

## The Drugsfutures project

In 2006, the Academy of Medical Sciences (AMS) launched an independent inquiry into issues of brain science, addiction and drugs. The AMS convened a multidisciplinary expert Working Group to conduct the inquiry, designed to culminate in recommendations for public policy and research. A significant strand of the Working Group's inquiry was a programme of public engagement activities: the Drugsfutures project. The Drugsfutures project was funded and supported by the Sciencewise programme of the Department of Innovation, Universities and Skills (DIUS).

This summary report identifies the main findings from the evaluation study of the Drugsfutures project. A full report of the evaluation is available, which includes detailed analyses of all the statistical and qualitative data.

The evaluation research was carried out over the whole of the public engagement process, from February 2007, and was completed in April 2008. The research included observation and informal interviews at events, questionnaires at events, interviews with public participants, expert speakers, the AMS Working Group that used the outputs from the engagement processes, and those involved in commissioning and delivering the process, followed by quantitative and qualitative analysis of all the data collected.

### Context

Following the publication in 2005 of the *Drugs Futures 2025?* report, the Government (particularly the Department of Health and the Department of Trade and Industry's Office of Science and Innovation) wished to see further investigation of these issues and asked the independent Academy of Medical Sciences (AMS) to take this process forward.

The AMS convened their expert Working Group in early 2006 with a remit to consider the societal, health, safety and environmental issues raised by *Drugs Futures 2025?* in consultation with experts and the public. A public engagement programme (the Drugsfutures project) was therefore always an integral aspect of the Working Group's core activities.

The Drugsfutures project focused on the areas where addiction, brain science and drugs overlap, covering the three types of drugs identified in the original *Drugs Futures 2025?* report: illegal and legal recreational drugs, medicines for mental health and cognition enhancers.

### The aims and objectives of the project

The aim of the Drugsfutures project was "to engage the public in a national conversation on the issues raised by the current and future use of drugs that affect mental well-being".

The objectives of the public engagement activities were to:

- provide opportunities for members of the public to discuss and explore their aspirations and concerns about current and future issues related to brain science, addiction and drugs
- identify areas of consensus, disagreement or uncertainty on a broad range of issues raised by current and possible future scientific developments, and explore both initial views and changes in opinion
- inform the final recommendations made by the AMS for public policy and research needs.

An important secondary objective of the work was to:

- enable the AMS and the wider science community to increase their knowledge and understanding of public engagement and its potential for future application.

It was therefore important for the AMS that there was a rigorous evaluation of the public engagement programme, both to test the quality, effectiveness and value of the programme, and to identify lessons for future practice that would contribute to wider knowledge and understanding of public engagement.

### The Drugsfutures activities

The Drugsfutures activities were managed by the AMS Project Manager, and delivery was co-ordinated by the Office for Public Management (OPM). OPM managed a consortium of nine individuals and organisations each with particular skills (e.g. online engagement, media and marketing, and science communications).

The main engagement activities attracted a total of 478 participants and ran from January to April 2007. The activities, in summary, were as follows:

- An initial **literature review** on public engagement projects on brain science, addiction and the three sorts of drugs being considered through the project, to identify issues and methods (and lessons) from previous experience.
- A public **launch event** at the Dana Centre in the Science Museum, London, attended by 113 people: 61 members of the public plus scientists, facilitators, observers etc. The launch included a mix of theatrical presentations by actors of various scenarios related to the Drugsfutures issues, and round table discussions in which the public could discuss the issues among themselves and with the scientists and other technical experts in attendance.

