

CENTRE FOR ADDICTIONS RESEARCH OF BC

# One Step Further

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## **Toward a Canadian Civil Society Voice on Drug Policy**

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A report on the outcome of a strategic planning meeting held in Vancouver on May 28-29, 2009.

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## INTRODUCTION

This report sets out recommendations regarding the function and form of a new civil society organization<sup>1</sup> committed to facilitating changes in Canadian and international drug policy and legislation.

Following the international process that culminated in the Beyond 2008 Forum in Vienna in July 2008, several Canadian NGOs held informal discussions on Canadian civil society and drug policy. Over several months, the emerging network continued to hold teleconferences, share information and collaborate on issues of mutual interest. In the lead-up to the High Level Segment at the Commission on Narcotic Drugs in March 2009, the need for a more formal organization interested in promoting drug policy and legislation based on evidence, human rights, social inclusion and public health became clear.

The network adopted the name “Canadian Drug Policy Consortium” (CDPC), and the Centre for Addictions Research of BC (CARBC) agreed to take responsibility for preparing a primer on drug policy for Canadian NGOs and to publish, on behalf of the new organization, drug policy alerts leading up to the 2009 Commission on Narcotic Drugs.<sup>2</sup> The network members appointed a sub-committee<sup>3</sup> to plan and implement a strategic process to provide CDPC with advice on matters of form and function in order to maximize the potential of the new organization.

The committee invited a group of about 30 people<sup>4</sup> to a meeting in Vancouver at the end of May 2009 to reach a “good enough” consensus on foundational issues and to identify those areas that needed further investigation. The group included representatives of different types of civil society organizations in Canada with an interest in reforming drug policy, as well as people with expertise in policy making or in organizing and mobilizing social movements. The committee also prepared some background materials and engaged a facilitator with whom they designed a process to ensure the meeting was as productive as possible.<sup>5</sup>

This report draws on and reflects the incredible level of agreement reached at the meeting on several foundational issues. It also responds to those areas that were identified as needing further investigation, and provides insights gleaned from the available literature on networks and other organizations seeking to influence social policy at the national and international levels. Helpful suggestions provided by several reviewers of an early draft have contributed to this final product. The recommendations represent the authors’ synthesis of all of this material. The brief

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<sup>1</sup> In the context of this document, “civil society” is seen as representing the interests of citizens as a counterpoint to central government and business. Civil society would therefore include organizations such as registered charities, non-governmental organizations, municipalities, faith-based organizations, professional associations and advocacy groups, as well as interested individuals.

<sup>2</sup> Available at: [www.carbc.ca/SearchResults/tabid/37/Default.aspx?Search=cdpc](http://www.carbc.ca/SearchResults/tabid/37/Default.aspx?Search=cdpc)

<sup>3</sup> Committee members included: Lynne Belle-Isle (Canadian AIDS Society), Walter Cavaliere (Canadian Harm Reduction Network), Donald MacPherson (City of Vancouver), Gillian Maxwell (Keeping the Door Open: Dialogues on Drug Use) and Dan Reist (Centre for Addictions Research of BC).

<sup>4</sup> See Appendix A.

<sup>5</sup> In evaluations of the meeting, participants gave the meeting an average score of 9.3 out of 10. Repeatedly, participants mentioned the skill of the facilitator, Andrew Johnson, and the careful design of the process as contributing to the success of the meeting. The contribution of people from outside the Canadian drug policy world was also highly appreciated by participants.

commentaries seek to reflect how the issues and tensions identified in discussions at the meeting or in the literature have been addressed within the recommendations.

## **VISION AND MISSION**

### **PROPOSED VISION STATEMENT**

*CDPC envisions a safe, healthy and just Canada in which drug policy and legislation as well as related institutional practice are based on evidence, human rights, social inclusion and public health.*

### **COMMENTARY**

This statement was formulated and won strong approval at the strategic planning meeting. It makes a broad declaration, expressly indicating a focus on policy-related issues and tacitly conveying an agenda for change. The statement is succinct, features a positive emphasis on health and security, and retains a comprehensive scope in relation to substance use (left implicitly unconfined to illicit drugs). Such an economical, holistic and “up-side” approach to the wording consciously declines to make overt reference to narrower and more negatively cast aspects of the landscape such as the problems of prohibition, the need for non-punitive measures and the goal of harm reduction.

It is recommended that the organization adopt the language of this vision statement as a sufficiently brief, plain, positively-put and encompassing expression of the scenario it would seek to help bring about. Further opportunity to communicate a distinctive outlook is afforded in the mission statement, and in the enumeration of values.

