**Assessing the Potential of Mini-publics to Promote Evidence Uptake in Social Policy and Practice**

**Stephen Elstub, Ian Johnson, Ruth Puttick & Matthew Wilkinson**

**Newcastle University**

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**About the Report**

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**About the Authors**

**Stephen Elstub** is a Senior Lecturer in British Politics in the School of Geography, Politics & Sociology, Newcastle University.

E-mail: stephen.elstub@ncl.ac.uk

**Ian Johnson** is a PhD candidate in Digital Civics at Open Lab, Newcastle University.

**Ruth Puttick** is a PhD candidate in the school of Geography, Politics & Sociology, Newcastle University.

**Matthew Wilkinson** is a Masters student in the school of Geography, Politics & Sociology, Newcastle University.



**Executive Summary**

* This report assesses the relationship between evidence provision in mini-publics and the subsequent effects on social policy and practice.
* The research was underpinned by an English language literature review, sourced through a range of data bases and internet searches, of mini-public cases (citizens’ juries, consensus conferences, citizens; assemblies, deliberative polls and planning cells), on social policy and practice issues in Australia, Denmark, Finland, France, Germany, New Zealand, the Netherlands, and the United Kingdom, that occurred between 2006-2017.
* Three research questions were addressed:
* Assess which types of mini-public have had the most frequent and extensive impact on social policy and practice and how these organisational features influence the citizens’ engagement with evidence.

We found that:

* Citizens’ juries and consensus conferences have been most frequently used in the selected countries, however they are not more likely to deliver policy and practice impact or influence over the participants than other types of mini-public
* Most cases failed to achieve discernible policy and practice impact
* Close ties to governmental or public administrative bodies in the set-up of the mini-public was the most crucial factor in determining impact, but provided no guarantee
* Investigate how the type and recruitment of experts and the presentation of evidence influences citizens’ engagement with evidence in mini-publics and furthermore the perceived legitimacy of the mini-public by policy makers and practitioners.

We found that:

* In most cases the organisers of the mini-public selected the experts and witnesses
* In cases where the mini-public participants made the selection there were higher levels of trust with regards to the evidence received
* Nearly all cases followed the standard evidence provision format of written briefing materials, oral presentations, and questions and answer sessions
* Analyse the extent that certain types of social policy and practice are more open to evidence synthesised by mini-publics than others.

We found that:

* Health policy and practice was the dominant issue area across the cases in all countries
* A case from each country has been identified from each country that merits further investigation around the themes of evidence provision in mini-publics and social policy and practice impact:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Focus*** | ***Country*** | ***Mini-Public Type*** | ***Policy/ Practice Area*** | ***Reference*** |
| Pandemic planning | Australia | Citizens’ Jury | Health | Braunack-Mayer et al., 2008 |
| Physical activity | Denmark | Consensus Conference | Health | Bangsbo 2016 |
| Health care reform | Finland | Consensus Conference | Health  | Raisio 2010 |
| Teaching and learning in schools | France | Consensus Conference | Education | Rey et al. 2016 |
| Arthritis | Germany | Citizens’ Jury | Health | Fletcher 2017 |
| Breast cancer screening | New Zealand | Citizens’ Jury | Health | Paul et al., 2008 |
| Land-use planning process | The Netherlands | Citizens’ Jury | Housing | Huitema et al. 2007 |
| Schools | UK | Deliberative Poll | Education | Luskin et al. 2014 |

* These cases should be researched in greater detail through qualitative research methods such as interviews with the mini-public organisers, participating experts, and key stakeholders.
* Additional themes of evidence quality measures, expert briefing, and mini-public duration are significant, but beyond this review, but should be incorporated into future research in this area.
* Organisers of mini-publics should experiment more with the methods of evidence provision to the participating citizens.
* Researchers and reporters of mini-publics should cover citizen and witness recruitment, evidence provision methods, influence of evidence on participants, and influence of the mini-public on policy and practice as a matter of routine.

