

Introduction

In local, regional, and state governments across the United States, elected and administrative officials participate in the decision-making process that drives the creation of policy. Bureaucrats and politicians are guided in this process by cultural norms and values, both personal as well as organizational and regional (Allison, 1969; Long, 1949). The process by which these individuals bargain and represent their priorities in both the formal and informal policy-making process is known as *bureaucratic politics*. In the case considered herein, that of the policy debate around opioid reversal drugs in Massachusetts, the administrative officials studied are primarily public safety officials, including police officers and firefighters. Despite significant diversification since the 1960's, police and fire departments, organizations whose members often identify as "blue-collar" and "working class", are overwhelmingly staffed by white men under the age of 65 (Martin, 1994; Sklansky, 2006). This is the same demographic most impacted by the opioid epidemic in Massachusetts (Sudders, 2015).

Considering these statistics, it is possible that "non-rational" factors, such as personal and subjective connections between the bureaucrat and the citizen, as proposed by Lindblom (1959), might have an outsized impact on the execution of policy around opioids. With that in mind, it is not a stretch to assume that these demographics, while not the sole cause of how administrative officials conceive of their relationship to the opioid crisis in Massachusetts, could play a significant role. The analysis conducted herein seeks to understand how bureaucratic politics, which includes these "non-rational" and personal factors as well as organizational and cultural influences, impact public discourse around certain types of policy.

All bureaucrats have the ability to enact and sanction policy through their discretionary decision making, which is often driven by parochial values and interests (Appleby, 1949; Long, 1949). Constantly shifting goals and pressures are a fundamental part of the political and bureaucratic landscape and understanding them is crucial to promoting a functional and cooperative governance structure. It is worth noting that the bureaucrats discussed here are primarily street-level bureaucrats who deliver public services to directly to citizens. Street-level bureaucrat's values are derived not only from the organizational mission of their agency, but from their own societal and cultural value systems. Street-level bureaucrats also engage in advocacy, value judgments, resource allocation and goal-setting constantly, effectively influencing public service delivery to a substantial degree (Lipsky, 1980). These bureaucrats also consider moral and ethical considerations in making discretionary decisions, and those engaged in service provision and narcotics policing in particular have been shown to utilize moral and ethical considerations in that task (Jensen, 2015).

When considering local and state elected officials, past research has indicated that unlike their national counterparts, local elected officials in particular are not primarily driven by partisanship, but instead by a managerial focus on improving outcomes for their communities. They are driven by intrinsic, extrinsic, and opportunistic motivations, and differentiated primarily by their willingness to run, campaign, and to hold office. Motivated by circumstance and idiosyncratic factors unique to their own communities, they do not perceive of their roles as structural or systematic (Oliver, Ha, & Callen, 2012), making them not dissimilar to the street-level bureaucrat who conceives of themselves as a “state-agent”, making decisions based in the not in the particulars of the problem they are addressing, but in service to the larger organization they serve (S. Maynard-Moody & Musheno, 2000). In this way, the administrative and elected officials whose statements on policy are discussed herein approach the policy-making process from a somewhat similar standpoint: as individuals representing the communities they serve, albeit propelled by different personal and parochial interests.

Once a policy is in place, the public statements of officials responsible for communicating and implementing it can meaningfully influence the opinion of mass publics. This process, known as *policy feedback*, can influence the opinion of mass publics, which can in turn influence how those impacted by the policy understand their own citizenship and the assignment of political and social standing to those who receive its benefits. This process occurs both among those directly impacted by the policy and those who are not (Mettler & SoRelle, 2014). Mass publics formulate their views based on two factors: the visibility of a policy and their own proximity to that policy (Soss & Schram, 2007). In the case discussed here, which considers policy concerning the distribution of opioid-reversal drugs to public officials, the policy is exceptionally visible to residents of Massachusetts as demonstrated through the significant media coverage of its implementation. While proximity to the policy may vary, if overdose rates continue to rise as indicated in the Massachusetts Opioid Working Group report (Sudders, 2015) and the recommendations of that same report are followed, it stands to reason that a larger number of citizens may become increasingly proximal to this policy.

Narcan Policy in Massachusetts

There have been several state-wide policies enacted in Massachusetts that have addressed the opioid problem directly, including legislation requiring medical practitioners to share information about opioid prescriptions and mandates that insurance companies provide minimum insurance coverage for addiction (Sudders, 2015). However, one particular group of policies has been the focus of

significant media coverage: the use of naloxone (popularly known by the brand name Narcan¹), a drug that temporarily reverses the effects of opioids. Narcan can be administered by injection or with a nasal applicator. It is powerful enough to reverse the effects of an overdose within seconds, providing a short window for the person who has overdosed to receive emergency medical attention. There has been no documented evidence of side effects nor potential for abuse, it is relatively inexpensive, and it has been shown to be effective in lowering overdose rates (Davis, Ruiz, Glynn, Picariello, & Walley, 2014; Walley et al., 2013). A brief timeline of current Narcan policy, drawn from a sample of local newspaper articles on the subject going back two decades, indicates that between 1996 and 2008, there were no references to Narcan in those newspapers. In 2008, local administrative and elected officials began giving quotes to those same local newspapers, in both articles and editorials, regarding the use of Narcan. These discussions included, among other issues, whether police officers, firefighters, paramedics, and other public officials should carry doses of Narcan.

