

# UNGASS 2016

## Global Civil Society Survey

### Results and Report

---

SHEILA P. VAKHARIA\* PH.D., L.M.S.W.

LONG ISLAND UNIVERSITY

BROOKLYN, NEW YORK, USA



\*Special thanks to Linda Nilsson for her edits

# Method:

## Survey Distribution

---

- 25 multiple choice and open-ended questions about NGO respondents and priority areas for UNGASS
- Available in 11 languages

Circulated via email, websites, and social media among the following networks:

- UNODC Civil Society Team, the Field Office network, Vienna NGO Committee on Drugs, New York NGO Committee on Drugs, and Civil Society Task Force on Drugs
- Web-based survey remained active between April 21<sup>st</sup> and July 31<sup>st</sup> 2015

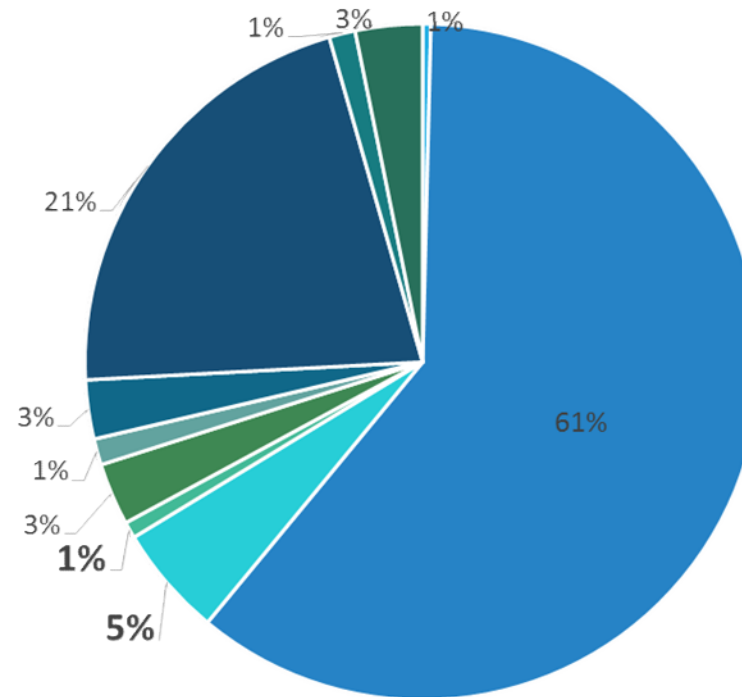
# Method: Mixed Methods Analysis

---

- Surveys with >40% of questions answered included
- Mixed Methods Approach:
  - Quantitative data was tallied and tabulated
  - Qualitative data was coded and sorted in accordance with 5 Thematic Areas of UNGASS 2016
  - As recurring priorities and topic areas were identified, they were presented in the report and key respondent quotes were selected to highlight the diversity of opinions in each area

# Results: Completed Surveys, by Language

Language	Completions
Arabic	5
Chinese	0
English	774
French	68
Italian	10
Persian	38
Portuguese	16
Russian	36
Spanish	273
Turkish	13
Vietnamese	41
<b>TOTAL</b>	<b>1,274</b>

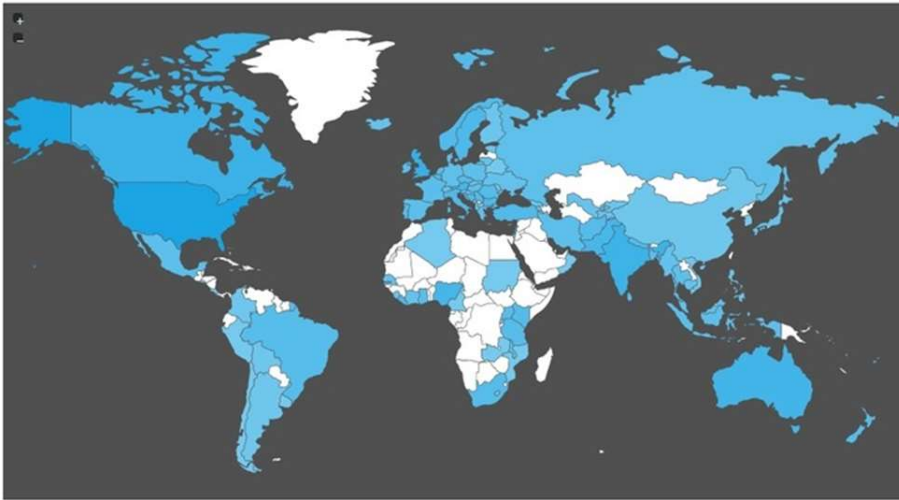


■ Arabic ■ English ■ French ■ Italian ■ Persian ■ Portuguese ■ Russian ■ Spanish ■ Turkish ■ Vietnamese