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**Introduction**

An increasingly used mechanism to enhance citizen engagement in policy-making is mini-publics (Grönlund et al. 2015). Mini-publics assemble small groups of randomly selected citizens to engage with each other in facilitated discussion to make recommendations on a policy issue. Experts are included as witnesses and informers in the process, providing the evidence, information and answering questions, which the citizens then synthesise through deliberation. In essence, ‘mini-publics need the help of experts in order to become adequately informed’ (Carson and Schecter 2017: 1). The aim of mini-publics is to show what the public would think of a policy issue if they had time and resources to learn and deliberate about it (Elstub 2014). Consequently, some suggest that mini-publics should be public opinion proxies that guide policy makers and practitioners as well as public opinion more broadly (Fishkin and Luskin 2005; MacKenzie and Warren 2012). This is important because the deliberations of a mini-public not only provide some evidence about public values and public acceptability; they also provide a counter-weight to the opinions of the interested parties who gather around the policy process (Weale forthcoming 2018). It is therefore suggested that mini-publics could act as intermediaries between actors with competing logics such as citizens, policy makers, experts, and the media (Pomatto 2016). Mini-publics therefore have potential to help ‘evidence intermediaries’, like the UK’s ‘What Works Centres’, synthesise and legitimise the use of evidence and increase the up-take of this evidence with wider audiences. If mini-publics did achieve this level of impact then they could effectively promote the dissemination of evidence. The ability of mini-publics to achieve these goals forms the focus of this report.

If mini-publics are to contribute to evidence dissemination then, firstly, they must enable the citizen sample to engage effectively with the evidence provided. Research to date indicates that mini-public participants’ opinions do change, and that lay citizens have the capacity to deliberate complex issues and that their preferences become more public regarding, informed and considered by the end of the process (see Elstub 2014 for an overview). On one hand, this indicates that the evidence provided influences their opinions and that the citizens find the evidence useful (Böker and Elstub 2015). Indeed, research suggests that it is the provision of evidence and information that has the greatest influence on the mini-public participants’ opinions (Thompson et al. 2015). On the other hand, there are psychological factors that might cause opinion change in mini-publics (Rosenberg 2014). For example, the charisma of the witness might be more influential than their evidence (Roberts and Lightbody 2017: 8). Moreover, there are various mini-public formats with different organisational features (Elstub 2014). Moreover, there are different ways that experts can be recruited and evidence provided to the citizens (Roberts and Lightbody 2017). Consequently, this study focused on the extent these elements influence the uptake of evidence by citizens participating in mini-publics.

Secondly, to facilitate evidence dissemination mini-publics need to be linked on the one hand with the broader public and on the other hand with policy-makers and practitioners. However, the extent a mini-public is perceived to be legitimate by various stakeholders will influence the extent evidence ‘lands’ with the public, policy makers and practitioners. Again, the type of mini-public, the manner in which experts and evidence and employed, could influence this perception.

Social policy is arguably the most fertile ground for democratic innovation and always has been. (Dean forthcoming 2018). Social policy and practice raises numerous ethical issues that require more than technical and scientific expertise, require significant financial resources, and effect most of the population. It therefore presents an ideal policy and practice area to review the potential of mini-publics to synthesise and disseminate evidence. However, as Lowy (1972) has demonstrated, policy issue determines politics, and social policy incorporates a broad range of issues, themes and areas. Consequently, the specific area of social policy could influence the potential for mini-publics to have policy and practical impact and to legitimate and synthesise evidence.

Consequently, we have devised the following research questions:

1. Assess which types of mini-public have had the most frequent and extensive impact on social policy and practice and how these organisational features influence the citizens’ engagement with evidence.
2. Investigate how the type and recruitment of experts and the presentation of evidence influences citizens’ engagement with evidence in mini-publics and furthermore the perceived legitimacy of the mini-public by policy makers and practitioners.
3. Analyse the extent that certain types of social policy and practice are more open to evidence synthesised by mini-publics than others.

These questions will be addressed through a review of the available literature, in order to further understanding of what conditions enable and inhibit citizens in mini-publics to digest and synthesise policy-based evidence and for mini-publics to legitimise this evidence and enable it to have impact in social policy and practice in a number of countries. These are Australia, Denmark, Finland, France, Germany, New Zealand, the Netherlands and the United Kingdom. Cases studies from each country, that merit further investigation, are also identified.

