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SLOVENIAN REGULATORY DILEMMAS IN THE ILLICIT DRUGS POLICY FIELD
The Relevance of Public Funding for Civil Society Organizations

Abstract. Slovenian illicit drugs policy reflects several key characteristics of Central and Eastern European welfare systems. Due to the marginal character of illicit drugs policy in virtually every democratic society, regulation of the field has proven to be even more challenging since it reflects certain core ideological preferences of decision-makers. Being somewhat determined by the path taken for resolving similar issues in the previous regime, the relatively new policy field of illicit drugs has collided with certain supranational initiatives regarding the resolution of drug (ab)use on one hand, and local community initiatives responding to community needs on the other. We investigate the latter by focusing on Local Action Groups and identify their amphibious nature which derives from the urge to secure funding and stability. Namely, their greater institutionalisation and dependence on public funds may compromise their responsiveness, introduce another gatekeeper for other civil society actors and eventually leave them to the mercy of local public authorities.

Key words: illicit drugs policy, civil society organisations, third sector, governance spaces, local action groups

Introduction

Public policy-making and subsequent implementation processes in every individual system comprise a number of interconnected and frequently conflicting factors. In the absence of unanimity, the system encompasses at least two argumentatively or functionally opposed poles that contest each other on the basis of their interests or conception of the social reality. The field of illicit drugs presents a fundamental challenge to all societies since its marginalised nature also frequently symbolises society’s attitude to death, health, the productive capacity of the individual, personal

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freedom, community welfare, addiction, crime (Lukšič, 1999: 820), hedonism etc., and consequently involves even stronger viewpoints regarding the understanding of basic concepts of illicit drugs policy in an individual society. Hence, illicit drugs policy, with special attention to the problem of the (mis)use of illicit drugs, is a policy field with even more unambiguous positions regarding the tools, approaches and solutions to resolve the dilemmas the field implicitly presents. However, clear-cut and adverse standpoints regarding illicit drugs policy pose a serious challenge since the balance of power within a political system, along with every shift in power, determines the ‘best solution’ to problems concerning illicit drugs. Thus, socio-political forces ‘in power’ devise the main mechanisms according to their particular world view, which consequently determines the prevailing explanations of illicit drug problems and the framework for managing the policy field according to the ideology of the incumbent political elite.

These observations also point to the importance of civil society in this policy field since the public sector tends to give way to political elites that may (ab)use such marginal issues as appropriate signals for voters to re-identify with political actors’ ideological standpoints. Moreover, the organisational behaviour of public bureaucracies, which is based on responsiveness and efficiency, may inherently endanger a democratic political system since ideological and political taboos and majoritarian decision-making may collide (Seibel, 1990: 113). Namely, governments have to satisfy the growing demand for public goods as well as conform with majoritarian democratic principles and ‘mainstream’ political concepts in order to retain their legitimacy. Civil society represents a ‘way out’ from situations where market and government failures coincide by providing an efficient response in counterbalancing the state’s deficiencies and creating a vital role of civil society organisations (‘CSOs’)

1 in every liberal democratic system. Since excessive responsiveness as well as the avoidance of political taboos may inhibit the continued existence of a democratic government and public administration (ibid.), besides the obvious production of goods and services the third sector contains an equally important socio-political dimension (Evers et al., 2004: 11) manifested in interest representation, the raising of public awareness on specific issues, empowerment, participation, tackling the structural roots of a community’s distress etc. (Salomon et al., 2003: 6). It is this socio-political dimension of third sector organisations, with its intermediary stance and pluralist connotation, that makes up the main focus of our research since we intend to tackle dilemmas concerning a distinct

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1 The term “civil society organisations” in the broader/classical or perhaps even Scandinavian sense, where the division between state and civil society is blurred, is employed for the purpose of terminological consistency since the empirical part of this paper deals with amphibious organisational forms that would fall beyond the limitations of some other relevant terms (for more, see Muukkonen, 2007).
type of association in the field of illicit drugs – Local Action Groups (‘LAGs’) – and their wider impact on the policy area. In addition, the third sector’s future prospects, particularly in marginal policy arenas such as illicit drugs, will also be considered on the basis of the results obtained. With the intermediary role of the investigated organisations in mind, we intend to challenge the notion that such structures contribute to pluralism and democratic process in the country. Namely, we consider the macro- and mezzo-political roles of these organisations as a threat to pluralism in the policy field, which may help illustrate all future processes that would seek to ‘drive out’ or marginalise civil society from/in a particular policy arena. To put it more accurately, we shall try to answer the following key questions of our research: What categorisation of Local Action Groups is appropriate for capturing the complex variety within them?; What is their function in the illicit drugs policy field?; and What are the biggest hazards regarding the installed pattern of the institutional framework that we should be aware of? In order to respond to the first question, a rich bibliography on civil society and third sector organisations (e.g. Gidron et al., 1992; Salamon et al., 2003; Anheier and Seibel, ed., 1990; Evers and Laville, ed., 2004; Kolarič et al., 2002 etc.) will be examined along with the gathered empirical data. The other two questions will be tackled by recent governance and governability theory, with the policy networks approach and institutional gatekeeping discourse chiefly in mind.