# Results: Regional Representation, by Translation

---

ENGLISH SURVEYS

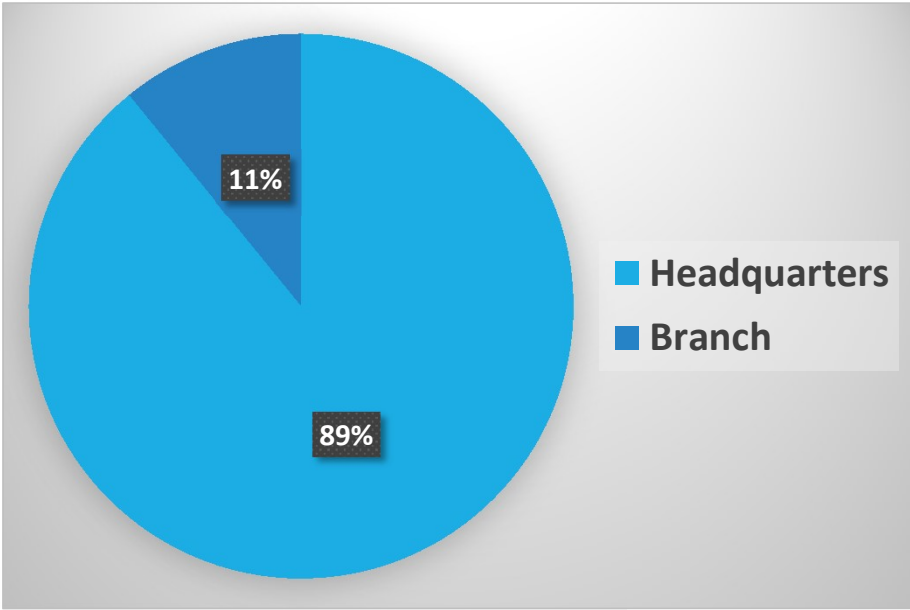


SPANISH SURVEYS

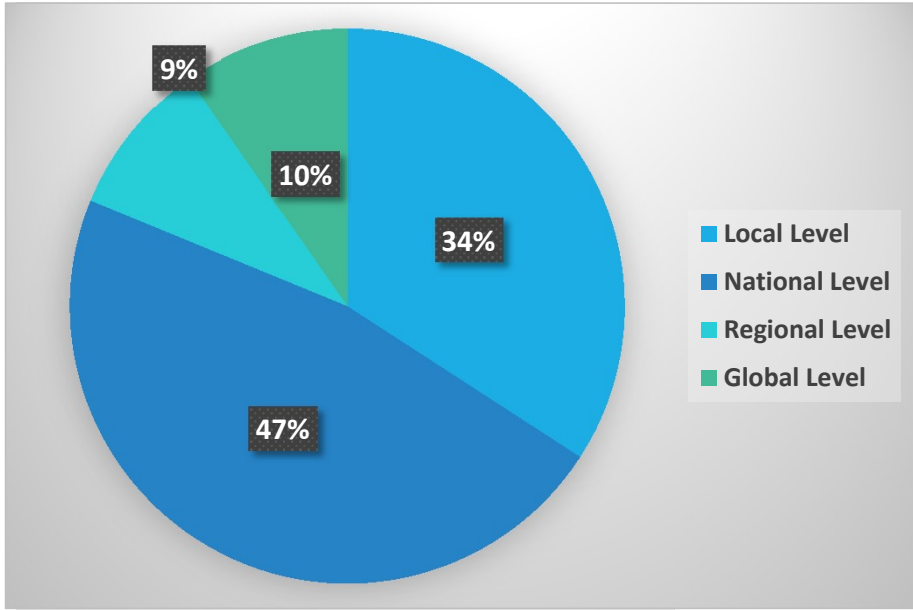


# Quantitative Results: NGO Respondent Characteristics

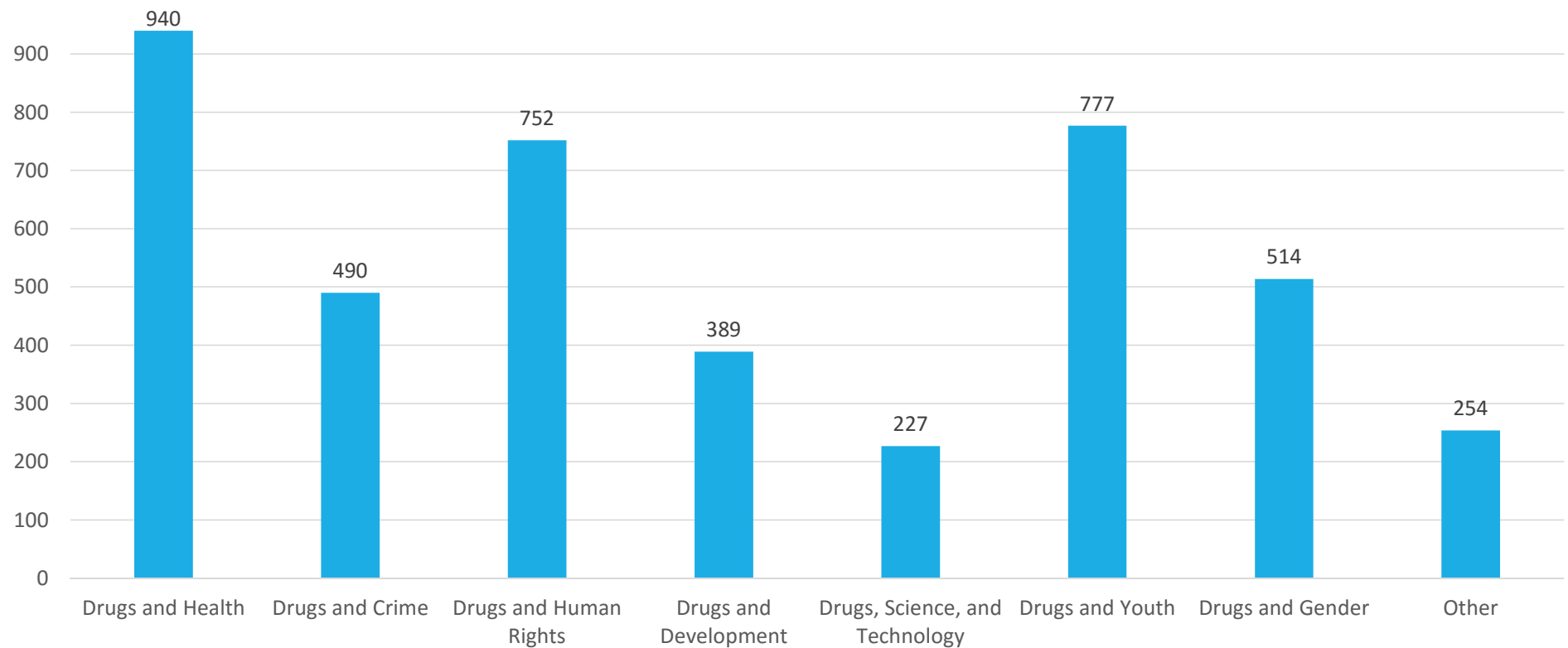
## NGO SITE



## GEOGRAPHIC REACH




# Quantitative Results: NGO Drug-Related Areas of Interest



# Qualitative Results: Civil Society Inclusion in UNGASS preparations

---


- A. Limited NGO and regional representation
  - B. Logistical barriers to participation
  - C. Inadequate involvement of affected groups
  - D. Skepticism about affecting change
- 



# Qualitative Results:

## Thematic Area: Drugs and Health


---

- A. The need for evidence-based or evidence-informed drug prevention
  - B. The widespread adoption and availability of harm reduction
  - C. Funding concerns for treatment, prevention, and other services for people who use drugs
  - D. Universally available evidence-based and culturally-appropriate drug dependence treatment
  - E. The need for a public health response to drug use
  - F. The need to address stigma, discrimination, and
  - G. Access to controlled medicines
- 

# Qualitative Results:

## Thematic Area: Drugs and Crime


---

- A. The elimination of the death penalty for drug offenses
  - B. Concerns about the unequal enforcement of policies and sentencing
  - C. The harms of drug trafficking and its associated violence and exploitation
  - D. Need for an objective evaluation of the current system
