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**Policy, Theory, Politics:
problem representations in drug and gambling policy**

This paper introduces a novel approach to thinking about policy formulation. The approach, called 'what's the problem represented to be?', draws attention to the need to interrogate the ways in which policy proposals constitute the 'problems' they purport to address (Bacchi 1999). This insight is applied to a range of dominant and sub-dominant representations of the 'problems' of drug use/'abuse' and 'problem gamblers/gambling'. The hope is that this conceptual tool can become a useful theoretical intervention in necessarily political debates about approaches to these issues. The wider usefulness of the approach is also addressed in passing.

Opening propositions

The paper takes as its starting point the need to consider relationships between policy, theory and politics in the specific areas of drug and gambling policy, but also more generally. An initial proposition is that any and all policy has built into it an understanding of what the problem is. The second claim is that **any such understanding constitutes a theory about causality and the processes of social change.** This is the case both with explanations that explicitly identify their interventions as theoretical in nature and with those that do not do this. The latter, often put forward as 'descriptive' (or evidence-based, or empirical) accounts, have imbedded within them particular understandings about the nature of evidence and the grounds for claim-making, understandings which are in essence theoretical.

The third opening proposition is that **all theories are political in nature.** Here it is useful to think about theory as a verb rather than as a noun. This shift draws attention to those who practice *theorizing* and their necessary positioning as social actors. It follows that theorizing is 'a political practice always and inescapably implicated with power' (McClure 1992: 365). Theories are therefore forms of political action and intervention.

The kind of argument developed here can and needs to be applied in three realms: government policy, academic analyses, and media representations. In each case we require a methodology that will enable us:

- to identify the theories that underpin proposals/analyses; and
- to tease out the political implications of specific theoretical commitments.

As a means to accomplish these tasks, I introduce a ‘what’s the problem represented to be?’ approach to policy – a conceptual tool for identifying and interrogating understandings of 'social problems' (i.e. for identifying theoretical premises and teasing out political implications), in the process exploring discursive resources for reconceptualisation. For elaboration of the approach please refer to *Women, Policy and Politics: the construction of policy problems* (Sage 1999), especially Chapter 3.

The approach constitutes a fundamental challenge to conventional forms of policy analysis. To illustrate this point consider this quote from a recent (2004) publication by Meredith Edwards: 'public policy addresses societal problems and is about what governments do, why they do it and what difference it makes'. The statement that ‘public policy *addresses* societal problems’ suggests that governments *react* to fixed and identifiable social problems and do their best to resolve them. By contrast, a ‘what’s the problem represented to be?’ approach develops the proposal that governments *give a particular shape* to social problems in the ways in which they speak about them and in the proposals they advance to 'address' them. The argument here is that you cannot talk about a 'social problem' without giving a particular shape to it. I call this 'shape' a 'problem representation'. So, *problem representations are the variety of shapes given to specific social issues*.

Referring back to the opening proposition that policy proposals inevitably contain theories of explanation, the concept of problem representations provides another language for making this point. There are also links between the idea of problem representations and the notion of paradigms, as competing understandings of social issues. I find the language of problem representations particularly useful because it requires analysis and discussion of *competing representations of causal links* in social analyses.

The rest of a ‘what's the problem represented to be?’ analysis hinges on the claim that problem representations matter because they have effects. At a basic level it is clear that the ways in which a particular problem is

represented will affect what is done or not done. Going further, the ways in which problems are represented have other effects: limiting what can be talked about as relevant; affecting the ways in which responsibility is attached to some political subjects rather than others; and shaping social attitudes about these issues. These effects are political.

The claim that governments are active in *creating* certain problem representations does not *necessarily* imply intentionality. The process is not some kind of conspiracy, though there are certainly occasions when issues are deliberately shaped in particular ways to win votes or to secure particular agendas. However, the processes of problem representation are deeper than intentionality. They involve investments, conscious and unconscious, in deep conceptual and epistemological schema and, hence, are not always obvious. Because of this, it is imperative to subject our own problem representations to critical scrutiny, to identify facets of our explanations that may unintentionally reinforce dominant understandings we wish to contest. Examples of this dynamic follow later in the paper.

