

Evaluation of the Academy of Medical Science's Drugsfutures public engagement programme

Final report

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1 Introduction

In 2006, the Academy of Medical Sciences (AMS) launched an independent inquiry into the societal, health, safety and environmental issues raised by the *Drugs Futures 2025?* report, published in 2005 by the Government's Foresight programme on 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 needs.

The Working Group defined a programme of work, including a stakeholder consultation (with, for example, scientists, research funders, health professionals, charities and patient groups). In addition, a significant strand of the work 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; Sciencewise was formerly part of the DTI's Office of Science and Innovation).

This report presents an evaluation of the public engagement activities undertaken through the Drugsfutures project. In particular, the evaluation focuses on the deliberative public engagement elements of the engagement (the workshops and Brainbox), as these were the elements of the process that potentially had the most lessons for future AMS public engagement work.

The report summarises the methodology of the evaluation, the purpose and objectives of the engagement programme, feedback on the main activities within the engagement programme, considers the extent to which the objectives have been achieved, identifies the elements of the process that worked particularly well and less well, and identifies some lessons for future practice in the light of these findings. The final section concludes the report by identifying the particular value the process provided for public participants, the experts taking part, and the AMS themselves.

2 The evaluation study

2.1 Introduction

The Academy of Medical Sciences (AMS) is one of five learned academies in the UK, alongside the Royal Society, Royal Academy of Engineering, British Academy and Royal Society of Edinburgh. The Academy promotes advances in medical science and campaigns to ensure these are translated as quickly as possible into benefits for patients.

The aims of the AMS are to:

- Give national and international leadership in the medical sciences
- Promote the application of research to the practice of medicine and to the advancement of human health and welfare
- Promote the aims and ethos of medical sciences with particular emphasis on excellence in research and training
- Enhance public understanding of the medical sciences and their impact on society
- Assess and advise on issues of medical science of public concern.

These last two aims affect and are affected by the views of the public and, with the Drugsfutures project, the AMS was undertaking a significantly larger public engagement programme than in previous activities. It was therefore particularly important for the AMS to review and identify lessons from this major public engagement programme to inform its own and others' future engagement activities.

The evaluation was designed to focus particularly on the deliberative elements of the public engagement programme, but also considered the other elements of the engagement programme (such as work with the media and the online consultation).

The evaluation does not assess the policy outputs or implications from the Drugsfutures project in any detail; it focuses on the engagement processes and assesses the extent to which the activities met the objectives set, and the principles of good practice that apply to projects funded through the DIUS Sciencewise programme. Policy issues are touched on throughout this report, but only where relevant to assessing the effectiveness of the engagement.

The evaluation was commissioned as a sub-contract arrangement with the main contractor delivering the Drugsfutures project (OPM), but was conducted as an entirely independent activity. The AMS agreed the evaluation specification before the tendering process was finalised, and ensured that all tenders included the same evaluation brief and that Shared Practice was commissioned to undertake the evaluation. In this way, although contractual arrangements were with OPM, the main reporting relationship for the evaluation was with the AMS project manager.

The evaluation was commissioned in December 2006, and was completed in May 2008. Details on the methodology are given in section 2.4 below.

2.2 Aims and objectives of the evaluation

The objectives for the evaluation were agreed in the original specification for the evaluation to be as follows:

- Determine the success of the AMS Brain Science, Addiction and Drugs (BSAD) public engagement programme in meeting the objectives specified at the outset, including describing how success has been achieved (whether specific components were particularly important).

- Contribute to the body of knowledge about public engagement in science, and to the development of the evaluation of these processes.
- Contribute to understanding among policy-makers, government etc about the value of public engagement.
- Identify specific lessons for future public engagement in science.
- Involve participants from all parts of the process in providing data for the evaluation, to ensure that all perspectives are included in the final assessment.
- Provide data and analysis that can be incorporated into the overall final report of the BSAD public engagement project.

There was also an expectation that the evaluation research would contribute to the ongoing development of the public engagement programme as it was continued. This report covers all these elements throughout.

2.3 Approach to the evaluation

Evaluations of engagement can range in approach from a mechanistic 'audit' approach, focusing on quantitative assessment of achievement against formal targets or goals, to approaches that focus much more on 'learning' from the experience, focusing on qualitative description and interpretation of more 'subjective' data (e.g. from interviews, stories, observation etc) to explain why and how certain outcomes were achieved.

The audit approach can be summarised as asking questions such as:

- have we done what we said we were going to do?
- have we met our targets (e.g. numbers of participants; reaching a representative sample of the population)?

The learning approach is more likely to ask questions such as:

- were the methods and design appropriate to the objectives, and were the objectives the right ones?
- what have the impacts been (e.g. on the participants, participant satisfaction, policy outcomes, decision-making processes, etc?)
- what are the lessons for the future?

The approach to this evaluation has used elements of both approaches. It focuses on a qualitative learning approach, while ensuring that the quantitative and audit elements required were also delivered (e.g. objectives met). It therefore required the collection of both qualitative and quantitative data.

The qualitative and quantitative data has been analysed against the stated objectives of the engagement process, and the Sciencewise principles of good practice, as well as considering issues raised in the feedback from participants and those delivering the process. This approach was designed to enable clear lessons to be distilled from the evaluation research as well as measuring the effectiveness and the overall achievements of the process.

The style Shared Practice adopts for evaluation is collaborative. However, the evaluator also has responsibility for ensuring the independence and rigour of the evaluation process, and to reporting findings openly and honestly to appropriate audiences at appropriate times. These principles were adhered to throughout the evaluation research and reporting.

2.4 Methodology for the evaluation

The evaluation methodology was made up of the following elements:

- **Detailed design and planning of the evaluation.** This involved work with the AMS, OPM and the other members of the consortium brought together to deliver the Drugsutures project, to agree the detailed parameters of the evaluation and the programme of work, especially the main themes and questions for the evaluation.
- **Evaluation research.** This included the following:
 - **Observation** of a sample of events, including informal interviews with a range of participants. Evaluators attended, observed and conducted informal interviews with the public at one of the five regional workshops, and also at the second (two-day) Brainbox event.
 - **Development and use of questionnaires at all public events.** Questionnaires were distributed at all the outreach events, the five regional workshops, and both parts of the Brainbox (January to March 2007). There was a very good questionnaire response rate in the regional workshops (92% overall) and Brainbox (96%), but fewer participants at the much more informal outreach events completed questionnaires. Detailed analyses of questionnaires have been undertaken and can be found in the annexes to this report.
 - **Interviews.** Interviews were used to complement the data gained from questionnaires, and provide deeper and richer data on some of the key issues. Interviews were carried out with:
 - **Public participants.** It was important to interview public participants to gain qualitative data which would allow the evaluation to assess their satisfaction with the quality of the process as well as the impacts the process had on them. These interviews were undertaken a few months after the workshops, to complement the questionnaire data that gained immediate responses and provided largely quantitative data. Interviews were carried out in May and June 2007 with 20 public participants, covering feedback from all five regional workshops (10 interviews), outreach events (5 interviews) and the Brainbox (5 interviews).
 - **Experts.** Experts attended the launch, all the regional workshops and the Brainbox. As with the public participants, interviews were carried out to gain qualitative and more reflective responses on the process overall, some months after the workshops were held. Interviews were carried out in June and July 2007 with 7 experts from across all events.
 - **AMS Working Group.** It was important to interview a sample of those who were using the results of the public engagement programme to develop policy recommendations for Government. Interviews were conducted with 4 members of the AMS Working Group. Interviews were carried out in September 2007, when the Working Group had been considering the draft of their final report and the public engagement work was fresh in their minds.
 - **Those commissioning and delivering the process** (AMS, OPM and others in the Drugsutures consortium). Informal conversations were undertaken with the project manager at the AMS, the project leader at OPM and some other members of the Drugsutures consortium to more fully understand the approach to the design of the process, what happened in practice, and the lessons identified by those involved for future practice. In addition, OPM held a short review meeting with most of the Drugsutures consortium in June 2007 to identify the main lessons of the project for them.

- **Analysis of data.** Quantitative and qualitative analysis of questionnaires and interview transcripts has been undertaken to provide statistics, overall qualitative feedback and illustrative quotes from those involved.
- **Reports.** In order to contribute to the continuing development of the programme, the evaluator provided various interim evaluation reports throughout the project including an immediate feedback report on the launch (including analysis of all questionnaires) in February 2007, and immediate feedback on the Exeter workshop in time to enable changes to be made to the remaining three regional workshops. In addition, a summary of all the questionnaire analysis was provided in April 2007, and an interim summary of evaluation findings was provided to the AMS in July 2007 to feed into the Working Group's considerations of the overall findings from the public engagement programme summarised by OPM. This was prior to the completion of the evaluation research interviews, but provided sufficient data for the Working Group to take an initial view on the effectiveness and robustness of the public engagement programme.

The final full evaluation report was presented to the AMS in draft form in May 2008, and finalised for publication in July 2008.

2.5 Background and context

In July 2005, the Government Foresight programme on Brain Science, Addiction and Drugs produced the report *Drugs Futures 2025?*. The report reviewed the relevant research literature and explored the likely impact of future science, including social sciences, on addiction, drug use and treatment for mental health, and raised a broad spectrum of issues for society and for future public policy.

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.

In early 2006, the AMS convened a multidisciplinary expert Working Group in to conduct an independent inquiry into the issues raised by the *Drugs Futures 2025?* report. The AMS received strong Ministerial support for the project, at the end of which the Working Group was to publish a formal final report, including recommendations to Government on public policy and research needs. The Government was expected to give a written response to the AMS recommendations within 12-18 months of the AMS report's publication.

The remit of the Working Group was to:

- Consider, in consultation with experts and the public, the societal, health, safety and environmental issues raised by *Drugs Futures 2025?*.
- Report back to the Department of Health and other Government Stakeholder Departments (including, at the time, the Department of Trade and Industry, Home Office, Department of Culture, Media and Sport, and the Department for Education and Skills) with recommendations for public policy and research needs.
- In the course of the consultation, consider the Government's policy priorities in this area.

The membership of the Working Group was intended to reflect the diversity of the issues to be explored and included experts in epidemiology, medicine, neuroscience, psychiatry, psychology, pharmacology, philosophy and law.

Alongside the programme of public engagement, the Working Group consulted with relevant stakeholder organisations (for example, scientists, research funders, health professionals, charities and patient groups) on issues that may arise from current and future scientific developments. Running the public engagement activities, stakeholder consultation and expert examination simultaneously was intended to facilitate progression towards a robust set of recommendations that has been supported and informed by both scientific evidence and public concerns and aspirations.

The public engagement programme was intended to focus on the areas where addiction, brain science and drugs overlap, covering the three types of drugs identified in the original Foresight report: illegal and legal 'recreational' drugs, medicines for mental health and a new category of substances termed 'cognition enhancers' that might enhance the performance of the brain in specific ways, such as enhancing short term memory or speed of thought.

Taking account of the Government's policy priorities for this project, and covering the three categories of drugs, the Working Group identified a number of key themes to explore during the public engagement programme. These themes were control and regulation of drugs, attitudes towards drugs use, young people and parents, addiction, and mental health treatments. These themes were not intended to be prescriptive, but simply to offer illustration of the types of topics to be covered.

The Working Group began their work in early 2006, and the public engagement activities ran from January to April 2007. The final report of the public engagement activities was produced by OPM in May 2007, and the Working Group began to develop their final conclusions. The Group drafted their final report in February 2008 and, after further peer review, the report was published in May 2008. This timetable and set of activities provided the broad context for the engagement programme and thus also for the evaluation study.

The other contextual issue potentially affecting public engagement programmes is media coverage. Drugs issues are, of course, covered by the media fairly intensively and permanently, and with varying degrees of hysteria. There was therefore a reasonable awareness among public participants of the issues regularly arising in the media. In addition, there was a strand of work within the project to generate public interest through media coverage, in order to encourage more people to visit the project website and take part in the process. The evaluation therefore touches briefly on the media coverage generated by the project, and more general media coverage on the issues that may have been seen by participants.

3 Aims, objectives and summary of activities

3.1 Introduction

This section provides a brief overview of the aims and objectives of the engagement programme, and an overall picture of the activities that took place. It also provides details on the e-consultation and media elements of the process, as these were not evaluated in detail. Subsequent sections analyse the public engagement events (the launch, the outreach and regional workshops, and the Brainbox) in more detail.

3.2 Aims and objectives of the engagement dialogue

Public engagement was a core element to the AMS Working Group inquiry into brain science, addiction and drugs, and the Working Group members were closely involved in setting the aims and objectives for the public engagement activities.

According to the specification, the aim of the public engagement programme 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 work 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.

The specification also stated that, in order to meet these objectives, the public engagement programme should:

- deliver a nationwide series of activities that provides participants with the opportunity to access information and views from a wide range of perspectives
- empower the Working Group by providing them with the perspectives of a broad-cross section of the public
- be flexible enough to incorporate different audiences, in particular those groups of specific relevance to, but often excluded from, debates on these topics, such as young people, drug users, and older adults
- create some form of 'e-engagement' to facilitate interaction between the wider public and the project
- involve constructive, ongoing and informed interaction between public participants and members of the Working Group
- identify the diversity of the views expressed but also reporting on areas of agreement
- allow time to explore changes in perspectives over the course of the programme
- be fully integrated with the Working Group inquiry.

The extent to which these objectives were met is analysed in section 9.2.

3.3 The main activities of the public and stakeholder engagement

The main activities of the Drugsfutures programme were co-ordinated by the Office for Public Management (OPM), which managed a consortium of nine individuals / organisations each bringing particular expertise:

- Dialogue by Design contributed to overall process design and specifically delivered the e-consultation element of the project
- Martin Ince, a science writer and adviser, supported the production of the information materials produced for the various activities
- Think-Lab provided media and marketing expertise
- The BA (British Association for the Advancement of Science) helped organise the launch and facilitated the outreach work
- IPPR (the Institute of Public Policy Research) provided policy advice and support with media contacts
- The Dana Centre (at the Science Museum) helped publicise, organise and host the launch event
- EDAB (the European Dana Alliance for the Brain) provided access to a European network of neuroscientists, linked to the Dana Centre (part of the Science Museum).
- Diane Warburton of Shared Practice undertook the independent evaluation. As mentioned above, although contractually part of the consortium, the evaluation was managed independently and reported directly to the AMS project manager.

Overall, the Drugsfutures project involved 478 individual public participants over the three months of the public engagement activities, plus numerous expert speakers, observers etc:

- 61 public participants at the launch; plus 52 experts, policy makers, facilitators etc
- 146 public participants at the 19 outreach workshops (including a one-off event in London and 3 outreach events run by the BA); 59 then attended the regional workshops
- 121 specially recruited public participants at the 5 regional workshops (plus 59 as above)
- 25 public participants at the Brainbox events
- 125 participants in the online consultation (314 registered).

The full range of Drugsfutures activities were as follows:

- An initial **literature review** on public engagement projects on brain science, addiction and the three sorts of drugs in Drugsfutures: cognition enhancers, drugs for mental health, and recreational drugs. The aim of this review was to identify issues and methods from previous experience, and identify any lessons for this project. A 4-page summary report was produced and used for planning.
- A **public launch event** in the Dana Centre in the Science Museum in London. This event was attended by 113 people; 61 of whom were members of the public (the others were scientists, facilitators, AMS Working Group members, observers etc). The launch comprised a mix of theatrical presentations by actors of various scenarios related to the Drugsfutures issues, and round table discussions in which the members of the public could discuss the issues among themselves and with the wide range of scientists and other technical experts in attendance. The launch is described and analysed in detail in section 4 of this report.
- **The Brainbox.** This was a two-part event with the same small group of public participants who discussed all five of the themes covered in the regional workshops, and the process included provision of information, presentations by scientists and other experts, discussions among the participants in small groups and then group presentations, and electronic voting on some specific questions. Participants were paid a fee of £250. There were two stages to the Brainbox, both held in Birmingham (at Birmingham City Football ground):

- A first session held over the weekend (Friday and Saturday) of 2 - 3 February 2007 and lasting 1.5 days, attended by 25 people. Participants were introduced to the main issues and provided the organisers with an opportunity to gauge initial attitudes, hopes and concerns. This session also helped to inform the detailed planning of the regional workshops that followed.
- A second session held over the weekend (Friday and Saturday) of 30 - 31 March 2007 and lasting 2 days, This provided a longer opportunity for the participants to discuss all the five themes in depth, and to receive a range of presentations from various scientists and other experts to inform their discussions. This event was attended by 23 of the original 25 participants.
- **Outreach events.** The outreach events took two forms, with a total of 146 participants:
 - A series of 16 small groups organised the day before the regional workshops (see below) to work with specific groups. These groups included parents of children with ADHD, students, teachers, ex-drug users, older people, young people, people with mental health problems.

15 events were held in the five locations of the workshops (plus an additional single group event in London on 19 March with a group of 8 drug users and ex-users): there were two to three small group meetings in each of the five locations. These events were publicised in collaboration with local voluntary and community organisations with good local networks, in order to reach these people who are often excluded from general public engagement processes. These events were attended by 119 participants.

- Three outreach events organised by the BA, one at the Dana Centre in London with the Newham African-Caribbean Carers Forum, and two in Norwich with the St Edmunds society for homeless people and a community group. These events were attended by 27 participants, many of whom would also be considered 'hard to reach' through generic public engagement processes.

| Date and location | Theme | Number of participants | Nature of group |
|-----------------------------|-------------------------|------------------------|---|
| London 13 February 2007 | Drugs and Mental Health | 14 participants | Newham African-Caribbean Carers Forum |
| Norwich 21 February 2007 | Drugs and the Law | 7 participants | St Edmunds Society (services for homeless young men) |
| Norwich 22 February 2007 | Drugs and Society | 6 participants | Meeting held at the Norman Centre; group had been part of the BA's Community X-change project in 2006 |

- **Five regional workshops.** These were carefully structured deliberative events lasting a full day (the events were held on Saturdays). Participants were given a range of specially prepared information to consider, and had time to discuss the issues amongst themselves and come to a view on the various questions posed to each group. There were also opportunities within each workshop for electronic voting by participants, in the morning and afternoon sessions - to test views before and after group discussions to see if views had changed.

A total of 180 public participants attended the regional workshops; an average of 35 participants at each regional workshop. 121 were specially recruited to get a good demographic mix, plus 59 participants from the outreach groups who wanted to stay involved. Each regional workshop participant was paid a fee of £50 at the end of the day. These workshops were also attended by at least one member of the AMS Working Group, either as observers or as contributing experts (or in some cases, both).

Each workshop considered a different theme, and each was attended by a range of scientists and other experts. In summary, the workshops were:

| Date and location | Theme | Number of participants at regional workshop | Experts |
|---|---------------------------|--|--|
| Liverpool 17 February 2007 plus 3 outreach events: 2 with parents groups (17) and 1 ex-drug user group (9) | Drugs and the Law | 38 participants (26 recruited; 12 from outreach) | Professor Jonathan Wolff, University College London; Niamh Eastwood, Release; DI William Stupples, Matrix Unit (Drugs), Merseyside Policy. |
| Exeter 24 February 2007 plus 3 outreach events: 1 student group (6), 1 teacher group (7) and 1 drugs user / ex-user group (10) | Drugs and Society | 33 participants (22 recruited; 11 from outreach) | Professor Les Iverson FRS, University of Oxford; Dr Matthew Hickman, University of Bristol; Tim Payne, Exeter College. |
| Glasgow 3 March 2007 plus 3 outreach groups: 2 groups for parents of children with ADHD (9) and 1 student group (6) | Drugs for a Smarter Brain | 28 participants (19 recruited; 9 from outreach) | Dr Danielle Turner, University of Cambridge; Dr Anders Sandberg, University of Oxford; Dr Brian Canavan, University of Glasgow. |
| Belfast 10 March 2007 plus 3 outreach groups: 2 groups of young people (13) and 1 student group (7) | Drugs and Young People | 41 participants (30 recruited; 11 from outreach) | Dr Patrick McCrystal, Queens University Belfast; Sheila McEntee, SE Belfast NHS Trust. |
| Merthyr Tydfil 24 March 2007 plus 3 outreach groups: 1 mental health service user group (10), 1 mental health carer group (9) and 1 older people group (8) | Drugs and Mental Health | 40 participants (24 recruited; 16 from outreach) | Professor Jacqueline Barnes, Birkbeck, University of London; Sharon Davies, Hafal; Christine Bounds, Gurnos House. |

- The **online consultation**. There were two elements to the online consultation:
 - A **blog** to allow less formal input to the process. The administrator of the blog started 19 discussion strands, which were viewed 1,641 times. The maximum number of extra comments drawn in was eight per strand. The blog was closed in February 2007 (to reduce the risk of it distracting people from completing the online consultation). Any people still seeking the blog after it closed were directed to the main online consultation and website.
 - A **formal online consultation**, which ran from 31 January 2007 to 2 April 2007. The online consultation was structured under the five themes of the regional workshops. Briefing notes were available for downloading (as pdfs). On the website, each theme was introduced with the same scenarios as were used in the workshops, and then 4 - 6 questions were asked for each theme. Participants could type in their answers (up to 200 words per answer). 314 people registered on the website and 125 people actually participated (which is 40% of those registering). These 125 participants provided a total of 1,659 responses.

There was some debate about how best to integrate the views and issues from the on-line consultation with the findings from the other public engagement processes. Initially, the on-line consultation was reported entirely separately, and this report is presented as an appendix to the OPM final report. This report contains a detailed analysis of the comments from the on-line consultation, under the five themes, and clusters of comments to show where there were commonalities of views. The full comments were also published on the website (without attribution).

The results were found to be very comparable to the results from the other public engagement processes, and so were fully integrated into the main OPM final report, showing where there were any differences in conclusions from the on-line and other processes.

There has been no detailed separate evaluation of the on-line consultation, but there is data on the process which allows some analysis to be undertaken:

- Recruitment to the on-line consultation was through direct email invitations to 162 contacts including key organisations dealing with drugs, addiction and mental health, plus email invitations to 809 contacts in the Public Service Exchange database that includes people in various public sector bodies including central and local government, the NHS and higher education. The website and online consultation were also publicised in the blog, at the launch and at the workshops, as well as through various online discussion lists and email networks. Letters were also sent out to members of the public in Exeter and Belfast in the week before the workshops in those cities, inviting them to participate in the on-line consultation as well.
- 137 people listed their organisations when registering on the website, of which 45 actually participated; these data suggest that more than one third of those responding online (36%) were professional stakeholders rather than general public (45 out of a total of 125 participants).
- There are statistics available on the people who registered and then participated in the on-line consultation in terms of age, ethnicity and disability. The findings are as shown in the table below (see next page):

An analysis of these figures shows the following:

- The biggest single age group registering is the 25 - 39 year olds (115 registered; 37% of the total who registered); but these are also the age group that has the lowest 'conversion' rate (registration to participation): only 30% of those aged 25 - 39 who registered actually participated in the consultation. This is a much higher level of drop-out than in other age groups.

It is not possible to say why this level of drop-out occurred, but it may be that these people used the website to get information about the project, but did not have the interest (or time) to complete the questions in the consultation.

- The overall participation to registration rate was 40%, which seems quite high. However, this 40% is based on 125 people completing the consultation. A separate analysis of the numbers of answers to each question shows that the maximum number of responses to any single question was 100, which is a participation to registration rate of about 32%.

There is no data specifically on why the registration to participation rate was at this level. However, feedback from the interviews with public participants in the workshops and the Brainbox suggests that some of those interviewed went to the website after attending the workshop to get access to more information (rather than complete the consultation exercise). In this case, these people registered simply in order to get information about the project rather than to participate in the online consultation.

If this was the case more generally, it suggests that the role of the website in providing basic information on the Drugsutures project (and the issues it addressed) was as important as its role in providing another consultation mechanism.

- The number of responses declined quite significantly as the questions continued: Question 1 had 100 responses; Question 25 had 48 responses (Q24 had only 40 responses, which was the lowest for any question).

Looking overall, it is possible to see a gradual loss of interest as the questions progressed: the first section had an average of 95.5 responses; section 2 had an average of 77.4 responses; section 3 had an average of 61.2 responses; section 4 had an average of 55.8 responses; and section 5 had an average of 48.8 responses.

This is a clear downward trend as people go through answering the questions. The result is that the number of people answering the final question is far less than those answering the first, and it may be useful to reflect these differences in numbers of answers in the overall analysis. It may also have lessons for designing future exercises of this sort.

| | Registered | Participated | % of those registered who participated |
|------------------------------|-------------------|-------------------|--|
| Age | | | |
| 16 - 24 | 11% (36) | 13% (16) | 44% |
| 25 - 39 | 37% (115) | 28% (35) | 30% |
| 40 - 54 | 24% (75) | 30% (37) | 49% |
| 55 - 65 | 15% (46) | 18% (23) | 50% |
| over 65 | 2% (7) | 3 % (4) | 57% |
| not specified | 11% (35) | 8% (10) | 29% |
| Ethnicity | | | |
| Asian or Asian British | 2% (6) | 2% (2) | 33% |
| Black or Black British | 1% (3) | 2% (2) | 67% |
| Mixed | 1% (3) | 0 | 0 |
| White British | 68% (215) | 70% (87) | 40% |
| White other | 14% (45) | 15% (19) | 42% |
| other | 1% (4) | 2% (3) | 75% |
| not specified | 12% (38) | 2% (2) | 5% |
| Registered disability | | | |
| Yes | 5% (15) | 7% (9) | 60% |
| No | 86% (270) | 88% (110) | 41% |
| not specified | 9% (29) | 5% (6) | 21% |
| Overall totals | 100% (314) | 100% (125) | 40% |

Overall, the numbers of people participating in the on-line consultation were perhaps disappointing in terms of reaching a mass of the general public: 125 took part, giving a maximum 100 responses to any single question. The view of the delivery team was that this is due, to some extent, to the difficulties of getting media coverage and thus directing the general public to the website (see below). In addition, the blog attracted very little traffic, and was closed down early.

