

# “We don’t have any answers within the current framework”: tensions within cannabis policy change in Ireland

Chris Ó. Rálaigh and Sarah Morton

## Abstract

**Purpose** – *International policy approaches to cannabis production and use are changing rapidly, and within the Irish context, alternatives to prohibition are being considered. This study aims to explore policymaker’s attitudes towards the decriminalisation and legal regulation of cannabis for recreational use in the midst of an unfolding policy process, examining the degree which a “policy window” might be open for the implementation of cannabis policy change.*

**Design/methodology/approach** – *Semi-structured interviews were held with eight key informants within the policy field in Dublin, Ireland. Kingdon’s (2014) Multiple Streams framework was used to consider whether the problems, policy and political streams were aligning to support progressive policy change.*

**Findings** – *Irish policymakers indicated broad support for the decriminalisation of cannabis. The legal regulation of cannabis received more qualified support. Existing policy was heavily criticised with criminalisation identified as a clear failure. Of particular interest was the willingness of policymakers to offer opinions which contrasted with the policy positions of their organisations. While a policy window did open – and close – subsequent governmental commitments to examine the issue of drugs policy in a more deliberative process in the near future highlight the incremental nature of policy change.*

**Originality/value** – *This study provides unique insight into the opinions of policymakers in the midst of a prolonged period of policy evolution. A latent aspiration for historical policy change was situated within the realpolitik of more traditional approaches to policy development, demonstrating that the alignment of Kingdon’s (2014) problem, policy and political streams are essential for change in cannabis policy.*

**Keywords** Ireland, Policymakers, Decriminalisation, Cannabis, Cannabis policy, Drugs policy

**Paper type** Research paper

Chris Ó. Rálaigh is based at the Department of Humanities, Technological University Dublin, Dublin, Ireland. Sarah Morton is based at the School of Social Policy, Social Work and Social Justice, University College Dublin, Dublin, Ireland.

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## Introduction and background

Cannabis is the most widely used illicit drug in Ireland, with usage rates and associated health harms steadily increasing over the past two decades (Department of Health, 2017; EMCDDA, 2019). Regulation of cannabis in Ireland has remained broadly rooted within a prohibitionist policy framework, despite a substantially altered political and sociocultural context. However, regulatory alternatives to the production, sale and use of cannabis in European and American nations (Hughes *et al.*, 2018) have added a dynamic element to Irish policy debate (Smyth *et al.*, 2019), with policymakers discussing policy responses more consonant with international developments (Department of Health, 2017). Within this context, this study explores the attitudes of Irish political representatives and other key policymakers towards the regulation of cannabis for recreational use. The term recreational cannabis is used to describe non-medicinal use, though acknowledging that debates are emerging on terminology and descriptive terms for cannabis composition and use patterns (Mason *et al.*, 2021). Set against a historic review of Irish drugs policy, this article examines findings from the study using Kingdon’s (2014) multiple streams theory (MST) of policy change.

## Multiple streams theory for considering policy change

Kingdon's (2014) MST conceives of three process streams flowing through the policymaking system. The problems stream is concerned with identifying and defining the problems facing policymakers, assessing their magnitude, explaining how they arise and measuring their prevalence (Kingdon, 2014). The policy stream is the space in which policy options are considered and which ultimately advises policymakers as to the most effective course of action; the political stream is where governments make politically acceptable policy decisions which fit with prevailing policy and/or are consonant with the public mood (Kingdon, 2014).

Kingdon (2014) maintains that these streams operate as largely independent of one another but join at certain critical junctures; potential policy solutions become conjoined to the pre-existing policy problem, which in turn are supported by favourable political forces. This "coupling" is most likely to succeed when policy windows are open with a "compelling problem" or when political changes force open the policy window (Kingdon, 2014, p. 20). However, policy windows open relatively briefly and infrequently. Which policy solutions are marshalled in to successful policy change and which fall in to the category of lost opportunities are determined by the list of policy alternatives, the strength of organised political forces, the public mood and the governing political party or coalition (Kingdon, 2014).