The report is organised into five sections. In section 1, an overview of the different types of mini-public is provided, along with the different approaches to expert recruitment and evidence provision. In section 2, the methods and approach that underpinned the research is outlined. We then give an overview of the findings from each country in section 3. Section 4 provides a macro analysis of the findings from these cases. We conclude, in section 5, with some recommendations for further research in this area and for the organisation and coverage of mini-publics.

**Mini-Publics: Experts and Evidence**

In this section we an overview of mini-publics is provided. The different types are detailed, the general process described, and the various ways experts and evidence are involved in the process are discussed. In doing so we draw heavily on the work of Escobar and Elstub (2017).

Mini-publics are made up of randomly selected citizens, for instance, chosen by lot from the electoral roll or a similar source that may function as a proxy for the relevant population. The principle here is that everyone affected by the topic in question has an equal chance of being selected, and this underpins the legitimacy of the process. Participants are typically selected through stratified random sampling, so that a range of demographic characteristics from the broader population are adequately represented e.g. age, gender, ethnicity, disability, income, geography, education, religion, and so on. The purpose is to use social science methods to assemble a microcosm of ‘the public’. Smaller mini-publics are not intended to be statistically representative of the population, but are still demographically diverse. Participants are often remunerated, the discussions are facilitated, and experts provide evidence and advocacy of relevant information and positions and are then cross-examined by the lay citizens. They are usually issue specific, and dissolved as soon as the issue has been deliberated on. Despite these common features, there are a variety of types of mini-public***,*** covered briefly in turn below.

**Types of Mini-Public**

***Citizens’ Juries***

Citizens juries (CJs) were first established in 1971 in the USA by Ned Crosby of the Jefferson Centre, but have been employed in many other countries since then including the UK, Netherlands, Ireland, France and Australia. They can cost between £10,000 and £30,000 depending on various factors (e.g. duration, geography). Approximately, 12-25 participants are assembled for 2 to 5 days to discuss an issue and produce a collective recommendation or ‘verdict’. CJs can be designed to provide jurors with some control over the process including choice of witness experts and the nature of interaction with them.

***Consensus Conferences***

The Danish Board of technology devised Consensus Conferences (CCs) in the late 1980s in order to advise parliamentarians on science and technology issues. Although they originated in Denmark, and the vast majority have been held there, they have been employed in a number of countries. They cost between £30,000 and £100,000 and involve 10-25 citizens selected by stratified random sampling. Danish consensus conferences, are divided into two stages. Firstly, citizens meet for a series of preparatory weekends to learn about the topic, the process, and the group, and to select the experts and interest groups from a list who advise and present to the citizens in the second stage of the conference. At the end a collective report is compiled which outlines their collective decision. Both consensus conferences and CJs (at least in the USA) use an external advisory committee that selects the citizens, compiles the list of experts from which the citizens choose, develops information packs and selects facilitators. This committee tends to be made up of academics, practitioners, issue experts, and interest group representatives.

***Planning Cells***

Planning cells (PCs) originated in Germany and were created by Peter Dienel, of the Research Institute for Citizens’ Participation at the University of Wuppertal in Germany in the 1970s. PCs have predominantly been held on urban planning in Germany but also in Austria, Switzerland, Spain and the USA. They cost between US £90,000 and £120,000. A series of Planning cells, usually 6-10, with about 25 citizens participating in each run concurrently on the same issue for about four days, usually resulting in 100-500 citizens participating in total. They are also facilitated differently to CJs and CCs, with the facilitators more likely to be issue rather than process specialists. The planning cell convenors then aggregate all the preferences across all the cells into a report, which is then approved by a selection of the citizens from the various cells, before being published and distributed to relevant decision-makers and stakeholders.

***Deliberative Polls***

The deliberativepoll was first set up by James Fishkin and the Center for Deliberative Polling in 1988. A deliberative Poll (DP) with a 130-500 sample is designed to show what the public *would* think about the issues if it had time to learn about them and consider a range of perspectives. The first ever DP in the world was held in the UK in 1994, since then they have been run in many countries including Canada, USA, Denmark, Hungary, Bulgaria, Greece, Brazil, Australia and China, as well as in transnational contexts (i.e. European Union). They cost approximately £200,000. The process involves taking a probability sample of voters, surveying their opinions on an issue, sending them balanced information about the topic in question, gathering them together to discuss the issues with each other in small groups and with a balanced range of experts in plenary sessions, and then surveying their opinions again. Ideally, they are televised, or at least receive broad media coverage to contribute to informing the broader public. The participants’ preferences are aggregated, as they are not required to come to a collective decision themselves, through deliberation, as in CJs and CCs.