Massachusetts governors Deval Patrick (Democrat, 2007-2015) and Charlie Baker (Republican, 2015-present) have made addressing the opioid epidemic a centerpiece of their respective legislative platforms. Both implemented numerous executive actions that expanded the provision of Narcan, giving state sanction to public safety officials to carry the drug on their person and making Narcan available over the counter for private individuals to purchase. Over time, substantial grants were made available to police and fire departments to purchase Narcan for their officers. Some cities however, seeing the number of overdoses increase rapidly, purchased the drug as soon as legally possible even before those grants were available (Davis et al., 2014).

One significant development in Narcan policy came in 2015, shortly after an extensive report from the Governor's Opioid Working Group was published, Attorney General of Massachusetts Maura Healey reached a deal with Amphastar Pharmaceuticals, the maker and distributor of Narcan, to offset the cost of Narcan purchased by the state. Massachusetts had been purchasing Narcan at the price of \$65 per dose, nearly triple the price of the drug in March 2014. Under threat of lawsuit, Amphastar settled with the state to help offset the cost, allowing the state to make the drug available at a significantly lower cost to cities and towns that wished to distribute it to public safety officials. This settlement made it easier than ever for public safety departments to obtain Narcan and equip their employees with doses of the drug (Healey, 2015).

As Narcan has become increasingly available throughout the state and issued to numerous police and fire departments, the number of articles in print

¹ For purposes of consistency and to match the term most frequently found in print media in Massachusetts, naloxone will be referred to as Narcan throughout.

media about the use of the drug has increased dramatically. Public officials have frequently commented on the record about Narcan policy, with varying degrees of support and markedly different conceptions of how they view the relationship of Narcan policy to their own work. In 2015, as opioid use in Massachusetts continued to rise, leading members of state law enforcement, health and legal agencies released this statement:

Since 2004, more than 6,600 members of our community have died, and behind those deaths are thousands of hospital stays, emergency department visits, and unquantifiable human suffering. We are in the midst of an epidemic. Our response requires a strong partnership between the medical community, law enforcement, the judiciary, insurers, providers, health and human services agencies, elected officials, and the public. Our law enforcement agencies are a critical part of the opioid solution; however, we cannot arrest our way out of this epidemic (Sudders, 2015).

This quote, from a report published by Massachusetts Governor Charlie Baker's Opioid Working Group, presents the pressing and complicated nature of opioid abuse in Massachusetts. Opioid addiction is on the rise across the country since 2010, and public officials are increasingly attempting to collaborate in innovative ways to combat this problem (Rudd, Aleshire, Zibbell, & Matthew Gladden, 2016). The critical nature of the problem in Massachusetts is evident in the rhetoric that is presented in local print media. In 150 articles that discussed opioids from three Massachusetts newspapers between 2008-2015, the word "crisis" was used 79 times to describe the issue of opioid addiction in the state, while "epidemic" was used 118 times. Within the context of this shifting discourse and active policy-making environment, a crucial question remains unanswered: Do elected officials and administrators differ in their opinions and understandings of Narcan policy, and what significance does this have for the current policy environment and the policy-making process going forward?

Research Design

To examine how public officials view Narcan-related policy and to understand how their discourse concerning the issue might contribute to policy feedback effects, a sample of the public dialogue around Narcan policy in Massachusetts was gathered and analyzed through a content analysis of quotes from public officials in print media. This process allows us to understand the elements of difference in public discourse between administrative and elected officials, their significance for public policy, and how they may influence mass public opinion and policy feedback on this issue. Media coverage has been shown to be a

powerful but understudied driver of bureaucratic policy-making, and conducting a content analysis of public discourse can be a useful tool in understanding how this discourse influences policy feedback (Wood & Waterman, 1993).

The approach to coding these articles resembles customary methodologies of content analysis, keeping in the mind the “systematic and scientific” approach recommended by King, Keohane, and Verba (1994). The analysis is conducted with an eye towards engaging in “meaning making” and recognizing “interpretive moments”, both of which are critical elements of a qualitative study that acknowledges, enhances and promotes the voices of those being studied as well as the interpretive and analytic voice of the researcher (Yanow, 2006). Coding was conducted over an extended period in order to iteratively refine the codes, concepts and observations created by the researcher. As recommended by Collier, Seawright, and Munck (2004), potential variables and narratives that did not have specific causal influence were not ignored, but instead considered as valuable contextual content to be coded and analyzed.