This offers a credible, if somewhat formulaic approach to policy analysis, though one that is not without critique. Although MST identifies the policy process as incremental in nature, Durant and Diehl (1989) argue that policy streams can present as both incremental and non-incremental: in regards cannabis policy, this might help explain why certain US states opted for legal regulation as a first option, as opposed to a more incremental trajectory of decriminalisation–legal regulation. Elsewhere, Ness (2010) argues that policy is not a separate stream but a broader, separate environment in which the problem and politics streams flow. While valid critiques, MST in its original form has been used to analyse changes to cannabis policy within the UK (Brewster, 2018), Uruguay (Quierolo *et al.*, 2019) and Western Australia (Hyshka, 2009). Changes within the political stream were found to be critical to regulatory change (Brewster, 2018), whereas demands for public safety, combined with the presence of favourable political leaders and a favourable political environment have also been found to be key to change within this model (Quierolo *et al.*, 2019; Hyshka, 2009).

### *Irish drugs policy and change*

Although change has been a feature of Irish drugs policy, it has been identified as slow and gradual (O'Shea, 2007; Pike, 2014), ambiguous in nature (Butler and Mayock, 2005) and featuring "long periods of almost total quiescence interspersed with frenzied bursts of activity" (Butler, 2007, p. 141). Crises have been the traditional catalyst for policy change, with a mixture of prolonged and sharp crises – "the sort of thing government decision makers cannot ignore" (Kingdon, 2014, p. 95) – over the past four decades. The early 1980s witnessed substantial – and for Ireland, novel – heroin consumption with subsequent community anti-drugs activism and media attention (Butler, 1991), leading to an amended *Misuse of Drugs Act* with an enhanced criminal justice mandate. During the late 1980's and early 1990s, concerns regarding the nexus between injecting drug use and HIV transmission (O'Gorman, 1998) prompted the inclusion of harm reduction measures in the *Government Strategy to Prevent Drug Misuse* (Department of Health, 1991). A second opiate epidemic in the mid-1990s erupted into public consciousness following the murder of journalist Veronica Guerin by criminal elements associated with the illicit drugs trade (O'Gorman, 1998) led to the first National Drugs Strategy (NDS) (Butler, 2007). A fourth crisis arose in the late 2000s as novel psychoactive substances (NPS) entered the Irish

drug landscape; health concerns, media coverage and public protest led to swift legislative change to end the legal supply of NPS's and the closure of the "head shops" (Kavanagh and Power, 2014). Within the most recent decade increased consumption patterns, an associated expansion in health harms (EMCDDA, 2019; Smyth *et al.*, 2019) the heightened violent criminal activity associated with the illicit drugs trade (Connolly and Buckley, 2016; Government of Ireland, 2015) have led to further policy action. Subsequently, we have seen incremental, and at times stuttering moves, from an abstinence-led to a public health-led approach. Within the most recent decade, increased consumption patterns, an associated expansion in health harms (EMCDDA, 2019; Smyth *et al.*, 2019), and heightened violent criminal activity associated with the illicit drugs trade (Connolly and Buckley, 2016; Government of Ireland, 2015) have led to further policy action.

## Cannabis policy in Ireland

The status of cannabis has remained effectively unchanged since the original 1977 Misuse of Drugs Act, which contained provisions for cannabis possession offences to be treated more leniently relative to other drug possession offences (Government of Ireland, 1977). All major political parties oppose legal regulation, whereas two minor political parties support some form of legal regulation. A 2013 motion to the national parliament to legally regulate cannabis was defeated by 112–8 (Pike, 2014). More recently, however, a confluence of issues relating to cannabis have arisen, which while failing to reach the peak points of previous crises, have nevertheless placed cannabis on to the political agenda. These include noticeable increases in cannabis usage rates (EMCDDA, 2007; EMCDDA, 2019); increases in tetrahydrocannabinol potency levels; synthetic cannabinoid usage; increased health harms and treatment rates (Smyth *et al.*, 2019) and drug-related intimidation (DRI) within working-class communities (Connolly and Buckley, 2016). In addition, following an emotive and successful public campaign to allow access to medicinal cannabis for her epileptic daughter, led by Mother and activist Vera Twomey (Keller, 2020) a pilot Medical Cannabis Access Programme was introduced in 2019.