However, having a strand of e-consultation was a specific condition of the brief, and this element did provide several specific benefits to the process overall:

- The website and on-line consultation process provided one of the few elements of completely **open access** to Drugsfutures. This is important in any public engagement process, in terms of accountability, as it allows those who are not specifically recruited to add their views and ensures that anyone who wishes to take part is not excluded.
- It provided opportunities for interested organisations (**stakeholders**) to participate and give their views. Although stakeholders were not the target audience of the Drugsfutures project, and key stakeholders were consulted separately by the AMS Working Group, those responding to the e-consultation may not have been included in a targeted national stakeholder exercise (e.g. local organisations working with drug users responded online).
- It provided a useful **triangulation** to test the results of the deliberative public engagement processes. The results were presented separately in the appendix to the OPM report, but the main conclusions were integrated as they almost entirely matched those from other elements of the public engagement programme (where these findings differed from those from other parts of the process that was clearly identified).
- It provided another activity which **raised the profile** of the Drugsfutures project; the publicity undertaken to drive traffic to the website, as well as the website itself, had a presence in another medium which allowed people to find out about the project (and the issues it was addressing) even if they did not fully participate.
- It provided a useful additional **point of contact** through which those who had been involved in the workshops or Brainbox could access further information on the project and the issues.

It was not possible in this case to undertake a detailed evaluation of the e-consultation. However, it would be useful for future evaluations of public engagement to consider the role of e-consultation, particularly in relation to:

- the specific benefits of e-communications, such as providing an open access point for the project, for generating publicity and 'presence' for the initiative (providing an information point), and for providing a continuing point of contact for those who have been involved elsewhere in the process (e.g. attending workshops), both about the project and the issues being addressed;
- lessons from practice to identify the most effective ways of delivering e-engagement in future (e.g. ensuring that as many answers are received to the last question as to the first);
- lessons from practice that could inform the setting of appropriate and realistic objectives for e-engagement processes in future, so that expectations about what can be achieved can be appropriate and realistic.
- **Media.** The role of the media work within the Drugsfutures project was to generate publicity for the project and encourage people to go to the website and participate in the on-line consultation. The OPM final report summarised all the media coverage achieved, which provides a useful basis for assessing the effectiveness and value of this strand of work:
 - The overall media coverage was good, with coverage of the project on BBC Radio 4's Today programme (twice) and BBC2 TV, both of which used footage / recordings of participants discussing the issues, which provided a much fuller picture of the project than is usually possible in media coverage. The project was also reported in the Financial Times, Daily Mail and Daily Telegraph.

- There was also very good coverage in local media, with coverage on local radio and TV of the local workshops (with interviews with the AMS, scientists and public participants), and articles in local papers.
- The coverage in local and regional media delivered the desired messages from the project, and mentioned the website in every instance.
- The main national coverage appeared after the public engagement processes had finished (one of the Today items, and all the national newspaper coverage, and international coverage), with the focus on the results of the process rather than the process itself. Generally, the national media were slow to pick up on the story and only did so after the BBC had trailed details of the story they were covering. There was further national media coverage following the publication of the AMS final report in May 2008, including coverage of the public engagement processes.

In reviewing the media coverage, and the feedback from the delivery team on the effectiveness and value of the media work, the following points emerge:

- In spite of significant efforts, the national media were found not to be interested in public engagement processes per se. They were interested in the content, and the results of the processes. It also proved extremely difficult to get any mention of the website address in national media coverage. The aim of using the national media to raise the profile of the project and encourage people to go to the website was therefore unattainable.
- Local and regional media, both print and broadcast, were interested in the actual local events, and were interested in having local spokespeople, experts as well as public participants, giving interviews. They were also willing to give out the website address and direct people to that so they could participate in the consultation.

Overall, the media strand of the project worked well to generate publicity for the project, but there are some clear lessons for future engagement work, including:

- The national media tended to be interested in results, so it may be useful to use any preliminary results that are available to interest the national media as the process continues.
- The BBC seems to be key: if the BBC covers a story, others follow.
- Local and regional media are likely to be interested in events on their patch, and to be willing both to give coverage of the issues, the event and any ways that local people can get involved.
- Almost every national public engagement process looks for wide media coverage but there are as many dangers as benefits to links with the media. The national media tend to be interested in conflict, and some engagement processes have considered generating media coverage that plays up the conflicts and difficulties of the issues. While this may potentially generate media coverage, such coverage can dramatically affect the nature and mood of the public engagement process (including reducing trust in the process and those running it). This was not an issue in this case, but these dangers may be worth bearing in mind in future engagement exercises
- **Reports and reporting.** The process generated an enormous amount of data, which was captured in various ways (see separate sections for details on recording in the outreach and regional workshops and the Brainbox). There were three main outputs from the process in terms of reporting - interim reports, the overall OPM final report and a film. These are all covered in more detail below.
- **Interim reports.** The AMS project manager and OPM reported regularly to the AMS Working Group on the progress of the engagement process, during the planning and delivery phases. In this way, the Group members were kept fully informed throughout the process, and were able to contribute ideas and questions as the design and delivery progressed.

- **The overall OPM final report.** OPM produced a final report that summarised the purpose of the exercise, the methodology used and the main findings; the report included a four page summary on the main issues. There are separate annexes on the on-line consultation, so the results from that can be seen separately.

The final OPM report is structured around the main five themes, plus sections on cross-cutting themes, and comments on the hopes, concerns and priorities of the participants for the future. It provides essentially a qualitative analysis of the findings, illustrated with quotes (anonymous but identifying the location e.g. Liverpool), as well as extracts from a diary from one participant, which work together very well. The results of the polling from the workshops and Brainbox are presented separately in full in the annexes.

The report is very long (135 pages, plus 250 pages in the annexes), but is very well-structured and well-written, which allows readers to find their way around the complex issues and findings and pick out key messages relatively easily.

- **A film.** OPM commissioned an independent film-maker to record the launch and the two Brainbox events. The film-maker used an ethnographic approach to record the 'culture' of the events, which can be very difficult to portray in written reports. The film used a mix of distance shots of the process, and interviews with participants, scientists and others to provide individual feedback.

There is value in filming engagement processes both to the process itself, and to supporting learning by others. For example, a film can show how events worked to those within the organisations involved who may not have attended every event. In addition, in this case, an early version of the film was shown at the second Brainbox event, and worked well to connect that event to the launch, the project overall, and the previous Brainbox event. In addition, footage from the final version of the film (including interviews with participants) was used by BBC radio and TV (BBC2 and Channel 4), to illustrate coverage of the launch of the AMS final report in May 2008.

- **The AMS Working Group.** The relationship with the AMS Working Group was core to the design and planning of the engagement. The Working Group had already been established and started operations when the first planning of the public engagement strand was being developed. They were therefore able to take ownership of the process, and contribute fully to the framing of the public engagement overall, as well as to the specific issues and questions that were tackled.

The Working Group was made up of eminent scientists and academics, as follows (those marked * attended public engagement events):

*Professor Sir Gabriel Horn FRS (Chair)

Chair, Cambridge University Government Policy Programme, University of Cambridge
(attended the launch event)

*Professor Jacqueline Barnes

Professor of Psychology, Institute for the Study of Children, Department of Psychology,
Birkbeck, University of London
(attended the launch and Merthyr Tydfil workshop)

*Professor Roger Brownsword

Professor of Law, King's College London
(attended Liverpool workshop and Brainbox 2)

Professor J.F. William Deakin FMedSci

Professor of Psychiatry, Neuroscience and Psychiatry Unit, University of Manchester

Professor Ian Gilmore

Consultant Physician & Gastroenterologist, Royal Liverpool University
Hospital, and Honorary Professor of Medicine Liverpool University

*Dr Matthew Hickman

Senior Lecturer in Public Health, Department of Social Medicine, University of Bristol
(attended the Exeter workshop)

*Professor Leslie Iversen FRS

Visiting Professor, Department of Pharmacology, University of Oxford Attended (attended Dana Centre launch and Exeter workshop)

*Professor Trevor Robbins FRS FMedSci

Professor of Cognitive Neuroscience, University of Cambridge
(attended Dana Centre launch)

Professor Eric Taylor FMedSci

Head, Department of Child & Adolescent Psychiatry, King's College London

*Professor Jonathan Wolff

Department of Philosophy, University College London
(attended Liverpool workshop)

The Working Group had little previous experience of public engagement. However, they became increasingly knowledgeable, interested and supportive of the approach as the project developed. They were able to give guidance to the project manager and delivery organisations on the questions to be asked of the public, which helped ensure that the findings from the public engagement were fully integrated into the Working Group's wider work. The regular reports from the AMS project manager and OPM helped ensure the Working Group members were aware of the emerging findings from the public engagement process throughout.

The Working Group agreed early on to consider the findings from the public engagement activities in developing their recommendations, and this was made clear to the public participants in the process. The full report from DrugsFutures was made available to all Working Group members. The evidence of their consideration of the findings can be seen in their final report, which specifically cites the findings from the public engagement (using boxes to summarise key points and identify their source), and thus shows how this work was integrated into their wider considerations.

- **A Cross-Government Advisory Group.** A dedicated cross-Government advisory group was convened for this study, including representatives from the Home Office and the Department of Health, Department of Innovation, Universities and Skills, the Department of Children, Schools and Families, and the Department for Local Government and Communities. The remit of the Advisory Group was to follow the progress of the project; advise on strategic direction; ensure relevance to Government as a whole; and contribute to the presentation and communication of the project outputs. Written and oral interim reports were given to the Advisory Group, by the AMS Project Manager, throughout the planning, delivery and reporting of the public engagement process. Updating them throughout the process ensured that Group members were familiar with the programme design and methodology when presented with the final findings.

4 The public launch

4.1 The purpose of the launch

The launch event was designed to provide a formal 'beginning' to the Drugsfutures project, to gain publicity, and to introduce the concept of public engagement to a variety of audiences. It was also designed to start the discussions on the main issues of the Drugsfutures project, using innovative techniques and working with audiences that were not necessarily being involved in the remainder of the project activities.

4.2 The nature of the activities

- **Overall scale.** The launch was attended by 113 people: 61 public participants and the remainder being experts, scientists, facilitators, AMS Working Group members and organisers.
- **Location and timing.** The launch was held at the Dana Centre, a science café which is part of the Science Museum in London. The event took place in all parts of the Centre: the café, the studio and the study area. The event ran from 6.30pm to 9.30pm.
- **Recruitment.** There were four groups of participants:
 - 33 members of the public from a range of backgrounds, recruited on the street by a professional recruitment agency. There was a focus in this recruitment in encouraging a diverse group of people to attend (rather than aiming for demographic representation), with a particular focus on people who were unlikely to normally visit the Science Museum regularly or follow science-related issues in the media.
 - Invitations were sent to local groups and other institutions that were felt to have a particular interest in one or more of the Drugsfutures issues, including members of the Meeting of Minds panel (a European Citizens' deliberative process on brain science involving 14 members of the public from nine European countries), people from local groups (e.g. a campaign and support groups for people with ADHD), and young people who took part in the *Drugs Futures 2025?* project.
 - The Dana Centre undertook its usual publicity, and attracted its usual audience of the general public who booked through the Centre's own systems.
 - Various professionals including members of the AMS Working Group, the Drugsfutures delivery consortium including the evaluator, scientists, media and other stakeholders.
- **Process.** The launch was chaired by Dr Geoff Watts (well known science broadcaster), and hosted by Sir Gabriel Horn (chair of the AMS Working Group). The event had a very informal and relaxed atmosphere, food and drink were available, and there was lots of movement between activities. The process was as follows:
 - Introduction by Dr Geoff Watts
 - Sir Gabriel Horn explained the purpose of the event, and how it was the beginning of a wider programme of public engagement that the AMS was undertaking in order to get to know the views of the public and their priorities, before coming to their own decisions. Mention was also made of the website and the plans for public workshops. It was stressed that the AMS Working Group was attending this event, to listen to the views of the people there, as well as senior representatives of the Department of Health, Home Office and the Office of Science and Innovation.
 - Clifford Oliver, Arc Theatre's Creative Director and Lead Facilitator, introduced the performance element of the evening, provided by the Arc Theatre company

- Short performance in the café to the whole audience, during which a small group of actors performed a 10 minute play which raised some key issues around drugs and brain science through exploring four young people's views and experiences of drugs.
- Clifford Oliver introduced the rest of the evening programme, explaining how the various activities would run. People chose the sessions they wanted to do and were given booking slips which made clear which activities they were supposed to be doing at different points.
- 4 sessions, of 20 minutes each (with 5 minutes for change overs between rooms); each session consisted of three activities in parallel:
 - Small groups working with the actors on four of the Drugsfutures themes, during which the actors (still in character) discussed with group members possible next steps in the play, which involved the group members role playing different points of view;
 - Conventional discussions around tables in another room on the key themes of Drugs and Society, Drugs and the Law, Drugs and Young People, and Drugs and Mental Health. Each table had a facilitator and someone taking notes of the key points raised in the discussions (these table talks involved the general public and experts all talking together);
 - 'Drop-in sessions' which were more informal group discussions running on the topic of Drugs for a Smarter Brain for about 45 minutes and including expert input.

After each 20 minute session, people moved from, for example, taking part in a group working with some of the actors to a table talk.

- Final performance to the whole audience back together again, with the actors (having listened to the feedback from the groups) finishing the play showing the consequences of different decisions.
- Final points raised in plenary, completion of evaluation forms, thanks to everyone for attending, and a polling session using electronic keypads to record views on:
 - which did they think was the most effective way of preventing young people from using drugs: education and information, stricter drug laws, family support services
 - which areas of drug research did they think were most important: drugs for mental health problems, drugs to help prevent addiction, drugs that improve the performance of the 'healthy' brain
 - which did they consider most harmful: alcohol, cannabis, ecstasy, heroin
 - if we developed a drug in the future that made you smarter, would you take it: yes or no.
- **Reporting.** The comments at the table talks were recorded by note takers, and are reported in a separate section in the final OPM report - reported separately because it was felt that the discussions were brief and issues could only be addressed in a fairly cursory fashion.

4.3 The effectiveness and value of the exercise

The assessment that follows is based on observation of the launch including informal interviews with participants, and analysis of questionnaires that were circulated to all participants (57 questionnaires were returned, from what was calculated to be 61 public participants). A full analysis of the findings from the questionnaires is given in Annex 1, and a summary is given below.

The questionnaire analysis shows very positive feedback from participants, who clearly enjoyed and valued the experience. Overall:

- 77% of questionnaire respondents were satisfied that the event had been good (49%) or excellent (28%). No-one thought the event was 'very poor', and only one thought it was 'poor'.

- There was very strong overall support for the importance of involving the public in these issues: all those who answered this question thought it was important (86% of total questionnaire respondents); 70% thought it was very important and 16% thought it fairly important - no-one thought it not very or not at all important.

From observation, the positive finding above reflects the enthusiasm and energy that participants invested in the discussions. There was a high quality of discussion, questioning and engagement with the issues among all the participants.

The participants rated the event on their questionnaires as follows:

| | Very poor | Poor | Average | Good | Excellent |
|-----------------------------|------------------|-------------|----------------|-------------|------------------|
| Informative | 2 (4%) | 3 (5%) | 9 (16%) | 26 (46%) | 10 (18%) |
| Enjoyable | 0 | 0 | 7 (12%) | 22 (39%) | 21 (37%) |
| Stimulating | 0 | 0 | 5 (9%) | 23 (40%) | 22 (39%) |
| Participative | 0 | 0 | 3 (5%) | 24 (42%) | 23 (40%) |
| Overall satisfaction | 0 | 1 (2%) | 5 (9%) | 28 (49%) | 16 (28%) |

This is very positive feedback, with a high proportion of respondents saying that the event was excellent in terms of being participative, stimulating and enjoyable.

There was a very good mix of participants in terms of age, including 10 in the 18 - 25 age group which is often a difficult sector of society to engage in these discussions, so it was a real achievement to bring this group into the process. There was also a good mix in terms of ethnic background with 12 participants who categorised themselves as Black or Black British, and 6 Asian or Asian British. Two respondents said that they were registered disabled. There was also a reasonable gender balance: 29 male and 24 female.

Overall, therefore, the information from the questionnaires shows that the audience did include a good mix, with roughly equal numbers of men and women although possibly a higher than average proportion of younger people and people from black and ethnic minorities. This was understood to be the Dana Centre's usual demographic: youngish, cosmopolitan and well-educated. Together with those who had been recruited and invited through interest groups, there was overall a good diverse group.

There was also an interesting mix between those who had work experience of engaging the public in discussing science issues (10 had done so a lot or to some extent) and those that had less or no experience (32 had not much or no experience at all).

The mix of the audience was one of the aspects that participants clearly particularly enjoyed. In answer to an open question about what they enjoyed most, the largest single group (18 people) said it was the chance to meet with, share ideas and points of view with, a diverse group of people. For example:

"The vast range of people. Informative yet not too formal. It was a very social way to bring views together in an informal manner" (hairdresser, age 46 - 60)

"The diverse group of people here" (college lecturer, age 60+)

"Meeting new people and hearing different opinions" (interpreter, age 36 - 45)

"The variety of opinions and room for discussion on various issues / challenging topics. Fully engaging, extremely thought-provoking and a necessary aspect of research (public opinion)" (student, age 18 - 25)

"Good mix of public" (clinical psychologist, age 26 - 35)

"Discussion with such a range of people" (marketing, age 26 - 35)

"Interesting hearing other points of view" (secretary, age 18 - 25)

"Hearing other points of view and being challenged. Thank you" (age 18 - 25)

"Hearing opinions of others" (teacher, age 26 - 35)

"Talking to other participants" (unemployed, age 46 - 60)

"Hearing people's views on drugs. I also enjoyed the play (spot on)! I enjoyed everything thanks. A good night" (age 26 - 35)

"I like the mix of people; a sense of industry pervaded and encouraged participation" (local government, age 46- 60)

"Topics and the way event and contents organised. Good debate and shared views. Very well organised" (teacher, age 60+)

"To meet real people who are talking about tomorrow's problems and doing something about it now" (age 46 - 60)

The second most popular aspect of the evening was the facilitated group discussions / group talks and the drop-in session: 8 people identified this as the element they most liked. For example:

"A good discussion on use of drugs and the advantages and disadvantages" (banker, age 60)

"Well-facilitated drop-in session. Drugs for a smarter brain" (teacher, age 36 - 45)

"Discussions were enjoyable" (researcher, age 26 - 35)

"Lively discussion / passionate views" (part-time student, age 18 - 25)

"The opportunity to engage with others at table discussions" (Prof. of education, age 60+)

"Group talks" Corporate finance, (age 26 - 35)

"Lively discussion / passionate views" (part-time student, age 18 - 25)

7 respondents mentioned that they particularly liked the actors and role play aspects. For example:

"The acting and the conversation sessions at the café" (student, age 18 - 25)

"The discussions and the play very informative. Excellent work, very good. You have opened my mind on issues I didn't know. Thank you" (sales assistant, age 26 - 35)

"The actors. Overall I thought the evening was very enjoyable" (credit controller, age 46 - 60)

Some (4) respondents mentioned that they liked that the event was very well-organised. For example:

"Topics and the way event and contents organised. Good debate and shared views. Very well organised" (teacher, age 60+)

"Well organised" (IT support, 46 - 60)

"Organisation. Meeting other people" (fitness instructor / personal trainer, age 26 - 35)

2 respondents mentioned they liked the learning and information aspects: for example, one said "Knew more about law on drugs" (retired accountant, age 60+). However, this was not necessarily the most successful element of the event, as only 10 (18%) said the evening was 'excellent' in terms of being 'informative'. Another rated it 'very poor' in terms of being 'informative', but went on to say that "it was not intended to be", so this was not intended to be a criticism of the event.

4.4 What worked best

The elements of the launch that worked best, according to feedback from participants, observation and informal interviews with participants were:

- **Opportunity for participants, experts and the AMS Working Group to meet different people, hear their opinions and share their own views.** This was by far the aspect of the evening that participants enjoyed most - with 18 mentioning these types of benefits in an open question. The event provided lots of opportunities for participants to talk together very informally with actors, in slightly more formal circumstances in the table talks, and with specific experts in the drop-in sessions.

This was not, however, the aspect of the evening that most people came for. In answer to a question about why they chose to attend the event, 45 respondents said it was the topic. It is a sign of the success of the design and delivery of the event that the process of discussion and learning from each other was valued so highly.

- **Good mix of participants.** The event was attended by a diverse set of public participants, but also a wide range of experts, scientists, the AMS Working Group members and others, all of whom became very engaged in the discussions.

The mix of participants was clearly the result of very careful planning which successfully used publicity mechanisms (e.g. websites, email lists etc), targeted recruitment, and invitations through interest groups to bring together people who would not normally meet from a range of age groups, interests and backgrounds. The inclusion in the meeting of a good number of younger people, and people from black and minority ethnic communities, was a particular success as these groups are often among the most 'difficult to reach' through conventional public engagement exercises.

This diversity was valued by participants themselves and illustrates the value that the public put on talking to those they do not normally come into contact with. This is part of the learning experience of taking part in these sorts of engagement events, as people learn from each other as much as the experts, although the public also clearly valued the input of experts as well.

- **Open access.** Many public engagement exercises are very carefully managed in terms of who attends, with the result that the process can feel rigid and closed. By having an open access event, all the mechanisms of the remainder of the project were described openly, and everyone could get more involved (e.g. through the website) if they wanted to know more or give their views in more detail. This approach introduces an element of randomness to what can otherwise seem to be very controlled, and thus exclusive, engagement processes. It also reached people who may not have got involved in the debates in any other way (as mentioned above).
- **Innovation in types and mix of engagement methods.** This event brought together some very different methods of engaging the public: performance, that seems to have created an informal and creative atmosphere that enabled participants to draw much more on personal experience than can often be the case in these sorts of events; more formal talks around tables that allowed for the more considered exchange of views; and drop-in sessions that broke up what could otherwise have seemed quite a rigid programme. This mix of different methods gave everyone a chance to express their views in their own different ways, and by mixing up the methods through the evening, the energy did not flag and people remained enthusiastic until the end.

For the AMS Working Group members who attended, the performance aspects were a particularly valuable element to the process. Comments included:

"I was impressed by the acting, the role-play, at the Dana launch. I thought it gave a very good representation of the reality. Very professionally done" (AMS Working Group member).

"There was an interesting drama, a role play that was very well done, a drama about a distressed young woman who is prescribed a pill to help her – it all focused on the treatment. There was a strong emotional response from the public – 'pills are not the answer'" (AMS Working Group member).

- **Informal and sociable event that allowed everyone to talk freely.** From observation, and comments from several participants in informal interviews, the informal atmosphere created a real buzz of interest, energy and enthusiasm in the room.

This informal atmosphere did not undermine the importance or complexity of the issues being discussed, or the quality of discussion. Indeed, it may have helped all participants to find different ways of talking about these issues together. From observation, the informal atmosphere gave the members of the public permission to talk about their own personal experiences and opinions freely, and also gave the experts / scientists permission to talk about their professional knowledge in a more informal way than they would normally do, enabling a different sort of discussion between experts as well as between experts and the public.

4.5 What worked least well

Participants were also asked on questionnaires (completed at the end of the event) what they felt were the **worst or least successful** elements of the event. There were far fewer comments overall here, which shows a high level of satisfaction. The two issues that were mentioned most were not enough time, and some lack of clarity over the process:

- **Not enough time.** The comments here were in two main categories: some felt there was simply not enough time overall; and some felt the balance of time given to the performance and the discussions at the tables was not right, with too much time spent on performance and not enough at tables. For example:

"Round table just getting going and it finished ... too short." (teacher, age 36 - 45)

"The performance - it served a purpose and the acting was good but more time could have been spent discussing topics" (marketing, age 26 - 35)

"Time constraints on discussions (admittedly there's no other way)" (part-time student, age 18 - 25)

"Not enough time to explore issues in depth" (unemployed, age 46 - 60)

"Not enough time spent on discussion tables. In sessions A - D I thought we were meant to talk the actors out of the opinions they had; it wasn't until part 2 it was made clear what I should do" (recruitment consultant, 18 - 25)

"The amount of time given to the play was not worth it with respect to the outcome. But I grasp and recognise the role of the play to [get] into debate those less comfortable with more formal table debates. Well-organised - but I'm not sure the acting helped us, while it amused us. It was clear ... [the] script in the 2nd and 3rd sessions was already fairly pre-determined" (Professor of education, age 60+)

"Too short - needs to be longer to be productive" [no details]

"Not enough time" (IT, age 36 - 45)

"D studio discussions were so short" (charity, 26 - 35)

"Couldn't hear all the talks. Would have liked more time" (student, age 18 - 25)

"Insufficient time to discuss complex issues" (clinical psychologist, age 26 - 35)

From observation and informal conversations at the event, there were mixed feelings about the value of the performance aspects generally and it was clear from observation that these sessions were not well-attended in the second half of the evening; some actors did not really have anyone to talk to in their small groups at that stage. One person commented on their questionnaire: "Acting pointless - sorry, well done and all that but it just didn't work for me" (teacher, age 36 - 45). Others liked the performance and saw it (rightly) as role play to explore the issues in a different way.

The balance of opinion was probably evenly weighted between those who liked or did not like the performance aspects, and the benefits of this informal and creative approach have already been identified above. However, there was a clear view from respondents, supported by evidence from observation, that the process overall would have been improved if the balance of timing between the play and the facilitated discussion groups had been shifted slightly, to allow more time for the discussion groups and less to the play and working with the actors.

- **Lack of clarity about process.** A few questionnaire respondents mentioned that they felt lost at points in the process, and this was borne out by observation at the event as people were confused about moving between sessions. Comments included:

"Didn't know what was going on at the beginning. More multi choice at the end" (pharmacist, 26 - 35)

"Not quite knowing what was going to happen" (journalist and pharmacist, age 36 - 45)

This was a complex event, with a lot of different sessions, and a lot of input. Generally people quickly got the hang of the overall structure of the event but some people clearly did find it difficult. It is possible that a little more explanation at the beginning may have helped, but this was not a major problem and it certainly did not cause any major problems for participants.