Progress toward achieving the CDPC vision will require shifts in policy and practice at the national, international, regional and local levels. Policy and practice will more closely reflect the best available evidence and will openly acknowledge the obligation to uphold human rights. The marginalization of minority groups would measurably decrease, and policy and practice would mitigate the social conditions that contribute to the problematic use of psychoactive substances. Accessible services and supports at the local level would provide an effective, integrated and multidisciplinary response to reduce the harms associated with substance use. Law enforcement and public safety initiatives would be part of this integrated approach.

Progress toward this vision could also be measured in terms of changes in public discourse. A broader appreciation of the socio-cultural, economic and medical complexity in issues of drug use would be reflected in media coverage and public debate.

### **PROPOSED MISSION STATEMENT**

*The mission of CDPC is to facilitate improvement in Canadian and international drug policy and legislation by:*

- *Producing and advancing constructive policy recommendations*
- *Building sustainable, mutually enhancing partnerships*
- *Assembling and disseminating clear information and analysis*
- *Fostering productive dialogue and action within civil society*

## COMMENTARY

This statement reflects a version drafted at the meeting which garnered general acceptance in principle. It attempts to summarily declare *what* the CDPC intends to accomplish and indicate *how* (the major means by which) the organization expects to achieve this.

The statement accentuates the primary onus on contributing substantively to the development of policies that reduce the harms related to drug use. Exploring and endorsing less punitive models aimed at appropriately regulating use would be a facet of the pursuit and promotion of helpful policy recommendations. It is recognized that, along with advocating for change in existing policies and laws, litigation to curtail current contraventions of provisions and human rights would also belong to this part of the job.

The mission statement acknowledges the critical need to form strategic partnerships in order to reach the desired outcome. Envisioned ties are both internal and external. Accumulating the diverse capacity that is needed requires a deliberate collective of committed partners. Broader links with those most immediately affected by harmful drug policies or interested in reforming these policies are needed to inform priorities and to provide both credibility and a means for public engagement. Beyond this internal network, partnerships with other groups working for drug policy reform or related public health, human rights or social justice causes will strengthen the effort. External partnerships would involve both domestic and international organizations.

CDPC will be endeavouring to become the “go to” authentic national voice on issues related to drug policy which the general public, health and social service professionals, law enforcement personnel, media, politicians, and international officials would look to for sound perspective and positions. This will require the organization to collect information, engage in analysis and develop clear summaries of best available evidence. CDPC would, through its own public interface and its network activities, both inform and represent civil society on matters related to drug policy.

There was a strong sense in the meeting that, in order to realize its role as a credible voice, the organization would need to shape discourse, informing and sensitizing public opinion. CDPC needs to position itself as a respected facilitator of profitable dialogue and action within civil society. Meeting participants were aware that the organization would have to extend its reach by supporting its network members with an array of tools to engage in helpful grassroots activities.

The mission statement, as formulated above, reflects a preference for articulating a clearly focused mandate that can guide priority selection, is easy to remember and easy to communicate.

## VALUES

Values are the principles or moral standards which guide actions and decisions.

### PROPOSED VALUES OF CDPC

***Inclusion:*** CDPC embraces diversity and seeks to minimize barriers related to life situation, culture, language, geography, gender, age or other factors.

***Participation:*** CDPC values and promotes the active involvement of member organizations and individuals in planning and implementing its priorities and work plans.

**Social Justice:** CDPC operates with a commitment to fairness in carrying out its affairs, defining its priorities and proposing policy alternatives.

**Human Rights:** CDPC respects the fundamental rights and freedoms of individuals and is committed to ensuring these are entrenched in drug-related policy and legislation.

**Harm Reduction:** CDPC sees the reduction of harm to individuals, families and communities as the fundamental goal of drug policy and the standard against which all such policies should be evaluated.

**Transparency:** CDPC embodies a spirit of openness and disclosure in its operations.

**Accountability:** CDPC acknowledges the need to be answerable to colleagues within its organizational framework.

**Personal and Collective Responsibility:** CDPC respects personal and social responsibility as complementary.

**Evidence:** CDPC is committed to the use of the best available evidence in the development of drug policy.

## COMMENTARY

A number of values and principles were suggested at the strategic planning meeting as distinguishing this group's key commitments or standards to which CDPC expects to be held accountable. Representing these in a manageable list is a challenging task.

Meeting participants gravitated to the word "inclusion" as a way to reference diversity along several dimensions. It includes, for example, the intent to pursue bilingualism. It also involves sensitivity to and appreciation of cultural differences, recognition of the variety of people who use psychoactive substances, and attentiveness to a whole host of other factors that often divide. Inclusion suggests an obligation for outreach that goes well beyond tokenism.

