

Online consultation with civil society: Challenges and Good Practices on Safeguarding Civic Space and the Essential Role of Civil Society in Recovering from the COVID-19 Pandemic

The International Drug Policy Consortium (IDPC, www.idpc.net) is a global network of 190+ NGOs. A large part of our advocacy work focuses on international and regional advocacy as it relates to drug policy. This submission will therefore focus on challenges and good practices on safeguarding civic space at global level.

1. In your experience, has the COVID pandemic resulted in additional barriers and challenges for civil society participation in national and local decision-making?

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The COVID-19 pandemic has limited civic space in major ways at global and regional levels. Even though moving to an online environment has enabled civil society representatives who had never been able to participate in UN forums in person to follow the debates remotely (see question 2), we identified various barriers for engagement.

At the UN Commission on Narcotic Drugs (CND), we documented the following issues:¹

- Restricted numbers of civil society representatives able to follow the entirety of the proceedings: Significant advocacy was directed at ensuring adequate NGO representation at the first online CND session (64th session, held in April 2021). The usual number of 500+ representatives from civil society was reduced to only 158² having access to the online 'Interprefy' platform used by governments and allowing a certain level of interaction with government and UN delegates. The rest could watch the webcast, although this hugely limited advocacy opportunities.
- Although it was webcast, the CND was not recorded despite repeated requests from civil society to do so. As all proceedings take place in Vienna time, this means that many delegates in the Eastern or Western Hemispheres could not follow some of the proceedings.
- Restricted access to the Committee of the Whole (CoW), where government delegates negotiate CND resolutions: In face-to-face sessions, all civil society participants can observe negotiations in the CoW, enabling them to also interact with

¹ For more information about IDPC's analysis of the CND, and implications of this first virtual session, see Box 6 of: International Drug Policy Consortium (2021), *The 2021 Commission on Narcotic Drugs - Report of proceedings*, http://fileserver.idpc.net/library/CND_Proceedings_Report_2021.pdf

² Fordham, A., Haase, H. & Nougier, M. (2021), *Turning the tide: Growth, visibility and impact of the civil society drug policy reform movement at the UN*, <https://idpc.net/publications/2021/08/turning-the-tide-growth-visibility-and-impact-of-the-civil-society-drug-policy-reform-movement-at-the-un>

government delegates to seek to influence their positions on key resolutions. Due to resistance from a number of governments, the CoW was not webcast, so only those 158 civil society representatives having access to the Interprefy platform could follow the proceedings, but without seeing who was in the virtual room or being able to interact with the delegates. This severely restricted civil society's ability to engage with the negotiations process as had been done in the past. Furthermore, likely due to the difficulties for member states to negotiate difficult language virtually, most negotiations (more than ever before) took place in 'informal' meetings that civil society is unable to observe. The virtual CoW was therefore mostly used to 'rubber stamp' paragraphs already agreed in informals, reducing the level of transparency and possibilities for informal civil society engagement.

- Technical issues at times prevented delegates from delivering their statement at the CND Plenary. This affected civil society, government and UN representatives alike and efforts were made at the 64th session in March to accommodate speakers who faced such difficulties by enabling them to record their interventions and show them later on in the proceedings. However, at the 64th Reconvened session of the CND in December 2021, there were much less attempts to address the issues faced by the only two registered civil society speakers, both of whom faced technical difficulties and were unable to deliver their statement. There was a general feeling among many civil society representatives that these technical hurdles were a good excuse to silence civil society during tense proceedings (the CND had just decided to block the expert from the UN Working Group on Arbitrary Detention from making her presentation on their landmark report on drug policy³).
- Most importantly, the CND week is generally used as a space for civil society to interact with government and UN representatives via informal meetings and gatherings at the margins of the session. The online nature of the CND did not allow for this level of interaction and opportunities for advocacy.

Access by civil society to the UN human rights system has also been severely impacted by pandemic-related restrictions. For almost two years, most UN treaty bodies have postponed - in some cases indefinitely - sessions and country reviews. This paralysis is unjustified considering that the overwhelming majority of these meetings could be held online. Concerningly, the indefinite postponement of country reviews deprived civil society of an important tool for national-level human rights advocacy, and it has meant that prior efforts made in providing submissions to treaty bodies ahead of country reviews appear as a waste of valuable civil society and community resources. The same can be said about country visits by special mechanisms, many of which have been indefinitely postponed although they could still be conducted via an 'online consultation' format. This means that opportunities for civil society to advocate for improved human rights outcomes – in a context where egregious human rights violations have accelerated in many parts of the world – have become more limited at UN level.