The claim that policy proposals contain problem representations rests on an almost commonsensical assertion – how we perceive or think about something will affect what we think ought to be done about it. In an *All in the Mind* special on ‘Problem Gambling’ (Radio National, 18 September, 2004), Jan McMillan made a related point: ‘the way you define the problem inevitably shapes the solutions that you develop to try and address the problem.’ A ‘what’s the problem represented to be?’ approach takes this insight and flips it on its head. It says: ‘What you say you will do about something tells me how you understand the problem.’

Why does this matter? Because we may disagree about what the problem is, and hence I may find your proposals or you may find my proposals useless or, even worse, counter-productive, on the grounds that they ‘mis-identify’ the problem. Therefore, it is important to engage on this level of debate. In addition, as mentioned above, we may not always be sensitive to the ways in which our understandings of problems rest upon deep-seated cultural assumptions.

As an example of the importance of this way of thinking about policy issues, consider Michael Shapiro's (1992) analysis of an Australian government investigation to discover why Aborigines have a high infant mortality rate. The Report's conclusion blamed ‘the semi-nomadic life of the aborigines’. Here the problem is represented to be the Aborigines' way of life and the solution, by implication, was for them to change their life-style (to ‘settle down’).

Consider by contrast a suggestion that the medical system adjust its delivery facilities to keep up with Aboriginal migration. Here the problem becomes *the mode of delivery of the medical system* and this is what must change. Some might argue that one of these options (changing the medical system) is more expensive than the other (telling Aborigines to 'settle down'), and this might help to explain why the problem was represented in the way it was. The point is to recognize that this might indeed be the case, whereas the language of the Report made the conclusion that was reached appear self-evident. The politics of funding was hidden in this language. Note also how the Report contained deep cultural assumptions about desirable (and undesirable) modes of living. The purpose of a 'what's the problem represented to be?' approach is to bring such **silences in problematizations** into the open for discussion.

The following list of questions provides a guide to those who wish to apply a 'what's the problem represented to be?' approach:

1. What is the problem (of 'problem gamblers/gambling', 'drug use/abuse', domestic violence, pay equity, health inequalities, etc.) represented to be in a specific policy proposal and/or in a specific policy debate?
2. What presuppositions or assumptions underlie this representation of the problem? Identify binaries and contradictions.
3. What effects are produced by this representation of the problem? For example, what impact will underlying presuppositions or assumptions have on possible outcomes? What is likely to change with this representation of the 'problem'? What is likely to stay the same? Who is likely to benefit from this representation of the 'problem'? Who is held responsible for this 'problem'? How does this attribution of responsibility affect those targeted and the perceptions of the rest of the community about who is to 'blame'?
4. What is left unproblematic in this problem representation? Where are the silences? How would 'responses' differ if the 'problem' were thought about or represented differently? [Here it is useful to think about shifts in representation of 'the problem' over time or across cultures.]
5. How/where are dominant problem representations disseminated and defended? How could they be contested/disrupted?

Reflecting back on the connections drawn between policy, theory and politics, the first two questions facilitate identification and understanding of the theory/ies underlying particular proposals. The remaining three questions reflect on the political implications of these theoretical commitments and what to do about them.

Significance of this challenge

Dennis Raphael (2005; see also Raphael and Bryant 2005) talks about the gap between what we know about patterns of causation (his specific example is SDH [social determinants of health]) and what is being done. Bambra *et al.* (2005: 188) make the same point – the evidence supporting links between social and economic context and health or ill-health is incontrovertible, and yet government policies avoid addressing these links. The same connections are identified in relation to drug ‘abuse’ and ‘problem gamblers/gambling’, and yet policies avoid confronting the implications that follow from drawing attention to these links. This ‘gap’, as Raphael calls it, compels us to ask this question – what does it matter how many conferences we have and how many reports we produce that identify causal relationships between economic and other inequalities, and SDH (or between economic and other inequalities, and drug 'abuse' and 'problem gambling') if these studies are ignored, if the kinds of interventions put forward by governments invariably focus on individual behaviour 'problems'?

Raphael (2005) identifies several key factors that help explain what is happening:

- SDH seldom get into media.
- Public sector workers infrequently have the opportunity to defend a SDH approach, even when they endorse it.
- Governments are disinclined to accept SDH insights when they contravene ideological commitments to small government and the social status quo.

In brief, it is clear that politics is central to the uptake (or not) of *social* theoretical interventions.