Participation entails the active representation and involvement of members in the work of the organization. Participants at the planning meeting wrestled with the tension of developing a nimble organization capable of "getting things done" without being "elitist" or disconnected from the grassroots. Participation is what sets networks apart from other organizational structures. By identifying participation as a value, the organization commits itself to an elevated level of engagement and to utilizing the collective capacity of its members. How to achieve this, while ensuring outcomes, will be discussed in detail in the section on governance and structure.

Social justice is used here as an umbrella term to describe a public order in which people enjoy a fair and equal opportunity within fundamental features of a society, such as treatment under law and a voice in how civic life operates. It is marked, therefore, by such elements as an absence of discrimination (e.g., racial, gender) and of systematic deprivation (e.g., of health services, power) and exploitation (e.g., economic). Social justice includes the concept of equity which affirms access to what is needed for quality of life (e.g., food, clothing, shelter, income, stable ecosystem).

Human rights refer to internationally recognized basic entitlements individuals have as human beings. They are affirmed in such statements as the United Nations' 1948 Universal Declaration, and include, for example, dignity, freedom, security, just treatment under law, immunity from

inhumane punishment, privacy, conscience, expression, peaceful association, movement, employment, education.

Harm reduction stands as a moral imperative. It is an appropriate overarching goal for drug policy, humanely seeking to minimize or eliminate adverse health, social and economic consequences for individuals and communities. Specific policies should be evaluated relative to their ability to reduce drug-related harm and their avoidance of introducing other harms. Harm reduction respects the complexity of factors that bear on drug-related harm and the rights and responsibility of the individual as an agent in making choices and managing change. It recognizes a continuum of appropriate responses with a range of beneficial outcomes. Harm reduction involves a pragmatic, multidisciplinary, non-judgmental approach which addresses people where they are at. It imparts skills in self-care (and care for others), lowers personal risk, encourages access to treatment, supports reintegration, limits the spread of disease, improves environments and cuts down on public expenses. And, it saves lives.

Transparency means obligation to operate in an accessible fashion that is receptive to stakeholder questions and does not withhold relevant information from them so as to leave them in the dark about actions, intentions or motivations. It covers readiness to declare conflicts of interest and to provide clarity about power relations, decision-making processes, resource allocation, benefits, and other relevant considerations in functioning. Transparency entails that affairs are conducted in an honest, forthright, respectful, professional, legal and moral manner.

Accountability fulfills a pledge to honour formal lines of responsibility within the organizational framework and to provide proper reporting, evaluation and feedback on an agreed routine basis and as otherwise required. This is rendered in the interests of adequate assessment of personal performance and of productive complementary contributions to the work.

Valuing personal and collective responsibility seeks to balance the tension between personal autonomy and social responsibility. It avoids paternalistic approaches to “being one’s brother’s keeper” while still emphasizing a duty to care. A balanced perspective that seeks to uphold the freedoms of “the one” while remaining committed to serve the welfare of “the many” is conducive to promoting health for individuals and collective groups. Struggling to retain this balance is essential to effective social policy.

While several participants advanced academically reputable research evidence as a crucial criterion for judging the propriety of drug policies, others advocated for recognizing and respecting the valid perspective of those who would appeal critically to other considerations (e.g., spiritual meaning, pleasure enhancement/maximization) as legitimately bearing on appropriate understanding of substance use. Within the more focused framework of formal evidence, cost effectiveness received special mention in view of the exorbitant economic expense involved in the current approach to dealing with psychoactive drugs in Canada.

## **MEMBERSHIP**

Invitees to the strategic meeting strongly endorsed a layered membership to respect varying capacities among civil society groups and individuals to contribute to, and benefit from, the work of CDPC. The following proposal for membership aims to lay out a stepped approach which begins

with a relatively low threshold category of membership that allows wide access to the information network and encourages broad dissemination through multiple channels. The other categories are more restrictive or represent higher levels of commitment and capacity to participate in the work of the organization. The following suggests possible criteria, admittance mechanisms and responsibilities pertaining to the respective membership categories.

## **PROPOSED MEMBERSHIP STRUCTURE**

### ***NETWORK MEMBERS:***

Network members represent the broad base of civil society<sup>6</sup> that wants to see drug policy and legislation based on evidence, human rights, social inclusion and public health. Any organization or individual seeking network membership must make application to the governing council (see below) and demonstrate that

- The applicant is a Canadian civil society group or individual that fully supports the vision, mission and values of CDPC, and does not act in such a way as to be detrimental to CDPC's cause or bring it into disrepute,
- The applicant will benefit from access to CDPC knowledge products (e.g., regular drug policy updates, position papers, etc.), and
- The applicant will promote CDPC products and positions on drug policy matters and extend its reach among the applicant's constituencies.