The paper begins by describing the illicit drugs policy arena in Slovenia and its main issues and difficulties by presenting the core institutional characteristics and interpretative explanations. It continues by attempting to classify LAGs as an organisational form along with their functional role. Further on, we focus on the impact of the examined structures by considering theoretical approaches that allow a macro-systemic reflection on the phenomenon and the entire rationale behind the identified manner of shaping the institutional framework to be identified. The paper concludes with observations regarding challenges the third sector faces in the still evolving democratic polity by noting relevant lessons for the future.

**Theoretical and contextual background concerning illicit drugs**

Every public policy on drugs has its own cultural, value and interpretative foundations which in a given moment prevail and form a policy as a ‘local optimum’. When any of foundations changes, the balance shifts and creates a new equilibrium. In order to understand the main shifts in Slovenian policy on illicit drugs we must explain the basic paradigms concerning drug policy. According to Hartnoll (2004), we can identify four core groups of paradigms in the illicit drugs field. The first group consists of bio-
medical and clinical approaches that focus on physical deficiencies of the individual and consequently neglect other relevant factors (e.g. environmental, culture, lifestyle, demographic and socio-economic parameters etc.). The second group may be characterised as legal or repressive approaches which define the (ab)use of illicit drugs as deviance, wrong and sometimes even pathological. The aim is to control the flow of illicit substances and eliminate their use by the criminalising supply and demand. Such approaches are based on an authoritarian and paternalistic stance, encompassing mechanisms of exclusion, stigmatisation and incarceration.\(^2\) The third group of approaches - interactive models of sociological and economic paradigms - highlights the problem of the perceptions of relevant actors in shaping adequate responses to problems concerning illicit drugs. The chief characteristic of this group is a triangular conception of interactions between the situation in the field, policy responses to problems and the perceptions of the actors involved (users, public sphere, government and academia). The fourth group - public health approaches - has gained widespread prominence in Western European societies and can be divided into two currents: disease/pathogenic and salutogenic. Disease models are here considered to be a logical continuation of traditional medical disease models while, on the contrary, the salutogenic approach presents a more democratic, libertarian and egalitarian structure of relations by acknowledging the individual’s susceptibility to influences from the environment and consequently more holistically promoting health.

Slovenian policy on illicit drugs may be characterised as extremely imitating (Lukšič, 1999: 823) by its leaning heavily on Western European concepts and public health approaches. In line with the socialist regime and communist dogmas, it was initially profoundly repressive and prohibiting. Nevertheless, with the emergence of a liberal democratic system in the early 1990s a medical-repressive approach (Kvaternik Jenko, 2004: 135), which may be characterised as a pathogenic derivative of the public health paradigm, began to evolve. The normative foundations of Slovenian policy on illicit drugs originate in the National Programme on the Prevention of Drug Abuse, which identified drug (ab)use as pathological and consequently installed the ‘drugs-pathology-medication’ trinity as the dominant discourse (Podmenik, 1992: 142) that has defined the institutional framework ever since. Eventually, two antagonist poles with different visions regarding illicit drug policy have emerged. The conservative, which is in favour of prohibition and repression, and the liberal, which calls for an interdisciplinary approach and the greater role of non-governmental organisations (Lukšič, 1999: 824). This divide is also characterised as a prohibitionist vs. harm-\(^2\) The enforced medicalisation of users in a repressive manner and based on abstinence or available substitutes is a frequent manifestation of such a paradigm.
reduction policy (Jeretič, 2001: 341) and even a psychiatric vs. socio-medical approach (Kvaternik Jenko, 2004: 137). In other words, in the Slovenian public health paradigm there is a constant dichotomy between the ‘pathological’ stream, favouring medical apparatuses and subsequent medication, and the ‘salutogenic’ stream, which strives for the holistic inclusion of various other actors (e.g. social services, CSOs and relevant professionals).

