary session of the Chamber of Representatives where they were eventually approved on 13 February 2003.¹³⁰

3.1.3. Senate: Commission of Social Affairs and plenary meeting

The debates in the Commission of Social Affairs of the Senate commenced on 26 February 2003 and addressed the same topics as the Chamber of Representatives (*Hand. Senaat 2002-2003*, 26 maart 2003, 2-278, 9-40). During the debates, several amendments were submitted by MPs of CD&V (Flemish Christian Democrats). Eventually, each of the amendments was rejected. Only a small linguistic adaptation was made. Then, the bill was sent to the plenary meeting of the Senate where it was discussed on 26 March 2003 and approved on 27 March 2003.¹³¹

3.2. Scientific knowledge and scientists

In the Commission of Public Health, scientists gave an updated overview of the current state of the art by means of general descriptions (e.g. 'research shows', 'research confirms', 'some authors mention', 'the literature shows', etc) or prepositional arguments. Sometimes, footnotes and bibliographies were added. International drug policy studies were often used as a source of in-

¹²⁹ After the hearings and lengthy discussions in the Commission of Public Health, some MPs submitted amendments regarding bill 1888. Mr. Jo Vandeurzen, Mr. Roel Deseyn and Mr. Luc Goutry (CD&V, Flemish Christian Democrats) submitted five amendments relating to confiscation of cannabis, drug prevention organised by police officers, the mode of registration (continuation of registration by police report) and the definition of problematic use. MP Filip De Man submitted an amendment focusing on the registration by means of a police report in case of the possession of other illegal drugs than cannabis and the opportunity of dismissal of prosecution in case of treatment by a specialised addiction care centre. Each of these amendments of the MPs was rejected. Eventually, bill 1888 was accepted with 10 yes votes against six no votes. Bill 1889 was accepted with 11 yes votes against six no votes.

¹³⁰ The bill was debated in a plenary meeting on 12 February 2003 and finally put to a vote and approved on 13 February 2003. After discussions in the plenary meeting of the Chamber of Representative, the submitted amendments of Mr. Jo Vandeurzen (CD&V, Flemish Christian Democrats) and of Mr. Filip De Man (Vlaams Blok, Flemish extreme right party) were rejected. A voting about the bills in general was also held on 13 February. After voting declarations, the first bill (1888) was adopted by means of 75 yes votes, 40 no votes, four abstentions (total 119 votes). The second bill (1889) was also adopted (yes: 75; no: 45; Abstention: five; total 120).

¹³¹ The bill was voted on 27 March 2003: bill 1889 by 30 yes votes against 19 no and seven abstentions; After the rejection of the submitted amendments (10 yes votes against 43 no votes and 4 abstentions), bill 1888 was adopted by means of 40 yes votes, 18 no votes and no abstentions. As the Chamber of Representatives has the last word, on 27 March 2003 it was again sent to this organ for ratification by the King.

formation because similar discussions sparked off in various European countries at that time (e.g. Portugal, Spain, Italy) or previously (e.g. Schengen Convention, Inter-parliamentary Advisory Council of the Benelux countries).¹³²

"It is justifiable to treat cannabis differently because the substance is less dangerous compared to other drugs (see the report of professor Roques)." (Prof. Dr. Isidore Pelc, scientist, Report of the Commission Public Health, p14.).

"... two articles that were respectively published in 1986 and 2002 in the Revue médicale de Liège. Some experimental research showed that there is a risk of genetic mutations, cancer, deformations or a low sperm count." (Prof. Dr. Alfred Noirfalise, scientist, Report of the Commission Public Health, p.26).

Although the intervention of these scientists was only advisory, they have *enlightened* the parliamentary debates with some new scientific knowledge. In other words, they sensitised MPs to (new) issues like the harmfulness of cannabis and the connection between cannabis use and psychiatric disorders (e.g. depression, schizophrenia,...) (*conceptual utilisation*). As it was argued that cannabis was more harmful and dangerous than initially thought (e.g. the increasing level of THC was frequently mentioned), these elements offered strong support to arguments against the bills.

"In the past, colleagues minimised the problems related to the regular use of cannabis. Today, more and more youngsters are into trouble because of their cannabis use. We all know that the level of THC increased drastically (my emphasis)." (Mr. Filip De Man, MP Vlaams Blok, Flemish extreme right party; Hand. Kamer 2002-2003, 12 februari 2003, 325, 36).

However, most of the time, scientific knowledge was used for *political/symbolic* reasons (Weiss, 1979). In the long and controversial discussion in the Parliament, each 'side' highlighted different sets of harms. When making an argument, MPs often *cherry-picked* information that made their case look stronger (also called *trawling*; Stevens, 2007a). The evidence that cannabis use can adversely affect the mental health (e.g. depression, schizophrenia,...) of some adolescents and young adults had been undermining the simplest argument that cannabis caused no harm.

¹³² A number of independent Commissions have investigated the cannabis issue during the 20th century: LaGuardia Commission (1944), British Wootton Commission (1969), Canadian LeDain Commission (1970), Dutch Baan Commission (1972), American Shafer Commission (1972), Commission of the Australian Government (1977), Commission by the Dutch government (1995), Roques Commission (1997), etc. (Zimmer and Morgan, 1997). These Commissions were appointed to evaluate the scientific evidence on the dangers of cannabis to individuals and society. Each of these Commissions came to the conclusion that the public had been needlessly frightened about the dangers. For instance, in France, the 'Roques report' was commissioned in 1997 by the Minister of Public Health Bernard Kouchner, and conducted by Professor Bernard Roques, an internationally renowned neuropharmacologist. These assumptions and others were extensively used by scientists in the hearings.

Contradictory information tended to be ignored or criticised. For instance, they ignored the social costs of prohibition and the survey results that had failed to find a larger increase in rates of cannabis use in countries that had decriminalised cannabis.

Some MPs from the opposition parties *misused* or (*consciously*) *misinterpreted* scientific knowledge. For instance, MP Roel Deseyn (CD&V, Flemish Christian Democrats) exaggerated the number of cannabis addicts. While Prof. Dr. Isidore Pelc stated that 2% of the regular cannabis users became cannabis addicts, this MP argued that

"It is now clear that 10% of the cannabis users become addicted." (Mr. Roel Deseyn, MP CD&V, Flemish Christian Democrats; Hand. Kamer 2002-2003, 12 februari 2003, 327, 10).

Additionally, when issues become more widely researched, there is an increasing likelihood that the process of utilisation becomes more political/symbolic. For instance, in the hearings, scientists emphasised the *scientific controversy* about the consequences of cannabis use.

"The regular use of cannabis by very young teenagers could induce schizophrenia, school fatigue and, obviously, demotivation (my emphasis)." (Prof. Dr. Alfred Noirfalise, scientist, Report of the Commission Public Health, p.21).

"Cannabis was seen as a harmless drug. However, this widely held belief has recently been under discussion in the psychiatric and scientific literature. The study quoted most frequently to support the hypothesis that cannabis causes schizophrenia, is a Swedish study that examined the incidence of schizophrenia among 50.000 army recruits between 1969 and 1970. The conclusions of Zammit raised some skepticism among several authors (my emphasis)." (Prof. Dr. Jef Hulselmans, scientist, Report of the Commission Public Health, p.112).

Although absolute certainty in science is never guaranteed, we may assume that scientific uncertainties are heightened in this complex policy domain, for example: the introduction of the *precautionary principle* in the parliamentary debates. The precautionary principle¹³³ entails that no full scientific knowledge is needed to make policy decisions; scientific *indications* (in the absence of scientific consensus) are considered sufficient. When a policy-maker is faced with a multiplicity of information and finds it difficult to identify the appropriate options for their particular situation, there is a tendency to invoke the *precautionary principle* (Singleton, et al., 2014). Adopting precautionary measures can be considered to be contrary to the principles of *evidence-based* policy (Monaghan, Pawson and Wicker, 2012). The uncertainty of some scientific results (e.g.

¹³³ Although this principle is commonly used in climate debates, the precautionary principle was also invoked in relation to the drug issue.

causal link between cannabis use and schizophrenia) and the precautionary principle clearly supported some MPs in their arguments.

"It is less relevant whether or not all these factors have been scientifically proven. The fact that there is a correlation is interesting and can encourage us to take a closer look." (Mr. Roel Deseyn, MP CD&V, Flemish Christian Democrats; Hand. Kamer 2002-2003, 12 februari 2003, 327, 10).

"The famous precautionary principle is helpful. Where scientific knowledge does not give a clear answer, this principle can be used in making decisions." (Mr. Jo Vandeurzen, MP CD&V, Flemish Christian Democrats; Hand. Kamer 2002-2003, 12 februari 2003, 325, 21).

3.3. Political context

The parliamentary debates were mainly governed by political considerations. For instance, the discourse of MPs included a large number of prepositional arguments (e.g. *'cannabis is a stepping-stone to hard drugs'*, *'cannabis is addictive'*, *'the level of THC is multiplied by ten'*, *'cannabis is very dangerous and harmful'*, ...). International examples were frequently included in the discourse of the oppositional parties (*policy platonism*).¹³⁴ MPs wrongly used terminology like *tolerance policy*, *depenalisation*, *decriminalisation* and *Belgian coffee-shops* while focusing on potential negative consequences of a liberal policy and the lack of compliance with the international conventions. Clearly, the link with the (rejected) Dutch drug policy model was never far away.

"The drug law favours a tolerance policy. This policy choice does not take into account the international conventions." (Mr. Filip De Man, MP Vlaams Blok, Flemish extreme right party, Report of the Commission Public Health, p.270).

"We learned from other countries. This law will lead to a boost in criminal activities because it tolerates a certain demand in the illegal market" (Mr. Jo Vandeurzen, MP CD&V, Flemish Christian Democrats; Hand. Kamer 2002-2003, 12 februari 2003, 325, 22).

"Concepts like decriminalisation, depenalisation, legalisation were used in a political way. Policy interests were decisive." (Respondent 55, policy-maker).

Additionally, opposition parties were very active in formulating *personal insults*. Undoubtedly, these actions often originated from self-interest in gaining power and favouring certain electorates. Several interviewees illustrated this point:

¹³⁴ For instance, although not any reference to the Commission LeDain was made, the final conclusions and recommendations of the report 'Commission Le Dain' were included in the appendix of the final report of the parliamentary discussion of the bill. The Le Dain Commission, set up in 1969, was a Canadian Commission of Inquiry into the Non-Medical Use of Drugs named after its chair Gerald Le Dain. The report recommended the decriminalisation of possession and cultivation of cannabis for personal use.

"The parliamentary debate is a show in front of the media and the public [...] A game is played in order to win votes. That's it. It is just kicking up a fuss." (Respondent 14, policy-maker).

"In politics, personal insults are often made. MPs always have to seize the opportunity to weaken the opponents." (Respondent 44, policy-maker).

In similar vein, some MPs applied a rather *emotive tone*. An appeal to emotions was linked with the strategy of the members of the Parliament to speak from their role as parent or doctor (*dual role*).

"I refer to the note of the Ministers Verwilghen and Tavernier of 13 November, 2002. That note clearly stated: "Regular use is not necessarily problematic"... Thus, the injection of heroin is not a problem according to the Minister." (Mr. Filip De Man, MP Vlaams Blok, Flemish extreme right party; Hand. Kamer 2002-2003, 12 februari 2003, 325, 44).

"As a mother of three young children I am absolutely concerned about the addictive character of cannabis use and the influence of use on the health of youngsters and people in general." (Mrs. Els Van Weert, MP Spirit, Flemish Social-Liberal party; Hand. Kamer 2002-2003, 12 februari 2003, 326, 5).

Finally, the upcoming Federal elections on 18 May 2003 put a lot of pressure on the activities surrounding the new drug law. The development of a coherent (public health) drug policy had been mentioned as one of the pillars in the 1999 Federal Government Policy Statement: *'Related to the drug issue, the Government will provide an evaluation study within 6 months [...] Based on the results of this study, the Government will, in close cooperation with the parliament, develop a coherent drug policy'* (p.36, *Federal Government Policy Statement, 1999*). As the Federal Government Policy Statement was a powerful tool in assessing the policy realisations in a legislature, the majority pressed the matter strongly.

"The Government applauded the launch of the Federal Drug Policy Note. It eventually changed the policy direction. The new drug law was part of this movement. The Government was concerned about the realisation of their Federal Government Policy Statement [...] This concern played a role. The new drug law had to be approved. The Federal elections were looming." (Respondent 36, policy-maker).

MPs and members of the Government became more and more concerned about how their decisions and actions were viewed by potential voters at the next Federal elections (May 2003). The majority (Liberals, Socialists and Green parties) stated that the new drug legislation was clear and more stringent (and in case of the Green parties too stringent) than the previous version.

Conversely, the oppositional Flemish Christian-Democratic party CD&V and the Flemish radical right-wing populist party Vlaams Blok argued that the new drug law introduced a *tolerance policy* and encouraged people to use drugs (Gelders and Van Mierlo, 2004). All feared a political defeat. It is no surprise that this element became very influential as the bill was adopted only two months before the Federal elections on 18 May 2003.

"It was a very sensitive matter because it was always presented as a tolerance policy [...] The public debate was difficult. A confrontation with mothers or fathers in pre-election debates always resulted in the loss of votes. It was very sensitive and difficult [...] There were only two positions: 'I am pro' or 'I am against'." (Respondent 6, policy-maker).

"A policy-maker always takes his/her electorate into account. They determine the result of the next elections. A policy-maker who does not take his/her electorate seriously, commits a political suicide." (Respondent 36, policy-maker).

Several opinion polls (e.g. survey on "Belgians and drugs" (Patesson and Steinberg, 2000), ...) provided some interesting indications for policy-makers. It was clear that 'drug problems among youngsters' was ranked as one of the most important problems in society and that the poor communication about whether and when the possession of cannabis for personal use was prosecuted, caused a lot of confusion among the public (Administratie Planning en Statistiek, 2006). Furthermore, an increasing number of calls were made to the 'Druglijn' in 2002 about the new drug law (VAD, 2003). In 2003, the 'Druglijn' was increasingly consulted during the first year half (with a peak in April-May 2003) (VAD, 2004).

3.4. Practitioners

Many of the issues elaborated upon in the parliamentary debates between 2002 and 2003 were influenced by the 2003 Policy Memorandum. Similar to previous elections (Chapter 3, §3), practitioners united their needs and demands in a Policy Memorandum and distributed the document to the political parties. The 2003 Policy Memorandum (Memorandum group, 2003) was clearly inspired by the previous Policy Memorandum, the (lack of) realisations of the Federal Drug Policy Note (2001) and the new drug law. Some demands for further policy engagement related to the new evolutions. Practitioners noted the importance of structural funding and the extension of the pilot projects (e.g. concerning dual diagnosis treatment, crisis intervention and case-management, and care coordination) as well as the need for clarification about the new drug law (e.g. about the position of minors and detainees; about the issue of professional confidentiality related to the collaboration between justice and treatment). Finally, the development of a coherent alcohol policy (in accordance with the drug policy) was also underlined.

3.5. Media coverage

From the start of the parliamentary debates, Flemish and French-speaking newspapers reflected on the debates on the bill in detail. For instance, media attention increased when the Commission of Justice made revisions. *“CD&V rejects policy of tolerance” (22 October 2002, Flemish newspaper *Gazet van Antwerpen*)*. In the following stage, some parts of the expert hearings in the Commission of Public Health were published in the newspapers. *“Police, treatment workers and Public Prosecutors are very critical of the new drug law [...] Everyone criticised the unclear notions in the law” (15 January 2003, Flemish newspaper *Gazet van Antwerpen*)*. In accordance with the sustained media coverage on the harmfulness of cannabis use, the discourse of medical expert Prof. Dr. Jef Hulselmans was particularly integrated in the newspapers. For example, French-speaking newspaper *La Libre Belgique* described several medical studies (without detailed or contextual information) regarding the link between cannabis and schizophrenia, the increasing level of THC, etc. *“Cannabis should no longer be considered as a harmless product” (26 February 2003, French-speaking newspaper *La Libre Belgique*)*.

However, messages from the media were often ambiguous and polarised. For example, some statements of medical expert Prof. Dr. Jef Hulselmans were manipulated in the Flemish newspaper *Gazet van Antwerpen* (16 January 2003).

“Because of the new cultivating techniques, the THC content can be 30 times higher than it used to be.” (Gazet van Antwerpen)

“A regular joint contains about 10 mg, now the content is much higher: 150 mg.” (Prof. Dr. Jef Hulselmans)

“1% of all Belgians become schizophrenic.” (Gazet van Antwerpen)

“Up to 1% life-time prevalence, not only Belgians.” (Prof. Dr. Jef Hulselmans)

“Research shows that 10% of the users become addicted.” (Gazet van Antwerpen)

“9% in one research; 7,7% and 4,8% in other researches.” (Prof. Dr. Jef Hulselmans)

The media also regularly suggested that the new drug law was already voted and implemented while the bill still had to be discussed in the Senate (Gelders, 2006). *“The Verhofstadt Government finally accepted the new drug law [...] The Parliament approved the new drug law yesterday evening. This closed the discussion that has lasted for two years (29 January 2003, Flemish newspaper *De Morgen*)*.

Nevertheless, in the parliamentary debates, media statements were used to support certain arguments. Similarly, MPs clearly acquired information about scientific knowledge as contextual-

ised in newspaper articles. For instance, the submitted amendments in the Senate were extensively supported by these so-called 'indirect references' to scientific knowledge.

"These numbers are confirmed by the national report on drugs that was published in the press recently. This report was drawn up by the university of Ghent based on a survey of 10.000 pupils." (Mr. Jacques D'Hooghe and Mrs. Mia Van Schamphelaere, CD&V, Flemish Christian Democrats, Parl.St. Senaat 2000-2001, nr. 2 - 1475/2, 17).

Even though MPs were aware that journalists do not evaluate scientific knowledge critically (as they are driven by publicity/sensationalism, time constraints and economic and/or political concerns), they did not investigate the accuracy of the media representation.

"Media is often the only source of information. We know that the information is not always presented correctly [...] However, we never checked the trustworthiness of the information provided." (Respondent 42, policy-maker).

3.6. Interest group 'Parents against Drugs'

The media was an important instrument for the interest group *Parents against Drugs* [*Ouders tegen Drugs*] in their efforts to proclaim their concerns and to stimulate the political awareness of the issue. For example, they put forward their opinion on the parliamentary debates and the voting of the bill.

"If the drug law is approved, we willl organise a demonstration before the elections. [...] We are proud to represent the parents and the families. We continue our activities even of policy choices are made." (14 January 2003, Flemish newspaper Het Nieuwsblad).

Their public actions (e.g. media presence, demonstration) were successful in obtaining political attention and setting the parliamentary agenda. Three members of the interest group *Parents against Drugs* [*Ouders tegen Drugs*] were selected as experts in the Commission of Public Health. They took the opportunity to express their feelings about Belgian drug policy and the new drug law. In the Commission of Public Health, they also proactively contacted some scientists in order to strengthen their arguments.

"They were familiar with my story and asked me to send some additional information and studies to enforce their case." (Respondent 13, scientist).

By promoting their position, they further increased the likelihood of MPs being more sympathetic towards the harmfulness of cannabis. However, their (rather emotional) hearing in the Com-

mission was overshadowed by criticism of several MPs about their connections with the Flemish extreme right party Vlaams Blok.

“The link with the Flemish extreme right party Vlaams Blok had a negative influence on their hearing. They were stigmatised.” (Respondent 19, policy-maker).

“During our hearing, an MP criticised the link between one of our members and the Flemish extreme right party Vlaams Blok. It was over.” (Respondent 3, member of interest group).

Due to internal conflicts caused by these political squabbles, the interest group *Parents against Drugs [Ouders tegen Drugs]* ceased to exist a few months later.

4. Ministerial Circular Letter of 16 May 2003¹³⁵

While the new drug law was voted at the end of March 2003, the Minister of Justice Marc Verwilghen, together with the College of Prosecutors-General, still had to develop a Ministerial Circular Letter. The new Ministerial Circular Letter had to take into consideration the principles of the drug law (of 4 April and 3 May 2003), the Royal Decree (of 16 May 2003) and the main objections about the 1998 Ministerial Circular Letter such as the lack of uniformity or legal certainty (De Ruyver, et al., 2000; see also above, Chapter 4, §4.1.). Within the context of the Federal elections and the polarised media coverage, the work took a rather long time.

The drug law reform was one of the major themes of the 2003 election campaign (Gelders, 2006). While the drug law was used by the Flemish Greens as a kind of showpiece, the other Coalition partners gradually kept their hands off this sensitive issue. They gratefully pointed to the Green party AGALEV. In other words, being the ideal scapegoat, the Minister of Public Health Magda Aelvoet (later on replaced by Mr. Jef Tavernier) became the personification of the debate (even though the bill was a result of a political compromise). The dismissal of the Minister of Mobility Isabelle Durant (Ecolo, French-speaking Green party) on 5 May 2003 (after a dispute about the nocturnal flights at Brussels national airport)¹³⁶ increased the political tensions among the Verhofstadt I Government even more.

¹³⁵ Ministeriële omzendbrief van 16 mei 2003, betreffende vervolgingsbeleid inzake het bezit van en de detailhandel in illegale verdovende middelen, *B.S.* 2 juni 2003.

¹³⁶ The French-speaking Green party Ecolo disagreed with the other Coalition parties about the norms on the amount of noise of nocturnal flights from Brussels national airport over the city of Brussels.

“It was a strategy of the Socialists and the Liberals to point to the Green party, especially for the sensitive issues [...] Despite the dismissal of the French-speaking Green party Ecolo, there was still a majority. [...] Eventually, I think they were glad that the Flemish Green party AGALEV was still part of the government because it was easy to point the finger at the Greens.” (Respondent 21, policy-maker).

Eventually, the Ministerial Circular Letter of 16 May 2003 on ‘the prosecution policy with regard to the possession of and the retail trade in illegal narcotic substances’ (B.S., 2 June 2003) included the guidelines for the Public Prosecutors’ office as to how should be reacted towards the possession of cannabis for personal use. The new Ministerial Circular Letter determined the amount of cannabis for personal use on three grams or one female plant while adding the confusing message that the quantity for personal use was for a single time or for use within a maximum of 24 hours. Conversely, in another paragraph of the Ministerial Circular Letter, it was stated that the Government was not in favour of determining a maximum amount of grams (because the THC level of cannabis products may vary a lot) (Vander Laenen and Dhont, 2003). The determination of a quantity for personal use was innovative taking into account the previous debates in the PWG (see Chapter 2, §5.1.) and in the Inter-Cabinet Working Group deciding on the Federal Drug Policy Note (see Chapter 4, §1). Despite the contradictions, the Ministerial Circular Letter determined that, provided there were no aggravating circumstances (such as use in the presence of minors, public nuisance or problematic drug use), the police had to make a simple, anonymous registration of the facts (instead of a regular process-verbal).¹³⁷ The Ministerial Circular Letter also contained a set of specific guidelines for police officers in this context (Mahieu, 2005).

Furthermore, related to other situations than the possession of cannabis for personal use outlined above, the 2003 Ministerial Circular Letter emphasised the importance of alternative measures and guidance towards treatment (Dangreau, et al., 2012). For instance, in cases of limited possession of other illegal drugs for single or occasional use, the Public Prosecutor has to decide whether or not to prosecute or to apply alternatives (e.g. praetorian probation, transaction,...). The 2003 Ministerial Circular further asked the Public Prosecutors to be severe in the case of retail sale for profit but to take into consideration alternative measures (e.g. transaction, praetorian probation,...) in the cases in which the only purpose of the sale was to finance one’s own use. Related to drug-related criminality, the 2003 Ministerial Circular Letter emphasised that addiction can never be a justification for criminal behavior. It is explicitly stated that the Public Prosecutors in deciding whether or not to prosecute or to apply alternatives always

¹³⁷ Art. 16 of the drug law (of 3 May 2003) only stated that ‘a registration’ by the police forces was required.

should consider the seriousness of the crime and the individual situation of the offender (i.e. principle of expediency).

Driven by the fear that the Federal Drug Policy Note as well as the drug law (of 4 April and 3 May 2003) and the Royal Decree (16 May 2003) would be interpreted as a *tolerance policy*, the new Ministerial Circular Letter (replacing the 1998 Ministerial Circular Letter of S. De Clerck and T. Van Parys; Chapter 3, §2) detailing the prosecution policy was implemented on 16 May 2003, only two days before the Federal elections. Although the cannabis controversy was deemed 'resolved' by the Government, sensitive matters such as the cultivation/supply of cannabis were still not clearly addressed.

"The issue of the supply of cannabis was not resolved. [...] However, the minimum number of grams was determined just before the elections. The Minister of Justice Marc Verwilghen was forced by the Prime Minister Guy Verhofstadt to keep the amount low. The Prime Minister wanted to avoid that the Verhofstadt I Government was seen as the government that created a tolerance policy. That was an unpopular topic. [...] A clear instruction was given." (Respondent 17, policy-maker).

Both the election of a new government (without the Green parties) and the fact that the cannabis controversy was assessed as 'resolved', closed the *policy window* (Kingdon, 2002). In the Federal elections of 2003, the Greens suffered significant losses (partly due to their role in the cannabis discussion) and the Liberal Prime Minister Guy Verhofstadt reconstituted the Coalition as a *four-party government* with only the Flemish and French-speaking Liberals and the Flemish and French-speaking Socialists in power (Verhofstadt II Government). The Green parties moved from a majority position towards the opposition again.

5. Conclusion

Criminal policy on drugs was anchored through an adaptation of the drug law (of 24 February 1921) and the Ministerial Circular Letter of 8 May 1998 (De Ruyver, Vander Laenen and Eelen, 2012). The juridical-technical discussion of the drug law, which was a rather long one (June 2002 – May 2003), made its way through the Government and the Parliament. The complexity of the law-making procedure as well as the existing political (and individual) disagreements among the Government are the main causes. Eventually, a new drug law and a new Ministerial Circular Letter were endorsed just before the 2003 elections. These decisions together with the election of a new government (Verhofstadt II Government; a four-party government without the Green parties) marked the closing of the *policy window* (Kingdon, 2002).

Despite research and epidemiology was the least financed area with only 1% of the total budget (De Ruyver, et al., 2004), the commitment to an *evidence-based policy* in the Federal Drug Policy Note (2001) led to a greater investment in policy research and evaluation (*facilitator*). For example, the “Research programme in support of the Federal Drug Policy Note” certainly stimulated Belgian drug research (especially about the topics that were supposed to be acute). The international conference on cannabis policy which was hosted by the Belgian Minister of Public Health Magda Aelvoet within the framework of Belgium’s EU presidency, also illustrated the Belgian political interest in research and evaluation. The focus of the conference clearly fitted with the *public health* approach of the Federal Drug Policy Note (2001), the sustained concern about the international framework and the increasing importance of *evidence-based* policy-making.

Reflecting on Weiss’ knowledge utilisation categories (Weiss, 1979), several **types of knowledge utilisation** were distinguished. The Commission of Public Health, within the framework of the legislative competences of the Parliament, sought the advice of several scientists. They gave an updated overview of the current state of the art by means of general descriptions (e.g. ‘research shows’, ‘research confirms’, ‘some authors mention’, ‘the literature shows’, etc) or prepositional arguments. Although the debate largely focused on juridical-technical issues, these scientists sensitised MPs to ‘new’ scientific knowledge focusing on the harmfulness of cannabis (e.g. the increasing level of THC, the connection between cannabis use and psychiatric disorders) (*conceptual/enlightenment utilisation*). There were also some clear examples where the utilisation of scientific knowledge could be categorised according to Weiss’ *political/symbolic* model. For instance, it appeared that, even though the evaluation study (De Ruyver, et al., 2000) had already pointed to the problems with the 1998 Ministerial Circular Letter, the Government still did not succeed in unambiguously determining the notions of ‘public nuisance’, ‘user quantity’ and ‘problematic use’ in the new drug law and the new Ministerial Circular Letter. Furthermore, the evolving and uncertain nature of scientific knowledge (e.g. about the harmfulness of cannabis) provided some examples of political/symbolic utilisation. References to scientific controversy and the *precautionary principle* were selectively used by MPs as a justification for their actions or points of view. In a similar vein, we found that some MPs misinterpreted scientific knowledge to support their personal policy narrative (e.g. public health vs. legalistic/repressive framework). Clearly, the political/symbolic utilisation of Weiss’s three categories needs to be extended in order to address these different issues.