4.6 Overall conclusions on the launch

Overall, the launch event worked extremely well. It generated a lot of interest, enthusiasm and energy on the night which was maintained throughout the event, to the extent that many people would have liked it to have gone on longer. The event was very well designed and organised, and used a lot of innovative approaches from different cultures of public engagement (science communications and public engagement) that worked well together to create an informal but industrious atmosphere. The mix of people was excellent, diverse and provided opportunities for participants to share opinions with people they would not normally meet, which is something many of them clearly valued highly, as well as being important in terms of an effective public engagement exercise.

All the participants clearly enjoyed the experience and learnt a lot from it. Their feedback was extremely positive overall, and all those who commented in questionnaires on this issue concluded that it was important that the public is involved in these issues: 70% thought it very important.

The only criticisms identified, by participants and from observation, were that more time could have been spent on discussions around tables (compared to the performance aspects), and some wanted more time overall. There was also some confusion among some participants about the overall structure of the event - although this was not a major issue.

Overall, therefore, the launch was very successful in marking the beginning of the public engagement process for everyone involved, and in providing a unique opportunity for this range of people to take part in the process. Although it was not intended to provide significant in depth data, it did provide some useful initial feedback on some priority issues, as well as experimenting with an innovative mix of approaches to public engagement.

5 Outreach workshops

5.1 The purpose of the outreach workshops

The outreach workshops were designed to reach and hear the views of specific sectors of the public with an interest in the issues being addressed by the Drugsutures project but who were likely to be excluded from any general engagement process aiming to reach the 'general public'. This section summarises the process used in the outreach workshops and the feedback, and assesses the value and effectiveness of this part of the process.

5.2 The outreach workshop process

- **Overall scale.** There were 16 outreach events in total, held in February and March 2007; 15 were linked to a regional workshop (being held in the same location and addressing the same issues), plus 1 outreach event in London not linked to a regional workshop. There were also three outreach groups run by the BA.

A total of 146 people attended these outreach workshops; 119 at the main programme outreach workshops, plus 27 at the BA events.

Details are also given in section 3.3 above but, in summary, the outreach workshop locations, topics and scale were as follows:

- Liverpool. Drugs and the Law. 3 outreach events: 2 with parents groups (attended by 17 people) and 1 ex-drug user group (attended by 9 people)
- Exeter. Drugs and Society. 3 outreach events: 1 student group (attended by 6 people), 1 teacher group (attended by 7 people) and 1 drug user / ex-user group (attended by 10 people)
- Glasgow. Drugs for a Smarter Brain. 3 outreach groups: 2 groups for parents of children with ADHD (attended by 9 people), and 1 student group (attended by 6 people)
- Belfast. Drugs and Young People. 3 outreach groups: 2 groups of young people (attended by 13 people), and 1 student group (attended by 7 people)
- Merthyr Tydfil. Drugs and Mental Health. 3 outreach groups: 1 mental health service user group (attended by 10 people), 1 mental health carer group (attended by 9 people), and 1 older people group (attended by 8 people)
- London. This event discussed all three drug types (drugs for mental health, recreational drugs and cognition enhancers) and brought together 8 drug users and ex-users.

The BA events were held in February 2007, and attracted a total of 27 public participants, as follows:

- London. Drugs and Mental Health. 14 participants from the Newham African-Caribbean Carers Forum
- Norwich. Drugs and the Law. 7 participants from the St Edmunds Society (services for homeless young men)
- Norwich. Drugs and Society. 6 participants at the Norman Centre, part of the BA's Community X-change project.

- **Recruitment.** The outreach workshops (in the regions and those run by the BA) were designed to reach specific relevant groups with particular experience and knowledge of the issues, including ex-drug users, parents with children with ADHD, students and teachers, young people, mental health carers, older people, homeless young men and Afro-Caribbean carers.

This outreach ensured that those groups often classified as 'hard to reach', and specifically relevant to the issues of this process, were identified and brought into the process. The participants for these workshops were recruited through local contacts in voluntary and community sector groups and local schools (e.g. parents) in the various locations. Students were recruited face-to-face on campus. No fee was given to participants in the outreach workshops; a small donation was made to the groups and organisations who recruited participants and provided venues and catering.

- **Outreach workshop process.** The outreach workshops ran for a couple of hours. They varied slightly depending on the topic but the main process was as follows:
 - Introduction from the organisers, followed by introductions among participants (pairs introduced each other)
 - Introduction to the focus of the discussion (the topic of the event)
 - Exploration of changing attitudes to the topic including how people think attitudes to drugs will change in future, what they think about motivations, wider implications, rights and regulation, different perspectives etc
 - Wrap-up including review of key points of discussion to check those there agreed with the points being taken forward
 - Evaluation forms, close and thanks.

The final OPM report provides details of the discussion guides from the outreach workshops.

- **Recording and reporting.** At the outreach events, the comments were collected by facilitators on flipcharts and in notes taken at tables.

The findings from the Drugsutures project overall were presented in the OPM final report to the AMS in May 2007, although preliminary results were fed through to the AMS Working Group as the process continued so they were aware of issues coming up even from the early stages. The feedback from the workshops was reported separately from the feedback from the online consultation, so that differences and similarities can be easily seen between the views of these different audiences.

OPM wrote to all participants immediately after the public engagement activities were completed, to inform them of the timescales of the remaining stages of the AMS work on this subject and likely publication dates for various reports. OPM also wrote to all participants when the final AMS Working Group report was published in June 2008, providing details of the weblink.

5.3 The effectiveness and value of the outreach workshops

The assessment that follows is based on analysis of the questionnaires from the outreach workshops. Questionnaires were distributed to participants at outreach events but there is not complete data from these events; a full analysis of the data that is available is given in Annex 2. Only 3 of the 5 outreach locations completed evaluation forms; covering 55% of participants at those events.

Questionnaires were distributed to participants at the end of the events and were collected from them before they left. The variation in response rates between the regional workshops and outreach workshops is important: a 92% response rate was achieved at the regional workshops. This variation may be explained by the fact that participants at the regional workshops were not given their fees until they had completed their questionnaires, but there was no such clear incentive for those at outreach workshops to complete and hand back their questionnaires. In the circumstances, however, the level of feedback is enough to enable a robust analysis.

It is also important to note that not all participants are able to easily complete questionnaires, because of disability or literacy problems. It is therefore unlikely that there will ever be a 100% return rate from workshops with public participants.

In addition to questionnaire research and analysis, interviews were carried out with 5 participants in the outreach workshops. Informal interviews with those at the AMS and OPM also covered these workshops.

5.3.1 General feedback

The feedback overall from questionnaire respondents from the outreach workshops on which there is data was very positive:

- 97% agreed that the facilitator explained the **purpose of the discussion** clearly. No-one disagreed.
- 94% said there should be **more events for the public** to discuss these sorts of issues. No-one said there should not be more such events.
- **94% said they enjoyed taking part**; 50% of these strongly agreed. Only 1 person (3%) disagreed.
- **94% said there was enough time** for them to say everything they wanted to; only 1 person (3%) disagreed, and 1 person did not know.
- **88% said they were more likely to get involved** in these sorts of event in future, as a result of being involved in this process; 76% said they were much more likely to get involved in future.
- **100% of respondents said it was important to involve the public** in discussing these sorts of issues; 76% of these agreed strongly.

These are extremely positive results. These were people who are involved in the issues in some way and, as such, are often more cynical about engagement processes than the general public who have no prior experience or knowledge of the particular issues. These views from questionnaires were supported by feedback in interviews.

5.3.2 Impact of participation in outreach workshops on participants' views and understanding

- **91% said attending this event had helped them think more clearly about the issues**; only 1 person (3%) disagreed.
- **67% said they had learnt something** they did not know before; 38% of these agreed strongly they had learnt something and only 3 people (9%) disagreed.
- **38% agreed that they had changed their views** as a result of attending the event (27% disagreed); and 47% disagreed that the event had made no difference to their views (so 47% **felt it had made a difference to their views**); only 6 people (18%) agreed attending had made no difference to their views. 68% agreed that the event had reinforced the views they already had; 9% disagreed.

Again, this high level of positive feedback on the impact of the event on helping them to think more clearly, and learn something new, is surprising given that these are people already involved in the issues, and is a strong indication of the positive value they placed on attending the event.

In terms of changing views, the picture is more complex. It is common in feedback from public engagement processes that participants do not generally say they have 'changed' their views, so 38% is quite a high rate of impact. In addition, 47% said it had made a difference to their views, which is also a high rate of impact. It is worth noting that any single participant may have changed some views, had other views affected, and had yet other views reinforced, so the picture is not simple. The conclusion can be drawn, however, that this feedback clearly shows that the workshop did have a significant impact on participants' views.

This complex picture is reinforced in the interviews with participants in the outreach workshops, who mentioned specific examples of what affected their views (e.g. DNA tests for mental health, and on issues such as differences between 'enhancement' and drugs used on medical grounds, and starting to think about other drugs such as herbal remedies). This suggests that people were genuinely stimulated by the process to think more widely about the issues around drugs and drug use: as one said "it was eye-opening" (participant in Glasgow outreach). Other comments included:

"Just putting things into perspective, especially listening to others' experience, what they had gone through" (participant in Merthyr Tydfil outreach)

"I wasn't expecting to be so affected" (participant in Merthyr Tydfil outreach)

"Discussions helped crystallise my ideas" (participant in Merthyr Tydfil outreach)

"Yes [it made a difference to what I thought] in a positive way, especially if what we discussed will be used" (participant in Merthyr Tydfil outreach)

"People were very affected by the tales." (participant in Merthyr Tydfil outreach)

This positive feedback was reinforced in the interviews, which was also positive about the contribution that people felt they were able to make:

"It was a surprise to me that I expressed my opinions" (participant in Merthyr Tydfil outreach)

"I'm quite proud that I was able to speak in public" (participant in Merthyr Tydfil outreach)

"I went back to my manager and took the pack to discuss. I enjoyed it so much I would like to do it again. I did the presentation on the day which although I was nervous I really enjoyed. I feel quite proud of myself for having done it." (participant in Merthyr Tydfil outreach)

5.3.3 Feedback on the purpose and influence of the outreach workshops

There was remarkably positive feedback from participants in the outreach workshops on the clarity of the information they were given about the process, and the level of influence it would have:

- 70% agreed they were clear about how the results of this process would be collected and used; 26% agreed strongly and only 2 people (6%) disagreed.
- 76% believed that the people who commissioned the event would take notice of the results; 32% agreed strongly and only 1 person (3%) disagreed.

These are really remarkably positive results given the prior knowledge and experience of participants in these events. These figures are a good indication that those running and introducing the process managed to generate a high level of trust from those taking part.

The interviews gathered further data on participants' views on the level of influence they felt they would have. One said "I hope [the AMS will take notice] because many of the presentations seemed very informed. Some people on every table had a personal tale to tell" (participant in Merthyr Tydfil outreach).

Participants were also asked in interview whether they felt public consultation is money well spent. The feedback here was entirely positive, **as long as it does have influence**. Comments included:

"Depends what happens to our opinions. The day was generous for us and it would be wasteful if the thoughts were not implemented." (participant in Merthyr Tydfil outreach)

"Depends on whether it is being listened to. In theory, it is important to have public views" (participant in Glasgow outreach).

5.3.4 What worked best in the outreach workshops

Overall analysis and feedback from questionnaire respondents and interviews suggests that the best aspects of the outreach workshops were as follows:

- **Recruitment and representation.** The use of smaller outreach workshops worked very well in reaching specific relevant sectors of society that were both traditionally 'hard to reach' and with specific knowledge and experience of the issues relevant to brain science, addiction and drugs. The geographical spread of the workshops ensured that voices from across the UK could be included.
- **Hearing others views and experiences.** Questionnaire respondents clearly valued hearing each others' views and experiences. Comments included:
 - "I enjoyed finding out different people's opinions on matters discussed and trying to make decisions as a group on what we thought" (Glasgow outreach questionnaire response)
 - "Interesting topic - enjoyed hearing others' views" (Glasgow outreach questionnaire response)
 - "Listening to others" (Glasgow outreach questionnaire response)
 - "Talking about what I think and listening to other people's thoughts" (Belfast outreach questionnaire response)
 - "Very impressed with discussion and the respect of all members concerned" (Merthyr Tydfil outreach questionnaire response)
- **The opportunity to give own views.** The opportunity to give their own views was linked in some respondents' comments with taking part in a debate that was important for society and that was an opportunity for them to make a contribution. Comments included:
 - "This is a form of communication between government and public and it's important for this to happen often" (Glasgow outreach questionnaire response)
 - "Making a contribution" (Glasgow outreach questionnaire response)
- **Learning.** The learning aspects of taking part were valued partly in relation to gaining new knowledge and information, and also partly in relation to having the opportunity to think about and clarify their own views. Comments included:
 - "Able to think through views" (Glasgow outreach questionnaire response)
 - "Learning and being able to formulate an opinion on the subject" (Glasgow outreach questionnaire response)

"Having a proper think about where the world's heading in relation to drugs and hearing other people's views" (Glasgow outreach questionnaire response)

"Mental health issues. I learned about research that I didn't know about" (Merthyr Tydfil outreach questionnaire response)

5.3.5 What worked least well in the outreach workshops

The only comments from questionnaire respondents from outreach workshops on this question were "nothing".

However, in answer to a question about what would improve events like this (in addition to the 5 who said 'nothing' in answer to this question), 4 said they would have liked more, and a wider range, of people. One person said "A bigger group in order to get more opinions" (Glasgow outreach questionnaire response).

5.4 Overall conclusions on the outreach workshops

Overall, the outreach workshops worked very well in reaching specific relevant sectors of society that were both traditionally 'hard to reach' and had specific knowledge and experience of the issues relevant to brain science, addiction and drugs. The geographical spread of the workshops ensured that voices from across the UK could be included.

There was very positive feedback from interview and questionnaire respondents on the process, especially given that these people were already involved in the issues and, as such, are often more cynical about engagement processes than the general public who have no prior experience or knowledge of the particular issues. Respondents were largely clear about the purpose of the discussion, how the results would be used and felt that their views would be listened to and taken notice of. They enjoyed taking part, were more likely to want to get involved in future as a result of this experience and felt there should be more events for the public to discuss these sorts of issues. All respondents thought it was important to involve the public in discussing these sorts of issues.

Almost all respondents said that taking part in the workshop had helped them think more clearly about the issues, more than two thirds had learned something and nearly half said it had made a difference to their views. Respondents also particularly valued hearing each others' views and experiences, and having the opportunity to give their own views. The only negative comments were that a few respondents said that they would have liked there to have been a bigger group for their discussion, but this was a minor complaint from few respondents.

Overall, the outreach workshops clearly worked very effectively to enable what are often 'hard to reach' sectors of society to take part in discussions on policy issues of direct relevance to their knowledge and experience, learn something new about the issues, talk to others with different experiences and then express their considered views easily and within a process they understood and felt comfortable with. The workshops clearly met their objectives within the DrugsFutures project, as well as providing an experience of significant value to the people taking part.

6 Regional workshops

6.1 The purpose of the regional workshops

The regional workshops were designed to bring together appropriately diverse groups of public participants, together with a range of experts, to each discuss one of the five key topics identified for the Drugsutures project. This section summarises the process used in the regional workshops, and feedback on these workshops, and assesses the value and effectiveness of this part of the process.

6.2 The regional workshop process

- **Overall scale.** There were five regional workshops held in February and March 2007, with an average of 35 participants each.

The workshops attracted a total of 180 participants. 121 (about two-thirds) of these participants were specially recruited (see below), and the remaining 59 (about one third) were people from the outreach workshops who wanted to remain involved.

Some more details are given in section 3.3 above but, in summary, the workshop locations, topics and scale were as follows:

- Liverpool. Drugs and the Law. 38 participants plus 3 experts
 - Exeter. Drugs and Society. 33 participants plus 3 experts
 - Glasgow. Drugs for a Smarter Brain. 28 participants, plus 3 experts
 - Belfast. Drugs and Young People. 41 participants, plus 2 experts
 - Merthyr Tydfil. Drugs and Mental Health. 40 participants, plus 3 experts
- **Recruitment.** The recruitment for the regional workshops was through a professional recruitment agency, according to a detailed specification with quotas for gender, age, social class and ethnicity, as well as a mix of people with some and with no prior interest and knowledge of the subject. This approach was designed to a demographically diverse mix of public participants.

Each regional workshop was also attended by some people who had attended the outreach events and wanted to attend the workshop. This approach to recruitment was designed to ensure both a diverse cross section of the British public, a mix of participants with prior interest and knowledge as well as those with none, and some participants with direct personal experience and knowledge of the issues. Participants in the regional workshops received a fee of £50.

- **Regional workshop process.** The regional workshops ran for a whole day, on a Saturday, from 9.30am arrival (for 9.45am start) to close at 4.30pm. As with the outreach workshops, the workshops varied slightly depending on the topic, but the main elements were:
 - Initially, people were able to sit where they wanted
 - Welcome and introductions by organisers to explain the theme and the agenda (plus housekeeping details)
 - Introduction by AMS representative on the project background and how the outputs from the public engagement process would be used by the AMS
 - Electronic voting to gauge initial views on the subject: warm-up to get people used to the equipment, then approx 6 questions
 - Groups were reorganised to ensure a demographic mix in each small group, so people moved round to form 4 small groups.

- Initial discussions on the issues (30 minutes), in small groups each with facilitator, using background information provided on sheets for each person; to identify a group view of key issues and key questions
- Introduction of scenario and briefing notes by facilitator to enable the groups to relate the general issues to a specific situation (30 minutes), followed by feedback from each group (45 minutes)
- After lunch, there was an information gathering session to answer a set of questions given to each group by facilitator and the groups are asked to answer the questions and present the outputs from their discussions, drawing on what people already know about the subject from external sources, using the information provided, and asking the experts available at each event (30 minutes).
- In the workshops on Drugs for a Smarter Brain and Drugs and Young People, there was a 30-minute session with questions and answers to an expert panel, before groups were asked to come up with their own responses and recommendations. In the Drugs and Mental Health workshop, the experts were asked to introduce themselves and their work to the whole group (about 5 minutes each immediately after lunch), and they were then available to answer questions from any of the groups. In the Drugs for a Smarter Brain workshop, the experts joined the table discussions to provide further information if needed.
- Then, taking each question in turn, the groups then agreed a collective view and identified key questions. A group member took responsibility to record key questions. The facilitator helped each group to prepare a presentation back to the whole group, and decide which group member(s) would present back (60 minutes).
- Presentation by each group back to main group (30 minutes)
- Questions and discussion (30 minutes)
- Electronic voting to gauge views at the end of the session on the subject (same 6 questions); and these results compared with earlier results of electronic voting
- Evaluation forms
- Thanks and close (and fees distributed).

The final OPM report provides details of the agendas, facilitators notes and briefing papers for each of the regional workshops.

- **Materials to aid discussion.** A series of handouts providing statistical information, summaries of research results, and raising key questions and issues was used to support the discussions at the regional workshops.
- **Expert input.** 14 'experts' attended the regional workshops (2 or 3 at each), ranging from academic scientists to people from local agencies working directly with people with drug or health problems. In addition, some of the experts had personal experience of these problems (e.g. ex-drug users and ex-mental health patients). The way the experts made input varied at the different events (and see above): at some, they made short presentations, at some they worked as a panel that answered specific questions from the participants; in all cases they were available to answer questions throughout the event.
- **AMS involvement.** The AMS project officer responsible for the Brain Science Addiction and Drugs project attended 4 of the 5 regional workshops, and was fully involved in planning the events and explaining to participants on the day why the AMS was running these events and how the results would be used within the overall project. In addition, almost all members of the AMS Working Group who would be formally receiving the conclusions of the public deliberations at the end of the engagement process attended at least one regional workshop. This was considered a vital element in the Working Group understanding the engagement approach as well as hearing public views first hand, which can be very valuable in understanding where the subtleties of conflict and consensus may arise in relation to specific issues.

- **Recording and reporting.** The comments from participants at regional workshops were collected by table facilitators on flipcharts, and by participants themselves in some cases where it was feeding into report backs and presentations to the whole group.

The findings from the Drugsutures project overall were presented in the OPM final report to the AMS in May 2007, although preliminary results were fed through to the AMS Working Group as the process continued so they were aware of issues coming up even from the early stages. The feedback from the workshops was reported separately from the feedback from the online consultation, so that differences and similarities can be easily seen between the views of these different audiences.

OPM wrote to all participants immediately after the public engagement activities were completed, to inform them of the timescales of the remaining stages of the AMS work on this subject and likely publication dates for various reports. OPM also wrote to all participants when the final AMS Working Group report was published in June 2008, providing details of the weblink.

6.3 The effectiveness and value of the regional public workshops

The assessment that follows is based on observation of one of the five regional workshops during which it was possible to undertake informal interviews with participants, and analysis of questionnaires that were circulated to all participants at all five regional workshops. It is also based on interviews carried out with ten participants across the five workshops, plus four experts. Interviews with four members of the AMS Working Group also covered these workshops, as did informal interviews with those at the AMS and OPM.

Questionnaires were distributed to all participants at the end of the regional workshops and were collected from them before they left (before payment of fees). A very good response was received (92% questionnaires completed and returned in total); a full analysis is given in Annex 3.

It is important to note that not all participants are able to easily complete questionnaires, because of disability or literacy problems. It is therefore unlikely that there will ever be a 100% return rate from workshops with public participants.

6.3.1 General feedback on regional workshops

The feedback overall from questionnaire respondents from the regional workshops was very positive:

- **98% of questionnaire respondents said it was important to involve the public in discussing these sorts of issues; of these, 84% said it was very important.**
- **97% of respondents said they were satisfied with the structure and organisation of the event; of these, 67% said they were very satisfied; only 2% said they were dissatisfied.**
- **96% said there should be more events for the public to discuss these sorts of issues. No-one said there should not be more such events.**
- **92% said they enjoyed taking part; of these, 53% of these strongly agreed. No-one disagreed.**
- **90% said they were more likely to get involved in these sorts of event in future, as a result of being involved in this process; of these, 67% said they were much more likely to get involved in future.**
- **91% agreed that the event was well-organised and well-structured; only 1% disagreed.**
- **85% agreed there was enough time for them to say everything they wanted to; only 8% disagreed.**

- **83% agreed that they were able to discuss** the issues that concerned them.
- **81% said that the event met their expectations** and delivered what they hoped: of these, 39% said it did so completely; plus 42% said it did so mostly. Only 2% said it did not really do so, and no-one said it did not meet expectations at all.

These are extremely positive results, with over 80% of questionnaire respondents giving very positive feedback on the whole process.

There was a similarly positive response from the interviews with participants at the workshops. All 10 interviewees felt that there was a good mix of people, that everyone had a chance to have their say, that they could raise the issues they wanted, and 9 out of the 10 felt that there was enough time to get through all the main issues. Comments included:

"I just enjoyed the day and discussing things I didn't know anything about before."
(Liverpool interviewee)

"I was listened to every time I spoke" (Liverpool interviewee)

"I went in full throttle and did everything I was asked to do" (Liverpool interviewee).

"They did it really well – especially the way the experts said a bit then we went off to smaller groups. It meant that we weren't shouting over people and everyone could say something. That was a good idea" (Liverpool interviewee).

"Oh definitely everyone was given a chance. Some people obviously wanted to speak more than others, but yes everyone got a chance ... I definitely had my chance to speak" (Glasgow interviewee).

"I was very satisfied, and everyone I spoke to seemed to be too" (Glasgow interviewee).

"There were some people who weren't contributing much, but they were prompted to say something if they wanted to" (Glasgow interviewee).

"Anything we wanted to say, we were able to" (Belfast interviewee).

"I think they [the issues] were all covered well and in depth" (Belfast interviewee).

"I thought it was very good – impressive and interesting – it held my attention throughout" (Belfast interviewee).

"I think it was very well run" (Belfast interviewee).

"Getting into the groups was good as it let everyone talk" (Belfast interviewee).

"At the start I thought it might drag on, but in the end I actually thought we could have had longer" (Belfast interviewee).

"[Everyone could have their say] but obviously some people are more inclined to speak than others" (Exeter interviewee).

The expert speakers and AMS Working Group members interviewed also had positive feedback on the way the workshops were designed and delivered, although there were some specific concerns about the sampling and management of participants. Comments included:

"The workshop was well managed. There was a relaxed atmosphere. It was a good layout of groups of people at individual tables. Worked well" (expert interviewee).

"It was all very well co-ordinated" (expert interviewee).

"The event was well organised. Everything seemed to run very well" (expert interviewee).

"There were enough people numerically but many seemed to be clustering – self-selecting. At one table everyone seemed to know each other and be connected with education in some way" (expert interviewee).

"I think the process was excellent, though there should have been more time for questions" (expert interviewee).

"Design and delivery worked well. There again, quite a lot of planning and effort went into the whole consultation programme. So you can expect things to be well managed and implemented" (AMS Working Group member).

All 10 public participant interviewees said that they were **more likely to get involved** in discussions on science and technology in future. Over half said they would like to get involved in a similar way, in a workshop, although others had other ideas. Comments included:

"I thought the day was really good, so something like that again" (Liverpool interviewee).

"This is probably one of the best ways. With internet and post you could do questionnaires, but maybe you don't get a picture of such real views as people might say what they think you want to hear. Sitting down face to face is much better" (Liverpool interviewee).

"Yes, definitely. I'd love to do it again" (Glasgow interviewee).

"Anything that gets people together, councils or panels of ordinary people are good. They get people talking, and people always have things to say" (Glasgow interviewee).

"Yes, I would get involved again ... I think online surveys would be good. The web is a good, accessible tool. It would be good for getting a bigger feel of what people think. Also people can do it from home rather than having to take the day off work" (Belfast interviewee).

"More likely, yes ... The workshop was good, but perhaps something more ongoing would be good" (Belfast interviewee).

