



Commentary

Post-retirement enlightenment syndrome: Worthy of investigation

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ARTICLE INFO

Keywords:

Drug policy reform
 Politicians
 Harm reduction
 Political courage
 Political will

ABSTRACT

Post-Retirement Enlightenment Syndrome is a term used by some in illicit drug policy to reflect the experience of having politicians “come out” in favour of drug policy reform only after retirement. To date, the phenomenon has not been examined in any systematic manner. While discussions of the phenomenon on social media tend to be playful, they nevertheless express real frustration with the reluctance of privately supportive sitting politicians and policing officials to speak out in favour of non-punitive and/or harm reduction-oriented policies. In this commentary, we give an overview of the phenomenon of Post-Retirement Enlightenment Syndrome.

We argue that these instances of sitting officials speaking out publicly in favour of drug policy reform, as well as instances in which such apparent “enlightenment” is not publicly expressed until after retirement, are potentially highly fruitful areas for investigation. Public positions on drug policy are invariably contoured by conditions of political possibility. We raise the call for both an unpacking and examination of the structural and relational aspects of “political will” and “political courage”. Sitting and retired politicians each have a role in the drug policy landscape, whether as lawmakers or as high-profile and often respected commentators. This commentary argues that a more nuanced understanding of the conditions that may support or hinder the expression of public support for drug policy reform by political office bearers, whether sitting or former, has implications for advocates and researchers invested in policy change.

On leaving office, many politicians have publicly expressed support for illicit drug policy reform that centres harm reduction and non-punitive responses that they did not proclaim while in office (MacGregor, 2013). Similarly, police officials who have upheld restrictive drug laws and prohibition while in office have “come out” in favour of decriminalisation only after leaving policing (Caldwell, 2019). This has been dubbed the “Post Retirement Enlightenment Syndrome” a term credited to the late Dr Tomáš Záborský (Stevens, 2021) or sometimes the more wordy “Post-Retirement Drug Policy Enlightenment Syndrome” highlighting its specific appearance with reference to drugs. Here, “enlightenment” alludes to the state of having come to appreciate—and publicly proclaim support for—non-punitive and/or harm reduction-oriented drug policies. This “mysterious illness” (Sárosi, 2012) has been a source of frustration for drug policy reform advocates internationally. While discussions of the phenomenon on social media tend to be humorous and playful, the underpinning exasperation with the reticence of supportive sitting politicians and police officials is palpable. Some instances may be the result of drug policy “enlightenment” occurring after retirement. In the alternative, there might be something about being in office that makes speaking out in favour of progressive drug policies difficult (Mullin, 2009; Rolles, 2007). Yet, people holding political and policing office *do* speak out, which suggests

the need for greater understanding of this phenomenon. Post-Retirement Enlightenment Syndrome has yet to be formally documented in the literature, despite its apparent visibility. However, as we argue, both instances in which those in office are willing to speak out, as well as those in which such “enlightenment” is not publicly expressed until after retirement, suggest the need for greater understanding of the effects of political structures and relationships on what is able to be said publicly. Here, we aim to raise the need for greater examination of the structural and relational aspects of “political will” and “political courage”, the role of office holders’ values and conviction, and how people change their minds both while holding office and after retirement.

Whether due to increased availability of time or greater freedom to act according to conscience, many vocal advocates for illicit drug policy reform are retired political and policing office holders. As Susanne MacGregor (2013) notes, among signatories to the 2011 Global Commission on Drug Policy, *former* politicians predominate. In some instances, those former office holders display radically different positions before and after retirement, such as former President of Poland, Aleksandr Kwaśniewski, who came out in favour of illicit drug reform after having supported restrictive illicit drug laws while in office (Sárosi, 2012). Other instances include Amber Rudd in the UK (Stevens, 2018) and in Australia, former Commissioner of the Australian Federal Police, Mick

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Palmer (Caldwell, 2019). Some cases reflect shifting policy priorities not exclusively marked by retirement: for example, Bob Carr showed a complex relationship to drug policy while Premier of New South Wales in Australia, taking a “tough on crime” stance, authorising the use of drug detection dogs while also supporting a trial of the Kings Cross medically supervised injecting centre and a cannabis cautioning scheme. Carr has also been vocal about the personal effects of his brother’s death following a heroin overdose (Law, 2018). But it was after retirement from state politics that he declared the “war on drugs” a failure and spoke publicly in support of the need for “de facto drug decriminalisation”—a position he retained as he returned to federal politics.