A number of **barriers** impacted on the likelihood that scientific knowledge would be used. First of all, the *characteristics of scientific knowledge* acted as a barrier to knowledge utilisation. The first flow of research projects within the “Research programme in support of the Federal drugs

policy document” started in 2002. While some of these studies may have been particularly relevant (e.g. research projects ‘Case management in the substance abuse treatment and criminal justice system’ and ‘Problematic drug use: a study of the operationalisation of the concept in a legal context’), the results of these policy-funded research projects came too late to contribute to the activities in the Inter-Cabinet Working Group (ICWG) or to the development of the new Ministerial Circular Letter. This reflects the challenge of the different time-frames of researchers and policy-makers. Secondly, the debates were clearly grounded on *political considerations*. The upcoming Federal elections on 18 May 2003 put a lot of pressure on the activities surrounding the new drug law. While the new drug law was voted in at the end of March 2003, the new Ministerial Circular (replacing the 1998 Ministerial Circular Letter) was implemented on 16 May 2003, only two days before the Federal elections. Unsurprisingly, the theme of drugs was broadly covered in the election campaigns in which each of the Coalition partners feared electoral loss. Regardless of the position they took, the regular use of prepositional arguments and political tactics (e.g. incorrect terminology, personal insults, emotional assumptions) illustrated their concerns regarding a potential electoral backlash. Furthermore, a number of references to international examples (e.g. international commissions like ‘Le Dain’, the 2002 international cannabis conference) were found (*policy platonism*). The persuasive burden in this debate was accordingly higher for advocates of a drug law reform: the Government had to persuade the community that it is possible to change the law without increasing cannabis use and harm. Thirdly, the juridical-technical nature of the negotiations in the ICWG, appointed to develop a bill and a Royal Decree, particularly encouraged the involvement of *practitioners* with juridical knowledge and skills (e.g. lawyers, magistrates,...).

Reflecting on the typology of Loader and Sparks (2011), several *scientific experts* enlightened the Commission of Public Health without engaging in the policy-making process outside the formal advisory structure. In selecting scientists to be involved in the Commission of Public Health, it appeared that their *personal contacts/networks* and/or *regular appearances in the media* were advantageous. A long-term engagement, and in particular as an *observer-turned player* or *policy advisor* (Loader and Sparks, 2011), was observed as an important **facilitating** mechanism as well. While scientists were less involved in the ICWG, the *observer-turned player* Prof. Dr. Brice De Ruyver (as security advisor to Prime Minister Guy Verhofstadt) still had a privileged position to engage in the interaction between science and policy. At the same time, due to his proactive and long-term involvement in the drug policy-making process (e.g. PWG, policy-funded research,...), *policy advisor* Prof. Dr. Isidore Pelc was appointed the president of the *Drug Health Policy Cell*, a supporting working cell of the *General Drugs Policy Cell*. As the *General Drugs Policy Cell* prepares the decisions of the Inter-Ministerial Conference and guards the integrated charac-

ter of the policy measures, this *policy advisor* also has a facilitating role to play in the science-policy nexus.

Media communication was often ambiguous and polarising, particularly in the manipulations of prevalence rates or expert opinions (*indirect references*). However, as a major source of scientific knowledge, media coverage facilitated the *enlightenment* role of scientific knowledge in the policy-making process by broadening and even determining frames of reference. In other words, the media encouraged refutation of the argument that cannabis use is harmless (*evolutionary model*; Stevens, 2007a). An example of MPs taking notice and getting sensitised to these issues is the large selection of doctors and psychiatrists in the Commission of Public Health. The correlation between early and regular cannabis use and the risk of developing schizophrenia, depression or other psychotic disorders also featured increasingly in many parliamentary discussions from 2002-2003 onwards. The actual influence of media coverage on the ICWG was restricted to the high levels of attention policy-makers gave to the public opinion and their electorate (especially because Federal elections were looming). For instance, as a result of the ambiguous communication about the Federal Drug Policy Note, security advisor Prof. Dr. Brice De Ruyver was entrusted to report about the drug policy issues in the media univocally.

Finally, the engagement of **interest groups** seemed to be most effective at the parliamentary level. Interest group *Parents against Drugs* [*Ouders tegen Drugs*] intensively used the media to publicise their actions (e.g. demonstration), to strengthen their position and become more widely known among the public and policy-makers. As a result, three members were heard in the Commission of Public Health. By sharing their discourse, they increased the likelihood of MPs being more sympathetic towards their arguments on the harmfulness of cannabis. However, this interest group did not play a role in the ICWG, with one exception. In his capacity as an advisor of the Minister of Public Health Magda Aelvoet, a member of interest group *Anti-Prohibition League* [*La Liaison anti-prohibitionniste*] participated in the ICWG. This may be the only effective way for interest groups to have a small voice in the debate at the governmental level.

Final Conclusions

Introduction

Evidence-based policy-making assumes that policy-makers should be informed by scientists, so that policy will reflect accurate factual knowledge rather than political biases (Rich, 1997). However, this assumption is not based on a realistic view of how policy processes operate, especially in a heavily politicised domain (Monaghan, 2011). Together with the strong interest in the nature of policy processes (Lindblom, 1959; Roe, 1991; Sabatier, 1998; Kingdon, 2002), a considerable amount of literature also exists detailing whether and how (scientific) knowledge informs policy. In her typology, Weiss (1979) distinguished three prominent ways in which scientific knowledge is used: *conceptually*, *instrumentally* and *politically/symbolically*. Some authors have recently advocated newer models (*evolutionary model* and *processual model*) in order to conceptualise the relationship between science and policy in heavily politicised policy areas (Monaghan, 2009; Stevens, 2011). In general, it has become clear that many players (e.g. interest groups and the media) are involved in the policy-making process (Kingdon, 2002; Sabatier, 1998) and that scientific knowledge is just one of the factors contributing to the policy-making process, alongside personal interests and institutional rules (Weiss, et al., 2008; Hoppe, 2005; Stevens, 2007b; Monaghan, 2011). Although the interaction between science and policy now resonates in the recent debate about the public engagement of scientists (*public criminology*; Loader and Sparks, 2011) and the interest in studying the science-policy nexus in the drug field emerged in the last decade (especially in the United Kingdom, Australia and Canada) (Lenton, 2004; Hall, 2008; Ritter, 2009; Monaghan, 2011; Hughes and Stevens, 2012), very little is known about whether and how the main political institutions (i.e. Parliament and Government) in Belgium utilise scientific knowledge (for one exception, see Smet, 2013).

In this final part, I offer some concluding observations and answer the central research questions of this study. Having examined how Belgian drug policy has been developed between 1996 and 2003, I explored how scientific knowledge contributed to the development of Belgian drug policy between 1996 and 2003. In particular, the following questions are answered: through which modalities did scientific knowledge contribute to the drug policy-making process? What has counted as scientific knowledge in this particular drug policy-making process? Is there a difference in the role played by scientific knowledge within the main political institutions (i.e. Parliament and Government)? Which other types of information competed with scientific knowledge in this particular drug policy-making process? Given the relevance of interest groups and the media standing alongside the science-policy nexus, the following question is also addressed: what is the particular influence of the media and interest groups on the contribution of scientific knowledge to the development of Belgian drug policy between 1996 and 2003?

A case-study design was used to explore and understand the contribution of scientific knowledge in the development of Belgian drug policy (1996-2003). I have selected a qualitative methodological approach, including a (critical) discourse analysis of policy and media documents (Fairclough, 2003) and 55 interviews with key informants (Tieberghien, 2014b).

1. Three milestones in the development of Belgian drug policy between 1996 and 2003

Through the analysis of policy and media documents and interviews, I established that the development of Belgian drug policy between 1996 and 2003 can be divided into three stages. While the drug issue entered the legislative framework with the Belgian law criminalising drugs and drugs possession (1921), the foundations of Belgian drug policy were laid down rather late. In the first half of the 1990s, a number of major cities were confronted with a steep increase in crime that seriously affected the quality of life in a number of neighbourhoods (Guillain, 2003). The assumption (though not backed up by data) was that problematic drug users were responsible for the rise in crime and nuisance. Eventually, a *policy window* (Kingdon, 2002) was opened by an MP of the French-speaking socialist party (PS) who publicly emphasised in the newspaper *Le Soir* (17 November 1995) that he would submit a proposal to legalise cannabis possession. Although it was only a threat (he did not submit his proposition), this event ignited the Parliamentary Working Group on Drugs (1996-1997). The Federal Parliament established a Parliamentary Working Group (1996-1997) in order to develop a clear and timely perspective on all aspects of the Belgian drug phenomenon (**first milestone**). The Parliamentary Working Group (PWG) asked national and international experts (e.g. scientists, practitioners), working in all domains of drug policy, to convey their analysis and to give clear recommendations to the Federal Government (*bottom-up* approach). Apart from topics such as drug epidemiology, prescription and substitution of methadone and/or heroin, international drug production and methadone and/or heroin substitution, a large part of the *discursive struggle* between a *social and public health* framework and a *legalistic/repressive* framework focused on the question of the criminalisation of drugs. Eventually, across the different domains (welfare, social integration, education, security, justice and economy) most of the members of the PWG agreed about the need for a multidisciplinary and coherent approach to the multi-dimensional drug phenomenon (*Parl.St. Kamer, 1996-1997, 1062/1-3*).

During a turbulent intermezzo between 1997 and 2000, the entire drug debate was overshadowed by a large paedophilia scandal (i.e. the Dutroux case) as well as the resulting focus on reform of the judicial authorities and the police (Octopus reforms). Meanwhile, in 1999, Belgian voters rejected the longstanding Coalition Government of Christian Democrats and Socialists and

voted a six-party Coalition into power consisting of the Flemish and Francophone Liberals, Socialists and Greens led by Flemish Liberal Guy Verhofstadt (1999-2003). This change turned out to be an important *facilitator* of the development of a coherent (public health) drug policy. It also increased the credibility given to scientific knowledge as tool of developing drug policy.

Gradually, the drug issue re-emerged on the political agenda. The new Belgian Government further elaborated the principles and recommendations of the Parliamentary Working Group (1996-1997) and established the first 'national drug strategy' in 2001 (**second milestone**). The Federal Drug Policy Note (2001) indicates that the drug phenomenon is considered to be a permanent social reality (i.e. *normalisation* policy). Accordingly, in the framework of an *integral and integrated policy*, a discourse with a purely criminal focus was officially replaced by a discourse where the drug problem was primarily considered a *problem of public health* (Federal Government, 2001a). From this starting point, the Federal Drug Policy Note put forward three pillars: (1) prevention of drug consumption; (2) harm reduction, treatment and re-integration, and; (3) law enforcement as the last resort (Federal Government, 2001a; p.7). The Federal Drug Policy Note (2001) also expressed the commitment to an *evidence-based* policy and the budget for drug research increased greatly. For instance, since 2001, the Minister in charge of the Federal Science Policy has received an annual budget to organise and manage a Research Programme supporting decision-making in the field of illegal drugs. It was an important indicator of the efforts that the policy-makers made in addressing the drug problem and in considering scientific knowledge as a priority (*facilitator*).

The Federal Drug Policy Note determined the policy priorities and thus the legislative and prosecution framework. As one of the action points of the Federal Drug Policy Note (2001), the Federal Government planned to amend the Belgian Narcotic Drug Law of 1921 and, accordingly, to develop a new Ministerial Circular Letter. The new drug law and the new Ministerial Circular Letter were endorsed just before the 2003 elections (**third milestone**). These decisions, together with the election of a new Government (Verhofstadt II Government: a four-party Government with only the Flemish and French-speaking liberals and the Flemish and French-speaking socialists in power), marked the closing of the *policy window* (Kingdon, 2002).

2. Weiss' three-folded typology of knowledge utilisation

Given that the debate in the drug policy field is often contested, part of a heated controversy or subject to rapid change, the drug policy-making process has been frequently considered an *un-evidenced-based mess* (Monaghan, 2008b). Against such a background, some interviewees indeed labelled the development of Belgian drug policy between 1996 and 2003 as '*fact-free politics*' –

what they saw as non-rational policy-making -, ignoring the rather subtle or hard-to-trace roles of scientific knowledge in the policy-making process. These accounts over-simplify the science-policy nexus and, following Monaghan (2011), this mistaken perception can in itself be seen as an important *barrier* towards the utilisation of scientific knowledge in the policy-making process.

However, *evidence-informed* policy or *evidence-aware* policy concepts that have been developed to demonstrate scepticism towards such zero-sum statements (*evidence-based* or *evidence-free*), tend to capture the reality of the science-policy nexus more accurately (Young, et al., 2002; Dobrow, Goel and Upshur, 2004). Applying Weiss' three-folded typology (1979), interviews and the analysis of the submissions, hearings and parliamentary/governmental reports demonstrated that scientific knowledge contributed to the policy-making process *through different modalities*. While previous Anglo-Saxon studies (originating from countries with a two-party system) have shown that the nature of knowledge utilisation in the drug policy-making process is strongly politicised (Hall, 2008; Monaghan, 2011; Hughes and Stevens, 2012; Ritter and Lancaster, 2013; MacGregor, 2012), I found several illustrations of conceptual and instrumental utilisation as well.

Although **instrumental utilisation** is the most common interpretation of the science-policy nexus (and is linked with the *evidence-based* thinking), it is the least common example of knowledge utilisation (Edwards, Strang and Jaffe, 1993; O'Dwyer, 2004; Brambila, et al., 2007). In this study, however, a policy-funded evaluation study aiming at examining the progress of the Belgian drug policy as well as the experiences of other countries (De Ruyver, et al., 2000) did in fact lead to action/implementation (*instrumental utilisation*). In particular, the recommendations of the evaluation study of Prof. Dr. Brice De Ruyver and Prof. Dr. Joris Casselman (2000) was highly relevant in determining the specific policy actions by the Federal Government: the report fitted with the mood of the time and answered questions at the top of the political agenda since the PWG. Additionally, the fact that an evaluation study, considered to have led to direct measurable and usable results for policy-makers (Devroe, 2002), fulfils this particular role fits with the literature on *evidence-based* policies (Devroe, Deschamps and Hannes, 2008).

It was more likely than instrumental utilisation that scientific knowledge contributed to an overall *enlightenment* by identifying possible policy options, clarifying issues and changing the understanding of the drug problem (**conceptual utilisation**). In the Parliamentary Working Group on drugs (1996-1997), scientific knowledge contributed to the percolation of (new) ideas and concepts and the development of a substantial body of knowledge. The new frameworks for

understanding the drug problem provided by scientists clearly altered the discourse in the Belgian drug policy-making process. For instance, the study of De Ruyver et al. (1992; *Poverty, drug use and criminality*) and the study of Vercaigne and Walgrave (1995; *Youth between (sub)cultures and business: a study focusing on discotheques, house music and nuisance*) both served respectively as an endorsement of the argument that (problematic) drug users in the criminal justice system ought to be oriented more towards treatment, and the argument that prevention initiatives have to pay special attention to youth, smart drugs and the consequences of drug use for road safety. Eventually, in pursuing a global and integrated policy, the final conclusions and recommendations of the PWG expressed that prevention was to be the first goal and a criminal approach towards drug users was supported by the so-called *ultimum remedium* philosophy. These final conclusions and recommendations by the PWG provided the fundamental framework for the development of the Federal Drug Policy Note (2001) in the ICWG.

In a similar vein, the accumulation of scientific knowledge over time has been used to shape the parliamentary debates on Belgian drug law (2002-2003). For example, through participation in the Commission of Public Health (2002-2003), scientists have *enlightened* MPs to (new) issues like the dangers of cannabis and the connection between cannabis use and psychiatric disorders (e.g. depression, schizophrenia,...). As it was argued that cannabis was more harmful and dangerous than initially thought (e.g. the increasing level of THC was frequently noted), these elements offered strong support to arguments against the bills.

In line with the conclusions of other researchers in the field of drugs, there were also a number of examples where the utilisation could be categorised according to Weiss's **political/symbolic utilisation**. Parliamentary debates consisted of bargaining and negotiation using whatever arguments could be mustered in support of their position. Scientific knowledge can be seen as one tool to help win their case (as an instrument to enact power). MPs who submitted questions, interpellations, resolutions, bills or resolutions often selected scientific knowledge on the basis of their political (i.e. majority versus opposition, party policy) and cultural/linguistic (e.g. Flemish MPs preferred the selection of Flemish experts) motives and their functional specialisation (e.g. MPs with a medical background tended to select doctors or professors in toxicology or pharmacology). Scientists or scientific studies which made conflicting opinions more apparent were excluded or criticised (*cherry-picking* or *trawling*; Stevens, 2007a). Similarly, I observed examples of political/symbolic use of scientific knowledge in governmental discussions. For example, when answering questions and interpellations in the Parliament or when addressing the topic in a speech, Ministers readily distorted scientific arguments which were detrimental to the

chosen policy direction, by criticising them as irrational or incorrect (a tactic of creating *'flak'*; Stevens, 2007a).

Serving as another example, the evaluation study of De Ruyver et al. (2000) recommended that the lack of uniformity in the prosecution of cannabis possession between different Public Prosecutor's offices should be resolved. A large part of this problem was attributed to the rather vague notions such as 'public nuisance', 'problematic use' and 'limited possession for personal (single or occasional) use'. However, although the Federal Drug Policy Note (2001) introduced new definitions, they still remained too vague and open to interpretation. In other words, political/symbolic utilisation was noted: in the Federal Drug Policy Note reference was made to the governments' investment in the research by way of demonstrating commitment and responsiveness, although the vagueness of these notions was left unresolved. This example also provides support for the argument made by Greenberg and Mandell (1991) and Nutley, Walter and Davies (2007) that Weiss's typology is not *exclusive*: several forms of utilisation occurred simultaneously (i.e. the evaluation study of De Ruyver et al. (2000) was used both in an instrumental and a political/symbolic way).

In this context, I have experienced some difficulties in capturing how some examples could be classified according to Weiss's three-folded typology. In accordance with Stevens (2007a) and Monaghan (2011), this typology tends to offer only limited descriptions of some modalities through which scientific knowledge was used. In particular, Weiss's political/symbolic model (Weiss, 1979) seems too simplistic and requires the introduction of new categories. First of all, this model fails to distinguish between instances where research is being used appropriately as opposed to research being misused or misinterpreted (see also Stevens, 2007a). Instances where scientific knowledge was *misused or misinterpreted* (e.g. making blunt interpretations, false generalisations and causalities) were frequently observed in the parliamentary debates. According to Weiss (1986), this may lead to confusion or so-called *endarkenment* (instead of *enlightenment*). Second, Weiss' *political/symbolic* model does not cover the occasions where scientific knowledge is cited simply to justify the government's commitment to knowledge utilisation. For example, in accordance with what Cross et al. (2000) termed the *status model* in the literature, policy-makers aim to gain credibility (and *status*) by referring to studies that they (or their predecessor) commissioned. These references can be categorised as a subtype of *political/symbolic* utilisation as they were used to support personal policy narratives.

3. Knowledge utilisation: Parliament versus Government?

Having examined the examples of knowledge utilisation, it seems incorrect to argue that scientific knowledge is more influential in the Parliament than in the governmental policy-making (Johnson, et al., 2004; Smet, 2013). In accordance with the findings of MacGregor (2012), there is rather a difference in the types of utilisation depending on different institutional cultures. The media plays a powerful role in this regard as well (see below, §7).

Political/symbolic utilisation (in contrast to *instrumental* or *conceptual* utilisation) was likely to be more evident in parliamentary discussions. Making use of their capacity to monitor and control the activities of the Government, opposition MPs often engaged in a discursive struggle between social and public health concerns and law enforcement priorities. In order to set and keep this particular issue high on the political agenda, they simply selected or even misinterpreted those studies or scientists that supported their political narrative or interests. This finding is of course indicative of the institutional culture of the Parliament: it is mainly a forum for political games between majority and opposition (Johnson, et al., 2004; Thomson, Wilson and Howden-Chapman, 2007).

The Government, more than the Parliament, must strike a balance between important public and political values that are in conflict. Members of the Government have to persuade other people, within and outside the policy-making process, that their ideas are worth acting on. In spite of some instances of political/symbolic utilisation, the utilisation of scientific knowledge in an *instrumental* or *conceptual* manner tended to be more associated with the activities of the Government. As stated above, the Federal Drug Policy Note was strongly influenced by the concepts and perspectives provided by scientists in the PWG. This can be considered as an indirect pathway through which scientific knowledge seeped into the policy discourse (*conceptual utilisation*). At the same time, the evaluation study of Prof. Dr. Brice De Ruyver and Prof. Dr. Joris Caselman (De Ruyver, et al., 2000) was directly used in developing the Federal Drug Policy Note (*instrumental utilisation*).

However, in retrospect, the case of the development of Belgian drug policy (between 1996 and 2003) can be termed rather atypical. It was the Federal Parliament (and not the Federal Government) who took the initiative to inform itself about the complexity and multidisciplinary nature of the drug phenomenon. At the same time, the PWG relied on national and international experts (e.g. scientists, practitioners), working in all domains of drug policy, to get an idea of good practices as well as of scientific findings regarding the drug phenomenon. This *bottom-up*

approach has been one of the strong characteristics of the development of Belgian drug policy and the first national drug strategy by the Federal Government in particular.

4. Scientists' discourses: 'speaking truth to power'?

Reflecting the *evidence-based* policy account which is premised on the notion of an independent, truth-seeking scientist (Hartnoll, 2004; Nutley, Walter and Davies, 2007), policy-makers assessed scientific knowledge as the way to get at truth and to understand a phenomenon satisfactorily. MPs and members of the Government sought 'certainties' or 'facts' to support their case or improve their credibility and scientific knowledge was clearly assumed to reflect 'objectivity' and 'authoritative, truth-producing' data. Scientific knowledge commissioned by the Federal authorities (policy-funded research) and scientific knowledge giving a quantified input on discussions about the drug phenomenon appeared to be particularly attractive to policy-makers. In addition, a particular factual claim of a scientist was often believed to be true because it had been put forward by those who are considered competent to speak 'truth'. In line with Jasanoff (1990) and Boland (2008), it was assumed that the use of authoritative claims such as 'scientists show' or 'scientific research confirms' made a particular discourse 'true'. Footnote references and bibliographies were rarely included and often incomplete (wrong order, no author, no place of publication, no page numbers, etc.) or out-of-date.

The view that scientific knowledge is objective, context-free or interest-neutral stems from the positivist tradition (Rubin and Rubin, 2005). According to Zampini (2014), such a value-free ideal may allow scientists to see themselves as separate from the social and political world. Indeed, scientists' discourses in formal advisory structures such as the PWG (1996-1997) or the Commission of Public Health (2002-2003) were largely fed by prepositional assumptions (i.e. assumptions about what is or can be or will be the case; 'truth') declared without citations. For instance, 'cannabis use leads to...', 'it is determined that 90% of the drug addicts...', 'poly drug use increased', 'the war against drugs caused a lot of suffering', '50% of our youngsters has experimented with drugs'.

However, a nuanced account of scientists' discourses is necessary (i.e. **processual model**; Monaghan, 2011). In their claims to capture 'truth', scientists were observed misusing science in several ways during the hearings in the formal advisory structures (e.g. Parliamentary Working group on drugs (1996-1997), Commission of Public Health (2002-2003)). Some neglected the main principles of scientific knowledge by using ambiguous terminologies (e.g. a comparison was made between the number of hashish users and the number of cannabis users) or by presenting data regardless of the methodological purity with which it had been developed (e.g. ne-

glecting statistical significance, comparing different methodologies, ignoring methodological pitfalls). In addition, scientific results were sometimes distorted in several – often subtle – ways, including making simplistic interpretations, false generalisations and causal inferences. As participating in a formal advisory structure allow scientists to control which message is provided and how it is absorbed in the political setting, it is important that scientists offering their expertise in the policy-making process accept their responsibility to provide correct information instead of losing sight of their scientific research base (cfr. so-called *airport scientists*; Uggen and Inderbitzin, 2010). If scientists misrepresent their findings, there is even less hope for well-informed coverage in the policy-making process.

5. Other types of information and factors competing with scientific knowledge

Ideally, developing policy is a deliberative process in which all information and opinions relevant to the issue are treated equally. In reality, however, policy-making often falls short of this ideal. Consistent with the theoretical models of policy-making and knowledge utilisation, this dissertation has shown that this process is interactive and shaped by other types of information (*structured interaction*; also termed as '*governance*') as opposed to what is accepted in the traditional, rational view on the policy-making process (*authoritative choice*) on which the notion of *evidence-based* policy is founded. The illustrations below further underpin criticism of *evidence-based policy* thinking.

Policy-makers were particularly influenced by **practitioner's knowledge and experience** as opposed to scientific knowledge. Practitioners not only provided practical and clear information based on their day-to-day experiences: their remarks in relation to budgets or staff made clear that they were more directly involved in the policy-making process. For example, both Dutch- and French-speaking practitioners of drug treatment and prevention adopted the common strategy of developing a Policy Memorandum. This document described the concerns and interests of each organisation. The intensive interactions between practitioners and policy-makers worked well. For instance, when comparing the Federal Drug Policy Note (2001) with the statements included in the 1999 Policy Memorandum, there is a significant overlap. In the context of the *hierarchy of evidence*, a concept emerging from *evidence-based* policy thinking, this is an interesting point. The evidence hierarchy assumes that policy-makers are generally best served by studies that use *experimental and quasi-experimental research designs* with good measures (Randomised Control Trials – RCT) (Wildavsky, 1979), and portrays knowledge derived from practitioners' experiences as unsystematic and not rigorous. In this case, however, these experiences had a crucial role in shaping policy-makers' perspectives.

Furthermore, I have shown that the utilisation of scientific knowledge in the policy-making process depends on various factors, such as the characteristics of the policy-making apparatus and the characteristics of scientific knowledge. Echoing other studies (Sorian and Baugh, 2002; Mitton, et al., 2007; Ritter, et al., 2007; Huston, 2008), this study frequently reflects Caplan's observations (*two communities thesis*) that the gaps between scientists and policy-makers are fundamental barriers to the use of scientific knowledge. Several **institutional and individual characteristics of policy-making** shaped how scientific knowledge was used, or whether it was used at all at particular points in the policy process. This is natural as policy-makers still have a responsibility that other 'external' actors do not have. The international context has been an important factor as policy-makers are also responsible for the *international* aspects of their policy competences. Right from the start, several international drug control treaties, strongly supported by the international community, determined particular policy choices (e.g. regarding cannabis policy). The (developing) international framework (e.g. the 1997 Amsterdam Treaty; the Inter-parliamentary Advisory Council of the Benelux countries (1998); the Dutch policy paper 'Pathways to the back door' (2000), and; the 1990 Schengen Convention) was frequently referenced in political arguments refuting scientific advice. For instance, the strategy of projecting the effects of criminalisation or legalisation based on comparisons with the experiences of other countries (e.g. the Dutch *coffee-shop model* policy versus the American *War on Drugs*), so-called *policy platonism* (MacCoun and Reuter, 1997), was regularly adopted.

Knowledge utilisation also depends on the electoral cycle and the battle between political parties (Flitcroft, et al., 2011; MacGregor, 2012). As it can be damaging to be too closely involved in such a politicised and mediatised debate, policy-makers were always concerned with how their electorate (and the public opinion in general) would perceive and respond to policy decisions. For instance, the theme of drugs was broadly covered in the 2003 election campaign, during which all of the coalition partners feared electoral losses. Regardless of the position they took, the consistent use of propositional arguments and *political tactics* (e.g. using incorrect terminology, employing personal insults, inciting emotional responses) illustrated their concerns of a potential electoral backlash. Individual characteristics (their interest, education, research receptivity, ...) played a very influential role in the policy-making process as well (Weiss, 1999; Landry, Lamari and Amara, 2003). For instance, the personal background, education or experiences of the Minister (and his/her representatives) often (partly) determined which scientist is or is not included in their personal network. At the same time, in order to advance particular positions, to satisfy their electorates or to gain higher authority, policy-makers have sometimes ignored scientific knowledge, preferring to rely on their personal opinions or experiences (so-called *tacit* knowledge; Smet, 2013; Richardson, 2013).

The **characteristics of scientific knowledge** were also reported to be important barriers of knowledge utilisation. In line with the findings of several empirical studies (Mitton, et al., 2007; Ritter, et al., 2007; Huston, 2008), the issue that academic careers are geared towards and reward academic publication, rather than involvement in the policy-making process, was a recurring topic in the interviews. Furthermore, interviewees indicated that scientific research often takes years to complete while policy issues often rise rapidly to the top of the political agenda. For instance, while the first flow of research projects within the ‘Research Programme in support of the Federal Drug Policy Note’ in 2002 could have been particularly relevant (e.g. ‘Case management in the substance abuse treatment and criminal justice system’, ‘Problematic drug use: a study of the operationalisation of the concept in a legal context’), the results of these policy-funded research projects came too late to contribute to the development of Belgian drug law (2002-2003). Additionally, the translation of scientific knowledge into a short, comprehensible report was considered to be an even more complex process. The poor fit between the way in which academic information is reported by researchers (e.g. lengthy scientific reports) and the practical need for brevity by policy-makers was noted. Finally, whereas scientists may be familiar with the conditions of scientific uncertainty (e.g. about the causal link between cannabis use and schizophrenia), policy-makers seek clear explanations. As a consequence, the utilisation of scientific knowledge was sometimes completed with data (numbers and statistics) derived from non-academic research or supplied by an (inter)national organisation (e.g. EMCDDA, WHO, WIV). When a policy-maker was faced with difficulties in identifying the appropriate options, there was also a tendency to invoke the *precautionary principle*. This principle is premised on the idea that a strong research base with rigorous research findings is not required to make policy decisions; scientific *indications* (in the absence of scientific consensus) are considered sufficient (Head, 2010). Against such a background, the precautionary argument can be considered to be a kind of barrier to knowledge utilisation and *evidence-based* policy-making in particular (Monaghan, Pawson and Wicker, 2012; Singleton, et al., 2014; Hughes, Ritter and Cowdery, 2014).