Institutional ‘screening’ of the illicit drug policy field, particularly the area of the prevention and treatment of drug (ab)users, confirms the thesis regarding the prevailing public health paradigm since public health institutions dominate regulation of the field (see the section on governance space and Figure 1). Another indication of the repressive, paternalistic and prohibitionist public health approach taken towards users is their criminalisation (Deželan and Drobne, 2007) and primarily the ‘degradation’ of the Office for Drugs from an independent governmental office to an organisational unit within the Ministry of Health in 2004. The imbalance of the illicit drugs policy field in favour of public health institutions, particularly when compared to CSOs and social services, is obvious since the medication side of the coin is much more stable and developed than social security services and the various socially-orientated programmes largely carried out by CSOs. In terms of socio-political strategies (Evers, 2008) which eventually determine the character of welfare systems and the role of the third sector, we may typify the Slovenian illicit drugs policy field as a fine example of a classical welfarism strategy. Namely, responsibility for achieving the goals of the policy lies primarily in the hands of the state and its institutions, while CSOs merely fill in the gaps emerging in the structure of the system. In addition, a degree of authoritarianism and paternalism is evident, largely due to the hierarchically governed public authorities that finance, control and evaluate the vast majority of related programmes.

An apparent example of the public sector’s hegemony in the Slovenian illicit drugs policy field is the mentioned relocation of the Office for Drugs, as the main co-ordinating body that among other things deals with CSOs, to within the Ministry of Health. In addition, the Illicit Drugs Information Unit within the Institute for Public Health, which is under the direct influence of the Ministry of Health (Deželan, 2006) controls the flow of official information, data gathering and communication with international organisations.

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3 More than half (58%) of the total budget for illicit drugs policy is distributed among programmes within the Centres for the Prevention and Treatment of Illicit Drug Addiction, the Centre for the Treatment of Drug Addicts at the Psychiatric Clinic Ljubljana and methadone treatment (Deželan and Drobne, 2007).

4 The stability of the public health sector is ensured by generous and constant financial inflows (resources for public health programmes are usually provided on the basis of a direct budgetary item) while other CSOs and social services programmes are not financed on a regular basis.

5 For more on socio-political strategies, see Evers (2008). For socio-political strategies in Central and Eastern European democracies, see Kolarič (2009).
Further, the most relevant policy field structures on the local level are the Centres for the Prevention and Treatment of Illicit Drug Addiction (‘CPTI-DA’) which offer a clear example of the public health hegemony, while structures outside of the public health sector struggle to operate. Nonetheless, local mechanisms for balancing out the public health structures that may eventually gain momentum appear to be LAGs. Due to variations in the character of LAGs, we shall scrutinise these structures extensively in the remainder of the paper.

Illicit drugs governance space in Slovenia

The institutional framework for illicit drugs policy in Slovenia encompasses a complex web of interconnected actors (governmental, market and civil society) with diverse positions within the framework, a dissimilar accumulation of power, stability of relations and dynamics of interaction. One can identify three broad areas within the policy field concerning illicit drugs, two of them with at least some relevance to our research. The production of and trade with illicit drugs as well as the precursors field deal primarily with regulating criminal affairs concerning trafficking and economic activities, thus creating an exclusive environment in terms of the possible influence of civil society actors. On the other hand, the prevention of use and treatment of consumers of illicit drugs is fundamentally different since the more inclusive nature of the network provides an opportunity for civil society organisations to perform a wider scope of functions, ranging from preventive (informational, educational), monitoring through to supplying various medical and social services (Deželan, 2006). One extremity of this framework (see Figure 1) is the legislator (National Assembly of the Republic of Slovenia (‘RS’)), which adopts the draft national programme in the area of drugs on the proposal of the Commission of the Government of the RS for Drugs, an inter-ministerial body composed of representatives of the ministries of: health; finance; defence; education and sport; justice; labour, family and social affairs; the interior, and experts in the field of drugs. The Commission should promote and co-ordinate governmental policy and monitor the implementation of certain provisions but has in fact been ‘in hibernation’ for a number of years (Deželan and Drobne, 2007). On the other hand, the Office for Drugs within the Ministry of Health, which was up until 2004 an independent governmental office, carries out administrative work for the Commission and ensures the implementation of adopted resolutions, while also being the co-ordinator of inter-departmental preparations for the national programme, budgetary proposals, negotiations on the priorities and inter-departmental participations in international organisations. In addition, the Office for Drugs provides some of the fund-
ing for the operations of the Association of NGOs and provides vital technical, organisational and human resource assistance to LAGs in order to establish working mechanisms for networking and co-ordination on local (among different localities), regional and national levels.