A 'what's the problem represented to be?' approach to policy adds a level to this analysis. It suggests that one of the main reasons social approaches are not 'taken up' by governments is because we (researchers) tend to think of ourselves as putting forward suggestions to governments keen to 'address' social problems. If however, as I suggest, governments are already involved in giving a particular shape to 'social problems' we need to intervene to make exactly this point.

Hence I'm suggesting a 'what's the problem represented to be?' approach as a political intervention to highlight paradigms *within* government policy. The argument is that we need to:

- 1) - mount a challenge to the whole understanding of governments as 'responding' to problems
- 2) - mount a challenge to the relative invisibility of theoretical commitments in dominant representations of drug and gambling issues.

The approach doesn't stop there, however. It insists that we need to interrogate problem representations in our own proposals and confront their political implications. That is, the approach encourages reflexive scrutiny of our own presuppositions and assumptions, admittedly a zone of discomfort. The goal here is to ensure that our proposals come *as close as possible* to goals we endorse and do not play into dominant representations that we abhor. The political feasibility of this suggestion is addressed at the end of the paper.

So, a 'what's the problem represented to be?' approach is a theoretical and hence a *political* intervention. I suggest that using it, talking about it with students, policy workers and academics encourages a kind of analysis that provokes serious rethinking at a number of levels. In this way it offers a means to develop the political consciousness Paulo Friere calls 'conscientization':

Only beings who can reflect upon the fact that they are determined are capable of freeing themselves. Their reflectiveness results not just in a vague and uncommitted awareness but in the exercise of a profoundly transforming action upon the determining reality.
(Friere 1985: 68)

Applying a 'what's the problem represented to be?' approach to policy

In the following section I offer a brief overview of the kinds of insights generated by applying a 'what's the problem represented to be?' approach to aspects of drug and gambling policy. It is important to emphasize that those closest to a particular field and to the critical literatures available on this field are best placed to apply the approach. Hence, these comments are provisional and, due to brevity, under-developed.

Dominant representations of drug 'abuse' and 'problem gamblers/gambling'

A place to start in considering problem representations in the area of drug policy is to note the high level of expenditure on law and order. Such expenditure produces the 'problem' as a) trafficking and b) possession/use. A focus on 'trafficking', what Manderson (1993) calls 'Mr Big', produces the 'problem' as a supply problem. This problem representation ignores demand side factors and explanations.

A focus on possession/use produces the crimes of users as 'the problem' (theft to support 'habit', etc). A notable silence here is the role of law or more specifically criminalisation in *producing* this effect, with criminalisation leading to over-inflated prices that, in turn, increase the likelihood of theft.

A similar pattern can be identified in relation to two other commonly identified 'problems' traced to drug use, death from overdose and the spread of AIDS. Criminalization commonly leads to supply being adulterated and the most common cause of overdose is an encounter with pure heroin by someone used to an adulterated product. In addition, to get the desired effect from an adulterated product requires injection, with needle use a means of transmission of the AIDS virus. In both these cases, as with theft, 'problems' commonly identified as due to drug use are the results of *criminalizing* drug use, not of drug use itself.

This raises questions about just what exactly drug laws are meant to achieve. Manderson (2005) points out that they are *not* meant to end drug use, which clearly does not happen. Hence we need to consider their **symbolic function**. This issue is considered later in the paper.

In relation to 'problem gamblers/gambling' it is useful to reflect upon how the term 'addiction' becomes tied to 'problem gamblers'. Fox and Matthews (1992: 10) think it is more useful to talk about 'dependence'. They suggest that the use of this term allows a distinction to be made between a kind of psychological and a kind of physiological (physical) dependence. I want to think past this distinction to what is accomplished (effects) by producing gamblers as addicts – how does this labelling constitute 'problem gamblers' as subjects? They become typified as dependent, out of control, having 'bad habits'. This theme also is picked up later.

Representing drug use as a ‘health problem’, gambling as a ‘public health’ issue

The framing of drug use as a ‘health problem’ is an attempt to shift the focus from the dominant moralistic framing to a more neutral framing. How successful has this strategy been? Brook and Stringer (2005) suggest that it has not been at all successful. They point out that, on one level, the success of the intervention depends on how ‘illness’ is understood. Some prohibitionists such as Brian Watters, for example, are quite happy to describe drug ‘addicts’ as ‘sick’ (see Room 2005: 46).