6. Public engagement of scientists and pathways of knowledge utilisation

The aim of understanding the modalities through which scientific knowledge contributed to the development of Belgian drug policy between 1996 and 2003, also encompasses exchange or linkage issues between science and policy. While a considerable amount of literature focuses on facilitators of knowledge utilisation (Lampinen, 1992; Nutley, Walter and Davies, 2007; Head, 2010), little attention has been given to the ways that public engagement of scientists influences knowledge utilisation (Haynes, et al., 2011b).

6.1. Personal networks

The present study identified a number of opportunities to improve the likelihood that scientific knowledge will feed into the drug policy process (see also above: e.g. budget increase, change in Coalition partners in Government). In empirically exploring the interplay between science and policy, a notable finding was the central importance of relationships and interactions (*strong facilitator*). Long-standing relationships with key players inside the Parliament and the Government created pathways of influence (Ritter, 2009; Lenton and Allsop 2010; Haynes, et al., 2011a). Clearly, knowledge utilisation is not solely about the research, but also very much about the researcher (Hird, 2009; Ritter, 2009; Haynes, et al., 2012). It often appeared that the Ministers (or their representatives) and MPs consulted scientists from their own **trustworthy network** to gather background information, unravel a problem or support or refute arguments in the discussion. In particular, policy-makers consulted scientists as an alternative to published research because this tailored advice and dialogue made it easier to adapt policy arguments to achieve the closest fit. However, an individual relationship with a scientist may result in either a decrease or an increase of knowledge utilisation. A focus on individual relationships clearly limits the policy-maker's access to the broad spectrum of (sometimes conflicting) scientific insights (and promotes *political/symbolic utilisation*). At the same time, while some scientists may act as a lever in promoting the use of research findings, others might not be fully supportive of their recommendations on research, rather acting out of personal motives (cfr. *airport scientists*; Uggem and Inderbitzin, 2010).

Similar to the findings of Haynes et al. (2012), this study established that policy-makers tended to turn to those scientists with recognised expertise and authoritative presence in drug policy, who were known to be appropriately discreet (especially in such a heavily mediatised domain) and had the capacity to enlist public and political supporters behind their claims. As an example, in selecting scientists to be involved in formal advisory structures (e.g. the PWG (1996-1997), the Parliamentary Commission of Public Health (2002-2003)), it appeared that *personal contacts/networks* and/or *regular appearances in the media* were advantageous. An important issue here is that scientists are assumed to engage with journalists (and the public) as well to establish networks with policy-makers.

It is important for scientists – who have the intention of bringing scientific knowledge into the public and political debate – to make themselves available for informal consultation by policy-makers. For instance, the participation of some scientists in **study groups from political parties** can be seen as a successful route to bringing scientific knowledge to the policy-making process and to establish an interaction between science (and practice) and policy. Likewise, the

highly attended **national conferences ‘Drug Policy 2000’** deeply engaged with the debate between scientists, practitioners and policy-makers. Through the mobilising forces of criticism and enthusiasm for knowledge about the drug phenomenon and policy solutions, the conferences can be seen as one of the initiatives driving the (conceptual) utilisation of scientific knowledge in the policy-making process. In particular, the conferences provided a useful setting for discussing the issues central to the parliamentary or governmental debates among scientists, practitioners and (sometimes) policy-makers as well as to maintaining or building up (new) networks.

6.2. *The public roles of scientists*

Reflecting on the debate regarding *public criminology* (Loader and Sparks, 2011), it became clear how scientists managed the relationship between their academic activities and policy-making. While the *two communities thesis* minimises the heterogeneity within scientists and policy-makers (Ginsburg and Gorostiaga, 2001; Monaghan, 2011), this study has shown that some scientists maintained simultaneous memberships in both worlds (Loader and Sparks, 2011). While the categories used are less straightforward than they have been portrayed, scientists may *cool down* the debate via a public role as ‘observer-turned player’ and to a lesser extent via positions as ‘policy advisors’ and ‘scientific experts’ or *heat* the political climate in providing critical discourses (of e.g. *social movement theorists/activists*; Loader and Sparks, 2011). In accordance with the findings of Lampinen (1992), this study established that their public engagement had an influence on the ways in which their own findings and those of others were used.

Some researchers took a public stance in presenting their findings in formal advisory structures (e.g. PWG, Commission of Public Health) and answering the questions of policy-makers (*scientific experts*). Even though this type of engagement did not go beyond this rare participation, these scientific experts *enlightened* the policy-making process (*conceptual use*). For instance, although the parliamentary debate about Belgian drug law (2002-2003) largely focused on juridical-technical issues, **scientific experts** sensitised MPs to ‘new’ scientific knowledge focusing on the dangers of cannabis (e.g. the increasing level of THC, the connection between cannabis use and psychiatric disorders). Likewise, in the PWG (1996-1997), scientific experts stimulated discussion and reflection among policy-makers (e.g. related to the prevention projects towards youth or related to the orientation of (problematic) drug users in the criminal justice system towards treatment).

Social movement theorists/activists took up a similar role as scientific experts. However, these scientists, putting forward a more critical, alternative discourse towards the drug phenomenon and drug policy, only succeeded in heating up the political climate. These alternative

approaches, focusing on the largely unproblematic characteristic of drug use or the usefulness of self-control strategies, generated a public response (e.g. several interest groups were established) and narrowed down the complexity of the discussion to the legitimacy of the criminalisation of drugs (cannabis in particular). These insights were often used as ammunition in political struggles among MPs but tended to be left unused by Members of the Government. In other words, even though their knowledge was embedded in the policy process, scientists who were deemed too critical were likely to be excluded. Indeed, like in the *evolutionary* model advocated by Stevens (2007a), it is clear that some scientific knowledge may fit the interests of the powerful groups, while others may not. The choice of what counts as ‘usable’ scientific knowledge and who is considered authoritative or trustworthy involves acts of power (Becker, 1967; Foucault, 1976; Van Swaaningen, 2001; Young, 2011). In this context, Walters (2003) called scientific knowledge which was deemed marginalised or disregarded by policy-makers as *deviant knowledge*.

Other scientists have occupied core roles in the policy-making process (Loader and Sparks, 2011). **Policy advisors** have successfully exploited research opportunities (policy-funded research) and engaged in the policy process through personal relationships with policy-makers (MPs or Ministers) or through active participation in parliamentary debates or study groups from political parties. Often they established good contacts with professionals (e.g. police, outreach workers, and so on) as well. On the side lines of the policy-making process, several *policy advisors* allowed for a flow of scientific information to the policy-making process (and stimulated *conceptual* utilisation). For instance, due to his proactive and long-term involvement in the drug policy-making process (e.g. PWG or policy-funded research), *policy advisor* Prof. Dr. Isidore Pelc was appointed President of the *Drug Health Policy Cell*, a supporting working cell of the *General Drugs Policy Cell*. It is the *General Drugs Policy Cell* who prepares the decisions of the Inter-Ministerial Conference and guards the integrated character of the policy measures.

Examples have shown that one scientist adopted a role as **observer-turned player** in the drug policy-making process (Loader and Sparks, 2011). Performing as observer-turned player, this scientist adopted different types of engagement in the PWG and the Government. For instance, based on his expertise (e.g. coordination of (policy-funded) research projects) and networks (e.g. through the organisation of the annual conferences ‘Drug Policy 2000’), Prof. Dr. Brice De Ruyver was appointed by the PWG as ‘external expert’ to integrate the findings from the hearings into a report and, secondly, to write a draft of the final conclusions and recommendations. This draft served as a starting point in the political discussion about Belgian drug policy among the members of the PWG. The summarising report and its bibliography provided a clear and

careful integration of most of the good practices and recommendations of the scientists, practitioners and members of the Government. Altering the tone of the political discussion (*conceptual* utilisation), the report produced a clear expression of the social and health discourse with the emergence of the harm reduction movement and the *ultimum remedium* philosophy instead of a strict repressive discourse. However, within this framework, some questions raised about the thin line between the role of a neutral/external expert and a policy-advocating expert. Even though the summarising report of the hearings in the PWG made clear that scientific knowledge (and practitioner's knowledge) was integrated, it already offered and tailored advice in accordance with the preferences of the policy-makers. In particular, the summarising report with the findings from the hearings displayed less sensitivity to the views of more critical contributors (of e.g. *social movement theorists/activists*) (see also above, *evolutionary* model; Stevens, 2011). Clearly, as the members of the PWG aimed to have a sufficient base for policy debate, the 'external expert' (*observer-turned player*) could not retain his autonomy/neutrality completely in writing the summarising report.

Furthermore, the *evidence-based* policy discourse and movement, despite its criticisms, has given scientists a more overt and direct role in Belgian drug policy-making at the governmental level as well. In 1999, the Verhofstadt I Government underlined that scientific knowledge was an important resource in policy-making (*evidence-based* policy). As a result, uniquely in the Belgian (drug policy) context, Prof. Dr. Brice De Ruyver, acting as an *observer-turned player*, was the security advisor to Prime Minister Guy Verhofstadt. Working within the *Government* was an excellent way to establish oneself and understand how policy is made and who or what exerted the most influence (Bammer, et al., 2010). In particular, his role enabled him to promote the *instrumental* utilisation of his own scientific research and that of others in the political arena (e.g. the evaluation study, international drug policy studies). Such a public role is by far the most effective means to advance an *evidence-informed* drug policy. However, it is important to set realistic expectations about the contributions of scientists in the policy-making process (Petersilia, 2008). An *observer-turned player* is able to *inform* policy-making, not to *make* it. A judgment about whether or not a policy direction should be pursued is never solely a scientific judgment (Rock, 2010). For instance, some findings of the evaluation study and international drug policy studies were also used in a more *political/symbolic* way by policy-makers.

7. Media as a strong facilitator of the science-policy nexus

Previous studies have assumed that the media is an important factor in drug policy debates, and in the science-policy nexus in particular (Duke, 2001; Hughes, 2009; Macleod and Hickman, 2010; Monaghan, 2011; MacGregor, 2012). However, details about its particular influence have

been largely missing in knowledge utilisation studies in the drug policy area. The development of Belgian drug policy between 1996 and 2003 provided a clear case in which the media acted as a *strong facilitator* of knowledge utilisation in the drug policy-making process.

Even though the effect of the media is not always so obvious given the multiple factors that may affect drug policy, I found evidence of the power of the media in defining political interest (*agenda-setting*) and in contextualising issues through selection and prominence (*framing*) (McCombs and Shaw, 1972; Entman, 1989; Lancaster, et al., 2011). The media has the necessary platform to quickly put issues on the public agenda and has access to policy-makers, and vice versa. First of all, it became clear that, since drug policy is a highly politically sensitive issue, the media narrowed down the focus to one single element (cannabis policy) and stimulated further confusion and conflicting interests (**framing**). Coverage by the media was found to have fuelled public fear (*'moral panic'*) and speculation by using terms such as 'legalisation' and 'tolerance policy' (Cohen, 1972). As a consequence, MPs (and the public) believed that there were two positions: either cannabis use is harmless (or at least less harmful than alcohol), and hence it should be decriminalised (if not legalised); or cannabis is harmful to health, and therefore its use should continue to be prohibited. Secondly, the media seemed to be a powerful player in **setting the policy agenda**. Through media-generated panic, drug policy had shot to prominence on the political agenda, demanding action from the Parliament in 1995 (resulting in the PWG in 1996). Later on, a substantial adoption of media issues in the parliamentary debate was also observed. By means of triggering questions or interpellations in the Parliament, media coverage strongly directed the parliamentary discourse towards the cannabis issue.

A major way in which policy-makers heard about scientific knowledge was through the media (Weiss and Singer, 1988). However, media coverage has some particular drawbacks: space is limited, and it interlinks sensationalism, disclosure and economic concerns in a manner that pushes accuracy down the list of priorities (Coomber, Morris and Dunn, 2000). The starting point for journalists was what made a story fit in with their particular framework and narrative. In a heavily politicised and mediatised debate such as drugs, media was *fact-checking* far less often than scientists would prefer. Media reports have tended to exaggerate scientific knowledge by drawing on research or expert opinions in a selective manner and by describing them one-sided or in more dramatic terms. In this context, MPs did not and often could seek further information regarding scientific knowledge picked up through the media.

Once scientific knowledge was picked up by the media, it was indeed harder to ignore it in the policy-making process (Lenton, 2004; Lancaster, et al., 2011). However, the actual influence of

media coverage in shaping Belgian drug policy was restricted to the high levels of attention Ministers and their representatives gave to the public opinion and their electorate. In this context, media coverage influenced informal discussions between Coalition partners or obliged Ministers to formulate public statements or answer parliamentary questions/interpellations. Indirectly, the media also determined the authorised agents of knowledge to be adopted in a personal network of a Minister (see above).

In accordance with the findings of Chan (1995), Kingdon (2002), and Walgrave and Van Aelst (2006), media discourse (and scientific knowledge as contextualised in newspaper articles) was clearly more influential in the parliamentary activities. The media can be considered to be an important *facilitator* of the science-policy nexus at the parliamentary level. It became clear that scientific knowledge which was repeatedly or extensively included in newspaper accounts stood a good chance of playing a role in parliamentary activities. MPs clearly acquired information about scientific knowledge as contextualised in newspaper articles. However, the inclusion of scientific knowledge as represented by the media is highly prone to **political utilisation**. The lack of any contextual information in media coverage, as well as the selective inclusion of scientific knowledge or expert opinion, resulted in policy-makers picking and choosing what was most supportive of their discourse.

Nevertheless, media coverage of scientific knowledge was not necessarily a precondition for playing a role in the policy-making process. For instance, the evaluation study conducted by De Ruyver et al. (2000), which gave direction to Belgian drug policy and could be perceived as an example of **instrumental knowledge utilisation**, was not repeatedly or extensively covered by the media.

The media also played a significant role in empowering the **enlightenment** function of scientific knowledge in our particular case. For instance, it was media coverage, and not scientific knowledge, which initially shaped political action in Belgium. The debate on Belgian drug policy was mainly initiated by an MP of the French-speaking socialist party (PS) who, in the French-speaking newspaper *Le Soir* (17 November 1995), publicly emphasised that he would submit a proposal to decriminalise cannabis possession. By means of generating public reaction through a series of newspaper articles, the media succeeded in placing an item on the political agenda, which in turn increased the likelihood of action on the part of the Federal Parliament and the Government. In particular, the Federal Parliament took the initiative to establish a PWG in 1996.

In addition, the sustained media focus on scientific studies on the increasing THC concentration, increasing prevalence rates, health risks of cannabis use and the 'precautionary principle' increased the likelihood of policy-makers being more sympathetic to the view that cannabis is harmful. In other words, the media encouraged arguments against a more liberal policy (**evolutionary model**; Stevens, 2007a). Even though none of these findings (Vuillaume, 2008) (which were limited, of poor quality and generated equivocal and conflicting ideas) informed political debates in Belgium before 2002, the correlation between early and regular cannabis use and the risk of developing schizophrenia, depression or other psychotic disorders featured increasingly in numerous parliamentary discussions from 2002-2003 onwards. An example of MPs taking notice and becoming sensitised to these issues is the large selection of doctors and psychiatrists in the Commission of Public Health (2002-2003).

8. Interest groups

This dissertation attempted to highlight the relatively unexplored role of interest groups advocating for drug users' rights as well as groups representing parents or ex-drug users against drug use in the science-policy nexus. Several interest groups (*Belgian Cannabis Consumers' Organisation [Belgische Cannabis Consumenten Bond]*; *A citizen just like any other [Citoyens comme les autres]*; *Anti-Prohibition League [La Liaison anti-prohibitionniste]*; *Parents against Drugs [Ouders tegen Drugs]*) succeeded in heating up and polarising the debate and in putting and keeping the drug issue on the parliamentary agenda (*agenda setting*). In particular, through extensive media coverage, organising demonstrations and making contacts with MPs, members of these interest groups were invited as experts to the hearings in the PWG (1996-1997) and the Commission of Public Health (2002-2003). In this context, they have, together with the media, played a role in the *enlightenment* function of scientific knowledge and influenced the arguments taken up in the political struggle (especially by progressive political voices). Nevertheless, generally, their discourse was mostly supported by personal experiences instead of scientific knowledge. At the same time, by employing a rather emotional discourse, interest groups sometimes misinterpreted scientific knowledge. Therefore, the associations advocating for drug users' rights as well as groups representing parents or ex-drug users against drug use can be considered rather *weak facilitators* of knowledge utilisation in the drug policy field (as opposed to what is assumed in the literature; Bergin, 2013).

The influence on policy-making remained limited to bringing issues on the parliamentary agenda. It appeared to be particularly hard for these groups to contribute to governmental debates. The lack of influence is the result of their deficient organisational and communication structure and reflects the fact that they only represented a small part of the public opinion. Confronted

with internal conflicts caused by political and financial squabbles, most interest groups ceased to exist when the topic disappeared from the political agenda (e.g. during the intermezzo or after the 2003 elections). An important exception was the active involvement of a member of the interest group *Anti-Prohibition League [La Liaison anti-prohibitionniste]* in the Inter-Cabinet Working Group developing Belgian drug law (2002-2003). Being an advisor of the Minister of Public Health Magda Aelvoet, this may be the only effective way for interest groups to have a small voice in the debate at the governmental level.

9. Reflections on methodology

Assessments of knowledge utilisation are rather difficult to make due to the multiplicity of actors and the dynamics of the policy processes (Ritter and Lancaster, 2013). The methodology adopted in this study proved viable in tracking how scientific knowledge was being represented and used (various types of knowledge utilisation), who was using this source, as well as assessing the relationship of scientific knowledge to other forms of available information. The combination of two data collection methods (a (critical) discourse analysis of Norman Fairclough and elite interviews) seemed necessary to reach a *holistic* understanding of the phenomenon. In line with Ritter and Lancaster (2013), documents were useful in revealing instances of instrumental, conceptual and political/symbolic utilisation as well as assessing the particular role of the political context and the media. In other words, a (critical) discourse analysis allowed us to unpick the unexpected and more subtle, indirect mechanisms by which scientific knowledge comes to play a role in policy development. In a similar vein, interviewing elites supplied in-depth information that could rarely be gleaned from examining documents alone (Bogner, Littig and Menz, 2009; Tieberghien, 2014b). Scientific knowledge is often not cited within public policy documents or is used informally in off-the-record discussions. Interviews assisted me detailing the role played practitioners, journalists, members of interest groups and scientists as well as exploring the (un)suitability of scientific knowledge. Nevertheless, due to selective memory and many other (self-serving) concerns and background assumptions, key informants cannot always make sharp distinctions in explaining how they use knowledge (Aberbach and Rockman, 2002). The only way to sense the extent of these biases in the data was to compare the interviews with the documents.

A case-study design was particularly useful in understanding and describing how scientific knowledge contributed to the development of Belgian drug policy between 1996 and 2003. This methodological choice was influenced by our (critical) constructionist view and by the existing research on the science-policy nexus. As our findings are based on a single case study, caution is needed in drawing conclusions or making comparisons. Generalising from one case-study on

drug policy to other areas of Belgian policy or to drug policy in other countries is rather problematic. However, even though it is possible that the extent and the modalities of uptake as documented here has only occurred in this *policy window* (Kingdon, 2002) (see also recommendations for further research), reflections on theoretical frameworks can be useful in analysing similar cases (*analytical generalisation*) (Swanborn, 2003; Bloor and Wood, 2006; Gerring, 2007). According to Mills, Durepos and Wiebe (2010), “*generalizability of the findings from a single case study increases immeasurably if similar results have been found with other case studies - whether such studies already existed in the literature or were completed after the first case study*” (p.22).

10. Recommendations for further research

Given the fact that this study was the first of its kind in Belgium to involve an analysis of whether and how the main political institutions (i.e. Parliament and Government) use scientific knowledge in the drug policy-making process and which (f)actors are at play, the findings emerging from this study should be considered as a starting point for future research. In particular, it would also be interesting to investigate how scientific knowledge is used or regarded by local policy-makers and how knowledge utilisation may differ across **local drug policies in Belgium** (e.g. cities like Antwerp, Brussels, Ghent, Liège). For instance, Black (2001) argued that scientific knowledge is more influential in national policy than in local drug policy, where policy-making is marked by a higher extent of negotiation and uncertainty. In a similar vein, it would be interesting to examine if scientific knowledge is used differently in other policy areas (e.g. migration policy) in Belgium.

Second, there is some sense in this study as to the productive nature of (print) journalism and the relationships between journalists and many players who are trying to present a particular message or narrative in the media. However, further research into the role of **media** as a linking mechanism between science and policy is needed. For instance, the role played by broadcast media, the internet and the proliferation of new forms of media in modern society need to be addressed. For instance, consistent with the rise of the internet (e.g. Google) and social media (e.g. Twitter), policy-makers may have easier access to a wider range of information/expertise (Lawrence, et al., 2014). A study by Ritter (2009) has already found that the internet was used in about half the cases even though the most frequent sources remained the advice from an expert or the consultation of technical reports.

Third, little research has been conducted on the role of **interest groups** in the science-policy nexus. Those advocating for drug users' rights as well as groups representing parents or ex-drug users against drug use are of course not the only interest groups who can affect drug policy-

making (Bergin, 2013). Even though some scholars recently gave attention to the role of advocacy organisations (Duke and Thom, 2014; O’Gorman, et al., 2014), the question remains how civil society associations, NGOs or third sector organisations, alliances, coalitions and networks of existing organisations or professional associations of lawyers or law enforcement officers may actually influence the science-policy nexus.

Fourth, 55 individuals were interviewed, including Members of Parliament, employees of Members of Parliament, members of the Federal (and Regional) Government, employees of members of the Federal (and Regional) Government, scientists, journalists, members of interest groups, and professionals working with drug users. Interviewees were selected according to their direct involvement in the case. By examining relevant documents and *snowballing* a number of relevant key informants who played a significant role in the debate were identified. While the documents only revealed the most visible (and most powerful) respondents - for example, Ministers - the *snowball* technique (Farquharson, 2005) identified respondents who worked on a lower level (e.g. Ministerial Cabinets/ employees of MPs). While theoretical saturation occurred after about 50 interviews, it gradually became clear that the most important actors involved in my case had been interviewed. Request for names and contact details of others whom they thought were important for me to interview directed me more and more to individuals already included in the study. Nevertheless, taking the **selection of interviewees** into account, a clear limitation of this sample (and a recommendation for further research) is the underrepresentation of civil servants of the Federal Administration (Federal Public Services (FPS)). As civil servants of the FPS do not come and go with the Minister but have a permanent tenure (regardless of the political colour of the Minister), their perceptions could also have been very interesting (Stevens, 2011).

Fifth, this study drew upon several knowledge utilisation models, including some newer theoretical models that were developed for the study of knowledge utilisation in heavily politicised policy areas (*evolutionary* model and *processual* model), to answer the research questions and to develop a theoretical base. These newer models, building on Weiss’ three-folded typology, offered significant potential for exploring and explaining the science-policy nexus in the specific case of Belgian drug policy-making between 1996 and 2003. The **processual model** (Monaghan, 2011) captures the knowledge utilisation processes most fully. Its strength lies in the analysis of the selection/power issues in the policy-making processes (adopted from the evolutionary model) on the one hand, and the recognition that the nature of scientific knowledge may be contested and that a multiplicity of (f)actors (e.g. politics, media) may play a role in dynamics of the policy-making process on the other hand. However, the model is not capable of explaining in

enough detail the facilitating role of the media. For instance, armed with my findings about whether and how the media may, or may not, have an impact on the contribution of scientific knowledge in the drug policy-making process, I advocate an extension of the processual model. In this context, I also recommend that the (extended) processual model be put to empirical test in other countries and other (heavily politicised) policy areas as well.

Sixth, as a final recommendation for further research, the period between 1996 and 2003 was chosen because drugs appeared on the political and media agenda in 1996 (*window of opportunity* opened) and increasingly attracted the attention of policy-makers, scientists and media until 2003. In the literature, it was argued that the opening of a policy window is often the primary means for achieving meaningful, *evidence-based* policy development or change (Kingdon, 2002; Lenton, 2004; Hyshka, 2009). This means that this case fulfilled the requirement that policy was linked to scientific knowledge. I am aware that choosing a time period that had the greatest amount of discussion might bias the results in favour of showing the strongest links between science, policy (and media). An interesting question that needs to be addressed in future studies is how science and policy interact when there is **no policy window**. In particular, it would be interesting to examine if and how the science-policy nexus unfolded in Belgian drug policy from 2003 onwards. Policy-makers tended to agree on the need to keep the drug issue marginal. Nevertheless, some interesting evolutions followed.

First, there was a large increase of policy-funded studies managed by the Research Programme. For example, from 2002 until now (2015), seventy drug research projects were commissioned and financed by the Federal Science Policy Office through the Research Programme in support of the Federal Drug Policy Note. The question is if the Research Programme which was set out to support the uptake of scientific knowledge in the policy-making process, achieved its purpose. Commissioned research seems to be more likely to influence policy than that which is external to policy-making (Nutley, Walter and Davies, 2007).

Second, the *General Drugs Policy Cell*, operational since 2010, prepares the decisions of the Inter-Ministerial Conference and guards the integrated character of the policy measures (De Ruyver, et al., 2004; De Ruyver, et al., 2007; Inter-Ministeriële Conferentie, 2010). It would be interesting to investigate the role of the General Drugs Policy Cell and whether scientific knowledge is influential in this context.

Third, the activity related to the Belgian drug law is worth examining. On 28 November 2003, five non-profit organisations demanded the Court of Arbitration to strike article 16 of the Law of 3 May 2003 (i.e. Article 16 *“The possession of an amount of cannabis for personal use by an adult, without the presence of public nuisance or problematic use, will only lead to a registration by the police”*) because the terms “public nuisance” and “problematic drug use” were too vague and

in violation of the principle of legality. The Constitutional Court agreed and article 16¹³⁸ of the 2003 drug law (i.e. the article that caused most political commotion) was struck out (Arbitragehof 20 oktober 2004, nr. 158/2004, roltnrs. 2727 en 2850, B.S. 28 oktober 2004). This move had implications for the Ministerial Circular Letter of 16 May 2003 which accompanied the new drug law. In particular, there was a need for a new directive to fill in the gap opened by the deleted article¹³⁹. Eventually, a new (transitional) directive was issued by the new Minister of Justice Laurette Onkelinx and the College of Prosecutors-General in February 2005.¹⁴⁰ Although both the Minister of Justice Laurette Onkelinx and the Minister of Public Health Rudy Demotte admitted in 2004 that a new law had to be made in order to redefine in a clear way the suppressed notions of article 16, this adaptation is not yet realised in 2015¹⁴¹. Except for a restricted number of media articles and some parliamentary questions, it would be interesting to examine why these decisions did not provoke the opening of a *policy window*.

Fourth, given the importance of the international framework in the science-policy nexus, a similar and intriguing question is whether the current (inter)national debates regarding the reforms in national and global drug control policies (Global Commission on Drug Policy, 2011; Decorte, De Grauwe and Tytgat, 2014; Edwards and Galla, 2014; Fijnaut and De Ruyver, 2014) will move drug issues onto the Belgian political agenda again (and create a *policy window*).

11. Concluding comment

I wish to end this dissertation with a short reflexive note. Ongoing debate about *evidence-based* policies and the public roles of scientists in policy-making (*public criminology*) signifies the importance of advancing theory and of improving the capacity to act efficiently in the science-

¹³⁸ In discussing the striking out of article 16, some authors speak of the annulment of article 11. Both are right. This conceptual confusion is caused by the fact that article 16 of the Law of 3 May 2003 states that an article 11 must be added to the original Drug Act of 1921. So, both articles refer to the same legislative principles.

¹³⁹ Legally, the striking out of this article implied that the old law had become active again (i.e. a formal report has to be written for every offence instead of an anonymous police registration).