***Citizens’ Assemblies***

Citizens’ Assemblies (CAs) are the newest (since 2004) and potentially the most radical and democratically robust of all the mini-public types developed to date. They are difficult to assess as there have only been a handful of cases, notably in British Columbia, Ontario (both in Canada), the Netherlands and Ireland. The cases so far have typically assembled 100-160 participants. In all the assemblies the citizens were selected randomly from the electoral register, a further random selection is then made from those who express an interest in participating, meaning they are not strictly a random sample. Nevertheless, it is still considered that all these assemblies were representative of the broader population in terms of age, gender and geographical location. The process progresses in three phases: the learning phase which takes several weekends and enables participants to get to grips with the complexities of the issues under consideration, the consultation phases where the randomly chosen citizens run public hearings in their local constituencies to gather information and opinions from other members of the public, and the deliberative phase when the citizens discuss the evidence and agree their final proposal. Following the deliberation, a vote amongst the participants is usually conducted to decide a final outcome of the assemblies.

**Table 2: Key Features of Mini-Publics**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | ***Citizen juries*** | ***Planning cells*** | ***Consensus conferences*** | ***Deliberative polls*** | ***Citizen assemblies*** |
| ***Developed by (first instance)*** | Crosby (USA, 1971) | Dienel (Germany., 1970s) | Danish Board of Technology (1987) | James Fishkin (USA, 1994) | Gordon Gibson (Canada, 2002) |
| ***No. of citizens*** | 12-26 | 100-500 | 10-25 | 100-500 | 100-160 |
| ***No. of meetings*** | 2-5 days | 4-5 days | 7-8 days | 2-3 days | 20-30 days |
| ***Selection method*** | Random selection | Random selection | Random + self-selection | Random selection | Random + self-selection |
| ***Activities*** | Information + deliberation | Information + deliberation | Information + deliberation | Information + deliberation | Information +consultation +deliberation |
| ***Result*** | Collective position report | Survey opinions +Collective position report | Collective position report | Survey opinions | Detailed recommendation |
| ***Destination of proposal*** | Sponsor and mass media | Sponsor and mass media | Parliament and mass media | Sponsor and mass media | Parliament, government and public referendum |

Source: Elstub, S. (2014).

**The Mini-Public Process**

Despite the differences highlighted above, there remain many similarities in the mini-public process. Across the different types. Typically, a mini-public comprises five stages:

1. ***Planning and recruitment*:** Usually, a Stewarding Committee oversees the process to ensure its quality and fairness. Often, mini-publics deal with divisive topics, and thus their legitimacy and impact hinge on the buy-in from a range of voices across divides –as well as the public standing of their guarantors, stewards and funders.
2. ***Learning phase*:** Participants are supported to learn about the topic from diverse perspectives. This can be done by combining time for individual learning (e.g. citizens receive information packages agreed by the Stewarding Committee), with time for group learning. During the latter, they are exposed to a range of evidence, views and testimonies covering the topic from various angles. Depending on the topic, this may include experts, officials, politicians, activists, and stakeholder representatives of various sorts (e.g. business, third sector, communities). Participants are empowered to interrogate these ‘witnesses’, and sometimes to choose them from a list prepared by the Stewarding Committee –who oversees that the mini-public is exposed to a balanced range of evidence and views.
3. ***Deliberative phase*:** Aided by impartial facilitators and recorders, participants then engage in small group face-to-face deliberation where they reconsider their initial ideas on the topic in the light of the evidence and testimonies from the learning phase, but also with respect to the arguments and experiences of their fellow deliberators.
4. ***Decision-making phase*:** The learning and deliberative work from previous stages enables participants to engage in considered judgement and informed decision-making. Depending on the topic, and the type of mini-public, this may lead to a particular recommendation or decision, which must be articulated through reasoned arguments in the final report or statement. That is the case in consensus-oriented mini-publics such as Citizens’ Juries –which, like court juries, respond to a ‘charge’– as well as Consensus Conferences and Citizen Assemblies. In research-focussed mini-publics, such as Deliberative Polls, the aim is not to reach consensus, but to measure through pre- and post- surveys how citizens’ preferences may change through learning and deliberation.
5. ***Follow-up*:** The focus in this stage is impact. Ideally, the mini-public has already been in the ‘public eye’ from its inception. One way to ensure impact is to involve key public figures and broadcasters in the process and Stewarding Committee. In this final stage, the outcomes and outputs of the mini-public are shared through all relevant networks, thus informing broader public deliberation and decision-making.

