

# Through a harm reduction lens

Civil society engagement in multilateral decision making



HR2 | HARM REDUCTION & HUMAN RIGHTS

A PROGRAMME OF THE INTERNATIONAL HARM REDUCTION ASSOCIATION

## About the International Harm Reduction Association and HR2

The International Harm Reduction Association (IHRA) is one of the leading international non-governmental organisations promoting policies and practices that reduce the harms from all psychoactive substances, harms which include not only the increased vulnerability to HIV and hepatitis C infection among people who use drugs, but also the negative social, health, economic and criminal impacts of illicit drugs, alcohol and tobacco on individuals, communities and society. A key principle of IHRA's approach is to support the engagement of people and communities affected by drugs and alcohol around the world in policy-making processes, including the voices and perspectives of people who use illicit drugs.

The Harm Reduction & Human Rights Programme (HR2) leads the organisation's programme of research and advocacy on the development of harm reduction programmes and human rights protections for people who use drugs in all regions of the world.

IHRA is an NGO in Special Consultative Status with the Economic and Social Council of the United Nations.

### About the Author

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# Foreword

No one who has ever worked on issues relating to AIDS could deny the immense value and contribution that non-governmental partners bring to the response. They contribute in a myriad of ways, not least through the lived experience – and the added depth this brings to policy, programming and implementation – of those most closely affected, including people who use drugs.

Of all the partners UNAIDS works with, people who use drugs are among the most marginalised. Where user networks exist they are under resourced, if they are resourced at all. In many places people who use drugs are criminalised, their human rights violated and access to harm reduction services limited or non-existent. Everywhere in the world drug users face stigma and discrimination on a daily basis. As a consequence, millions of users are unnecessarily becoming infected with HIV and dying of AIDS-related illnesses or from hepatitis C. In this context, organisations such as the International Harm Reduction Association and its affiliates play a crucial role in advocating for improved drug policy, in providing much-needed harm reduction services for people who use drugs and in supporting the capacity development of user organisations.

At the UNAIDS Secretariat we aim to be proactive in reaching out to and working with both harm reduction networks and networks of people who use drugs, facilitating their participation in our governance and other processes. Where possible, we engage in joint advocacy efforts towards the creation of enabling environments, for instance to end laws that criminalise people who use drugs, to ensure that funds proportionate to the status of the epidemic reach harm reduction services and to support forward-looking policy development.

The UNAIDS Secretariat and its cosponsors are fully committed to realising universal access to prevention, treatment, care and support through what will be an ongoing and multi-partner effort in the years to come. Success will necessitate a willingness to be bold, to take risks and to move increasingly away from doing 'business as usual' towards more innovative and inclusive ways of working with partners whose message and wisdom we cannot afford to ignore.

Any effort to maximise the meaningful engagement of civil society within the UN system must be applauded. While some of the views within this report may not represent those of the UNAIDS Secretariat or its cosponsors, we believe the report raises some important questions. We welcome it as a tool to assist us to reflect, adapt and move forward in new ways towards more effective systems and processes for engagement with the rich and diverse expertise that organisations working on harm reduction and networks of people who use drugs bring to the table.

This document moves us a step closer to more effective engagement of communities with the UN system, a step in the process which I hope will ultimately lead to universal evidence and human rights based programming for drug users everywhere.

**Kate Thomson**  
**Head of the Civil Society Partnerships Unit at UNAIDS**



# 1. Introduction

*If only those with power ... would listen and incorporate the experience of those who have first hand knowledge of the reality of the situation on the ground – the results would transform the ideas of leadership and decision-making.*

Mary Robinson

Former UN High Commissioner for Human Rights<sup>1</sup>

The importance of civil society involvement in international policy-making and decision-making processes is widely recognised and promoted as best practice. Since the mid-twentieth century, when civil society organisations were formally recognised as international actors under Article 71 of the Charter of the United Nations,<sup>2</sup> the influence of non-governmental voices in international processes has grown exponentially. The ‘NGO explosion’ in the 1990s saw the most dramatic rise in civil society engagement and influence in international policy making to date.<sup>3</sup> In 2004, former Brazilian President Fernando Henrique Cardoso, in his role as Chair of the Panel of Eminent Persons on United Nations–Civil Society Relations, declared that ‘global governance is no longer the sole domain of governments’.<sup>4</sup> In 2009, the constitutions and resolutions, as well as workplans, strategies and guidelines, of several multilateral agencies explicitly state the necessity of engaging with civil society.

Programmes that are planned, carried out and monitored by the communities they aim to serve are often the most effective. Similarly, those most keenly affected by policies and decisions made through multilateral processes tend to be those who bring the most informed and insightful contributions to the table. In this sense, non-governmental and community-based organisations are often well placed to help develop targeted and specific strategies and responses to HIV/AIDS, drug use and harm reduction issues. Civil society organisations have valuable, and often differing, opinions and perspectives from those of governments and multilateral bodies and there is agreement across multilateral agencies – at least in principle – that the meaningful and active involvement of civil society is integral to relevant and accurate policy and programmes.

Multilateral agencies have various mechanisms, both formal and informal, to enable civil society engagement. These mechanisms are utilised to varying extents. Since the mid-1990s, there have been several reviews and evaluations of civil society engagement in multilateral processes and the clear trend has been

1 M. Robinson (1996) ‘Empowerment Through Partnership’ [foreword] in B. Harbor, P. Morris and I. McCormac (eds) *Learning to Disagree – Peace and Economic Development in Ireland* Dublin: UNISON and IMPACT.

2 Charter of the United Nations, Chapter 10: The Economic and Social Council, Article 71.

3 Secretary-General’s Panel of Eminent Persons on UN Relations with Civil Society (2003) ‘UN System and Civil Society – An Inventory and Analysis of Practices’ [background paper].

4 UN General Assembly Fifty-Eighth Session, Agenda item 59. A/58/817: Strengthening of the United Nations System (11 June 2004). Transmittal letter dated 7 June 2004 from the Chair of the Panel of Eminent Persons on UN–Civil Society Relations, addressed to the Secretary-General.

towards improving and enhancing the opportunities for involving civil society in international policy making. Agencies inside and outside the UN system have articulated further commitment to civil society engagement through resolutions, declarations and numerous innovative mechanisms for enhancing such involvement. Bodies that take a minimalist approach – simply including civil society to the extent to which they are obliged to through their constitutions or Article 71 of the UN Charter – are becoming increasingly out of step within the broader UN system. However, when it comes to questions of harm reduction and wider drug policy reform, civil society organisations often struggle against these narrow interpretations in their attempts to have a sustained and meaningful impact on international drug policy.

This report examines the ways in which multilaterals are currently engaging civil society groups working on harm reduction in international policy, including the engagement of leading non-governmental organisations and the involvement of affected communities. It identifies examples of good practice in this area, highlights some of the shortcomings and concludes with recommendations for improving civil society involvement in the formulation of international harm reduction and drug policy.

## 2. Civil Society Engagement: What Is It and Why Is It Important?

*Civil society is now so vital to the United Nations that engaging with it well is a necessity, not an option.*

Fernando Henrique Cardoso

Former Brazilian President and former Chair of the Panel of Eminent Persons on United Nations–Civil Society Relations<sup>5</sup>

### 2.1 What Is Civil Society?

The term ‘civil society’ encompasses a wide range of organisations working on a diversity of issues and employing a variety of approaches. Civil society organisations (CSOs) function at the local, national, regional and international levels and their activities include all aspects of programming (planning, delivery, monitoring and evaluation), advocacy, campaigning and research. For the purposes of this report, civil society is defined as all groups outside government that express the interests of social groups and raise awareness of key issues in order to influence policy and decision making.<sup>6</sup> In relation to harm reduction and drug policy, this includes (but is not limited to) non-governmental organisations (NGOs), community-based organisations and networks whose work is centred around, or affected by, drugs and/or drug policies.

In some countries and regions, civil society is strong and has a recognised integral role in policy making and programming. In the response to HIV epidemics, for example, CSOs are the primary providers of HIV prevention, treatment and care services in many countries and often play a key role in lobbying for change. There are several countries, however, where civil society activity is restricted, suppressed or made impossible by governments. In Iran and Myanmar, for example, civil society activity is heavily scrutinised by government, while in China many CSOs are effectively ‘creatures of governments’<sup>7</sup> and lack independence and autonomy. Notably, these countries are all particularly affected by HIV epidemics among people who inject drugs.

<sup>5</sup> F.H. Cardoso (2004) *We the Peoples: Civil Society, the United Nations and Global Governance*. Report of the Panel of Eminent Persons on United Nations–Civil Society Relations: 9.

<sup>6</sup> This definition follows the one provided by the Food and Agriculture Organization of the UN, ‘Consulting with Civil Society’: [www.fao.org/tc/NGO/index\\_en.asp](http://www.fao.org/tc/NGO/index_en.asp) (accessed 29 November 2008).

<sup>7</sup> J. Paul (2000) ‘NGOs and Global Policy-Making’: [www.globalpolicy.org/component/content/article/177/31611.html](http://www.globalpolicy.org/component/content/article/177/31611.html) (accessed 4 August 2009).