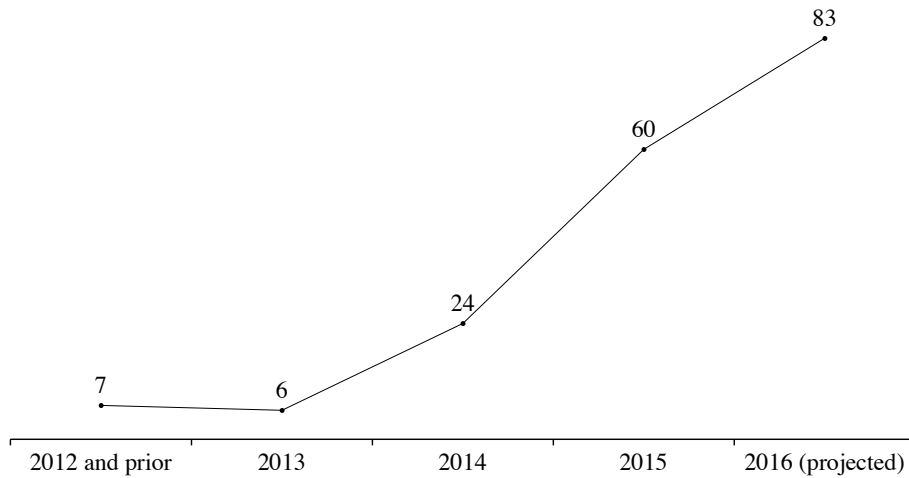
Three newspapers were chosen to provide data for this analysis: *The Worcester Telegram & Gazette*, *The Fitchburg Sentinel*, and *The Berkshire Eagle* (Pittsfield, MA), each of which covers local, regional and national news in Worcester and Berkshire Counties. While this is by no means a random nor representative sample of the discourse in Massachusetts, it is an ideal starting point for this work as it takes into account the public narratives of three cities and surrounding areas where opioid addiction is a significant problem, related issues are covered consistently by the media, and where public officials have frequently gone on the record in print. Additionally, each of these newspapers has full-text articles covering the past 20 years available online, allowing for a comprehensive review of their content.

A search of each newspaper was conducted using the Lexis-Nexis database, covering the years 1996-2016. Each search included the terms “Massachusetts” and “Narcans”, resulting in a total of 151 unique newspaper articles. These included local, regional and national news, editorials, and community event listings. The articles were downloaded, separated and appended to a project file in ATLAS.ti, a qualitative analytics software. The articles were first coded to indicate their respective dates, newspaper of origin and type of article (news, editorial, etc.). Once this was completed, through the previously described iterative process, content codes were created and grouped. After all articles were coded, they were revisited to ensure that codes were appropriately grouped and organized. This process ensures the following analysis will elucidate themes that can be understood using the frameworks of both bureaucratic politics and policy feedback. The emergent themes, codes and potential conclusions are discussed below.

Data Analysis

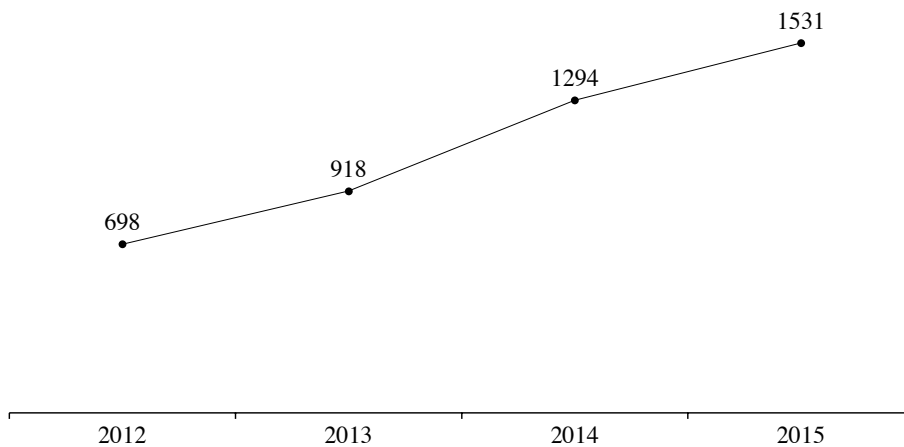
Articles in the three newspapers of interest that contain the words “Massachusetts” and “Narcan” in the same piece begin to increase in 2014, appearing in 24 articles total, four times as many as they did in 2013. This number more than doubles in 2015 to 60 articles. The analysis presented here only considers articles published on or before February 17, 2016, but if the first two months of 2016 are at all indicative, it is on pace to exceed 80 published articles that contain these two keywords. Fig. 1, shows the clear trend of an increasing public discourse around Narcan.