³ International Drug Policy Consortium (December 2021), *On International Human Rights Day, UN drugs body silences UN human rights expert on ground-breaking report*, <https://idpc.net/media/press-releases/2021/12/on-international-human-rights-day-un-drugs-body-silences-un-human-rights-expert-on-ground-breaking-report>

In all UN hubs, sustaining and creating new inter-personal relationships with government delegates and UN representatives in Vienna, Geneva and New York has become very difficult due to travel restrictions and most sessions moving to an online format, with significant impacts on civil society's ability to advocate for change.

Similar issues have been documented at regional level. At the European Union (EU) level for instance, the lack of civil society engagement in the first stage of the development of the EU drug strategy for 2021-2025 was obvious over the summer of 2020, leading to an uproar from civil society when the first draft of the so-called 'Drugs Agenda' was released by the European Commission without taking into account any inputs from civil society. Thankfully, and following intense civil society advocacy,⁴ the EU Presidency, then chaired by Germany and later on Portugal, took over this process and ensured greater space for civil society to input regularly into the final draft of the Strategy and its Plan of Action. Similar worries have been expressed by reform-oriented civil society organisations regarding civic space at the Inter-American Drug Abuse Control Commission (CICAD) of the Organization of American States (OAS).⁵

2. Are you aware of specific efforts aimed at including civil society, including those working in the health sector and medical research, in designing strategies to respond to the pandemic (for example, in the context of vaccination campaigns etc.)?

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Various efforts have been made to include civil society in drug policy debates internationally. For instance, in some ways, the virtual format of the 64th session of the CND did enable more inclusiveness and transparency, with the entirety of the plenary session being webcast for the first time (in previous years, only the opening session was webcast). Civil society also welcomed the fact that 158 civil society representatives out of 750-1000 CND participants were able to follow the proceedings on the main 'Interprefy' platform, enabling them to have some level of interaction with government delegates (although these were inevitably much more limited than in an in-person session) and to make statements from the floor. All CND side events also took place online and most were open to any participant, enabling them to gain more attendance overall than ever before.

Other UN entities have made much more efforts to ensure civil society involvement in policy making. The OHCHR and Special Procedures, for example, have issued a number of calls for inputs in preparation for their reports, and have shown welcome flexibility and willingness to receive contributions from NGOs from around the world. Engagement with the UN Working Group on Arbitrary Detention (WGAD) for the publication of their key report on arbitrary detention and drug policy ([A/HRC/47/40](#)) is particularly noteworthy here. In preparation for their report, the WGAD made every possible effort to hold meetings and consultations both online and offline with civil society

⁴ See: International Drug Policy Consortium (10 September 2020), *Drug policy experts raise concerns regarding the draft EU Agenda and Action Plan on Drugs 2021-2025 – Open letter*, <https://idpc.net/alerts/2020/09/drug-policy-experts-raise-concerns-regarding-the-draft-eu-agenda-and-action-plan-on-drugs-2021-2025-open-letter>

⁵ See, for instance: WOLA, IDPC, Dianova, Dejusticia, Intercambios, ACEID, MUCD & Youth RISE (November 2021), *Declaración de la sociedad civil – 70 Período Ordinario de Sesiones de la CICAD*, <https://docs.google.com/document/d/1TZuC58xH5HVnReFywFUOKYiAgOugyv8nDIJ2QL07De8/edit>

experts from different regions of the world to seek inputs and feedback for their research. Once the report was published, these consultations continued in order to support civil society's efforts to disseminate the report and advocate for reforms at national, regional and global levels.

The Global AIDS Strategy 2021 and the 2021 Political Declaration on HIV and AIDS also constitute good examples of civil society engagement during the pandemic. Particularly in the case of the Global AIDS Strategy 2021, UNAIDS made a noteworthy effort to consult with affected communities and civil society throughout the whole process of reviewing, developing, and drafting the Strategy,⁶ showing that effective and meaningful partnership with civil society is possible during the pandemic. In sharp contrast with this, the UNODC Strategy 2021-2025, also released in 2021, was drafted without a single formal consultation or dialogue with civil society and community organisations.⁷

3. How have emergency or other measures imposed by the Government in the context of COVID-19 affected your work and the work of other civil society groups (for example, to access information, express critical views and feedback, mobilize others)? Have you or other civil society actors been involved in reviewing the effectivity and continued relevance of emergency measures?

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IDPC has documented the experiences of our networks and partners regarding shrinking civil society space at times of COVID-19 via surveys, newsletters,⁸ webinars and research.⁹ The following issues were identified on the many ways in which COVID-19 has affected our collective work (in addition to those already highlighted above):

- Funding and prioritisation of certain issues over others: this has had a dramatic impact on civil society advocacy work in the field of drug policy. With most efforts being shifted towards responding to the pandemic, and budgets following suit, many NGOs have seen their funding restricted in major ways. As a result, these NGOs have had to let go of key staff members, focus only on essential/core activities and deprioritise drug policy advocacy, and some NGOs simply closed down.
- Increased criminalisation and repression in many parts of the world - with the COVID-19 pandemic used as an excuse to further restrict fundamental freedoms - has also had severe consequences on civic space, including drug policy and harm reduction advocacy. At the UN, this has translated into moments where civil society, for example, was consciously excluded from critical debates on the scheduling of