### *Recent developments in Irish drugs policy*

Recent policy developments in Ireland are situated within an evolving international policy environment. The decriminalisation of illicit drugs and the legal regulation of cannabis has been to the forefront of recent policy change in the Americas and Europe (Hughes *et al.*, 2018). Eleven European nations have differing degrees of decriminalisation policies contained within their respective criminal codes (Talking Drugs, 2021), whereas Mexico, Uruguay, Canada and 17 US states have legislated for the legal regulation of cannabis. The European Union (EU) Drugs Strategy 2021–2025, meanwhile, commits EU nations to providing at least one alternative to coercive sanctions (Council of Europe, 2021).

In 2015, the Irish parliament, on the back of a substantial increase in violence associated with the illicit drugs market, charged a committee to investigate policy alternatives to criminal sanctions for the possession of illicit drugs (Government of Ireland, 2015). The committee – comprised of cross-party-elected representatives proposed the removal of criminal sanctions for the possession of small amounts of drugs and their replacement with administrative/criminal response. The latest NDS, *Reducing Harm, Supporting Recovery* (Department of Health, 2017) established a civil service-led *Working Group to Consider Alternative Approaches to the Possession of Drugs for Personal Use* which reported in mid-2019. Subsequently, the Irish Government adopted a Health Diversion Approach (HDA) which offers alternatives to criminalisation for the first two occasions in which a person is found in possession of drugs for personal use (Department of Health, 2019b). Following parliamentary elections in February 2020, the new government committed to the convening of the Citizens Assembly to discuss illicit drug use and policy, including the consideration of decriminalisation (Government of Ireland, 2020). It is against this backdrop that this study sought to explore policymakers' attitudes

towards the decriminalisation and legal regulation of cannabis use with a view to understanding how this might contribute to policy change.

### *Methodology*

A qualitative approach comprising of semi-structured interviews with key policymakers was chosen in hopes of obtaining a rich, narrative-led perspective on the subject matter (Hartnoll, 2000). This was informed by Kingdon's (2014) MST, which has been used to consider illicit drugs policy change in general (Hayle, 2015; Lancaster *et al.*, 2014) and cannabis policy specifically (Lenton, 2004; Hyshka, 2009; Quierolo *et al.*, 2019). Within the Irish context, policymakers include elected representatives, political parties and community and voluntary (Ferris, 2015). The importance of elected representatives on the legislative and policy process has increased in recent years because of the empowerment of parliamentary subcommittees, particularly in relation to drug legislation such as Safe Injecting Facilities (Martin, 2017). Eight policymakers were interviewed in this study, five elected representatives and three from the community and voluntary sector.

### *Procedure*

A research participant inclusion criterion was developed based on the proximity to policymaking and the strength of influence on policy development, with participants identified using several purposive sampling processes (Robson and McCartan, 2016). An internet search was used to identify the current or former drugs spokespersons for the political parties and technical groupings represented in the Irish parliament. Then relevant public drugs policy bodies and possible participants were identified from a review of contributions to the NDS. Finally, participants were identified through the knowledge and networks of the co-authors of drug intervention agencies. Participants were identified from each of the seven political parties and three technical groups – elected parliamentarians who collaborate to form a loose coalition large enough to be afforded speaking rights – represented in the 158-seats Irish parliament. A total of nine elected representatives were invited to participate in the research, with five agreeing. These five representatives of political parties and technical groupings comprised, on a pro-rata basis, approximately 80% of total Dáil representation and included the three largest political parties each of which have traditionally held conservative positions regarding drugs policy allowing for a cross-section of opinion to be voiced. Each of the elected representatives were former or current spokesperson for drugs policy or justice policy. Given their proximity to power and the policymaking process, the political representatives could be considered as “elites” which can pose methodological challenges including access, researcher-subject power inequalities and data richness and reliability (Delaney, 2007). It has been argued that elected representatives may be unwilling to voice genuine opinions regarding drugs policy and their promotion of the “official line” (Brewster, 2018). In this case, the elected representatives mostly engaged thoroughly and openly, offering personal and candid opinions, perhaps in part because of the localised nature of the political system (Randall, 2011).