"Yes, I would definitely do it again ... The workshop was a good way of doing it – there was a mix of opinion and it was good to meet different people" (Belfast interviewee).

"It was an all day job and quite long, but yes I suppose I would be ... Ongoing things tend to get a bit bogged down, so ad hoc is better" (Exeter interviewee).

"Yes, more likely ... Workshops like this are good. You need to sit with people, listen to their opinions and discuss it all together" (Exeter interviewee).

6.3.2 Impact of participation in regional workshops on participants' views and understanding

The feedback from participants at regional workshops on the impact of being involved on their own views and understanding was, in summary:

- **90% of questionnaire respondents said they had learnt something** they did not know before; 42% of these agreed strongly they had learnt something and only 5% disagreed.
- **87% said attending this event had helped them think more clearly** about the issues; only 1% disagreed.
- **34% agreed that they had changed their views** as a result of attending the event (18% disagreed, and 38% either did not know or neither agreed nor disagreed). 39% disagreed that the event had made no difference to their views (so **39% felt it had made a difference to their views**); 22% agreed attending had made no difference to their views but 25% either did not know or neither agreed nor disagreed. 65% agreed that the event had reinforced the views they already had; 6% disagreed.

Again, this high level of positive feedback from participants on the impact of the event on helping them to think more clearly, and learn something new, is even higher than in the outreach events, and is a strong indication of the positive value respondents placed on attending the event.

In terms of changing views, as identified above in the analysis of the results from the outreach workshops, the picture is more complex. It is common in feedback from public engagement processes that participants do not generally say they have 'changed' their views, so 34% is quite a high rate of impact. In addition, 39% said it had 'made a difference' to their views, which is also a high rate of impact. These are slightly lower rates of impact than at the outreach workshops. However, it is worth noting that any single participant may have changed some views, had other views affected, and had yet other views reinforced, so the picture is not simple. The conclusion can be drawn, however, that this feedback clearly shows that the workshops did have a significant **impact** on participants' views.

The positive feedback is reinforced in the interviews with participants in the regional workshops:

- All 10 interviewees said they had learned something as a result of taking part
- 6 out of 10 said that being involved had made a difference to their thinking about drugs and brain science.

Comments included:

"It did, definitely [make a difference to what I thought]. I went in, read everything and thought that gene therapy was a great thing. But listening to others made me think about infringements on privacy and other issues like that" (Liverpool interviewee).

"I think it has. Perhaps it's changed my perception of people using drugs. There were one or two people I spoke to who had been addicted – they were very articulate and clever. It was interesting to meet them and to hear their experiences – it changed my views of the stereotype" (Liverpool interviewee).

"I think I look at things from a different perspective now" (Glasgow interviewee).

"Definitely. I'm a lot more open to people's opinions and not just negative about drugs and drug use" (Glasgow interviewee).

"I learnt a lot about drugs awareness, and also about the benefits of certain drugs ... I won't just be taking any kind of drug prescribed to me now!" (Belfast interviewee).

"It opened my eyes to a lot of different things, like what kind of drugs are out there" (Belfast interviewee).

"I thought the whole day was interesting in terms of listening to other people's opinions, especially those with personal experience ... It has made me a bit more sympathetic to people who use drugs. It made me realise that drugs can affect anyone at anytime, not necessarily just the usual stereotypes." (Exeter interviewee).

6 out of 10 participant interviewees also said being involved had made a difference to their thinking on **consulting the public** on these issues. Comments included:

"I think they need to do it [consult the public] more and give people more general information so they can make up their own minds" (Liverpool interviewee).

"Yes. I think they should be more involved in the future" (Glasgow interviewee).

"I think they should be more involved now" (Glasgow interviewee).

"I do believe there should be more consultation with the public on drugs and drugs awareness. We should think more about alternatives to prescription drugs, and other issues" (Belfast interviewee).

"I have always thought they have to do it" (Exeter interviewee).

"Yes, I think it is really important. If they take forward just a couple of big issues from it then that's a good thing" (Exeter interviewee).

9 out of 10 participant interviewees said they had **talked about the issues raised at the workshop with friends and family**, after the event. Comments included:

"Yes [talked to family and friends about] ... the gene therapy – when to look at the genes of someone who could possibly become a drug addict, and all the moral ethical and legal stuff that goes along with it" (Liverpool interviewee)

"Just the cognition enhancers – how they should or shouldn't be used" (Glasgow interviewee).

"I talked with my wife about what the whole thing was about, and how it might relate to us as parents" (Belfast interviewee).

"I ran past friends and family what it would be like if you could be tested at birth for certain things" (Belfast interviewee).

"Yes, I have with my husband – I talked to him about the different kinds of drugs that are out there and how young people get them" (Belfast interviewee).

"Yes, I discussed Parkinson's with my wife and children as my father suffers from it" (Exeter interviewee).

"Yes. Prior to the workshop I had been talking with friends who are casual drug users. Our children are school friends and I had worries that our child would indirectly be influenced by this, but decided it wasn't a problem. But one of the issues on the day was what influences people to take drugs, and one of the big influences was parents taking drugs. So since the day we have talked about it a lot more as it has raised concerns" (Exeter interviewee).

In terms of public education on the issues of drug addiction and brain science, this is a fairly large circle of dissemination - even if only judged on increasing levels of interest and awareness rather than assuming that a great deal of detailed information was passed on.

6.3.3 Feedback on issues of conflict and consensus

Participant interviewees were asked about the extent of conflict and consensus on specific issues, and which issues these were. Overall, there is a clear sense that although there were disagreements, interviewees felt that the discussions were generally fairly consensual and balanced. Comments included:

"The ethical side of gene therapy was a real issue ... When we actually talked about the ethical and moral issues with gene therapy there was actually real disagreement over it. It was very interesting, in fact the whole day was interesting" (Liverpool interviewee).

"Yes, about the classifications and which drugs should be given a higher or lower classification" (Liverpool interviewee)

"It was more balanced than that. There weren't really any things that everyone agreed on, and there weren't really any things that everyone disagreed on" (Glasgow interviewee).

"There was always someone who didn't agree – the balance of the argument was always given by at least one or two people" (Belfast interviewee).

[There was disagreement about] where to get help with drugs – there was no way of answering it. Even the experts disagreed" (Belfast interviewee).

"That alcohol is more of an issue than drugs. There was generally agreement on that, although I disagreed myself" (Belfast interviewee).

"No [real disagreement], I think most people ended up swaying towards other views as the discussions went on and as they learnt about other people's opinions" (Belfast interviewee).

"No ... real disagreement. There were gentlemen's disagreements about several things, but not total disagreement" (Exeter interviewee).

"Our group was completely divided on most things – we had some heated debates ... The main one was about the government and whether they should spend money on mental health or on drugs-related issues. But the correlation between the two is quite high – it's a chicken and egg situation, and we were quite divided in terms of what we thought the answers were. It was obvious that there were some drug users in the group and they had strong opinions based on personal experience" (Exeter interviewee).

6.3.4 Feedback on the provision of information and expertise

- **93% of questionnaire respondents agreed that the experts were helpful and clear;** 44% agreed strongly. Only 1% disagreed.
- **88% agreed that the information provided was fair and balanced;** 28% strongly agreed and only 4% disagreed.

However:

- **49% of respondents agreed that they would have liked more information in advance;** although only 10% agreed strongly, and 21% disagreed.

This very positive response to the input of the experts and to the information provided in writing shows both were highly valued.

From observation, the printed information circulated at the meeting worked well to support the discussions, although some participants clearly found it difficult to manage all the information during the course of the day. However, the participants clearly understood the information provided relatively quickly and had no hesitation in asking questions if there was anything they did not understand.

However, it is also clear that a significant proportion of participants would have liked more information in advance.

In terms of which of the resources provided were the most useful, questionnaire respondents said that **information from experts was the most useful** (58% said that), followed by the **written briefing notes on the topic** (30% found those useful), and 27% found the **scenarios** useful. Only 5% had found the website useful.

Participant interviewees' feedback was very similar. 9 out of 10 interviewees felt the information was fair and balanced (1 was not sure), 7 thought there was enough information provided in advance and on the day (although 3 would have liked more information in advance). 8 out of 10 said there was nothing missing from the information in their view. Comments included:

"The statistics were really interesting – about the classification systems, class A, B, C etc and the comparisons with other countries" (Liverpool interviewee).

"The [facilitator] going through the written information to help us understand it better was very helpful" (Glasgow interviewee).

"Perhaps a few more information sheets on the basic stuff and the background, definitions, things like that." (Liverpool interviewee)

"We needed more beforehand to read" (Glasgow interviewee).

"I think it definitely provided a balanced argument" (Glasgow interviewee).

"There was a lot of it and obviously you can't take it all in, but it was all very clear" (Glasgow interviewee).

"In advance I didn't really know what was going on and what we would be doing there. But on the day it was fine" (Glasgow interviewee).

"I thought it was fair, but not quite balanced. I was more interested in dementia, Parkinson's etc, but the balance went more towards mental illness and drug addiction" (Exeter interviewee).

"The information packs were good, but we needed them in advance in order to be more informed – people who didn't know much about drugs in the first place were fairly stumped. That meant that our input was really based more on opinion than fact" (Exeter interviewee).

"[I did think it was fair and balanced] but I didn't think we had a lot of time to read through the pack with all of the information in it. Maybe if we'd had it a week before, or if we'd had extra time on the day to read through it all" (Exeter interviewee).

Experts and AMS Working Group members were also positive overall about the quality and relevance of the information provided. Some questioned the extent to which participants were able to fully make sense of the complex issues being covered, but generally feedback on the information provision was positive. Comments included:

"There was quite a range of information from the academic to the practical. I think it was appropriate and fair as well. No problem with that" (expert interviewee).

"I thought the information was just right, and plenty of opportunities to clarify and question" (expert interviewee).

"I suspect some of the information/presentations were a bit academic – there are quite a few complicated ideas and concepts. I'm not sure everything got across" (expert interviewee).

"The information sheets were fine, though I guess for some the capacity to absorb the information may have been limited. It's impossible to know who has read what. As I said, there seemed a good deal of knowledge from first hand experience" (AMS Working Group member).

"The information was, I suppose, acceptable. I think it is very difficult to convey the issues that were raised in the Foresight report. It can be difficult, even for many experts, to grasp the detail fully" (AMS Working Group member).

"It's so difficult to say. Was there enough information? How do you condense all the complex background material in such a way as to say there was enough and it was right? It was certainly set out to be fair with a range of perspectives" (AMS Working Group member).

"I still have the view that people are not sufficiently informed and this was not addressed in a balanced way in the event I attended" (AMS Working Group member).

The questionnaire asked participants if there was any specific piece of information that they remembered as particularly useful, and this gained only a very low response - with just 2% mentioning each of the following: Alzheimers information, soldiers taking cognition enhancing drugs, ideas of testing for possible addiction, and Liverpool being the highest county in the country for Class A drug use (this was at the Liverpool workshop). Comments on information remembered included:

"Speaking to lady who had her life ruined by drug dealer in her neighbourhood" (Liverpool questionnaire respondent)

"Knowing that the justice system now helps addicts and just not punish them" (Liverpool questionnaire respondent)

"How big the drug problem is in Liverpool" (Liverpool questionnaire respondent)

"One of the experts explained the research into a new drug being developed into the prevention of nicotine addiction. The drug absorbs nicotine into the blood rather than the brain" (Exeter questionnaire respondent)

"That mental illness is in the top ten killers in the world" (Exeter questionnaire respondent)

"A drug addict telling me how useful counselling was to them" (Exeter questionnaire respondent)

"If cognition enhancers are used in a regular activity then it will impair your performance rather than enhance it" (Glasgow questionnaire respondent)

"Babies born with drug addiction" (Belfast questionnaire respondent)

"Most people recover from mental illness" (Belfast questionnaire respondent)

"Understanding of older generation with dementia and Alzheimers" (16 - 24 year old, Merthyr Tydfil questionnaire respondent)

"Didn't realise that mental health illness covered such a wide variety of illnesses" (Merthyr Tydfil questionnaire respondent)

6 out of 10 participant interviewees said they did **remember specific information** from the events. This is quite a high proportion and suggests that the information did make quite an impact as interviews were conducted some months after the event. Comments included:

"There were a few actually. The types of drugs and what happens to them was interesting. Like Ritalin prescribed for ADHD and parents selling it on as a stimulating drug – I found that interesting." (Liverpool interviewee)

"What really made an impact was that brain product. They said it would be very effective and that it would help young and old. I agree with it myself" (Glasgow interviewee).

"I thought about the different kinds of drugs. I felt very positive about the brain-helping drugs" (Glasgow interviewee).

"Some of it was rather surprising. The statistics on drugs and how socially accepted they are in younger people were scary. Also the amount of legally prescribed drugs that people can become dependent on" (Belfast interviewee).

"Mostly ... those issues of the availability of different drugs that can be given on prescription" (Belfast interviewee).

"Hearing about the mental health issue was good. It was interesting to hear the two different sides from the experts about whether it should be treated medically or not" (Belfast interviewee).

"The girl who was talking about the drugs centre in Ballymena was good. It was amazing how many young girls they get going there who are pregnant or have young kids" (Belfast interviewee).

"There were a few things at the time ... I think mainly it was about the future of drugs and the way they are developing things to change people's disposition to drug addiction. Also, listening to other people's views was really interesting" (Exeter interviewee).

In terms of who participants **trusted most to provide them with information**, they rated health professionals highest (63% identified them), followed by friends (28%), academics (24%) and family (23%). Only 5% trusted the media (TV or newspapers), and 1% did not trust anyone.

Participant interviewees were asked **whether they had looked at the website**: 3 had looked at the website after the event they had attended, but 7 had not. This suggests that websites can potentially perform a useful function after engagement activities, to continue to provide

information, access to reports etc - although other methods may also be needed if information dissemination is a priority, as only a relatively small proportion of participants seem likely to go to the website. Comments included:

"I had a look afterwards. It was interesting – I just looked at it for some general follow-up on the statistics and on what we learnt" (Belfast interviewee).

"I had a look after the day, just to see what was on there. It was good – there seems to be a lot of stuff going on" (Belfast interviewee).

"I haven't yet, but I will do – your call has prompted me!" (Exeter interviewee).

6.3.5 Feedback on the purpose and influence of the process

There was remarkably positive feedback from questionnaire respondents in the regional workshops on the extent to which the outputs of the event reflected the discussions that took place, the clarity of the information they were given about the process, and the level of influence it would have:

- **88% agreed that the results of the debate genuinely reflected the discussions** that took place at the event
- **80% believed that the people who commissioned the event would take notice** of the results; 30% agreed strongly and only 2% disagreed.
- **73% agreed they were clear about how the results of this process would be collected and used**; 25% agreed strongly and only 7% disagreed.

These are very positive results, and are a very good indication that those running and introducing the process managed to generate a high level of trust in the whole process from those taking part, including the extent to which the AMS would use the conclusions.

The feedback from respondents that the results of the debate genuinely reflected the discussions that took place, and the fact that the results of the debate were then reported in the same terms by OPM in their final report, suggests a transparency and honesty in recording and potentially reporting findings that would appear to have genuinely wide support among participants.

From observation, this may be partly because all the comments made in discussion were very clearly and openly recorded on flip charts, or were used by the participants themselves to present their own views back to the group, so the whole process was validated by going back to the group. Their views were not being noted privately by notetakers in ways that could not be checked by the group, and the vast majority of participants clearly felt comfortable that the views of the meeting were reflected.

The experts and AMS Working Group members interviewed were slightly less positive in their view of the outputs, although they did not dispute that they were reported honestly. The main issues here were around the extent to which the outputs provided anything new or valuable to the debate, and the limited nature of the issues covered by the engagement process, as well as some disagreement with the conclusions arrived at by the participants. Comments included:

"Outputs were a bit predictable I suppose. There was a lot of pro-cannabis feeling – quite a few old hippies there. So a bit narrow I suppose" (expert interviewee).

"[Outputs] were very good. They all came out of the discussions. There was very good feedback" (expert interviewee).

"I have to say I didn't agree with many of them [the conclusions / outputs]. It's interesting that men tend to be more positive than women about these issues [cognition enhancers], though women tend to dominate debate" (expert interviewee).

"I think, like the discussions, the final conclusions were a bit narrow in focus. So they were probably a fair reflection of what went on, but what went on missed some of the practical and legal implications of a broader view of drug use ... I don't know how, but perhaps the organisers could have maintained a wider focus throughout. I felt that questions of legalisation and prohibition were not sufficiently aired" (expert interviewee).

"The conclusions ... were done from each table, where they had been helped, through discussion, by a facilitator. They were quite good, in that they reflected the common instinct and intuition" (AMS Working Group member).

"The conclusions were interesting, if unsurprising. The main thread was that present day drugs policy is not working" (AMS Working Group member).

The participant interviewees were slightly less sure than questionnaire respondents about the purpose and influence of the process: 4 were clear about how the event they took part in fitted into the overall Drugsfutures project, 3 were not clear and 3 were not sure. 6 were clear about how the results of the event would be used and 4 were not. Comments included:

"No, I don't know what they were intending to do with it" (Liverpool interviewee).

"There were some of us on my table who felt we didn't know exactly what we were there to do. It would be good to have two days and know exactly what we were there for. It only really became clear half way through" (Glasgow interviewee).

"Will it be used for research? I'm not sure" (Belfast interviewee).

"Yes, I could see where they were going with it" (Exeter interviewee).

"Yes, but it would be nice to know how it is being used and what they are doing with the information ... I think it's going into a proposal to government about drugs for the future" (Exeter interviewee).

The reduction in clarity between questionnaire respondents and interviewees may be a result of the time between the event and the interviews, and the interviewees had forgotten what they had been told about the purpose of the event and how the results would be used. However, they clearly remembered quite a lot of other detail about the activities and content of the day, so it may also be that the information they were given was not entirely clear and memorable.

In terms of whether the **AMS would take notice** of what participants had said, when they made their recommendations to government, only 3 participant interviewees said they thought the AMS would take notice although another 5 said they "hoped so"; 2 were not sure. Comments included:

"I think it was definitely worth it for them to see what people think but I'm not sure if they'll actually pay attention to it." (Liverpool interviewee)

"I sincerely hope so. There was no point in doing the whole thing otherwise" (Glasgow interviewee).

"I think so. There were some good points raised on the day, so I hope so" (Glasgow interviewee).

"I do believe so. Government should take it on board when professional bodies run this kind of thing – they should be listened to" (Belfast interviewee).

"Well, hopefully. It was a long day and there was a lot of information – they need to put it into words that make sense" (Belfast interviewee).

"I would like to think so, but there are often issues with purse strings – if the Government don't have the money to do something then of course they won't take it forward" (Exeter interviewee).

"Hand on heart, the experts have strong opinions based more on fact than what we gave. They have preconceived opinions and might not listen to us. Also, it may not be my opinion they listen to" (Exeter interviewee).

6.3.6 Feedback on value for money

Interviewees were asked the question: 'Public consultation obviously has financial costs. Do you think it is money well spent, or not?' All 10 interviewees said they thought it was money well spent. Comments included:

"Yes I would say so – the public should be involved and have their say." (Liverpool interviewee)

"Definitely yes. I would rather they spent money on this kind of thing than on some of the other stuff they do at the moment" (Glasgow interviewee).

"Oh yes. These things can be seen cynically, but yes" (Exeter interviewee).

"If it is used in the right way and we were genuinely there to help then it was worthwhile. If all that happens is a report that they take one look at then ignore, then this was a complete waste of money" (Exeter interviewee).

The expert and AMS Working Group interviewees also felt, overall, that the costs of these exercises are generally money well spent, although with slightly different caveats:

"I think it's good value for money. For me one of the most important things is future policy in the drugs field, so I'm going to see the value in all these things" (expert interviewee).

"I suppose it is [money well spent]. But you do need to make sure you get a random selection of participants. This workshop was well organised, and that's never done on the cheap" (expert interviewee).

"I think it is value for money – it's probably the only way you can get proper consultation benefits" (expert interviewee).

6.3.7 What worked best in the regional workshops

From observation and informal interviews, questionnaire responses and interviews, the following aspects of the workshops worked most effectively.

- **Quality of discussion.** From observation, and feedback from expert and AMS Working Group interviewees, it is clear that the quality of discussion, and the interest and enthusiasm of the participants, was high - even though there were strong opinions and emotions. Comments included:

"I thought the quality of discussion was very good – though a few people were riding hobby-horses" (expert interviewee).

"Very high quality. Some very different views and some strong characters. Not too much domination. I think everyone was fairly treated" (expert interviewee).

"People seemed to have a real curiosity about the issues and a readiness to toy with ideas" (expert interviewee).

"I thought the quality of discussion was quite good – it seemed to start off as chit-chat then crystallised into a bioethical discussion with people putting their personal values on the table. The facilitators had to work hard to distil the ideas" (expert interviewee).

"There were a lot of small issues, many with emotional aspects. There was a pessimistic view of the future" (expert interviewee).

"There was quite a competitive dynamic, producing good questions and some good brainstorming" (expert interviewee).

"There was obviously a high level of involvement by the participants ... I suppose there was a good level of participation, but I think there was an immediate tendency to narrow things down quite quickly. There seemed to be a pre-occupation with recreational cannabis use" (expert interviewee).

"There was a wide spectrum of interests, with people obviously very engaged in the proceedings, very active in plenary sessions. Though there was a handful of folk there just to collect their £50" (AMS Working Group member).

"The quality was good, given that I heard a great deal about personal experiences or that of family members. People had more difficulty when it came to projecting future scenarios. There was some quite wild guesswork" (AMS Working Group member).

"Everyone seemed very interested and I certainly found it very interesting" (AMS Working Group member).

"Frankly I was surprised by the level of enthusiasm of many of the participants – and they were giving up a Saturday!" (AMS Working Group member).

"The quality of discussion seemed to me to be mixed. A bit fragmented. Again, there was a tendency of some individuals to dominate" (AMS Working Group member).

"People seemed very engaged, generally. I sensed there were one or two there for the £50 payment or however much it was. On the whole I think people were genuinely interested" (AMS Working Group member).

"I suppose I should not have been surprised that the small group with experience of drug use, either themselves or a family member, they were quite knowledgeable about drugs and their effects. Both groups I was in had firm views about drug use" (AMS Working Group member).

"I went around the discussion groups from one table to another – frankly I was moved by the depth of feeling I witnessed. I think many of the participants had perhaps some family experience of mental health problems. 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).

- **Recruitment and representation.** The participants at the regional workshops represented a robustly diverse cross-section of the British public in terms of gender, age and social class (see Annex 3 for demographic statistics on questionnaire respondents as proxy for analysis of participants).

There was clearly good representation from a wide range of social backgrounds and levels of knowledge about the issues. The location of the regional workshops also ensured a good geographical spread across the UK.

There were fewer people from black and minority ethnic communities overall at the regional workshops than had been planned. The target overall was 14 people who were Asian or Asian British, Black or Black British; in practice there were only 7 participants who defined themselves in that way. This is important in this subject area where black and minority ethnic communities may be particularly affected by these issues. There was an outreach workshop for Afro-Caribbean carers, run by the BA, but that did not connect directly with the regional workshops. This may be a gap in demographic representation.

However, the decision to allow participants from the outreach workshops to attend the larger and longer regional workshops did allow the perspectives from people from traditionally 'hard to reach' sectors of society and with specific knowledge or experience of the issues relevant to brain science, addiction and drugs to be included in the discussions, and provided an even richer mix of participants and viewpoints.

The feedback from participants is very positive about the mix of people who attended the regional workshops. All 10 interviewees agreed there was a good mix of people at the event they attended. Comments included:

"I think the mix was right. There was a range from university age through to the elderly" (Glasgow interviewee).

"There was a good mix of different backgrounds, a good social mix" (Belfast interviewee).

"I thought it was a great mix of people, of different ages and all across Belfast" (Belfast interviewee).

The experts and AMS Working Group also agreed that there had been a good mix overall. Although some questioned the rigour of the sampling, overall the mix was felt to be entirely appropriate and sufficiently robust for this process. Comments included:

"There seemed a good mix. You know, quite representative. There weren't a lot of younger people, but you have to be careful in terms of the law as to what you get younger people involved in" (expert interviewee).

"It was a good mix ... There was a good cross section of people maybe aged 30 - 70 years. Maybe older " (expert interviewee).

"As far as I could see there was a good mix of age and gender and ethnicity" (AMS Working Group member).

"...there seemed a good mix, though I'm not sure how random it was. Or how self-selecting the groups were. There were teachers and health care professionals and drug users or former users and family members of users. "Certainly enough of mix for good discussions, though inevitably there were some dominating characters" (AMS Working Group member).

"We knew from the beginning that the consultation itself wasn't going to be scientific: the samples were not random. It wasn't a Gallup poll, but particular groups of people. There were serious limitations in how representative the findings would be, but the limitations were never concealed from us" (AMS Working Group member).

There were one or two criticisms of the mix of people attending from the expert interviewees, such as:

"I'm not sure about the mix of people. Maybe there could have been more representation from community groups" (expert interviewee).

However, the regional workshops were not intended to include stakeholders such as community groups, special interest groups or voluntary organisations as there were other opportunities for these types of interests to engage with these issues. Overall, therefore, the mix can be seen to have been a very good representation of the diversity of people and views across the UK.

It was clear from the feedback from participants that not only had an appropriate demographic mix been achieved, but that the mix itself, and the opportunity to talk to people they would not normally meet, was one of the aspects of the event that participants particularly valued. 4% of questionnaire respondents identified the diversity of people as the best thing about the event. Comments included:

"Discussing topical issues with people who I wouldn't necessarily speak to in my normal life" (Liverpool questionnaire respondent).

"The variation of personalities present, with good views on all subjects discussed [was the best part]" (Liverpool questionnaire respondent).

"Meeting different people from all walks of life" (Merthyr Tydfil questionnaire respondent).

"The cross section of people [was the best part]" (Exeter questionnaire respondent).

"Meeting different people like the woman from the drugs help group, and being able to ask them questions [was the best part]" (Belfast interviewee).