## 2.2 Why Is Civil Society Engagement Important?

The decisions made through multilateral processes have global influence and consequences. The resolutions and declarations agreed by UN Member States can have far-reaching and long-lasting impacts at many levels. They can launch international initiatives, such as '3 x 5'<sup>8</sup> and 'Universal Access',<sup>9</sup> which have been able to galvanise the global response to HIV and AIDS. These decisions can also help to shape national government policy and legislation, and they affect the wider population as a result. When drafting and agreeing international policies and decisions among government delegates, the expertise and perspectives of civil society often provide the missing links between communities and the multilateral world.

At present, civil society is engaged in several aspects of multilateral functioning, including policy- and decision-making processes, planning, implementation, monitoring programmes and state compliance with international law and guidance, and dispute settlement procedures.

### Why civil society must be involved in multilateral processes

1. NGOs have specialised knowledge that enriches the policy debate. They have access to information, experiences and perspectives that are different to those that governments bring to the discussion.
2. The involvement of NGOs increases the legitimacy of international organisations and international processes. As representatives of unique global constituencies, the inclusion of NGOs enhances democratic and transparent decision making. NGOs can also help to increase the dissemination of information, thereby enhancing broader public understanding of policy issues.
3. Engaging NGOs in policy making widens the debate. Civil society organisations have the independence necessary to raise issues and questions that governments will not and in doing so can act as the 'conscience' of the process.

Adapted from S. Ripinsky and P. Van Den Bossche (2007) *NGO Involvement in International Organizations: A Legal Analysis* London: British Institute of International and Comparative Law: 11–12.

<sup>8</sup> World Health Organization (WHO), 'The 3 x 5 Initiative': [www.who.int/3by5/en/](http://www.who.int/3by5/en/) (accessed 24 July 2009).

<sup>9</sup> WHO, 'Universal Access by 2010': [www.who.int/hiv/topics/universalaccess/en/index.html](http://www.who.int/hiv/topics/universalaccess/en/index.html) (accessed 24 July 2009).

While civil society engagement is an accepted and widely used part of international policy making, it is not without challenges. Civil society actors may struggle to make use of weak mechanisms for engagement, often with insufficient capacity or support (financial or otherwise) to have a tangible impact. Multilaterals may have difficulties determining the legitimacy, accountability and representativeness of NGOs, ensuring meaningful rather than tokenistic involvement and avoiding the widening of discussions to ever-expanding groups of stakeholders, potentially leading to 'endless meetings without conclusion'.<sup>10</sup>

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10 UN General Assembly Fifty-Eighth Session, Agenda item 59. A/58/817: Strengthening of the United Nations System (11 June 2004). F.H. Cardoso (2004) *We the Peoples: Civil Society, the United Nations and Global Governance*. Report of the Panel of Eminent Persons on United Nations–Civil Society Relations: 27.

## 3. Civil Society Engagement in Multilateral Decision Making on HIV and Harm Reduction

### 3.1 Overview of the United Nations System

The involvement of civil society within UN processes has been emphasised since the organisation's inception. The vehicle for much of this engagement, particularly when it comes to HIV and harm reduction policy, is the Economic and Social Council of the United Nations (ECOSOC). ECOSOC was established under the Charter of the United Nations as 'the principal organ to coordinate economic, social, and related work ... [and] the central forum for discussing international economic and social issues, and for formulating policy recommendations'.<sup>11</sup> As stated in Article 71 of the Charter:

The Economic and Social Council may make suitable arrangements for consultation with nongovernmental organizations which are concerned with matters within its competence. Such arrangements may be made with international organizations and, where appropriate, with national organizations after consultation with the Member of the United Nations concerned.<sup>12</sup>

ECOSOC 'plays a vital role in policy administration in UN agencies' engagement with civil society<sup>13</sup> and, in 1996, articulated three levels of status for NGO engagement:<sup>14</sup> general consultative status, special consultative status and inclusion on the roster.<sup>15</sup> In 2009, there were 3,290 organisations recognised by ECOSOC under one of these three categories.<sup>16</sup> ECOSOC's procedures and arrangements regarding civil society 'govern or guide most other UN agencies in their relations with NGOs'.<sup>17</sup>

11 UN Economic and Social Council, 'Background Information': [www.un.org/ecosoc/about/](http://www.un.org/ecosoc/about/) (accessed 24 August 2009).

12 Charter of the United Nations, Chapter 10: The Economic and Social Council, Article 71.

13 Governing Council of the UN Environment Programme, Twenty-Second Session of the Governing Council/ Global Ministerial Environment Forum, Nairobi, 3–7 February 2003, Items 4(c) and (d) of the provisional agenda: Policy issues: Coordination and cooperation within and outside the United Nations, including non-governmental organizations; The role of civil society: Review of the practices of civil society engagement in United Nations organizations.

14 UN Economic and Social Council, 'ECOSOC Resolution 1996/31: Consultative Relationship between the United Nations and Non-Governmental Organizations': [www.un.org/esa/coordination/ngo/Resolution\\_1996\\_31/index.htm](http://www.un.org/esa/coordination/ngo/Resolution_1996_31/index.htm) (accessed 10 August 2009).

15 The first is reserved for large NGOs working globally on several issues on ECOSOC's agenda. The second is for those consulted in a few of ECOSOC's areas of focus and the third is for those consulted on request in relation to specific issues.

16 See [www.un.org/esa/coordination/ngo/](http://www.un.org/esa/coordination/ngo/) for a searchable database of NGOs with 'consultative status' within ECOSOC.

17 Governing Council of the UN Environment Programme, Twenty-Second Session of the Governing Council/ Global Ministerial Environment Forum, Nairobi, 3–7 February 2003, Items 4(c) and (d) of the provisional agenda: Policy issues: Coordination and cooperation within and outside the United Nations, including non-governmental organizations; The role of civil society: Review of the practices of civil society engagement in United Nations organizations.

In order to enhance and assist civil society participation within UN processes, the UN NGO Liaison Service (UN NGLS) was created in 1975 ‘to serve as a bridge between the UN and civil society organizations’.<sup>18</sup> Although not a principal organisation of the UN, it is an inter-agency body designed to ‘promote dynamic partnership’ with civil society by providing ‘information, expertise, advice and support’.<sup>19</sup> It produces reports summarising civil society engagement within the UN, the latest of which, from 2007, significantly excludes mention of harm reduction and has only one reference to people who use drugs, this in relation to the work of UNAIDS.<sup>20</sup>

In addition to these central bodies, the majority of other thematic UN entities are also obligated – either in their constitutions or in subsequent resolutions – to engage civil society in their work. These obligations differ across the UN system, as does the extent to which they translate into action the mechanisms to enable and monitor engagement and the impact of this engagement.

Many UN entities include harm reduction and drug policy in their work.<sup>21</sup> The most obvious of these are the three bodies that together comprise the UN drug control system: the Commission on Narcotic Drugs (CND), the UN Office on Drugs and Crime (UNODC) and the International Narcotics Control Board (INCB). Other UN agencies whose mandate and/or activities have a significant technical, programmatic, policy or financial impact in the area of harm reduction and drug policy include, in particular, the UN Joint Programme on HIV/AIDS (UNAIDS) and its Programme Coordinating Board (PCB), as well as several multilateral agencies that are UNAIDS cosponsors, including the World Health Organization (WHO), the UN Children’s Fund (UNICEF), the UN Development Programme (UNDP) and the UN Educational, Scientific and Cultural Organization (UNESCO).

The Global Fund to Fight AIDS, Tuberculosis and Malaria, which is neither a UNAIDS cosponsor nor part of the UN, also plays an important role in harm reduction internationally and engages civil society in decision making to a far greater extent than any UN agency.

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18 UN NGLS, ‘Objectives and Activities’: [www.un-ngls.org/spip.php?page=article\\_s&id\\_article=788](http://www.un-ngls.org/spip.php?page=article_s&id_article=788) (accessed 24 August 2009).

19 UN NGLS (2004) ‘Aide Memoire’: [www.un-ngls.org/orf/AIDE\\_MEMOIRE\\_NGLS.doc](http://www.un-ngls.org/orf/AIDE_MEMOIRE_NGLS.doc) (accessed 24 August 2009).

20 UN NGLS (2008) UN–Civil Society Engagement: Year in Review 2007: [www.un-ngls.org/site/IMG/pdf/Final\\_Year\\_in\\_Review\\_2007.pdf](http://www.un-ngls.org/site/IMG/pdf/Final_Year_in_Review_2007.pdf) (accessed 24 August 2009).

21 IHRA and Human Rights Watch (2009) *Building Consensus: A Reference Guide to Human Rights and Drug Policy* London: IHRA.