Various other institutions operate within the public health domain of the institutional network regarding illicit drugs and are therefore inherently more or less regulated by the Ministry of Health. The Health Council, a consultative organ of the Ministry, approves programmes for the hospital and outpatient treatment of the consumers of illicit drugs which are implemented by the public health service network of the Centres for the Prevention and Treatment of Illicit Drug Addiction (‘CPTIDA’), while the realisation of hospital and specialist outpatient clinic treatment is carried out by the Centre for the Treatment of Drug Addicts (‘CTDA’). The former is co-ordinated by the Co-ordination of the CPTDA, which proposes a treatment doctrine and co-ordinates the activities of centres. The Co-ordination is appointed and procedurally defined by the Ministry of Health, which also defines the organisational structure of the Illicit Drugs Information Unit within the public Institute for Public Health. The Unit’s role is to ensure a national information network and the inter-departmentally co-ordinated collection of data along with the exchange of information at national and international levels.

Public social security services related to the consumption of illicit drugs fall within the competence of the Ministry of Labour, Family and Social Affairs. Programmes resolving social problems related to the consumption of illicit drugs that are co-financed from public funds have to be verified by the Council for Drugs, which is due to be established and appointed by the Ministry of Health. The abovementioned programmes are proposed by the Social Chamber of Slovenia, the main association of experts in the field. The Ministry of Labour, Family and Social Affairs is also the primary governmental source for funding CSOs and their programmes (Deželan and Drobne, 2007). At the other end of the illicit drugs governance space – the local level – we find the LAGs which monitor and co-ordinate the implementation of measures regarding prevention of the use of illicit drugs and are due to be the responsibility of municipalities. The illicit drugs governance space, primarily the fields of preventing drug abuse and treatment of consumers, is therefore functionally diverse since it regulates prevention, treatment, social security, CSOs as well as information flows (data collecting and dispersing), which is frequently an element of immense power for information holders – the government. In addition to the complex web of dominant (mainly due to funding) state actors in the field, the network is composed of various entities that are both market and civil society actors that differ according to the area of policy involved. The interaction between CSOs and the public sector can be classified as lying somewhere between co-operation and consulta-
tion (Deželan, 2006) since civil society is deeply involved in public programmes. Hence, in this respect the investigated governance space appears fairly inclusive, but is based on public funding as the main element of stability of the abovementioned network of actors (Deželan and Drobne, 2007). In addition, in terms of the ability to control and the level of autonomy of CSOs, the case of LAGs and the amount of public resources in their budgets clearly illustrates the pattern of CSOs’ dependency on public funds (see Figure 2).

The Janus-faced nature of LAGs

We have already mentioned LAGs above, but not in sufficient detail to explain their relevance to the policy field. There is no uniform definition of a LAG and we also cannot straightforwardly describe their nature. However, the following section tries to shed light on the issue by scrutinising the organisational features and functions of LAGs.

As stated before, LAGs should present an important pillar of the illicit drugs policy institutional framework on the local level. To some degree, they represent a counterbalance to a stable and well-regulated network of public health institutions that operate locally. Further, the original intention and ongoing aspirations regarding LAGs also strive to create an effective link between the public sector on the local level – municipalities – and civil society (localised communities and local CSOs). Due to its high level of centralisation, Slovenian illicit drugs policy generally eludes municipalities thus making public offices on the local level even more robust regarding the needs of local communities when dealing with illicit drug issues. Localities are thus primarily left to their fortunes, making the establishment of relevant working structures on the local level even more significant. LAGs represent an appropriate opportunity since they are in line with the National Programme of the Prevention and Reduction of the Use of Illicit Drugs as well as the United Nations Declaration on the Guiding Principles of Drug Demand Reduction and the EU Drugs Action Plan (Košir, 2005). That was one reason for the Office for Drugs’ increased promotion of the establishment and strengthening of LAG throughout the country. Beside the obvious top-down approach to the formation of effective structures that promote

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6 According to Košir (2007), one-third of all programmes in the field of illicit drugs is managed by non-profit voluntary organisations. On the other hand, nearly 77% of all programmes are co-financed by the state, 58% by municipalities and 13% by non-governmental organisations, which indicates the significant involvement of civil society in publicly-funded programmes.

7 In some instances of LAG formation government officials had a clear advocacy role in front of mayors and municipal councils in order to ensure the establishment of LAGs within individual localities (Občina Šmarje pri Jelsah, 2005).
Figure 1: Governance space in the field of illicit drugs policy

Source: adapted from Deželan (2006)
'community capacity-building' (UN, 1998) from the national level in order to conform with the standards of international organisations, there was far more durable pressure from certain local communities and activists to approach the problem by associating at the community level. Thus, we can talk about a bottom-up approach which was a much more ‘sincere’ reaction of civil society to dealing with community problems, providing far more promising capacity in the shape of different private associations and self-help groups. This combination of two alternative approaches to the formation of effective structures that would link the public sector and civil society together in order to deal with the complex problems of illicit drug (ab)use therefore led to an institutional untidiness, which forms part of our research agenda.