**Experts and Evidence**

The role of experts and evidence in the mini-public process is a particularly significant factor (Roberts & Lightbody 2017). For example, the number and type of experts, how they are identified and chosen, and the way in which the evidence is presented can have consequences for how the citizen sample engages with the evidence.

Those who provide expert evidence to mini-publics tend to come from the academic, legal, medical and/or public policy arenas. They are often scientists, academics, government employees, interest group members or community activists (Carson and Shecter 2017). Lansdell (2011) identifies four different categories of witness:

* ***Knowledge experts***: those with specialist scientific, technical or legal knowledge who provide essential information on the topic.
* ***Stakeholder*s**: representatives from advocates of a certain position on the issue e.g. lobbying or interest groups.
* ***Experiential publics***: those who have had particularly salient direct experiences of the issue at hand.
* ***Representative publics****:* represent a particular identity or feature from the broader public, but do not necessarily have a knowledge, experience or a view on the issue.

Therefore, the role of experts in mini-publics can also vary. They can be used to provide context such as background information, communicate their experience in a specific area or field of work, to represent stakeholders, or because of their view on an issue (Roberts & Lightbody 2017).

Experts act as arbiters in mini-publics, dealing with technical questions, providing information, or articulating a particular perspective. The aim is to facilitate informed and balanced deliberation amongst the mini-public members. Consequently, ‘neutral’ witnesses that take no particular side on the issue are desired but can be hard to find, especiallywhen ‘the issue involves extensive political controversy and scientific uncertainty’ as experts lose neutrality in these situations (Elstub 2014). In such circumstances, it becomes imperative that mini-publics have experts with a diversity of political views. Experts can be selected by the mini-public’s commissioning authority, an advisory group (ideally made up of a diverse range of interests and opinions relevant to the issue) that oversees the organisation of the mini-public, or the citizens participating in the mini-public (Harris forthcoming 2018).

There are also a number of options for how evidence provision can be organized in mini-publics. In addition to witnesses sessions mini-publics routinely provide briefing materials for the participants. Therefore, there are a number of different elements to the provision of evidence in mini-publics e.g. nature of briefing materials, the number of witness sessions, time allowed for presentation and discussion, and the degree and nature of the interaction between experts and the citizen sample. With respect to the latter, usually mini-public participants are given the opportunity to question the experts, which the witnesses can find quite challenging, due to the veracity of the questions posed (Gastil et al. 2015). Witnessess have also struggled to pitch their presentations at the right level as the mini-public participants are not experts on the topics, but through the process cease to be ignorant too (Gastil et al. 2015).

There are different formats available for interaction with witnesses in mini-publics. Larger mini-publics often use plenary sessions with a panel of experts. Smaller ones tend to have sequential, individual presentations and questions and answer sessions, often set-up as ‘pro and con’ debate (Roberts & Lightbody 2017). In some cases, experts join the participants in their small group discussions, for example Ireland’s Convention on the Constitution (Harris forthcoming 2018).

Having given an overview here of different types of mini-public, witnesses and evidence provision we now move to outline the methods and approach adopted in this study to analyse the importance of these features to the relationship between mini-publics and evidence uptake.

**Methods and Approach**

This section provides an overview of the methods and general approach adopted on this research project to answer the following research questions:

* Assess which types of mini-public have had the most frequent and extensive impact on social policy and practice and how these organisational features influence the citizens’ engagement with evidence.
* Investigate how the type and recruitment of experts and the presentation of evidence influences citizens’ engagement with evidence in mini-publics and furthermore the perceived legitimacy of the mini-public by policy makers and practitioners.
* Analyse the extent that certain types of social policy and practice are more open to evidence synthesised by mini-publics than others.