The recent ‘discovery’ of links between cannabis use and psychosis, and the political use of this ‘evidence’ to increase surveillance and penalties, bears out the need for caution in a health framing. A *Fact Sheet* from the Victorian Department of Human Services (2002; updated 2005) proclaims that ‘people with a family or a personal history of psychotic illness should avoid drugs like cannabis completely, and try other, healthier ways of relaxing’. Here the ‘problem’ is sheeted home to individuals who ‘choose’ their ‘relaxants’ unwisely. This individualization of the problem fits exactly the focus on individual behaviours that dominates current policy in this and other areas.

In the area of gambling, Linda Hancock, in her role as former Chair of the Victorian Independent Gambling Research Panel, usefully challenges the representation of the problem as the ‘pathological gambler’ on the grounds that this understanding leads down a medicalizing and individualizing path. She notes that her Committee discovered a ‘very high correlation between disadvantaged households and communities and gambling’. Hence she calls for a consumer protection *public health* model that is based around social determinants of health (National Interest, 2004).

The reframing of the issue as a public health issue has some beneficial effects. It focuses attention on the gambling industry and their behaviours, insisting on appropriate consumer protection. It also usefully allows the government to be identified as a co-producer in this area. However, a primary focus in the approach remains on community impact and on reducing ‘*harm* for players and for the broader community’ (emphasis added). To reflect on possible downsides in this framing we need to examine in closer detail the harm minimization ‘response’, that is borrowed here from the drug-use lexicon of problem representations.

Harm minimization 'responses'

A harm minimization problem representation attempts to portray itself as objective and rational/scientific in order to foreclose on the kind of moralizing that underpins dominant representations of drug 'abuse'. However, the term 'harm' itself invites moral reflection. What is harm? Harm to whom? To users or to society? There is an undercurrent of underlying concern with social 'breakdown', which is closer to prohibitionist concerns than is comfortable. Hence we should not be surprised to find that many prohibitionists are happy to endorse harm minimization proposals. As Valverde (1998: 179) notes, 'switching to the language of harm does not necessarily help to produce consensus about treatment'.

In addition, the turn to science as the key to ways forward tends to foreclose some of the discussion that needs to take place. The articles of the month selected by the International Harm Reduction Association frequently offer details of scientific interventions, installing science/medicine as regulators of 'truth' (<http://www.ihra.net>). The same trend is discernible in the turn to 'evidence-based' approaches, which install a problem/solution way of thinking.

Finally, harm minimization often becomes linked to cost/benefit analysis, which fits the dominant economic rationalist paradigm. As Miller (2001: 176) points out, this approach fails to challenge structural inequalities.

It should be mentioned that interrogating the presuppositions underpinning harm minimization is likely to prove a less popular enterprise among reformers than interrogating dominant representations. Indeed, some might wonder about the feasibility or wisdom of doing this at a time when the harm minimization approach may well be on the wane/under attack. The argument here is that the kind of reflexive scrutiny of our own proposals, created by applying the 'what's the problem represented to be?' approach, is necessary in order to ensure that our proposals come as close as possible to supporting goals we endorse. A possible concern then is that harm reduction approaches may play inadvertently into dominant problem representations.

Cultural explanations of the 'problem'

Richard Eckersley (2005) has introduced new and important reflections on the connections between mainstream culture and drug use. He emphasizes the need for 'deep cultural change' to reduce the negative

impacts of materialism/consumerism and (excessive) individualism on health and well-being. These factors are considered to be ‘more distal social causes of disease’ (Eckersley 2005: 159). This kind of analysis usefully shifts the focus from sub-cultures, commonly characterized as in deficit, as ‘more violent and less trusting’ for example (see Marmot and Wilkinson 2001), to broader trends in mainstream culture. A goal here is to recognize that ‘problems’ commonly sheeted home to individuals ‘are fundamentally social problems’ (Eckersley 2005: 158). The critique of mainstream culture also identifies the tendency in our culture to attribute the ‘onus of success’ to the individual, ‘regardless of the social realities of disadvantage or privilege’ (Eckersley 2005: 159). Moreover, importantly it draws attention to the downside of making ‘sustained economic growth’ a government priority (Eckersley 2005: 161).