⁶ See , for more information: https://www.unaids.org/en/Global_AIDS_strategy_process

⁷ International Drug Policy Consortium (April 2021), *Suppressing coherence: The UNODC Strategy 2021-2025 and the UN system Common Position on drugs*, <https://idpc.net/publications/2021/04/supressing-coherence-the-unodc-strategy-2021-2025-and-the-un-system-common-position-on-drugs>

⁸ With a specific newsletter series focusing on the impacts of the COVID-19 pandemic: <https://us7.campaign-archive.com/home/?u=863f370d75cf43192379283b8&id=4e075f1cd5>

⁹ Putri, D. (March 2021), *Innovation and resilience in times of crisis: Civil society advocacy for drug policy reform under the COVID-19 pandemic* (International Drug Policy Consortium), http://fileservr.idpc.net/library/Innovation_Resilience.pdf

cannabis in the international drug control treaties, an issue on which some civil society experts had been working for many years.¹⁰

- As a global network of NGOs, IDPC focuses most of its work on networking, capacity building, collective strategising and relationship building. Restrictions on networking opportunities due to restrictions in travel and gatherings have inevitably impacted upon our ability to strategise and build alliances, with the postponement or cancellation of conferences, meetings, workshops, trainings and other gatherings where civil society could network and strategise around advocacy priorities. Although some of these discussions could move online, this is not always possible with some regions of the world having weak Internet access, and due to digital/Zoom fatigue.

7. Looking forward, what are the key recommendations to authorities with a view to preserving and expanding civil society space in the context of COVID-19 and beyond? Please be as specific as possible. respond?

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As a result of research and outreach to our members and partners, IDPC put together the following recommendations for policy makers at national, regional and global level:¹¹

- Protect civil society space and full participation in all processes and modalities for online or ‘hybrid’ policy fora: the COVID-19 pandemic cannot be used as a reason to close spaces down, in fact it should provide new and stronger engagement opportunities through the removal of barriers of physical participation. Whenever in-person UN meetings start taking place again, some spaces must be reserved for civil society.
- Keep drug policy, access to health services, civil society engagement and criminal justice reforms high on the political agenda.
- Continue to utilise online (and offline) platforms to meaningfully involve all relevant civil society and communities in policy-making processes.
- Establish and follow well-embedded structures for regular engagement with civil society and communities, for example by creating regular plans to consult specific organisations, communities, and networks, as well as by including civil society and community representatives in policy-making committees and the like.
- Actively reach out to civil society and communities for input, even if this is done on an ad hoc basis. After almost 2 years of pandemic-related restrictions, UN entities have the obligation to adapt to the current situation and take positive steps to ensure that civil society participation remains strong in spite of restrictions.

¹⁰ International Drug Policy Consortium (August 2020), *Closing doors: The exclusion of civil society at the ‘topical meetings’ of the UN Commission on Narcotic Drugs*, <https://idpc.net/publications/2020/08/closing-doors-the-exclusion-of-civil-society-at-the-topical-meetings-of-the-un-commission-on-narcotic-drugs>

¹¹ Putri, D. (March 2021), *Innovation and resilience in times of crisis: Civil society advocacy for drug policy reform under the COVID-19 pandemic* (International Drug Policy Consortium), http://fileserv.idpc.net/library/Innovation_Resilience.pdf

- Ensure that the work of UN treaty bodies and special human rights mechanisms resumes at regular pace even if it has to be conducted entirely online. The indefinite postponement of country reviews and country visits threatens the viability and credibility of these processes.
- Support the process of allocating funds for communities and civil society involved in delivery of essential services and goods, as well as in drug policy advocacy.
- Ensure that any positive short-term reforms undertaken as emergency responses to COVID-19 such as prison releases, improved access to harm reduction services, shifts to lower threshold and/or community-led service models, outlive the pandemic and remain in place in the long-term.
- Ensure that any COVID-19 measure or restriction does not further criminalise and oppress people and groups in situations of vulnerability and/or hamper the work of civil society.

IDPC also promotes the following recommendations for donors, which are particularly relevant for governments and UN agencies that allocate funds to protect civic space:

- Provide additional funds for COVID-19 responses related to drug policies, rather than redirecting existing grant funds or resources that were previously earmarked for grant renewals.
- Support, facilitate and ease the process of reprogramming existing funds for communities and civil society who are rapidly responding to the COVID-19 pandemic and ongoing shifts in contexts, needs and environments.
- Keep drug policy, access to health services, civil society engagement and criminal justice reforms high on the agenda by continuing to support civil society groups.
- Recognise the value, power and impact of civil society networks in advancing progressive reform through advocacy at multiple levels.