Table 1: Overview of civil society engagement (CSE) in multilateral agencies relevant to harm reduction, HIV and drug policy<sup>22</sup>

Agency	Body type	Obligations for CSE in constitution or resolutions	Dedicated civil society liaison personnel	CSE in formal governance structures	Voting rights for civil society in these structures	Guidance on CSE available online	Process in place for review and improvement of CSE
UNAIDS	UN joint programme/ other entity	●	●	●	○	●	●
UNAIDS PCB	Governing body of UNAIDS	●	n/a	●	○	●	●
WHO	UN specialised agency	●	●	○ <sup>a</sup>	n/a	●	● <sup>b</sup>
UNDP	UN programme/fund	○ <sup>c</sup>	●	○ <sup>d</sup>	n/a	●	●
UNESCO	UN specialised agency	●	●	○	n/a	●	●
UNICEF	UN programme/fund	●	●	○	n/a	●	●
World Bank	UN specialised agency	○	●	○	n/a	●	●
Global Fund to Fight AIDS, Tuberculosis and Malaria	Non-UN funding mechanism	●	●	●	●	●	●
UNODC	Department/office of the UN Secretariat	●	●	○	n/a	○	○ <sup>e</sup>
CND	Functional commission of ECOSOC	○	n/a	○	○	○	○
INCB	UN treaty body	○ <sup>f</sup>	○	n/a	n/a	○	○

● = YES      ○ = NO

22 This table excludes reference to the UN human rights mechanisms, such as the Human Rights Council and human rights treaty bodies. For more information on such organisations, see D. Barrett (2008) 'Unique in International Relations'? A Comparison of the International Narcotics Control Board and the UN Human Rights Treaty Bodies London: IHRA.

a CSOs in 'official relations' with WHO are invited to attend World Health Assembly meetings and can submit a statement but are not part of the governance structure.

b Although the acceptance of a 'new' policy on civil society engagement has been 'postponed' since 2004.

c However, UNDP derives its mandate for working with civil society from Article 71 of the UN Charter.

d CSOs are admitted as observers to executive board meetings. CSOs with ECOSOC status can submit written statements and have the right to make oral statements.

e In 2009, an independent evaluation of the Beyond 2008 process was published. While very useful, it was not a comprehensive evaluation of civil society engagement at UNODC.

f The 1972 Protocol to the 1961 Single Drug Convention explicitly includes NGOs as a source of information on which the INCB should draw.

## 3.2 Civil Society Engagement with UNAIDS and Its Cosponsors

### UNAIDS

The United Nations Joint Programme on HIV/AIDS (UNAIDS) established in 1996 now works in more than eighty countries worldwide. It comprises a secretariat and ten multilateral agency 'cosponsors',<sup>23</sup> several of which operate as 'lead' agencies on particular issues within the 'UNAIDS family'. This structure creates opportunities for civil society to engage not only with the UNAIDS Secretariat directly, but also with its component cosponsor agencies. Indeed, several of these agencies have staff members or teams dedicated to working with civil society, at both head office and field levels.

The UNAIDS Secretariat is governed by its Programme Coordinating Board (PCB). Both the Secretariat and the PCB engage civil society to levels beyond those required by the UN Charter, the ECOSOC resolution establishing UNAIDS<sup>24</sup> or subsequent resolutions. For UNAIDS, the meaningful involvement of civil society in international policy debate is a fundamental approach reflecting accountability and good practice, rather than a discretionary 'add-on'.

UNAIDS was the first UN entity to include formal civil society representation in its governing structure.<sup>25</sup> The PCB comprises twenty-two governments, the ten UNAIDS cosponsors and five civil society representatives. The civil society delegation is appointed through a transparent selection process managed by the PCB NGO representatives themselves, which seeks to ensure that, as a group, they are representative in terms of gender, region and affected communities (including people who use drugs). The group also selects five individuals to serve as alternate members.

Technically, the civil society representatives are 'observers' on the PCB. Although permitted to make interventions, they do not have voting rights, which has been raised as an issue for reconsideration by an independent review.<sup>26</sup> In practice this has not been problematic as no vote, as yet, has been taken at a PCB meeting.<sup>27</sup> The commissioning of an independent review of NGO/civil society participation in the PCB in itself reflects the importance that UNAIDS and the PCB place on the engagement of civil society partners.<sup>28</sup>

23 UN High Commissioner for Refugees, UNICEF, World Food Programme, UNDP, UN Population Fund, UNODC, International Labour Organization, UNESCO, WHO, World Bank.

24 UN Economic and Social Council, Resolution 1994/24: Joint and co-sponsored UN programme on human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS).

25 PCB NGO Delegation of UNAIDS, 'Fact Sheet: Review of NGO/Civil Society Participation in the UNAIDS Programme Coordinating Board': [www.unaids.org/unaids\\_resources/images/Partnerships/Partnerships%2019PCB/061205\\_NGOPCB%20Review\\_Fact%20Sheet\\_en.pdf](http://www.unaids.org/unaids_resources/images/Partnerships/Partnerships%2019PCB/061205_NGOPCB%20Review_Fact%20Sheet_en.pdf) (accessed 2 September 2009).

26 PCB NGO Delegation of UNAIDS (2007) '20th Meeting of the UNAIDS Programme Coordinating Board, Geneva, Switzerland, 25–27 June 2007' (UNAIDS/PCB(20)/07.6/Rev.1): [http://data.unaids.org/pub/InformationNote/2007/review\\_of\\_ngo\\_participation\\_item3.2\\_en.pdf](http://data.unaids.org/pub/InformationNote/2007/review_of_ngo_participation_item3.2_en.pdf) (accessed 20 November 2009).

27 *ibid.*

28 *ibid.*

The PCB Bureau – the body tasked with providing coordination, guidance and facilitation of decision making within PCB sessions and throughout the year – also has an NGO seat, to which one of the serving PCB NGO delegates is nominated. Along with representatives from three governments and one UNAIDS cosponsor, the NGO delegate plays an instrumental role in determining the operations of the PCB.

The input of civil society representatives, and the vast networks and civil society contacts they represent, has long been essential to the PCB’s decision-making process. In 2009, for example, this structure enabled many NGOs to contribute to a background paper for a PCB session on injecting drug use and HIV, a session that was attended by many harm reduction and drug policy organisations. During the session, the International Network of People who Use Drugs (INPUD) spoke from the floor.<sup>29</sup>

At the Secretariat, in all regional offices and in many country offices, UNAIDS has staff dedicated to the engagement of and liaison with civil society. Civil society representatives also sit on many UNAIDS groups, from the International Task Team on HIV Related Travel Restrictions to working groups such as the Reference Group on HIV and Human Rights and the Monitoring and Evaluation Reference Group. Where civil society is not adequately involved in country reporting processes, CSOs are encouraged by UNAIDS to submit national shadow reports on country progress towards universal access. The UNAIDS Secretariat has collaborated with, among others, the International Council of AIDS Service Organizations (ICASO) to manage and support this process.

Following a decision of the PCB, the UNAIDS Secretariat has also funded an independent communication and coordination facility, managed by the PCB NGOs, which provides a conduit for the flow of relevant information between the PCB NGOs and civil society constituencies, thus enhancing civil society engagement. The current contract for the facility is held by the World AIDS Campaign.

UNAIDS also involved civil society, via the PCB NGO delegation, in its search for a new executive director in 2008 by encouraging NGOs to recommend suitable candidates.

Following the 2001 UN General Assembly Special Session on AIDS (UNGASS), UNAIDS has helped to organise and convene high-level meetings (HLMs) where stakeholders gather to determine priorities and make commitments within the

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29 INPUD (2009), ‘INPUD Speech to UNAIDS PCB’: [www.ihra.net/Assets/2017/1/INPUDSpeechtoUNAIDSPCB2009.pdf](http://www.ihra.net/Assets/2017/1/INPUDSpeechtoUNAIDSPCB2009.pdf) (accessed 2 September 2009).

global AIDS response. In 2006 and 2008, 'civil society task forces' were convened and supported by the UNAIDS Secretariat to be directly involved in planning and decision making around the HLMs and to plan the civil society hearings.

To further facilitate civil society involvement in HLM2008, the UNAIDS Secretariat underwent a process to select a coalition of NGOs to form a Civil Society Support Mechanism (CSSM). The successful bid was led by ICASO and the International Women's Health Coalition. The CSSM was responsible, among other tasks, for convening a wider civil society support group for the HLM, as well as selecting the members of the civil society task forces. In 2008, the task forces included at least one representative of people who use drugs and several from organisations that included harm reduction within their remit.<sup>30</sup>

Although some difficulties with civil society engagement within UNAIDS still exist,<sup>31</sup> the organisation has been a leader among multilateral agencies in this field. Civil society engagement is part of the ethos of the programme, which is very much a partnership between civil society and other stakeholders. Unfortunately, the same commitment is not upheld by some of the UNAIDS cosponsors and their strategic leads on specific areas, as raised during a stakeholder consultation as part of the ongoing independent evaluation of UNAIDS. The consultation document recognised that cosponsors' involvement and collaboration with civil society was largely dependent on their mandates and:

[T]here is a perception that some do not value civil society and are not responsive to the views of civil society organisations. Efforts by the PCB NGO delegation to work more closely with the CCO [Committee of Cosponsor Organisations] have made little progress ... While UNAIDS has tried to be inclusive, the secretariat and cosponsors are viewed as having reached out less effectively to some constituencies and to have avoided 'difficult' groups, in terms of support for representation and capacity development.<sup>32</sup>

## World Health Organization

The World Health Organization (WHO), a key agency for harm reduction policy and practice and a UNAIDS cosponsor, has a long history of engaging with civil society in its work. The preamble of the WHO Constitution states that 'Informed opinion and active co-operation on the part of the public are of the utmost

30 UNGASS, 'Civil Society Task Force': [www.ua2010.org/en/UNGASS/UNGASS-2008/Civil-Society-Task-Force](http://www.ua2010.org/en/UNGASS/UNGASS-2008/Civil-Society-Task-Force) (accessed 2 September 2009).

31 See, for example, an independent evaluation in 2007 calling for improvements in several areas: PCB NGO Delegation of UNAIDS (2007) '20th Meeting of the UNAIDS Programme Coordinating Board, Geneva, Switzerland, 25–27 June 2007' (UNAIDS/PCB(20)/07.6/Rev.1): [http://data.unaids.org/pub/InformationNote/2007/review\\_of\\_ngo\\_participation\\_item3.2\\_en.pdf](http://data.unaids.org/pub/InformationNote/2007/review_of_ngo_participation_item3.2_en.pdf) (accessed 20 November 2009).