Some tendencies in this approach, however, deserve more reflection. The acceptance of the labelling of some drug use (and perhaps ‘excessive’ gambling) as ‘disease’ or ‘psychosocial disorders’ (Eckersley 2001: 66), for example, ignores the ways in which these activities are indeed *parts of mainstream culture*. No explanation is offered for **why these behaviours are considered problematic *only in some instances***. And, while Eckersley carefully endorses the need for two complementary responses to this situation – enhancing the resilience of young people and their ‘capacity to adapt to social change’, *and* ‘tackling the underlying social forces behind the adverse trends in their health and well-being’ (Eckersley 2005: 161) – we need to be sensitive to the tendency of governments to play strongly to the first of these issues, while ignoring the second.

As one example, a 2002 South Australian Government initiative, *Tackling Drugs* (Government of South Australia 2002), contains the word ‘resilience’ sixteen times in a relatively short pamphlet.¹ The term ‘resilience’ directs attention to *individual* character, though we are sometimes told that families and communities need to develop resilience as well: ‘*Resilient* individuals, families and communities with a positive outlook on life are better able to overcome and recover from the tough times in their lives’ (Government of South Australia 2002: 4; emphasis in original). In each case, the ‘problem’ is located within the psychosocial capabilities of members of the population and their ability to deal with something amorphaously characterized as ‘tough times’. To move beyond this limited problem representation requires reflection on the symbolic uses of ‘excess’ in modes of governance, with drug use and gambling as our exemplars.

¹ I would like to thank Angelique Bletsas for drawing this publication to my attention.

Modes or technologies of governance

It is time to return to the question I left open earlier – if we agree that drug laws are not meant to end drug use (since they clearly fail to do this and also exacerbate some of the conditions they are supposed to curtail, eg crime, death due to overdose, spread of AIDS), we need to ask what purpose/s they serve. I mentioned earlier the need to consider their symbolic function. Several authors (Valverde 1998; Manderson 1993, 2005; Race 2005) assist us in making this analysis.

Part of this analysis resonates with Eckersley's work, emphasizing the shift within capitalism from a Protestant ethic to consumer culture, a culture of recreation and indulgence. Along related lines a recent (2005) stakeholder submission from the NCEPH (National Centre for Epidemiology & Population Health, ANU) to the NHMRC Working Group on Preventive Health Care talks about the existence of a 'consumptogenic environment', 'characterized by sufficient affluence to purchase an overabundance of commodities made available and acceptable by the marketplace' (NCEPH 2005: 2). This **cultural economy approach** (for example Hinde and Dixon 2004) describes 'potential pathways linking features of the environment, such as car reliance, to health promoting or damaging practices' (Hinde and Dixon 2005: Abstract).

My concern with these approaches is the tendency to identify these 'problems' and then to speculate on how the government should 'respond'. This is despite the clear recognition that at times **governments are actors in encouraging over-consumption** (Hinde and Dixon 2005: 42). The 'what's the problem represented to be approach?' (which as we have seen challenges the view that governments 'respond' to 'problems' that somehow exist outside of government) suggests that, **rather than asking how the government should 'respond' to cultural practices/'problems', we need to consider how particular modes of governance are crucially implicated in producing 'culture' – not just at the level of encouraging consumption but at the level of producing particular kinds of political subjects.**

Kane Race (1998) assists us here. He points out that, within the 'consumptogenic' environment, there is a perceived continuing need for **forms of control at population level**. He describes how this is achieved in part through the demarcation between 'licit' drugs and moderate, 'responsible' usage on the one side, and 'illicit' drugs and 'excessive',

‘irresponsible’ usage on the other (see Orford 2005: 122). ‘Illicit drugs’ and ‘excessive’ gambling become exemplary cases of ‘bad conduct’.

Manderson (1993: 3) makes a similar point when he suggests that drug laws install forms of control and regulation that serve a broader function – ‘to dramatize and cauterize’ the anxieties of our time. The governance of social conditions becomes condensed in a ‘fetishized sign of that which is seen as most threatening or worrying about a situation on the part of those authorized to define it as a problem’ (Race 2005: 17).