Fig. 1: References to Narcan and Massachusetts: 2008-2016



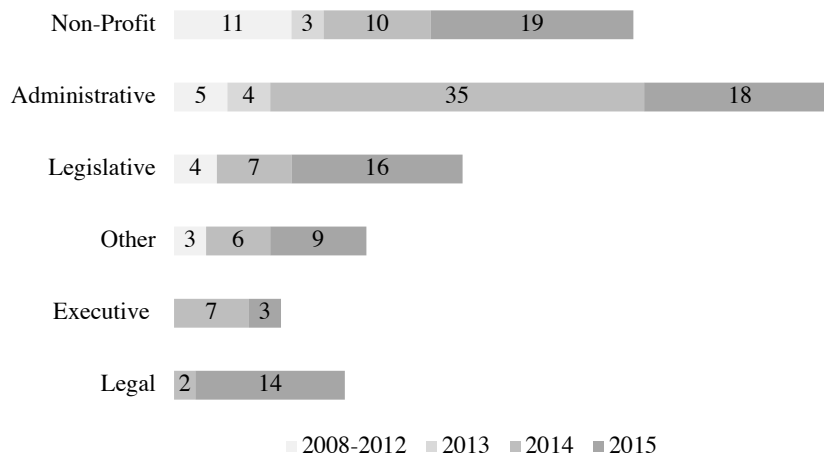
In addition, as per the Centers for Disease Control and Prevention, the number of opioid-related deaths in Massachusetts over the same period steadily increased.

Fig. 2: Confirmed Opioid Deaths in Massachusetts



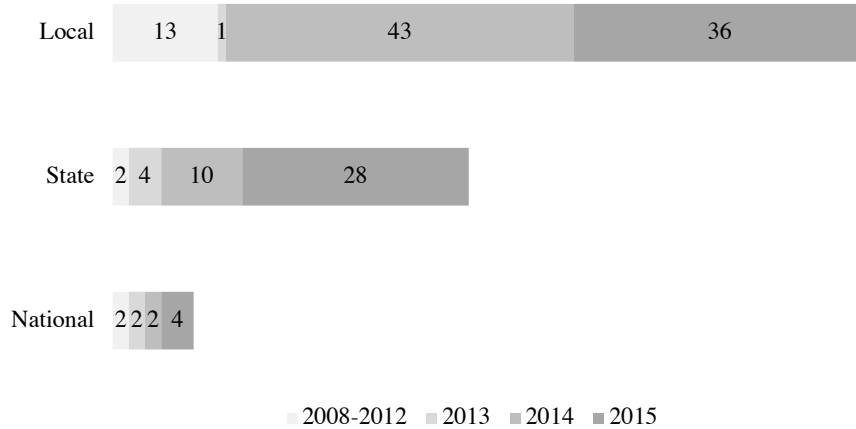
Over the eight-year period that this analysis covers, the type of actor quoted in print undergoes a meaningful shift. Prior to 2014, the majority of articles quote representatives of non-profit organizations, while executive and legal actors remain absent from the public discourse. In 2014, administrative actors are the overwhelming majority quoted, but as seen in Fig. 3, by 2015 the conversation is more evenly distributed around several different relevant actors.

Fig. 3: Type of Actor (2008-2015)



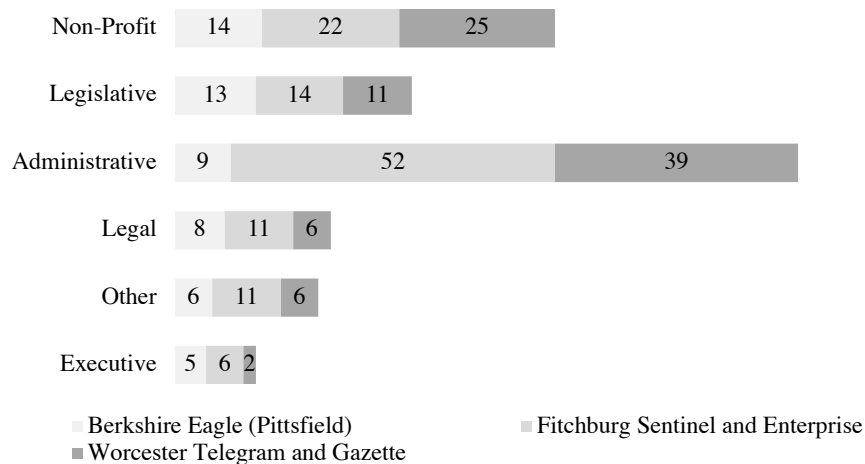
In addition to the type of actor, there is also a clear shift in the level of actor discussing Narcan in print over time. Once again, 2014 serves as the pivot point, with local level actors making up most of those quoted prior to that year. Local level actors continue to be the primary voices beyond 2013, but state level actors become much more involved in the discourse beginning in 2014 and increasing in 2015. Given that the analysis conducted herein only includes three regional newspapers, there is understandably very little reference to a greater national conversation or national actors. The evidence presented in Fig. 4 should not be construed to mean that there is no national conversation occurring, but simply that it is not being reported by the three newspapers considered