The research is based on a literature review. The criteria used to select material for analysis are:

* Available English language literature on mini-publics and social policy
* The time period of the review will be 2006-2017.
* It will focus on the following countries: Australia, Denmark, Finland, France, Germany, New Zealand, the Netherlands and the United Kingdom.
* It will focus on the following types of mini-public: Citizens’ Juries, Planning Cells, Consensus Conferences, Deliberative Polls, and Citizens’ Assemblies.
* It will focus on the following areas of social policy: education, health, housing, policing, and social benefits.
* The following databases will be used to assemble the relevant literature to be analysed: 1. International Bibliography of the Social Sciences (IBSS)‎, 2. Sociological Abstracts, 3. Sociology 4. Database, 5. Applied Social Sciences Index & Abstracts (ASSIA), 6. Web of Science, and 7. Participedia. This should ensure that the dataset is of high and reliable quality.
* The databases will be searched through a combination of the types of mini-publics, policy areas, and countries listed above to identify cases for analysis

Analysis of the cases is based on the categorisation detailed in table 2 below:

**Table 2: Criteria for Case Analysis**

|  |  |
| --- | --- |
| ***Theme*** | ***Categorisation*** |
| ***Mini-public*** | * Type (Citizens’ Jury, Planning Cell, Consensus Conference, Deliberative Poll, or Citizens’ Assembly)
* Sample size
* Sample method (random, stratified, other)
* Duration
* Activities (plenary and/or small group discussions)
* Output (citizen survey and/or collective position)
 |
| ***Witnesses and Evidence*** | * Number of witnesses in the mini-public
* Type of witnesses in the mini-public (knowledge experts, stakeholders, experiential publics, representative publics)
* Witness recruitment method (organisers, advisory board, citizens)
* Number of witness sessions
* Format for evidence presentation (report, plenary, small groups, combination)
* Extent evidence influenced citizens’ opinion (little influence/ moderate influence/ extensive influence)
 |
| ***Policy and Practice*** | * Policy/ Practice area (education, health, housing, policing, and social benefits)
* Extent of policy and practice influence (no/ limited influence, influence on policy/ practice debate, policy or practice influence)
 |

Following a consideration of all the above criteria the most relevant case studies from each country will be identified that would benefit from further investigation. The cases will be selected due to their relevance to the research themes, and to ensure a range of types of mini-public and policy area. In the following section, the identified cases are detailed and analysed.

**Case Studies by Country**

In this section, we discuss the mini-public case studies that we have identified in each country, and analyse them around the key themes of evidence, experts, and impact. Each section concludes by highlighting suitable case studies for further research. Due to the relatively small number of cases found in some countries and their relative geographical proximity ‘Australia and New Zealand’, ‘Denmark and Finland’ and ‘Germany and the Netherlands’ are covered together. We identified 49 cases in total. 15 in Australia and New Zealand, 8 in Denmark and Finland, 6 in France, 8 in Germany and the Netherlands, and 12 in the UK. The first table in each country section provides an overview of key details of each mini-public; the second how witnesses and evidence were incorporated into the mini-public; and the third covers the impact on the participants, policy and practice.

