My organisation, Harm Reduction International (HRI), was a key civil society player in the 2016 UNGASS on drugs process. As such, I read with interest the recent article “Losing UNGASS? Lessons from civil society, past and present” by John Collins. In the piece, the author describes what he calls a “select contingent” of “myopic” and “idealistic” NGOs, sustained by “selective group-think” who “self-sabotaged” any possibility of success at UNGASS. Although HRI is not named in the article, a blog I co-authored is cited in support of the author’s arguments. Given this, I think it is appropriate to respond.

While a talented Historian, Collins is neither a social movements’ scholar nor was he an NGO representative involved in the UNGASS process. I suggest these limitations have led to a number of flaws in the analysis he lays out: a confusion of external public “asks” with internal private strategic objectives; a focus on advocacy as a single event rather than a process of events over years and the conflation of diverse NGO sectoral coalitions into a monolithic “civil society” with a single goal. His peripheral involvement in UNGASS NGO activity also results in a troubling tendency to overplay the significance of minor debates on the US position in which he was personally involved.

The article describes a process of civil society engagement that bears little resemblance to the one in which HRI participated. Our organisation convened a global working group of harm reduction NGOs to feed into the UNGASS. Like many of our NGO partners, HRI has been involved in high-level UN advocacy for more than a decade. This was not our first high-level UN meeting, and for many of us it was not even our first UNGASS. To be painted as a collection of idealistic or naive operators is therefore a bit silly. The article reduces the diversity of civil society “asks” at UNGASS to things such as “reopening the conventions” or bringing about “a collapse of the system”. These were certainly not our objectives, nor the core goals of the other NGOs with whom we collaborated in pushing forward a collective harm reduction agenda. It would be difficult to find any evidence of these positions in any close reading of the literature or statements put out by reform-oriented NGOs.

Collins focusses on UNGASS, and judges its significance, in isolation from other events. However, the harm reduction sector never saw the meeting as a single transformative moment, but rather as part of a chain of past and future events through which we could slowly and methodically press our agenda. For harm reductionists, UNGASS 2016 was not even the only high-level UN meeting we were working on that year, as we were simultaneously preparing for the UN High-Level Meeting on HIV in June 2016 (hardly the actions of the “drug fetishists” Collins suggests us to be). Of course, we had a list of public advocacy demands. We also had private strategic objectives that we thought achievable at UNGASS. We were never looking to “collapse the system”. Our priority was to defend the existing (good) language on HIV and injecting drug use adopted at the previous UNGASS on HIV from being rolled back at the more conservative UNGASS on drugs. This objective was not only achieved, it was surpassed with the adoption of both explicit support for needle and syringe programmes and OST, and also (for the first time) support for naloxone and for harm reduction in prisons.

While the adoption of the strongest language on harm reduction ever agreed in UN drug control resolution might look like a “loss” from the author’s perspective, for the coalition of harm reduction organisations and networks of people who use drugs who worked towards this outcome over nearly two years, it was a win, and a big one. That HRI was able to work pragmatically with our partners to advance our core issues inside the system while at the same time being critically engaged in some of the macro-level treaty-based debates about the US position shows the author’s theoretical distinction between a “progressive school” and “reform optimists” to be meaningless in reality.

The article also ignores the recent history of civil society engagement in UN drug control debates, and the impact of that work on shifting current discourse. For example, the author casually
observes that during the UNGASS, “a new consensus around public health, access to medicines and the need for human rights pervaded diplomatic language”, as if this shift happened spontaneously, rather than as the result of years of civil society advocacy and collaboration with friendly member states to achieve just this shift.

To offer one example relevant to the article, HRI first began developing a strategy to transform the UN human rights system into allies for harm reduction and drug policy reform back in 2007, at a time when UN human rights mechanisms had no interest at all in drug issues. Ten years later, human rights is a central theme of harm reduction and drug policy reform discourse at the UN. This shift is not an accident. It is because we and many other governmental and non-governmental partners adopted and pushed this agenda forward over the course of years. So when Damon Barrett and I blogged about a human rights “win” at UNGASS, it was not to try and spin “failed” NGO advocacy in a positive light, as Collins suggests. Rather it was to highlight the success of nearly a decade of collective civil society-led advocacy in bringing human rights mechanisms and concerns into the centre of UN drug control debates (which they were at UNGASS), as well as the achievement the strongest human rights language ever adopted in a UN drug control resolution.

While neither of these outcomes represents the transformational moment in global drug policy that the article criticises civil society for failing to achieve, in fact none of us ever sought such an outcome or thought it possible to attain at UNGASS. It is more than a bit odd to be criticised for failing to achieve goals we never set for ourselves.

Dr Richard Lines