### ***ASSOCIATE MEMBERS***

Representatives of business organizations or policy-makers with federal, provincial or territorial governments wishing to become associate members must make application to the governing council and demonstrate that

- The applicant fully supports the vision, mission and values of CDPC,
- The applicant will benefit from access to CDPC knowledge products (e.g., regular drug policy updates, position papers, etc.), and
- The applicant will assist CDPC in advancing its mission.

### ***PARTNER MEMBERS***

Partner members participate in working groups and provide the core capacity for CDPC to implement its work plans. Network members who have been invited by the managing council to serve on a working group become (and remain) partner members if they can demonstrate

- Commitment to participate in developing and implementing the work plan of the working group to which they have been invited,
- Formal commitment and capacity to actively take responsibility for identified deliverables within the work plan, and

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<sup>6</sup> For the purposes of defining CDPC membership, "civil society" is defined as in footnote 1. Network membership is therefore open to organizations such as registered charities, non-governmental organizations, municipalities, faith-based organizations, professional associations, advocacy groups, as well as interested individuals.



- Capacity and commitment to effectively manage any CDPC resources entrusted to them in carrying out their responsibilities under the work plan.

## COMMENTARY

Some attendees expressed a desire to see a huge constituency of individuals enlisted as members, with a view to securing a “sea change” in public opinion. However, others held the persuasion that CDPC could contribute more efficiently to substantial change through developing carefully crafted positions and developing strategic relationships. This would involve collaborative work on the part of committed organizations to flesh out an agenda and assign responsibility in accordance with capacity and specialization.

This latter view was reinforced by some of the external advisers at the meeting. The development and maintenance of a “large army” is a costly undertaking that – especially if undertaken too soon – could divert resources away from more central and critical first order engagements (such as activating strong policy analysis and engagement strategies). On the other hand, the ability to reference a significant membership can help support a network’s claim to legitimacy and accountability.<sup>7</sup>

In balancing this tension, the proposed membership structure adopts a tiered model.<sup>8</sup> The core work of the consortium is done in the working groups made up primarily of partner members with the capacity and commitment to effectively and efficiently act on strategic priorities. The broader circle of network members provides a mechanism to ensure the organization remains responsive to its constituency and to extend its reach in supporting broad grassroots mobilization of citizens. Since many of the potential members are themselves networks, CDPC will be a network of networks and can leverage the extended reach of its members.

In creating behavioural change, relationships can be more effective than information alone.<sup>9</sup> Successful networks seeking policy change have learned the benefit of including sympathetic business representatives and policy-makers. Not only can these “associate members” provide advice to help achieve the network’s goals, but they also provide access to additional relationships and a broader funding base.<sup>10</sup>

## GOVERNANCE AND STRUCTURE

The structure proposed below is an adaptation of the structure developed and critiqued at the strategic planning meeting. It assumes a commitment to a decentralized, collaborative model (a working network rather than a centralized organization with an information exchange mechanism). While the discussion at the meeting did not consistently reflect this assumption, it appears most

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<sup>7</sup> Willard, T. & Creech, H. (2006). *The Sustainability of Networks: An Analysis of Findings from the IDRC Strategic Evaluation (1995-2005)*. Ottawa: International Development Research Centre, p. 13.

<sup>8</sup> This is a common solution among successful networks. The proposed structure uses a variation of “circles of participation” in which members engage to different degrees, and inclusion in decision-making depends on a member’s level of participation. See Wind, T. (2005). *Document Review on Network Sustainability*. Ottawa: International Development Research Centre; Church, M. et al (2002). *Participation, Relationships and Dynamic Change: New Thinking on Evaluating the Work of International Networks*. London: University College London.