- **Learning, knowledge and understanding.** Learning, gaining knowledge and understanding were the most important aspects of the event for many people. 24% of questionnaire respondents identified this as the most important aspect, and 9 out of 10 interviews identified learning as the main thing they gained from being involved.

Comments included:

"Real eye opener - learnt a lot" (Liverpool questionnaire respondent)

"Being educated about an area I had not really known much about" (Liverpool questionnaire respondent)

"I learnt a lot about drugs for the elderly and people who take drugs for the fun of it" (Merthyr Tydfil questionnaire respondent)

"Gaining the knowledge of what people need in the community to overcome the need of un-needed drugs" (Merthyr Tydfil questionnaire respondent)

"My attitude to drug users / addicts has been modified. I feel I am able to approach people and talk openly with them" (Liverpool questionnaire respondent)

"Most important aspect for me was finding out the punishments for drug use. Also what the police input is, and how hard their job really is" (Liverpool questionnaire respondent)

"Finding out a lot of information which I didn't already know" (Liverpool questionnaire respondent)

"Increasing my knowledge and understanding of the issues dealt with. It was useful to hear other people's points of view" (Glasgow questionnaire respondent)

"Learned to ask questions" (Belfast questionnaire respondent)

"Helping us as individuals to take away some understanding of how the 'system' of prescribed drugs works within society" (Merthyr Tydfil questionnaire respondent)

"Learning the statistics and listening to other people's opinions" (Belfast interviewee).

- **Group discussions and hearing other views.** The feedback from the questionnaire respondents was similar to the outreach workshops in that the group discussions (mentioned by 23% in answer to an open question; and 7% specifically mentioned that they liked the group presentations) and hearing others' views (13%) were the aspects of the event that worked best for respondents. 6% of questionnaire respondents specifically mentioned the interaction and group discussions as the most important aspect. 7 out of 10 interviewees also mentioned the working in small groups (and 2 specifically mentioned the group presentations at the end) as the best aspects of the event they attended.

There is an overlap between the value to participants of hearing other views and learning (see previous point), as it is clear from the feedback that at least part of the learning was from listening to the views of others.

Comments included:

"Meeting new people and listening to other people" (Exeter questionnaire respondent)

"I really enjoyed the group discussions" (Exeter questionnaire respondent)

"The morning session discussions on things that I have never really thought about" (Exeter questionnaire respondent)

"Group discussion and input of the expert was very interesting" (Exeter questionnaire respondent)

"Plenty of interaction and discussions. Introduction to keypad voting system was both fun and informative. Plenty of opportunity to air views, and listen to opinions and standpoints of others" (Merthyr Tydfil questionnaire respondent)

"The groups were really good, and there were some really good ideas coming out. Listening to the experts was good too" (Glasgow interviewee).

"The group presentations and the way they got everyone involved were good" (Glasgow interviewee).

"The group discussions were really good and the presentations bringing it all together at the end as well" (Belfast interviewee).

"The mixing of groups added some dynamism to the whole thing and helped to change the line of thinking, which was good" (Exeter interviewee).

"The chance to really hear first hand from two or three ex-heroin and cocaine users and parents whose children have mental health issues" (Exeter interviewee).

"I think one of the main things is meeting a lot of other people with a lot of different views and altering my own views. It's important to hear other people's points of view" (Liverpool interviewee).

- **Expert input.** As identified above, questionnaire respondents clearly valued the expert input (93% agreed the experts were helpful and clear). Similarly, 8 out of 10 participant interviewees said they found the input from experts the most useful source of information (2 said it was other participants and 2 said written information); 4 out of 10 participant interviewees thought that the expert input was the best thing about the event they attended. Comments from participant interviewees included:

"The experts were a really good idea, and the way they swapped from table to table worked really well. The policeman was especially good. I thought the whole thing was good" (Liverpool interviewee).

"The experts probably [were the most useful]. We got a chance to ask them questions and they answered them all very well" (Glasgow interviewee).

"The experts were very interesting, especially the one from the drugs place in Belfast. They were well educated and informed. It was good to have people from the coal face there" (Belfast interviewee).

"The knowledge of the experts was excellent. Overall it was an exhilarating process to be involved in" (Belfast interviewee).

"The other participants and the experts were very good. We had a Professor at our table who was very good" (Exeter interviewee).

"I felt like the experts generally knew a lot more than they let on. It seemed like they were careful not to force their opinions on us, but perhaps they could have gone into more detail" (Exeter interviewee).

The feedback from the experts and AMS Working Group member interviewees who attended the workshops was that the process for providing expert input worked well: they were generally clear about their roles, and felt that participants understood those roles.

There was a little concern from one or two experts that they would have welcomed slightly more briefing before the events, and this was also picked up by one of the participant interviewees:

"I suppose I could have done with more prior information. As it was I had the agenda just a few days before ... I didn't get the scenarios until I arrived at the event. It would have been useful earlier" (expert interviewee).

"I think preparation of the experts, giving them more information on what it was all about [would have improved the event]. They were great, but came across as not being really clear what the day was all about" (Belfast participant interviewee).

Not all participants were entirely positive about the expert input. A dissenting view was:

"There were a lot of experts there but I didn't necessarily feel like they had a lot of input. The [facilitator] was good in the way that she kept the day on track and focused, but I'm not sure about the way the experts contributed. They weren't a waste of time, but I don't feel like some of them really connected with people – they were on a bit of a different level of thought to us. They were obviously very knowledgeable and had very specific knowledge but it didn't seem like they shared as much as they could, perhaps because they were aware of the gap in knowledge and weren't sure how to put it in simple terms" (Exeter interviewee).

However, this is very much a minority opinion and, in general, the expert input clearly worked very well and was highly valued by participants.

- **Giving views and being listened to.** 19% of questionnaire respondents identified having their views heard and being listened to as the most important aspect of the event for them. Comments included:
 - "Enjoyed debating important issues and feeling like my opinion counted" (Liverpool questionnaire respondent)
 - "To speak about my opinions and to clarify them" (Liverpool questionnaire respondent)
 - "To give my view on each and every point" (Liverpool questionnaire respondent)
 - "The taking part - being able to share my journey and thoughts with others" (Exeter questionnaire respondent)
 - "Putting my views across" (Exeter questionnaire respondent)
 - "Feeling that my opinion is of worth and also meeting a variety of people involved in these issues - either as carers, workers or people affected by mental illness" (Merthyr Tydfil questionnaire respondent)
- **Making a contribution.** Several questionnaire respondents mentioned the best part of taking part was the importance to them of making a positive contribution to their community (sometimes linked to giving their views) through taking part in an exercise they saw as trying to solve important problems. Comments included:
 - "Giving input for my community" (Liverpool questionnaire respondent)
 - "Everyone was centred on improving or attempting to resolve drug problems" (Liverpool questionnaire respondent)
 - "Being able to contribute to something as important as this" (Liverpool questionnaire respondent)
 - "Being able to take part in the public policy process" (Exeter questionnaire respondent)
 - "That my voice was heard and it could make a difference to people's lives" (Exeter questionnaire respondent)
 - "Got me thinking about issues that affect society where I normally wouldn't" (Exeter questionnaire respondent)
 - "Being involved in something of national importance and of importance to so many people today" (Merthyr Tydfil questionnaire respondent)
 - "Just to know what's going on in terms of research and knowing I contributed to what will happen" (Belfast interviewee).
 - "I would like to think that everyone's opinions will be used, that the government will listen and that they will do something positively by pouring money into drugs and mental health issues. That would be a great thing to get out of it" (Exeter interviewee).

6.3.8 What worked least well in the regional workshops

The direct feedback from the questionnaire respondents was, that "nothing" did not work well (16%; only counting those that said 'nothing', not those that left this question blank); 5 out of 10 interviewees also said 'nothing' in answer to this question.

Comments included:

"I found everything to a high standard. I cannot think of ways of improving what was already good" (Exeter questionnaire respondent).

"The event I attended was very well run and I don't think it could be improved upon" (Merthyr Tydfil questionnaire respondent)

However, feedback suggests a few areas of concern and ideas for improvement:

- **More information in advance.** This was probably the strongest concern expressed by participants (and some expert interviewees) about the design and delivery of the event: 49% of participant questionnaire respondents would have liked more information in advance. This is always a delicate balance for engagement organisers as they do not want to overload participants or unduly influence them before the event, but there may be a need for additional advance briefing to help participants. Comments included:
 - "I think it would have been useful to have received the leaflet on 'Drugs for a Smarter Brain' before coming today" (Glasgow questionnaire respondent)
 - "Maybe a pre-seminar leaflet to give an insight" (Belfast questionnaire respondent)
 - "The only thing I would say is that having more information before the event would have helped" (Exeter interviewee).
- **Timing.** Although 10% of questionnaire respondents felt the workshops were too long, and several mentioned it being a 'long day', this was not a major concern. Comments included:
 - "Not being able to express my views because of lack of time" (Exeter questionnaire respondent)
 - "Making more time for a subject of this importance to be discussed. One day is not enough. Too many issues pushed into too small a time. Should be spread over a few days" (Liverpool questionnaire respondent)
 - "It's a pity that some discussion had to be curtailed because of time constraints" (expert interviewee).
- **Stronger facilitation.** A few interviewees mentioned that, in some of the group discussions, they would have liked to see slightly stronger facilitation to stop some individuals talking too much.

This was also noted in observation, although generally the standard of facilitation of small group discussions was extremely high - encouraging those who did not find it easy to talk to take part as well as controlling those who could otherwise have monopolised the discussion.

Comments included:

"Cross conversation e.g. people talking while others are putting forward a point" (Liverpool questionnaire respondent)

"Chairperson controlling the input" (Liverpool questionnaire respondent)

"I think there were a few more mouthy people who could've been managed a bit more forcefully. The leaders of the table could have been a bit more forceful with them" (Liverpool interviewee).

"The group leaders did their best, but we could have done with a bit more intervention from them, especially where people were banging on about one issue all the time" (Exeter interviewee).

- **Making presentations.** Although only 5% of questionnaire respondents mentioned this, it is clear from observation and informal feedback that some participants felt intimidated by having to speak in public on behalf of their group (in this process, each group presented back to the whole workshop during the afternoon session). However, this was not compulsory and if participants were uncomfortable, there was no pressure on them to make the presentations on behalf of their group. From observation and other feedback, it is also clear that some participants found this a very positive challenge, and gain significantly in confidence from having taking part in this way. Comments on this issue from participants included:

"Having to give a presentation. We found it difficult to find someone willing to do this" (Glasgow questionnaire respondent)

"Having to stand up and give an introduction ... I need more confidence!" (Merthyr Tydfil questionnaire respondent)

"Some people could feel intimidated in group situations due to illness(es)" (Merthyr Tydfil questionnaire respondent)

"Having to stand up and talk" (Merthyr Tydfil questionnaire respondent)

6.3.9 Lessons for the future

Participant interviewees were asked what lessons for the future they would like the AMS and government to take from this initiative. The main comment (from 4 out of 10 interviewees) was simply to "do it more". This was also a strong view from questionnaire respondents: 96% of respondents said there should be more events for the public to discuss these sorts of issues; no-one disagreed. In addition, one of the main suggestions from questionnaire respondents for improving these events was to have more events of this sort; the only other one was more information in advance.

Comments included:

"Having more events such as this one that will improve people's knowledge and understanding of different issues" (Merthyr Tydfil questionnaire respondent)

"The public should be involved in this kind of thing" (Liverpool interviewee).

"They need to involve them [the public] more. I don't know how often they do this – it's the only one I've ever done. If you want public involvement then you have to involve a mix of real people with real views" (Liverpool interviewee).

"... give more information to the public so they have something to base their ideas and opinions on. These groups were great but in terms of getting general information out the internet might be best, perhaps through a website – I'm not sure everyone trusts the media and TV" (Liverpool interviewee).

"Do it more often, with other issues" (Glasgow interviewee).

"I think they should involve people more in these kinds of discussions" (Belfast interviewee).

"Do more – get people involved, and let them know by mail" (Belfast interviewee).

"We must be heard, and all have an opinion to give, but it's a matter of sifting through what you get out of it and sorting the wheat from the chaff" (Exeter interviewee).

"You never know what is going to happen to you. The government needs to talk to people, and especially those with personal experience, so that they can help people better in the future" (Exeter interviewee).

In response to an open question asking for any final comments, participant interviewees comments included:

"I thought it would be dry and boring, but it was actually a really good day" (Glasgow interviewee).

"I thought it was very professional and I thoroughly enjoyed it" (Belfast interviewee).

"It was grand – very interesting" (Belfast interviewee).

"I think it was really interesting. At the start I thought 'it's gonna be one of those days', but it ended up being really interesting" (Belfast interviewee).

6.3.10 Follow up requested

Participant interviewees were also asked if there was anything else they would like to know about the project and future work in this area. 9 out of 10 interviewees (as well as some questionnaire respondents) said they would like to know more, and especially what happened as a result of their input.

Comments included:

"I would like to have known more about what this information will be used for in the future" (Exeter questionnaire respondent).

"It would be great to have a follow up group or information on how our information was used" (Exeter questionnaire respondent).

"I really enjoyed the day. I would really like to know what other people thought ... [and] I'd be interested in being kept updated on the statistics and changing topics on drugs and brain science" (Liverpool interviewee).

"General updates on what has happened since the workshop and on the issues. Also any specific information on future events or surveys" (Belfast interviewee).

"Email updates would be good, on big projects like this that are happening. A lot of people would be willing to be involved but just don't know these things are going on" (Belfast interviewee).

"The results of this consultation and also more general stuff on work in this area" (Exeter interviewee).

"A simplified form of the report or recommendations that came out of the workshops would be good, to show people that it wasn't a waste of time and money" (Exeter interviewee).

Experts interviewed also expressed an interest in what would happen next, in answer to an open question asking for any further comments. Points made included:

"What'll happen now? All in all this was a valuable contribution to the discussion and it would be nice to see it channelled up to the Home Office, the NHS and so on" (expert interviewee).

"So now what? How can the public policymakers make use of this consultation and others like it?" (expert interviewee).

6.4 Overall conclusions on the regional workshops

Overall the regional workshops worked very well. They were well-designed and delivered to provide the process, facilities, information and expert input that supported participants in developing and expressing their views.

The recruitment and representation at the workshop, with the mix of specially recruited members of the public alongside some people with special interests who had stayed involved from the outreach workshops, combined to ensure a robustly diverse cross section of the British public overall, as well as including people from both 'hard to reach' sectors of the community, and specific groups relevant to the issues (e.g. ex-drug users and people with experience of mental health problems). There was a slight under-representation of people from black and minority ethnic communities but, overall, the mix of participant worked well to enable a diversity of views to be expressed, and was also seen as a real value of the process for participants themselves.

Respondents learned a great deal, partly from the written information and input from experts and also from talking with each other in mixed small groups. They felt the process had helped them clarify their views and some had changed their views through greater awareness of the issues. These are important public education impacts that were strongly valued by the participants, who saw learning as one of the main things they gained from taking part.

Most respondents were clear about the purpose of the event they took part in, and believed the AMS would take notice of the results. These are good levels of clarity and transparency of process, and reflect a high level of trust in the process and those running it, which contributes to participant satisfaction as well as a good quality process.

There were only a very few problems with the regional workshop process identified from any of the evaluation research, mainly around requests for more information in advance of the event (and about what happened as a result), stronger facilitation in some cases to control a few individuals, and slightly better preparation of experts so they were clearer about their role. A few participants did not like giving presentations - although some identified group presentations as one of the best aspects of the event they attended.

Overall, the workshops worked very well to deliver a high quality deliberative process that involved an appropriate mix of people and provided them with an opportunity to learn, reflect and provide considered views on the subject.

7 The Brainbox workshop

7.1 The purpose of the Brainbox workshop

The Brainbox was a model designed for this project, using a "deliberative approach to involve a group of participants in an extended event, during which they were able to explore all the issues in some depth"¹. The aim was to bring together a small but diverse group of public participants over an extended period, together with a range of experts, to discuss all five topics identified for the Drugsutures project.

This section summarises the process used in the Brainbox event and the feedback, and assesses the value and effectiveness of this part of the process.

7.2 The Brainbox workshop process

7.2.1 Overall scale

The Brainbox brought together 25 participants for two separate events. The first event was attended by 25 participants and lasted 1.5 days: Friday evening and all day Saturday 2 - 3 February 2007, which was soon after the Drugsutures project launch in London. The second Brainbox event was attended by 23 participants and lasted 2 days: all day Friday and Saturday 30 - 31 March 2007.

7.2.2 Recruitment

The recruitment for the Brainbox was through a professional recruitment agency, according to a detailed specification with quotas for gender, age, social class and ethnicity, as well as a mix of people with some and with no prior interest and knowledge of the subject. This approach was designed to ensure a demographically diverse mix of public participants.

A fee of £50 was given to participants at the end of the first event, and a further £200 at the end of the second event.

7.2.3 Process

The main elements of the first Brainbox event were as follows:

Friday 2 February 2007, 6.30pm to 9pm

- Introductions and welcome, including overview of the event and the main questions to be addressed and the history of the Drugsutures project from the Foresight research.
- Introductions among participants to each other in pairs and then feeding back to the whole group, covering their family and work background, what they feel about taking part in this project, and why they decided to get involved.
- Split into four small groups, two to discuss why people take drugs and two to discuss what influences what people think about drugs; with points raised in the groups recorded on flip charts (20 minutes).

¹ *Drugsutures. Public engagement on the future of brain science, addiction and drugs. Report for the Academy of Medical Science. OPM, May 2007.*

- Report back to the main group in plenary of findings from small groups and discussion of issues arising (25 minutes), followed by short break
- Working in 3 small groups, brainstorm harms to the individual, family and society from use of drugs and put up on wall; then refer to pre-printed cards to prompt any issues missed (20 minutes)
- Feedback to the main group in plenary of findings from small groups and discussion of issues arising (15 minutes)
- Distribution of information packs to all participants, covering issues from all five of the Drugsfutures themes
- Introduction to agenda for following day, questions and distribution of pre-event questionnaire for people to complete and bring back the following day
- Thanks and close

Saturday 3 February 2007, 9.45am (for 10am start) to 4.30pm

- Introductions and overview of day, and introduction of AMS representative (and restatement of purpose of project)
- Presentation by Professor Phil Cowen to introduce current state of knowledge about the brain and mental health (10 minutes), followed by questions and open discussion (35 minutes)
- 3 small groups (with expert moving around) to consider scenario and identify positive and negative issues, and additional information the groups need (1 hour)
- Plenary feedback to the main group of findings from small groups (45 minutes)
- After lunch, plenary session to revisit earlier discussion, with initial consideration in groups of 2-3 people, to consider attitudes towards mental health and drugs and wider implications (20 minutes)
- 3 small groups, each looking at specific questions on a scenario on a different topic: drugs and young people, drugs for a smarter brain, and drugs and the law. Groups left to discuss without facilitation but with member of group nominated to keep flip chart notes and feedback to the main group (55 minutes)
- Plenary feedback to the main group of findings from small groups (30 minutes)
- Each group to go round and look at notes from each group and mark with a green dot those they agree with, and a red dot those they do not, and consider which issues were difficult and why; to identify where there were agreements, differences and questions (30 minutes)
- Plenary session to summarise next stages; distribution of information logs for people to use to keep notes of the process; request for participants to keep diaries of interesting issues, press coverage etc that they see; any outstanding questions; mention website; give dates etc of the next session
- Thanks and close, and initial fee paid.

After the first event, a summary of the findings from that event were circulated to all Brainbox participants, to ensure they agreed with the way the findings were presented. In addition, a summary of key points from the five regional workshops was circulated to all Brainbox participants, so they could see what was being raised elsewhere.

The main elements of the second Brainbox event were:

Friday 30 March 2007, 9.45am (for 10am start) to 4.15pm:

- Welcome and introductions, including by AMS to nature of the project and importance of public engagement to their work on the issues, followed by questions.
- Introductions to experts, observers (including the evaluator) and media, and overview of the agenda for the 2 days, followed by questions
- Film of Drugsfutures launch shown
- Small group discussions on the main themes from the previous session to see what is missing, what is agreed with and where disagreement, followed by plenary to allow each group to report back to the whole group (45 minutes in total)
- Preparation for presentations: participants work in groups of 3-4 people to develop questions related to tasks in their packs (10 minutes), followed by presentation on cognition enhancers by Dr Danielle Turner, University of Cambridge, and Dr Rebecca Roache, Future of Humanity Institute, on the ethical issues of cognition enhancement, followed by questions and answers, and review of main points of learning (50 minutes)
- After lunch, preparation and presentations on recreational drugs by Daren Garratt from the UK Harm Reduction Alliance, on harm reduction, and Keri Tozer and Sue Garnett from the Relay Project, Merseyside, on the future of recreational drugs and how they can be controlled, from an ex-user's perspective, followed by questions and answers, and review of main points of learning (60 minutes)
- Preparation and presentations on drugs for mental health by Robin Felton, Alzheimers Society Birmingham and Solihull branch on dementia care, and Rebecca Swift from Birmingham and Solihull Mental Health Trust on promoting positive awareness of mental health issues, followed by questions and answers, and review of main points of learning (60 minutes)
- Panel session with the experts who had spoken so far, to review the main issues that arose and discuss further including through questions and answers with the panel (30 minutes)
- Closing session, to take any outstanding questions and review agenda for following day.
- Thanks and close

Saturday 31 March 2007, 9.45am (for 10am start) to 4pm:

- Welcome and outline of tasks for the day
- 3 small groups to develop priorities on the benefits and hopes, concerns, research needed and control and regulation on cognition enhancers (25 minutes)
- Feedback of findings from small groups to plenary session (20 minutes)
- 3 small groups to develop priorities on the research needed, services and resources, education and information and control and regulation on recreational drugs (25 minutes)
- Feedback of findings from small groups to plenary session (20 minutes)
- 3 small groups to develop priorities on the research needed, services and resources, education and information and control and regulation on mental health drugs (25 minutes)
- Feedback of findings from small groups to plenary session (20 minutes)
- After lunch, initial polling (using hand held electronic voting pads) to vote on priorities and trade-offs, based on priorities identified earlier (45 minutes)
- 4 task groups, each to prepare a presentation on one of the themes: cognition enhancers, mental health drugs, recreational drugs, and control and regulation (30 minutes)
- Presentation (to AMS, and to whole group) of findings from small groups (30 minutes)
- Reflection on the process, completion of evaluation forms

- Thanks and close, and payment of final fees.

7.2.4 Materials to aid discussions

A range of materials was given to participants to support their discussions including briefing notes and additional background on the scientific knowledge about the issues under discussion. They were also given future scenarios and print outs of the presentations by experts. Each person was asked to keep a diary of information they saw on the issues between the two sets of events, and everyone was given an information log in which to keep their own notes.

7.2.5 Expert input

As outlined above, there was one expert at the first Brainbox event, and seven experts at the second event. The expert input provided a range of types of expertise, from academic scientific research to feedback from public and voluntary sector service providers and a project for ex-drug users. This mix of input was designed to give the participants access to a good range of different types of knowledge and experience of the use and regulation of drugs.

The expert input in the first Brainbox took the form of a presentation followed by the expert taking part in group discussions. At the second Brainbox event, the experts each made a presentation (after participants had been given a chance to work in small groups to prepare their own thoughts), followed by question and answer sessions on each of the three drug types (cognition enhancers, drugs for mental health and recreational drugs). There was then a panel session for more general questions and answers across all the issues.

7.2.6 AMS involvement

The AMS Project Manager attended the second day of the first Brainbox session, and both days of the second session. He provided initial information on the overall AMS project, and how the public engagement work fitted in, and how the results of the engagement would be used by the AMS Working Group in developing their overall recommendations. A member of the AMS Working Group attended part of the second Brainbox event to hear the public discussions first hand.

7.2.7 Recording and reporting

The comments from participants at both Brainbox events were collected by table facilitators on flipcharts. Some of the work was developed and presented by participants themselves, so their notes formed part of the record. The findings from the first Brainbox session (and a summary of findings from the regional workshops) were circulated to all Brainbox participants between the two sets of events.

The findings from the Drugsfutures project overall were presented in the OPM final report to the AMS in May 2007, although preliminary results were fed through to the AMS Working Group as the process continued so they were aware of issues coming up even from the early stages. The feedback from the workshops was reported separately from the feedback from the online consultation, so that differences and similarities can be easily seen between the views of these different audiences.

OPM wrote to all participants immediately after the public engagement activities were completed, to inform them of the timescales of the remaining stages of the AMS work on this subject and likely publication dates for various reports. OPM also wrote to all participants when the final AMS Working Group report was published in June 2008, providing details of the weblink.

7.3 The effectiveness and value of the Brainbox workshop

The assessment that follows is based on analysis of the questionnaires from the both the Brainbox events (see Annex 4 for detailed analysis). Questionnaires were distributed to all participants at both events: at the end of the first day of the first session (for participants to complete and return the following day), and at the end of the second day of the second session, with time before they left to complete and return the forms, before the fees were distributed. A return rate of 92% was achieved in the first session, and 96% at the second session.

It is important to note that not all participants are able to easily complete questionnaires, because of disability or literacy problems. It is therefore unlikely that there will ever be a 100% return rate from workshops with public participants.

In addition to questionnaire research and analysis, interviews were carried out with 5 participants, plus 4 of the experts who participated in the events. Informal interviews with those at the AMS and OPM also covered these events.

7.3.1 General feedback

The feedback overall from questionnaire respondents from the Brainbox events was very positive:

- **100% of questionnaire respondents said they were satisfied** with the structure and organisation of the event; of these, **68% said they were very satisfied**; no-one said they were not satisfied.
- **100% of respondents said they enjoyed taking part**; of these, 55% agreed strongly that this was the case.
- **100% said there should be more events** like this to involve the public in discussing these sorts of issues.
- **96% of respondents said it was important** to involve the public in discussing these sorts of issues; of these, **91% said it was very important**.
- **95% of respondents said they were more likely to get involved** in these sorts of events in future as a result of being involved in this process; of these, 86% agreed strongly that this was the case; only 1 person disagreed.
- **96% said the event met their expectations** and delivered what they hoped: of these, 32% said it met their expectations **completely**.
- **95% agreed they were able to discuss the issues** that concerned them; of these, 50% agreed strongly that this was the case, and no-one disagreed.
- **95% agreed that the event was well organised and well structured**; of these 45% agreed strongly that this was the case, and no-one disagreed.