32 HLSP and ITAD (2009) The Second Independent Evaluation of UNAIDS 2002–2008. Stakeholder Consultation Document on Preliminary Evaluation Findings: 46, 48.



importance in the improvement of the health of the people.<sup>33</sup> WHO Director-General Dr Margaret Chan has referred to ‘the power of civil society and the activist community to generate the grassroots pressure that can ignite policy change’.<sup>34</sup>

All NGO engagement with WHO begins informally and, for some, this can lead to formal or ‘official’ engagement after a period of at least two years, providing a number of criteria are met.<sup>35</sup> ‘Official’ NGO partners of WHO have the right to participate and speak in governing body meetings, such as those of the executive board or the World Health Assembly (WHA). NGOs in informal relations with WHO can attend these meetings but are not granted the right to make statements.

In 2001, the Civil Society Initiative (CSI) was formed to improve and increase civil society engagement with WHO at secretariat, regional and country office levels. A review conducted by CSI in 2002 concluded that ‘a new policy guiding WHO’s relations with civil society is clearly overdue’.<sup>36</sup> CSI recommended the development of a new policy that includes a clear and simple accreditation process to replace the somewhat cumbersome ‘official relations’ framework and sets out clear guidelines for the nature of collaborative partnerships. Other recommendations included the development of a clear communication strategy and a database of NGOs. By 2004, the draft policy had been negotiated, however, the WHA postponed consideration of it ‘in order to provide the Director-General time to consult all interested parties’.<sup>37</sup> In 2009, the new policy was still pending WHA approval.

A small number of large international agencies that touch upon harm reduction and drug policy in their work are in formal relations with WHO, including the International AIDS Society, Médecins Sans Frontières and Family Health International.<sup>38</sup> However, the vast majority of CSOs, including several harm reduction NGOs and networks, engage with WHO on an informal basis.<sup>39</sup> In the case of international and regional harm reduction networks, this engagement

33 WHO, ‘Preamble’ Constitution of the World Health Organization: [www.who.int/governance/eb/who\\_constitution\\_en.pdf](http://www.who.int/governance/eb/who_constitution_en.pdf) (accessed 24 August 2009).

34 WHO (2008), ‘Launch of the Final Report of the Commission on Social Determinants of Health’ [statement to the press, Geneva, Switzerland, 28 August]: [www.who.int/dg/speeches/2008/20080828/en/index.html](http://www.who.int/dg/speeches/2008/20080828/en/index.html) (accessed 20 November 2009).

35 For example, the organisation must be international and must draw up a three-year workplan with the relevant WHO department. See ‘Principles Guiding Relations with NGOs’ for more information: World Health Assembly, Provisional Item 19, A62/39 Annex.

36 WHO CSI (2002) Review Report: WHO’s Interactions with Civil Society and Nongovernmental Organizations External Relations and Governing Bodies.

37 WHO, ‘Status of Proposal for a New Policy to Guide WHO’s Relations with NGOs’: [www.who.int/civilsociety/relations/new\\_policy/en/index.html](http://www.who.int/civilsociety/relations/new_policy/en/index.html) (accessed 8 August 2009).

38 WHO, ‘List of 185 Nongovernmental Organizations in Official Relations with WHO Reflecting Decisions of EB124, January 2009’: [www.who.int/civilsociety/relations/ngolisteb120.pdf](http://www.who.int/civilsociety/relations/ngolisteb120.pdf) (accessed 8 August 2009).

39 WHO HIV/AIDS Programme (September 2009) ‘A Framework for Operational Partnerships Supporting the Health Sector Response for Universal Access to HIV Prevention, Treatment, Care and Support (Draft)’: 18.

is often based upon individual relationships with staff within the Secretariat or regional offices. While this has allowed important civil society contributions to be made to numerous WHO policies and guidelines on responding to HIV and injecting drug use, the informality of this type of engagement may be problematic in the longer term, as such personal relationships may be disrupted or eliminated with staff changes in either the NGO or WHO.

In 2008, prior to the International AIDS Conference in Mexico City, WHO's HIV/AIDS Programme held a consultative meeting with CSOs to discuss their strategic engagement in health sector HIV responses. Attendees highlighted several weak areas, including poor communication processes between WHO's HIV/AIDS Programme and civil society. Seven next steps were documented, including developing 'principles of engagement', clear communication processes and a monitoring and evaluation process to record successes and challenges in civil society engagement.<sup>40</sup>

## United Nations Development Programme

The United Nations Development Programme (UNDP) includes HIV/AIDS among its five focal areas. As a UNAIDS cosponsor, UNDP is a 'main partner' in several activities and is the lead agency for 'HIV/AIDS, development, governance and mainstreaming ... and enabling legislation, human rights and gender'.<sup>41</sup>

Although UNDP's constitution does not require civil society engagement, the agency has taken a mandate to do so from Article 71 of the UN Charter. Its practice in this area has been articulated in 'UNDP and Civil Society Organizations: A Practice Note on Engagement', which outlines a series of principles and commitments for civil society–UNDP engagement. According to the document, 'Interacting with civil society is a duty and not an option for UNDP at all levels of its work' and 'UNDP is committed to engaging with CSOs as an expression of their right to development, not simply because of institutional convenience'.<sup>42</sup>

Historically, UNDP has had various mechanisms for working with civil society on programme implementation, facilitated by a civil society division within its Secretariat, as well as civil society advisors in its regional and country offices worldwide. In recent years, the involvement of CSOs in UNDP's policy and advocacy work has increased, leading to the development of new methods of engagement. These allow UNDP to support civil society to 'influence policy dialogue and decision-making at all levels: local, national and global' by creating

40 *ibid*: 22–23.

41 UNAIDS Division of Labour [full matrix]: [www.unaids.org/Resources/UNAIDS/images/Cosponsor/FullMatrix.gif](http://www.unaids.org/Resources/UNAIDS/images/Cosponsor/FullMatrix.gif) (accessed 8 August 2009).

42 UNDP, 'UNDP and Civil Society Organizations: A Practice Note on Engagement': <http://europeandcis.undp.org/files/uploads/Poverty%20reduction/UNDP%20policies%201.pdf> (accessed 8 August 2009).

a safe space for debate and discussion, both in relation to HIV/AIDS and wider development issues.<sup>43</sup>

One such example is the Civil Society Advisory Committee to the Administrator, which was formed in 2000, consisting of ten civil society representatives who meet once a year for three and a half days. In 2009, the committee had sixteen members whose collective role was: to provide advice and strategic guidance to the administrator and senior management of UNDP (with special emphasis on the issue of enhancement of UNDP engagement with civil society); to support and monitor the implementation of key information policy and advocacy efforts; and to pilot strategic CSO/UNDP initiatives and activities.<sup>44</sup> While ECOSOC status is preferred for membership and grants participatory rather than observer status at board meetings, it is not a requirement to become part of the Civil Society Advisory Committee or to engage with UNDP generally.

As part of the Red Ribbon Award Initiative, UNDP and the Global Fund to Fight AIDS, Tuberculosis and Malaria supported a civil society 'Community Dialogue Space' at the 2009 International Harm Reduction Conference in Bangkok, which hosted a week of frank, open discussions between multilateral representatives and those from NGOs and civil society networks working on harm reduction. This was part of an effort on behalf of UNDP to create pivotal policy platforms for civil society at each international and regional AIDS conference since the XVI International AIDS Conference, AIDS 2006, in Toronto. The space offered the opportunity for all conference participants to engage in the sharing of information and open dialogue on issues of harm reduction and HIV/AIDS and provided local and regional voices with a global platform.

## United Nations Educational, Scientific and Cultural Organization

The United Nations Educational, Scientific and Cultural Organization (UNESCO) is a UNAIDS cosponsor and the lead agency for HIV prevention with young people in schools. It distinguishes between civil society in 'formal' and in 'operational' consultative status, depending on the role and structure of the organisation as well as the history of its working relationship with UNESCO. The agency solicits input from civil society through 'collective' consultation, bringing together specialist organisations to gather information and guidance on particular issues. It also holds a biannual NGO international conference, inviting all NGOs in statutory relations with UNESCO for facilitated discussion and exchange of ideas. Conference participants elect nine members of the NGO–UNESCO Liaison

<sup>43</sup> *ibid.*

<sup>44</sup> UNDP/CSO Division (2006) 'The Civil Society Advisory Committee': [www.undp.org/docs/9361/Note-on-Civil-Society-Advisory-Committees.doc](http://www.undp.org/docs/9361/Note-on-Civil-Society-Advisory-Committees.doc) (accessed 10 September 2009).

Committee, which provides a link between NGOs and UNESCO's governing bodies as well as acting as a policy advisory committee. UNESCO provides meeting facilities for this committee as well as allocating staff time to support its work.<sup>45</sup>

## United Nation's Children's Fund

The United Nation's Children's Fund (UNICEF) is a UNAIDS cosponsor. It established an NGO Committee in the 1950s, which now has a membership of more than sixty international NGOs, an office within UNICEF headquarters and a governing body known as the Global Forum. The NGO Committee has consultative status with UNICEF as a single body (with up to ten representatives) and provides input into executive board meetings. The criteria for membership are specific to UNICEF, which allows the participation of networks, coalitions and other CSOs that do not necessarily have consultative status with ECOSOC.<sup>46</sup> While UNICEF has engaged CSOs in numerous initiatives in policy and decision making, it has to date not been in relation to harm reduction.