¹⁴⁰ The new Ministerial Circular Letter called for prosecution of an adult in possession of cannabis for personal use (3 grams or 1 plant) only in cases involving disturbance of 'public order' (defined as possession of cannabis in or near educational or similar institutions, possession of cannabis in a prison or institution of child protection, possession of cannabis in a public place or building) or other aggravating circumstances such as the involvement of minors, being a member or leader of an association or causing severe illness or death. The 2005 Ministerial Circular Letter deleted the concept 'problematic use' and replaced 'public nuisance' with 'public order' to provide more clarity. On the condition that there are no aggravating circumstances (like use in the presence of minors, disturbance of public order), the police had to make a simplified process-verbal (as was included in the 1998 Ministerial Circular Letter) and an overview was sent to the Public Prosecutors' Office every month. Nevertheless, the new directive still did not give any clear definition of some of the concepts.

¹⁴¹ As an exception, in 2006, a new Law (20 July 2006) further modified the basic Belgian law (of 24 February 1921). It included two amendments to the Narcotic Drug Act (art. 9 bis and art. 9 ter). This law formally regulated the authority of the mayor in closing drug joints as well as the authority of the police to arrest a person for six hours being under the influence of substances and exposing him/herself and others to dangers.

policy nexus. Since most research fails to go beyond academic publications, many challenges as well as opportunities lie ahead for scientists who want to influence the policy-making process. Likewise, the rich and detailed discussion of this case may provide policy-makers with a framework for reasoned reflection on the *evidence-based* movement, on the ways they identify scientists whom they introduce to their trustworthy networks and on the (ambiguous) role of the media in parliamentary and governmental debates. But will this reasoned reflection actually occur? Will this study really increase the awareness of policy-makers of how the science-policy nexus works, and improve the uptake of scientific knowledge in the policy-making process? Unless I became a 'trusted voice' and achieved a public role as *observer-turned player* or *policy advisor* through a careful and long-term investment, it is unlikely that policy-makers are going to adopt my findings. Another lengthy scientific report of 300 pages is very far away from the short and concise documents policy-makers want. Thus, what's next for me? Sending a summary to a few policy-makers? Writing an opinion letter to the newspaper?

REFERENCES

- Aberbach, J. D., & Rockman, B. A. (2002). Conducting and coding elite interviews. *PS: Political Science and Politics*, 35(4), 673-676.
- Acevedo, B. (2007). Creating the cannabis user: A Genealogical Analysis of Cannabis Reclassification in the United Kingdom. *International Journal of Drug Policy*, 18(3), 177-186.
- Administratie Planning en Statistiek. (2006). Vlaamse Regionale Indicatoren. Brussel: APS.
- Agar, M. (1973). *Ripping And Running: A Formal Ethnography Of Heroin Addicts*. New York: Seminar Press.
- Aguiar, L. L. M. (2012). Redirecting the Academic Gaze Upward. In L. L. M. Aguiar & C. J. Schneider (Eds.), *Researching amongst Elites. Challenges and opportunities in studying up* (pp. 1-28). Surrey: Ashgate Publishing Limited.
- Allen, C. (2007). *Crime, Drugs and Social Theory. A Phenomenological Approach*. Hampshire: Ashgate Publishing Limited.
- Amara, N., Ouimet, M., & Landry, R. (2004). New Evidence on Instrumental, Conceptual, and Symbolic Utilization of University Research in Government Agencies. *Science Communication*, 26(1), 75-106.
- Ansseau, M., Gustin, F., Hodiamont, F., Lemaître, A., Lo Bue, S., Lorant, V., Portet, M., Reggers, J., Tyberghein, M. and Van Deun, P. (2002). *DHCo: délivrance d'héroïne sous contrôle médical: étude de faisabilité et de suivi* Gent: Academia Press.
- Arbitragehof 20 oktober 2004, nr. 158/2004, roltnrs. 2727 en 2850, B.S. 28 oktober 2004.
- Babor, T., Caulkins, J., Edwards, G., Fischer, F., Foxcroft, D., & Humphreys, K. (2010). *Drug Policy and the Public Good*. Oxford: Oxford University Press.
- Bacchi, C. (2008). The politics of research management: reflections on the gap between what we 'know' (about SDH) and what we do. *Health Sociology Review*, 17(2), 165-176.
- Bacchi, C. (2009). *Analysing Policy: What's the problem represented to be?* Frenchs Forest: Pearson Australia.
- Bagozi, R. P., & Dabholkar, P. A. (2000). Discursive Psychology: An Alternative Conceptual Foundation to Means-End Chain Theory. *Psychology & Marketing*, 17(7), 535-586.
- Bak Jørgensen, M. (2011). Understanding the Research-Policy Nexus in Denmark and Sweden: The Field of Migration and Integration. *The British Journal of Politics & International Relations*, 13(1), 93-109.
- Bammer, G., Strazdins, L., McDonald, D., Berry, H., Ritter, A., Deane, P., & Van Kerkhoff, L. (2010). Expanding the deliberations about the research-policy gap: useful ideas from the literature. In G. Bammer, A. Michaux, & A. Sanson (Eds.), *Bridging the 'know-do' Gap: Knowledge Brokering to Improve Child Wellbeing* (pp.135-156). Canberra: ANU E Press.
- Barak, G. (2007). Doing newsmaking criminology from within the academy. *Theoretical Criminology*, 11(2), 191-207.

- Bauwens, T., De Koster, C., Enhus, E., & Evenepoel, A. (2013). The Pains and Gains of a Social Constructionist Perspective on Policy-supporting Research. In K. Beyens, J. Christiaens, B. Claes, S. De Ridder, H. Tournel, & H. Tubex (Eds.), *The Pains of Doing Criminological Research* (pp. 39-57). Brussel: VUB Press.
- Becker, H. (1967). 'Whose side are we on?'. *Social Problems*, 14(3), 239-247.
- Behague, D., Tawiah, C., Rosato, M., Some, T., & Morrison, J. (2009). Evidence-based policy-making: the implications of globally-applicable research for context-specific problem-solving in developing countries. *Social Science & Medicine*, 69(10), 1539-1546.
- Bekkers, V., Fenger, M., Homburg, V., & Putters, K. (2004). *Doorwerking van Strategische Beleidsadviesing*. Rotterdam/Tilburg: Erasmus Universiteit Rotterdam & Universiteit van Tilburg.
- Bennett, T., & Holloway, K. (2010). Is UK drug policy evidence based? *International Journal of Drug Policy*, 21(5), 411-417.
- Bergeron, H., & Griffiths, P. (2006). Drifting towards a more common approach to a more common problem: epidemiology and the evolution of a European drug policy. In R. Hughes, R. Lart, & P. Higate (Eds.), *Drugs: policy and politics* (pp. 113-124). Berkshire: Open University Press.
- Bergeron, H., & Fortane, N. (2010). *Between public health and law enforcement, which mode of regulation for drug policies?* Paper presented at the Fourth Annual Conference of the International Society for the Study of Drug policy, Santa Monica.
- Bergin, V. (2013). *Regulating alcohol around the world: policy cocktails*. London: Ashgate.
- Berridge, V., & Thom, B. (1996). Research and policy: what determines the relationship? *Policy Studies*, 17(1), 23-34.
- Berridge, V., & Stanton, J. (1999). Science and policy: historical insights. *Social Science & Medicine*, 49(9), 1133-1138.
- Berridge, V. (2002). Epidemiology and policy: the post-war context. *Bulletin on Narcotics*, 1(3), 143-151.
- Berridge, V. (2004). *How to strengthen the research basis of policy and practice?* Paper presented at the Conference Connecting research, policy and practice. Lessons learned, challenges ahead, Strasbourg.
- Beyens, K., Van den Broeck, T., Raes, A., Snacken, S., Eliaerts, C., & De Nauw, A. (2001). *Bouwstenen voor een geïntegreerde criminele politiek*. Brussel: Federale Diensten voor Wetenschappelijke, Technische en Culturele Aangelegenheden
- Beyers, J., Eising, R., & Maloney, W. (2008). Researching Interest Group Politics in Europe and Elsewhere: Much We Study, Little We Know? *West European Politics*, 31(6), 1103-1128.
- Bickford, J. J., & Kothari, A. R. (2008). Research and knowledge in Ontario tobacco control networks. *Canadian Journal of Public Health*, 99(4), 297-300.
- Bijnsens, J., Nielandt, B., & Hauglustaine, A. (1985). *Probleemgebruikers van harddrugs: onderzoek naar de aantallen en kenmerken van probleemgebruikers in Limburg, 1984-1985*. Hasselt: CAD.
- BIRN. (2000). *Belgian National Report on Drugs 2000*. Brussels: Scientific Institute of Public Health.

- BIRN. (2002). *Belgian National Report on Drugs 2001*. Brussels: Scientific Institute of Public Health.
- BIRN. (2003). *Belgian National Report on Drugs 2002*. Brussels: Scientific Institute of Public Health.
- Black, C., Vander Beken, T., Frans, B., & Paternotte, M. (2001). *Reporting on organised crime. A shift from description to explanation in the Belgian Annual Report on Organised Crime*. Antwerpen: Maklu-Uitgevers nv.
- Black, N. (2001). Evidence based policy: proceed with care. *British Medical Journal*, 323(7322), 275-279.
- Bloor, M., & Wood, F. (2006). *Keywords in Qualitative Methods: a Vocabulary of Research Concepts*. London: Sage Publications.
- Blumer, H. (1969). *Symbolic Interactionism: perspective and method*. New Jersey: Prentice Hall.
- Boekhout van Solinge, T. (1996). Cannabis in Frankrijk. In P. D. A. Cohen & A. Sas (Eds.), *Cannabisbeleid in Duitsland, Frankrijk en de Verenigde Staten* (pp. 136-144). Amsterdam: Centrum voor Drugsonderzoek.
- Boekhout van Solinge, T. (2002). *Drugs and Decision-Making in the European Union*. Amsterdam: Mets & Schilt Publishers.
- Boekhout van Solinge, T. (2004). *Dealing with drugs in Europe*. Den Haag: BJU - Boom Juridische uitgevers.
- Bogensneider, K., & Corbett, T. (2010). *Evidence-based policymaking: Insights from policy-minded researchers and research-minded policymakers*. New York: Taylor & Francis Group.
- Bogner, A., Littig, B., & Menz, W. (2009). Introduction: Expert Interviews. Introduction to a new methodological debate. In A. Bogner, B. Littig, & W. Menz (Eds.), *Interviewing Experts. Research Methods Series* (pp.98-116). New York: Palgrave MacMillan.
- Boland, P. (2008). British drugs policy: problematizing the distinction between Legal and illegal drugs and the definition of the drugs problem. *Probation Journal*, 55(2), 171-187.
- Bourgois, P. (2000). Disciplining Addictions: The Bio-politics of Methadone and Heroin in the United States *Culture, Medicine and Psychiatry*, 24(2), 165-195.
- Bowen, S., & Zwi, A. B. (2005). Pathways to 'evidence informed' policy and practice: a framework for action. *Plos Medicine*, 2(7), 166-168.
- Boyd, S., & Carter, C. (2010). Methamphetamine discourse: Media, law, and policy. *Canadian Journal of Communication*, 35(2), 219-237.
- Braithwaite, J. (2005). For public social science. *British Journal of Sociology*, 56(3), 345-353.
- Brambila, C., Ottolenghi, E., Marin, C., & Bertrand, J. T. (2007). Getting results used: evidence from reproductive health programmatic research in Guatemala. *Health Policy and Planning*, 22(4), 234-245.
- Brans, M., Jacobs, D., Martinello, M., Rea, A., Swyngedouw, M., Adam, I., Balancier, P., Florence, E. and Van Der Straeten, T. (2004). *Recherche et Politiques Publiques: le cas de l'immigration en Belgique - Onderzoek en beleid: de gevalstudie van immigratie in België*. Gent: Academia Press.

- Brans, M., De Winter, L., & Swenden, W. (2009). *The politics of Belgium. Institutions and Policy under Bipolar and Centrifugal Federalism*. New York: Routledge.
- Brants, C. (2002). Criminologie en politiek: een ongemakkelijke LAT-relatie. *Tijdschrift voor Criminologie*, 4(1), 2-24.
- Brereton, D. (1996). Does Criminology Matter? Crime, Criminology and the Policy Process. *Current Issues in Criminal Justice*, 8(1), 82-88.
- Brewster, D. (2014). *Political Polemics and Drugs Debacles: Comparing the Cannabis Policy Process in England & Wales and the Netherlands*. Paper presented at the Eight Annual Conference of the International Society for the Study of Drug Policy, Rome.
- Bright, S. J., Marsh, A., Smith, L. M., & Bishop, B. (2008). What can we say about substance use? Dominant discourses and narratives emergent from Australian media. *Addiction Research and Theory*, 16(2), 135-148.
- Bright, S., Bishop, B., Kane, R., Marsh, A., & Barratt, M. (2013). Kronic hysteria: Exploring the intersection between Australian synthetic cannabis legislation, the media, and drug-related harm. *International Journal of Drug Policy*, 24(3), 231-237.
- Brossard, D. (2009). Media, scientific journals and science communication: examining the construction of scientific controversies. *Public Understanding of Science*, 18(3), 258-274.
- Bruffaerts, R., Demyttenaere, K., Van Hal, G., & Vanderplasschen, W. (2011). *Crisisopvang voor middelengebruikers in België: een formele evaluatie en aanbevelingen voor een duurzaam beleid. De evaluatie van Crisis and Case Management (ECCAM) - studie*. Gent: Academia Press.
- Bubela, T. M., & Caufield, T. A. (2004). Do the print media "hype" genetic research? A comparison of newspaper stories and peer-reviewed research papers. *Canadian Medical Association Journal*, 170(9), 1399-1407.
- Bullens F., From L., Meuwissen K., Nicaise P., Warland O., Pelc I., Casselman J., De Ruyver B., & Noirfalise A. (1999). *Evaluatie van de MSOC's. Tussentijds verslag: fase van de piloot- en haalbaarheidsstudie*. Leuven: Katholieke Universiteit Leuven.
- Burawoy, M. (2005). For Public Sociology. *American Sociological Review*, 70(1), 4-28.
- Burchell, G., & Foucault, M. (1991). *The Foucault effect: Studies in governmentality*. London: Harvester Wheatsheaf.
- Burssens, D. (2007). Hoe evident is evidence-based beleid? *Alert*, 33(3), 51-63.
- Burssens, D. (2008). Valkuilen van een evidence-based criminaliteitsbeleid. *Panopticon*, 29(2), 6-20.
- Bygnes, S. (2008). Interviewing people-oriented elites *Eurosphere Online Working paper series nr. 10*: http://eurospheres.org/files/2010/08/Eurosphere_Working_Paper_10_Bygnes.pdf.
- Caplan, N. (1979). The two-communities theory and knowledge utilization. *American Behavioral Scientist*, 22(2), 459-470.
- Carden, F. (2004). Issues in assessing the policy influence of research. *International Social Science Journal*, 56(179), 135-151.
- Carrabine, E., Iganski, P., Lee, M., Plummer, K., & South, N. (2004). *Criminology: A sociological introduction* New York: Routledge.

- Carrabine, E., Iganski, P., Lee, M., Plummer, K., & South, N. (2009). *Criminology: A Sociological Introduction*. London: Routledge.
- Cartuyvels, Y., Delpérée, F., & Delwit, P. (1997). *L'affaire Dutroux: la Belgique malade de son système*. Bruxelles: Complexe.
- Cartuyvels, Y., & Hebberecht, P. (2002). The Belgian Federal Security and Crime Prevention Policy in the 1990s. In P. Hebberecht & D. Duprez (Eds.), *The prevention and security policies in Europe* (pp. 15-49). Brussel: VUB Press.
- Carvalho, A. (2007). Ideological cultures and media discourses on scientific knowledge: re-reading news on climate change. *Public Understanding of Science*, 16(2), 223-243.
- Carvalho, A. (2008). Media(ted) discourse and society: Rethinking the framework of Critical Discourse Analysis. *Journalism Studies*, 9(2), 161-177.
- Casey, D., Lawless, J., Wall, P. (2010). A tale of two crises: the Belgian and Irish dioxin contamination incidents. *British Food Journal*, 112(10), 1077-1091.
- Casselma, J., De Schepper, P., & Nuyens, Y. (1971). *Drugs: middelen, mensen, samenleving*. Antwerpen: Nederlandsche Boekhandel.
- Casselma, J., Cooreman, G., De Wijs-Koppen, O., & Prove, W. (1984). *Jongeren en drugs andere dan alcohol: gebruik van tabak, psychofarmaca en illegale drugs bij leerlingen uit het secundair onderwijs*. Deventer: Van Loghum Slaterus.
- Cel Gezondheidsbeleid Drugs. (2002). *Activiteitenrapport 2002 van de Cel Gezondheidsbeleid Drugs*. Brussel: Cel Gezondheidsbeleid Drugs.
- Cesoni, M. L. (2008). Drug use and possession: the criminalisation-decriminalisation equation. *Crime Prevention*, 7(2), 1-17.
- Chan, J. (1995). Systematically distorted communication? Criminological knowledge, media representation and public policy. *Australian and New Zealand Journal of Criminology*, 28(1), 23-30.
- Chan, J. (2000). Globalization, Reflexivity and the Practice of Criminology. *Australian & New Zealand Journal of Criminology*, 33(2), 118-135.
- Chancer, L., & McLaughlin, E. (2007). Public criminologies: Diverse perspectives on academia and policy. *Theoretical Criminology*, 11(2), 155-173.
- Chari, R., Hogan, J., & Murphy, G. (2010). *Regulating lobbying: a global comparison*. Manchester: Manchester University Press.
- Charlier, C., & Plomteux, G. (1998). Alcohol, drugs, medication and highway safety in Belgium. Belgian Toxicology and Trauma Study Research Group. *Revue Médical de Liège*, 53(1), 25-28.
- Cherney, A., & McGee, T. R. (2011). Utilization of social science research: Results of a pilot study among Australian sociologists and criminologists. *Journal of Sociology*, 47(2), 144-162.
- Christiaensen, S. (1993). Adolphe Prins 1845 - 1919. In C. Fijnaut (Ed.), *Gestalten uit het verleden* (pp. 112-121). Brussel: Kluwer rechtswetenschappen.
- Christiaensen, S., & Goethals, J. (Eds.). (1994). *De illegale drugsgebruiker tussen strafrechtspleging en hulpverlening*. Leuven: Acco.

- Clear, T. R. (2010). Policy and evidence: the challenge to the American Society of Criminology: 2009 presidential address to the American Society of Criminology. *Criminology*, 48(1), 1-25.
- Cochrane, A. (1998). Illusions of power: interviewing local elites. *Environment and Planning*, 30(12), 2121-2132.
- Cohen, M. D., March, J. G., & Olsen, J. P. (1972). A garbage can model of organizational choice. *Administrative Science Quarterly*, 17(1), 1-25.
- Cohen, P., & Sas, A. (1997). Cannabis use, a stepping stone to other drugs? The case of Amsterdam. In L. Bollinger (Ed.), *Cannabis Science / Cannabis Wissenschaft. From prohibition to human right / Von der Prohibition zum Recht auf Genu* (pp. 49-82). Frankfurt am Main: Peter Lang Eurpäischer Verlag der Wissenschafte.
- Cohen, S. (1972). *Folk devils and moral panics: The creation of the Mods and Rockers*. London: MacGibbon and Kee.
- Colman, C. (2009). Evaluatie twee jaar Proefzorg. *Drugvrij Therapeutisch programma: De Kiem*, 17(1), 3-6.
- Colman, C., De Ruyver, B., Vander Laenen, F., Vanderplasschen, W., Broeckaert, E., De Keulenaer, S. & Thomaes, S. (2011). *De drugbehandelingskamer: een andere manier van afhandelen. Het proefproject geëvalueerd*. Antwerpen: Maklu.
- Condit, C. (2004). Science reporting to the public: Does the message get twisted? *Canadian Medical Association Journal*, 170(9), 1415-1416.
- Conti, J., & O'Neil, M. (2007). Studying power: qualitative methods and the global elite. *Qualitative Research*, 7(1), 63-82.
- Coomber, R., Morris, C., & Dunn, L. (2000). How the media do drugs: quality control and the reporting of drug issues in the UK print media. *International Journal of Drug Policy*, 11(3), 217-225.
- Corbin, J., & Strauss, A. L. (2008). *Basics of Qualitative research: Techniques and Procedures for Developing Grounded Theory*. Los Angeles: Sage.
- Creswell, J. W. (2009). *Research design: Qualitative, Quantitative and Mixed Methods Approaches (third edition)*. Thousand Oaks: Sage publication.
- Cross, M., Henke, R., Oberknezev, P., & Poulias, K. (2000). *Building bridges. Towards effective means of linking scientific research and public policy: Migrants in European cities. An exploratory survey in 10 European countries by Metropolis International (European Arm) for the European Commission*. Utrecht: Netherlands School for Social and Economic Policy Research (AWSB).
- Curran, J., Grimshaw, J. M., Hayden, J. A., & Campbell, B. (2011). Knowledge translation research: the science of moving research into policy and practice. *Journal of continuing education in the health professions*, 31(3), 174-180.
- Currie, E. (2007). Against marginality. Arguments for a public criminology. *Theoretical Criminology*, 11(2), 175-190.
- CVP-Kamerfractie. (1997) *Synthesenota een drugsbeleid vanuit een geïntegreerd perspectief. Voorstellen tot amendement*. Brussel: CVP-Kamerfractie.
- Dabrowska, K., & Bujalski, M. (2013). The Legal Highs Problem in the Polish Printed Media-Actors, Claims, and Its Hidden Meanings. *Substance use & Misuse*, 48(1), 31-40.

- Daems, T. (2008). *Making sense of penal change*. Oxford: Oxford University Press.
- Daems, T. (2011). Public Criminology? *Panopticon*, 32(2), 105-111.
- Dangreau, J. & Serlippens, A. (2007). Drugwetgeving. *NJW*, 164, 482-489.
- Dangreau, J., Deben, L., De Greve, K., Delbrouck, L., De Waele, H., Lambrechts, M., Meese, J., Plets, I., Rogiers, I., Serlippens, A., Van Besien, L., Vander Laenen, F., Vanderplasschen, W., Van Hende, F., Van Lishout, E., Van Malderen, S. & Van Steenbrugge, W. (2012). *Larcier wetten – Drugwetgeving*. Brussel: Larcier.
- Daniels, K., & Lewin, S. (2008). Translating research into maternal health care policy: a qualitative case study of the use of evidence in policies for the treatment of eclampsia and pre-eclampsia in South Africa. *Health Research Policy and Systems*, 8(12), 1-13.
- Davies, J. B. (1997). *Drugspeak. The analysis of drug discourse*. Amsterdam: Harwood academic publishers.
- Davies, P. (2004). *Is evidence-based government possible? Jerry Lee Lecture 2004*. Paper presented at the Fourth Annual Campbell Collaboration Colloquium, Washington DC.
- Davis, P., & Howden-Chapman, P. (1996). Translating research findings into health policy. *Social Science & Medicine*, 43(5), 865-872.
- De Biasio, Y., De Ruyver, B., & Schleiper, A. (Eds.). (2003). *Drugbeleid: Belgisch institutioneel bestel, harm reduction* Antwerpen: Maklu.
- De Haan, W. J. M. (2008). Publieke criminologie: een criminologie die ertoe doet? *Delikt en delinkwent*, 10(9), 1051-1060.
- De Maere, W. (2003). *Rapport evaluatie onderzoek spuitenruil Vlaanderen 2002*. Antwerpen: Free Clinic.
- De Man, F. (2001). *Aandacht tegen de drugsprofeten*. Antwerpen: Vlaams Blok.
- De Pauw, W., & Lempereur, N. (1990). *Drugs in België: de afhandeling van drugszaken voor de rechtbanken van eerste aanleg*. Brugge: Die Keure.
- De Ruyver, B. (1988). *De strafrechtelijke politiek gevoerd onder de socialistische Ministers van Justitie E. Vandervelde, P. Vermeulen en A. Vranckx*. Antwerpen: Kluwer.
- De Ruyver, B., Van Daele, L., & Coolsaet, M. (1991). *Onderzoek naar het gebruik van alcohol, medicatie, illegale drugs en tabak bij adolescenten tussen 14 en 19 jaar in de Provincie West-Vlaanderen*. Gent: Academia Press.
- De Ruyver, B., Vermeulen, G., Franck, P., & Van Daele, L. (1992). *Kansarmoede, druggebruik, criminaliteit*. Gent: Universiteit Gent.
- De Ruyver, B., Van Bouchautte, J., & Reisinger, M. (1993). *Les traitements de substitution à la drogue*. Bruxelles: Fondation Roi Baudouin.
- De Ruyver, B., Vermeulen, G., De Leenheer, A., & Van Der Straten Waillet, G. (Eds.). (1995). *Op weg naar een geïntegreerd drugbeleid in België?* Antwerpen: Maklu.
- De Ruyver, B., Vermeulen, G., De Leenheer, A., & Marchandise, T. (Eds.). (1996). *Veiligheids- en medisch-sociale benadering: complementair of tegengesteld?* Antwerpen: Maklu.

- De Ruyver, B. (1997). *Synthese: een drugsbeleid vanuit een geïntegreerd perspectief*. Brussel: Parlementaire Werkgroep Drugs.
- De Ruyver, B., Hap, M., Marchandise, T., Schleiper, A., & Vermeulen, G. (Eds.). (1997). *Drugbeleid in 2000 congresboek*. Antwerpen: Maklu.
- De Ruyver, B., Casselman, J., Meuwissen, K., Bullens, F., & Van Impe, K. (2000). *Het Belgisch drugbeleid anno 2000: een stand van zaken drie jaar na de aanbevelingen van de parlementaire werkgroep drugs*. Gent: Onderzoeksgroep Drugbeleid, Strafrechtelijk beleid en Internationale criminaliteit.
- De Ruyver, B., Vermeulen, G., & Vander Beken, T. (2002). *Multidisciplinary drug policies and the UN drug treaties*. Antwerpen: Maklu.
- De Ruyver, B., Pelc, I., Casselman, J., Geenens, K., Nicaise, P., From, L., Vander Laenen, F., Meuwissen, K. and Van Dijck, A. (2004). *Drugbeleid in cijfers*. Gent: Academia Press.
- De Ruyver, B. (2005). Jo Casselman, een pionier van de wetenschappelijke onderbouw van het drugbeleid. In J. H. Goethals, F. Hutsebaut & G. Vervaeke (Ed.), *Gerechtelijke geestelijke gezondheidszorg: wetenschap, beleid en praktijk: liber amicorum Joris Casselman* (pp. 251-258). Leuven: Universitaire Pers Leuven.
- De Ruyver, B., Pelc, I., De Graeve, D., Bucquoye, A., Cornelis, L., & Nicaise, P. (2007). *Drugs in cijfers II: studie naar betrokken actoren, overheidsuitgaven en bereikte doelgroepen*. Gent: Academia Press.
- De Ruyver, B., Colman, C., De Wree, E., Vander Laenen, F., Reynders, D., Van Liempt, A., & De Pauw, W. (2008a). *Een brug tussen justitie en de drughulpverlening. Een evaluatie van het proefzorgproject*. Antwerpen: Maklu.
- De Ruyver, B., Lemaître, A., Born, M., Colman, C., Pirenne, C., & Vandam, L. (2008b). *Definiëring en meting van druggerelateerde criminaliteit*. Gent: Academia Press.
- De Ruyver, B., Lemaître, A., & Schoenaers, F. (2009). *Onderzoek naar essentiële en bijkomende randvoorwaarden voor interactie justitie en drughulpverlening (JUSTHULP). Etude des conditions nécessaires et accessoires à l'optimisation de l'interaction entre la justice et le secteur de l'aide sociale et des soins (JUSTHULP)*. Gent: Academia Press.
- De Ruyver, B., Lemaître, A., Born, M., Ponsaers, P., Pauwels, L., Vander Laenen, F., Vanderplasschen, W., Van Malderen, S., Chapeau, M., Vindevogel, S., Cammaert, F., Moës, A., Devue, A. & Vandam L. (2009). *Do's and don'ts in een integraal en geïntegreerd drugbeleid - Faire et ne pas faire dans le cadre d'une politique intégrale et intégrée sur les drogues*. Gent: Academia Press.
- De Ruyver, B., Ponsaers, P., Vermeulen, G., & Vander Beken, T. (Eds.). (2010). *Strafrechtshandhaving in België en Nederland: uitgave ter gelegenheid van het eredoctoraat toegekend door de Universiteit Gent aan Prof. dr. Cyrille Fijnaut*. Antwerpen: Apeldoorn.
- De Ruyver, B., Vander Laenen, F. & Eelen, S. (2012). The long road to an integral and integrated policy in Belgium. In R. Muscat, F. & B. Pike (Ed.), *Reflections on the concept of coherency for a policy on psychoactive substances and beyond* (pp. 33-42). Strasbourg Cedex: Council of Europe Publishing.
- Decorte, T., Kaminski, D., Muys, M., & Slingeneyer, T. (2005). *Problematisch gebruik van (illegale) drugs: onderzoek naar de operationalisering van het concept in een wettelijke context*. Gent: Academia Press.