These are extremely positive results, with over 90% of questionnaire respondents giving positive feedback on the whole process. These findings reflect conclusions from observation, from which it was clear that participants were fully engaged and enthusiastically debated the issues throughout the process.

Comments included:

"There are no negatives. I thoroughly enjoyed it" (participant interviewee).

"I did find it quite interesting and did really enjoy it. I learnt about things I didn't even know existed" (participant interviewee).

In terms of expectations, there was clearly a high level of delivery on what was expected and hoped for. The pre-event questionnaire to participants asked open questions about participants' motivations for involvement and expectations. The findings were, in summary:

- **43% of respondents said they got involved because they were interested in drug issues**, and 30% said they got involved for the money but then also had another reason for taking part (e.g. they then became interested).
- **35% said they wanted the process to give the public a chance to find out more / gain information**, and 13% said they wanted it to provide an opportunity to give feedback and make input.
- **91% said they personally hoped to gain knowledge and understanding**, and 26% said they wanted to hear other people's views.

91% of pre-event questionnaire respondents were satisfied with the briefing materials and information they had received, 96% were clear about the purpose of the process at that point, and 92% were clear about their own role in the process and what they were expected to do. Some of this information was provided on the first day of the first session, rather than in written material, so this feedback is not entirely related to written information. However, the fact that 96% of post-event questionnaire respondents said the event had met their expectations, suggests that the initial briefing materials were understood and valuable to participants even if there was less detail than respondents had wanted (see below).

The main feeling respondents expressed in approaching the event was that they were **'interested'** (87%), although 13% also said they were 'nervous'; the main feeling therefore does seem to have been related to curiosity and interest rather than much anxiety, which suggests that initial briefing was reassuring and encouraging.

The only issue where there was slightly less universal positive feedback was on there being **enough time** for participants to say everything they wanted: although 63% of questionnaire respondents agreed there was enough time, only 36% agreed strongly, and 28% disagreed. There was similar feedback from interviewees: 3 out of 5 said there was enough time to get through the main issues, and 2 disagreed.

There was also a very positive response overall from the interviews with participants at the Brainbox events. All 5 interviewees said they thought that everyone had an equal chance to have their say, and that they could talk about the things they wanted to. 4 out of 5 felt there was a good mix of people (see section 7.4 below).

Comments included:

"I expressed what I thought and I guess you have to assume it will be listened to" (participant interviewee).

"Everyone was given the opportunity, though obviously some people wanted to say more than others" (participant interviewee).

The expert speakers also had largely positive feedback on the way the Brainbox was designed and delivered:

"It worked very well. I had a volunteer – a service user - with me. I think people were genuinely interested in what we had to say ... It went really well" (expert interviewee).

"I really enjoyed it and got some excellent feedback, so that's encouraging" (expert interviewee).

"It's a very interesting initiative. I deeply enjoyed my involvement" (expert interviewee).

"The whole thing was very well organised. I thought it ran very well" (expert interviewee).

"The presentations were very good generally and the flow of everything, the break-out groups etc. Very professional" (expert interviewee).

All 5 participant interviewees said that they were **more likely to get involved** in discussions on science and technology in future, as a result of their experience here. 2 of these said they would like to get involved in a similar way, in a workshop, although one mentioned they would prefer an ongoing process.

Comments included:

"There should be an ongoing process – not sure how though" (participant interviewee).

"Yes, more likely ... Probably with similar events. I found out things I never dreamt of" (participant interviewee).

"I think this kind of thing would be good – it is good to get a mix of people together and to hear other people's views" (participant interviewee).

"I would really like to be involved if anything like this happens again in the future ... What we did was good, but it might be good to go to clinics to see what really goes on, or to have smaller sessions with the sponsor so we can talk directly with them" (participant interviewee).

"I would be interested in doing more. Don't get me wrong, the money was good, but the discussion was interesting too. I like talking about this kind of thing so would like to be kept in mind in future if there are any more of these things going on" (participant interviewee).

7.3.2 Impact of participation in the Brainbox on participants' views and understanding

The feedback from participants in the Brainbox on the impact of being involved on their own views and understanding was, in summary:

- **100% of questionnaire respondents said they had learnt something** they did not know before; of these, **64% agreed strongly** they had learnt something and no-one disagreed.
- **100% said attending this event had helped them think more clearly** about the issues; of these, 73% agreed strongly and no-one disagreed.
- **45% agreed that they had changed their views** as a result of attending the event (23% disagreed, and 18% either did not know or neither agreed nor disagreed). 50% disagreed that the event had made no difference to their views (so **50% felt it had made a difference to their views**); 32% agreed attending had made no difference to their views and 14% either did not know or neither agreed nor disagreed. 59% agreed that the event had reinforced the views they already had; 14% disagreed.

This is a very high level of positive feedback from participants on the impact of the event on helping them to think more clearly, and learn something new. This is even more positive feedback than from the regional and outreach workshops, and is a strong indication of the positive value respondents placed on attending the event. It is also a very strong indication of the success of the Brainbox process in terms of general public education on these issues.

Around half of the respondents felt taking part had an impact on their views. As identified in previous sections, however, the picture on changing views is always complex. It is common in feedback from public engagement processes that participants do not generally say they have 'changed' their views, so these figures are really quite remarkable, with 45% saying they had changed their views, and 50% who felt it had made a difference to their views.

Of course, it is worth noting that any single participant may have changed some views, had other views affected, and had yet other views reinforced, so the picture is not simple. The conclusion can be drawn, however, that this feedback clearly shows that the workshops did have a significant impact on participants' views.

Comments included:

"It made me very interested in the drugs to make you smarter and the moral implications of that. Also the issue of illegal drugs and how people affected by that, victim or not, are treated. We need to make it more open and remove the stigma" participant (interviewee)

"It has made me more alert about the issues. If I saw something in a paper about drugs now, I would read it" (participant interviewee).

"Yes, definitely [made a difference]. Before it was a case of "people do drugs because they want to" but now I'm more aware of those who take drugs because they have to for health reasons" (interviewee).

The positive feedback from questionnaire respondents is reinforced in the interviews with participants in the Brainbox:

- All 5 interviewees said they had learned something as a result of taking part.
- 3 out of 5 said it made a difference to their thinking on drugs and brain science.

In addition:

- 4 out of 5 participant interviewees also said being involved had made a difference to their thinking on consulting the public on these issues. Comments included:

"Yes, I don't think the public are consulted enough on these issues" (participant interviewee).

"Yes, definitely [made a difference]. My attitude now is that you should involve people" (participant interviewee).

All 5 interviewees said they had **talked about the issues raised at the workshop with friends and family**, after the event. Comments included:

"I had a word with my son-in-law about cognition enhancers as he's in the Navy. He said he was aware of them but had no direct experience of them" (participant interviewee).

"The main ones were the Alzheimer drugs and brain enhancing drugs – I discussed these with many people" (participant interviewee).

"Yes, a lot of them – drug addiction to cocaine and methadone, legalising marijuana and other things. I discussed them with my partner for a couple of days after the workshop, but then things went back to normal to be honest" (participant interviewee).

Although these are small numbers, this could be seen as a good widening circle of dissemination in terms of public education on the issues of drug addiction and brain science - even if only judged on increasing levels of interest and awareness rather than assuming that a great deal of detailed information was passed on.

One very specific measure of the extent to which respondents changed their minds is on the issue of whether they would take a drug that made them smarter and was relatively safe. Participants were asked the same question in the pre-event questionnaire and the post-event questionnaire.

The answers were as follows:

| | Yes | No | Not sure |
|-------------------------------|---------|----------|----------|
| At the beginning of the event | (1) 4% | (13) 57% | (8) 35% |
| At the end of the event | (6) 27% | (7) 32% | (6) 27% |

This is a significant shift from those saying 'no' (and to a lesser extent from those who were 'not sure') to more saying 'yes'. This shift suggests a greater level of trust in the positive potential of these drugs at the end of the process. The implications of these shifts of opinion in terms of content are explored more fully in the final OPM report, but the changes clearly show that participant views were affected by what they heard from experts and each other.

7.3.3 Feedback on issues of conflict and consensus

Participant interviewees were asked about the extent of conflict and consensus on specific issues, and which issues these were. Overall, these questions did not work as well as other evaluation questions and there is no clear feedback on the extent of conflict and consensus, nor on the issues affected.

Comments from Brainbox participants on these issues included:

"People were very conscious that this is a part of our lives but the degree to which we are affected by it is different. There was a feeling of caution but also of optimism I think" (participant interviewee).

"Some believed it [drug use] should be criminalised and punished. Others felt you had to take a more pragmatic approach. Also the word 'drugs' has negative connotations – there was some agreement that we should find an alternative word for drugs that help quality of life" (participant interviewee).

"It was hard for anyone to come to any hard conclusions on most of the issues as they were quite difficult" (participant interviewee).

"The brain enhancing drugs – some people were all for it, but I would say about half were worried about the long-term side effects and addiction" (participant interviewee).

"A lot of people were very much in agreement against supporting people with a drug addiction where they were robbing to feed their habit. They were against spending more money on helping them because the feeling was that if they were out there robbing then they should go to jail" (participant interviewee).

"I wouldn't say complete disagreement, but more a 60/40 split. Some people said we shouldn't spend so much on the elderly as they didn't have much time left, so we should spend more on young people. Others disagreed" (participant interviewee).

Overall, the impression from the feedback is that participants judged conflict and consensus on whether the general view accorded with their own view - so the conflict and consensus was judged on the extent to which the others agreed with them personally rather than whether there was conflict and consensus overall.

On reflection, these issues of conflict and consensus were not best investigated through simple questions to participants or expert speakers about the process, and may be better served by the analysis from OPM on the content that emerged, and the extent to which the majority of participants supported different points and ideas.

7.3.4 Feedback on the provision of information and expertise

- 100% of questionnaire respondents said that they were satisfied with the briefing materials and information they received; or these, 59% were very satisfied.
- 100% agreed that the information provided was fair and balanced; of these, 32% strongly agreed and no-one disagreed.
- 100% agreed that the experts were helpful and clear; 45% agreed strongly.

This extremely positive response to the input of the experts and to the information provided in writing shows both were very highly valued and that the written information was trusted to be fair and balanced.

From observation, the printed information circulated at the event worked well to support the discussions, although not all participants found it easy to manage all the information during the course of the event. However, the participants clearly understood the information provided relatively quickly and had no hesitation in asking questions if there was anything they did not understand.

However:

- **54% of respondents agreed that they would have liked more information in advance;** only 2 people disagreed, although 32% neither agreed nor disagreed.

As noted earlier in this report, there is always a balance to be struck between providing sufficient information in advance to effectively brief participants, but without overloading them or unduly influencing their thinking before they meet together. In addition, the feedback on the extent to which the process met expectations (see section 7.3.1 above) suggests that the initial briefing materials and information did provide some useful and valuable input. However, in this case, the large proportion of people wanting more information in advance suggests that slightly more could have been provided in this case.

Comments on information provision included:

"I'm more of a visual person so would have needed more time to take away the written stuff. I benefited more from the presentations and the people who came from Liverpool who worked with drugs and people dependent on drugs" (participant interviewee)

"All the areas were covered in terms of the aims of the consultation. We were given lots of leads and websites to follow up on, but the process was quite intensive and I'm not sure how everyone actually had time to look at those" (participant interviewee).

"It was quite a lot to take in" (participant interviewee).

"There was a lot of it, but it was quite detailed, so I thought it was good" (participant interviewee).

"They seemed to be able to answer everything" participant (interviewee).

"Any questions I had were answered" (participant interviewee).

"I think the written stuff was very good, but also the opinions of the experts were very good, especially the woman who used to be a drug addict – it brought home some of the problems more clearly" (participant interviewee).

In terms of which of the resources provided were the most useful, questionnaire respondents said that **information from experts was the most useful** (95% said that), followed by the written briefing notes on the topic (45% found those useful); only 4 people (18%) found the scenarios useful. Only 4 people (18%) had found the website useful.

These are higher rates of satisfaction with the experts than at the regional workshops (where 58% said experts were the most useful source of information), and also higher rates of satisfaction with the written briefing materials (30% of respondents from the workshops found those the most useful). This suggests that the input of experts and the use of written briefing materials did work better for participants at the Brainbox than at the regional workshops.

Brainbox interviewees' feedback was very similar. All 5 interviewees felt the information was fair and balanced, and that the information was clear and understandable. 3 out of 5 thought there was enough information provided in advance and on the day (2 would have liked more information in advance), and 2 said they felt there was information missing.

Expert speakers interviewed were also positive overall about the quality and relevance of the information provided. Comments included:

"I think there was enough information. Plenty. Obviously some of it was a bit scientific, a bit complex but people do grasp things quite quickly" (expert interviewee).

"I was impressed with the reception by participants of some quite complex information, so I think the content and the manner of giving the information was appropriate" (expert interviewee).

"Seemed to me there was a very fair presentation of the issues. On reflection, I was a bit confused by the thing on performance-enhancing drugs in sport. It lost me a bit ... But in general the presentations were very balanced and understandable" (expert interviewee).

Participants were also asked if they **remembered any specific piece of information** as particularly useful, and this gained only a relatively low response from questionnaire respondents (as did the same question at the workshops). However, all 5 participants interviewed said they remembered a particular piece of information that made a real impact on what they thought. Examples of information remembered included:

"That there is such a thing as a drug that can improve your mind" (questionnaire respondent)

"Number of population who will suffer mental health problems in future years" (questionnaire respondent)

"Cognition enhancers used to keep soldiers [awake] for 64 hours without giving them a choice" (questionnaire respondent)

"I was a bit concerned about cognition enhancers after hearing about them" (participant interviewee).

"The drugs for soldiers to keep them awake, as I used to be in the Army. I don't agree with it" (participant interviewee).

"The one thing I was concerned about were the brain enhancing drugs. If you need drugs for health reasons then fine, but what about the future implications? I have young children and my sister's are slightly older. If they start taking these brain enhancers will they get addicted, will they lose confidence without the drugs, will they be at a disadvantage if all their friends are taking them but I don't allow them to? There are lots of questions" (participant interviewee).

"I found the drugs used for health reasons very interesting, but I don't think we touched on it enough" (participant interviewee).

In terms of who participants **trusted most to provide them with information**, they rated health professionals highest (64% identified them), followed by academics (36%), and 23% trusted the media (TV or newspapers). Only 2 people said they most trusted friends (9%) and family (9%).

These are very different findings from the regional workshops: although both sets of participants put health professionals first, and trusted them to almost exactly the same degree (64% at Brainbox, 63% at the workshops). Otherwise, the participants at the workshops put friends and family next, alongside academics, and ranked media very low (only 5% of workshop respondents trusted the media).

It is not possible to say definitively why this may be the case but, given the very high levels of satisfaction at the workshop with the expert speakers, this may have shifted their perceptions of academics to a higher position (24% of workshop respondents trusted academics most, compared to 36% of Brainbox respondents). In terms of trusting the media, the Brainbox participants were specifically asked to monitor coverage of the issues in the media in between the two events, and that may have affected their views.

In terms of the **website**, it was clear that few participants had used it. 4 (18%) questionnaire respondents identified the website as the most useful source of information, and only 2 of the 6 interviewees had looked at the website at all. Comments included:

"I tried to register before and I was unsuccessful, but I did manage to register after the consultation. I haven't looked at it since I registered" (participant interviewee)

"Yes, I had a look for a bit of education during and after the events" (participant interviewee).

As with the regional workshops, this suggests that a website may be useful for participants during and after taking part in a face-to-face discussion, as well as for those who do not take part in any specific events. However, the website could perhaps not be relied upon as the only way of supporting large numbers of participants as few had looked at it in this instance.

7.3.5 Feedback on the purpose and influence of the process

There was remarkably positive feedback from Brainbox questionnaire respondents on the extent to which the outputs of the event reflected the discussions that took place, and reasonably positive feedback on the clarity of the information they were given about the process, and the level of influence it would have:

- **100% agreed that the results of the debate genuinely reflected the discussions** that took place at the events; of these, 32% agreed strongly
- **55% believed that the people who commissioned the event would take notice** of the results; of these, 23% agreed strongly and no-one disagreed - although 36% said they neither agreed nor disagreed (which suggests they were not sure)
- **55% agreed they were clear about how the results of this process would be collected and used**; although only 14% agreed strongly, 18% disagreed and 27% neither agreed nor disagreed.

The first finding above, about the results of the debate reflecting discussions, is important feedback in assessing the extent to which the findings reported in the final OPM report are considered valid by participants themselves. Although they could not comment on the way their conclusions were summarised in the OPM report, they clearly felt that the points they wanted to make would go forward. This may have been at least partly due to the fact that the process was designed to ensure that the participants themselves collated and presented their own findings to the AMS and to the rest of the group during the events. Those presentations could then provide the raw material for the final OPM report.

The second and third findings are less positive, with fairly strong minorities clearly unsure either about how the results would be used or about the amount of influence they would have over the AMS. Both these are lower levels of trust in these issues than were found at the regional workshops (where 80% of respondents thought that the AMS would take notice, and 73% were clear about how the results would be used).

There was rather less negative feedback on these issues from Brainbox interviewees. All 5 participant interviewees said they were clear about how the events they took part in fitted in to the overall Drugsutures project. 3 out of 5 said they were clear about how the information collected would be used, but the other 2 were not sure. Comments included:

"I have got a rough idea, but I'm not completely certain. I trust the experts are as honest as I am so trust that they will use it well" (participant interviewee).

Interviewees were also less negative about the potential influence on the AMS. Although only 1 said definitely that they thought the AMS would take notice of what had been said by the public participants, only 1 said definitely that they thought the AMS would not take notice; the remaining 3 said they 'hoped so', and thus clearly remained optimistic. Comments included:

"I tend to trust the professionals, so yes I hope so" (participant interviewee).

"One hopes that they would [take notice]" (participant interviewee).

There were, however, a few negative and suspicious comments, which suggests that these respondents did not trust the process as much as some of the others:

"Felt there was a hidden agenda" (questionnaire respondent)

"It is nice to think we were being made aware of the issues, but at the end of the day I'm still not sure if it'll make any difference. If the Government have already made a decision then they will stick to it regardless of what we say" (participant interviewee).

"Honestly, no I don't think so [they will not take notice]. They were only interested in asking the questions on what they wanted to talk about. Anyone who said something they didn't want to hear got brushed aside, not in a nasty way, but more subtly" (participant interviewee).

"The people giving the discussion, the academy, should have been more open about what we were there for" (participant interviewee).

"I think the people running it could have been a bit more honest about who was behind it and what the reasons were for doing it all. They could have said "we're trying to promote this, what do you think?" (participant interviewee).

From observation and informal interviews, it did seem that, by the end of the second Brainbox event, participants were becoming much more informed about engagement processes, and developing some critiques and greater sensitivities about how their input would be used and the level of influence that input would have. Although a majority were clear and trusted the process, this was not a very strongly felt enthusiasm or belief (with less than a quarter agreeing strongly on either of these issues).

It is not entirely clear why participants became more critical of the process over time. From observation and informal interviews, it could have been related to wanting to know more details about how their views would be used, and what would happen next - as the participants' knowledge and interest in the subject matter and the process grew, so did their interest in their role and level of influence.

7.3.6 Feedback on value for money

Participant interviewees were asked the question: 'Public consultation obviously has financial costs. Do you think it is money well spent, or not?' 4 out of the 5 interviewees said they thought it was money well spent.

Comments included:

"Absolutely [well spent]. I'm not sure how representative the people were, but consultation is an area that really needs to be developed further. People have a lot to contribute even if they don't know they do" (participant interviewee).

"Any money spent on these things is money well spent" (participant interviewee).

Not all participant respondents agreed. One said:

"I don't think it was worth it because some people were only there for the money" (participant interviewee).

The expert speakers also felt, overall, that the costs of these exercises are generally money well spent, although they also felt that such as assessment is always difficult.

Comments included:

"I think if it leads to better policies that work better then it's going to save money in the long term and save a lot of suffering as well. There are too many decisions made without really looking at the issues" (expert interviewee).

"I'm in favour of public involvement but a cost benefit analysis is terribly difficult. My own research uses public money and has a public responsibility though, as I say, cost benefit analysis in this regard is very difficult" (expert interviewee).

7.4 What worked best at the Brainbox

From observation and informal interviews, questionnaire responses and interviews, the following aspects of the Brainbox events worked most effectively.

- **Quality of discussion.** From observation, and feedback from expert speaker interviewees, it is clear that the quality of discussion, and the interest and enthusiasm of the participants, was high. Comments included:

"Given there was a lot of information that could be quite bewildering I thought the groups coped very well. Obviously there were some pre-conceived ideas about mind-enhancing drugs but I think people got to question what they thought" (expert interviewee).

"Quality seemed good from what I was involved in, though you always get some people who want to dominate ... I was asked to sum up and we got some very interesting questions and comments" (expert interviewee).

"I thought there was high motivation and people remained engaged. The scenarios were relevant. People talking in the breaks were very positive about the discussion and the event itself" (expert interviewee).

"It [the quality of discussion] was good. It's interesting that the principles of the discussion by members of the public are really no different from those in an academic discussion, though the language might be different" (expert interviewee).

"I thought people were really on the ball. Nobody was there looking bored. I guess these events are organised to keep the momentum going, so people feel it's moving along all the time – keeping people involved and interested" (expert interviewee).

"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).

- **Recruitment and representation.** The participants at the Brainbox represented a robustly diverse cross-section of the British public in terms of gender, age, ethnicity and social class (see Annex 4 for demographic statistics on questionnaire respondents as proxy for analysis of participants). There was clearly good representation from a very wide range of social backgrounds and levels of knowledge about the subject.

There was also a range of experience of engagement processes, although by far the largest proportion of participants had never been involved in a process of this type before: 73% had never been involved before, 9% (2 people) had been involved 'not much'. 14% (3 people) had been involved quite a few times, but no-one had been involved 'a lot'.

4 out of 5 Brainbox participant interviewees said there had been a good mix of people at the event, with the only 1 person disagreeing because they would have liked more young people attending. This perceived lack of enough young people participating is borne out

by the statistics from questionnaire respondents (Annex 4): although there was a good mix overall, only 2 of the respondents at the second session were aged between 16 and 24; there had been 4 at the first session. Comments from interviewees included:

"I felt younger people should have been there. Perhaps the timing wasn't helpful as they would have been at work or college" (participant interviewee)

"I thought the cross-section was quite good, especially across different age groups" (participant interviewee).

"I don't think kids should be included anyway, but yes it covered everyone else. There was a good mix of old and young, different races and male and female" (participant interviewee).

"There was a good mix of ages and backgrounds" (participant interviewee).

Not everyone agreed that a mix of people is enough to achieve a good discussion:

"I thought there was a very good mix, yes, but a lot of people who were there didn't want to give an opinion – they were just there for the money. A good mix of people doesn't necessarily give you good participation" (participant interviewee).

The expert interviewees also agreed there had been a good mix of people at the event. Comments included:

"I think there were enough people there. Maybe it would have been better if there were some younger people there, maybe some teenagers, late teens. The next generation sort of. We should be reaching out to younger people who think it'll never happen to them or they pretend not to care one way or the other" (expert interviewee).

"There was a very good mix. There seemed to be a range of ages, for example. And everyone seemed very responsive" (expert interviewee).

"There was certainly a mix of participants – quite diverse groups. I guess in the discussions there's always a problem with some people who dominate – not everybody gets a chance to speak" (expert interviewee).

- **Learning, knowledge and understanding.** Learning, gaining knowledge and understanding were the most important aspects of the event for many people. 55% of questionnaire respondents identified this as the most important aspect of taking part for them, and 4 out of 5 interviewees identified learning as the main thing they gained from being involved.

Comments included:

"Learning a lot of new information that I didn't know before. It opened my eyes a lot" (questionnaire respondent)

"Information from experts opened my mind" (questionnaire respondent)

"I learnt a lot and it has made me keen to learn more" (questionnaire respondent)

"Yes. It raised my awareness – I will look more at portrayal of the issues in the media and movies" (participant interviewee).

"I learnt no end of things. The only things I knew at the time was what you read in the paper about recreational drugs, like the Pete Doherty figures, but I wasn't aware of all the research that went into new drugs like cognition enhancers. Also I learnt more about Alzheimer drugs and have been reading up on things I've seen recently. I am all for new drugs in medicine, but they are so expensive they can't be used. It's the same with a lot of the new cancer drugs" (participant interviewee).

"It opened up my mind to new things going on. I didn't realise there was so much going on and so many new advances ... I got a better understanding of drugs and tests, and of how far advanced we actually are" (participant interviewee).

"It made me aware of the issues around brain enhancing drugs and the fact that they even exist. I will look out for them in future – it's quite scary that you can buy them over the internet" (participant interviewee).

"It opened my eyes to drugs education and what they're actually doing about it – it should be more publicised" (participant interviewee).

- **Group discussions and hearing other views.** The feedback from 3 out of 5 Brainbox interviewees was that the work in small groups was the aspect of the process that worked best.

The enthusiasm in the feedback from respondents in the Brainbox generally about the value of working with other participants in small groups was rather less than had been the case in feedback from the regional workshops: only 1 or 2 Brainbox questionnaire respondents identified issues such as discussion throughout, and listening to others, as the best aspect of the event for them.

This difference in the aspects of the process most valued by respondents may be related to the different emphasis placed in the design of the Brainbox events on input from expert speakers, where it took up much more of the time (particularly in the second session). Certainly, the Brainbox respondents were very positive about the expert input (see below). However, only 2 of 5 Brainbox interviewees thought the experts were the aspect of the event that worked best (compared to 3 identifying to working in small groups), so there is clearly value in both elements of the approach.