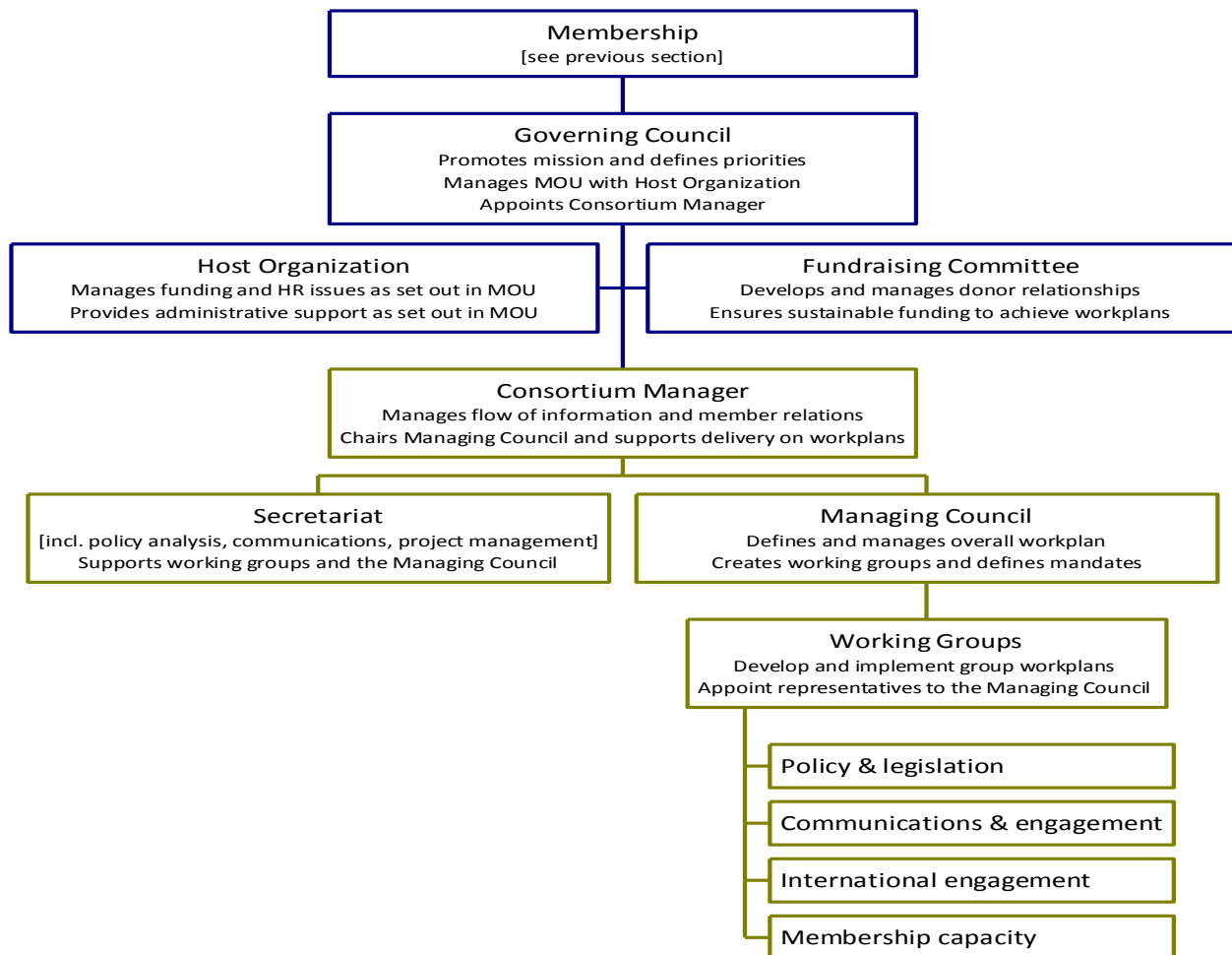
<sup>9</sup> Brown, J.S. & Duguid, P. (2000). *The Social Life of Information*. Boston: Harvard Business School Press.

<sup>10</sup> Creech & Willard (2001). p. 37.

achievable in the short term and best reflects many of the values and aspirations expressed by participants.

Network and partnership theory holds that by combining complementary skills and resources, members are able to have a greater impact on policy and practice than they would have on their own.<sup>11</sup> The partnership is intended to ensure that the whole is greater than the sum of its partners. Careful attention to creating an effective governance and operational framework for the organization is essential if the collaboration is to achieve this goal.

## PROPOSED INITIAL FRAMEWORK



<sup>11</sup> Creech, H. (2008). *The Governance of Non-Legal Entities: An Exploration into the Challenges Facing Collaborative, Multistakeholder Enterprises that Are Hosted by Institutions*. Winnipeg: International Institute for Sustainable Development, p. 2; cf. Streets, J. (2004). *Developing a Framework: Concepts and Research Priorities for Partnership Accountability*. GPPi Research Paper Series #1. Berlin: Global Public Policy Institute.

## COMMENTARY

Governance has been defined as “the institutions, processes and traditions that determine how power is exercised, how decisions are made and enforced, and how members pursue their interests.”<sup>12</sup> A variety of governance structures are used in collaborative organizations,<sup>13</sup> and there is no universal template for good governance. Each organization must tailor its governance to meet its own situation. Collaborative organizations inevitably encounter a number of creative tensions. Critical awareness of these tensions and clarity about intention will help organizations find and maintain the appropriate balance.