- Decorte, T., Mortelmans, D., Tieberghien, J. & De Moor, S. (2009). *Drug use: overview of general population surveys in Europe*. Lisbon: EMCDDA.
- Decorte, T., & Zaitch, D. (Eds.). (2010). *Kwalitatieve methoden en technieken in de criminologie*. Leuven: Acco.
- Decorte, T., Potter, G., & Bouchard, M. (Eds.). (2011). *World wide weed. Global trends in cannabis cultivation and its control*. London: Ashgate Publishers.
- Decorte, T., De Grauwe, P., & Tytgat, J. (2014). Het Belgisch cannabisbeleid maakt zijn doelstellingen niet waar. *Panopticon*, 35(2), 151-155.
- Deflem, M. (2005). Public Sociology, Hot Dogs, Apple Pie, and Chevrolet. *The Journal of Public and Professional Sociology*, 1(1), 4.
- Demaret, I., Litran, G., Magoga, C., Deblire, C., De Roubaix, J., Quertemont, E., Van Caillie, D., Dubois, N., Lemaître, A. and. Anseau, M. (2013). *Projet TADAM: rapport final 2007-2013: recherche subventionnée par la Ministre fédérale de la Santé publique, l'Université de Liège et la Ville de Liège*. Liège: Université de Liège.
- Denzin, N. K., & Lincoln, Y. S. (Eds.). (1994). *Handbook of qualitative research*. Thousand Oaks: Sage.
- Denzin, N. K., & Lincoln, Y. S. (2003). *Strategies of qualitative inquiry*. London: Sage.
- Denzin, N. K., & Giardina, M. D. (Eds.). (2008). *Qualitative inquiry and the politics of evidence*. California: Walnut Creek.
- Devos, C. (2006). *De kleermakers en de keizer: inleiding tot politiek en politieke wetenschappen*. Gent: Academia Press.
- Devos, C., Rommel, J., Lannoo, S., & Van Liefferinge, H. (2009). *Politieke besluitvorming*. Gent: Academia Press.
- Devos, C., Rommel, J., Lannoo, S., Van Liefferinge, H., & De Wilde, S. (2010). *Inleiding in de politieke besluitvormingstheorie*. Gent: Academia Press.
- Devroe, E. (2002). *De ontmoeting tussen criminologisch onderzoek en strafrechtelijk beleid*. Brussel: Politeia.
- Devroe, E., Deschamps, L., & Hannes, K. (2008). Evidence-based beleidsvoering in de kijker: twee Belgische initiatieven. *Panopticon*, 6(1), 59-66.
- Devroe, E. (2010). Wetenschap voor beleid of beleid voor wetenschap? Een analyse van 15 jaar politie en justitie onderzoek in België. *Panopticon*, 31(3), 11-39.
- Dewachter, W. (2001). *De mythe van de parlementaire democratie: een Belgische analyse*. Leuven: Acco.
- Dienst Strafrechtelijk Beleid. (1996). *Jaarverslag 1995-1996*. Brussel: Ministerie van Justitie.
- Dingelstad, D., Godsen, R., Martin, B., & Vakas, N. (1996). The social construction of drug debates. *Social Science & Medicine*, 43(12), 1829-1838.
- Dissanayake, W. (1992). Knowledge, culture, and power: some theoretical issues related to the agricultural knowledge and information system framework. *Knowledge and Policy*, 5(1), 65-77.

- Dixon, D. (1995). Crime, Criminology and Public Policy. *Australian & New Zealand Journal of Criminology*, 28(1), 1-5.
- Dobrow, M. J., Goel, V., & Upshur, R. E. G. (2004). Evidence-based health policy: context and utilisation. *Social Science & Medicine*, 58(11), 207-217.
- Dolowitz, D., & Marsh, D. (1996). Who Learns What from Whom: a Review of the Policy Transfer Literature. *Political studies*, 44(2), 343-357.
- Duke, K. (2001). Evidence-based policy making? The interplay between research and the development of prison drugs policy. *Criminal Justice*, 1(3), 277-300.
- Duke, K. (2002). Getting Beyond the 'Official Line': Reflections on Dilemmas of Access, Knowledge and Power in Researching Policy Networks. *Journal of Social Policy*, 31(1), 39-59.
- Duke, K. (2003). *Drugs, Prisons and Policy making*. Basingstoke: Palgrave.
- Duke, K. & Thom, B. (2014). The role of evidence and the expert in contemporary processes of governance: the case of opioid substitution treatment policy in England. *International Journal of Drug Policy*, 25(5), 964-971.
- Durieux, H. (2002). Drugsbeleid: normalisering en gedogen in Nederland en België. *De Juristenkrant*, 50, 16-17.
- Dutch Government (2000). *Het Pad naar de Achterdeur [Pathways to the back door]*. Amsterdam: Ministerie van Justitie.
- Edwards, G., Strang, J., & Jaffe, J. H. (Eds.). (1993). *Drugs, Alcohol, and Tobacco. Making the science and policy connections*. New York: Oxford University Press.
- Edwards, C. & Galla, M. (2014). Governance in EU illicit drug policy. *International Journal of Drug Policy*, 25(5), 942-947.
- Eisenbach-Stangl, I., Moskalewicz, J., & Thom, B. (Eds.). (2009). *Two worlds of drug consumption in late modern societies*. Surrey: Ashgate Publishing Limited.
- El-Jardall, F., Lavis, J. N., Ataya, N., & Jarnal, D. (2012). Use of health systems and policy research evidence in the health policymaking in eastern Mediterranean countries: views and practices of researchers. *Implementation Science*, 7(2), 1-16.
- Elliott, H., & Popay, J. (2000). How are policy makers using evidence? Models of research utilisation and local NHS policy making. *Journal of Epidemiology Community Health*, 54(6), 461-468.
- EMCDDA. (1995). *Extended annual report on the state of the drugs problem in the European Union*. Lisbon: EMCDDA.
- EMCDDA. (1997). *Extended annual report on the state of the drugs problem in the European Union*. Lisbon: EMCDDA.
- EMCDDA. (1999). *1999 Extended annual report on the state of the drugs problem in the European Union*. Lisbon: EMCDDA.
- EMCDDA. (2000). *2000 Annual report on the state of the drugs problem in the European Union*. Lisbon: EMCDDA.
- EMCDDA. (2008). *Selected Issue 2008. National drug-related research in Europe*. Lisbon: EMCDDA.

- EMCDDA. (2013). *Drug policy advocacy organisations in Europe*. Luxembourg: Publications Office of the European Union.
- Engbergesen, G. B. M. (2008). Criminologie in meervoud. *Tijdschrift voor Criminologie*, 50(3), 264-272.
- Entman, R. (1989). How the Media Affect What People Think: An Information Processing Approach. *The Journal of Politics*, 51(2), 347-370.
- Epstein, S. (1996). *Impure Science: AIDS Activism and the Politics of Science*. Berkeley: University of California Press.
- Erickson, P. G. (1998). Neglected and rejected: a case study of the impact of social research on Canadian Drug policy. *Canadian Journal of Sociology*, 23(2), 263-280.
- Ericson, R. (2005). Publicizing Sociology. *British Journal of Sociology*, 56(3), 365-372.
- Estabrooks, C. A., Derksen, L., Winther, C., Lavis, J. N., Scott, S. D., Wallin, L., & Profetto-McGrath, J. (2008). The intellectual structure and substance of the knowledge utilization field: a longitudinal author co-citation analysis, 1945 to 2004. *Implementation Science*, 3(49), 1-22.
- European Commission (1999). *European Action Plan to Combat Drugs 2000-2004*. Brussels: European Commission.
- European Union (1990). *Convention Implementing the Schengen Agreement of 14 June 1985 between the Governments of the States of the Benelux Economic Union, the Federal Republic of Germany and the French Republic, on the Gradual Abolition of Checks at their Common Borders ("Schengen Implementation Agreement")*, <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=CELEX:42000A0922%2802%29:en:HTML>
- European Union (1992). *Treaty on European Union*. Provisions amending the treaty establishing the European economic community with a view to establishing the European Community. Maastricht: European Union.
- European Union (1997). *The Treaty of Amsterdam amending the Treaty on European Union, the Treaties establishing the European Communities and certain related Acts*. Amsterdam: European Union.
- Fairclough, I., & Fairclough, N. (2012). *Political discourse analysis. A method for advanced students*. Abingdon: Routledge.
- Fairclough, N. (1992). *Discourse and social change*. Cambridge: Polity Press.
- Fairclough, N. (1998). Political discourse in the media: an analytical framework. In A. Bell & P. Garrett (Eds.), *Approaches to media discourse* (pp. 142-162). London: Blackwell.
- Fairclough, N. (2003). *Analysing discourse. Textual analysis for social research*. New York: Taylor and Francis Group.
- Farquharson, K. (2005). A Different Kind of Snowball: Identifying Key Policymakers. *International Journal of Social Research Methodology*, 8(4), 345-353.
- Farrington, D. (2006). The Maryland Scientific methods scale. In D. Farrington, D. L. Mackenzie, L. Sherman, & B. C. Welsh (Eds.), *Evidence-based crime prevention* (pp. 13-21). New York: Routledge.
- Farrington, D., Mackenzie, D. L., Sherman, L., & Welsh, B. C. (Eds.). (2006). *Evidence-based crime prevention*. New York: Routledge.

- Federal Government. (1992). *Regeerakkoord Federale Regering*. Brussel: Federale Regering.
- Federal Government. (1999). *Regeringsverklaring Federale Regering*. Brussel: Federale Regering.
- Federal Government. (2001a). *Beleidsnota van de Federale Regering in verband met de drugproblematiek [Federal Drug Policy Note]*. Brussel: Federale Regering.
- Federal Government. (2001b). Vragen en antwoorden over het nieuwe beleid van de Regering. Brussel: Federale Regering.
- Fichtelberg, A., & Kupchik, A. (2011). Democratic Criminology: The Place of Criminological Expertise in the Public Sphere. *Journal of Theoretical and Philosophical Criminology*, 3(1), 57-88.
- Fijnaut, C., Huyse, L., & Verstraeten, R. (1998). *Parlementaire onderzoekscommissies: mogelijkheden, grenzen en risico's*. Leuven: Van Halewyck.
- Fijnaut, C., & De Ruyver, B. (2008). *Voor een gezamenlijke beheersing van de drugsgerelateerde criminaliteit in de Euregio Maas-Rijn*. Maastricht: Euregio Maas-Rijn.
- Fijnaut, C., & De Ruyver, B. (2014). *De derde weg. Een pleidooi voor een evenwichtig cannabisbeleid*. Antwerpen: Intersentia.
- Fitzgerald, J. (2005). The Australian National Council on Drugs (ANCD) and governance in the Australian drug policy arena. *Contemporary drug problems*, 32(2), 259-293.
- Flitcroft, K., Gillespie, J., Salkeld, G., Carter, S., & Trevena, L. (2011). Getting evidence into policy: The need for deliberative strategies? *Social Science & Medicine*, 72(7), 1039-1046.
- Foucault, M. (1972). *The Archaeology of Knowledge*. London: Routledge.
- Foucault, M. (1976). Truth and Power. In P. Rabinow (Ed.), *Essential Works of Foucault, Volume 3* (pp. 111-133). New York: Free Press.
- Foucault, M. (1981). So is it important to think? In J. D. Faubion (Ed.), *Power: Essential Works of Foucault 1954-1984* (pp. 454-458). London: Penguin.
- Fountain, J. (Ed.). (2000). *Understanding and responding to drug use: the role of qualitative research*. Luxembourg: Office for Official Publications of the European Communities.
- Fountain, J., & Korf, D. (Eds.). (2007). *Drugs in society. European perspectives*. Oxon: Radcliffe Publishing Ltd.
- Fraser, S., Hopwood, M., Treloar, C., & Brener, L. (2004). Needle fictions: medical constructions of needle fixation and the injecting drug user. *Addiction Research & Theory*, 12(1), 67-76.
- Fraser, S., & Moore, D. (2011). Governing through problems: The formulation of policy on amphetamine-type stimulants (ATS) in Australia. *International Journal of Drug Policy*, 22(6), 498-506.
- Freiberg, A., & Carson, W. G. (2010). The Limits to Evidence-Based Policy: Evidence, Emotion and Criminal Justice. *The Australian Journal of Public Administration*, 69(2), 152-164.
- Frogner, A. & Aish A. (eds.) (2003). *Élections la rupture? Le comportement des Belges face aux élections de 1999*. Bruxelles: De Boeck Université.
- Gagliardi, A. R., Fraser, N., Wright, F. C., Lemieux-Charles, L., & Davis, D. (2008). Fostering knowledge exchange between researchers and decision-makers: exploring the effectiveness of a mixed-methods approach. *Health Policy*, 86(1), 53-63.

- Garland, D., & Sparks, R. (2000). Criminology, Social Theory and the Challenge of Our Times. In D. Garland & R. Sparks (Eds.), *Criminology and Social Theory* (pp. 1-22). Oxford: Oxford University Press.
- Garland, D. (2001). *The culture of control: crime and social order in contemporary society*. Oxford: Oxford university press.
- Garland, D. (2011). Criminology's Place in the Academic Field. In M. Bosworth & C. Hoyle (Eds.), *What is Criminology?* (pp. 298-317). Oxford: Oxford University Press.
- Garretsen, H. F. L., Brouwersa, E. P. M., & Van de Goora, I. A. M. (2010). Towards evidence-based policy regarding drugs and mental health. *Mental Health and Substance Use*, 3(1), 4-9.
- Geenens, K., Vanderplasschen, W., Broekaert, E., & De Ruyver, B. (2005). *Tussen droom en daad: implementatie van case management voor druggebruikers binnen de hulpverlening en justitie*. Gent: Academia Press.
- Geeroms, M. (Ed.). (1978). *Strafrechtsbedeling en wetenschappelijk onderzoek*. Gent: RUG. School voor Criminologie.
- Gelders, D., & Van Mierlo, J. (2004). Legalized or not? Poor public communication causes confusion over the new cannabis policy in Belgium. *Drugs: education, prevention and policy*, 11(2), 167-177.
- Gelders, D. (2006). *Tussen droom en daad. Communicatie over beleidsintenties door de overheid*. Brugge: Vanden Broele.
- Gelders, D., & Vander Laenen, F. (2007). 'Mr Police Officer, I thought cannabis was legal'—Introducing new policy regarding cannabis in Belgium: A story of good intentions and Babel. *Drugs: education, prevention and policy*, 14(2), 103-116.
- Gerring, J. (2007). *Case Study Research. Principles and practices*. New York: Cambridge University Press.
- Ginsburg, M. B., & Gorostiaga, J. M. (2001). Relationships between Theorists/Researchers and Policy Makers Practitioners? Rethinking the Two Cultures and the Possibility of Dialogue. *Comparative Education Review*, 45(2), 173-196.
- Global Commission on Drug Policy. (2011). *War on drugs. Report of the Global Commission on Drug Policy*. New York: Global Commission on Drug Policy.
- Goethals, J., Hutsebaut, F., & Vervaeke, G. (Eds.). (2005). *Gerechtigke geestelijke gezondheidszorg: wetenschap, beleid en praktijk*. Leuven: Universitaire Pers Leuven.
- Golafshani, N. (2003). Understanding Reliability and Validity in Qualitative Research. *The Qualitative Report*, 8(4), 597-607.
- Golden, B. R. (1992). The Past Is the Past-Or Is It? The Use of Retrospective Accounts as Indicators of past Strategy. *The Academy of Management Journal*, 35(4), 848-860.
- Goldfeld, S. (2010). The art and science of influence: reflections from the boundary. In G. Bammer, A. Michaux, & A. Sanson (Eds.), *Bridging the 'know-do' Gap: Knowledge Brokering to Improve Child Wellbeing* (pp.77-90). Canberra: ANU E Press.
- Goldson, B. (2006). Rethinking Youth Justice: Comparative Analysis, International Human Rights and Research Evidence. *Youth Justice August*, 6(2), 91-106.

- Goldson, B. (2010). The sleep of (criminological) reason: knowledge-policy rupture and New Labour's youth justice legacy. *Criminology and Criminal Justice*, 10(1), 155-178.
- Goode, E., & Ben-Yehuda, N. (1994). *Moral Panics. The social construction of deviance*. Cambridge: Blackwell publishers.
- Gordon, C. (1991). Governmental rationality: An introduction. In G. Burchell & M. Foucault (Eds.), *The Foucault effect: studies in governmentality* London: Harvester Wheatsheaf.
- Goyvaerts, G., Van Hal, G., & Teugels, P. (1992). *Onderzoek naar alcohol-, tabak-, geneesmiddelen- en illegaal druggebruik bij jongeren van het secundair dagonderwijs in Groot-Antwerpen, gedurende de periode januari-mei*. Antwerpen: SODA.
- Green, D. (2008). *When Children Kill Children: Penal Populism and Political Culture*. Oxford: Oxford University Press.
- Greenberg, D. H., & Mandell, M. B. (2007). Research utilization in policymaking: A tale of two series (of social experiments). *Journal of Policy Analysis and Management*, 10(4), 633-656.
- Gregrich, J. R. (2003). A note to researchers: communicating science to policy makers and practitioners. *Journal of Substance Abuse Treatment*, 25(3), 233-237.
- Griffiths, P., & McKetin, R. (2005). A Common Language for a Common Problem: The Developing Role of Drug Epidemiology in a Global Context. In Z. Sloboda (Ed.), *Epidemiology of drug abuse* (pp. 161-176). New York: Springer.
- Groombridge, N. (2007). Criminologists Say...: An Analysis of UK National Press Coverage of Criminology and Criminologists and a Contribution to the Debate on "Public Criminology". *The Howard Journal*, 46(5), 459-475.
- Guba, E. G., & Lincoln, Y. S. (1994). Competing paradigms in Qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (pp. 105-117). Thousand Oaks: Sage.
- Guillain, C., & Marchand, C. (1998). La réglementation du cannabis à la lumière des conventions internationales. In B. De Ruyver (Ed.), *La politique en matière de drogues en Belgique: développements actuels* (pp. 299-318). Bruxelles: Bruylant-Maklu.
- Guillain, C. (2003). *La politique pénale du gouvernement arc-en-ciel en matière de drogues*. Bruxelles: CRISP.
- Guillain, C. (2009). Les facteurs de criminalisation et les résistances à la décriminalisation de l'usage des drogues en Belgique. Du contrôle international aux préoccupations sécuritaires *Revue interdisciplinaire d'études juridiques*, 63(2), 119-132.
- Gusfield, J. R. (1975). The (F)Utility of Knowledge? The Relation of Social Science to Public Policy toward Drugs. *Annals of the American Academy of Political and Social Science*, 417(1), 1-15.
- Guston, D. H. (2000). *Between politics and science. Assuring the integrity and productivity of research*. Cambridge: Cambridge University Press.
- Haas, P. (1992). Introduction: epistemic communities and international policy coordination. *International Organization*, 14(1), 1-36.
- Haines, A., Kuruwilla, S., & Borchert, M. (2004). Bridging the implementation gap between knowledge and action for health. *Bulletin of World Health Organization*, 82(10), 724-731.
- Hajer, M. (1995). *The politics of environmental discourse: Ecological modernization and the policy process*. Oxford: Clarendon Press.

- Hall, W. (2004). The contribution of research to Australian policy responses to heroin dependence 1990-2001: a personal retrospection. *Addiction*, 99(8), 560-569.
- Hall, W. (2008). The contribution of research to the development of national cannabis policy in Australia. *Addiction*, 103(5), 712-720.
- Hammersley, M. (2005). Is the evidence-based practice movement doing more good than harm? Reflections on Iain Chalmers' case for research-based policy making and practice. *Evidence & Policy*, 1(1), 85-100.
- Hammersley, M., & Gomm, R. (2008). Assessing the radical critique of interviews. In M. Hammersley (Ed.), *Questioning Qualitative Inquiry: Critical Essays* (pp. 89-100). Thousand Oaks, CA: Sage.
- Hammersley, M. (2013). *The myth of research-based policy & practice*. London: Sage.
- Hand. Kamer* 1920-1921, 21 december 1920, 108/1.
- Hand. Kamer* 1992-1993, 30 april 1993, 989/1.
- Hand. Kamer* 1995-1996, 13 november 1995, 230/1.
- Hand. Senaat* 1993-1994, 30 november 1995, 871/1.
- Hand. Kamer* 1996-1997, 24 juni 1997, 175.
- Hand. Kamer* 1996-1997, 26 juni 1997, 178.
- Hand. Kamer* 1996-1997, 22 september 1997, 393.
- Hand. Senaat* 1997-1998, 7 mei 1998, 1-183.
- Hand. Kamer* 1997-1998, 22 maart 1999, 774.
- Hand. Kamer* 1998-1999, 15 juli 1999, 003.
- Hand. Kamer* 1998-1999, 16 juli 1999, 005.
- Hand. Kamer* 1999-2000, 12 november 1999, 198/13.
- Hand. Kamer* 1999-2000, 15 december 1999, 0025/037.
- Hand. Kamer* 1999-2000, 15 december 1999, COM 074.
- Hand. Kamer* 1999-2000, 25 januari 2000, COM 094.
- Hand. Kamer* 1999-2000, 13 juni 2000, 716/1.
- Hand. Kamer* 1999-2000, 15 juni 2000, 061.
- Hand. Kamer* 1999-2000, 4 juli 2000, COM 255.
- Hand. Kamer* 1999-2000, 9 november 2000, 081.
- Hand. Kamer* 1999-2000, 16 november 2000, 083.
- Hand. Kamer* 2000-2001, 7 december 2000, 086.
- Hand. Kamer* 2000-2001, 19 december 2000, COM 338.

- Hand. Kamer* 2000-2001, 11 januari 2001, 102.
- Hand. Kamer* 2000-2001, 30 januari 2001, 0025/172.
- Hand. Kamer* 2000-2001, 30 januari 2001, 106.
- Hand. Kamer* 2000-2001, 31 januari 2001, COM 373.
- Hand. Senaat* 2000-2001, 1 februari 2001, 2-92.
- Hand. Kamer* 2000-2001, 6 februari 2001, COM 376.
- Hand. Kamer* 2000-2001, 8 februari 2001, 108.
- Hand. Senaat* 2000-2001, 8 februari 2001, 2-94.
- Hand. Kamer* 2000-2001, 13 februari 2001, COM 390.
- Hand. Senaat* 2000-2001, 15 februari 2001, 2-96.
- Hand. Kamer* 2000-2001, 20 februari 2001, COM 394.
- Hand. Senaat* 2000-2001, 22 februari, 2001, 2-98.
- Hand. Kamer* 2000-2001, 7 maart 2001, COM 410.
- Hand. Kamer* 2000-2001, 8 maart 2001, 112.
- Hand. Senaat* 2000-2001, 8 maart 2001, 2-100.
- Hand. Kamer* 2000-2001, 15 maart 2001, 114.
- Hand. Kamer* 2000-2001, 29 maart 2001, 119.
- Hand. Senaat* 2000-2001, 29 maart 2001, 2-104.
- Hand. Kamer* 2000-2001, 19 april 2001, 121.
- Hand. Kamer* 2000-2001, 17 mei 2001, 125.
- Hand. Senaat* 2000-2001, 17 mei 2001, 2-114.
- Hand. Kamer* 2000-2001, 31 mei 2001, 130.
- Hand. Senaat* 2000-2001, 31 mei 2001, 2-119.
- Hand. Kamer* 2000-2001, 7 juni 2001, 132.
- Hand. Kamer* 2000-2001, 3 juli 2001, 517.
- Hand. Kamer* 2000-2001, 19 juli 2001, 158.
- Hand. Kamer* 2000-2001, 23 oktober 2001 560.
- Hand. Senaat* 2001-2002, 6 december 2001, 2-162.
- Hand. Kamer* 2001-2002, 10 januari 2002, 197.
- Hand. Kamer* 2001-2002, 21 februari 2002, 208.
- Hand. Kamer* 2001-2002, 28 februari 2002, 210.

- Hand. Senaat 2001-2002*, 19 maart 2002, 2-51.
- Hand. Senaat 2001-2002*, 16 mei 2002, 2-204.
- Hand. Kamer 2001-2002*, 20 juli 2002, 260.
- Hand. Kamer 2002-2003*, 12 februari 2003, 325.
- Hand. Kamer 2002-2003*, 12 februari 2003, 326.
- Hand. Kamer 2002-2003*, 12 februari 2003, 327.
- Hand. Senaat 2002-2003*, 26 maart 2003, 2-278.
- Hanney, S., Gonzalez-Block, M., Buxton, M., & Kogan, M. (2003). The utilization of health research in policy-making: concepts, examples and methods of assessment. *Health Research Policy and Systems*, 1(1), 1-28.
- Hariga, F., Przuluki, L., & Van Lierde, J. (2002). *CESC: Echange de seringues à Charleroi. Evaluation de la 1ère année d'activités. Carnet du risque n°40*. Bruxelles: Modus Vivendi.
- Harries, U., Elliott, H., & Higgins, A. (1999). Evidence-based policy-making in the NHS: exploring the interface between research and the commissioning process. *Journal of Public Health Medicine*, 21(1), 29-36.
- Hartman, D. M., & Golub, A. (1999). The social construction of the crack epidemic in the print media. *Journal of Psychoactive Drugs*, 31(4), 423-433.
- Hartnoll, R. (2004). *Drugs and drug dependence: linking research, policy and practice*. Strasbourg: Council of Europe Publishing.
- Harvey, W. S. (2010). Methodological Approaches for Interviewing Elites. *Geography Compass*, 4(3), 193-205.
- Haynes, A. S., Gillespie, J., Derrick, G. E., Hall, W. D., Redman, S., Chapman, S., & Sturk, H. (2011a). Galvanizers, guides, champions and shields: the many ways that policy makers use public health researchers. *Milbank Quarterly*, 98(4), 564-598.
- Haynes, A. S., Derrick, G. E., Chapman, S., Redman, S., Hall, W. D., Gillespie, J., & Sturk, H. (2011b). From "our world" to the "real world": exploring the views and behaviour of policy-influential Australian public health researchers. *Social Science & Medicine*, 72(7), 1047-1055.
- Haynes, A. S., Derrick, G. E., Redman, S., Hall, W. D., Gillespie, J., Chapman, S., & Sturk, H. (2012). Identifying Trustworthy Experts: How Do Policymakers Find and Assess Public Health Researchers Worth Consulting or Collaborating With? *PLoS One*, 7(3), 1-8.
- Head, B. W. (2008). Three Lenses of Evidence-Based Policy. *Australian Journal of Public Administration*, 67(1), 1-11.
- Head, B. W. (2010). Reconsidering evidence-based policy: Key issues and challenges. *Policy and Society*, 29(2), 77-94.
- Hebberecht, P. (2002). De relatie theorie-onderzoek in de criminologie bekeken vanuit wetenschapsprogramma's in de criminologie. In K. Beyens, J. Goethals, P. Ponsaers, & G. Vervaeke (Eds.), *Criminologie in actie* (pp. 45-54). Brussel: Politeia.
- Hebberecht, P. (2004). Het Belgische preventie- en veiligheidsbeleid. *Justitiële verkenningen. De nieuwe veiligheidscultuur*, 30(7), 81-94.