Comments included:

"The ability to discuss issues and learn new things [was the most important aspect]" (questionnaire respondent)

"There was a lot of opportunity to work in small mixed groups, and changing them around worked very well" (participant interviewee)

"It was nice to be broken up into groups with a mix of people. We had the opportunity to get the range of views from everyone" (participant interviewee).

"Being broken down into smaller groups with experts. It made us feel like our opinion was being heard, as everything we said was written down and brought back to the whole group" (participant interviewee).

"I don't really like speaking out in public, but when we split into smaller groups I was able to say what I wanted and then it got fed back to the main group" (participant interviewee).

One of the experts agreed about the benefits of working collectively in small groups:

"I think the ... round table format was better than the ... lecture theatre style" (expert interviewee).

- **Expert input.** As identified above, questionnaire respondents clearly valued the expert input (100% agreed the **experts were helpful and clear**). Similarly, 4 out of 5 participant interviewees said they found the input from experts the most useful source of information, although only 2 of 5 said that the experts were the aspect of the event that worked best (and 3 said it was working in small groups).

It is also clear that it was the way the experts talked to the group, their attitudes and experience, that were as important as the content of what they said. Comments from participant interviewees included:

"On the last day when the researchers came in I was surprised how candid they were. I was also surprised about how candid the experts were in saying "we don't know" – it was quite reassuring" (participant interviewee)

"Listening to the experts was really useful. The people looking into new drugs were very interesting and I would have liked to know more, but as with all new things you can't really know that much about them while they are being developed" (participant interviewee).

"It was interesting to listen to the experts – they were very clear" (participant interviewee).

"The people who are scientists who are actually doing the testing were really good" (participant interviewee).

There was also satisfaction with the willingness and ability of the organisers to respond to requests for specific experts. For example:

"We wanted to speak to an ex-user, but we did get the chance to do that on the last day. I thought it was very well done overall" (participant interviewee).

18% of questionnaire suggested that bringing in more, and different, experts would improve events like this. Comments included:

"Get more experienced ex-users or people with personal experience to talk" (questionnaire respondent)

"Having a doctor there would have been useful, as it would have been good to know more about the side effects of all the drugs" (participant interviewee).

"It was a pity that we didn't have more input from people who were actually involved in some of the issues first hand, like Alzheimer's carers and other people who deal with the issues involved every day" (participant interviewee).

"I also wanted more information on the brain enhancing drugs. Apparently they are available in America, so I wanted more clarity on what was going on over there in terms of availability, what tests have been done, and so on" (participant interviewee).

As can be seen from these comments, they are less a criticism of the Brainbox process than continuing interest in the topic and a desire for more information generally. This can therefore be seen as a positive impact of the process in stimulating interest in the subject among these respondents.

The feedback from the expert speaker interviewees was that the process for providing expert input worked well: they were generally clear about their roles, and felt that participants understood those roles.

For most of the expert speakers, this was entirely new: most had not been involved in these sorts of engagement processes before, and they were generally very positive about the experience. Their comments on their prior experience included:

"It's the first time I've been involved in this sort of thing ... I was a bit nervous about the sort of reception we might get. You know, you expect the public to be a bit hostile. But they weren't" (expert interviewee).

"I've done similar things before with visiting academics. So not quite general public" (expert interviewee).

"This is the first time I've been involved in this type of thing. Obviously I've done public presentations before, but not in this sort of event" (expert interviewee).

Expert speakers also had some suggestions for improvements to the way experts relate to these types of processes, including the following:

"I think there should have been more chances for people to ask questions privately. Obviously some people wanted to" (expert interviewee).

"Maybe a better mix of type of presentation. Not just talking, but maybe some films of clinical trials, or about the experiences that drug users go through" (expert interviewee).

"Perhaps some background information [for experts] about those attending. Their likely interests / preoccupations and level of knowledge for example" (expert interviewee).

- **Giving views and being listened to.** Although only a couple of people mentioned it explicitly (only 2 people, 9% of questionnaire respondents), from informal interviews it was clear that some participants felt that having their views heard was the most important aspect of the event for them. Comments on what was important to respondents included:

"My views are noted and used to decide future policy" (questionnaire respondent)

"Hope the group's views will be taken into account" (questionnaire respondent)

"Being given the opportunity to make my views known" (questionnaire respondent)

"It was good to express my opinions as we are never usually asked" (participant interviewee).

7.5 What worked least well at the Brainbox

The direct feedback from the questionnaire respondents was, that "nothing" did not work well (14%; only counting those that said 'nothing', not those that left this question blank); 2 out of 5 interviewees also said 'nothing' in answer to this question.

Otherwise, the main complaints from questionnaire respondents were about the food and catering (18%), and limited time (18%); and that the main thing that would improve events like this would be more time with the experts, and more experts attending (18%). In summary, some of the comments were:

"We were asked to vote on certain things. You'll never know enough about it and we were only really scratching the surface. Felt a bit of a fraud but I guess it is valid as we were not meant to be professionals" (participant interviewee).

"Maybe more videos about what goes into the drugs. We had slides about that, and we had videos of people's opinions, but maybe more videos would be good?" (participant interviewee).

"On one of the days, for the second session I think it was, all we did was sit there and listen – we only moved for lunch and breaks. The following day was a good mix of stuff where we moved around more – that was much better" (participant interviewee).

In summary, the main areas of concern and ideas for improvement were as follows:

- **More information in advance.** This was probably the strongest concern expressed by participants (and some expert interviewees) about the design and delivery of the event: 54% of participant questionnaire respondents would have liked more information in advance. This is always a delicate balance for engagement organisers as they do not want

to overload participants or unduly influence them before the event, but there is clearly a demand for some advance briefing to help participants. Comments included:

"I would like to have had more information before the event as I only knew I was going a few days beforehand – more reading material and background information would have been useful" (participant interviewee).

- **Timing, and stronger facilitation.** Although 63% of questionnaire respondents felt the Brainbox gave enough time for them to have their say, and 3 out of 5 interviewees agreed, 28% of questionnaire respondents disagreed that there was enough time. In some cases, respondents wanted additional time, but others felt that the time could have been slightly better used with stronger facilitation to control discussion and move the process on. Comments included:

"There should have been more time, or at least the facilitation could have been much stronger in order to ensure that we spent equal time on all of the key issues" (participant interviewee).

"We seemed to get a bit bogged down on the issues where there were lots of conflicting views so we didn't have time to discuss everything in depth" (participant interviewee).

"There were some things we didn't have time to discuss in detail because we spent a lot of time on others" (participant interviewee).

- **Follow up.** Interviewees were asked if there is anything else they wanted to know about this work. Comments included:

"It certainly was very useful to know its going on, but I felt it was going on a bit behind the scenes. More people need to know about it" (participant interviewee).

"I think it should all be more open. TV is good as you can see visually what is going on and it is the only common theme amongst all of the people who were there – not everyone has email" (participant interviewee).

- **Repetition.** Although only 1 or 2 questionnaire respondents mentioned this, there were a few times that respondents generally complained that some materials was repeated unnecessarily. Comments included:

"First full day very repetitive - words on wall and putting them into categories. Seemed pointless as we knew what it was getting at" (questionnaire respondent)

"Going over the previous work several times on 30 March" (questionnaire respondent)

- **Lessons.** Interviewees were asked if they could suggest any lessons for the AMS and government in involving people, and the only comment was for this sort of process to be done more (as in the regional workshops).

7.6 Overall conclusions on the Brainbox

Overall, the Brainbox worked very well. The two sessions were well-designed and delivered to provide the process, facilities, information and expert input that supported participants in expressing their views.

The recruitment and representation ensured a robustly diverse cross section of the British public overall, with a range of experience and knowledge.

Respondents learned a great deal, partly from the written information and discussions amongst themselves, and especially from the input from expert speakers. They felt the process had helped them clarify their views and some had changed their views through greater awareness of the issues. These are important public education impacts that were strongly valued by the participants, who saw learning as one of the main things they gained from taking part.

Over half of respondents were clear about the purpose of the event they took part in, and believed the AMS would take notice of the results. These are reasonable levels of clarity and transparency of process, all of which contributes to participant satisfaction as well as a good quality process.

There were a few problems identified from any of the evaluation research, mainly around request for more information in advance of the event, timing and catering.

Overall, however, the Brainbox worked very well to deliver a very high quality deliberative process that involved an appropriate mix of people and provided them with an opportunity to learn, reflect and provide considered views on the subject.

8 Impacts and outcomes

8.1 Introduction

The overall purpose of the Drugsfutures public engagement processes, as part the Academy of Medical Sciences project on brain science, addiction and drugs, 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".

This section of the evaluation report considers the evidence for any impacts on the AMS policy-making processes within the project on brain science, addiction and drugs, as well as the impacts on - and value for - all those who took part: the public participants, the expert speakers and the AMS Working Group.

8.2 The AMS policy process on brain science, addiction and drugs

In July 2005, the Government Foresight programme on Brain Science, Addiction and Drugs produced the report *Drugs Futures 2025?*. The Foresight report was an independent analysis, informed by 15 'state of the science' reviews, which explored the likely impact of advances in the sciences and social sciences in relation to three types of psychoactive substance: legal and illegal 'recreational' drugs, medicines for mental health, and cognition enhancers.

These explorations led to the identification in the Foresight report of a series of difficult and sensitive policy questions. Following publication, 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 the process forward.

In early 2006, the AMS convened a multidisciplinary expert Working Group to conduct an independent inquiry into the issues raised by the *Drugs Futures 2025?* report (see section 2.5 above for the Working Group's terms of reference, and section 3.3 for the Working Group membership). The group's terms of reference identified that the main purpose of the Working Group was to consider, in consultation with experts and the public, the societal, health, safety and environmental issues raised by *Drugs Futures 2025?*.

Public engagement was therefore a core element of the Working Group's programme. Financial support for the public engagement activities, known as the Drugsfutures project, was secured from the Sciencewise programme (then run by the DTI's OSI; from 2008 by DIUS), which promoted a deliberative approach to engagement.

The Drugsfutures project was designed to run alongside other consultations with relevant stakeholder organisations (for example, scientists, research funders, health professionals, charities and patient groups) on issues that may arise from current and future scientific developments. Running the public engagement activities, stakeholder consultation and expert examination simultaneously was intended to facilitate progression towards a robust set of recommendations that were supported and informed by both scientific evidence and public concerns and aspirations.

Taking account of the Government's policy priorities for this project, and covering the three categories of drugs, the Working Group identified a number of key themes to explore during the public engagement programme. These themes were: control and regulation of drugs, attitudes towards drugs use, young people and parents, addiction and mental health treatments. These themes were not intended to be prescriptive, but simply to offer illustrations of the types of topics to be covered.

The Drugsfutures public engagement activities ran from January to April 2007, and the final report of the public engagement activities was produced by OPM in May 2007.

The OPM final report² provided a summary of the engagement process, with full descriptions of all the engagement activities, information materials used, and recruitment approaches in detailed annexes. The OPM report included a summary of the findings from all the discussions within the various public engagement activities. The report is organised in sections covering the three types of drugs being explored (recreational drugs, drugs for mental health, and cognition enhancers). There are sections on some of the themes identified by the AMS Working Group as particular priorities: drugs and young people, and control and regulation. All these issues had been explored explicitly within the public engagement activities. The report concludes with an assessment of a series of cross-cutting themes, and identifies overall hopes, concerns and priorities for the future.

The OPM report does not therefore report on the findings from each strand of the public engagement separately, which works well to pull together overall findings. However, quotes from participants, which are used throughout the report, show which strand of the process they come from (launch, outreach workshops, regional workshops or Brainbox). In addition, the findings from the online consultation were reported separately.

The OPM report was presented to the AMS Working Group in May 2007. The Working Group used the OPM report to develop their overall final conclusions and recommendations to Government, producing a draft final report in February 2008 which was published, after further peer review, in May 2008.

Although the final AMS Working Group report was not available at the time of the completion of the evaluation research, drafts were made available. From those, it was clear that the Working Group had considered the findings of the public engagement programme in coming to their conclusions. There is a separate section in the Working Group report describing the public engagement activities, and a summary of the overall findings, and specific relevant issues raised in the public engagement process are cited throughout the report (e.g. public attitudes towards nicotine and cannabis use, reasons for using recreational drugs, the importance of treatment in reducing harm and improving quality of life). In this way it is possible to see clear lines linking the conclusions and outputs of the public engagement activities with the conclusions and recommendations of the Working Group in their final report.

The final OPM research report was one source of evidence on the final findings of the public engagement exercise, and this was supplemented by regular reports by OPM and the AMS Project Manager to the Working Group on emerging findings throughout the engagement process. In addition, the Working Group could draw on the personal experience of several members of the Group who had attended public engagement events, and by the AMS Project Officer, who had attended almost all the events.

The Working Group report emphasised five key messages in its report:

1. Recent advances in brain science hold the promise of significant practical and therapeutic outcomes for treating mental illness and addiction, but additional investment is needed to ensure that knowledge continues to be advanced and translated into benefits for patients.
2. The formulation of better prevention strategies requires enhanced efforts to understand and identify the factors that put particular individuals and population groups at risk of mental illness and drug misuse.
3. Improvements are needed in our information on the prevalence, duration and type of recreational drug use in the population, to enable more effective targeting of resources.

² *Drugsfutures. Public engagement on the future of brain science, addiction and drugs.* Report for the Academy of Medical Sciences. OPM, London, May 2007.

4. Regulation and policy require a more sophisticated index of the harms caused by the use of legal and illegal psychoactive drugs.
5. Regulation and policy around recreational drugs, medicines for mental health and cognition enhancers, must move forward in a way that is informed by advances in research and the views of the public.

There is therefore a commitment to ensuring both further research and further public engagement on these issues in future. The AMS is expecting a response from Government to their recommendations within 12 to 18 months from submission, but is likely to continue its investigations in the meantime.

The Drugsfutures public engagement programme, and the BSAD project as a whole, is therefore clearly only the beginning of a long term process of review and policy development on the issues addressed. It is also clear that the AMS will continue to be part of the continuing exploration of these issues, and will continue to encourage public and stakeholder engagement as part of that work.

8.3 Value for the public participants

The following analysis draws on the previous sections analysing feedback from public participants' questionnaires and interviews, and findings from observation and informal interviews at events. From that evidence, it is possible to suggest that the main value from the process for the public participants was as follows:

- **The process worked well for public participants.** Overall the respondents were very satisfied with the process and the way it was run. The process engaged people effectively overall and the participants felt the process was very enjoyable, informative and worthwhile: 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.

Respondents particularly valued the good mix of participants and diversity of views within the events, and 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.

- **Participants learned something new.** Most 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 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 they attended.
- **Increased enthusiasm for future involvement.** As a result of being involved in this process, almost all most respondents were more willing to get involved in discussions on policy issues in future. Almost all 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 in future.

- **Having a say and being listened to.** Many participants valued having a say and being listened to by the AMS, and felt they could make a contribution to public policy and influence future decisions. There was a fairly high level of trust in the AMS, and the extent to which they would take account of the public's views, and a 'hope' that public views would inform AMS conclusions and recommendations.

This trust may have been strengthened by the view held by a large proportion of respondents that the results of the debate genuinely reflected the discussions that took place at the events. This view seems to have been established by the way that points made at the workshops were very clearly recorded by facilitators at events, and that participants often had a chance to present their own views in their own words during the workshops, and that these were carefully recorded and taken forward.

Although the main feedback from public participants was that there was 'nothing' that did not work well, there were a few areas of concern:

- **More information in advance.** Although there was generally positive feedback on the information provided, quite a few participants at all strands of the engagement would have liked more information in advance to brief them on what would happen at the workshop and on the main issues. This is always a delicate balance for engagement organisers as they do not want to overload participants or unduly influence them before the event, but there may be a need for additional advance briefing to help participants prepare for their participation.
- **Timing.** Although most respondents felt there was enough time to cover the key issues, there was some feedback that time management within sessions could have been tighter with slightly stronger facilitation to manage those who took the floor more than others. From observation, the standard of facilitation of small group discussions was generally extremely high - encouraging those who did not find it easy to talk to take part as well as controlling those who could otherwise have monopolised the discussion. However, in a few cases more control could have helped move the discussion forward faster.
- **More engagement in future.** Participants also suggested that it would improve engagement processes to have more of them; they thought it important to involve the public in these sorts of issues, and this had been a good process to achieve that.
- **More feedback to participants.** OPM wrote to all participants after the public engagement activities were completed (in April 2007) and again when the AMS final report was published (May 2008), providing participants with a weblink so they could access the AMS final report. The OPM report on the findings from the public engagement process was also published on the AMS website in May 2008.

Although OPM did inform participants about the publication of the final documents, there was no specific summary for participants on how their input influenced the AMS final report and recommendations to Government. Ideally, the AMS would have provided a summary to participants of what went to the AMS Working Group from the various public engagement activities (including the online input), and what difference that made to the final AMS Working Group report and recommendations.

8.4 Value for expert speakers

The following analysis draws on the previous sections analysing feedback from formal and informal interviews with expert speakers. From that evidence it is possible to suggest that the main value of the process for expert speakers was as follows:

- **Opportunity for public education.** Some expert speakers valued the opportunity to get their message across to new audiences in new ways. Comments included:

"I think I had an opportunity to challenge, and maybe change, the perceptions that people normally have of drug users. There was some really good feedback, so I was quite pleased" (expert interviewee).

"I think the opportunity for people to hear a range of views [was the best thing] – not just liberal views. It was obvious that people don't know about the invisible work that goes on in the background. The participants seemed really interested in the sort of work we do and seemed to be supportive" (expert interviewee).

"I really enjoyed it. And for me it was professionally important representing [my organisation]" (expert interviewee).

"People obviously liked the subject ... and some people saying 'I never knew that' and 'That's an eye-opener'. I suppose there is quite an amazing lack of knowledge in the general public so this was all really enlightening" (expert interviewee).

"I was pleased that people were interested in what I had to say and in my opinions. You can clear up quite a few urban myths in this sort of workshop" (expert interviewee).

- **Learning about public engagement.** Some expert speakers valued the opportunity to engage with the public in ways that they had not done before; hardly any of the experts had been involved in this sort of public dialogue before and found it provided different opportunities and value from their usual activities.

Several of the expert speakers specifically said they had learnt about public engagement as a result of taking part in this process. Most said it had made them more positive about public engagement, although some also identified some of the inherent complexities of this way of working. Comments included:

"It was good to experience the workshop. It sort of set me thinking as well ... It was really interesting. I think there should be more of this type of public engagement because as far as I'm concerned it works" (expert interviewee).

"I think if it leads to better policies that work better then it's going to save money in the long term and save a lot of suffering as well. There are too many decisions made without really looking at the issues" (expert interviewee).

"It made me reflect on the public understanding of my own work and the broad diversity of views which are around. Makes me more realistic about the possibility of consensus" (expert interviewee).

"I am in favour [of public engagement]. It can be difficult to gather opinions and then do something with them" (expert interviewee).

"I think the way the break-out groups operated was very interesting. I might think about that in the future" (expert interviewee).

"I'd never really thought about it before. Even though it's very important in my work ... to get messages across to the public, I'd never been involved in this sort of event before so it has set me thinking" (expert interviewee).

"It's a very effective way of getting down to the reality and peoples' views of the reality" (expert interviewee).

"I was able to make a contribution while at the same time I learned a tremendous amount. I think schoolteachers could use these techniques" (expert interviewee).

"I was interested in some of the facilitation techniques – the use of post-it notes, for example ... It was fascinating for someone like me, a lecturer usually giving information on my home ground" (expert interviewee).

"I think the organisational technique was good - it obviously enables a type of public scrutiny which can only be a good thing. And the public feedback was interesting, even though I thought it was rather dominated and narrow, it was still a valuable process" (expert interviewee).

- **Opportunity to hear public views.** Some expert speakers saw this as a good opportunity to hear and explore public views expressed in open discussions first hand on key issues for their work. Comments included:

"It's useful and sort of refreshing to get back into a sort of community forum and to hear ordinary people making their views known ... it was useful to get a sort of reality check ... Generally it's a good thing to keep in touch like this" (expert interviewee).

"It was useful to me as a manager to get to see an up-to-date discussion of the drugs and mental health issues. You are often just too busy to keep in touch with these issues" (expert interviewee).

"It helped me test my views and adjust them. I took notes all the time" (expert interviewee).

Not all expert speakers were entirely positive about the experience. One in particular seemed to see this approach to public engagement as cutting across opportunities for their own organisation to be listened to:

"I formed a rather negative impression. I was surprised at the narrow nature of the comments and discussion, and disappointed that the workshop wasn't able to broaden things out to look at other aspects of legalisation and prohibition, for example ... I am not sure I would see this as value for money. Government needs to engage more directly with experts and to have detailed and robust consultation with groups like [my own organisation]" (expert interviewee).

8.5 Value for the AMS Working Group

Interviews were undertaken with 4 members of the AMS Working Group, to gain their feedback on the value and effectiveness of the process in terms of their own work, and the value of the outputs to them. This feedback on the value for them from the process is summarised below.

- **The engagement process was effectively designed and delivered.** The AMS Working Group members interviewed felt that the process had been well-designed and delivered by those responsible, and that it had provided the outputs that were expected and needed. However, several said they were not experts in this field and did not therefore feel they could comment on these issues.

The role of the Working Group, and Project Manager in setting the parameters of the public engagement, and staying closely involved with the delivery of the engagement activities throughout, were clearly important to the quality of the process overall.

Comments included:

"Design and delivery worked well. There again, quite a lot of planning and effort went into the whole consultation programme. So you can expect things to be well managed and implemented" (Working Group member interviewee).

"I think it's probably done what it set out to do. People can respond well to the challenges of these issues. There again, we are not dealing with aliens" (Working Group member interviewee).

"It all seemed appropriate. It was good to have had that earlier contact with the company that was running things" (Working Group member interviewee).

"I think it worked well, given that I would guess few people knew what to expect" (Working Group member interviewee).

"I think design and delivery did work well – the whole thing was potentially chaotic. I'm not sure what our expectations were about what we would hear and how we would use it" (Working Group member interviewee).

- **A worthwhile exercise.** The effectiveness of the process did impact on the Working Group's view of public engagement, generally encouraging them to consider future engagement more positively. Some clearly felt that public engagement was an essential element in the development of drugs policy.

Comments included:

"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).

"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).

"Was it worthwhile? Yes it was. Maybe a quarter of the population will experience some mental health problem in a lifetime, so the impact of the issue is very wide. I think we need to have a continuing dialogue with the public" (Working Group member interviewee).

"It was valuable for us: the issues and the findings are addressed implicitly, interwoven in our report" (Working Group member interviewee).

Not everyone was convinced of the value of engagement. Comments included:

"I am still quite sceptical about the benefits" (Working Group member interviewee).

"Maybe we shouldn't expect too much of the findings / conclusions of these sessions. I thought that was a bit weak – there was no marked change of views at the end. But I think it's right to get the arguments into the public arena" (Working Group member interviewee).

- **Learning about engagement.** None of the Working Group members had been involved in this sort of public engagement process before. One said:

"I have been involved in public consultation exercises before, but I've never actually met the public. So this was the first time" (Working Group member interviewee).

Several Working Group members mentioned particular elements of the process that they had not seen before and felt worked well (e.g. working through interactive discussions at workshops, and the drama elements at the launch). Comments on these issues are included within the sections on the launch and regional workshops.

For some, this led to greater understanding of the other methods available to test public views, and suggestions for how public engagement processes could be improved in future.

Comments included:

"We are a committee drawn from a community of experts – scientific, legal, ethical etc – but nobody had an expertise in public consultation. Some of the group were initially against it as it was likely to be biased ... We knew from the beginning that the consultation itself wasn't going to be scientific: the samples were not random. It wasn't a Gallup poll, but particular groups of people. There were serious limitations in how representative the findings would be, but the limitations were never concealed from us" (Working Group member interviewee).

"Though I am glad we did it, as a scientist I am conscious of the limitations and the bias in gathering information in this way. I would have preferred to have seen a large scale public poll as well" (Working Group member interviewee).

While several Working Group respondents valued being involved in the engagement processes as a learning exercise, some of the comments above suggest that there remains a need for greater awareness and knowledge of the principles, nature and value (and limits) of public engagement processes, so that its role in the research and development of policy recommendations can be more fully understood.

- **Quality outputs.** The feedback on the quality of the outputs from the engagement programme overall (the progress reports and final report) was generally positive. Some Working Group members found particular value in listening to public discussions first hand, while others found the written reports most useful.

The findings from the public engagement programme were only one element of the AMS overall project on brain science, addiction and drugs, and there were issues about how this evidence could easily be integrated into the overall analysis that led to the AMS Working Group's final conclusions. This integration is always a creative and difficult process, but the feedback from the Working Group respondents suggests that appropriate methods were found in this case.

Comments included:

"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).

"Yes, I think it was a good thing to attend the events and listen to the discussions" (Working Group member interviewee).

"I think being there and listening to the views / discussions was useful. For example listening to the practical considerations of those who have a keener perception of what might not work. Some thought using high street stores like Boots or Superdrug to dispense / distribute drugs wouldn't work because the staff couldn't be trusted not to take stuff for themselves" (Working Group member interviewee).

"We met with the contractor to discuss the integration - I wasn't aware of giving any greater weight to any particular source. This sort of integration isn't so different from other ways of assessing and including evidence" (Working Group member interviewee).

"It wasn't all that easy [to integrate the findings], and I'm not sure that there is an easy way. We attempted to intersperse quotes from the public consultation in the report – it was quite difficult" (Working Group member interviewee).

- **Challenged assumptions.** Some Working Group members said they had been surprised at some aspects of the personal experiences described in the engagement events, and some of the public attitudes displayed. The expert input to the process also revealed useful knowledge. Comments included:

"Meeting addicts does make an impact and makes you realise how serious the problem is, and how widespread. Also, I was surprised at how liberal most participants were about reform of the law" (Working Group member interviewee).