### NON-LEGAL ENTITY

Participants at the strategic planning meeting agreed that, initially, CDPC would not be a legal entity and would therefore need to operate under a host organization. This option has the advantage of allowing the organization to proceed immediately without having to invest time and resources in becoming formally incorporated. Participants reported mixed experiences with this arrangement in other contexts, and most regarded becoming an autonomous legal entity as an appropriate long-term goal. However, some experts caution that creating a new organization “in many ways defeats the purpose of networks and alliances.” It tends to result in centralizing rather than distributing responsibilities and diminishes the potential for joint value creation.<sup>14</sup> Or as other writers put it, “A network loses much of its comparative advantage to a conventional hierarchy when it institutionalizes and degenerates into just another organization.”<sup>15</sup> Creech concludes that if governance issues are clearly understood and appropriately managed, a move “to full independence may not be necessary.”<sup>16</sup>

While operating under a host organization, a formally defined relationship with the host is critical to the ongoing operation of the consortium. This relationship, set out in a formal memorandum of understanding (MOU), should provide a clear understanding of the responsibilities and obligations of the host organization to the collaboration (non-legal entity) and the other way around. Provision for a formal annual review of the relationship will provide an opportunity to assess and respond to changes in either the host or the consortium. The MOU needs to provide clarity on

- the fiduciary responsibilities of the host and the member organizations,
- the arrangements for management of staff,
- the administrative and support services provided by the host, and
- the procedures to be followed to resolve disputes.

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<sup>12</sup> Schenk, I. (2005). *Structured Flexibility: The Governance, Coordination, and Outcomes of IDRC Supported Networks*. Ottawa: International Development Research Centre, p. 2.

<sup>13</sup> These range from highly structured to very informal, and often reflect differences as to the type and number of members, the purpose of the collaboration (e.g., research, advocacy, policy) and the organizing principle (e.g., thematic or geographical). See: Tuozzo, M.F. & Tussie, D. (2006). *The Governance and Coordination of Networks: An Analysis of the Findings from an IDRC Strategic Evaluation (1995-2005)*. Ottawa: International Development Research Centre, p. 7.

<sup>14</sup> Creech, H. & Willard, T. (2001). Strategic Intentions: Managing knowledge networks for sustainable development. Winnipeg: International Institute for Sustainable Development, pp. 86-87.

<sup>15</sup> Witte, J.H., Reinicke, W.H. & Benner, T. (2000). Beyond Multilateralism: Global Public Policy Networks. *International Politics and Society*, 4.

<sup>16</sup> Creech (2008). p. 2.

Even as a non-legal entity, the consortium should prepare an annual report on activities for its members, stakeholders and the public.<sup>17</sup> An annual report helps provide clarity about the autonomy and independence of the consortium relative to the host organization and the nature of the working relationships with the partner members. The annual report should include an audited financial statement from the host organization that specifically identifies the revenues and expenditures of the network. The report should also include a financial reporting framework that credibly reports on revenues raised and spent by member organizations to support the joint work.<sup>18</sup>

#### **CLEAR DEFINITION OF PURPOSE AND ROLES**

A common experience within collaborations is the tension between keeping a narrow focus on specific actions and the desire to serve a broader range of interests within the membership.<sup>19</sup> Clearly articulating the goals and objectives of the network and ensuring that work plans are tied to these goals and objectives are essential.

The goal of CDPC is focused on changing drug policy, legislation and practice through the means set out in the mission statement above. The organizational chart delineates between governance responsibility (blue boxes) and operations management and implementation (green boxes).

The governing council is responsible for maintaining the vision and building capacity for addressing the mission. It is to be responsive to the membership in setting overall priorities<sup>20</sup> but does not determine or manage how those priorities are addressed. In addition, the governing council manages the fiduciary responsibilities, oversees resource acquisition and appoints the consortium manager. The governing council would be responsible for identifying a host organization and for developing an appropriate MOU with that organization so as to assist in fulfilling the council's fiduciary responsibilities. The governing council would also be responsible for appointing a fundraising committee to assist in ensuring adequate resources and sustainable funding.

The managing council, made up of the consortium manager and representatives from the working groups and supported by the secretariat, is responsible for managing work related to the priorities. This involves determining the pivotal policy and implementation processes in which decision makers might benefit from the network's expertise, approving related work plans, coordinating activities and ensuring deliverables.

The consortium manager should chair the managing council and report to the governing council, and must be able to demonstrate how the work plans respond to the mission and current priorities of the organization. The consortium manager is responsible for

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<sup>17</sup> Creech (2008), p. 26.

<sup>18</sup> A useful resource would be the accounting guidelines for reporting on joint ventures. Canadian Institute of Chartered Accountants (n.d.). Handbook. Section 3055.

<sup>19</sup> Creech & Willard (2001), p. 57.