In practice, harm reduction is a focus of several UNICEF initiatives, resulting in collaborations and partnerships with harm reduction-focused civil society. For example, the UNICEF Regional Office for CEE/CIS has worked alongside the Eurasian Harm Reduction Network on research and planning within the region. UNICEF has also supported youth participation in harm reduction efforts for young people, largely through their engagement with Youth RISE, a harm reduction focused global network of young people. Following recommendations arising from the International Harm Reduction Conference in Vancouver in 2006, UNICEF assisted in the development of Youth RISE. The agency has subsequently linked the network to its regional and country offices, in order to provide regular support and ensure coordinated participation of youth in regional and national harm reduction networks. UNICEF is represented on the Youth RISE advisory board and continues to collaborate with the network on technical work, which in the coming years will include operational research to highlight effective service delivery for HIV prevention for Most-at-Risk adolescents (MARA).

## The World Bank

The World Bank is a UNAIDS cosponsor and is the lead agency tasked with 'support to strategic, prioritized and costed national plans; financial management; human resources; capacity and infrastructure development; impact alleviation and sectoral work'.<sup>47</sup> It has a number of policy and practical guidelines for

45 Governing Council of the UN Environment Programme, Twenty-Second Session of the Governing Council/Global Ministerial Environment Forum, Nairobi, 3-7 February 2003, Items 4(c) and (d) of the provisional agenda: Policy issues: Coordination and cooperation within and outside the United Nations, including non-governmental organizations; The role of civil society: Review of the practices of civil society engagement in United Nations Organizations.

46 *ibid.*

47 UNAIDS Division of Labour [full matrix]: [www.unaids.org/Resources/UNAIDS/images/Cosponsor/FullMatrix.gif](http://www.unaids.org/Resources/UNAIDS/images/Cosponsor/FullMatrix.gif) (accessed 8 August 2009).

engagement with civil society. These are all non-binding in nature, which in practice has advantages as well as disadvantages, as it creates the potential to increase the level of NGO engagement depending on the projects and individuals involved.<sup>48</sup>

Over 120 World Bank staff are tasked with working with civil society worldwide, including the Civil Society Team at the Secretariat. In 2009, the bank was in the process of updating and improving its civil society engagement guidelines through an internal and external review process involving consultations with staff, NGOs and others on the evolving nature of civil society.<sup>49</sup>

Civil society representatives are permitted to attend and participate in the spring and annual meetings of the World Bank as long as they are granted accreditation each year (via an online application process). The meetings bring together World Bank staff and representatives from governments, the private sector and civil society. The meetings include the executive board meetings, a programme of seminars and a five-day civil society policy forum organised by the World Bank Civil Society Team. These sessions, covering a wide range of topics, are often the venue for frank dialogue between the bank and CSOs.

While the number of CSOs being accredited and attending the meetings is, in general, on the increase,<sup>50</sup> the travel and accommodation costs are prohibitive for many, particularly southern, NGOs. In order to optimise civil society participation, the Civil Society Sponsorship Program was established, allowing CSOs to apply for financial support to attend.<sup>51</sup> To date, these meetings have seen very little involvement of CSOs focused on harm reduction, drug policy and/or HIV/AIDS.

## Global Fund to Fight AIDS, Tuberculosis and Malaria

The Global Fund to Fight AIDS, Tuberculosis and Malaria is a multilateral funding body, which, although not a UNAIDS cosponsor, plays a vital role in financing national and regional responses to HIV/AIDS, tuberculosis and malaria. Civil society engagement within the Global Fund was directly informed by the UNAIDS model, but goes somewhat further. It embraces engagement at every level, from its international board to its country coordinating mechanisms and programme implementers. Civil society also plays an instrumental role in advocacy and resource mobilisation for the Global Fund. As described in one Global Fund report, 'The internationally recognized role that civil society played in launching ... and in participating in the conceptualization and design of the Global Fund led

48 S. Ripinsky and P. Van Den Bossche (2007) *NGO Involvement in International Organizations: A Legal Analysis* London: British Institute of International and Comparative Law: 154.

49 World Bank, 'Civil Society': <http://web.worldbank.org/WBSITE/EXTERNAL/NEWS/0,,contentMDK:20040873~menuPK:34480~pagePK:34370~theSitePK:4607,00.html> (accessed 9 August 2009).

50 In October 2009, over 300 CSOs were represented, including IHRA..

51 World Bank Civil Society Team (2009) *World Bank – Civil Society Engagement: Review of Fiscal Years 2007 to 2009* Washington, DC: The International Bank for Reconstruction and Development/The World Bank.

to a sense of ownership; the Global Fund was an initiative that they had helped to create, fund and govern.<sup>52</sup>

At the level of governance, three seats on the board are reserved for the developed country NGOs, the developing country NGOs and the communities affected by the diseases delegations. On the board, these 'community delegations' share equal voting rights to governments. In granting equal voting rights to civil society representatives, the Global Fund is unique amongst multilateral agencies involved in HIV and drug policy.

The Global Fund's country coordinating mechanisms (CCMs), wherever possible, mirror the structure of the Global Fund board and are composed of all stakeholders including civil society representatives. Global Fund guidelines recommend that CCMs include a minimum of 40% representation from the non-government sector, including civil society and the private sector.<sup>53</sup> In principle, and in practice in many countries, the CCM works effectively as a mechanism for ensuring that evidence-based proposals and programmes are developed, funded and implemented on a national level. However, where civil society capacity is weak, ensuring strong representation on CCMs remains a challenge.<sup>54</sup> A recent report found that the 40% minimum guideline for non-governmental representation was reached in only four of the eight reviewed CCMs.<sup>55</sup> In addition, the involvement of people who use drugs in CCMs remains poor on a global scale. This is particularly problematic in countries where HIV epidemics are driven by injecting drug use and where programmes require a strong harm reduction component to respond effectively to the epidemic.

CSOs are increasingly becoming implementers of Global Fund grants, as both principal and sub-recipients. While the decision of who becomes a principal recipient (PR) lies with the CCM, dual track financing encourages the nomination of two PRs, often including one CSO, to manage the grant. The Global Fund proposal template includes a sub-section on community system strengthening, which is where applicants include details of CSO capacity-building activities. The WHO and UNAIDS – as technical partners of the Global Fund – have organised regional proposal-writing workshops to increase the quality of proposals and to allow the writers to access advice from technical experts. These workshops are open to civil society participation. Other advice and support to CSOs applying for grants and managing programmes comes from independent, civil society-led Community Support Action Teams, which work from ICASO at an international

52 The Global Fund to Fight AIDS, TB and Malaria, 'NGOs and Civil Society': <http://www.theglobalfund.org/en/civilsociety/?lang=en> (accessed 4 August 2009).

53 The Global Fund to Fight AIDS, TB and Malaria, 'Revised Guidelines on the Purpose, Structure, Composition and Funding of Country Coordinating Mechanisms and Requirements for Grant Eligibility': [http://www.theglobalfund.org/documents/ccm/Guidelines\\_CCMPurposeStructureComposition\\_en.pdf](http://www.theglobalfund.org/documents/ccm/Guidelines_CCMPurposeStructureComposition_en.pdf) (accessed 2 September 2009).

54 The Global Fund to Fight AIDS, TB and Malaria (2008) *Lessons Learned in the Field: Health Financing and Governance. A Report on the Country Coordinating Mechanism Model* Geneva: The Global Fund.

55 The Global Fund to Fight AIDS, TB and Malaria (2008) *Country Coordinating Mechanisms Governance and Civil Society Participation. The Global Fund Implementer Series* Geneva: The Global Fund.

level and several regional hubs around the world to support CSOs applying for grants, as well as those currently implementing the grants.

The Civil Society Team at the Global Fund Secretariat includes four staff members providing direct support and guidance to civil society, along with an additional four civil society officers based within the country teams. Several of these staff members have specific experience of harm reduction and drug use issues, which is important given that the Global Fund is the largest funder of harm reduction globally. In 2009, the Global Fund hosted a 'Dialogue Space' at the International Harm Reduction Conference in Bangkok to enable frank and open discussion between civil society and other stakeholders on their harm reduction work.

### 3.3 Civil Society Engagement with the UN Drug Control System

The UN drug control system comprises three principle organisations: the UN Office on Drugs and Crime (UNODC), also a UNAIDS cosponsor; the Commission on Narcotic Drugs (CND), UNODC's governing body; and the International Narcotics Control Board (INCB), the committee of independent experts tasked with monitoring state compliance with the three UN drug control treaties. All three organisations are obligated to consult and engage with civil society within their work. However, while civil society engagement in many multilaterals has been transformed with new and innovative practices to facilitate NGO participation in global governance, the extent to which civil society is able to engage with international drug control agencies remains limited.

#### United Nations Office on Drugs and Crime

The UNODC was established in 1997 as the result of a merger between the UN Drug Control Programme and the Centre for International Crime Prevention. It is a department or office of the UN Secretariat and is governed by two functional commissions of ECOSOC: CND and the Commission on Crime Prevention and Criminal Justice. UNODC, like all bodies under ECOSOC, is obligated under Article 71 of the UN Charter to engage civil society in its work. As the UNAIDS cosponsor with the lead on HIV, injecting drug use and prisons, it can also be argued that UNODC's work in this area should reflect the strong civil society engagement found within the UNAIDS Secretariat.