According to the Resolution on the National Programme of the Prevention and Reduction of the Use of Illicit Drugs (OG RS, 28/2004), which is a clear top-down mechanism, LAGs represent a model of holistic community inter-sectorial co-operation that deals with assessment of the situation and the planning of common measures to reduce the demand for and supply of illicit drugs. In addition, according to the national programme LAGs are defined as expert advisory bodies of mayors and municipal councils, founded by mayors, so as to prepare co-ordinated measures for local communities in the illicit drugs field and to monitor their implementation. Even the initiatives generated by individual LAGs themselves regarding the proposed definition of a LAG are in line with the abovementioned definition (Košir, 2005: 5). On the other hand, the actual situation in the field is far more ambiguous since both approaches (bottom-up and top-down) to LAG formation remained in place, particularly during the period of profound Europeanisation and internationalisation pressures (2000–2005). Probably the main reason for the abovementioned ‘institutional untidiness’ is the absence of a distinct legal status of a LAG, which is closely correlated with the different rationales regarding LAG formation. We are consequently dealing with a plethora of different organisational forms. Namely, LAGs are organised and operate as voluntary advisory municipal bodies of municipal public authorities, associations, student societies organised as associations, youth centres organised as public institutes, professional bodies of municipal public authorities, umbrella organisations, units of Health Protection Institutes as well as other interested local community actors (Košir, 2005; 2007; Curk, 2004; Deželan, 2006; Deželan in Drobne, 2007 etc.). According to their legal status, LAGs clearly represent a group of diverse actors that needs to be further clarified in order to understand their relevance to the third sec-

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8 According to Košir (2005: 8–9), 25 LAGs were established from the mid-1990s till 2001. On the other hand, from the beginning of 2001 till February 2005 an additional 25 LAGs emerged.
tor in Slovenia. When looking at the dimension of their *purpose*, LAGs promote the public good, encourage empowerment and participation as well as seek to address the structural roots of community distress. On the basis of this dimension, every LAG meets the civil society criteria (Salomon et al., 2003: 7), while approximately half of them attain the legal status threshold. Nevertheless, if we investigate the *economic* dimension that focuses on the source of organisational support LAGs would have to be principally classified as being outside the civil society sphere due to them receiving a the lion’s share of their revenue from public resources, namely municipal budgets (see Figure 2). Despite country-specific characteristics, especially concerning CSOs in the post-communist world, they face enormous difficulties gathering funds and consequently rely on public funds as a lifeline. However, having in mind the drawbacks of predominant public funding this aspect of defining CSOs should not be treated as an attribute of key importance.

![Figure 2: Average shares of municipal public resources in the budgets of LAGs (in %)](figure2)

Source: Deželan (2006)

In order to cope with the elusive issue of identifying the true nature of LAGs we will also apply Johns Hopkins’ structural operational features 10 (Salomon et al., 2003: 7–8) to the *de facto* situation regarding the operation and composition of LAGs in Slovenia. In terms of their organisation, LAGs

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9 By acknowledging the high proportions of municipal public resources in LAG budgets we must note that approximately one-half of LAGs are formed according to the top-down approach, being predominantly municipal advisory structures and thus being financed almost exclusively by municipal resources.

10 Salomon et al. (2003: 7–8) put forward a five-item definition of entities that should be classified within the ‘civil society sector’ according to structural and operational features. These are: organisational, private, non-profit distributing, self-governing and voluntary.
unambiguously satisfy the investigated criteria since they operate on the basis of their rules of procedure, have a determined organisational structure and display clear regularity in their operations. Organisational permanence and regularity is most evidently reflected in regular meetings, membership and procedural rules. Another undeniable attribute of LAGs is their non-profit nature since they are not commercially oriented and do not accumulate or distribute profits among their members. In addition, LAGs meet the requirements of self-governing criteria since they operate on the basis of their internally adopted rules of procedure, their own mechanisms for internal governance and have the authority to control their own affairs. Somewhat less unequivocal is the condition that touches on the voluntary feature of these organisations. Although membership in LAGs is explicitly voluntary\textsuperscript{11} and there is no financial compensation for participating in their operations, there is a concern about the sincerity of such voluntarism since some members in fact represent their professional field. Namely, there is no clear evidence that certain members of LAGs participate on the basis of their allegiance to or under pressure from their professional environment/employers. In other words, it is possible that certain LAG members participate because they have been told to do so by their employers. This is the primarily the case of LAGs established on the basis of top-down pressures that would otherwise probably not have the capacity to operate due to the lack of a ‘critical mass’ of interested individuals. An LAG as an advisory body to a mayor or municipal council is likely to provide an example of such ‘paper tigers’ that rarely perform their basic function. The final condition for identifying civil society entities – the private feature – is also the most significant for defining the true character of LAGs since the investigated units should not be part of the government (state or local) apparatus in order to be classified in the civil society sector. Despite some vagueness regarding the legal status of certain LAGs, bearing in mind the absence of a distinct legal personality of a LAG, we cannot state that the investigated structures entirely fit the criteria and are therefore positioned outside the public apparatus. Namely, those LAGs that are primarily municipal advisory bodies and do not demonstrate any other legal personality should be considered part of the public authority apparatus, despite their voluntary nature. On the other hand, LAGs operating as or within associations and other forms of organised associating beyond the public sector may clearly be treated as CSOs.