<sup>20</sup> Laura Edgar (2002) says, "Most effective policy networks use an AGM or annual conference to identify priorities for policy work and begin the policy development process. 'Resolutions' sessions at such meetings combined with a degree of flexibility for the national governing body to initiate policy work between AGMs, strengthens the organization's effectiveness." (*Building Policy Partnerships: Making Network Governance Work*. Ottawa: Institute On Governance, p. ii). However, Creech & Willard (2001) caution that the priority areas for work should be selected because a clear outlet for the work can be identified, and not just on the basis of the specific interests of members (p. 70).

- managing the flow of information across the network,
- keeping the participants engaged,
- balancing consultation with members with pushing forward on network work plans, and
- monitoring the financial health of the network.<sup>21</sup>

The working groups are made up of partner members (see above) and provide the bench strength of the organization. It is critical to the success of a participatory organization that the work plans are developed and supported by those members involved in carrying out the work. Partner members, through their participation in a working group, appoint representatives from that group to the managing council and so are eligible also to serve in such a representative capacity on that council.

The secretariat provides largely technical support to the working groups so that partner members are supported in their work. In particular, the secretariat may provide

- project management,
- implementation of the communication and engagement strategies,
- facilitation of communication among members,
- management of network resources, and
- evaluation and reporting.<sup>22</sup>

#### ***PARTICIPATION, POWER-SHARING AND LEADERSHIP***

The important distinction between governance responsibilities and management roles was raised at the strategic planning meeting. In traditional hierarchical structures this distinction is centred in the relationship of CEO to Board. The evolution within the private sector from hierarchical corporate structures to more decentralized structures and on to networks and alliances offers insight for building collaborative organizations in civil society.

In the proposed structure, much of the decision-making is pushed out to the working groups that bear responsibility for implementation and can respond quickly. In order for a working group to be effective, effort is needed to ensure that it involves members who have capacity to carry out the work as well as access to the needed knowledge and expertise, and who represent the relevant range of impacted communities.<sup>23</sup> The partner members who make up a working group may choose to invite other network members or associate members to join the group in an advisory capacity in order to ensure the needed perspectives are included.

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<sup>21</sup> Creech & Willard (2001). p. 74.

<sup>22</sup> Creech & Willard (2001). p. 73.

<sup>23</sup> “Impacted communities” or “impacted populations” refer to identifiable groups who are directly impacted by a particular policy or legislative instrument (e.g., incarcerated individuals, pregnant women, youth, injection drug users, people on methadone, people who use alcohol or medical marijuana). The relevant populations to engage in a particular structure at any given time will depend on the populations directly impacted by the issue being addressed.

The success of a decentralized organization does not depend on a CEO “directing” the operation but on the skill of the manager<sup>24</sup> and the managing council to build and maintain alignment of all activity with the collaborative mission. In particular, special attention must be given to realizing the “network advantage”. This involves utilizing the resources of the members in such a way as to maximize joint value creation (i.e., to achieve more than the members could do independently). The managing council (the consortium manager and representatives of all working groups) is designed to be most effective in achieving this alignment of activity and efficiency of effort. The managing council should monitor its own representative makeup and appoint additional members as needed to ensure a breadth of perspective (e.g., ensuring the participation of impacted communities).

The broader membership benefits from the focused effort of the working groups and participates both in clarifying the priorities and extending the reach of the organization. As capacity allows, network members can become directly engaged in working groups with an increased level of commitment and influence. The network members, as well as partner members, appoint,<sup>25</sup> and are eligible to serve on, the governing council. Membership on that council should reflect the geographical regions and contexts (including urban and rural) of Canada, the various impacted populations, and a range of knowledge and expertise related to the organization’s mission.

The proposed model draws from current experience in the governance of private sector alliances which adopt a multilayered approach to decision-making. Because decision-making structures are grouped around functions and involve those responsible for the work, the decisions tend to be realistic and have immediate commitment toward implementation. As noted above, success in decentralized models depends on the talent of the manager to work with what Schenk calls “structured flexibility”.<sup>26</sup>

### **STRATEGIC INFLUENCE**

An important theme in the discourse at the strategic planning meeting revolved around the ability of CDPC to exercise strategic influence. Suggestions about a “celebrity board” and “charismatic executive director” as well as locating the office in Ottawa were all raised. While all such suggestions have merit, counterpoints to each were also referenced. Ultimately, the ability of the organization to have an influence on policy and legislation will depend largely on its ability to demonstrate relevance and salience and the quality of its work in developing recommendations, nurturing relationships and communicating positions. All other considerations should be evaluated against their impact on these issues. A review of Canadian networks suggests groups that demonstrate credibility through sound governance, organizational stability and the capacity to bring informed expertise or opinion to policy discussions are more likely to exert effective influence on public policy development.<sup>27</sup> Credibility takes time to develop. Networks lose their strategic influence when they try to take on too much too soon. This will be a challenge for CDPC because of the extremely complex nature of drug policy.