- Hebberecht, P. (2009). *De 'verpaarsing' van de criminaliteitsbestrijding in België*. Brussel: VUBPress.
- Heclo, H. (1978). Issue Networks and the Executive Establishment. In A. King (Ed.), *The New American Political System* (pp. 87-124). Washington, DC: AEI.
- Henry, S., & Milovanovic, D. (1996). *Constitutive criminology. Beyond Post-modernism*. London: Sage Publications.
- Hertz, R., & Imber, J. B. (Eds.). (1995). *Studying elites using qualitative methods*. London: Sage Publications.
- Herzog, B., Gomez-Guardeno, E., Agullo-Calatayud, V., Aleixandre-Benavent, R., & Valderrame-Zurian, J. (2009). Discourses on Drugs and Immigration: The Social Construction of a Problem. *Forum: Qualitative Social Research*, 10(1), 7.
- Hijmans, E., Pleijter, A., & Wester, F. (2003). Covering Scientific Research in Dutch Newspapers. *Science Communication*, 25(2), 153-176.
- Hird, J. A. (2009). The study and use of policy research in state legislatures. *International Regional Science Review*, 32(4), 523-535.
- Hodder, I. (2003). The interpretation of documents and material culture. In N. K. Denzin & Y. S. Lincoln (Eds.), *Collecting and interpreting qualitative materials* (pp. 393-402). London: Sage publications.
- Hoge Gezondheidsraad. (2000). *Follow-up van de conferentie over de methadone consensus van 1994. Evaluatie van de aanbevelingen geformuleerd in 1994 en aanvullende voorstellen*. Brussel: Hoge Gezondheidsraad.
- Hope, T., & Walters, R. (2008). *Critical Thinking About the Uses of Research. Evidence Based Research*. London: Centre For Crime and Justice Studies.
- Hoppe, R. (1999). Policy analysis, science and politics: from 'speaking truth to power' to 'making sense together'. *Science and public policy*, 26(3), 201-210.
- Hoppe, R. (2005). Rethinking the science-policy nexus: from knowledge utilization and science technology studies to types of boundary arrangements. *Poiesis & Praxis*, 3(3), 199-215.
- Hoppe, R. (2009). Scientific advice and public policy: expert advisers' and policymakers' discourses on boundary work. *Poiesis & Praxis*, 6(3), 235-263.
- Howlett, M., & Ramesh, M. (1995). *Studying Public Policy: Policy Cycles and Policy Subsystems*. Toronto: Oxford University Press.
- Huber, G. P., & Power, D. J. (1985). Retrospective Reports of Strategic-level Managers. *Strategic Management Journal*, 6(2), 171-180.
- Huberman, M. (1994). Research utilization: The state of the art. *Knowledge, Technology & Policy*, 7(4), 13-33.
- Hughes, C. E. (2007). Evidence-based policy or policy-based evidence? The role of evidence in the development and implementation of the Illicit Drug Diversion Initiative. *Drug and Alcohol Review*, 26(4), 363-368.
- Hughes, C. E. (2009). Capitalising upon political opportunities to reform drug policy: A case study into the development of Australian 'Tough on Drugs-Illicit Drug Diversion Initiative'. *International Journal of Drug Policy*, 20(5), 431-437.

- Hughes, C. E., & Stevens, A. (2010). What can we learn from the portuguese decriminalization of illicit drugs? *British Journal of Criminology*, 50(6), 999-1022.
- Hughes, C. E., & Stevens, A. (2012). A resounding success or a disastrous failure: re-examining the interpretation of evidence on the Portuguese decriminalisation of illicit drugs. *Drug and Alcohol Review*, 31(1), 101-113.
- Hughes, C. E., Ritter, A. & Cowdery, N. (2014). Legislating thresholds for drug trafficking: A policy development case study from New South Wales, Australia. *International Journal of Drug Policy*, 25(5), 992-1000.
- Hunter, A. (1995). Local knowledge and local power. Notes on the ethnography of local community elites. In R. Hertz & J. B. Imber (Eds.), *Studying elites using qualitative methods* (pp. 151-171). London: Sage publications.
- Hunter, D. J. (2009). Relationship between evidence and policy: a case of evidence-based policy or policy-based evidence? *Public Health*, 123(9), 583-586.
- Huston, A. C. (2008). From Research to Policy and back. *Child Development*, 79(1), 1-12.
- Hyder, A. A., Corluka, A., Winch, P. J., El-Shinnawy, A., Ghassany, H., Malekafzali, H., Ghaffar, A. (2011). National policy makers speak out: are researchers giving them what they need? *Health Policy and Planning*, 26(1), 73-82.
- Hyshka, E. (2009). Turning failure into success: what does the case of Western Australia tell us about Canadian cannabis policy-making? *Policy Studies*, 30(5), 513-531.
- Inter-Ministeriële Conferentie Drugs (2010). *Gemeenschappelijke Verklaring van de Inter-Ministeriële Conferentie Drugs. Een globaal en geïntegreerd drugsbeleid voor België*. Brussel: Inter-Ministeriële Conferentie Drugs.
- Internal communication Memorandum group, 6 December 1999.
- Internal communication Memorandum group, 26 October 2000.
- Internal communication Ministerial Cabinet, 17 January 2001.
- Internal communication Ministerial Cabinet, 30 August 2001.
- Internal communication Ministerial Cabinet, 16 January 2002.
- Internal communication Ministerial Cabinet, 30 April 2002.
- International Narcotics Control Board (2001). *Annual report 2001*. Vienna: International Narcotics Control Board.
- Inter-parliamentary Advisory Council of the Benelux countries. (1998). *Het drugsbeleid in de Benelux*. Brussel: Inter-parliamentary Advisory Council of the Benelux countries (5 november 1998).
- Jack, S. M., Dobbins, M., Sword, W., Novotna, G., Brooks, S., Lipman, E. L., & Niccols, A. (2011). Evidence informed decision-making by professionals working in addiction agencies serving women. *Substance Abuse Treatment, Prevention, and Policy*, 7(6), 1-13.
- Jacob, M. (2006). Utilization of social science knowledge in science policy: Systems of Innovation, Triple Helix and VINNOVA. *Social Science Information*, 45(3), 431-462.

- Jacobs, D. (1998). *Nieuwkomers in de politiek. Het parlementaire debat omtrent kiesrecht voor vreemdelingen in Nederland en België (1970-1997)*. Gent: Academia Press.
- Jacobson, N., Butteril, D., & Goering, P. (2003). Development of a framework for knowledge translation: understanding user context. *Journal of health services research and policy*, 8(2), 94-99.
- Jasanoff, S. (1990). *The fifth branch: science advisers as policymakers*. Cambridge: Harvard University Press.
- Jasanoff, S. (Ed.). (2006). *States of knowledge. The co-production of science and social order*. New York: Routledge.
- Jelsma, M. (2008). The current state of drug policy debate. Trends in the last decade in the EU and UN. Amsterdam: TNI.
- John, P. (2003). Is There Life After Policy Streams, Advocacy Coalitions, and Punctuations: Using Evolutionary Theory to Explain Policy Change? *The Policy Studies Journal*, 31(4), 1-18.
- Johnson, S. P., Greenfield, T. K., Giesbrecht, N., Kaskutas, L. A., & Anglin, L. (2004). The role of research in the development of US federal alcohol control policy. *Contemporary drug problems*, 31(4), 737-758.
- Jones, T., & Newburn, T. (2007). *Policy Transfer and Criminal Justice: Exploring U.S. Influence over British Crime Control Policy*. Berkshire: Open University Press.
- Jørgensen, M., & Phillips, L. J. (2002). *Discourse analysis as theory and method*. London: Sage Publication.
- Joye, S. (2009). The hierarchy of global suffering. A Critical Discourse Analysis of television news reporting on foreign natural disasters. *The Journal of International Communication*, 15(2), 45-61.
- Kabinet van de Eerste Minister. (1995). *Actieplan Toxicomanie Drugs [Federal Action Plan Toxicomania-Drugs]*. Brussel: Kabinet van de Eerste Minister.
- Kaminski, D. (1998). La directive du 17 avril 1998. La troisième voie... entre la loi et le débat. *Les Cahiers de prospective jeunesse*, 3(2), 3-6.
- Kaminski, D. (2003a). L'activité pénale sous influence: un bilan de la recherche. In D. Kaminski (Ed.), *L'usage pénal des drogues* (pp. 11-40). Bruxelles: De Boeck & Larcier.
- Kaminski, D. (2003b). Les directives de politique criminelles en matière de stupéfiants. In D. Kaminski (Ed.), *L'usage pénal des drogues* (pp. 107-140). Bruxelles: De Boeck & Larcier.
- Kenis, P. (1997). *Drugs, research related initiatives in the European Union: synthesis report (+general conclusion)*. Lisbon: EMCDDA.
- Kennedy, G. E., & Bero, L. A. (1999). Print media coverage of research on passive smoking. *Tobacco Control*, 8(3), 254-260.
- Kinable, H., Casselman, J., Todts, S., & Van Deun, P. (1994). *Drugsgebruikers en AIDS. AIDS-risicogedrag bij injecterende drugsgebruikers en evaluatie van een preventief project. Onderzoeksproject in het kader van het samenwerkingsakkoord tussen het NFWO, de staat en de gemeenschappen*. Brussel/Leuven Antwerpen: VAD/Katholieke Universiteit Leuven/Free Clinic.
- Kinable, H. (2002). *De nieuwste trends in het secundair onderwijs in Vlaanderen: syntheserapport leerlingenbevraging schooljaar 2000-2001*. Brussel: VAD.

- Kingdon, J. W. (1995). *Agendas, alternatives and public policies*. New York: Addison-Wesely Educational Publishers Inc.
- Kingdon, J. W. (2002). *Agendas, alternatives and public policies*. London: Longmans.
- Klein Haarhuis, C. M., Hagen, L. L. C., & Scheepmaker, M. P. C. (2009). *Toetsen en verbinden: over het WODC in de tijd en de relatie tussen onderzoek en beleid in het bijzonder*. Den Haag: Boom Juridische uitgevers.
- Knott, J., & Wildavsky, A. (1980). If dissemination is the solution, what is the problem? *Knowledge: Creation, Diffusion, Utilization*, 1(4), 537–578.
- Kohlbacher, F. (2006). The Use of Qualitative Content Analysis in Case Study Research. *Forum: Qualitative Social Research*, 7(1), 21.
- Koninklijk besluit van 31 december 1930 houdende regeling van de slaapmiddelen en de verdovende middelen en betreffende risicobeperking en therapeutisch advies, *B.S.* 10 januari 1931.
- Koninklijk besluit van 16 mei 2003 tot wijziging van het koninklijk besluit van 31 december 1930 omtrent de handel in slaap- en verdovende middelen alsmede van het koninklijk besluit van 22 januari 1998 tot reglementering van sommige psychotrope stoffen, teneinde daarin bepalingen in te voegen met betrekking tot risicobeperking en therapeutisch advies, en tot wijziging van het koninklijk besluit van 26 oktober 1993 houdende maatregelen om te voorkomen dat bepaalde stoffen worden misbruikt voor de illegale vervaardiging van verdovende middelen en psychotrope stoffen, *B.S.* 2 juni 2003.
- Koninklijk besluit van 29 juni 2003 betreffende het informeren van het Belgisch Focal Point van het Europees informatienetwerk over drugs en drugsverslaving, *B.S.* 14 juli 2003.
- Koninklijk besluit van 19 maart 2004 tot reglementering van de behandeling met vervangingsmiddelen, *B.S.* 30 april 2004.
- Korf, D., Gamella, J. F., Moskalewicz, J., O’Gorman, A., Olsson, B., Uhl, A., & Wouters, M. (2005). Social drug research in Europe: current themes and future developments. In L. Kraus & D. Korf (Eds.), *Research on Drugs and Drug Policy from a European Perspective* (pp. 17-34). Lengerich: Pabst Science Publishers.
- Korf, D. (2008). Cannabis research in Europe: an introduction. In D. Korf (Ed.), *Cannabis in Europe: Dynamics in perception, policy and markets* (pp. 9-14). Lengerich: Pabst Science Publishers.
- Korf, D. (2013). New developments and current debates in social drug research: an introduction. In J. Fountain, M. Wouters, & D. Korf (Eds.), *Snapshots of social drug research in Europe* (pp. 7-14). Lengerich: Pabst Science Publishers.
- Krastev, I. (2000). Post-communist think tanks: making and faking influence. In D. Stone (Ed.), *Banking on knowledge: the genesis of the global development network*. London: Routledge.
- Kraus, L., Augustin, R., Frischler, M., Kümmler, P., Uhl, A., Wiessing, L. (2003). Estimating prevalence of problem drug use at national level in countries of the European Union and Norway. *Addiction*, 98(4), 471-85.
- Kraus, L., & Korf, D. (Eds.). (2005). *Research on Drugs and Drug Policy from a European perspective*. Lengerich: Pabst Science Publishers.

- Krippendorff, K. (2013). *Content Analysis. An introduction to its methodology*. Thousand Oaks (California): Sage Publications.
- Lackey, R. T. (2007). Science, Scientists, and Policy Advocacy. *Conservation Biology*, 21(1), 12-17.
- Lampinen, O. (1992). *The utilization of social science research in public policy*. Helsinki: VAPK-publishing.
- Lancaster, K., Hughes, C. E., Spicer, B., Matthew-Simmons, F., & Dillon, P. (2010). *Curiosity killed the M-Cat: an examination of illicit drugs and the media*. Paper presented at the Australian and New Zealand Critical Criminology Conference, Sydney.
- Lancaster, K., Hughes, C. E., Spicer, B., Matthew-Simmons, F., & Dillon, P. (2011). Illicit drugs and the media: models of media effects for use in drug policy research. *Drug and Alcohol Review*, 30(4), 397-402.
- Lancaster, K., Ritter, A., & Stafford, J. (2013). Public opinion and drug policy in Australia: engaging the affected community. *Drug & Alcohol Review*, 32(1), 60-66.
- Lancaster, K. (2014). Social construction and the evidence-based drug policy endeavour. *International Journal of Drug Policy*, 25(5), 948-951.
- Landry, R., Amara, N., & Lamari, M. (1999). *Climbing the ladder of research utilization: evidence from social science research*. Paper presented at the Annual meeting of the Society for Social Studies of Science, San Diego.
- Landry, R., Amara, N., & Lamari, M. (2001). Utilization of social science research knowledge in Canada. *Research Policy*, 30(2), 333-349.
- Landry, R., Lamari, M., & Amara, N. (2003). Extent and determinants of utilization of university research in government agencies. *Public Administration Review*, 63(2), 193-205.
- Lavis, J. N., Robertson, D., Woodside, J. M., McLeod, C. B., & Abelson, J. (2003). How can research organizations more effectively transfer research knowledge to decision makers? *The Milbank Quarterly*, 81(2), 221-248.
- Lawrence, A., Houghton, J., Thomas, J., & Weldon, P. (2014). *Where is the evidence? Realising the value of grey literature for public policy & practice*. Melbourne: Swinburne Institute for Social Research.
- Leiden, W. R. (1995). The role of interest groups in policy formulation. *Washington Law Review*, 70(1), 715-724.
- Lenton, S. (2004). Pot, politics and the press-reflections on cannabis law reform in Western Australia. *Drug and Alcohol Review*, 23(2), 223-233.
- Lenton, S. (2007). *Beyond modelling and evidence: bridging the gap between drug policy research and drug policy practice*. Paper presented at the First Annual Conference of the International Society for the Study of Drug Policy, Oslo.
- Lenton, S., & Allsop, S. (2010). A tale of CIN-the Cannabis Infringement Notice scheme in Western Australia. *Addiction*, 105(5), 808-816.
- Lester, J. P. (1993). The utilization of policy analysis by state agency officials. *Knowledge: Creation, Diffusion, Utilization*, 14(3), 267-290.
- Letherby, G., & Jewkes, I. (Eds.). (2002). *Criminology: a reader*. London: Sage.

- Letter of MP Claude Eerdekens (French speaking Socialists, PS) regarding the drug problem in Belgium, 27 November 1995.
- Letter of MP Frans Lozie (Flemish Green party, AGALEV) regarding the working document of Mr. Stoclet, 6 december 1996.
- Levine, G. H. (2003). Global drug prohibition: its uses and crises. *International Journal of Drug Policy*, 14(2), 145-153.
- Liberatore, A. (2001). From science/policy interface to science/policy/society dialogue. In Organisation for Economic Co-operation and Development (Ed.), *Social sciences for knowledge and decision making*. Paris: OECD.
- Lindblom, C. E. (1959). Science of "Muddling Through". *Public Administration Review*, 19(2), 79-88.
- Lindquist, E. A. (2001). *Discerning Policy Influence: framework for a strategic evaluation of IDRC-supported research*. Ottawa: IDRC Evaluation Unit.
- Littig, B. (2009). Interviewing the Elite—Interviewing experts. Is there a difference? In A. Bogner, B. Littig, & W. Menz (Eds.), *Interviewing Experts. Research Methods Series* (pp. 98-116). New York: Pallgrave MacMillan.
- Loader, I., & Sparks, R. (2010). What is to be done with public criminology? *Criminology & Public Policy*, 9(4), 771-781.
- Loader, I., & Sparks, R. (2011). *Public criminology?* New York: Routledge.
- Lomas, J. (2000). Using 'linkage and exchange' to move research into policy at a Canadian foundation. *Health Affairs*, 19(3), 236-240.
- Luypaert, H., Françoise, C., Beyens, K., Kaminski, D., & Janssens, C. (2007). *Werken en leren als straf: een onderzoek naar de uitvoering van werkstraffen en leermaatregelen in België*. Brussel: VUB Press.
- Maccoun, R. J., & Reuter, P. (1997). Interpreting Dutch cannabis policy: reasoning by analogy in the legalization debate. *Science*, 278(5335), 47-52.
- Maccoun, R. J., & Reuter, P. (2001). *Drug war heresies: learning from other vices, times, and places*. Cambridge: Cambridge University Press.
- MacGregor, S. (2010). The impact of research on policy in the drug field. *Methodological Innovations Online*, 6(1), 41-57.
- MacGregor, S. (2012). *Barriers to the influence of evidence on policy: are politicians the problem?* Paper presented at the Sixth International Society for the Study of Drug Policy, Canterbury.
- MacGregor, S. (2013). Barriers to the influence of evidence on policy: Are politicians the problem? *Drugs: Education, Prevention, and Policy*, 20(3), 225-233.
- MacGregor, S., Singleton, N. & Trautmann, F. (2014). Towards good governance in drug policy: Evidence, stakeholders and politics. *International Journal of Drug Policy*, 25(5), 931-934.
- Macleod, J., & Hickman, M. (2010). How ideology shapes the evidence and the policy: what do we know about cannabis use and what should we do? *Addiction*, 105(8), 1326-1330.
- MacMillan, K. (2005). More Than Just Coding? Evaluating CAQDAS in a Discourse Analysis of News Texts. *Forum: Qualitative Social Research*, 6(3), 25.

- Mahieu, W. (2004). Drugs: opschorting, uitstel en probatie. *OSS*, 45 (4 februari 2004), 19-29.
- Mahieu, W. (2005). Drugs: wetgeving. *OSS*, 49 (1 juli 2005), 97-106.
- Maillé, M., Saint-Charles, J., & Lucotte, M. (2010). The gap between scientists and journalists: the case of mercury science in Québec's press. *Public Understanding of Science*, 19(1), 70-79.
- Malone, R. E., Boyd, E., & Bero, L. A. (2000). Science in the News: Journalists' Constructions of Passive Smoking as a Social Problem. *Social Studies of Science*, 30(5), 713-735.
- Marston, G., & Watts, R. (2003). Tampering with the evidence: a critical appraisal of evidence-based policy-making. *The Drawing Board: an Australian Review of Public Affairs*, 3(3), 143-163.
- Marteache, N. (2013). The role of public opinion in criminal justice policy making. *Newsletter of the European Society of Criminology*, 12(3), 17-21.
- Mason, J. (1996). *Qualitative researching*. London: Sage.
- Matthew-Simmons, F. (2011). *Public opinion, the media, and illicit drug policy*. University of New South Wales, Sydney.
- Matthew-Simmons, F., Sunderland, M., & Ritter, A. (2013). Exploring the existence of drug policy 'ideologies' in Australia. *Drugs: Education, Prevention, and Policy*, 20(3), 258-267.
- Mautner, G. (2008). Analyzing newspapers, magazines and other print media. In R. Wodak & R. Krzyzanowski (Eds.), *Qualitative discourse analysis in the social sciences* (pp. 30-51). New York: Palgrave Macmillan.
- McArthur, M. (1999). Pushing the drug debate: the media's role in policy reform. *Australian Journal of Social Issues*, 34(2), 149-165.
- McCann, E. J. (2008). Expertise, truth, and urban policy mobilities: global circuits of knowledge in the development of Vancouver, Canada's 'four pillar' drug strategy. *Environment and Planning*, 40(4), 885-904.
- McCombs, M. E., & Shaw, D. L. (1972). The Agenda-Setting Function of Mass Media. *The Public Opinion Quarterly*, 36(2), 176-187.
- McCombs, M. E., & Reynolds, A. (2009). How the news shapes our civic agenda. In J. Bryant & M. B. Oliver (Eds.), *Media effects: Advances in theory and research* (pp. 1-16). New York: Routledge.
- McLaughlin, E., & Muncie, J. (2013). *The Sage dictionary of criminology*. Thousand Oaks: Sage.
- McNay, L. (1994). *Foucault: A Critical Introduction*. Oxford: Blackwell Publishers.
- McNeill, F., Farrall, S., Lightowler, C., & Maruna, S. (2012). Re-examining evidence-based practice in community corrections: beyond "a confined view" of what works. *Justice research and policy*, 14(1), 35-60.
- McQuillan, J., & Tse, L. (1996). Does research matter? An analysis of media: opinion on bilingual education, 1984-1994. *The Bilingual research journal*, 20(1), 1-27.
- Memorandum group (1999). Beleidsmemorandum Belgische drughulpverlening en preventie. Brussel: Memorandum group.
- Memorandum group (2003). Memorandum i.v.m. drugproblematiek (2003-2006). Brussel: Memorandum group.

- Meyer, M. (2001). Between theory, method, and politics: positioning of the approaches to CDA. In A. Wodak & M. Meyer (Eds.), *Methods of critical discourse analysis* (pp. 14-31). London: Sage Publications.
- Miles, M. B., & Huberman, M. A. (1994). *Qualitative data analysis: An expanded sourcebook (2nd ed.)*. Thousand Oaks: Sage.
- Miller, D. (1999). Risk, science and policy: definitional struggles, information management, the media and BSE. *Social Science & Medicine*, 49(9), 1239-1255.
- Miller, W. R., Sorensen, J. L., Selzer, J. A., & Brigham, G. S. (2006). Disseminating evidence-based practices in substance abuse treatment: A review with suggestions. *Journal of Substance Abuse Treatment*, 31(1), 25-39.
- Mills, A. J., Durepos, G., & Wiebe, E. (Eds.). (2010). *Encyclopedia of Case Study Research*. Newbury Park, CA: Sage Publications.
- Ministerial Circular Letter of 8 May 1998, nr. COL 5/98, of the Minister of Justice and the College of General Prosecutors.
- Ministeriële omzendbrief van 16 mei 2003, betreffende vervolgingsbeleid inzake het bezit van en de detailhandel in illegale verdovende middelen, B.S. 2 juni 2003.
- Minstrom, M. (1997). Policy Entrepreneurs and the Diffusion of Innovation. *American Journal of Political Science*, 41(3), 738-770.
- Mitton, G., Adair, C. E., McKenzie, E., Patten, S. B., & Perry, B. V. (2007). Knowledge transfer and exchange: review and synthesis of the literature. *The Milbank Quarterly*, 85(4), 729-768.
- Mold, A. (2007). Illicit drugs and the rise of epidemiology during the 1960s. *Journal of Epidemiology Community Health*, 6(1), 278-281.
- Monaghan, M. (2008a). *The turmoil of evidence: research utilisation in UK drug classification*. (PhD), University of Leeds, Leeds.
- Monaghan, M. (2008b). The evidence base in UK drug policy: the new rules of engagement. *Policy & Politics*, 36(1), 145-150.
- Monaghan, M. (2009). The complexity of evidence: reflections on research utilization in a heavily politicised policy area. *Social Policy and Society*, 9(1), 1-12.
- Monaghan, M. (2011). *Evidence versus politics. Exploiting research in UK drug policy making?* Bristol: Policy Press.
- Monaghan, M., Pawson, R. & Wicker, K. (2012). The precautionary principle and evidence-based policy. *Evidence & Policy: A Journal of Research, Debate and Practice*, 8(2), 171-191.
- Monaghan, M. (2014). Drug Policy Governance in the UK: Lessons from changes to and debates concerning the classification of cannabis under the 1971 Misuse of Drugs Act. *International Journal of Drug Policy*, 25(5), 1025-1030.
- Montuschi, E. (2009). Questions of Evidence in Evidence-based policy. *Axiomathes*, 19(4), 425-439.
- Moore, D. (2008). Erasing pleasure from public discourse on illicit drugs: On the creation and reproduction of an absence. *International Journal of Drug Policy*, 19(5), 353-358.

- Morgan, D. L. (2007). Paradigms lost and pragmatism regained. Methodological implications of combining qualitative and quantitative methods. *Journal of Mixed Methods Research*, 1(1), 48-76.
- Mortelmans, D. (2009). *Handboek kwalitatieve onderzoeksmethoden*. Leuven: Acco.
- Mosher, C. J., & Akins, S. (2007). *Drugs and drug policy: the control of consciousness alteration*. Thousand Oaks: Sage.
- Mulder, H.-P., Walraven, G., De Groot, A., Terpstra, F. S., Rozendal, P., Delsman, O., Leeuw, F. L. (1991). Gebruik van beleidsevaluatieonderzoek bij de Rijksoverheid. *Beleidswetenschap*, 5(3), 203-227.
- Muscat, R. (2008). *From a policy on illegal drugs to a policy on psychoactives substances*. Strasbourg: Council of Europe Publishing.
- Musto, D. F., & Sloboda, Z. (2003). The influence of epidemiology on drug control policy. *UNODC Bulletin Narcotics*, 55(1), 9-22.
- Nathanson, C. A. (2009). *Disease Prevention as Social Change. The State, Society, and Public Health in the United States, France, Great Britain, and Canada*. New York: Russell Sage Foundation.
- National Center for the Dissemination of Disability Research. (1996). *A Review of the Literature on Dissemination and Knowledge Utilization*. Austin: National Center for the Dissemination of Disability Research.
- Naughton, M. (2005). 'Evidence-based policy' and the government of the criminal justice system - only if the evidence fits! *Critical Social Policy*, 25(1), 47-69.
- Neal, S., & McLaughlin, E. (2009). Researching Up? Interviews, Emotionality and Policy-Making Elites. *Journal of Social Policy*, 38(4), 689-707.
- Neilson, S. (2001). *IDRC-supported research and its influence on public policy. Knowledge utilization and public policy processes: a literature review*. Ottawa: IDRC Evaluation Unit.
- Nelen, H. (2008). *Evidence maze; het doolhof van het evaluatieonderzoek*. Maastricht: Oce-Nederland BV.
- Nelen, H. (2010a). Verstrikt in het evidence-based web. *Panopticon*, 31(3), 72-83.
- Nelen, J. M. (2010b). *Gelet op de Wet, de evaluatie van strafwetgeving onder de loep*. Amsterdam: Vrije Universiteit Amsterdam.
- Niemeijer, B. (2009). De ontwikkeling van criminologisch onderzoek voor beleid en praktijk. *Tijdschrift voor Criminologie*, 51(2), 154-174.
- Nilunger Mannheimer, L., Lehto, J., & Östlin, P. (2007). Window of opportunity for intersectoral health policy in Sweden—open, half-open or half-shut? *Health Promotion International*, 22(4), 307-315.
- Noaks, L., & Wincup, E. (2004). *Criminological research. Understanding qualitative methods*. London: Sage.
- Noorman, A. (2005). Exploring constructions of the 'drug problem' in historical and contemporary Singapore. *New Zealand Journal of Asian Studies*, 7(2), 40-70.
- Nutley, S. (2003). *Bridging the policy/research divide. Reflections and lessons from the UK*. Paper presented at the Facing the future: engaging stakeholders and citizens in developing public policy, National Institute of Governance Conference, Canberra.