On the basis of an investigation of LAGs’ organisational features, we can provide a two-fold answer to dilemmas regarding the definition of LAGs. They reflect two broad but distinct types of organisations that hold some

\textsuperscript{11} In terms of the voluntary nature we have to inherently exclude two LAGs that operate explicitly on a professional basis, one being part of the Health Protection Institute and the other a professional municipal body.
important implications for overall policy in the field. Namely, the first type of LAG encompasses organisations based on voluntary participation, privately-based legal status, sincere community needs and a distinctive rationale of organising which in effect led to the initial creation of the LAG and association of interested individuals in the first place. The second type of LAG turns out to be far more ‘bureaucratic’ since we can ascertain they are principally public, in terms of their financing and formal status, ‘quasi voluntary’ and frequently ineffective entities established on the basis of pressure from the ‘top’.\footnote{A professional public LAG (one instance) is excluded from the presented typology.} In terms of Pestoff’s (1992) frequently cited articulation of the welfare mix, we may classify the first type of LAG within a triangular and oval shape while the second clearly fails to satisfy the ‘private’ dimension, thus falling primarily within the formal and informal public domain (see Figure 3). Regardless of the type, LAGs do not solely perform the role of service providers but also have a clear socio-political dimension. In the case of Slovenia we can therefore identify two distinct paths of the field’s socio-political evolution on the local level.

The first derives from community urges which initiated the formation of new entities and defined the rationales pursued by the latter in terms of socio-political aspects. Namely, according to Evers et al. (2004: 15) changing community circumstances and living conditions define the new emerging organisations, which was also evident in the case of the ‘bottom-up’ formation and continuing operation of LAGs.

Figure 3: Position of LAG types within Pestoff’s welfare mix
The second derives from the political centre and intends to ‘invite’ other actors to become involved in solving the ‘legitimacy dilemma’ (Seibel, 1990: 114) of public authorities and their policies while staying at ‘arms-length’ and preventing potential ‘slip ups’ from having possible boomerang effects on democratic polity. The ‘top-down’ evolutionary approach therefore reflects the need to include predominantly civil society actors in order to comply with supranational pressures (legal documents of the United Nations and European Union) and to perform ‘below par’ tasks that would otherwise be unacceptable to public authorities in terms of expected levels of responsiveness and efficiency (ibid.). The extensiveness of financial resources is therefore not a valid criterion since substantial funds are allocated in order to segregate a social problem from the (local) government’s responsibility. Irresponsiveness and inefficiency may also be structural pre-requisites for coping with contradictory societal and political demands (ibid.), which can sometimes resemble a ‘tyranny of structurelessness’ (Freeman, 1972). Namely, socio-political elites (local or national) may manipulate the allocation of funds in order to provide the political allegiance of the actors involved (Seibel, 1990: 117). Are we therefore dealing with a governance space (illicit drugs policy field) that reflects two modes of governance regarding LAGs? If so, what is their relevance to the entire policy area? We attempt to tackle these issues in the next section.