Of the remaining three participants, two were drawn from service provider and drugs support organisations within the broader community and voluntary sector, with the individuals holding policy roles within their respective organisations. The final participant was a member of the National Oversight Committee of the National Drug Strategy. Of the combined eight research participants, five were men and three women. Ethical approval for the study was obtained from the second author's university ethical review committee.

The interview questions focussed on the emerging policy frameworks covering the use and supply of cannabis in Ireland and internationally, policy context and decriminalisation and legal regulation of cannabis. The questions were set out in an iterative manner to encourage

reflection and robust consideration of the issues to hand (Johnson and Christensen, 2004). The interviews were held in 2018, in between the Oireachtas Committee's and the Working Groups' reports, and conducted in person, other than one, in which responses were provided in written format. Interviews lasted from 25–45 min and were conducted by the primary author. All in-person interviews were recorded and transcribed, while the field researcher also recorded reflexive notes during the interviews. Research participants were anonymised using basic alphanumeric coding.

The transcripts were analysed thematically following Braun and Clarke's (2012) six-stage process. Areas of similarity and overlap were identified and "clustered" to allow for the development of themes and subthemes, which congealed around existing and alternative policy and prior to final thematic selection, were checked against the entire data set to test veracity. The process of theory selection was inductive – the alignment with Kingdon's (2014) framework became apparent when the thematic analysis of the data revealed policymaker's criticism of existing policy in addition to their opinions on alternative policy.

## Results

This research provided a unique insight in to the opinions of policymakers in the highly politicised and contested area of illicit drugs policy (Lancaster *et al.*, 2014) in the midst of the policymaking process itself, and at a point where two policymaking bodies were considering alternatives to criminalisation for drug possession. In line with Kingdon (2014), it was found that participants' responses broadly aligned with MST's core concepts of policy "problems", "policy" and "political" streams.

### Policymakers' critiques of existing cannabis policy

The research participants critiqued existing policy from social justice, criminal justice and health perspectives offering a shared acknowledgement of the limitations and failings of the current approach. The key issue of the failure of criminalisation underpinned the responses from within each of these perspectives. From the social justice perspective, it was felt that criminalisation impacted a cannabis users' access to employment and educational opportunities, impacted general life opportunities and increased their engagement with illicit activity. Protecting cannabis users from the criminalisation process was identified by one participant, who linked this to the longer term implications of criminal conviction including housing, travel and employment opportunities:

I've seen the impact of criminalisation on people's lives [ . . . ] and the escalation through their life's stories [ . . . ] [ . . . ] if someone's caught smoking a joint at Electric Picnic and that shows up on the Garda Clearance....And the impact that has on young people who use cannabis. (Participant 5)

Class disparities in policy application were highlighted by several participants:

I'm conscious that very many young men and women get criminal convictions at an early stage of their lives on the basis of possession of cannabis. It can lead to stigmatization of those individuals [ . . . ]. The reality is there is a socio-economic divide in respect of the taking of drugs as well. Many people in middle-class areas [ . . . ] take cannabis for recreational purposes – very few of them face the law in relation their criminal activity. (Participant 6)

Existing policy was critiqued from a criminal justice perspective with several participants emphasising the failure of existing policy to adequately deal with DRI and other forms of violence. Encapsulating this shared critique, one participant argued that current drug policy shared co-responsibility with the substances themselves for community-based drug harms:

You can see that the drug trade and the impact of it, is as bad as the drug use problem [ . . . ] if something is illegal, it will be run by criminals [ . . . ] people ask us what are the answers, well we

haven't got any answers within the current framework [...] [...] the major reason we have to change what we are doing is the drug related intimidation, the violence [...] (Participant 4)

The intersection of health issues with the application of criminal justice sanctions was a third aspect within the overall critique of existing policy:

I believe that it is counterproductive to criminalise any young person, or not so young person, who has an addiction – whether that is a chronic addiction or a recreational addiction to cannabis or any other drug. (Participant 2)

Another participant understood substance use dependency as a medical issue:

Addiction is recognised as an illness [...] it generally comes up as mental health [...] so why on earth would we be looking to criminalise people for it? (Participant 4)

### **Policymakers' opinions on policy change**

Research participants articulated a clear preference for changes to cannabis policy, with substantial support proffered for the decriminalisation of cannabis and a willingness to consider legal regulation as a legitimate policy option. No research participant offered a definitive rejection of decriminalisation as an alternative policy approach. Support for both policy alternatives lay firmly grounded in the participants critiques of existing policy, with decriminalisation and legal regulation idealised as policy to the policy failings within the domains of social justice, criminal justice and health.

Social justice concerns dominated the support for decriminalisation and centred on the benefits of protecting cannabis users from criminal prosecution. Highlighting the Portuguese model of decriminalisation, one participant stated:

That's a model that, you know, takes people out of the criminal justice system, saves people's lives, which is the important thing for me, and it decriminalizes the person. (Participant 1)

This use of existing regulatory models and contemporary research was a recurring theme used by participants to support their calls for policy change:

So, from the point of view of what the research is telling me, I would support decriminalisation [...] [...] I've seen the research and decriminalisation brings people in to the services that they need to be in. (Participant 5)

What was happening in other jurisdictions was felt to be key:

We have evidence from countries that have decriminalised. More importantly we have evidence stretching back over 50 or 60 years of the harms of criminalisation [...] [...] when you have something that is criminalised, that brings with it a whole load of negative consequences that aren't there in a decriminalised system. (Participant 3)

There was qualified support for the legal regulation of cannabis for recreational purposes among the participants. Several participants evinced unequivocal support for this form of regulation, whereas others offered more nuanced and contingent support. Of note, however, no participant offered an explicit opposition to legal regulation as a policy option. Those participants unequivocally supporting legal regulation centred their arguments within the criminal justice policy domain, specifically on the positive impact legal regulation could have on countering criminal activity and DRI.

So it should be regulated, the state should take it out of the hands of criminal activity. Regulate it, legislate for it [...] [...] bring it in to a form that it is controlled, not by kind of individuals that really, sometimes are unscrupulous. (Participant 1)

This response typified those concerns centred around removing the profit motive from illicit cannabis production and sale from criminal organisations.

Several of the participants offered a more nuanced position, with potential support for legal regulation contingent on the establishment of an evidence base:

How do I term this [...] I'm not opposed to it, but I think it would have to be done under very calm and detailed steps you know. And I feel in Canada they had sort of a forum that discussed all of the details of this – sort of like our citizens assembly over here – [...] [...] [...] it would have to happen in Ireland before I'd make a full position on it. But at the end of the day, the ones who are making money on it are the cartels, the gangs. They're making rich pickings on the poverty and the dire situation that drug users find themselves in. (Participant 7)

## Challenges to adoption of policy alternatives

Two clear challenges to the adoption of alternative policies were identified within the data was the incongruencies between the personal and organisational views of research participants, and the identification of potential temporal and political blockages within the policymaking process itself. The incongruencies between the participants personal and organisational policy positions were stark. Participants consistently voiced opinions which stood in direct contradiction to the policy positions of their organisations in relation to both decriminalisation and legal regulation. Offering explicit support for the decriminalisation and legal regulation of cannabis, in direct contrast to the policy position of their organisation, a participant stated:

Again, the party position is as outlined above (relating to decriminalisation). My own personal position is that I am in favour of legalising cannabis for personal use. (Participant 2)

Several participants noted the constraints imposed upon them via their organisation's policy or lack thereof, as well as operational constraints and tactical restraints:

So, from a personal perspective, I would probably be in favour of cannabis regulation. I think that it's a kind of a difficult thing for people working in drugs policy to comment on, as one of the things we're always focused on is making sure that we have the evidence to back stuff up [...] (Participant 3)

Concerns regarding the potential blockages to the development of alternatives to cannabis policy change centred on the historically incremental nature of drug policy development in Ireland, including both procedural impediments and a fear around the swiftness of any changes:

The policy is going in the right direction. So if it goes too fast, too quick, too soon, there could be retrenchment [...] so I think if we get the decriminalisation through, maybe in the future. (Participant 5)

Political opposition to any policy change was also a major concern in relation to any possible reform. This was summed up by one participant:

The biggest challenge to bringing in decriminalisation into Ireland at the moment is the political establishment. There's no appetite to decriminalise drugs, even something as minor as cannabis for personal use. The reason for that I honestly don't know – is it fear, is it public opinion [...] so for me the biggest challenges are trying to convince the policymakers of the benefits of it and I don't think that they actually know enough about it. (Participant 2)

## Discussion and conclusion

A review of the national policy milieu and specifically the establishment of the Oireachtas committee and the Working Group indicated that some form of change to cannabis policy or broader illicit drugs policy was likely. The form and content of this likely change however was less certain. The relational aspect between this study's findings and the Oireachtas committee and Working Groups recommendations were of particular interest. This study's participants were predominantly drawn from a pool of elected representatives, reflecting the highly centralised nature of policymaking in Ireland (Dukelow and Considine, 2017); however, noticeable difference of opinion emerged between elected representatives and participants

from the remaining public and voluntary bodies. The grouping offered membership parallels with the Oireachtas committee yet stood in contrast with the civil service membership of the Working Group. Although there was consensus on the failings of existing policy and support for specific policy alternatives, this support was heavily circumscribed by the incongruencies between the participants' personal and organisational positions and their view of what was politically achievable within the *realpolitik* of the policymaking process.

Within MST theory, the problems, policy and political streams must be open for significant policy change to occur (Kingdon, 2014). Kingdon (2014) argues that problems often present via systematic indicators – in the case of cannabis use in the Irish context, these indicators have been increased health impacts, DRI and criminal justice convictions (EMCDDA, 2017; Department of Justice and Equality, 2017). These issues were contributory factors leading to the establishment of the Oireachtas committee and the Working Group (Department of Health, 2019) indicating that the problems stream was open. This was reiterated by the participants, who highlighted the failings of existing policy to deal with these three key policy challenges.

This study is the first of its kind to identify Irish policymakers broad support for the decriminalisation of cannabis. The significant backing for this policy alternative and the more qualified support for the legal regulation of cannabis suggests that in MST terms, the policy stream was open for some form of progressive policy change (Kingdon, 2014). That the strong support for alternatives was explicitly based on the failings of existing policy, strengthens this proposition and demonstrates the dialectical relationship between the two streams and their potential alignment. Confusing this analysis however was the subsequent publication of the Working Groups findings. This body offered policy alternative which fell short of decriminalisation. The state subsequently adopted significant aspects of these recommendations in the form of the HDA allowing for health-led interventions as an alternative to criminal sanctions yet retaining the traditional approach for repeated offences (Department of Health, 2019b). It is of interest that the Working Group's policy proposals did not correlate with the desire for decriminalisation expressed by the participants in this study. One potential reason for this discrepancy could be the specific focus on cannabis within this study, and the broader remit afforded the aforementioned groups which extended to the consideration of possession of all illicit substances. While the policymakers within this study group were broadly supportive of the liberalisation of cannabis policy, greater diversity of opinion was recorded regarding liberalising all illicit drugs – though it should be noted that the research questions focussed exclusively upon cannabis. Interestingly, the research report which informed the Working Groups considerations suggested a hybrid of approaches such as depenalisation for possession of cannabis (Department of Health, 2019a). An additional divergence can be attributed to the clear distinctions within the make-up of the different policymaking groups and it is of note that elected representatives – those ultimately charged with agreeing to policy change – were willing to offer support for more progressive change than a group comprised of civil servants. Certainly, the Working Groups recommendations align more clearly with the gradual and incremental nature of drugs policy development in Ireland, with one explanation for this being the government-appointed nature of the membership. The commitment to convene the Citizens Assembly, meanwhile, – which will include deliberations on decriminalisation – provides further evidence of the incremental nature of policymaking processes associated with this most recent round of crisis and policy development.