  - E. Divided views on policy experimentation by member states
- 

# Qualitative Results:

## Thematic Area: Human rights, women, children, and communities


---

- A. Human rights violations in the name of current regime
  - B. Drug-related issues affecting youth
  - C. Drug-related issues affecting women
  - D. Drug-related issues which affect other marginalized populations
- 

# Qualitative Results:

## Thematic Area: New Challenges


---

- A. New/Novel Psychoactive Substances (NPS)
  - B. Diverse views on the Conventions
  - C. Diverse views on recent decriminalization and regulation trends
- 

# Qualitative Results:


## Thematic Area: Drugs and Development

---

- A. Addressing the human rights and concerns of producers and farmers within the context of alternative development programs
  - B. Presentation of successful and effective examples of alternative development programs
- 

# Qualitative Results: Concrete Outcomes and 'Success' defined

---

- A. Harm reduction language in UNGASS outcome document
  - B. Use of data in decision-making about drug policy
  - C. Re-evaluating indicators of policy success (health rather than seizures)
  - D. The increased use of a health-based approach rather than criminal
  - E. Greater civil society involvement in all discussions and decisions
  - F. Open discussions and dialogue despite lack of consensus among members
- 

# Acknowledgments

---

Rita Notarandrea and  
Canadian Centre on Substance Abuse  
for hosting the survey