‘Illicit’ drugs then and ‘excessive’ gambling are not meant to disappear. They are *needed* to mark the boundaries of ‘legitimate’ consumer behaviour (Race 2005: 2): ‘drugs aim to embody the antithesis of the proper administration of the self’. Race calls this mode of governance ‘exemplary power’, making a (bad) example of drug users (and ‘problem gamblers’) so that we the citizens can know what we should/can do. ‘Users’ (abusers, addicts) are marked as ‘other’ to set parameters on acceptable self-administration. The rest of us are to continue consuming and enjoying ‘pleasures’ within the boundaries set by the state. If we overstep those boundaries, we are ‘to blame’ – responsibility continues to lodge with the user even if they are described as ‘ill’ (we ‘choose’ our pleasures which then can become ‘bad’ ‘habits’). There continues to be an implication of lack of (self) control (consider the current focus on obesity, gambling – the distinction between those who can enjoy ‘food’, ‘gambling’ without ‘allowing themselves’ to become ‘addicted’). The problem is represented to be the *character* of use (*excessive* use), and hence the character of those who deviate from professional (medical, legal, governmental) authority (Race 2005: 5, 10). Race (1998: 3) makes the important point that most often sub-groups identifiable in terms of race, class and gender are characterized as deficient in terms of moral responsibility.²

In short and building on the work of Marianne Valverde (1998: 26), dominant approaches to drug use and gambling illustrate the way in which these activities mark the boundaries of the realm of freedom. We are governed through a belief that self-control is freedom and that those who ‘fail’ to display this characteristic need to be monitored and at times punished. What we fail to understand is the way in which this *dramatized version* of failure leaves us convinced that we are free while our behaviours are regulated/defined in a range of ways – especially through the culture of consumption. There is no suggestion of conspiracy in this

² On this point Anne Wilson made the insightful observation that those who can afford to be ‘excessive’ gamblers go unnoticed.

kind of analysis. Rather a social unconscious operating at the level of management of population provides a backdrop to understanding how we are governed through categories of 'risk' and 'excess'.

How does this analysis of modes of governance differ from Eckersley's (2005: 161) suggestion that materialism drives us to drug use because it does not satisfy our 'search for meaning'. Primarily it shifts attention from those who are labelled 'addicts' with 'problematic' behaviours to the way in which the distinction between responsible/irresponsible use, drawn by governments, industry representatives and others, serves to sustain the social status quo. This happens in two ways. First, identifying 'addicts' as 'other' allows the rest of the population to continue consuming, 'wisely' no doubt. Second, targeting specific groups as 'ill' or 'out of control' encourages the view that in the end we are all responsible for our own fate. Consumption may indeed leave us unhappy but it also operates as a mechanism of social control. Modes of governance associated with consumerism create citizens who believe self-control is the mark of freedom (Valverde 1998) and that those who lack it (self-control) have a 'problem'. The pervasiveness of this tendency to individualise social 'problems' helps to explain the success of neo-liberal regimes.

This kind of analysis therefore also helps us understand the gap Raphael (2005) identifies between what we know about the social causes of many social ills and the kinds of 'responses' in government policy, which focus in the main on individual behaviours. Targeting specific groups as 'ill', as out of control, encourages acceptance among the wider public of neo-liberal premises that preclude the kinds of social structural interventions identified as necessary. If this is the case, challenging the constructed dichotomy between responsible/irresponsible behaviours becomes an important intervention in contemporary debates about how we should be governed.

Conclusion

The paper begins by insisting that all proposals have theoretical premises and that all theories are political. In this situation there is an imperative to develop theories that promise to bring us closer to an understanding of these connections. I offer a 'what's the problem represented to be?' approach as one such methodology.

At first glance the approach looks deceptively simple. I hope this brief introduction hints at its complexity and the challenges involved in

applying it. It is not a one-off exercise. The question – what is the ‘problem’ represented to be? – needs to be asked repeatedly, at different levels of analysis. In addition, it requires an uncomfortable reflexivity, subjecting our own problem representations to scrutiny for deeply held and possibly problematic presuppositions and silences. The ultimate goal is to expose and interrogate the conceptual logics that underpin the exercise of power.

Clearly it may not always be possible or even useful to dispense with particular problem representations in specific situations. Context clearly affects the feasibility of challenging dominant representations. However, a sharp eye to problematic assumptions and effects within problem representations can provide a basis for reflecting on how to develop proposals that come as close as possible to desired objectives. At the same time, instead of insisting that any single approach is *always* the best strategy and others are *always* problematic, we have to take our chances where we find them, exploring available discursive resources for useful reconceptualisations. Asking ‘what’s the problem represented to be?’ offers a useful conceptual tool for undertaking these tasks.

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