Fig. 4: Level of Actor (2008-2015)



As Fig. 5 shows, the *Telegram and Gazette* and *Sentinel and Enterprise* favor quotes from administrative officials. This could potentially reflect the fact that the *Eagle* covers the westernmost county in the state of, less centrally located to state administrative offices in Boston than either Worcester or Fitchburg. The Pittsfield area is also more rural and sparsely populated, and therefore has fewer administrative officials at the regional or local level. Further, there is evidence that rural areas are turning to alternative forms of public safety, which may also contribute to the smaller number of police officials quoted (Brunet, 2015).

Fig. 5: Type of Actor by Location



The above findings are inherently limited, but they frame the story of the public discourse around Narcan in the print media of Massachusetts. Within that context, it is important to unpack further how both administrative and elected officials represent their views on Narcan policy in these media reports, and what implications that may have for policy going forward. Since these representations are likely to have an impact on the policy environment as well as public opinion (Mettler & SoRelle, 2014; Soss & Schram, 2007), these views must be understood both as representations of the individuals stating them (and therefore a representation of the priorities those individuals place on particular issues), but also as potentially predictive information about how Narcan policy in Massachusetts may evolve based on theoretical and practical understandings of policy feedback.

Findings and Conclusions

Administrative actors represent the majority of individuals quoted in the print media reviewed herein, and therefore it is likely that their opinions will be the ones that contribute most to shaping the policy environment and discourse going forward. Since those administrators, primarily of fire and police officials, are the individuals actually utilizing Narcan it stands to reason that their primary concerns and opinions would be directly related to the application of Narcan as shown in Fig. 6a. These concerns are overwhelmingly related to availability and training in the use of Narcan in particular. The concerns of administrative officials do not appear to be backed up by elected officials who, as seen in Fig. 6b, are more concerned with the potential downsides to the widespread use of Narcan, larger issues of legal ramification, and what Narcan use means for the broader fight against opioid addiction. This leads to a distinct disconnect between the priorities of elected officials and the priorities of both managerial and street-level bureaucrats, indicating the presence of bureaucratic politics in this particular policy-making environment.

When it comes to specific concerns about Narcan, administrators, law enforcement and fire officials are primarily quoted on two specific issues: availability of and training in the use of Narcan. The quotes indicate that these groups of actors are using the public sphere to ask for more availability and training for themselves. Elected officials, while also concerned with availability, are primarily concerned with cost and promoting Good-Samaritan legislation at the state level that would protect those who administer Narcan to a person that has overdosed. Additionally, elected officials have concerns about Narcan enabling drug users by providing a mechanism that could reverse overdoses, the idea that Narcan is an effective way to decrease the broader opioid problem, and a

perception that Narcan is just a temporary fix. No elected officials quoted in the print media reviewed are concerned about training in the use of Narcan.

Police in particular, though this attitude is echoed by fire officials as well as local and state administrators, feel that the availability of Narcan is good or satisfactory for their departments, that it saves lives, and that sufficient training is available. Though this may seem to contradict the previous finding showing concern about training and availability among these groups, it reflects the fact that multiple police departments provided quotes at different times and to different reporters. While it is true that some police, fire and administrative officials said training and availability were satisfactory and others said they were not, the key finding here is that these this issue, positive or negative, was overwhelmingly the focus of the comments by these actors.

Elected officials do not have many favorable opinions, although when they do, those opinions generally revolve around the use of Narcan to combat addiction and save lives. These two codes, while undoubtedly favorable towards the use of Narcan, are primarily representative of larger concepts that do not apply directly to the usage or availability of Narcan. Elected officials are not tasked with the actual application of Narcan to individuals, and these codes clearly reflect that difference. Below, Figs. 6a and 6b on the following pages indicate the specific delineations of codes within the discourse of both administrative and elected officials.