UNODC works in over 150 countries through more than fifty regional and national offices and projects. It recognises the need for 'increased cooperation between UNODC and relevant entities of civil society' in order 'to respond to HIV/AIDS among injecting drug users and in prison settings, in accordance with relevant international conventions and the established mandates of UNODC'.<sup>56</sup> At the

<sup>56</sup> UNODC (2008) UNODC Strategy 2008–2011. Towards Security and Justice for All: Making the World Safer from Crime, Drugs and Terrorism: [www.unodc.org/documents/about-unodc/UNODC-strategy-July08.pdf](http://www.unodc.org/documents/about-unodc/UNODC-strategy-July08.pdf) (accessed 3 September 2009).

project implementation level, the engagement of civil society appears to be strong, with NGOs collaborating with, and participating in, UNODC programming in many countries. The NGO database hosted on the UNODC website brings together details of NGOs that work with UNODC regional and country offices, although this had been left rather out of date for some time before 2009.<sup>57</sup> As is the case with the World Bank, there is no institutional policy or guidance for working with civil society. In some regions, this has proved an advantage and allowed for the development of close and sustained collaboration between NGOs and the agency. At the global level, however, this gap has resulted in uneven engagement with civil society, with collaborations often being ad hoc or the result of a pre-existing relationship with the organisation.

A small team dedicated to civil society liaison is based at the UNODC Secretariat in Vienna and has the large task of managing civil society engagement across UNODC's spectrum of work, covering drugs, crime and security. In recent years, the team has worked increasingly closely with the Vienna NGO Committee on Narcotic Drugs (VNGOC) on several initiatives.<sup>58</sup> Their most ambitious collaboration was the 'Beyond 2008' civil society process, which culminated in the production of an NGO declaration on drugs.

The HIV team within the UNODC Secretariat and its counterparts in regional and country offices also work with civil society and are perhaps the key contacts for NGOs and civil society networks working on harm reduction. Certainly at the Secretariat level, there is an openness and willingness to engage with civil society both in person in relevant fora and via email and phone communications, although this is frequently responsive rather than proactive engagement.

While not reaching the levels of engagement employed by UNAIDS, there are signs that UNODC is strengthening this aspect of its work. UNODC's support for and collaboration with the VNGOC on Beyond 2008 and the building of ties with the Civil Society Team at UNAIDS reflect this trend. There are also plans to utilise the umbrella of the VNGOC to organise further civil society consultations on a systematic basis; VNGOC's Strategic Plan 2009–2014 contains several objectives that involve collaborative work with UNODC.<sup>59</sup> The commissioning of an independent evaluation of the Beyond 2008 process and outcomes by UNODC also shows a recognition of the importance of strong civil society engagement mechanisms.<sup>60</sup>

However, a number of factors impede progress in this area. First, the Civil Society

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57 UNODC (2009) Independent Evaluation of Beyond 2008 (GLO/J27) Vienna: UNODC.

58 VNGOC is an umbrella organisation established in 1983 to facilitate NGO involvement in international drug policy.

59 VNGOC (2009) Strategic Plan 2009–2014: [www.vngoc.org/images/uploads/file/VNGOC%20Strategic%20Plan%202009-2014.pdf](http://www.vngoc.org/images/uploads/file/VNGOC%20Strategic%20Plan%202009-2014.pdf) (accessed 14 September 2009).

60 UNODC (2009) Independent Evaluation of Beyond 2008 (GLO/J37) Vienna: UNODC.



Team functions with a small budget and relies on the willingness of governments to prioritise and provide funds for this work. Second, as with other agencies, the lack of formal policy or processes for engaging civil society poses potential problems; without these guidelines, there is a risk of engagement being ad hoc or inconsistent in nature and being impacted by staff changeovers. Third, while UNODC is clearly committed to engaging with NGOs in its work,<sup>61</sup> its plans must be approved by its governing body, the Commission on Narcotic Drugs. Among the fifty-three Member States comprising CND, there is a small but vocal minority that has traditionally opposed civil society engagement. As a consequence, UNODC has sometimes seen its efforts to engage civil society undermined by CND. For example, UNODC's draft strategic plan contained numerous references to working with NGOs, yet this content was drastically reduced when the plan came before CND for review.<sup>62</sup>

## Commission on Narcotic Drugs

As the political body tasked with addressing global drug policy, CND's annual session in Vienna is among the most important multilateral meetings for harm reduction and drug policy NGOs each year. As a functional commission of ECOSOC, CND is mandated under Article 71 of the UN Charter to engage CSOs in its work. In addition, CND Resolutions 49/2<sup>63</sup> and 51/4<sup>64</sup> emphasise the need to recognise and encourage the efforts of civil society. The recently adopted Political Declaration on Drugs also states that 'Representatives of affected populations and civil society entities, where appropriate, should be enabled to play a participatory role in the formulation and implementation of drug demand and supply reduction policy.'<sup>65</sup> However, the narrow interpretation of these obligations has resulted in processes for civil society engagement that lack transparency and present numerous obstacles for influencing the debates at CND.

CND meetings do little to encourage or facilitate the involvement of civil society representatives. As stated in the recent independent evaluation of Beyond 2008, 'comparisons with other UN processes including UN CSD, UNEP, UNAIDS, UNHRC and conventions showed the CND to be a closed forum'.<sup>66</sup> Unlike a number of other functional commissions of ECOSOC, involvement of NGOs is restricted to those in consultative status with ECOSOC, which are permitted to attend as

61 For example, the UNODC website states, 'The active involvement of civil society and non-governmental organizations (NGOs) is essential to help UNODC carry out its global mandates.' UNODC, 'Information for NGOs and Civil Society': [www.unodc.org/unodc/en/ngos/index.html](http://www.unodc.org/unodc/en/ngos/index.html) (accessed 25 November 2008).

62 VNGOC – personal communication.

63 Resolution 49/2: Recognizing the contribution of civil society in global efforts to address the drug problem in the context of reporting on the goals and targets for 2008 set by the General Assembly at its twentieth special session: [www.unodc.org/pdf/resolutions/cnd\\_2006\\_49-2.pdf](http://www.unodc.org/pdf/resolutions/cnd_2006_49-2.pdf) (accessed 10 August 2009).

64 Resolution 51/4: Preparations for the high-level segment of the fifty-second session of the Commission on Narcotic Drugs, relating to the follow-up to the twentieth special session of the General Assembly: [www.unodc.org/documents/commissions/CND-Res-2000-until-present/CND-2008-Session51/CND-51-Res-2008-04e.pdf](http://www.unodc.org/documents/commissions/CND-Res-2000-until-present/CND-2008-Session51/CND-51-Res-2008-04e.pdf) (accessed 10 August 2009).

65 UN CND (2009) 'Report on the Fifty-Second Session (14 March 2008 and 11–20 March 2009)', Economic and Social Council, Official Records, Supplement No. 8.

66 UNODC (2009) Independent Evaluation of Beyond 2008 (GLO/J37) Vienna: UNODC.

observers. Online guidance on civil society participation is not available from CND and can only be found on VNGOC's website,<sup>67</sup> and there is no obvious civil society liaison provided on-site at CND sessions to assist NGO delegates.

For those NGOs that attend, opportunities to actively participate in CND sessions are limited. Civil society representatives are excluded from informal negotiations and have been excluded from formal sessions at the request of individual UN Member States. There is a rigid and non-transparent process for making written or oral statements during sessions. Although NGOs may submit written statements, these are only circulated to Member States following consultation with, and approval of, the CND Secretariat. CSOs may also request to speak in plenary sessions, but are only called upon if there is time remaining after all the Member States have spoken, and even then at the discretion of the chairperson. The result is that, in practice, CND reserves no guaranteed speaking time for civil society representatives.<sup>68</sup>

For some CSOs, meaningful participation at CND meetings has been achieved by being selected as part of government delegations, which allows the NGO representative access to all CND meetings as well as opportunities to speak. A number of countries attending the 2009 CND – including the United Kingdom, Netherlands, Lithuania, Argentina, St Lucia and New Zealand – had at least one NGO representative on their delegations. This approach is obviously reliant on the willingness of individual governments to engage with civil society, a commitment that varies from country to country. Indeed, several Member States – including Cuba, Egypt, Indonesia and Pakistan – have openly opposed civil society participation at CND in the past, sometimes based upon conflicts with individual CSOs. Others, such as China, Russia and the United States, while not opposing the attendance of civil society in general terms, have been unsupportive of their engagement in policy making.

As mentioned above, CND was responsible for removing most references to civil society engagement when reviewing UNODC's draft strategic plan.<sup>69</sup>

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67 VNGOC (2009) What to Expect at CND. [www.vngoc.org/details.php?id\\_cat=7&id\\_cnt=24](http://www.vngoc.org/details.php?id_cat=7&id_cnt=24) (accessed 10 September 2009)

68 C. Cook (2009) *Civil Society: The Silenced Partners*. Civil Society Engagement with the UN Commission on Narcotic Drugs London: IHRA.