These—albeit complex and diverse—examples of post-retirement expressions of support for drug policy reform suggest a variety of elements that may impact sitting political actors’ public positions on drug policy, including, but not limited to, the freedoms and restrictions of ministerial, backbencher, and or parliamentary leadership roles; the affordances and limitations of particular national, parliamentary, and political cultures; the role of media attention, and personal experience. These considerations also interface with others expected of political actors, such as instrumental attention to or strategic avoidance of particular issues; the expectation of towing the “party line”; political ambition; and concern with job security.

An abundance of political biographies and extensive academic and popular theorising have tried to divine the reasons why politicians make the decisions they do. Analytical literature on the personal experiences of politicians in office offer some indication of the competing priorities characterising work in the profession (Corbett, 2015a; Crewe, 2021; Reeher, 2006). Personal motivations, political calculations, and the constraints of party membership and Cabinet processes are all factors influencing the public positions taken by politicians (Botterill & Fenna, 2019; Corbett, 2015b) including positions taken with respect to drugs (MacGregor, 2013). Several studies suggest that an official’s values play a central role in adjudicating between personal, electorate and party values and impact the subsequent drug policy positions espoused publicly (MacGregor, 2013; Ritter, 2020; Stevens & Ritter, 2013). Personal experience also seems to have a profound effect on politicians’ views on illicit drug policy (MacGregor, 2017). However, as MacGregor (2017, p. 267) notes, for some UK-based politicians, speaking out in favour of such reform was “career suicide” or, in a best-case scenario, required working with a resulting reputation as a “maverick” or “independent”. MacGregor (2013) notes that additional constraints driven by highly charged public attitudes towards illicit drugs substantially expand the political calculation made by politicians. These include fear of the reactions of media or the public, avoiding looking “soft” on drugs; navigating fundamental value distinctions across multiple views on drug use and harm; and the general public’s largely low opinion and/or lack of experience with people who use drugs (MacGregor, 2013). Positions on drug policy may also be entangled in broader questions of political signalling, with populist politicians using such drug-related issues to signal boundary threats, the possibility of invasion, and the opportunity to demarcate “bad” people from whom politicians can then keep people safe (Bull, 2008).

One plausible explanation for the post-retirement enthusiasm for harm reduction and non-punitive illicit drug policies is that the constraints of office weigh heavily. Considering the potential threats to one’s job security in standing up for illicit drug policy reform, it has been suggested by some analysts that greater “political courage” is thus needed for a range of harm reduction reforms (Beyrer et al., 2010; Chang et al., 2020; Fischer, 2023). Relatedly, other commentators have called for greater “political will” (Dmitrieva et al., 2021; MacGregor, 2013). But what is political “will” or “courage”, seen as so vital to political action? Hambergren (1998, p. 12) calls political will “the slipperiest concept in the policy lexicon...the sine qua non of policy success which is never defined except by its absence”. Post, Raile, & Raile, 2010, p. 653) have described it as an ambiguous concept despite being “frequently invoked as a rhetorical tool in political discussions”.

Taking such will or courage at its most general to mean a willingness to act, a lack of “courage” or “will” can be seen in the unwillingness of sitting office holders to act or speak out despite personal support for policy reform. This is seen in instances where politicians (Rolles, 2007) and senior police (Mullin, 2009) have expressed private sympathies towards drug legalisation or decriminalisation, but these views have disappeared when “record” buttons were pushed or official statements requested (MacGregor, 2013). How might such apparent failures of courage or will best be understood? In many ways, terms such as “political courage” and “political will” can be seen as Batesonian “black box” explanatory principles—terms that appear to explain something but which amount to little more than conventional agreements to “stop trying to explain things at a certain point” (Bateson, 2012 [1969] p.314). Rather than individualistic diagnoses of lack of “courage” or “will”, more productive approaches might look at the impacts of political systems: the aspects of political life that disconnect those in power from their convictions regarding illicit drug policy or that discourage greater political bravery.