- 19 **outreach workshops**, running for a couple of hours each, with a total of 146 participants. 15 of these workshops were held in the same five locations as the regional workshops (see below) and were designed to involve 'hard to reach' sectors of society relevant to the Drugsfutures issues: groups included young people, older people, drug users and ex-users, mental health service users, mental health carers, students, parents of children with ADHD, and teachers. The other outreach workshop was held in London with ex-drug users. Three further outreach events were run by the BA (one in London and two in Norwich) targeting African-Caribbean Carers, homeless young men, and a community group; these BA events reached a further 27 participants.
- Five **regional workshops**, which ran for a full day (Saturdays) in Liverpool on Drugs and the Law, in Exeter on Drugs and Society, Glasgow on Drugs for a Smarter Brain, Belfast on Drugs and Young People and Merthyr Tydfil on Drugs and Mental Health. 180 public participants attended the workshops (average of 35 at each), of which 121 were specially recruited plus 59 participants from the outreach groups who wanted to stay involved. Each regional workshop was also attended by two to three expert speakers including academics, police and from drugs charities and health bodies.
- The **Brainbox**, which was a two-part event with two two-day sessions held about six weeks apart, with the same small group of 25 people (23 at the second session). This group discussed all five of the themes covered at the regional workshops.
- An **online consultation**, with a blog and a formal online consultation accessed through a website, running from January to April 2007. This attracted 314 registrations and 125 participants.

## What worked well

The evaluation has identified several aspects of good practice through analysis of questionnaire feedback (shown as percentages of respondents; based on a return rate of 96% from the Brainbox, 92% from the regional workshops and 55% from the outreach workshops), plus interviews and observation:

**The process worked very well.** 94% of respondents from the outreach workshops enjoyed the workshop, and 97% of regional workshop and 100% of Brainbox respondents said they were satisfied with the process. There was a lot of positive feedback on the workshop approach especially working in small groups in which participants could share views easily with others.

Feedback from experts and the Working Group interviewees was also very positive, with strong feedback that the process was well-designed and delivered, and produced the outputs that were wanted.

**Selection and use of experts.** The expert speakers provided an unusually wide range of knowledge, experience and expertise - they included academics working in universities on the latest developments in cognition enhancers, people working in health trusts and drug and mental health charities, and ex-drug users. The experts took a range of roles in the workshops including making short presentations, answering questions from the whole group, and sitting in on small group

discussions to answer questions as the public deliberated on the issues. The range of input, their local knowledge and skills in communicating with the public, and the way the expert input was integrated into the process to provide maximum support to the public without dominating discussions, worked very well.

**All involved learned something new.** Most public participants learned a great deal: 90% of regional workshop, 100% of Brainbox and 67% of outreach workshop respondents said they had learnt something new. Many also said that being involved had clarified their thinking and affected their views about drugs and mental health issues. They particularly valued the input from scientists and other experts, and also the opportunity to hear the views of other participants and to learn from them. They found the written information provided was fair and balanced, useful and easy to understand, and felt able to ask questions if needed. Several could remember specific pieces of information that they had picked up during the events.

Expert and AMS Working Group interviewees also said they had learnt a great deal from the process, both about public views on the issues being discussed and about public engagement methods, especially as many had not been involved in these sorts of activities before.

**Increased enthusiasm for future public engagement.** As a result of being involved in this process, almost all most public respondents were more willing to get involved in discussions on policy issues in future. Almost all public respondents also felt it was important to involve the public in discussing these sorts of issues, and many felt there should be more of these sorts of events for the public. The feedback from expert speakers and the AMS Working Group members interviewed was also positive about future opportunities for public engagement in their work.

## Quality of discussion among public participants.

Observation and feedback from interviews with expert speakers and Working Group members provided evidence that the quality of discussion, and the interest, commitment and enthusiasm of public participants was high. For example:

"I went around the discussion groups from one table to another – frankly I was moved by the depth of feeling I witnessed... I'm a medical man so I was partially aware of the strength of feeling about these issues, but I had really barely realised the half of it." (AMS Working Group member)

"I thought [the quality of discussion] was fantastic. I thought people were making really good contributions, you know, without any one-sidedness really. I had a wander round the discussion groups and they all seemed very active, with everyone participating." (expert interviewee)

Not everyone was as positive in their feedback, with some seeing the quality as 'mixed', but generally there was some surprise at the level and quality of the public debate and participants' interest and good sense.