"I learned from the Merseyside police that they were already considering / trying approaches that we were considering as recommendations. So what we thought was innovative was, in fact, already in hand" (Working Group member interviewee).

"Frankly I was moved by the depth of feeling I witnessed. I think many of the participants had perhaps some family experience of mental health problems. 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" (Working Group member interviewee).

"I think it's fair to say that we were taken aback by the strength of public feeling and the hostility, sometimes, to the medical profession. I think this has had an effect upon our work, interwoven with other views in our report" (Working Group member interviewee).

- **Influence.** There was general feedback from Working Group interviewees that the process did provide evidence that did influence the conclusions of the AMS Working Group.

Comments included:

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

"The findings weren't critical but had some positive influence" (Working Group member interviewee).

"It's hard to say. The consultation might help some of the detail of the drafting – on the effects of regulation, for example" (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, even though it was a limited public involved in the consultation" (Working Group member interviewee).

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

"There was nothing new, for any of us, in what arose from the public consultation, but ... we were influenced by the emotional response and the strength of feeling expressed" (Working Group member interviewee).

However, some seem to have felt that the public engagement was simply a step in the policy making process that needed to be gone through, rather than expecting anything particularly valuable or influential to emerge from it. For example:

"I think the fact of the consultation was more important than the findings" (Working Group member interviewee).

"We undertook the public consultation because government pressed us to do it" (Working Group member interviewee).

- **Confidence in coming to conclusions.** The Working Group respondents suggested that there were no radically new or surprising issues or ideas emerging from the engagement programme. However, Group member respondents did feel that the findings from the engagement process did allow the Working Group to come to conclusions with greater confidence based on better knowledge of public attitudes and concerns. The process also allowed for some clarification of where there was general public consensus, or conflict, on specific issues.

Comments included:

"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).

"The conclusions weren't all that remarkable but they help reassure us that the issues as we see them are the right ones" (Working Group member interviewee).

"The findings weren't critical to our decision-making, but did offer some reassurance in the way we were proceeding" (Working Group member interviewee).

"Maybe some aspects were reinforced" (Working Group member interviewee).

- **Spreading awareness.** Although Working Group members themselves did not identify this as an issue, it is clear from the feedback from the public participants (especially in interview responses), that public participants had learned a lot, and talked about the issues with other people.

This sort of dissemination of information about the nature of the issues (rather than specific details) may be very valuable to the research and development of policy solutions as it can contribute to a better informed and thus more knowledgeable public on the highly contentious issues of drugs, addiction and mental health addressed in this process.

8.6 Conclusions

The analysis above shows that the process had significant impacts on all those involved. The public participants particularly valued the learning from the process (both from expert input and written information provided), and from having a say and being listened to. They suggested that future such processes could be improved by providing more information to participants in advance of events, tighter management of time including through slightly stronger facilitation, more engagement in future, and more feedback to participants. However, overall, almost all participants gained significant value from the process.

The value for the experts who took part was also significant, especially around the opportunity for public education on the issues, for them to learn about public engagement, and the opportunity for them to hear public views first hand. One expert felt that public engagement was not as valuable as consulting organisations, such as their own, on these complex issues, but most were very positive about the value of this type of public engagement. Overall, most of the experts interviewed felt they gained significant value from the process.

For the AMS Working Group, the value was in a good well-run process that allowed them to learn more about the views of the public. They found the outputs from the process useful, particularly hearing public views first hand when they attended events, although they also found the written reports from OPM essential as part of their policy development work. They felt that the engagement process had identified some useful insights into the areas where there was consensus, or conflict, in public views on the key issues, and had challenged some of the Working Group's assumptions about what those views might be. It also allowed the Group to learn about public engagement and demonstrated, for some of them, the value of public engagement processes and how they might be used in future.

Working Group members found that the process had enabled the policy process to move forward, partly because engagement was a step that had to be taken and partly because it had provided some genuinely useful input that influenced their policy development process, particularly in increasing their confidence that they were moving in directions that would command public support.

Finally, there was also value identified in spreading public awareness of the issues around drugs, addiction and mental health as a result of the learning, clarification of views and changes in views among public participants. In addition, several of the public participants had talked to others (such as friends and family) about what they had learned from the process, and this dissemination of awareness and interest could provide a valuable foundation for future engagement activities and policy development on these very contentious issues.

9 Assessment of activities against objectives and good practice guidelines

9.1 Introduction

The aim of the public engagement programme element of the brain science, addiction and drugs project led by the Academy of Medical Sciences 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 work 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.

The specification also stated that, in order to meet these objectives, the public engagement programme should:

- deliver a nationwide series of activities that provides participants with the opportunity to access information and views from a wide range of perspectives
- empower the Working Group by providing them with the perspectives of a broad-cross section of the public
- be flexible enough to incorporate different audiences, in particular those groups of specific relevance to, but often excluded from, debates on these topics, such as young people, drug users, and older adults
- create some form of ‘e-engagement’ to facilitate interaction between the wider public and the project
- involve constructive, ongoing and informed interaction between public participants and members of the Working Group
- identify the diversity of the views expressed but also reporting on areas of agreement
- allow time to explore changes in perspectives over the course of the programme
- be fully integrated with the Working Group inquiry.

This section of the evaluation report summarises the extent to which the process met these objectives.

9.2 Assessment against objectives

| PRIMARY OBJECTIVES | How each objective has been met |
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| 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 | Public participants were given opportunities to discuss and explore their aspirations and concerns throughout all elements of the engagement programme including small group discussions at the launch, the outreach workshops, the regional workshops and the Brainbox. |
| To 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 | Areas of consensus, disagreement and uncertainty were explored explicitly with the public through exercises in the regional workshops and the Brainbox events, including through the participants themselves recording where there were agreements, disagreements and further questions on flip charts (which were used to draft the final OPM report). The final OPM report also identifies areas of consensus, disagreement and uncertainty that arose during the engagement process. The polling at the regional workshops and Brainbox events allowed for initial views and changes in views to be captured and measured. |
| To inform the final recommendations made by the AMS for public policy and research needs. | OPM made regular reports to the AMS Working Group on the progress and emerging findings from the public engagement exercise, as well as providing opportunities for Working Group members to attend events. All these activities informed the Group's policy development process and final recommendations. The final report from OPM on the findings from the public engagement process was used directly to inform the drafting of the Working Group's final recommendations for public policy and research needs. |
| SECONDARY OBJECTIVES | How each objective has been met |
| To enable the AMS and the wider science community to increase their knowledge and understanding of public engagement and its potential for future application. | The final OPM report summarised the engagement activities undertaken throughout the DrugsFutures programme, and worked closely with the AMS Working Group to design and develop the engagement processes, so Working Group members could understand what was being done and why. Working Group members were also encouraged to attend events to see first hand how they worked, which is recognised in the field as one of the most effective methods of increasing knowledge of public engagement. Since the main engagement activities have been completed, OPM and the AMS Project Manager have given presentations to wider events for the science community (e.g. at the BA annual conference and Sciencewise events) to spread the lessons from this programme, which has helped increase knowledge and understanding of public engagement and its potential for future application. |

| OTHER REQUIREMENTS | |
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| <p>To deliver a nationwide series of activities that provides participants with the opportunity to access information and views from a wide range of perspectives.</p> | <p>Events were held in Birmingham, London, Liverpool, Exeter, Glasgow, Belfast, Merthyr Tydfil and Norwich. This provided a national series of activities. All the regional workshops and Brainbox events brought together a diverse set of people with a wide demographic profile to provide views and experience from a wide range of perspectives, supplemented by participants at and from outreach workshops (some of whom also attended regional workshops) which were designed to reach 'hard to reach' sectors of the community including young people, parents, older people, mental health service users, and ex-drug users.</p> <p>Regional workshops and Brainbox events also provided a range of scientific and professional experts, and lay people with direct experience of the issues, to make presentations, answer questions and contribute to the deliberations of the public participants. The workshops and Brainbox events also used a range of written materials providing briefing on the topics being discussed. All these mechanisms ensured that participants had access to information and views from a wide range of perspectives.</p> |
| <p>To empower the Working Group by providing them with the perspectives of a broad-cross section of the public.</p> | <p>The final OPM report summarised all the views from all the public engagement activities, which included the perspectives of a broad-cross section of the public (as outlined above). These perspectives were distilled into the main conclusions of the OPM report, and specific points quoted throughout the report identified where in the country the participant had been involved, and what the event was, so some identification of who said what could be made in terms of different sectors of the public.</p> |
| <p>Be flexible enough to incorporate different audiences, in particular those groups of specific relevance to, but often excluded from, debates on these topics, such as young people, drug users, and older adults.</p> | <p>Specific events (the outreach workshops) were used to target specific audiences, with workshops for young people, drug users and older adults. There were also events for students, teachers, parents of children with ADHD, mental health service users, mental health carers, Afro-Caribbean carers and homeless young men. All these specific audiences were identified as having particular perspectives on drugs, addiction and mental health.</p> |
| <p>To create some form of 'e-engagement' to facilitate interaction between the wider public and the project.</p> | <p>An on-line consultation took place comprising a formal on-line consultation with information materials and structured questions, plus a blog. This consultation was open to anyone in the wider public who wanted to take part. It was publicised at the launch, and at all the engagement events, as well as through direct invitations to relevant public and voluntary organisations, and extensive publicity to a wide range of email lists.</p> <p>125 people participated in the main consultation, and the blog was viewed 1,641 times. This approach</p> |

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| | <p>did facilitate interaction between the wider public and the project, although possibly did not involve as many people as had been hoped.</p> |
| <p>To involve constructive, ongoing and informed interaction between public participants and members of the Working Group.</p> | <p>OPM provided opportunities for Working Group members to attend all the public events and members did attend the launch, the regional workshops and the Brainbox. This did provide some direct interaction between public participant and the Working Group members.</p> |
| <p>To identify the diversity of the views expressed but also reporting on areas of agreement.</p> | <p>As identified above, the final OPM report on the public engagement did identify the diversity of views as well as reporting on areas of agreement.</p> |
| <p>To allow time to explore changes in perspectives over the course of the programme.</p> | <p>There was some time for those participants who had attended an outreach workshop to reflect on their initial engagement before attending regional workshops. The regional workshops themselves were designed to enable participants to build and reflect on their growing knowledge during the day, and there is evidence from this evaluation that participants did clarify their thinking and there was an impact on their views (and thus changes in perspective) as a result of being involved; these impacts are described throughout this report. The Brainbox was the main element of the programme that allowed time to explore changes in perspectives over the course of the programme as there were two separate sessions, several weeks apart, during which time participants were given additional information, and were encouraged to reflect on their views, look at stories in the media, and keep a diary. The impacts of this process on participants' perspectives were significant, as described elsewhere in this report.</p> |
| <p>To be fully integrated with the Working Group inquiry.</p> | <p>The public engagement programme was fully integrated with the Working Group inquiry in various ways: the Working Group set the initial themes for the public engagement, the engagement activities were designed in full consultation with the Working Group, progress reports and interim findings from the public engagement programme were reported directly to the Working Group, and the final Working Group report included a section on the findings from the public engagement, as well as integrating evidence from the public engagement process throughout. In addition, the Project Manager for the Working Group project overall was in close communication with OPM throughout, and attended almost all the public engagement activities. At least one Working Group member attended each of the regional workshops and Brainbox events. The public engagement programme can therefore be seen to be fully integrated with the Working Group inquiry.</p> |

9.3 Assessment against principles of good practice

It was part of the objectives of the Drugsfutures project that it should meet the Government's Guiding Principles for Public Dialogue on Science and Technology³. The full set of principles is given in Annex 6. The following analysis is based on the key principles outlined in the guidance.

| Key principles of good practice | Indicators of success | How each principle has been met |
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| 1 Context The conditions leading to the dialogue process are conducive to the best outcomes. | Be clear in the purposes and objectives from the outset. | The purpose and objectives of the public engagement programme were agreed by the Working Group at the beginning of the process. The objectives were explained to public participants and expert speakers at each engagement event. This evaluation report shows that public participants and others involved were generally clear about the purpose of the process. |
| | Be well-timed in relation to public and political concerns, and start as early as possible in the policy decision process. | The context for the public engagement programme is described in is described in section 2.5; this engagement process was timed to be fully integrated with the work of the AMS Working Group on brain science, addition and drugs, which in turn responded to the publication of the Government Foresight report <i>Drugs Futures 2025?</i> . The public engagement was therefore timed to link to policy concerns. |
| | Feed into public policy, with commitment and buy-in from policy actors. | The public engagement programme started early in the project, alongside wider stakeholder engagement led by the AMS. The aim was to run these two engagement strands simultaneously in order to facilitate progression towards a robust set of recommendations that were supported and informed by scientific evidence, stakeholder input and public concerns and aspirations. |

³ Sciencewise. The Government's Approach to Public Dialogue on Science and Technology. *Guiding Principles for Public Dialogue*. Department of Innovation, Universities and Skill (DIUS). September 2006.

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| 1 Context (cont.) | Takes place within a culture of openness, transparency and participation with sufficient account taken of hard to reach groups where necessary. | The engagement programme was open and transparent in all communications with face-to-face and online participants. Special attention was given to ensuring the inclusion of hard to reach groups (as described above under the objectives analysis), as well as offering open access to the wider public through the on-line consultation, blog and website. |
| | Have sufficient resources in terms of time, skills and funding. | The exercise was well-resourced by the AMS in terms of staff time, and funding from the Sciencewise programme. It was well-designed and delivered by a contractor with extensive skills and experience in the field, while taking care to design and deliver the process economically. The timescale was seen to be very tight but just manageable. |
| | Be governed in a way appropriate to the context and objectives. | The governance arrangements were through the independent AMS and their Working Group, which operated throughout the process, and the AMS Project Manager who was responsible for overseeing design and delivery. |
| 2 Scope The range of issues covered in the dialogue are relevant to participants' interests. | Cover both the aspirations and concerns held by the public, scientists in the public and private sector, and policy-makers. | <p>The issues addressed in the engagement programme were identified from the Foresight report, that drew on 15 'state of the science' reviews. The overall project took its focus on the three types of drugs (recreational drugs, drugs for mental health, and cognition enhancers) from that Foresight report. The independent AMS Working Group (with a wide range of scientific disciplines) identified key cross-cutting themes that guided the detailed planning of the engagement programme. The programme therefore met the aspirations and concerns of scientists and policy-makers.</p> <p>The evaluation research also shows that public participants felt able to say what they wanted, raise issues and ask questions at all stages of the process. The programme therefore met the aspirations and concerns of public.</p> |

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| 2 Scope (cont.) | Be focussed on specific issues, with clarity about the scope of the dialogue. | As above, the issues for public engagement were specified very clearly at the beginning of the process. |
| | Be clear about the extent to which participants will be able to influence outcomes. Dialogue will be focussed on informing, rather than determining policy and decisions. | It was clear throughout that this was a 'consultation', that public views would be taken into account, and that responsibility for the development of the final recommendations on the issues lay with the Authority. Generally, public participants were fairly clear about the level of influence their input would have on the AMS policy recommendations. |
| | Involve a number and demographic of the population that is appropriate to the task to give robustness to the eventual outcomes. | As described throughout this report, a diverse set of the public was involved, recruited to provide a mix of backgrounds to provide demographic representation from across the UK population, and also to ensure the inclusion of hard to reach sectors of society. The number and mix was entirely appropriate to the task. |
| 3 Delivery Ensuring that the dialogue process itself represents best practice in design and execution. | Ensure that policy-makers and experts promoting and/or participating in the dialogue process are competent in their own areas of specialisation and in the techniques and requirements of dialogue. | The AMS Working Group and the experts involved were recognised as senior authorities in their field, and / or as representatives of particular fields of professional and personal experience. |
| | Employ techniques and processes appropriate to the objectives. Multiple techniques and methods may be used within a dialogue process, where the objectives require it. | A range of processes were used including deliberative research and engagement through a series of workshops across the UK, an online consultation for the wider public, a launch which included drama as well as round table discussions, and input from a range of scientific and professional experts. This provided an appropriate set of techniques and processes for the objectives. |
| | Be organised and delivered by competent bodies. | An independent body, highly skilled and experienced in deliberative research and engagement techniques, was commissioned to deliver the process. |

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| 3 Delivery (cont.) | Include specific aims and objectives for each element of the process. | The public engagement aspect of the project had clear and specific objectives, separate from general AMS project objectives. |
| | Take place between the general public and scientists (including publicly and privately funded experts) and other specialists as necessary. Policy-makers will also be involved where necessary. | The launch, regional workshops and Brainbox events provided a range of opportunities for direct dialogue between the public and experts / specialists. The AMS Working Group (as those responsible for developing policy recommendations) also attended all these events and participated to varying degrees. |
| | Be accessible to all who wish to take part – with special measures to access hard to reach groups. | The online elements of the engagement programme were open to whoever wanted to take part. The outreach workshops were designed to provide direct access for relevant hard to reach groups, who could then take part in the regional workshops if they wished, alongside a recruited audience which provided a broad demographically representative and diverse set of views. |
| | Be conducted fairly - with no in-built bias; non-confrontational, with no faction allowed to dominate; all participants treated respectfully; and all participants enabled to understand and question experts' claims and knowledge. | Evaluation observation, questionnaire and interview research all concluded that, overall, the process was fair and balanced, that no faction was allowed to dominate, that all participants were treated respectfully and were able to question the experts. In spite of the controversial nature of the issues, the atmosphere in the deliberative processes was entirely non-confrontational and participants felt that they were able to have their say and raise the issues they wanted to. |
| | Be informed - This will include providing participants with information and views from a range of perspectives, and access information from other sources. | Briefing information was provided for the public participants in writing and through expert presentations and Q & A sessions. The evaluation has shown that the information was clear, useful and understood by participants. In feedback, the participants also said they had enough information to contribute fully to the consultation. |

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| 3 Delivery (cont.) | Be deliberative – allowing time for participants to become informed in the area; be able to reflect on their own and others' views; and explore issues in depth with other participants. | There was a two stage iterative process between the outreach workshops and the regional workshops (although some participants only attended the second of these two). There was also a two stage iterative process between the two Brainbox sessions, with several weeks between to allow participants to consider their views following the first session. There was space and time within the regional workshops and Brainbox sessions for reflection alone and with others to develop their own individual views, and to explore issues in some depth with other participants. |
| | Be appropriately 'representative' – the range of participants may need to reflect both the range of relevant interests, and pertinent socio-demographic characteristics (including geographical coverage). | As mentioned above, a diverse set of the public was involved. Specialised recruitment ensured a good representation of the general population of the UK, and the outreach and regional workshops were held in various locations across the UK which provided geographical coverage. Although there was slight under-representation of black and minority ethnic groups, overall, the process was 'appropriately representative'. |
| 4 Impact The outputs of dialogue can deliver the desired outcomes. | Ensure that participants, the scientific community and policy-makers and the wider public can easily understand the outputs across the full range of issues considered. | The report produced by OPM on the findings from the public engagement process were used by the AMS Working Group to develop their conclusions and recommendations. The final AMS report was published and thus made available to the scientific community and wider public. |
| | Ensure that participants' views are taken into account, with clear and transparent mechanisms to show how these views have been taken into account in policy and decision-making. | The evaluation has shown clear lines between the conclusions in the OPM report of the public engagement process, and the final report and recommendations of the AMS Working Group. Interviews have shown that Working Group members took notice of the results of the engagement programme. |

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| 4 Impact (cont.) | Influence the knowledge and attitudes of the public, policy-makers and the scientific community towards the issue at hand. | The whole process led to significant public education on the issues, and many respondents to the evaluation identified the learning from the process as extensive and very valuable (including expert speakers and Working Group members). There is also evidence from the evaluation that the process significantly influenced the attitudes of the public participants on the issues. |
| | Influence the knowledge and attitudes of the public, policy-makers and the scientific community towards the use of public dialogue in informing policy and decision-making. | The public respondents to the evaluation were more likely to want to get involved in public consultation as a result of being involved in this process, and were strongly supportive of future public engagement on these types of issues. Expert speakers and Working Group members said that the process had helped demonstrate the value public engagement in policy making. The process therefore influenced different audiences in terms of knowledge and support for public dialogue. |
| | Encourage collaboration, networking, broader participation and co-operation in relation to public engagement in science and technology. | This was not a major objective of the process. However, OPM and the AMS Project Manager have contributed to various forums to encourage collaboration, networking and co-operation in relation to public engagement in science and technology since the public engagement aspects of the AMS overall project were completed. |
| | Be directed towards those best placed to act upon its outputs. | The AMS Working Group was the target audience for the outputs of the public engagement process, and the outputs were specifically designed to meet their needs. |
| 5 Evaluation The process is shown to be robust and contributes to learning. 5 Evaluation (cont.) | Be evaluated in terms of process and outcome, so that experience and learning gained can contribute to good practice. | This evaluation has covered processes and outcomes, and identified learning for the future. |
| | Ensure that evaluation commences as early as possible, and continues throughout in the process. | The evaluation started at the beginning of the process, and continued until after the final Working Group report had been drafted, so that the entire process could be considered. |

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| | Ensure that evaluation addresses the objectives and expectations of all participants in the process. | The evaluation has considered the extent to which the process has met the objectives and the needs of participants. |
| | Be evaluated by independent parties (where appropriate). | The evaluation was carried out by an independent contractor, separate from the AMS and the contractor delivering the process. |

9.4 Conclusions

As can be clearly seen in the analysis above, the Drugsfutures project has fully met all the agreed objectives, and has fully met all the criteria identified in the Government's Guiding Principles for Public Dialogue on Science and Technology.

10 Overall conclusions

10.1 Introduction

This final section summarises the key issues raised in the report, and identifies some lessons for future public engagement. It draws on the analysis throughout this report.

10.2 Summary of key issues

The AMS Drugsfutures public engagement programme on brain science, addiction and drugs has worked very effectively and provided some significant benefits to all those who have taken part and those who have used the outputs. The key impacts have been:

For public participants:

- **Satisfaction with the process** and a sense of their involvement being worthwhile. It is clear that the great majority of those attending were well-engaged in a purposeful and meaningful discussion with their peers, listening and responding to expert input as provided and requested.
- **Learning from the process**, from presentations and dialogue with expert speakers, from written information provided and from other participants.
- **Having a say and being listened to**, with the 'hope' that they could make a contribution to public policy and influence future policy decisions. There was a strong sense that the results of the debate genuinely reflected the discussions that had taken place at the events (at least partly as a result of transparent recording of discussion points), which strengthened trust and satisfaction with the process.

Public participants had some suggestions for improvements to future public engagement processes, particularly around:

- **More information in advance**, to clarify the purpose of the event and what they could expect to happen, recognising that there is a difficult balance which has to take account of the dangers of overloading participants and unduly influencing their views before they become fully involved in the dialogue.
- **Developing more opportunities for engagement in future**, especially with more of these sorts of events as it is important to involve the public in these sorts of issues.
- **More feedback to participants**, after each event they were involved in as well as with details of the policy decisions taken using their input, ideally showing how they influenced those decisions.

Overall, the public participants gained significant value from the process and found it enjoyable, informative and worthwhile.

For expert speakers:

- **Providing opportunities for extending their public education work**, enabling the expert scientists, professionals and those with experience to get their messages across to new audiences in new ways.
- **Learning about public engagement**, both in terms of specific techniques and methods, and in terms of the value of deliberative public engagement generally.

- **Providing opportunities to hear and explore public views** first hand, providing a useful 'reality check' for them as professional workers in the field.

A contrasting view from one expert speaker interviewed was that this sort of public engagement was less important than direct consultations with expert organisations (such as their own). However, overall, expert speakers found the process enjoyable, valuable and informative.

For the AMS Working Group:

- **A worthwhile process.** Feedback from the Working Group suggests that they felt this was a well-designed and delivered process that demonstrated the value of public engagement and made it more likely that the AMS would use public engagement in future in their work.
- **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 Drugsutures project. The Working Group members found most value in listening first hand to the public discussing the issues at the engagement events. They also found the final OPM report of the engagement process essential as an evidence base on public views.
- **Learning about engagement.** Working Group members had learned about public engagement, as none had been involved in this sort of public engagement process before. The interactive discussions and drama elements at the launch were noted as particularly interesting mechanisms. There was some feedback that this type of deliberative approach was not 'scientific' in its methods for sampling and recruitment, with suggestions of an opinion poll as an additional method.

While several Working Group respondents valued being involved in the engagement processes as a learning exercise, some of the feedback suggests that there remains a need for greater awareness and knowledge of the principles, nature and value (and limits) of public engagement processes, so that its role in the research and development of policy recommendations could be more fully understood.

- **Challenged assumptions.** The process had challenged some assumptions among Working Group members about public attitudes, even though their overall view was that there was 'nothing new' in terms of issues or ideas emerging from the public engagement. They were, however, surprised by the strength of feeling on some issues and by some views: for example, how liberal participants were about reform of the law.
- **Influenced policy recommendations.** The input from the public as a result of the engagement process had influenced the final conclusions and recommendations of the Working Group, with comments from Group members that the recommendations were 'sharper' as a result of the public consultation. The main influence seems to have been in allowing the Working Group to come to conclusions and make recommendations with greater confidence based on better knowledge of public attitudes and concerns.

Overall, the AMS Working Group respondents thought the process had been effective and valuable in both its process and outputs.

The process also generated significant **public awareness** of the complexities of the issues being discussed, and clarified the thinking of the participants. Several participant interviewees said they had discussed the issues with others after the engagement events. This sort of dissemination of information about the nature of the issues may be very valuable to the policy-making process, contributing to a better informed and thus more knowledgeable public on the highly contentious issues addressed in this process.

10.3 Lessons for the future

This section summarises some of the main lessons from the evaluation, across the whole engagement process. Each of the preceding sections also identifies lessons from the specific activity covered in that section.

- **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 Drugsutures project required significant experience, skills and commitment to be effective and valuable. In this case, the AMS project manager and the delivery organisation achieved all the objectives and standards of good practice set for the project 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.
- **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.
- **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.
- **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.

10.4 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 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.

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