Fig. 6a: Administrative Views of Narcan

Coded Themes	Prevent overdose	Keep public safe	Use of Narcan
	<i>prevent_od, save_lives</i>	<i>prevent_od, availability_good, availability_needed, training_available, training_needed, save_lives, exec_actions</i>	<i>availability_good, availability_needed, training_available, training_needed</i>
Police	Police officials, through their direct interactions with the public, are tasked with responding to overdoses and frequently referred to that specific task. Police officials were also most likely to mention actually utilizing Narcan in the field, and the fact that they had seen overdose victims die who did not receive Narcan in the field.	A primary goal of municipal police departments is to keep the public safe, and their focus on preventing overdoses and administering Narcan reflects this. Police chiefs have taken action to have Narcan available to them, and frequently note that this has helped to cut down on fatal overdoses once implemented.	Police are increasingly the officials tasked with administering Narcan, and they mention instances in which they did so, or were unable to, and the consequences that resulted, a direct, active connection with the actual use of Narcan.
Fire	Fire officials have a similar relationship to Narcan with regards to preventing overdose. Their comments and concerns frequently echoed those of police officials, though they were more experienced in administering Narcan, as paramedics have been permitted to carry it longer than police officers have in Massachusetts.	Fire officials are also tasked with keeping the public safe and were therefore more concerned with availability of Narcan and training in the usage of Narcan. They did not engage in the same executive actions that police chiefs did, primarily since many Massachusetts fire departments have had Narcan since at least 2008.	Fire departments have been using Narcan in the field longer than any other professionals analyzed here. They have a clearer relationship to the drug and feel more confident in their ability to utilize Narcan appropriately.
Other	The limited number of other officials quoted, primarily local or state public health administrators, shared the concerns of the police and fire officials. Though not tasked with using Narcan, they saw it has a critical tool in preventing and reversing overdoses.	Public health and other officials are also tasked with keeping the public safe, though in a less direct manner than police and fire officials. However, many of these officials saw Narcan as a tool to keep the public safe.	Not applicable

Fig. 6b: Elected Views of Narcan

Coded Themes	Cost	Legal ramifications	Opioid epidemic
	<i>cost, legal_action, legislative_action</i>	<i>legal_action, pro good sam, legislative_action</i>	<i>temp_fix, not_working, enabling</i>
Local	Local elected officials were frequently concerned about the cost of Narcan, citing the need for funding to provide it to police and fire departments. They also saw the procurement of Narcan as a part of the budgetary process, which is a substantively different viewpoint than that of administrators who saw the same issue as one of health and safety.	Local elected officials were not particularly concerned with the legal ramifications of Narcan, though some did reference a potential Good Samaritan Law proposed at the state level that would protect those administering Narcan from prosecution.	Local elected officials saw Narcan as part of a broader pattern of legislative, legal and administrative attempts to combat opioids. Though less pessimistic than state elected officials about the use of the drug, they did not see expanding Narcan availability and use as an entirely positive development in that fight.
State	State officials remained concerned with the cost of Narcan, seeing it as a budgetary matter. There was frequent discussion about passing legislation to fund local authorities to purchase Narcan. The state attorney general filed a lawsuit to force the maker and distributor of the drug to lower prices, and this action received significant news coverage.	The attorney general of Massachusetts sued the distributor of Narcan, based on the high cost the state was being charged. Elected officials at the state level attempted to pass a “Good Samaritan” law protecting those who administered Narcan from potential prosecution.	State officials saw Narcan usage in the greater context of the opioid epidemic. Some did not see Narcan as a useful or positive tool, instead noting that Narcan can enable drug users to overdose without serious consequence, or that it was a temporary fix to a long-term problem. Others felt that it was not working to bring down the overdose rate in the state.

Broadly, the two streams of thought indicated by these codes can be characterized as *direct mindsets* vs. *indirect mindsets*. Police, fire, and local administrators have a direct mindset when it comes to Narcan policy. They have seen people overdose, are tasked with the use of Narcan, and actively seek to accomplish their organizational mission (keeping the public safe), a goal which Narcan can assist them with. Elected officials have an indirect mindset, in that

they pay for the use of Narcan, ensure that legal ramifications of Narcan application are dealt with, and think about the impact of the larger epidemic. However, by the nature of their jobs, they remain disconnected from the street-level fight against opioid addiction.

Throughout the public media discourse on Narcan, specific quotations stand out as examples of this direct v. indirect dichotomy. The box below contains several references to Narcan within the media that demonstrate the direct mindset that street-level bureaucrats, particularly police officials, have when it comes to the usage of Narcan. These are just a few of the observations that occur frequently among police, as well as local administrators and fire officials, reflecting the view that first responders should be equipped with Narcan regardless of any other concerns. As street-level bureaucrats, they are concerned first with maintaining their own discretionary decision-making, and having the flexibility to utilize Narcan promotes the managerial distance between policy and decision-making that is a critical element of the street-level bureaucrat (Lipsky, 1980).