- Nutley, S., Walter, I., & Davies, H.T.O. (2003). From Knowing to Doing. A framework for understanding the evidence-into-practice agenda. *Evaluation*, 9(2), 125-148.
- Nutley, S., Walter, I., & Davies, H.T.O. (2007). *Using evidence: how research can inform public services*. Bristol: The Policy Press.
- O'Dwyer, L. (2004). *A critical review of evidence-based policy making*. Melbourne: Australian Housing and Urban Research Institute.
- O'Gorman, E., Quigley, E., Zobel, F. & Moore, K. (2014). Peer, professional, and public: An analysis of the drugs policy advocacy community in Europe. *International Journal of Drug Policy*, 25(5), 1001-1006.
- Oh, C. H. (1997). Issues for the New Thinking of Knowledge Utilization: Introductory Remarks. *Knowledge and Policy*, 10(3), 3-10.
- Oh, C. H. (1998). Explaining the impact of information on problem definition: an integrated model. *Policy Studies Review*, 15(4), 109-136.
- Oliver, K., Innvar, S., Lorenc, T., Woodman, J., & Thomas, J. (2014). A systematic review of barriers to and facilitators of the use of evidence by policy makers. *BMC Health Services Research*, 14(2), 1-12.
- Olsson, B. (2009). *Dressed for Success?* Paper presented at the Fourth International Society for the Study of Drug Policy, Santa Monica.
- Ottoson, J. M., & Hawe, P. (Eds.). (2009). *Knowledge utilization, diffusion, implementation, transfer and translation: implications for evaluation*. San Francisco: Jossey-Bass.
- Parker, H., Aldridge, J., & Measham, F. (1998). *Illegal Leisure: The Normalisation of Adolescent Recreational Drug Use*. London: Routledge.
- Patesson, R., & Steinberg, P. (2000). *Enquête Fondation Rodin, Drogue 2000, Le Soir, ULB sur les belges et les drogues: rapport concernant les resultats de l'enquête*. Bruxelles: ULB.
- Pawson, R. (2006). *Evidence Based Policy: A Realist Perspective*. London: Sage.
- Peabody, R. L., Webb Hammond, S., Torcom, J., Brown, L. P., Thompson, C., & Kolodny, R. (1990). Interviewing Political Elites. *PS: Political Science and Politics*, 23(3), 451-455.
- Pelc, I., De Ruyver, B., Casselman, J., Noirfalise, A., & Macquet, C. (2001). *Evaluatie van de Medisch-Sociale opvangcentra voor druggebruikers*. Brussel: Federale Diensten voor Wetenschappelijke, Technische en Culturele aangelegenheden.
- Penninx, R. (1998). *Wie betaalt, bepaalt. De ontwikkeling en programmering van onderzoek naar migranten, ethnische minderheden en woonwagengebieden, 1955-1985, met speciale aandacht voor de rol van de overheid*. Amsterdam: Instituut voor Sociale Geografie.
- Petersilia, J. (2008). Influencing Public Policy: An Embedded Criminologist Reflects on California Prison Reform. *Journal of Experimental Criminology* 4(4), 335-356.
- Phillips, N., & Di Domenico, M. (2009). Discourse analysis in Organizational Research: Methods and Debates. In D. Buchanan & A. Bryman (Eds.), *The Sage Handbook of Organizational Research Methods* (pp. 549-565). London: Sage Publications.
- Ponsaers, P., De Ruyver, B., Lemaître, A., Macquet, C., Pieters, T., Vaerewyck, W., Fincoeur, B. & Vander Laenen, F. (2005). *Drugoverlast in de lokale context van acht Vlaamse en Waalse gemeenten: naar een Monitor Integraal Lokaal Drugbeleid*. Gent: Academia Press.

- Porter, R. W., & Hicks, I. (1995). *Knowledge utilization and the process of policy formation: toward a framework for Africa*. Washington: U.S. Agency for International Development.
- Radaelli, C. M. (1995). The role of knowledge in the policy process. *Journal of European Public Policy*, 2(2), 159-183.
- Reed, R. (2001). (Un-)Professional discourse? Journalists' and scientists' stories about science in the media. *Journalism*, 2(3), 279-298.
- Reimer, B., Sawka, E., & James, D. (2005). Improving research transfer in the addictions field: a perspective from Canada. *Substance use & Misuse*, 40(11), 1707-1720.
- Reimers, F., & McGinn, N. F. (1997). *Informed Dialogue: Using Research to Shape Education Policy Around the World*. London: Praeger.
- Reinarman, C., & Levine, H. (1997). Crack in context: America's latest demon drug. In C. Reinarman & H. Levine (Eds.), *Crack in America: Demon drugs and social justice* (pp. 1-17). Berkeley: University of California Press.
- Reinarman, C., Cohen, P. D. A., & Kaal, H. L. (2004). The Limited Relevance of Drug Policy: Cannabis in Amsterdam and in San Francisco. *American Journal of Public Health*, 94(5), 836-842.
- Reinarman, C. (2005). Addiction as accomplishment: The discursive construction of disease. *Addiction Research and Theory*, 13(4), 307-320.
- Reisigl, M. (2008). Analyzing Political Rhetoric. In R. Wodak & R. Krzyzanowski (Eds.), *Qualitative discourse analysis in the social sciences*. New York: Palgrave Macmillan.
- Report of the Memorandum Working group, 26 October 2000.
- Reuter, P. (1993). Prevalence estimation and policy formulation. *Journal of Drug Issues*, 23(2), 167-184.
- Reuter, P., & Stevens, A. (2007). The UK Drug Policy Commission. Bringing evidence and analysis together to inform UK drug policy. London: UKDPC.
- Rice, G. (2010). Reflections on interviewing elites. *Area*, 42(1), 70-75.
- Rich, R. F. (1997). Measuring Knowledge Utilization: Processes and Outcomes. *Knowledge and Policy*, 10(3), 11-24.
- Rich, R. F. (2001). *Social science information and public policy making*. New Jersey: Transaction Publishers.
- Richardson, C. (2013). Knowledge-sharing through social interaction in a policy-driven industrial cluster. *Journal of Entrepreneurship and Public Policy*, 2(2), 2045-2101.
- Rist, R. C. (1981). On the utility of ethnographic research for the policy process. *Urban Education*, 15(4), 485-494.
- Ritter, A., Bammer, G., Hamilton, M., & Mazerolle, L. (2007). Effective drug policy: a new approach demonstrated in the Drug Modelling Program. *Drug and Alcohol Review*, 26(3), 265-271.
- Ritter, A. (2009). How do drug policy makers access research evidence? *International Journal of Drug Policy*, 20(1), 70-75.

- Ritter, A., & Bammer, G. (2010). Models of policy-making and their relevance for drug research. *Drug and Alcohol Review*, 29(4), 353-357.
- Ritter, A. (2011). The role of research evidence in drug policy development in Australia. *Politicka misao*, 48(5), 141-156.
- Ritter, A., & Lancaster, K. (2013). Measuring research influence on drug policy: A case example of two epidemiological monitoring systems. *International Journal of Drug Policy*, 24(1), 30-37.
- Rock, P. (2010). Comment on "Public Criminologies". *Criminology & Public Policy*, 9(4), 751-767.
- Rock, P. (2014). The public faces of public criminology. *Criminology and Criminal Justice*, 14(4), 412-433.
- Roe, E. M. (1991). Development Narratives, or Making the Best of Blueprint Development. *World Development*, 19(4), 287-300.
- Rogers, R. (2004). An introduction to critical discourse analysis in education. In R. Rogers (Ed.), *An introduction to critical discourse analysis in education* (pp. 1-18). Mahwah: Lawrence Erlbaum.
- Room, R. (2005). Symbolism and rationality in the politics of psychoactive substances. In B. Lindgren & M. Grossman (Eds.), *Substance use: Individual behaviour, social interactions, markets and politics* (pp. 331-346). Amsterdam: Elsevier.
- Room, R., Fischer, B., Hall, W. D., Lenton, S., & Reuter, P. (2010). *Cannabis Policy: Moving Beyond Stalemate*. New York: Oxford University Press.
- Roose, N. (2002). Therapeutisch advies: hoe zit het nu? Standpunt van de hulpverlenings- en welzijnssector. *VAD-berichten*, 2(2), 7-8.
- Rossi, C. (2002). A critical reading of the World Drug Report. *International Journal of Drug Policy*, 13(3), 225-235.
- Rubin, H. J., & Rubin, I. S. (2005). *Qualitative interviewing. The art of hearing data*. London: Sage.
- Ruggiero, V., & South, N. (1995). *Eurodrugs: drug use, markets and trafficking in Europe*. London: UCL.
- Sabatier, P. A. (1998). The advocacy coalition framework: revisions and relevance for Europe. *Journal of European Public Policy*, 5(1), 98-130.
- Sackett, D., Rosenberg, W., Gray, J. A., Haynes, R. B., & Richardson, W. S. (1996). Evidence-based medicine: What it is and what it isn't. *British Medical Journal*, 312(7032), 71-72.
- Sandelowski, M. (1994). Focus on qualitative methods. The use of quotes in qualitative research. *Research in Nursing & Health*, 17(6), 479-482.
- Sanderson, I. (2009). Intelligent policy making for a complex world. *Political studies*, 57(4), 699-719.
- Santisteban, D., Vega, R. R., & Suarez-Morales, L. (2006). Utilizing dissemination findings to help understand and bridge the research and practice gap in the treatment of substance abuse disorders in Hispanic populations. *Drug and Alcohol Dependence*, 84(1), 94-101.
- Scheufele, D. A., & Tewksbury, D. (2007). Framing, agenda setting and priming: The evolution of three media effects models. *Journal of Communication*, 57(1), 9-20.

- Scholten, P. (2011). Constructing Dutch immigrant policy. Research-policy relations and immigrant integration in the Netherland. *British Journal of Politics and International Relations*, 13(1), 75-92.
- Schryver-Roy, A. (2005). Knowledge Translation: basic theories, approaches and applications. *Research Matters in governance, equity and health*. Ottawa: IDRC.
- Schwandt, T. A. (2000). Three epistemological stances for qualitative inquiry: interpretivism, hermeneutics and social constructivism. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of Qualitative Research* (pp. 189-214). Thousand Oaks: Sage Publications.
- Seddon, T., Ralphs, R., & Williams, L. (2008). Risk, security and the 'criminalization' of British drug policy. *British Journal of Criminology*, 48(6), 818-834.
- Sherman, L. W. (2003). *Misleading evidence and evidence-led policy: making social science more experimental*. Thousand Oaks: Sage.
- Shinner, M. (2009). *Drug use and social change. The distortion of history*. Hampshire: Palgrave Macmillan.
- Silverman, D. (2006). *Interpreting qualitative data: Methods for Analysing Talk, Text and Interaction (Third edition)*. London: Sage.
- Singleton, N., & Rubin, J. (2014). What is good governance in the context of drug policy? *International Journal of Drug Policy*, 25(5), 935-941.
- Singleton, N., Stevens, A., Ochoa, J. F., & Feilding, A. (2014). *Developing a framework for analysing the impact of different regulatory approaches*. Paper presented at the Eight Annual conference of the International Society for the Study of Drug Policy, Rome.
- Sloboda, Z. (Ed.). (2005). *Epidemiology of drug abuse*. New York: Springer.
- Smet, V. (2013). *Sociaal-wetenschappelijk onderzoek en beleid. Een analyse van de interactie, kennisgebruik en doorwerking in België en Vlaanderen*. Den Haag: Boom Lemma Uitgevers.
- Smith, K. (2006). Problematizing power relations in 'elite' interviews. *Geoforum*, 37(4), 643-653.
- Smith, K. (2010). Research, policy and funding - academic treadmills and the squeeze on intellectual spaces. *British Journal of Sociology*, 61(1), 176-195.
- Smith, K. (2013). *Beyond Evidence Based Policy in Public Health: The Interplay of Ideas*. Basingstoke: Palgrave Macmillan.
- Snertingdal, M., & Basberg Neuman, C. (2010). *Resisting complexity; evidence based knowledge and the neglect of practice*. Paper presented at the 21th Annual Conference of the European Society for Social Drug Research, Dubrovnik.
- Sorian, R., & Baugh, T. (2002). Power of information: closing the gap between research and policy. *Health Affairs*, 21(2), 264-273.
- Sorrell, S. (2007). Improving the evidence base for energy policy: the role of systematic reviews. *Energy policy*, 35(3), 1858-1871.
- Souchon, A. L., & Dianmantopoulos, A. (1994). A conceptual framework of expert marketing information use: key issues and research propositions. *Journal of international marketing*, 4(1), 49-71.
- South, N. (1999). *Drugs: cultures, controls and everyday life*. London: Sage.

- Staelraeve, S. (2003). *Zin en onzin parlementaire parlementaire onderzoekscommissies. Van 1830 tot Sabenacommissie*. Gent: Academia Press.
- Stevens, A. (2007a). Survival of the ideas that fit: an evolutionary analogy for the use of evidence in policy. *Social Policy & Society*, 6(1), 25-35.
- Stevens, A. (2007b). When two dark figures collide: Evidence and discourse on drug-related crime. *Critical Social Policy*, 27(1), 77-99.
- Stevens, A. (2011). *Drugs Crime and Public Health: The Political Economy of Drug Policy*. London: Routledge.
- Stevens, A., & Rhodes, T. (2011). Sociological Approaches to the Study of Drug Use and Drug Policy. *International Journal of Drug Policy*, 22(6), 399-403.
- Stevens, A., & Ritter, A. (2013). 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.
- Stevens, A., & Measham, F. (2014). The 'drug policy ratchet': why do sanctions for new psychoactive drugs typically only go up? *Addiction*, 109(8), 1226-1132.
- Stimson, G. V. (1997). *Estimating the prevalence of problem drug use in Europe*. Luxembourg: EMCDDA.
- Stone, D. (2001). *Getting Research Into Policy?* Paper presented at the Third Annual Global Development Network Conference on 'Blending Local and Global Knowledge', Rio De Janeiro.
- Stone, D., & Maxwell, S. (Eds.). (2005). *Global knowledge networks and international development*. New York: Routledge.
- Storbjörk, J. (2013). A study of a Swedish treatment policy reform proposal. In D. Korf (Ed.), *Snapshots of social drug research in Europe* (pp. 57-59). Lengerich: Pabst Publishers.
- Strang, J., Babor, T., Caulkins, J., Fischer, B., Foxcroft, D., & Humphreys, K. (2012). Drug policy and the public good: evidence for effective interventions. *The Lancet*, 379(1), 71-83.
- Strauss, A. L., & Corbin, J. (1998). *Basics of Qualitative Research: Techniques and Procedures for Developing Grounded Theory*. Sage Publications: Thousand Oaks.
- Strydom, W. F., Funke, N., Nienaber, S., Nortje, K., & Steyn, M. (2010). Evidence-based policymaking: A review. *South African Journal of Science*, 106(5-6), 1-8.
- Sutton, R. (1999). *The policy process: an overview (working paper 118)*. London: Overseas Development Institute.
- Swanborn, P. G. (2003). *Case-study's. Wat, wanneer en hoe?* Amsterdam: Boom Onderwijs.
- Swanborn, P. G. (2008). *Case-study's. Wat, wanneer en hoe?* Amsterdam: Boom Onderwijs.
- Szarka, J. (2004). Wind power, discourse coalitions and climate change: breaking the stalemate. *European Environment*, 14(6), 317-330.
- Taylor, S. J. (2008). Outside the outsiders: Media representations of drug use. *Journal of community and criminal justice*, 55(4), 369-387.
- Teisman, G. R. (2000). Models for research into decision-making processes: on phases, streams and decision-making rounds. *Public Administration*, 78(4), 937-956.

- Tewksbury, D., & Lees, M. B. (2007). Perceptions of punishment: how registered seks offenders view registries. *Crime & Delinquency*, 53(3), 380-407.
- Thomas, S. (2009). Newspapers on Education Policy: Constructing an Authorative Public Voice on Education. In R. Fitzgerald & W. Housley (Eds.), *Media, Policy and Interaction* (pp. 205-223). Farnham: Ashgate Publishing Limited.
- Thomson, G., Wilson, N., & Howden-Chapman, P. (2007). The use and misuse of health research by parliamentary politicians during the development of a national smokefree law. *Australia and New Zealand Health Policy*, 4(1), 1-12.
- Tieberghien, J., & Decorte, T. (2009). Antwerp Drugs and Alcohol Monitor (ADAM): a Belgian local drug scene in the picture. *Drug and Alcohol Review*, 28(6), 616-622.
- Tieberghien, J., & Decorte, T. (2013). Understanding the science-policy nexus in Belgium: an analysis of the drug policy debate (1996–2003). *Drugs: Education Prevention and Policy*, 20(3), 241-248.
- Tieberghien, J. (2014a). The role of the media in the science-policy nexus: some critical reflections based on an analysis of the Belgian drug policy debate (1996-2003). *International Journal of Drug Policy*, 25(2), 276-281.
- Tieberghien, J. (2014b). Interviewing 'elites' in examining the science-policy nexus: some methodological reflections. In G. Potter, M. Wouters, & J. Fountain (Eds.), *Drugs in Europe: change and continuity* (pp. 123-138). Lengerich: Pabst Science Publishers.
- Todts, S. (2004). De drugwet en de hulpverlening: lat-relatie of shotgun wedding? *Orde van de dag*, 26(7), 5-18.
- Todts, S. (2005). Harm reduction: een stand van zaken. In J. H. Goethals, F. Hutsebaut & G. Vervaeke (Ed.), *Gerechtighe geestelijke gezondheidszorg: wetenschap, beleid en praktijk: liber amicorum Joris Casselman* (pp. 373-284). Leuven: Universitaire Pers Leuven.
- Tomson, G., Paphassarang, C., Jönsson, K., Houamboun, K., Akkhavong, K., & Wahlström, R. (2005). Decision-makers and the usefulness of research evidence in policy implementation - a case study from Lao PDR. *Social Science & Medicine*, 61(6), 1291-1299.
- Tonry, M. (2010). "Public criminology" and evidence-based policy. *Criminology & Public Policy*, 9(4), 783-797.
- Tops, D. (2001). *A society with or without drugs? Continuity and change in drug policies in Sweden and the Netherlands*. Lund: Lunds Universitet.
- Torring, J. (1999). *New theories of discourse: Laclau, Mouffe and Žižek*. Oxford: Blackwell.
- Trostle, J., Bronfman, M., & Langer, A. (1999). How do researchers influence decision-makers? Case studies of Mexican policies. *Health Policy and Planning*, 14(2), 103-114.
- Uggen, C., & Inderbitzin, M. (2010). "Public Criminologies". *Criminology & Public Policy*, 9(4), 725-750.
- UKDPC. (2010). *Representations of drug use and drug users in the British press*. London: UK Drug Policy Commission.
- United Nations (1961). *Single Convention on Narcotic Drugs*. Vienna: UNODC.
- United Nations (1971). *United Nations Convention on Psychotropic Substances*. Vienna: UNODC.

- United Nations (1988). *United Nations Convention against the Illicit Traffic in Narcotic Drugs and Psychotropic Substances*. Vienna: UNODC.
- VAD. (2000). *Visie op cannabis vanuit de gespecialiseerde drugsector*. Brussel: VAD.
- VAD. (2003). *Jaarverslag van 2002 van de Druglijn*. Brussel: VAD.
- VAD. (2004). *Jaarverslag van 2003 van de Druglijn*. Brussel: VAD.
- Van Daele, L., Casselman, J., De Baut, D., De Ruyver, B., Etienne, M., Gillet, I., Noirfalise, A. & Passchyn, L. (1996). *Verzameling en beschikbaarheid van epidemiologische gegevens omtrent het gebruik van drugs in België en in enkele buurlanden. Een voorbereidende studie*. Brussel: Diensten van de Eerste Minister en Federale Diensten voor Wetenschappelijke, Technische en Culturele aangelegenheden.
- Van der Hulst, M. (2010). *Het federale parlement. Organisatie en werking*. Kortrijk: UGA Publishers.
- Van Dijk, T. A. (2001). Multidisciplinary CDA: a plea for diversity. In A. Wodak & M. Meyer (Eds.), *Methods of critical discourse analysis* (pp. 95-120). London: Sage Publications.
- Van Dijk, T. A. (2003). Critical Discourse Analysis. In D. Schiffrin, D. Tannen, & H. E. Hamilton (Eds.), *The Handbook of Discourse Analysis* (pp. 85-109). Cornwall: Blackwell Publishing.
- Van Eijk, D. L., & Hartkamp, J. P. (1992). Van zwarte schapen en vreemde eenden. Een verhandeling over de positie van het WODC. *Justitiële Verkenningen*, 18(3), 90-118.
- Van Gaever, J. (2003). De nieuwe Drugwet: wijzigingen en toepassingsmoeilijkheden. *Tijdschrift voor Strafrecht*, 6, 275-284.
- Van Ham, S., & Sabbe, B. (2006). *Onderzoek naar de effectiviteit van de residentieel geïntegreerde behandeling voor patiënten met dubbeldiagnose*. Gent: Academia Press.
- Van Hout, M., & Brennan, R. (2011). Plant food for thought: A qualitative study of mephedrone use in Ireland. *Drugs: Education, Prevention & Policy*, 18(5), 371-381.
- Van Swaaningen, R. (2001). Kritische criminologie. In E. Lissenberg, S. Van Ruller, & R. Van Swaaningen (Eds.), *Tegen de regels IV* (pp. 251-271). Nijmegen: Ars Aequi Libri.
- Van Swaaningen, R. (2009). De criminoloog, het publieke debat en het beleid. In W. Bruggeman, E. De Wree, J. Goethals, P. Ponsaers, P. Van Calster, T. Vander Beken, & G. Vermeulen (Eds.), *Van Pionier naar onmisbaar. Over 30 jaar Panopticon* (pp. 577-588). Antwerpen: Maklu.
- Vande Walle, G. (2010). De plaats en betekenis van evaluatieonderzoek in de interbestuurlijke veiligheids- en preventieplannen. *Panopticon*, 31(3), 40-57.
- Vandenbroele, H., Keymeulen, R., Nielandt, B., Calle, D., & Theuwen, J. (1989). *Het Vlaamse Informatie Systeem – Drugvrije Centra. Statistische gegevens 1998, deel 1. Verslag van het eerste werkingsjaar*. Antwerpen: VLIS-DC.
- Vander Laenen, F. (2001). *The drug and cannabis policy of the city of Ghent, Belgium*. Paper presented at the European City Conference on Cannabis Policy, Utrecht.
- Vander Laenen, F., & Dhont, F. (2003). Zalven en slaan: Een eerste analyse van de nieuwe drugwetgeving. *Tijdschrift voor Strafrecht*, 4(5), 227-245.

Vanderplasschen, W., Rapp, R., Wolf, J. & Broekaert, E. (2004). The Development and Implementation of Case Management for Substance Use Disorders in North America and Europe. *Psychiatric Services*, 55(8), 913-922.

Veneu, F., Amorim, L. H., & Massarani, L. (2008). Science journalism in Latin America: how the scientific information from a scientific source is accommodated when it is transformed into a journalistic story. *Journal of Science Communication*, 7(1), 1-8.

Vercaigne, C., & Walgrave, L. (1995). *Jeugd tussen (sub)cultuur en business: een onderzoek naar mega-dancings, house en de last van recreatie*. Leuven: Acco.

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Vianello, C. (2011). *Injecting new highs into public policy: analysis of the changing problematisations of drug policy reform: the case of safe injection facilities and the decriminalisation of cannabis*. Auckland: University of Auckland.

Voorstel van resolutie waarbij de Belgische regering wordt verzocht op de Algemene Vergadering van de VN in juni 1998 te bevorderen dat de internationale verdragen op het gebied van drugs worden herzien (ingediend door Mr. Vincent Decroly, Mrs. Martine Schüttringer, Mr. Frans Lozie, Mr. Olivier Deleuze and Mr. Jef Tavernier), *Parl.St. Kamer* 1997-1998, nr. 1571/1.

Voorstel van resolutie over de herziening van de internationale drugsverdragen (ingediend door Mr. Vincent Van Quickenborne and Mr. Patrik Vankrunkelsven), *Parl.St. Senaat* 2000-2001, nr. 2-584/1.

Voorstel van wet tot regeling van de teelt, de distributie en de verkoop van cannabis (ingediend door Mr. Vincent Decroly, Mrs. Martine Schüttringer and Mr. Frans Lozie), *Parl.St. Kamer* 1996-1997, nr. 1186/001.

Voorstel van wet tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica, teneinde het gebruik van cannabis uit het strafrecht te halen (ingediend door Mr. Patrick Moriau and Mr. Thierry Giet), *Parl.St. Kamer* 1999-2000, nr. 0727/001.

Voorstel van wet tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsmiddelen en antiseptica, ten einde het bezit van cannabis en derivaten ervan gedeeltelijk uit het strafrecht te halen (ingediend door Mr. Daniel Bacquellaine and Mr. Olivier Chastel), *Parl.St. Kamer* 1999-2000, nr. 0461/001.

Voorstel van wet tot verstrenging van de straffen zoals bepaald in de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica (ingediend door Mr. Filip De Man and Mr. Gerolf Annemans), *Parl.St. Kamer* 1999-2000, nr. 0389/001.

Voorstel van wet tot regeling van de teelt, de distributie en de verkoop van cannabis (ingediend door Mr. Vincent Decroly, Mr. Paul Timmermans, Mrs. Zoé Genot and Mrs. Simonne Leen), *Parl.St. Kamer* 1999-2000, nr. 0780/001.

Voorstel van wet tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica

(ingediend door Mr. Roger Lallemand and Mr. Fred Erdman), *Parl.St.* Senaat 1991-1992, nr. 447/1.

Voorstel van wet tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica (ingediend door Mr. Vincent Van Quickenborne and Mr. Patrik Vankrunkelsven), *Parl.St.* Senaat 2000-2001, nr. 2 - 585/1.

Vr. en Antw. Kamer, 9 oktober 1998, nr. 49/B152 (Vr. nr. 951 F. Van den Eynde).

Vr. en Antw. Kamer, 4 februari 2000, nr. 50/22, 2415 (Vr. nr. 67 F. Van den Eynde).

Vr. en Antw. Kamer, 19 februari 2001, nr. 064 (Vr. nr. 309 A. Colen).

Vr. en Antw. Senaat, 12 januari 1999, nr. 1-90 (Vr. nr. 1479 M. Olivier).

Vr. en Antw. Senaat, 4 januari 2000, nr. 2-6 (Vr. nr. 170 V. Van Quickenborne).

Vr. en Antw. Senaat, 4 januari 2000, nr. 2-6 (Vr. nr. 171 V. Staveaux-Van Steenberge).

Vr. en Antw. Senaat, 18 januari 2000, nr. 2-7 (Vr. nr. 191 V. Van Quickenborne).

Vr. en Antw. Senaat, 20 juli 2000, nr. 2-67 (Vr. nr. 2-333 V. Van Quickenborne).

Vr. en Antw. Senaat, 20 juli 2000, nr. 2-67 (Vr. nr. 2-334 L. Caluwé).

Vr. en Antw. Senaat, 12 juni 2001, nr. 2/36 (Vr. nr. 1265 C. Nyssen).

Vr. en Antw. Senaat, 9 oktober 2001, nr. 2/42 (Vr. nr. 1509 M. De Schamphelaere).

Vr. en Antw. Senaat, 6 november 2001, nr. 2/43 (Vr. nr. 1553 V. Van Quickenborne).

Vr. en Antw. Senaat, 5 maart 2002, nr. 2/50 (Vr. nr. 1544 V. Van Quickenborne).

Vr. en Antw. Senaat, 19 maart 2002, nr. 2/51 (Vr. nr. 1886 Y. Buysse).

Vuillaume, D. (2008). Changing scientific perspectives on cannabis use. In D. Korf (Ed.), *Cannabis in Europe: dynamics in perception, policy and markets* (pp. 15-29). Lengerich: Pabst Science Publishers.

Wacquant, L. (2011). From 'Public criminology' to the reflexive sociology of criminological production and consumption. *British Journal of Criminology*, 51(2), 438-448.

Wagner, P., Weiss, C., Wittrock, B., & Wollmann, H. (Eds.). (1991). *Social Sciences and Modern States: National Experiments and Theoretical Crossroads*. Cambridge: Cambridge University Press.

Walford, G. (1994). *Researching the powerful in Education*. London: UCL Press.

Walgrave, L. (2008). Criminology, as I see it ideally. *Newsletter of the European Society of Criminology*, 7(3), 3.

Walgrave, S., & Van Aelst, P. (2006). The contingency of the mass media's political agenda setting power: toward a preliminary theory. *Journal of Communication*, 56(1), 88-109.

Walgrave, S., Soroka, S., & Nuytemans, M. (2008). The Mass Media's Political Agenda-Setting Power. A Longitudinal Analysis of Media, Parliament, and Government in Belgium (1993 to 2000). *Comparative Political Studies*, 41(6), 814-836.