Another plausible explanation for instances of shifts in retired officials’ stated positions on illicit drug policy and willingness to campaign for change is that after leaving office, people really do change their minds. This would seem to be in contrast to the widely assumed view that “[y]oung people use drugs; older people disapprove” (Pearson & Shiner, 2002, p. 75). However, the relationship between age and attitude towards drugs is complex, with some context-specific examples finding older people to be more in favour of illicit drug controls and to be more concerned about illicit drug harms (Cheeta et al., 2018), but others showing attitudes towards the harmfulness of particular drugs having a complicated relationship with aging and cultural change (Pearson & Shiner, 2002). Wider social changes are also likely to contribute to such shifts, with public attitudes to the decriminalisation of particular drugs taking place at both national and local levels (Duff et al., 2012; Felson et al., 2019; Siddiqui et al., 2022; Wanke et al., 2022). Cultural attitudes towards punitive approaches to social issues generally may also play a part (Tonry, 2001). However, as MacGregor (2017) discusses for policy actors in the UK—including politicians and police—real-world experiences at times lead to greater support for harm reduction and non-punitive illicit drug policy even when, as in the case of heroin decriminalisation, such views are not widely shared by the public. For politicians in particular, MacGregor (2017, p. 266) argues that Select Committee involvement—with its concomitant exposure to the real-life experiences of people can lead to openness to and desire to advocate for more effective illicit drug policy. Perhaps the experiences of being in positions of power enable reflections; perhaps exposure to the wide variety of health and social policy dilemmas whilst in office provide thought-provoking opportunities to re-think assumptions and policy responses. At any rate, how people change their minds seems like a crucial missing piece of knowledge for drug policy reform advocates.

Our focus in this commentary is to draw attention to politicians and senior police who appear to change their position on drug policy after retirement. Expected conclusions regarding party constraints, political will and courage have the potential to be complicated by closer attention to the conditions that compel support for or opposition to a particular policy position. Macro political contexts shape these conditions in particular ways. This commentary draws attention to a phenomenon identified in representative democracies, a location from which all authors of this piece are writing. Other forms of government around the world necessarily create a different set of conditions and generate rich opportunities for further research if elements are found to resonate.

Finally, the very label “Post-Retirement Enlightenment Syndrome” deserves attention and critique. The focus on “retirement” as a pivot point draws into relief the myriad implicit and explicit pressures on politicians regarding their positions on drug policy and represents an attachment to a discrete moment of change. Yet it also may obscure ongoing shifts in acceptability of ideas over time. We do not want to foreclose considerations of change processes throughout a political life and recognise that sometimes there is “an idea whose time has come”

(Kingdon, 2003, p. 1). The action or inaction, support or opposition, of politicians and senior police both sitting and retired is important to understand as part of a larger process that deserves fuller and more nuanced attention. Secondly, the word “enlightenment” brings with it the presumption of previous ignorance or misbelief, that is now rectified. Reflecting the view that progressive, non-punitive and harm reduction policies are the correct ones, the term has to date been reserved for politicians and police officials who display public and thus visible support for reform centring harm reduction principles. The opposite effect, where a policy actor’s *opposition* to non-punitive, harm reduction-oriented policies emerges after retirement, may exist. We note that we have not (yet) detected any such examples. That most examples of Post-Retirement Enlightenment Syndrome are of actors developing or deepening support for drug policy reform away from the historically-dominant status quo of criminalisation may suggest that it could operate as a conceptual device for advocates of drug law reform invested in the inevitability of particular forms of harm reduction policy settings. This may obscure a more holistic appraisal of drug policy attitudes post-retirement. The use of “syndrome” in the term Post-Retirement Enlightenment Syndrome is a playful—though very particularly positioned—way of registering a frustration with the lack of action of politicians in office. The expression does carry curious lack of interest in what might be the cause of such inaction. Indeed, the use of “syndrome” in many ways operates as another Batesonian black box, this time reliant on a pathologising turn, and potentially further obscuring serious consideration of real constraints and processes within policymaking. While very grateful for the identification of this phenomenon, rather than remaining satisfied with the diagnosis we suggest that there are potential benefits in open-minded consideration of such phenomena.

In conclusion, the phenomenon of Post-Retirement Enlightenment Syndrome raises interesting—and important—questions: when did such politicians and police officials change their minds? Did they come to office with established views in support of progressive drug policy, or did they encounter compelling arguments in favour of reform while in office but decide to stay silent? Or, for some, was “enlightenment” truly a post-retirement phenomenon? Regardless of when, how did such change occur? Alongside questions regarding changes of opinion, the phenomenon also raises questions about the willingness to stand up for drug law reform: why might politicians remain silent until retirement? For those who did speak out in office, were there sacrifices that had to be made? And finally, is the term “Post-Retirement Enlightenment Syndrome” useful? In light of the significant implications of these questions, we call for scholarly examination of this playfully-identified phenomenon and suggest, amongst other questions, the following research agenda:

1. How common is Post-Retirement Enlightenment Syndrome? Given the anecdotal evidence that the phenomenon is not exclusive to politicians, but also impacts senior police, are there important differences between those in elected and non-elected positions of power?
2. Is this phenomenon unique to drug policy? Or does it happen within other policy domains? If so, what might that tell us about common features, environments, and contexts?
3. Is what occurs after retirement from positions of official power best understood as a freeing up of pre-existing values and convictions, or is there something about being in office that facilitates a change in values?
4. Are there particular aspects of political structures and relationships, and the macro political conditions, that disconnect politicians from their convictions or their values? How do particular ministerial and/or party responsibilities affect the extent to which office holders are able to speak from their conscience?
5. How can we better understand and unpack “political will” and “political courage” while remaining attentive to their context?
6. Finally, and perhaps most importantly, if Post-Retirement Enlightenment Syndrome represents the potential for office holders to change their minds on drug policy, how could a version that occurs *before* re-

tirement be encouraged, such that effective and representative drug policies become the norm?

These questions have important implications for advocacy work that recognises the importance of politicians and other officials as actors in illicit drug policy. Attention to retired officials who have changed their minds regarding progressive drug policy has implications for advocates and researchers engaging with sitting politicians. It also suggests the need to remain attuned to the high-profile and continuing impact of retired officials in progressive drug policy debates.

Ethics approval

The authors declare that the work reported herein did not require ethics approval because it did not involve animal or human participation.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

CRediT authorship contribution statement

Laura McLauchlan: Conceptualization, Writing – original draft, Writing – review & editing. **Paul Kelaita:** Conceptualization, Writing – review & editing. **Michala Kowalski:** Conceptualization, Writing – review & editing. **Alison Ritter:** Conceptualization, Writing – review & editing.

Funding

There was no specific funding source for this work. AR is supported by an NHMRC Investigator Grant (GNT2016695). MK is supported by a UNSW Scientia PhD scholarship.

Acknowledgements

Not applicable.

References

- Bateson, G. (2012). [1969]. *Metaphor: What is an instinct?*. In T. Maran, D. Martinelli, & A. Turovski (Eds.), *Readings in Zoosemiotics* (pp. 313–331). De Gruyter Mouton.
- Beyrer, C., Malinowska-Sempruch, K., Kamarulzaman, A., Kazatchkine, M., Sidibe, M., & Strathdee, S. A. (2010). Time to act: A call for comprehensive responses to HIV in people who use drugs. *The Lancet*, 376(9740), 551–563. [10.1016/S0140-6736\(10\)60928-2](https://doi.org/10.1016/S0140-6736(10)60928-2).
- Botterill, L. C., & Fenna, A. (2019). *Interrogating public policy theory: A political values perspective*. Edward Elgar Publishing Ltd.
- Bull, M. (2008). *Governing the heroin trade: From treaties to treatment*. Ashgate.
- Caldwell, F. (2019). Retired AFP commissioner argues for decriminalisation of drugs for personal use April 25. *Brisbane Times* <https://www.brisbanetimes.com.au/politics/queensland/retired-afp-commissioner-argues-for-decriminalisation-of-drugs-for-personal-use-20190425-p51h28.html>.
- Chang, J., Agliata, J., & Guarinieri, M. (2020). COVID-19 - Enacting a ‘new normal’ for people who use drugs. *International Journal of Drug Policy*, 83, Article 102832. [10.1016/j.drugpo.2020.102832](https://doi.org/10.1016/j.drugpo.2020.102832).
- Cheeta, S., Halil, A., Kenny, M., Sheehan, E., Zamyadi, R., Williams, A. L., & Webb, L. (2018). Does perception of drug-related harm change with age? A cross-sectional online survey of young and older people. *BMJ Open*, 8(11), Article e021109. [10.1136/bmjopen-2017-021109](https://doi.org/10.1136/bmjopen-2017-021109).
- Corbett, J. (2015a). *Being political: Leadership and democracy in the Pacific Islands*. University of Hawaii Press.
- Corbett, J. (2015b). Someone has to do it: Towards a practical defence of politicians. *Contemporary Politics*, 21(4), 468–484. [10.1080/13569775.2015.1013290](https://doi.org/10.1080/13569775.2015.1013290).
- Crewe, E. (2021). *The anthropology of parliaments: Entanglements in democratic politics*. Routledge.
- Dmitrieva, A., Stepanov, V., Svyrydova, K., Lukash, I.-G., Doltu, S., Golichenko, M., Kalivoshko, V., Khanyukov, E., Kosmukhamedova, Z., Torkunov, O., & Zagrebelskiy, O. (2021). More evidence or stronger political will: Exploring the feasibility of needle and syringe programs in Ukrainian prisons. *Harm Reduction Journal*, 18(1). [10.1186/s12954-020-00459-z](https://doi.org/10.1186/s12954-020-00459-z).