69 VNGOC – personal communication.

## INPUD at CND

The participation of affected populations on CND country delegations is an extremely effective mechanism of civil society engagement. Not only does it allow CND delegations and observers to hear the important experiences of people affected by drugs and drug policy, but it also makes it possible for those affected by policy to directly influence it.

In March 2009, the UK became the first country to invite an open drug user to join its government delegation to the high-level segment of CND. This allowed the International Network of People who Use Drugs (INPUD) to participate in the debate to a much greater extent than those with NGO status at CND. INPUD member Mat Southwell delivered a speech on behalf of the UK government to a round-table session, emphasising the need to include people who use drugs in policy debate and questioning CND's mechanisms for civil society engagement.

Through its involvement in the UK delegation, INPUD gained critical insight into the internal workings of CND and international drug policy, and its presence and performance at CND helped initiate a relationship with UNAIDS. In July 2009, INPUD delivered a speech and participated in discussions at the UNAIDS PCB in Geneva.

*"My community is routinely denied the human rights that this organisation was founded to defend ... We, the International Network of People who Use Drugs, offer our hand in friendship and invite you to begin negotiations to bring to an end this failed war on drugs."*

INPUD statement  
read by Mat Southwell at the High Level Meeting of CND, March 2009.<sup>70</sup>

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<sup>70</sup> IHRA blog (2009) Statement from INPUD Member at High Level Meeting of CND. Wednesday 11 March 2009. <http://www.ihrablog.net/2009/03/statement-from-inpud-member-at-high.html> (accessed 10 September 2009)

In contrast to other UN bodies, such as the Human Rights Council, regular sessions of CND are not webcast.<sup>71</sup> Detailed minutes are not made available to the public and the final published reports of the proceedings are limited. This lack of transparency results in those not in attendance having no access to the discussions leading to decisions and no indication of the positions declared by various Member States. To counter this, a coalition of civil society organisations, led by IHRA and the International Drug Policy Consortium (IDPC), developed the CND blog ([www.cndblog.org](http://www.cndblog.org)) to create as accurate a record as possible of the statements, decisions and general proceedings at the high-level segment of the 2009 CND.<sup>72</sup> IDPC also published a detailed analysis of proceedings from the 2009 session.<sup>73</sup>

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71 In March 2009, the two-day High-Level Segment of the CND was webcast for the first time.

72 Live monitoring of the fifty-second session of the UN CND, 11–20 March 2009: [www.cndblog.org](http://www.cndblog.org) (accessed 2 September 2009).

73 IDPC (2009) 'IDPC Briefing Note: The 10-Year Review of the United Nations Drug Control System: Difficult Questions Remain for Member States and UN System Wide Coherence': [www.idpc.net/sites/default/files/library/IDPC\\_ECOSOC%20Briefing%20Note\\_June%202009\\_FINAL.pdf](http://www.idpc.net/sites/default/files/library/IDPC_ECOSOC%20Briefing%20Note_June%202009_FINAL.pdf) (accessed 4 September 2009).

## The 2009 High-Level Segment of the Commission on Narcotic Drugs

In March 2009, CND convened a high-level segment (HLS) in Vienna to review the ten-year objectives and action plans agreed in 1998. The countries at the HLS considered a new Political Declaration on Drugs to guide the next decade of international drug policy.

At its 2008 meeting, CND had passed Resolution 51/4, which specifically called for the contribution of civil society to the 'period of reflection' on international drug policy that led up to the HLS.<sup>74</sup> Despite this resolution, no formal mechanisms were put in place by CND for civil society input into the various working group meetings that formed an integral part of this review process and the formulation of the new political declaration. Any engagement in this process was left to the discretion of individual Member States in choosing the composition of their delegations.

Unlike the UNAIDS high-level meetings in 2006 and 2008, the CND's HLS had no clear structure for involving civil society, no definition of the parameters of civil society engagement and no dedicated task force to facilitate NGO participation. Instead, it fell largely to civil society itself to disseminate guidance on how to participate in the process and to report back as the negotiations proceeded.

In response, VNGOC created the Beyond 2008 forum, with the objective of agreeing a collective civil society declaration for submission to the HLS. In partnership with the UNODC Civil Society Team, a two-year global civil society consultation followed, involving thirteen meetings with more than 500 NGOs from 116 countries as well as 65 international NGOs. The process culminated with an NGO summit in Vienna in July 2008, attended by approximately 300 civil society representatives, and the adoption by consensus of a declaration and three resolutions detailing recommendations for the next ten years of international drug policy.

Despite the breadth and diversity of input into the Beyond 2008 process, a financial investment of US\$1.43 million<sup>75</sup> (from sources such as the European Commission and governments in Canada, Hungary, Italy, Sweden and the UK) and the outcome of a comprehensive declaration, the NGO contribution was 'marginalised in CND itself'.<sup>76</sup> Many recommendations were sidelined and ignored by Member States. Most significantly for many involved in Beyond 2008, the eventual political declaration omitted any explicit reference to 'harm reduction',<sup>77</sup> despite the NGO declaration explicitly recognising harm reduction programmes within the context of a comprehensive response to drug use.<sup>78</sup>

74 Resolution 51/4: Preparations for the high-level segment of the fifty-second session of the Commission on Narcotic Drugs, relating to the follow-up to the twentieth special session of the General Assembly.

75 UNODC (2009) Independent Evaluation of Beyond 2008 (GLO/J37) Vienna: UNODC.

76 *ibid.*

77 UN CND (2009) 'Report on the Fifty-Second Session (14 March 2008 and 11–20 March 2009)' Economic and Social Council, Official Records, Supplement No. 8.

78 VNGOC (2009) 'Beyond 2008 Declaration': [www.vngoc.org/images/uploads/file/BEYOND%202008%20DECLARATION%20AND%20RESOLUTIONS%20DEFINITIVE.pdf](http://www.vngoc.org/images/uploads/file/BEYOND%202008%20DECLARATION%20AND%20RESOLUTIONS%20DEFINITIVE.pdf) (accessed 4 September 2009).

CND's poor engagement with CSOs becomes particularly apparent when compared with the policies and practices of other Functional Commissions of ECOSOC. For example, the Commission on the Status of Women, Commission for Social Development and Commission on Sustainable Development all include input from civil society as a central element of their working processes. These commissions have easily accessible information and mechanisms for civil society to attend sessions and offer clear advice on how to contribute to the proceedings.<sup>79</sup>

The Commission on Sustainable Development (CSD) is often cited as a model of good practice on civil society engagement within the UN system.<sup>80</sup> CSD works with more than one thousand accredited CSOs through innovative mechanisms, including 'multi-stakeholder dialogue events' that form part of the main programme of the CSD sessions and an NGO Steering Committee comprising civil society 'caucuses' representing wider civil society, which influences planning and coordination of CSD activities. Crucially, CSD provides facilities and logistical support to enable civil society to organise side events parallel to the main CSD agenda.

## International Narcotics Control Board

The third main aspect of the UN drug control system is the INCB, the body of independent experts tasked with monitoring state compliance with the three international drug control treaties. Unlike other similarly constituted bodies within the UN system, such as the human rights treaty bodies, the INCB chooses not to engage with civil society (with rare exceptions on country visits)<sup>81</sup> and not to operate via open and inclusive processes,<sup>82</sup> despite the 1972 Protocol to the 1961 Single Convention on Narcotic Drugs explicitly including NGOs as a source of information on which the INCB should draw.<sup>83</sup> The secretive working practices of INCB, its failure to engage with civil society and its failure to be an advocate for harm reduction have been well documented.<sup>84</sup>

79 Commission on the Status of Women: [www.un.org/womenwatch/daw/csw/NGO.html](http://www.un.org/womenwatch/daw/csw/NGO.html); Commission for Social Development: [www.un.org/esa/socdev/ngo/csdinfnote09.html](http://www.un.org/esa/socdev/ngo/csdinfnote09.html); Commission on Sustainable Development: [www.un.org/esa/dsd/dsd/dsd\\_faqs\\_registration.shtml](http://www.un.org/esa/dsd/dsd/dsd_faqs_registration.shtml) (all accessed 9 September 2009).

80 Governing Council of the UN Environment Programme, Twenty-Second Session of the Governing Council/Global Ministerial Environment Forum, Nairobi, 3–7 February 2003, Items 4(c) and (d) of the provisional agenda: Policy issues: Coordination and cooperation within and outside the United Nations, including non-governmental organizations; The role of civil society: Review of the practices of civil society engagement in United Nations organizations.

81 For an overview of INCB country missions, see INCB, 'Activities': [www.incb.org/incb/en/activities.html](http://www.incb.org/incb/en/activities.html) (accessed 4 September 2009).

82 D. Barrett (2008) 'Unique in International Relations'? A Comparison of the International Narcotics Control Board and the UN Human Rights Treaty Bodies London: IHRA.

83 Protocol amending the Single Convention on Narcotic Drugs, 1961 (25 March 1972) UNTS vol. 2206, no. 14151, art. 6.

84 See D. Barrett (2008) 'Unique in International Relations'? A Comparison of the International Narcotics Control Board and the UN Human Rights Treaty Bodies London: IHRA; J. Csete and D. Wolfe (2007) Closed to Reason: The International Narcotics Control Board and HIV/AIDS Toronto and New York: Canadian HIV/AIDS Legal Network/International Harm Reduction Development Programme.