**Recruitment and representation.** The mixed approach to recruitment for the various activities worked very well. The use of a professional recruitment agency helped ensure a good demographic representation of the British public, while the

outreach activities (including through voluntary and community organisations) ensured the involvement of 'hard to reach' sectors of society particularly relevant to the issues. Allowing the outreach participants to join the recruited regional workshop participants meant that those discussions could draw on a particularly rich mix of views from people from a wide diversity of backgrounds. Although there were not as many people from black and minority ethnic backgrounds as had been hoped, generally representation and diversity was very good.

#### **Public participants could have their say and be listened to.**

Many public respondents valued having a say and being listened to by the AMS, and feeling they could contribute. There was a fairly high level of trust in the AMS, and in the extent to which the AMS would take account of the public's views, and a 'hope' that public views would inform AMS conclusions and recommendations.

Trust was strengthened by the methods of recording, and a large proportion of respondents said that the results of the debate genuinely reflected the discussions that took place. Points made at the workshops were clearly recorded by facilitators, and participants often had a chance to present their views in their own words, and that these were recorded and taken forward.

#### **What worked least well**

Feedback from participants was generally that 'nothing' did not work well. However, a few concerns were identified:

**Information in advance.** Although generally very satisfied with the quality and quantity of information provided, quite a few public respondents said they would have liked more information in advance so they could have been better prepared.

**Online engagement.** The website, blog and online consultation were important activities in the engagement programme, providing open access to anyone who wanted to give their views but were not invited to be part of the main deliberative events. However, the online consultation did not attract as many participants as had been hoped, in spite of strenuous efforts to publicise this engagement opportunity.

**Reporting back to public participants.** OPM communicated twice with public participants after the public engagement activities were completed: once immediately afterwards (in April 2007), and once to let them know the AMS final report was published in May 2008. However, there has been no communication with the public about how their input influenced the AMS Working Group's final conclusions and recommendations, and participant and expert interviewees were all interested in the nature and extent of the influence of the process.

#### **Value for those involved**

The process had value for the public participants, expert speakers and the AMS Working Group members, as outlined below.

**Value for public participants.** Public participants said that process worked very well and was a positive experience. They learnt something new and clarified their thinking, they felt they had a say and were listened to, and they valued sharing views with others.

**Value for expert speakers.** Expert speakers found it a valuable opportunity to discuss the key issues of their work directly with the public and valued that first hand contact as a 'reality check'. They also valued the opportunity to experience and learn about public engagement methods that were new to many of them.

**Value for the AMS Working Group.** The Working Group members interviewed said that they felt the process was effectively designed and delivered, and they had learnt about public opinions at first hand as well as learning more about public engagement processes. They also found value in the following:

- **A worthwhile process.** Most Working Group respondents felt that the exercise had provided important benefits for their work. One said "I think it did add to the value and quality of our work. It was useful for us to be exposed to the public perception in this way." (Working Group member interviewee)

Not all Working Group members agreed; another said "I am still quite sceptical about the benefits" (Working Group member interviewee). However, the overall feedback was positive. As one said:

"You can't expect any drugs policy to have long-term success unless you take people with you. If you cut across the grain of the public instinct it's disastrous. This engaging with people should help us devise policies which are acceptable and sustainable." (Working Group member interviewee)

- **Valuable outputs.** The exercise provided valuable data on the range of public views on the issues, including where there was conflict or consensus on specific issues, and where participants changed their views over the course of the Drugsfutures project. Some Working Group members found particular value in listening to public discussions first hand, while others found the written input most useful; some felt that both sources of evidence of public views were valuable:

"It was interesting to attend the events and listen at first hand to how the public thinks aloud about these issues. Obviously, back in the working group we received from the contractor an edited version of findings given in headlines and bullet points – these are helpful when we see how they fit with other views on our major questions." (Working Group member interviewee)

- **Influence on policy recommendations.** Some Working Group members interviewed felt that the engagement process was simply a step that had to be gone through, rather than expecting anything particularly valuable to emerge from it. One said: "I think the fact of the consultation was more important than the findings." (Working Group member interviewee)

However, while some Working Group members interviewed suggested that the public input was not new or surprising, they also acknowledged that it enabled the Group to come to conclusions with greater confidence based on better knowledge of public attitudes and concerns, and greater clarity about where there were areas of conflict and disagreement among the public:

"For me there was nothing new in what resulted from the public consultation, but it was very important even to have that reassurance." (Working Group member interviewee)

Overall, the general feedback was that the input from the public had influenced the Group's work. Comments included:

"It did make a difference, in the way we viewed certain aspects and the emphasis we placed on some areas." (Working Group member interviewee)

"Our work has been influenced because we listened to and we learned from what was being said. We took into account the strength of feeling and the emotional weighting in the public mind." (Working Group member interviewee)

"I think the recommendations were sharper as a result of the public consultation." (Working Group member interviewee)

**Spreading awareness.** Although there was no direct feedback on this issues, it is clear from the responses from the public (especially in interview responses), that public participants talked about the issues with other people. This sort of dissemination of information on the issues may be valuable to longer term policy-making processes, contributing to a better informed and thus more knowledgeable public on the highly contentious issues of drugs, addiction and mental health addressed in this process.

## Lessons for the future

**Mix of methods.** A mix of methods can be particularly valuable in enabling people from very different backgrounds to express their views. In this case, the mix of drama and round table discussions at the launch, and the use in the workshops of written and verbal information in a variety of activities including small group discussions, group presentations etc all worked very well.

**Appropriate selection and use of experts.** A diverse range of experts, providing a good mix of academic knowledge, grassroots and personal experience, used within a design created to ensure good public deliberation that gives participants time to reflect on new information and consider their views, can greatly enhance the value and effectiveness of public engagement activities.

**Recruitment and representation.** An approach to recruitment that ensures a demographically representative sample, plus input from an appropriate range of 'hard to reach' groups of particular relevance to the issues being discussed, provides the diverse range of backgrounds and views that are essential for a rich discussion that provides value to participants and helps ensure good data on a wide range of public concerns.

**Expertise in design and delivery.** The complexity of the design and delivery of the Drugsfutures project required significant experience, skills and commitment to be effective and valuable. In this case, the project manager and the delivery organisation achieved all the objectives and standards of good practice set for the process and delivered a process of considerable value to all those involved. This was only possible through close collaboration and good communication between the contractor, the project manager and the Working Group.

**Feedback to participants.** Feedback should be given to all participants as soon as possible after their involvement. Ideally feedback should provide a summary of what was provided to those developing policy recommendations using public input, what influence that input had, and what is finally decided at the end of the process.

**Online consultation.** Online consultations, blogs and websites can work well to provide an open access element to public engagement programmes. However, it can be difficult to achieve the level of publicity necessary to reach the wider public that is often the target audience. Greater integration and different timing for online engagement (e.g. being run later in the process so that publicity about emerging findings can be used to generate wider interest) may increase take-up.

**Appropriate information in advance.** It may often be appropriate to provide some detailed information for participants in advance of their meeting, so they have a better idea of what they are being asked to do, and the nature of the process they are becoming involved in. Better initial briefing may help create more productive discussions and give participants greater confidence earlier in the process.

**Clear evidence of influence.** Evidence will always be needed of the influence of the results of the engagement programme, as this will affect the views of participants of the value of the exercise, and will affect trust in engagement programmes generally. The integration of data from various sources (e.g. desk research and engagement programmes) into policy development is an art rather than a technical exercise. It is important that these processes, although complex and creative, are as open and transparent as possible, with clear reporting of the input from engagement programmes, and clear lines showing where that input has had specific influence.

## Final conclusions

Developing an effective public engagement programme on the highly complex issues of brain science, addiction and drugs was a major challenge. The Drugsfutures project was a sophisticated programme which used a wide variety of innovative as well as more conventional engagement methods to involve the general public as well as 'hard to reach' groups of relevant to the issues.

Overall, this was a very good and effective public engagement programme which met all the objectives and standards of good practice set. The process has provided significant value to the public participants involved, to the expert speakers who contributed to the launch and deliberative events, and to the AMS Working Group that used the outputs of the process in coming to policy conclusions.

The process has increased public awareness of the issues, and the willingness of public participants, and others, to get more involved in public engagement programmes in future. The Drugsfutures project can therefore be seen as a significant contribution to the future of public engagement on science and technology issues.