- Walliman, N. (2011). *Research methods: the basics*. Abingdon: Routledge.
- Walt, G., & Gilson, L. (1994). Reforming the health sector in developing countries: the central role of policy analysis. *Health Policy and Planning*, 9(4), 233-235.
- Walters, R. (2003). *Deviant Knowledge. Criminology, politics and policy*. Devon: Willan Publishing.
- Watkins, J. M. (1994). A postmodern critical theory of research use. *Knowledge, Technology & Policy*, 7(4), 55-77.
- Webber, D. J. (1991). The distribution and use of policy knowledge in the policy process. *Knowledge and Policy*, 4(4), 6-35.
- Weiss, C. H. (1979). The many meanings of research utilization. *Public Administration Review*, 39(5), 426-431.
- Weiss, C. H., & Bucuvalas, M. J. (1980). *Social science research and decision making*. New York: Columbia University Press.
- Weiss, C. H. (1986). The circuitry of enlightenment: diffusion of social science research to policy makers. *Science Communication*, 8(2), 274-281.
- Weiss, C. H., & Singer, E. (1988). *Reporting of social science in the national media*. New York: Russell Sage Publications.
- Weiss, C. H. (1991). Policy research: data, ideas or arguments? In P. Wagner, C. Weiss, B. Wittrock, & H. Wollmann (Eds.), *Social Sciences and Modern States: National Experiments and Theoretical Crossroads* (pp. 307-332). Cambridge: Cambridge University Press.
- Weiss, C. H. (1995). The Haphazard connection: social science and public policy. *International Journal of Educational Research*, 23(2), 137-150.
- Weiss, C. H. (1999). The Interface between Evaluation and Public Policy. *Evaluation*, 5(4), 468-486.
- Weiss, T. G. (2000). Governance, good governance and global governance: conceptual and actual challenges. *Third World Quarterly*, 21(5), 795-814.
- Weiss, C. H. (2001). *What kind of evidence in Evidence-Based policy?* Paper presented at the International Interdisciplinary Evidence-Based Policies and Indicator Systems Conference, London.
- Weiss, C. H., Murphy-Graham, E., Petrosino, A., & Gandhi, A. G. (2008). The Fairy Godmother—and Her Warts Making the Dream of Evidence-Based Policy Come True. *American Journal of Evaluation*, 29(1), 29-47.
- Welch, C., Marschari-Piekkari, R., Penttinen, H., & Tahvanainen, M. (2002). Corporate elites as informants in qualitative international business research. *International Business Review*, 11(5), 611-628.
- Wetsontwerp tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica en Wetsontwerp tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de giftstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica, en van artikel 137 van het Wetboek van Strafvordering, *Parl. St. Kamer 2001-2002*, nr. 1888/001 en nr. 1889/01.

Wetsontwerp tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de gifstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica (Amendement nr. 1 ingediend door Mr. Jacques D'Hooghe and Mrs. Mia Van Schamphelaere), *Parl.St. Senaat 2000-2001, nr. 2 - 1475/2, 17*).

Wet van 29 augustus 1919 op het regime van de alcohol, *B.S. 10 september 1919*.

Wet van 24 februari 1921 betreffende het verhandelen van gifstoffen, slaapmiddelen en verdovende middelen, psychotrope stoffen, ontsmettingsstoffen en antiseptica, *B.S. 16 maart 1921*.

Wet van 29 juni 1964 betreffende de opschorting, het uitstel en de probatie, *B.S. 17 juli 1964*.

Wet van 16 maart 1968 betreffende de politie over het wegverkeer, *B.S. 27 maart 1968*.

Wet van 10 februari 1994 tot wijziging van de wet van 29 juni 1964 betreffende de opschorting, het uitstel en de probatie, *B.S. 27 april 1994*.

Wet van 13 mei 1999 betreffende de invoering van de gemeentelijke administratieve sancties, *B.S. 10 juni 1999*.

Wet van 22 augustus 2002 strekkende tot de wettelijke erkenning van behandelingen met vervangingsmiddelen en tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van de gifstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica, *B.S. 1 oktober 2002*.

Wet van 4 april 2003 tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van gifstoffen, slaapmiddelen en verdovende middelen, ontsmettingsstoffen en antiseptica, en van artikel 137 van het Wetboek van strafvordering, *B.S. 2 juni 2003*.

Wet van 3 mei 2003 tot wijziging van de wet van 21 februari 1921 betreffende het verhandelen van gifstoffen, slaapmiddelen en verdovende middelen, psychotrope stoffen, ontsmettingsstoffen en antiseptica en van de stoffen die kunnen gebruikt worden voor de illegale vervaardiging van verdovende middelen en psychotrope stoffen, *B.S. 2 juni 2003*.

Wet van 11 mei 2003 houdende instemming met het Samenwerkingsakkoord tussen de Staat, de Gemeenschappen, de Gemeenschappelijke Gemeenschapscommissie, de Franse Gemeenschapscommissie en de Gewesten voor een globaal en geïntegreerd drugsbeleid, *B.S. 2 juni 2003*.

Wet van 7 februari 2014 tot wijziging van de wet van 24 februari 1921 betreffende het verhandelen van gifstoffen, slaapmiddelen en verdovende middelen, psychotrope stoffen, ontsmettingsstoffen en antiseptica en van de stoffen die kunnen gebruikt worden voor de illegale vervaardiging van verdovende middelen en psychotrope stoffen, *B.S. 10 maart 2014*.

Wetenschappelijk Instituut voor Volksgezondheid. (2002). *Gezondheidsenquête door middel van Interview (HIS), België, 2001*. Brussel: Wetenschappelijk Instituut Volksgezondheid.

Wetherell, M., Taylor, S., & Yates, S. J. (Eds.). (2001a). *Discourse as data*. London: Sage Publication.

Wetherell, M., Taylor, S., & Yates, S. J. (Eds.). (2001b). *Discourse theory and practice: a reader*. London: Sage Publications.

White, R. (2008). *Crimes against nature. Environmental criminology and ecological justice*. Collumpton: Willan Publishing.

- Wildavsky, A. (1979). *Speaking truth to power. The art and craft of policy analysis*. New Brunswick: Transaction Publishers.
- Willinsky, J. (2000). *If only we knew: increasing the public value of social science research*. New York: Routledge.
- Wittrock, B. (1991). Social knowledge and public policy: eight models of interaction. In P. Wagner (Ed.), *Social sciences and modern states: national experiences and theoretical crossroads* (pp. 333-353). Cambridge: Cambridge University Press.
- Wodak, A. (2008). Going soft on evidence and due process: Canada adopts US style harm maximization. *International Journal of Drug Policy*, 19(3), 226-228.
- Wodak, R., & Meyer, M. (Eds.). (2001). *Methods of Critical Discourse Analysis*. London: Sage Publications.
- Wodak, R., & Krzyzanowski, M. (Eds.). (2008). *Qualitative discourse analysis in the social sciences*. New York: Palgrave Macmillan.
- Wood, E., Kerr, T., Tyndall, M. W., & Montaner, J. S. G. (2008). The Canadian government's treatment of scientific process and evidence: inside the evaluation of North America's first supervised injecting facility. *International Journal of Drug Policy*, 19(3), 220-225.
- Woodiwiss, M. (2014). The analysis and containment of organized crime in Europe: an interview with Cyrille Fijnaut. *Trends in Organized Crime*, 17(4), DOI 10.1007/s12117-12014-19225-12119.
- Woods, M. (1998). Rethinking elites: networks, space, and local politics. *Environment and Planning*, 30(12), 2101-2119.
- Working document on the PWG provided by Mr. Claude Stoclet, n.d.
- Wouters, M. (2013). *Cannabis control: consequences for consumption and cultivation*. (PhD), University of Amsterdam, Amsterdam.
- Yin, R. K. (2003). *Case study research, design and methods*. Thousand Oaks: Sage.
- Yin, R. K. (2009). *Case study research: design and methods*. Los Angeles: Sage Publications.
- Young, J. (1971). *The Drug Takers: the social meaning of drug use*. London: Paladin.
- Young, K., Ashby, D., Boaz, A., & Grayson, L. (2002). Social Science and the Evidence-based Policy Movement. *Social Policy & Society*, 1(3), 215-224.
- Young, J. (2011). *The Criminological Imagination*. Cambridge: Polity Press.
- Zampini, G. (2014). *Values, science and harm reduction in drug policy: Can evidence neutralise morality?* Paper presented at the Eight Annual Conference of the International Society for the Study of Drug Policy, Rome.
- Zimmer, L., & Morgan, J. P. (1997). *Marijuana Myths Marijuana Facts: A Review Of The Scientific Evidence*. New York: Lindesmith Center.
- Zinberg, N. (1984). *Drug, set, and setting: the basis for controlled intoxicant use*. New Haven: Yale University.

APPENDIX I SCHEDULE DISCOURSE ANALYSIS

Source

Title

Type of publication

Publication date (refers to context)

Author(s) (refers to actors in the policy-making process)

Authority author(s) (Who wrote or said it? Who has the power to make decisions and how are they using their power?)

Context

Characteristics document: social practices - genre

The text is part of which social event(s) or social practice(s)?

Is the text part of a chain of texts or genres?

nature of the document

time (in policy process)

goal(s)

target population

commissioner

motivation for drawing the document

publication form

central theme/emphasis

Text

Drugs: discourse – difference – assumptions

Which (different) discourses are present in text?

What are the characteristics of the discourses pronounced in text? (e.g. the terminology and definition(s) of drug use or drug policy options used and the use of assumptions)

(textual) elements that characterize the discourse

terminology and definition of drug use/cannabis (differences)

decriminalisation – depenalisation – legislation -

'soft' vs. 'hard' drugs

assumptions

existential assumptions (i.e. assumptions about what exists, characterised by using classificatory categories)

prepositional assumptions (i.e. assumptions about what is or may be)

value assumptions (i.e. assumptions about what is good and/or bad)

ideological assumptions

Knowledge utilisation: intertextuality - evaluation - modality

How are the actors referring to or discussing scientific knowledge and what are their motivations?

Which types of knowledge utilisation are found?

What is the relationship of scientific knowledge to other forms of information available?

How do texts assess scientific knowledge in terms of good/bad or (un)desirable, affective attributes?

How do texts assess scientific knowledge in terms of truth and necessity? actors commit themselves to statements about good/bad or (un)desirable, affective attributes of scientific knowledge? (e.g. is more power and authority attributed to scientists than to other actors? which scientific knowledge is included and which are excluded)

Utilisation of scientific knowledge

Utilisation: whether scientific research is cited explicitly by mentioning specific studies or implicitly where studies are not identified (e.g. when the terms "research," "studies" or "evidence" are used without identifying the source)

Reference without content

Reference with content

Motivation for reference/utilisation: whether the research is cited in support of a statement, or where no clear position is taken

Modes of utilisation

Instrumental

Conceptual

Political/symbolic

Powerful selection mechanisms

Misuse

Precautionary principle

Other types of knowledge (not scientific research/scientist)

Form of knowledge

Utilisation: whether other forms of knowledge are cited explicitly or implicitly

Reference without content

Reference with content

Motivation for reference/utilisation: whether the knowledge is cited in support of a statement, or where no clear position is taken (discourse?)

Representation of scientific knowledge

Characteristics scientific knowledge

Qualitative – quantitative data

Theme/topic

Paradigm/Perception about drugs (terminology)

Quality judgments (timing – usefulness)

Actors: style

Which actors are represented?

How are actors represented in the text and from which perspective or viewpoint? (e.g. do they perceive themselves as experts or as having authority? are they part of a network? which (public) position do they take?)

Central actors

Policy-makers – scientists – media – interest groups

whether scientists are cited (explicitly by name or implicitly with no names mentioned, e.g. "researchers believe")

whether policy-makers are cited (explicitly by name or implicitly with no names)

whether media or interest groups are cited (explicitly by name or implicitly with no names)

Ideology – values – interests

whether the actors are cited in support of or against a statement/discourse, or where no clear position is taken

Scientist: public roles

Scientific experts

Policy advisors

Observer-turned players

Lonely prophets

Social movement theorists/activists

Networks

Reference to other actors

Representation of networks

Context: representation of social events

Which contextual elements play a role?

Context

Political context (window of opportunity)

Economic context - budget

Social/cultural context (normalisation, harmful characteristics cannabis)

International drug policy context (references to and evaluations of policy options in other countries)

APPENDIX II TOPIC LIST 'ELITE' INTERVIEWS¹

INTERVIEW SCHEDULE SCIENTISTS – PRACTITIONERS

Introduction: actor's involvement in the case

- How were you involved in the development of the Belgian drug policy between 1996 and 2003?
 - What was your role/title/job description?
 - In which phase(s) were you involved? (PWG-Intermezzo-FDN-Drug law reform)
 - How did you come to be involved, in effect how did you become to be involved in giving (scientific) knowledge to the policy-making process?
 - Why were you (not) reselected in the following discussion?
 - What level of involvement do you think you have had in the formation of the Belgian drug policy between 1996 and 2003?
 - Do you see yourself as a central actor/figure in the process or more on the edge of the process?
 - Based on your experience who was the most powerful in shaping Belgian drug policy between 1996-2003?
 - Can you explain in further detail your (personal/professional) relationship with who you see as the key players in the case?

Content of the debate

- What were the topics most discussed in the Parliament/Government? Were there evolutions regarding these topics?
- What were the arguments most commonly used in the Parliament/Government? Were there evolutions regarding these topics?
- Do you perceive there to be a visible policy network or community that has arisen over the issue of Belgian drug policy?
- How decisive do you perceive the argument of the international conventions?
- Based on your experiences and knowledge, did you perceive a difference between Flanders and the French-speaking part of Belgium?

Factors playing a role

1/ Scientific knowledge

Based on your experience and knowledge, what has been the role of scientific knowledge in this particular case? Can you give an example?

- In which phase(s) has scientific knowledge played a role?
- Which type of scientific knowledge was involved? Is there a hierarchy?
- Was some kind of scientific knowledge excluded consciously? If so why?
- How was scientific knowledge used in the debate? By who (not)?
- Has scientific knowledge been misused in the debate? By who (not)?

¹ Our topic list was inspired by the topic list used in the study of Monaghan (2008) and Duke (2002) completed with the topics raised during the analysis of the policy and media documents.

- You brought some expertise (of your own or of others) into the debate through your participation in the formal advisory structures (PWG – drug law reform).
 - Which (scientific) knowledge did you bring into the debate?
 - Do you see your work and the way it was handled as having any influence? If so why, if not why not?

- We found some references to scientific knowledge in the debates outside formal advisory structures.
 - Have you brought some scientific knowledge in these particular debates?
 - Which (scientific) knowledge did you bring into these particular debates?
 - Do you see this work and the way it was handled as having any influence? If so why, if not why not?

Specific question:

- Based on your experience or knowledge, what do you know about the incident with expert Claude Stoclet in the Parliamentary Working Group on drugs?

2/ Ideological, political motives

- Based on your experience and knowledge, what has been the role of ideological, political motives in this particular case? Can you give an example?
 - Was there a tension between science and ideology in the case?
 - Did the elections of 1999 or 2003 play a role?
 - Did the change in governmental coalition in 1999 play a role?

- Has your role or contribution been inspired or influenced by ideological, political motives? Why(not)? Can you give an example?

3/ Media

- Based on your experience and knowledge, what has been the role of the media in this particular case? Can you give an example?
 - In which phase(s) has the media played a decisive role?
 - How was the media used in this debate? By who?
 - What do you know about the media leaks that were organised during the debate?

- Has your role or contribution been inspired or influenced by the media? Why(not)? Can you give an example?
- Has the media covered your (scientific) knowledge? If so how? If not, why not?
- Are you aware that scientific knowledge is sometimes misrepresented in the media? Do you anticipate on this?

Specific question:

- Why was the media attention for the evaluation study of De Ruyver and Casselman (2000) rather limited even though the study seems to have played an important role in the case?

4/ Other factors

- Based on your experience and knowledge, what has been the role of **interest groups** in this particular case? Can you give an example?

- Which interest groups played a role?

- In which phase(s) and how do they have played a role?

- Interest groups were selected to participate in formal advisory structures (PWG – drug law reform). Was this participation influential in the formation of the Belgian drug policy between 1996 and 2003?

- Has your role or contribution been inspired or influenced by the **interest groups**? Why(not)? Can you give an example?

- Based on your experience and knowledge, what has been the role of the **public opinion** in this particular case? Can you give an example?

- Has your role or contribution been inspired or influenced by the **public opinion**? Why(not)? Can you give an example?

- Are there **other (f)actors** that have been playing an important role in these debates?

- Has your role or contribution been inspired or influenced by these **other (f)actors**? Why(not)? Can you give an example?

Closing questions

- Based on your own experience how do you see the relationship between scientific knowledge and policy with regard to the particular case? Is the development of the Belgian drug policy between 1996 and 2003 'evidence-based'?

- Who else is worth interviewing regarding this issue?

- Have you any suggestions about additional relevant documentation?

INTERVIEW SCHEDULE POLICY-MAKERS (GOVERNMENT – PARLIAMENT)

Introduction: actor's involvement in the case

- How were you involved in the development of the Belgian drug policy between 1996 and 2003?
 - What was your role/title/job description?
 - In which phase(s) were you involved? (PWG-Intermezzo-FDN-Drug law reform)
 - What level of involvement do you think you have had in the formation of the Belgian drug policy between 1996 and 2003?
 - Do you see yourself as a central actor/figure in the process or more on the edge of the process?
 - Based on your experience who was the most powerful in shaping Belgian drug policy between 1996-2003?
 - Can you explain in further detail your (personal/professional) relationship with who you see as the key players in the case?

Content of the debate

- What were the topics most discussed in the Parliament/Government? Were there evolutions regarding these topics?
- What were the arguments most commonly used in the Parliament/Government? Were there evolutions regarding these topics?
- Do you perceive there to be a visible policy network or community that has arisen over the issue of Belgian drug policy?
- How decisive do you perceive the argument of the international conventions?
- Based on your experiences and knowledge, did you perceive a difference between Flanders and the French-speaking part of Belgium?

Specific questions about 'hidden processes':

- What do you know about the debates within PWG or the Inter-cabinet working groups (FDN-Drug law reform)?
- Which actors played a decisive role in these 'hidden processes'?
- Which arguments were most commonly used?
- Which (f)actors have been playing an important role in these debates?
- What do you know about the inclusion of a reference to the Commission Le Dain in the attachment of the new drug law?
- What do you know about the petition for a plea for a decriminalization of the possession and use of drugs as well as for a legalization of the controlled distribution of drugs that was submitted by Mr. M. Hancisse (coordination radical anti-prohibitionist) in the PWG?

Factors playing a role

1/ Scientific knowledge

Based on your experience and knowledge, what has been the role of scientific knowledge in this particular case? Can you give an example?

- In which phase(s) has scientific knowledge played a role?
- Which type of scientific knowledge was involved? Is there a hierarchy?
- Was some kind of scientific knowledge excluded consciously? If so why?
- How was scientific knowledge used in the debate? By who (not)?

- Has scientific knowledge been misused in the debate? By who (not)?
- We found some references to scientific knowledge in policy documents.
 - Have you brought some scientific knowledge in these particular debates?
 - Which (scientific) knowledge did you bring into these particular debates?
 - Do you see this input and the way it was handled as having any influence? If so why, if not why not?
 - How are policy-makers informed about scientific knowledge? How do they have access to this information?

Specific question:

- Based on your experience or knowledge, what do you know about the incident with expert Claude Stoclet in the Parliamentary Working Group on drugs?

2/ Ideological, political motives

- Based on you experience and knowledge, what has been the role of ideological, political motives in this particular case? Can you give an example?
 - Was there a tension between science and ideology in the case?
 - Did the elections of 1999 or 2003 play a role?
 - Did the change in governmental coalition in 1999 play a role?
- Has your role or contribution been inspired or influenced by ideological, political motives? Why(not)? Can you give an example?

3/ Media

- Based on you experience and knowledge, what has been the role of the media in this particular case? Can you give an example?
 - In which phase(s) has the media played a decisive role?
 - How was the media used in this debate? By who?
 - What do you know about the media leaks that were organised during the debate?
- Has your role or contribution been inspired or influenced by the media? Why(not)? Can you give an example?
- Has the media covered your political interventions? If so how? If not, why not?
- Are you aware that scientific knowledge is sometimes misrepresented in the media? Do you anticipate on this?

Specific question:

- Why was the media attention for the evaluation study of De Ruyver and Casselman (2000) rather limited even though the study seems to have played an important role in the case?

4/ Other factors

- Based on you experience and knowledge, what has been the role of **interest groups** in this particular case? Can you give an example?
 - Which interest groups played a role?
 - In which phase(s) and how do they have played a role?

- Interest groups were selected to participate in formal advisory structures (PWG – drug law reform). Was this participation influential in the formation of the Belgian drug policy between 1996 and 2003?
- Has your role or contribution been inspired or influenced by the **interest groups**? Why(not)? Can you give an example?
- Based on your experience and knowledge, what has been the role of the **public opinion** in this particular case? Can you give an example?
- Has your role or contribution been inspired or influenced by the **public opinion**? Why(not)? Can you give an example?
- Are there **other (f)actors** that have been playing an important role in these debates?
- Has your role or contribution been inspired or influenced by these **other (f)actors**? Why(not)? Can you give an example?

Closing questions

- Based on your own experience how do you see the relationship between scientific knowledge and policy with regard to the particular case? Is the development of the Belgian drug policy between 1996 and 2003 ‘evidence-based’?
- Who else is worth interviewing regarding this issue?
- Have you any suggestions about additional relevant documentation?

INTERVIEW SCHEDULE MEDIA

Introduction: actor's involvement in the case

- How were you involved in the development of the Belgian drug policy between 1996 and 2003?
 - What was your role/title/job description?
 - In which phase(s) were you involved? (PWG-Intermezzo-FDN-Drug law reform)
 - What level of involvement do you think you have had in the formation of the Belgian drug policy between 1996 and 2003?
 - Do you see yourself as a central actor/figure in the process or more on the edge of the process?
 - Based on your experience who was the most powerful in shaping Belgian drug policy between 1996-2003?
 - Can you explain in further detail your (personal/professional) relationship with who you see as the key players in the case?

Content of the debate

- What were the topics most discussed in the Parliament/Government? Were there evolutions regarding these topics?
- What were the arguments most commonly used in the Parliament/Government? Were there evolutions regarding these topics?
- Do you perceive there to be a visible policy network or community that has arisen over the issue of Belgian drug policy?
- How decisive do you perceive the argument of the international conventions?
- Based on your experiences and knowledge, did you perceive a difference between Flanders and the French-speaking part of Belgium?

Factors playing a role

1/ Scientific knowledge

Based on your experience and knowledge, what has been the role of scientific knowledge in this particular case? Can you give an example?

- In which phase(s) has scientific knowledge played a role?
 - Which type of scientific knowledge was involved? Is there a hierarchy?
 - Was some kind of scientific knowledge excluded consciously? If so why?
 - How was scientific knowledge used in the debate? By who (not)?
 - Has scientific knowledge been misused in the debate? By who (not)?
- We found some references to scientific knowledge in policy documents.
- Have you brought some scientific knowledge in these particular debates through media coverage?
 - Which (scientific) knowledge did you bring into these particular debates?
 - Do you see this input and the way it was handled as having any influence? If so why, if not why not?
 - How are policy-makers informed about scientific knowledge? How do they have access to this information?

Specific question:

- Based on your experience or knowledge, what do you know about the incident with expert Claude Stoclet in the Parliamentary Working Group on drugs?

2/ Ideological, political motives

- Based on your experience and knowledge, what has been the role of ideological, political motives in this particular case? Can you give an example?
 - Was there a tension between science and ideology in the case?
 - Did the elections of 1999 or 2003 play a role?
 - Did the change in governmental coalition in 1999 play a role?
- Has your role or contribution been inspired or influenced by ideological, political motives? Why(not)? Can you give an example?

3/ Media

- Based on your experience and knowledge, what has been the role of the media in this particular case? Can you give an example?
 - In which phase(s) has the media played a decisive role?
 - How was the media used in this debate? By who?
 - What do you know about the media leaks that were organised during the debate?
 - Were there formal/informal connections between journalists in both parts of the country?
- We found some references to scientific knowledge in media documents.
 - Have you brought some scientific knowledge into media coverage?
 - Which (scientific) knowledge did you cover?
 - Are you aware that scientific knowledge is sometimes misrepresented in the media?
 - Do you see this input and the way it was handled as having any influence on the policy-making process? If so why, if not why not?
 - How are policy-makers informed about scientific knowledge? How do they have access to this information?

Specific question:

- Why was the media attention for the evaluation study of De Ruyver and Casselman (2000) rather limited even though the study seems to have played an important role in the case?

4/ Other factors

- Based on your experience and knowledge, what has been the role of **interest groups** in this particular case? Can you give an example?
 - Which interest groups played a role?
 - In which phase(s) and how do they have played a role?
 - Do interest groups play a role in the policy-making process through the media?
 - Interest groups were selected to participate in formal advisory structures (PWG – drug law reform). Was this participation influential in the formation of the Belgian drug policy between 1996 and 2003?

- Has your role or contribution been inspired or influenced by the **interest groups**? Why(not)?
Can you give an example?

- Based on you experience and knowledge, what has been the role of the **public opinion** in this particular case? Can you give an example?

- Has your role or contribution been inspired or influenced by the **public opinion**? Why(not)?
Can you give an example?

- Are there **other (f)actors** that have been playing an important role in these debates?

- Has your role or contribution been inspired or influenced by these **other (f)actors**? Why(not)?
Can you give an example?

Closing questions

- Based on your own experience how do you see the relationship between scientific knowledge and policy where regard to the particular case? Is the development of the Belgian drug policy between 1996 and 2003 'evidence-based'?

- Who else is worth interviewing regarding this issue?

- Have you any suggestions about additional relevant documentation?

INTERVIEW SCHEDULE INTEREST GROUPS

Introduction: actor's involvement in the case

- How were you involved in the development of the Belgian drug policy between 1996 and 2003?
 - What was your role/title/job description?
 - In which phase(s) were you involved? (PWG-Intermezzo-FDN-Drug law reform)
 - What level of involvement do you think you have had in the formation of the Belgian drug policy between 1996 and 2003?
 - Do you see yourself as a central actor/figure in the process or more on the edge of the process?
 - Based on your experience who was the most powerful in shaping Belgian drug policy between 1996-2003?
 - Can you explain in further detail your (personal/professional) relationship with who you see as the key players in the case?

Content of the debate

- What were the topics most discussed in the Parliament/Government? Were there evolutions regarding these topics?
- What were the arguments most commonly used in the Parliament/Government? Were there evolutions regarding these topics?
- Do you perceive there to be a visible policy network or community that has arisen over the issue of Belgian drug policy?
- How decisive do you perceive the argument of the international conventions?
- Based on your experiences and knowledge, did you perceive a difference between Flanders and the French-speaking part of Belgium?

Factors playing a role

1/ Scientific knowledge

Based on your experience and knowledge, what has been the role of scientific knowledge in this particular case? Can you give an example?

- In which phase(s) has scientific knowledge played a role?
 - Which type of scientific knowledge was involved? Is there a hierarchy?
 - Was some kind of scientific knowledge excluded consciously? If so why?
 - How was scientific knowledge used in the debate? By who (not)?
 - Has scientific knowledge been misused in the debate? By who (not)?
-
- You brought some expertise (of your own or of others) into the debate through your participation in the formal advisory structures (PWG – drug law reform).
 - Which (scientific) knowledge did you bring into the debate?
 - Do you see your work and the way it was handled as having any influence? If so why, if not why not?
-
- We found some references to scientific knowledge in the debates outside formal advisory structures.
 - Have you brought some scientific knowledge in these particular debates?
 - Which (scientific) knowledge did you bring into these particular debates?

- Do you see this work and the way it was handled as having any influence? If so why, if not why not?

Specific question:

- Based on your experience or knowledge, what do you know about the incident with expert Claude Stoclet in the Parliamentary Working Group on drugs?

2/ Ideological, political motives

- Based on your experience and knowledge, what has been the role of ideological, political motives in this particular case? Can you give an example?
 - Was there a tension between science and ideology in the case?
 - Did the elections of 1999 or 2003 play a role?
 - Did the change in governmental coalition in 1999 play a role?
- Has your role or contribution been inspired or influenced by ideological, political motives? Why(not)? Can you give an example?

3/ Media

- Based on your experience and knowledge, what has been the role of the media in this particular case? Can you give an example?
 - In which phase(s) has the media played a decisive role?
 - How was the media used in this debate? By who?
 - What do you know about the media leaks that were organised during the debate?
- Has your role or contribution been inspired or influenced by the media? Why(not)? Can you give an example?
- Has the media covered your interventions? If so how? If not, why not?

4/ Interest groups

- Based on your experience and knowledge, what has been the role of interest groups in this particular case? Can you give an example?
 - Which interest groups were involved in which phase(s) of the debate?
 - Were there formal/informal connections between interest groups in both parts of the country?
 - Do interest groups play a role through the media?
 - Interest groups were selected to participate in formal advisory structures (PWG – drug law reform). Was this participation influential in the formation of the Belgian drug policy between 1996 and 2003?
 - Do you see the activities of interest groups outside the formal advisory structures and the way it was handled as having any influence? If so why, if not why not?
- Did you have any formal/informal contacts with policy-makers, scientists, practitioners or journalists?

5/ Other factors

- Based on your experience and knowledge, what has been the role of the **public opinion** in this particular case? Can you give an example?

- Has your role or contribution been inspired or influenced by the **public opinion**? Why(not)?
Can you give an example?

- Are there **other (f)actors** that have been playing an important role in these debates?

- Has your role or contribution been inspired or influenced by these **other (f)actors**? Why(not)?
Can you give an example?

Closing questions

- Based on your own experience how do you see the relationship between scientific knowledge and policy where regard to the particular case? Is the development of the Belgian drug policy between 1996 and 2003 'evidence-based'?

- Who else is worth interviewing regarding this issue?

- Have you any suggestions about additional relevant documentation?