## 4. Challenges for Harm Reduction NGOs Engaging with Multilateral Agencies

### 4.1 General Challenges

Civil society organisations are actively involved in advocating for harm reduction at the national level in at least seventy countries and territories around the world.<sup>85</sup> The number of countries in which civil society plays a role in the direct provision of harm reduction services and programmes is likely to be considerably higher. CSOs bring essential experience and perspectives to discussions about harm reduction policy and practice, however, they face a number of challenges and barriers when engaging at the multilateral level.

#### Access

The extent to which CSOs can influence international harm reduction and drug policy is largely determined by the access they are given to multilateral processes. As this report describes, several multilateral entities employ innovative mechanisms to ensure their policy- and decision-making processes are informed by civil society expertise. While these can, and should, be utilised to their fullest extent by NGOs working on harm reduction, it is clear that the key multilateral organisations working on narcotics control have not prioritised civil society engagement to comparable extents. The failure of drug policy entities, in particular CND, to keep up with developments in this area is the major barrier for civil society input into international harm reduction and drug policy.

#### Capacity

Lack of capacity to engage in multilateral processes presents another barrier to CSOs making a full contributing in decision making. Although it is widely agreed that civil society has unique and important expertise and experience to contribute to national, regional and international harm reduction and drug policy debates, bringing that experience to the table requires capacity. This includes the capacity of individual staff to dedicate time to this work, the capacity of affected communities to give voice to their experiences, the capacity of harm reduction NGOs to network and forge common advocacy positions and the capacity of civil society to understand and best utilise the mechanisms available for engagement. These capacity issues are critical in maximising the input and impact of civil society on multilateral decision making on harm reduction and drug policy issues.

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<sup>85</sup> IHRA, 'Civil Society' [global state of harm reduction e-tool]: [www.ihra.net/CivilSociety](http://www.ihra.net/CivilSociety) (accessed 10 September 2009).

## Funding

Linked to the issue of capacity is that of funding. In general, donor support for harm reduction advocacy is very poor. Even among those governments and multilaterals that encourage and support the participation of civil society, few are willing to provide actual funding to harm reduction organisations to engage in advocacy. Open mechanisms for civil society to participate must be accompanied by funding to enable staff to represent their constituencies in relevant discussions and to ensure that policy is informed by these important stakeholders.

## 4.2 Challenges Specific to Organisations of People Who Use Drugs

The engagement of NGOs and networks representing and comprising people who use drugs in international policy related to drugs and/or HIV is particularly poor. There are many contributory factors for this. There are relatively few publicly active drug users, particularly in low and middle income countries. As a highly criminalised population, people who use drugs face possible arrest if they engage in activism and advocacy, and the creation of organisations and networks is fraught with difficulties. Stigma also remains a fundamental barrier to the greater engagement of people who use drugs. In addition, current engagement mechanisms are often not geared towards the involvement of these particular stakeholders. For example, organisations of people who use drugs are less likely to be registered or constituted NGOs, which is a requirement for engagement with several multilateral agencies. As a result, the voices of people who use drugs are rarely heard in drug policy discussions.

Just as the Paris Declaration in 1994 clarified the need for the greater involvement of people living with HIV/AIDS in the international response to the pandemic, the Vancouver Declaration was a call from people who use drugs for the greater involvement of people who use drugs in the policy- and decision-making processes that were of direct consequence to them.

*We are people from around the world who use drugs. We are people who have been marginalized and discriminated against; we have been killed, harmed unnecessarily, put in jail, depicted as evil, and stereotyped as dangerous and disposable ... Now it is time to raise our voices as citizens, establish our rights and reclaim the right to be our own spokespersons striving for self-representation and self-empowerment.*

The International Activists Who Use Drugs (2006) Vancouver Declaration



It is imperative that mechanisms are strengthened in order to facilitate people who use drugs to participate meaningfully in the discussions and debates that affect their lives and their communities. There are some indications that the involvement of people who use drugs in this regard is gaining strength. The formation of the International Network of People who Use Drugs (INPUD) has provided an important vehicle for individual advocates and national organisations to have a collective voice at the international level. UNAIDS, for example, has been supportive of INPUD's involvement in UNAIDS decision making and is exploring strategies to improve drug user network involvement as part of the overall strengthening of civil society engagement. Maintaining and building upon these recent developments, which have seen representation at the highest levels of policy fora, will require continued commitment and support from all stakeholders.

## 5. Conclusions and Recommendations

**Enhancing the participation of civil society organisations in decision making on international drug policy and harm reduction is imperative, not only to promote an effective and humane response to HIV and drug use, but also to fulfil the UN's own mandate in this regard.**

Some multilateral agencies are utilising civil society expertise in all aspects of their work, often through the implementation of innovative mechanisms. However, others have limited levels of civil society engagement; this is particularly true of the UN drug control regime, whose three component bodies have critical roles to play in harm reduction and drug policy.

Although the UN and other key multilateral agencies have voiced their commitment to engaging with civil society, there appears to be little accountability in this issue. In practice, the extent to which civil society engagement is encouraged remains dependent on the individual agency in question. In most cases, the existence or lack of high-quality, meaningful civil society engagement can be seen as a reflection of that agency's opinions of civil society and its willingness to embrace open dialogue.

**Multilaterals working on HIV and drug policy must make engaging with civil society in general, and with harm reduction networks and organisations of people who use drugs in particular, a priority at all levels, including governance structures and policy formulation. Some, such as UNAIDS and the Global Fund, have already done so. Others, particularly those within the UN drug control system, fall far short of this standard.**

There is much to be learned from the current good practice in place at some multilateral agencies. The following recommendations are made:

### 5.1 General Principles for Civil Society Engagement in Harm Reduction Policy

Civil society organisations that cover harm reduction in their work (including organisations of people who use drugs and networks and NGOs focused on HIV/AIDS, human rights, drug policy and other relevant areas) must be supported to contribute to international policy through the provision of engagement mechanisms, capacity building, financial and technical support.

- The participation of people who use drugs is crucial to the development of effective global harm reduction and drug policies and programmes. Representative drug user groups must be developed, funded and empowered to act as full partners in policy discussions and processes that affect them. They must be supported financially, professionally and logistically to engage with multilateral agencies and meetings and to develop internal policy and advocacy capacities, skills and strengths.
- International, regional and national harm reduction networks can provide advocates and organisations with access to multilateral agencies and processes and are often the essential link between top-level discussions and practice 'on the ground'. Governments, donors and multilateral agencies must support these networks and advocates to build their capacity through mentoring, support and funding.<sup>86</sup>
- Effective civil society engagement is a two-way process. NGOs must continue to engage with relevant bodies on harm reduction and drug policy at both international and national levels. Civil society must aim to be as representative, cooperative, communicative and involving as possible – especially international, regional and national networks – and must help to bridge the gap between good practice on the ground and the high-level policy discussions. For example, organisations that are able to attend the key meetings in Vienna, Geneva and New York must work to ensure that other groups who cannot attend are still engaged and have their voices heard.

## 5.2 Improving Civil Society Engagement at the Commission on Narcotic Drugs

As the governing body of UNODC, the primary forum for Member States on drug policy and a functional commission of ECOSOC, CND must improve its mechanisms for the engagement of civil society. Necessary actions in this regard include:

- Following the lead taken by the Commission on the Status of Women and the UNAIDS PCB, relevant civil society organisations should not be excluded from CND sessions because they lack ECOSOC consultative status.
- Following the success of the Beyond 2008 process, VNGOC should be allocated a seat in CND plenary sessions, alongside intergovernmental or multilateral bodies such as WHO and UNAIDS. This representative would therefore be empowered to actively engage with all discussions and debates and to reflect the perspectives of civil society based upon consultation with VNGOC members. In addition, the space allotted for civil society representation at CND must be improved upon by allowing access to working

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<sup>86</sup> See IHRA on behalf of the Network of Networks (2009) 'Resourcing Harm Reduction on a Global Basis: Recommendations from Harm Reduction Networks to the Donor Conference on Harm Reduction', Amsterdam, 28–30 January.

- groups as well as guaranteed speaking slots during plenary sessions.
- CND should establish a visible and accessible civil society liaison service. This should include making all registration information and documentation available online and creating a visible civil society liaison presence at CND sessions.
- Transparency of CND deliberations and decision making must be enhanced. As is standard practice for many other UN meetings, both the CND plenary session and the committee of the whole should be webcast. Detailed written minutes of both the plenary session and committee of the whole, which clearly identify the positions taken by Member States, should be made publicly available.

### 5.3 Improving Civil Society Engagement at the UN Office on Drugs and Crime

UNODC Executive Director Antonio Maria Costa recently called for UNODC's civil society partners to be vocal and engaged.<sup>87</sup> To support this, UNODC should commit to undertaking a review and evaluation of its current mechanisms for civil society engagement, building on the findings of the recent evaluation of Beyond 2008, which produced some very useful recommendations. Such a process should result in:

- The production of clear and transparent institutional guidelines and procedures for UNODC's engagement with civil society at the national and regional levels, as well as internationally.
- Increased support for NGO engagement with CND, through the leveraging of funds and the provision of guidance for NGO attendance, participation and lobbying within intergovernmental meetings.
- The strengthening and increased visibility of UNODC's civil society engagement team, and its work with VNGOC, to promote and facilitate meaningful and sustained civil society involvement with the UN drug control system.

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87 A.M. Costa (2008) speaking at NGO Forum 'Not So Silent Partners', a side event to the fifty-first session of CND.





INTERNATIONAL HARM REDUCTION ASSOCIATION