Selected Quotes from Administrative Officials

"I would think, as a first responder, there is no doubt that Narcan plays directly into our role as police to utilize this product," Chief DeMoura said. *Fitchburg Police Chief Robert DeMoura, March 5, 2014, Worcester Telegram & Gazette.*

The Worcester Police Department has trained officers to use Narcan, and Chief Gary Gemme hopes to have it available in cruisers within the next two weeks. *Worcester Police Chief Gary Gemme, August 8, 2014, Worcester Telegram & Gazette*

"We have a request in to the medical director at Heywood Hospital to carry it, and we've been waiting well over two months," Parsons said. "Once we get approval, we'll start training our officers, and they'll be carrying it in the cruisers." *Ashburnham Police Lieutenant Todd Parsons, November 16, 2014, Fitchburg Sentinel & Enterprise*

"We've had instances where we could have used it," he said. "One instance, my officer was there at the scene three or four minutes ahead of the ambulance, and he had to wait for the ambulance to get there to deploy it." *Westminster Police Chief Sam Albert, December 23, 2014, Fitchburg Sentinel & Enterprise*

Elected officials have substantively different observations on the same issues. The box below shows how these responses are distinct from those of the

street-level bureaucrats and reflect the indirect mindset of elected officials. In particular, these observations show that the concerns, advocacy and opinions around Narcan usage by these individuals are based on more indirect concepts such as cost, legal ramifications and the greater problems of the opioid epidemic. While elected officials generally state that Narcan should be made available to first responders, they are far more likely to be concerned with larger ramifications such as cost and legal protections. Observations of discourse in the media help to reinforce what is a clear dichotomy: bureaucratic concerns, advocacy and opinions are based on experiences and active connections to overdoses and Narcan use, whereas elected official's opinions on the same issues are based in contextual understandings including legal, administrative and budgetary concerns.

Selected Quotes from Elected Officials

"The so-called 'harm reduction' policies of our public health leadership serve to camouflage their aggressive actions for acceptance and normalization of illegal drug use...Common sense tells us that Narcan gives addicts a sense of confidence that they can take their 'high' to the point of overdose and live to tell the tale."
Barbara Haller, City Councilperson, Worcester, June 22, 2008, Worcester Telegram & Gazette.

[State Senate President] Rosenberg said that he's concerned about what he called the drastic increase in the price of naloxone, adding that the drug is needed more than ever with opiate-related overdoses on the rise, according to State House News Service. *State Senator Stan Rosenberg, April 25, 2015, Berkshire Eagle.*

Flanagan said she's pushing for the bill to include an update to the Good Samaritan law shielding first responders, many of whom now carry the overdose-reversal drug Narcan, from civil liability. Flanagan is also looking for additional training for first responders on the details of the law that protects those who call for help in cases of drug overdoses from criminal prosecution. *State Rep. Jennifer Flanagan, September 24, 2015, Berkshire Eagle.*

[Healy's] office is also looking at the pricing practices companies use to set prescription drug prices, sometimes reaching out to the manufacturers. In one instance related to the opioid crisis, she said the rising price of Narcan, which is used to treat drug overdose victims, was stabilized through a bulk purchase agreement for Massachusetts communities she worked out with the manufacturer, Amphastar Pharmaceuticals. *Attorney General Maura Healy, December 19, 2015, Berkshire Eagle.*

Implications and Further Research

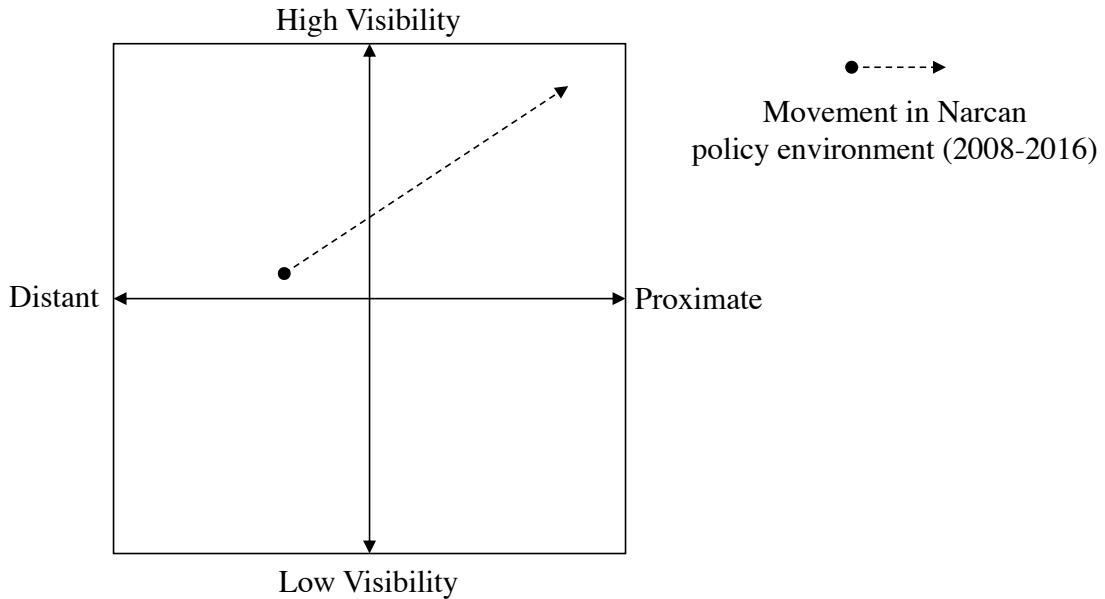
The major implications of this research are twofold: First, the dichotomy between how administrative and elected officials view what constitutes an effective policy, as well as the differences within those groups, suggests that bureaucratic politics is at work in this policy-making environment and that it may be useful to study local government policy-making through that lens. As administrative officials continue to voice their concerns and represent their priorities more forcefully and in more venues than elected officials, the policy environment may shift towards a high-visibility and increasingly proximate environment. If this is the case, it will be the concerns of administrative officials that will be most influential in shaping future policy. The perpetuation of the ideas put forward by these officials in the press include three significant factors that will shape how the bureaucratic politics of this particular policy debate might play out.