- Duff, C., Asbridge, M., Brochu, S., Cousineau, M.-M., Hathaway, A. D., Marsh, D., & Erickson, P. G. (2012). A Canadian perspective on cannabis normalization among adults. *Addiction Research & Theory*, 20(4), 271–283. [10.3109/16066359.2011.618957](https://doi.org/10.3109/16066359.2011.618957).
- Felson, J., Adamczyk, A., & Thomas, C. (2019). How and why have attitudes about cannabis legalization changed so much? *Social Science Research*, 78, 12–27. [10.1016/j.ssresearch.2018.12.011](https://doi.org/10.1016/j.ssresearch.2018.12.011).
- Fischer, B. (2023). The continuous opioid death crisis in Canada: Changing characteristics and implications for path options forward. *The Lancet Regional Health - Americas*, 19, Article 100437. [10.1016/j.lana.2023.100437](https://doi.org/10.1016/j.lana.2023.100437).
- Hammergren, L. (1998). *Political will, constituency building, and public support in rule of law programs*. Center for Democracy and Governance, U.S. Agency for International Development.
- Kingdon, T. (2003). *Agendas, alternatives, and public policy*. Longman 2nd ed.
- Law, B. (2018). Dickey topics: Bob Carr talks politics, death and religion June 22. *The Sydney Morning Herald* <https://www.smh.com.au/politics/nsw/dickey-topics-bob-carr-talks-politics-death-and-religion-20180618-p4zm68.html>.
- MacGregor, S. (2013). Barriers to the influence of evidence on policy: Are politicians the problem? *Drugs: Education, Prevention and Policy*, 20(3), 225–233. [10.3109/09687637.2012.754403](https://doi.org/10.3109/09687637.2012.754403).
- MacGregor, S. (2017). *The politics of drugs: Perceptions, power and policies*. Palgrave Macmillan.
- Mullin, C. (2009). *A view from the foothills: The diaries of Chris Mullin*. Profile Books.
- Pearson, G., & Shiner, M. (2002). Rethinking the generation gap: Attitudes to illicit drugs among young people and adults. *Criminal Justice*, 2(1), 71–86. [10.1177/17488958020020010401](https://doi.org/10.1177/17488958020020010401).
- Reeher, G. (2006). *First person political: Legislative life and the meaning of public service*. NYU Press.
- Ritter, A. (2020). Making drug policy in summer—Drug checking in Australia as providing more heat than light. *Drug and Alcohol Review*, 39, 12–20. [10.1111/dar.13018](https://doi.org/10.1111/dar.13018).
- Post, L. A., Raile, A. N. W., & Raile, E. D. (2010). Defining Political Will. *Politics & Policy*, 38(4), 653–676. [10.1111/j.1747-1346.2010.00253.x](https://doi.org/10.1111/j.1747-1346.2010.00253.x).
- Rolls, S. (2007). *After the war on drugs: Tools for the debate*. Transform Drug Policy Foundation.
- Sárosi, P. (2012). A mysterious disease takes its toll among politicians. Drug Reporter. Retrieved 7 Sept 2021 from <https://drogriporter.hu/en/a-mysterious-disease-takes-its-toll-among-politicians/>
- Siddiqui, S. A., Singh, P., Khan, S., Fernando, I., Baklanov, I. S., Ambartsumov, T. G., & Ibrahim, S. A. (2022). Cultural, social and psychological factors of the conservative consumer towards legal cannabis use—A review since 2013. *Sustainability*, 14(17), 10993. [10.3390/su141710993](https://doi.org/10.3390/su141710993).
- Stevens, A. [@AlexStevensKent]. (2018, Sept 4). Tweet
- Stevens, A. [@AlexStevensKent]. (2021, July 8). Tweet
- 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, Prevent and Policy*, 20(3), 169–174. [10.3109/09687637.2013.793892](https://doi.org/10.3109/09687637.2013.793892).
- Tonry, M. (2001). Unthought thoughts: The influence of changing sensibilities on penal policies. *Punishment & Society*, 3(1), 167–181. [10.1177/14624740122228168](https://doi.org/10.1177/14624740122228168).
- Wanke, M., Sandberg, S., Macit, R., & Gülerce, H. (2022). Culture matters! Changes in the global landscape of cannabis. *Drugs: Education, Prevention and Policy*, 29(4), 317–322. [10.1080/09687637.2022.2091301](https://doi.org/10.1080/09687637.2022.2091301).