Illicit drugs governance space and distinct modes of governance on the local level

In an increasingly globalised world, particularly in terms of the elimination of geographical barriers, whereby the world may be characterised as a ‘global village’ (McLuhan and Fiore: 2000), it is no longer possible for the state to govern without the co-operation of other actors. In addition to citizens’ participation and interest in the role of civil society, new opportunities for the engagement of non-governmental actors in government have emerged, thus shifting the focus from government to governance (Taylor et al., 2008: 2). The concept of governance basically denotes the process of the de-centring of state power and multiplication of governance spaces in modern politics (Rhodes, 1997) as well as new forms of citizens’ engagement in the politics of localities and regions by participating in ‘project politics’ on specific issues (Newman, 2005: 4). However, there are contrasting understandings of the abovementioned process since some commentators

13 Several budget-draining programmes on the local level in Slovenia persist on a regular basis despite their questionable performance and output. A highly plausible rationale underlying such funding (mainly within the public health sector) is therefore latent ‘alliance-building’ and political vote collecting since the ‘conservative pole’ within the illicit drugs governance space is striving for the greater use of medications.
(Stoker, 1997; Healey, 1997; Newman, 2005) believe that governance indicates an interactive process which involves various forms of partnership and somewhat disperse state power of control and decision-making. Others (Jessop, 2003; Lukes, 2005; Davies, 2007; Taylor, 2003) perceive the de-centring and withdrawing of state power as deceptive since such a form of ‘meta-governance’ maintains state control at an ‘arms length’.

Despite the different motives behind the shift from government to governance and thus the creation of new spaces in which state and non-state actors come together (Howard et al., 2006: 3–4), we can conceptualise governance space as multiple parallel spaces in which power is encountered and negotiated and where configurations of actors and the distribution of power are perpetually shifting and changing. There are two basic underlying principles of the formation of governance spaces which correspond to the dual nature of LAGs in the illicit drugs policy field. Relevant authors (Cornwall, 2004; Newman, 2005; Howard et al., 2006) identify two opposing concepts as ‘invited spaces’ and ‘popular spaces’. Invited spaces are designed by state (public) actors and reflect shifts in local/national/international policies. Within invited spaces the process of shifting and changing is directed by state (public) authorities, thus setting the scope of issues covered within the arena and consequently also potentially creating new patterns of inclusion and exclusion (Howard et al., 2006: 3). New governance (invited) spaces are therefore frequently designed with the intention of facilitating existing forms of relationships, hierarchies and rules of the game in innovatory participatory arenas (Cornwall, 2004: 2). On the other hand, popular spaces represent arenas in which people associate at their own initiative to protest against governmental policies, produce their own services or for solidarity and mutual aid (ibid.). Like with invited spaces popular spaces may also become institutionalised but, most importantly, the boundaries between the two types of spaces are blurring since both may exert statutory backing, articulation of dissent and genuine co-operation and compromise.

In terms of LAGs we can identify both types of governance spaces. ‘Top-down’ LAGs represent invited governance spaces with a heavy influence of local authorities that can mainly be identified through robust codes of procedure, an exclusive definition of membership, clear parallels between the municipal funding and scope/nature of programmes, the lack of a ‘critical mass’ of actively participating actors for adequate community capacity-building and through barriers to the participation of interested citizens/actors/stakeholders within the arena. On the contrary, ‘bottom-up’ LAGs demonstrate a much higher degree of flexibility regarding procedures as well as the content of their activities, inclusive membership, a far greater number of members and service ‘recipients’, the promotion of participation and integration of CSOs into vital programmes and activities of LAGs. Namely, LAGs
also prepare, select, implement, co-ordinate and monitor certain programmes, thus placing CSOs in an unfavourable position if the principles of inclusion, co-operation and compromise are not respected. ‘Top-down’ LAGs may therefore present a serious obstruction to the normal conduct of civil society entities on the local level since the ‘gatekeeping’ role falls to structures that can easily promote an entirely ‘public’ agenda at ‘arms length’. To be precise, ‘delegated’ LAG members from public offices may make up a majority in the decision-making process when deciding on the (dis)approval of proposed programmes or even when deciding whether and which programmes the LAG will actually engage in. Thus, CSOs face the danger of being ‘driven out’ of the illicit drugs policy arena since they face unequal competition from structures that possess information and decision-making powers regarding the allocation of local (public) resources to the policy field.

As mentioned, LAGs represent part of a ‘gatekeeping’ system between the public sector and civil society. When looking at the entire governance space in the field of illicit drugs policy we can identify two principal units: the Office for Drugs as the gatekeeper at the national level and LAGs as the gatekeeper at the local level. Namely, LAGs represent a process of inclusion and selection by exercising their own preferences and/or act as representatives to carry out a realise pre-established (public) rationales (Shoemaker, 1990: 9). LAGs basically perform the role of a boundary person (Adams, 1980) since they carry out information control in the interaction between the public sector and private/civil society entities. In terms of the intergovernmental ‘gatekeeper’ notion (Bache, 1999), we may also describe LAGs as extended gatekeepers on the local level due to their ability to operate as gatekeepers in all stages of the policy process. Since the control of information is central to power (Rivers, 1965), gatekeepers also play a key role in the process of social change (Shoemaker, 1990: 68) which is, at least in the case of ‘top-down’ LAGs, in the hands of political elites. Thus, there is a reasonable likelihood of political elites acting in a hegemonic fashion and shaping social change according to their particular wishes.