**Australia and New Zealand**

**Table 3: Australia and New Zealand: Overview of Mini-Public Cases**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Case*** | ***Mini-Public*** | ***Location*** | ***Date*** | ***Duration*** | ***No. Participants*** | ***Sampling Method*** |
| ***1*** | Population screening for breast cancer | Citizens' Jury | Otago | 2007 | 2 days | 11 | Stratification |
| ***2*** | Pandemic planning | Citizens' Jury | Adelaide | 2008 | 3 days | 21 | Stratification |
| ***3*** | Medical information for pharmacoepidemiological research | Citizens' Jury | Otago | 2009 | 3 days | 9 | Stratification |
| ***4*** | Food regulation | Citizens' Jury | Adelaide | 2011 | 3 hours | 20 | Stratification |
| ***5*** | School based adolescent immunisation programs | Citizens' Jury | Adelaide | 2012 | 2 days | 31 | Stratification |
| ***6*** | City of Canada Bay Council Citizens' Panel | Citizens' Jury | Canada Bay | 2012 | 5 days | 36 | Random selection |
| ***7*** | Tax on Soft Drinks | Citizens' Jury | Brisbane | 2013 | 2 days | 13 | Stratification |
| ***8*** | Safe and Vibrant Nightlife | Citizens' Jury | Sydney | 2013 | 6 days | 43 | Random Selection |
| ***9*** | Vibrant and Safe Nightlife  | Citizens' Jury | Adelaide | 2013 | 5 days | 43 | Random Selection |
| ***10*** | Food labelling  | Citizens' Jury | Adelaide | 2014 | 4 hours | 14 | Stratification |
| ***11*** | Marrickville Infrastructure  | Citizens' Jury | Sydney | 2014 | 6 days | 30 | Random selection |
| ***12*** | Adolescent vaccinations | Citizens' Jury | Adelaide | 2015 | 2 days | 15 | Stratification |
| ***13*** | Regulation and law for obesity prevention in children | Citizens' Jury | Adelaide | 2015 | 2 days | 20 | Stratification / Independent recruitment |
| ***14*** | VicHealth on Obesity  | Citizens' Jury | Victoria | 2015 | 2 days | 100 | Random selection |
| ***15*** | Prison and Prison Alternatives | Citizens' Jury | Sydney/Canberra/Perth | 2012 & 2013 | 1 day | 43 | Stratification |

1. ***Are there any trends across the cases in each country that suggest the organisational features of the mini-public influence citizens’ engagement with evidence?***

In almost all cases, policy recommendations were delivered; and it was not uncommon for the evidence to have played a role in determining those. For example, the New Zealand case study on the use of personal information for pharmacological research (case no.3) saw participants explicitly change their minds on the issue and cited the expert testimony as the instrumental reason for the change (Parkin et al. 2010: 152). Six jurors reported a change in opinion over the course of the hearing, and this was attributed to being more informed. Changes were also observed in the responses to a question about levels of comfort with researchers accessing medical information without explicit consent. By the end, jurors were comfortable with a small privacy loss for the greater good of research.

Another example was the employment of electronic polls during a citizens’ jury on country of origin labelling on food in Australia (case no.10). Most participants changed their views in the polls directly after evidence provision (Withall et al. 2014: 6). This trend continued and by the end of the process half of the jurors disagreed that current food labelling allowed them to make informed food choices.

1. ***Are there any trends across the cases in each country that suggest some types of mini-public have had more frequent and extensive impact on social policy and practice than others?***

This was difficult to answer as all the cases indeitifed were citizens’ juries.

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences citizens’ engagement with evidence in mini-publics?***

The expert recruitment method is broadly identical in almost all cases: recruited by the organisers of the mini-public via invitation or selection. In one case, witnesses were selected by jurors from an original list of experts (case no.14). It is difficult to say definitively that the expert recruitment methods themselves had an effect on how citizens engaged with the evidence. The methods of presentation did appear to have influence in some cases. For example, the opinions of jurors changed in regards to the use of private data in pharmacological research after expert presentations (case no. 3). The Australian citizens’ jury of exploring whether soft drinks advertisements should be displayed at sporting events (case no. 4) saw recorded changes in opinion via electronic polls (Henderson et al. 2013). Jurors were polled three times over the course of the jury: at the beginning of the session (Poll 1), following speaker presentations (Poll 2), and finally after the deliberation (Poll 3). Changes in participant views were more evident in relation to the topics specifically covered in presentations. Most jurors at each poll indicated that they thought that food and drink sponsorship and/or advertising at children’s sporting events would have little or no effect on altering children’s diet and eating habits, with the proportion increasing during the jury process (Poll 1: 59%, Poll 2: 77%, Poll 3: 88%) (Henderson et al. 2013). Similarly, in a citizen’ jury on screening for breast cancer in women in their 40s (case no.1), 10 participants out of 11 changed their view after hearing expert advice (Rychetnik et al 2012).It seems then that the format of delivering presentations did result in changes of opinion.