First, policy feedback will continue to push mass public opinion towards the perspectives most often represented in the media. If the trends demonstrated herein continue, this will likely mean a high-visibility high-proximity policymaking environment where public opinion is highly favorable towards the *direct mindset* approach, encouraging officials to carry and utilize Narcan whenever possible. Second, as political attention becomes more focused, both administrative and elected officials may utilize the “politics of information” to suppress, shift or obfuscate the ways in which Narcan has impacted overdose rates to reflect their preferred policy approach (Baumgartner & Jones, 2015). Finally, the state-agent/citizen-agent delineation between street-level bureaucrats and local elected officials will play a role in how each sees their role in the larger context of the opioid crisis, as reflected in the direct v. indirect conceptions of the role of public officials in Figs. 6a and 6b (S. Maynard-Moody & Musheno, 2000). These dynamics may well play out in other cases of public safety, public health or drug policy, and further research will be necessary in order to determine whether or not these dynamics are unique to the policy area and jurisdiction of this case.

The second implication is the evidence that a shift in the policy environment is either pending or already in progress within this particular arena. Soss & Schram (2007) characterize the policy feedback effects of a given policy as falling into quadrants based the visibility and proximity of a policy to a population. This framework provides a tool for understanding how Narcan policy in Massachusetts may be shifting between quadrants as media coverage of the issue changes the narrative around both Narcan and the opioid epidemic. Fig. 7 below is a replication of the framework developed by Soss and Schram, and a representation of how Narcan policy appears to be shifting between quadrants based upon the trends demonstrated herein. As Narcan policy in Massachusetts has become a “high-visibility, high-proximity” issue, the feedback process has

become increasingly influenced by mass publics, who are intimately connected to the policy. Research has shown that other policies that fall into this quadrant, such as Social Security and income tax, are among the most powerful drivers of policy feedback (Campbell, 2003; Soss & Schram, 2007).

Fig. 7: A General Framework for the Analysis of Mass Feedback Processes: Policy Visibility & Proximity (reproduced and adapted from Soss & Schram, 2007, p. 121)



This article is a first step towards understanding the differences in rhetoric and policy positions between elected and administrative officials, and how these splits may impact both the bureaucratic politics of local government as well as policy feedback around particular issues. More work must be undertaken to fully develop the ideas presented here and explain how the thematic streams described are influenced by the location, culture and mission of both individuals and organizations. Future research might include conducting quantitative analyses of the available information on overdoses, hospital admissions, Narcan purchases and other similar indicators of the larger opioid epidemic in other jurisdictions. In conjunction with understanding the policy environment in which these numbers are reported, it may be possible to find causal relationships that help to determine why and how policy is created.

Another critical question to consider is the impact of individuals on policy, and how the views of specific groups of bureaucrats and elected officials within a given jurisdiction impact how policy is created and implemented. Groups of individuals can form divided constituencies seeking a similar goal by different

means, which in turn can influence how government approaches creating policy. All may agree that the opioid epidemic must be addressed, but the specific ways by which to bring down the number of overdoses may be controversial, even if all groups agree that government policy must address the issue (Karch, 2010). Qualitative approaches to answer this question might include interviews, observations and ride-alongs with public safety officials, and could utilize a story-telling approach similar to Maynard-Moody & Musheno (2003) or Epp, Maynard-Moody, & Haider-Markel (2014). Quantitative approaches might follow the example of Fleming (2014), who demonstrates that parents utilizing school voucher programs have engaged in political learning, and become more politically active. A study of public administrators could gauge the impact of having used Narcan in the field on how those administrators view Narcan-related policies. There are implications within the study of all of these forces not only for a better understanding of the dynamisms shaping Narcan policy, but for how elected officials, administrators, and street-level bureaucrats can bargain, debate and form alliances throughout the policy-making process even if their primary focal points on a particular issue are dissimilar.

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A Note on Supplemental Materials

While the data utilized in this manuscript is not currently hosted online, the author welcomes anyone to reach out directly if they have interest in the codebook, models, un-coded or coded data files used for this project.