**Concluding remarks**

What lessons can we draw from the above considerations? It is probably best to start where we left off – with the ‘hard-core’ politics of political elites. In early 2004 a slight shift from a liberal to a conservative approach to illicit drugs policy may be identified (more about the two approaches is found in

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14 Members of LAGs employed in public offices. For more, see the dilemma of the voluntarism of public officials regarding LAG participation in the previous section.

15 This is true of “top-down” as well as “bottom-up” LAGs. However, the latter do not present such a threat since they operate in a much more inclusive manner.
the first two sections), resulting in a ‘landslide’ with a right-wing government coming to power by the end of 2004. Funds were substantially reduced and reallocated during the whole process according to the prevailing conservative paradigm. Since a ‘paternalistic public health’ approach had been installed, funds for the majority of CSOs and non-health/medication-related programmes were slowly draining out. In addition, the Office for Drugs, which co-ordinated all relevant CSO-promoting activities (umbrella organisations, establishment of the network of LAGs), was relocated to be within the Ministry of Health, thereby making the shift in paradigm very clear. Accordingly, LAGs began to lose their focus since the main co-ordinating organ at the national level was unable to fully perform its tasks. Likewise, the paradigm shift eventually influenced the local level where political and ideological taboos again took hold. LAGs generally remained in operation despite the noticeable budget cuts, although some of them (mainly ‘top-down’ LAGs) had never really started off. However, does an alternative way of regulating LAGs provide different results?

In the case of the adoption of measures proposed by different LAGs and the Office for Drugs (a uniform definition of a LAG, a separate municipal budget item for LAGs, a distinct legal status for LAGs and consequently a less diverse approach to LAG formation) we would today have a completely different situation. Namely, the proposed distinct legal personality and separate budget item for LAGs within municipal budgets would not eliminate but amplify the ever present danger of ‘arms-length’ control by public authorities and the ‘driving out’ of CSOs due to their unequal position compared to LAGs. Consequently, CSOs within the local community would face greater pressure since local public funds would be under the ‘gatekeeping control’ of their potential adversaries – uniform LAGs. In addition, the increased organisational robustness of operating ‘bottom-up’ LAGs, as an outcome of the proposed measures, would implant some features that would make ‘bottom-up’ LAGs more susceptible to political influence and instabilities while at the same time less responsive to the urgent demands and needs of local communities. The proposed governance concept inherently imposes the danger of forming invited spaces, with the leading role being played by public authorities in determining the structure of relations and the discourse among them. The Slovenian socio-political context also poses a threat to the further re-alignment of LAGs towards the public health paradigm in the case of the adoption and implementation of proposed measures due to the institutional framework’s general tendency to foster the public health approach. On the other hand, we cannot ignore the positive effects of the co-ordination of various institutions and associations in the field, the multidisciplinary approach, community capacity-building, vertical and horizontal network of co-ordinating structures etc. But what is their price?
The classical welfarism strategy clearly carries weight when defining the ‘rules of the game’ in the policy field. As it determines the character of the welfare system itself, it also determines the role of the third sector within the illicit drugs policy field. Bearing in mind the ‘path-dependency effect’, it is evident that the widely applied strategy has also determined the somewhat recent policy field. The robustness of the patterns of classical welfarism remains detectable throughout the policy field, as clearly indicated by the exposed dilemmas regarding LAGs. CSOs clearly ‘fill in the gaps’ left open by the public sector – in this case largely the public health sector. Asymmetrical power positions between public and civil society actors and their relations pervaded by authoritarianism and paternalism mould extremely hostile conditions for the continuing existence of civil society initiatives due to a lack of funding, information etc. On the other hand, increased regulation of the community’s responses by public authorities may endanger CSO activity in general since such regulation introduces new gatekeepers. Further, the gatekeepers themselves (‘top-down’ LAGs or proposed uniform LAGs) may also be driven into an unfavourable position due to a shift in the political agenda (e.g. an economic crisis, shift in paradigm, change of government). The bottom line of the presented empirical evidence is therefore the danger CSOs face when trying to compete for public funds. Namely, the scramble for public money may simultaneously represent the road to extinction. And, if we understand the role of CSOs primarily as responding to community needs, then ‘the road to serfdom’ – a day-to-day struggle for scattered crumbs of funding – suddenly does not sound like such a bad option after all.

LITERATURE