The incongruencies between the personal positions espoused by research participants and the policy positions of their respective organisations were pronounced. Of the eight research participants, six articulated antagonistic viewpoints to those of their political parties, public bodies or employers. These incongruencies were reflected in their responses to both decriminalisation and legal regulation. Each of the six identified differing reasons behind their antagonistic viewpoint, further muddying the waters between the personal and organisational opinions. This exemplifies how institutional and political pressures can contribute to incongruencies in drug policy change process (Brewster, 2018). Were these incongruencies to remain unresolved, they

could present as a potential blockage to change within any future policy window. A further point of interest relates to the potential impact of the roles of the research participants within their organisations upon their views, particularly in the case of elected representatives. Spokespersons for specific policy areas are obviously exposed to and accumulate broader knowledge regarding their specific area of appointment than their political party colleagues. It may be that this more developed understanding of the failings associated with existing illicit drugs policy contributed towards the divergence between their personal positions and those of their organisations.

The Working Group's recommendations obviated any requirement for legislative change, thereby negating any requirement for political support from elected representatives, which, it could be argued, may be contentious with their constituents. This potential acceptability of decriminalisation or legal regulation as policy options is key. Kingdon argues that the "coupling" of the problem and political streams allows policymakers to "reach into the policy stream for an alternative that can reasonably be seen as a solution" (2014:174), but also draws attention to the importance of "the national mood" – the political culture or contemporary public opinion and how this may impact on the political acceptability of policy proposals. This dynamic was also found to be critical in blocking cannabis policy reform in Canada in 2006 (Hyshka, 2009) and regulation of drug consumption rooms in the UK (Hayle, 2015). In contrast, Quierolo *et al.* (2019) attribute cannabis policy reform in Uruguay to the support received from crucial political elites within government. Similarly, Wesley (2019) draws attention to the defining role played by political elites in creating a window of opportunity for eventual cannabis policy reform in Canada.

It seems pertinent to question whether a second policy window more reflective of this study's findings could open in the future. Kingdon (2014) argues that changes within either the public mood, balance of power between organised political forces or changes in national administration are required to precipitate such change. Although the most recent general election in Ireland demonstrated a desire for political and policy change at a national level (Irish Times, 2020), drugs policy did not feature heavily during within the campaign (Ryan, 2020). One could conclude that the time for change arrived and passed, as policymakers felt they had addressed the issue through the adoption of the HDA, and "even if they have not, the fact that some action has been taken brings down the curtain on the subject for the time being" (Kingdon, 2014, p. 169). The adoption of this policy option does not suggest, however, that the policy window for additional policy change has closed entirely, given Ireland's history of slow, gradual and incremental policy development. The Citizen's Assembly presents as the next obvious space for policy deliberation and potential instigator for change: recent Citizens Assemblies focussed on marriage equality and the historically polarising topic of abortion (Devaney *et al.*, 2020) have both led to constitutional change. Should the Citizens Assembly recommend a referendum or some form of legislative change to consider decriminalisation, this may provide the political cover, and the policy window, required for elected representative to consider further policy change.

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## Corresponding author

Chris Ó. Rálaigh can be contacted at: [chris.oralaigh@tudublin.ie](mailto:chris.oralaigh@tudublin.ie)

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