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<sup>24</sup> English, P. (1995). *Governance Structures of Networks in Sub-Saharan Africa*. Ottawa: International Development Research Centre, p. 4; Witte, J.H., Reinicke, W.H. & Benner, T. (2000). Beyond Multilateralism: Global Public Policy Networks. *International Politics and Society*, 2.

<sup>25</sup> This could, for example, take place through election at the AGM or through an electronic nomination and ballot process.

<sup>26</sup> Schenk (2005).

<sup>27</sup> Edgar (2002).

## **INITIAL WORKING GROUPS**

At the planning meeting, the concept of working groups received strong endorsement. Various configurations of groups were discussed. The four initial groups suggested in the structure above are intended to allow the organization to begin addressing its mission and building the needed capacity to be effective.

The ***policy and legislation*** working group would provide capacity to immediately focus on the larger mission of CDPC. This group would need to collect relevant materials held within the membership, identify opportunities for influence, and begin to develop materials and strategies based on careful analysis of available evidence. As the capacity of the network grows, this working group may split into multiple groups, each focused on a particular area of policy and legislation.

The ***communications and engagement*** working group would be responsible for developing an engagement strategy (a process of relationship building that acknowledges the power of two-way communications). The goal is to ensure that relevant stakeholders are aware of critical issues, are knowledgeable about possible solutions/approaches, and understand how CDPC might assist them to apply those solutions/approaches.

The ***international engagement*** working group would establish solid working relationships with international partners to identify areas of joint action. In particular, this group would immediately engage with the International Drug Policy Consortium (IDPC) and with the North American members of IDPC to develop and implement a regional work plan.

The ***membership capacity*** working group would focus on building the capacity of members. The mandate is to develop and implement strategies that respond to the needs of members, foster their ownership of the network, and increase their capacity to participate in the work of the network. This may include mechanisms for internal communication and training opportunities, among other means.

## **NAME**

### **PROPOSED NAME**

***Canadian Drug Policy Consortium (CDPC)***

### **COMMENTARY**

No rationale was offered in advance or during the meeting for the name “Canadian Drug Policy Consortium” (CDPC) being used by the network prior to this strategic planning meeting. In the absence of such advocacy (and owing to some initial confusion for some in attempting too quickly to employ the acronym without reflection on the long form), the name did not win broad acceptance. However, its elements were regularly picked up in the alternatives offered. The recognized virtues of the existing name include:

- Direct reference to the constituency – Canadian
- Direct reference to the focus – drug policy
- Declared nature of the relationship – consortium
- Conciseness – being able to communicate the above in 4 words

The greatest concern seemed to be with the word “consortium”, which some viewed as too “elitist”. The word, however, has the advantage of pointing to a formal, tight-knit and long-term association of partners in a joint venture. It avoids the suggestion of a temporary arrangement often implied by “coalition”, or the self-interested and commercial overtones that “alliance” sometimes carries, and is more action-oriented than “network” conveys.<sup>28</sup>

Various other suggestions included “Canadians for Drug Policy Alternatives” and “Re-think”. However, none of these other candidate names advanced at the meeting obtained ready endorsement (though time limitations precluded a formal gauge of opinion). The word “alternatives”, for example, runs the risk of some marginalization effect, and “Re-think” is not nearly as complete and dynamic as, say, the “Transform” designation to which it was compared for possible appeal.

The originally chosen title meets various criteria for an acceptable name: it is fairly succinct yet substantive, memorable (catchy enough, without being trite), easy to vocalize, it quickly and clearly communicates what the body is about (rather than leaving people to wonder or in suspicion), it does not marginalize the group, it is not readily confused with another operation’s name, and it should not evoke aversion. It has the advantage also of already associating the network with its anticipated partner on the international stage, namely, IDPC. Finally, not only does the sequence in the shorthand acronym come fairly easily with reflection and further use, its fourfold repetition of the long ē vowel sound retains a strong punch throughout rather than the fall off at the end that would occur with other possibilities (such as CDPA, CDPN).

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<sup>28</sup> See the *Oxford Canadian Dictionary* (2000). Don Mills: Oxford University Press Canada.



## APPENDIX A: PARTICIPANTS

### Canadian Civil Society Participants (Drug Policy):

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### Invited Guest Consultants:

The organizing committee extends a special “Thank You” to each of the following consultants who gave of their time to enrich our dialogue and deliberations.

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On behalf of the organizing committee and all the participants, we extend our appreciation to:

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