**Table 4: Australia and New Zealand: Witnesses and Evidence in Mini-Public Cases**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Activities*** | ***No.*** ***witnesses*** | ***Type of witnesses*** | ***Witness recruitment method*** | ***No. witness sessions*** | ***Format of evidence presentation*** |
| ***1*** | Introduction, presentations, deliberation | 3+ | Facilitators and knowledge experts | Mini-public organisers | 1 | Expert presentations from expert on each side, then one neutral |
| ***2*** | Preparatory briefing, deliberation | 2+ | Facilitators and knowledge experts | Don't know | 1 | Expert presentations |
| ***3*** | Expert presentations, deliberation | 6+ | Facilitators and knowledge experts | Steering group | 1 | Expert presentations |
| ***4*** | Preparatory briefing, electronic polls, expert presentations, deliberation | 2+ | Facilitators and knowledge experts | Mini-public organisers | 1 | Expert presentations |
| ***5*** | Preparatory workshops, ice-breaker activities, expert presentations, deliberation | 2+ | Facilitators and knowledge experts | Don't know | 2 | Expert presentations |
| ***6*** | Training session, deliberation | Don't know | Don't know | Don't know | 0 | A variety of resources were available |
| ***7*** | Preparatory briefing, ice-breakers, presentations, deliberation | 2+ | Facilitators and knowledge experts | Mini-public organisers | 1 | Expert presentations |
| ***8*** | Online element over 6 months, 6 meetings, tour of geographic area up for debate,  | 18 | Knowledge & domain experts | Don't know | 6 | Background reading (submissions from advocacy groups, etc.) |
| ***9*** | Preparatory briefing material submitted by advocacy groups, etc.  | 9+ | Knowledge & domain experts | Don't know | 5 | Background reading from voluntary submissions, questions to expert witnesses |
| ***10*** | Electronic polls, expert presentations, deliberation | 4+ | Facilitators and knowledge experts | Mini-public organisers | 1 | Expert presentations |
| ***11*** | Speed dialogue, deliberation | 4+ | Facilitators and knowledge experts | Don't know | 2 | Expert interactions |
| ***12*** | Preparatory workshops, ice-breaker activities, expert presentations, deliberation | 2+ | Facilitators and knowledge experts | Don't know | 2 | Expert presentations |
| ***13*** | Preparatory briefing, ice-breakers, presentations, plenary session, deliberation | 2+ | Facilitators and knowledge experts | Don't know | 1 | Expert presentations |
| ***14*** | Online resources, questions of expert witnesses through conduit, opening speakers to jury, 15 hour citizen deliberation, recommendation in report, poll | 5 | Knowledge & domain experts | Selected by Jury (based on original pool selected by organisers ) | 1 | Background reading material and video (online) |
| ***15*** | Preparatory briefing, deliberation | 5+ | Facilitators and knowledge experts | Invitation | 1 | Expert presentations |

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences the liklihood a mini-public will influence policy and practice?***

None of the cases seemed to suggest such a thing in regards to type of expert or their methods of recruitment and with a small sample size it is not really possible to affirm. With that said, there were examples such as those discussed above in section I (cases 1,3, and 10) that demonstrated methods of presentation, such as expert testimony and evidence provision, changed citizens opinions (Withall et al 2014; Parkin 2011; Rychetnik et al 2012). This means that different recommendations were made which would not have been had their opinions remained unchanged. This would have directly influenced the outcome of the mini-public, which could have directly influenced policy.

**Table 5: Australia and New Zealand: Impact in Mini-Public Cases**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***No.*** | ***Influence of evidence on participants*** | ***Policy area***  | ***Extent of policy/ practice influence*** | ***Key references*** |
| ***1*** | Extensive influence | Health | Used to elicit community views, no impact known | Paul et al. (2008); Rychetnik, L. et al. (2013) |
| ***2*** | Don't know | Health | Don’t know | Braunack-Mayer et al. (2010) |
| ***3*** | Extensive influence | Health | Don’t know | Parkin et al. (2010) |
| ***4*** | Moderate influence | Health | Don’t know | Henderson et al. (2013) |
| ***5*** | Little influence | Health | Don’t know | Marshall et al. (2014) |
| ***6*** | Don't know | Infrastructure | Don’t know | Participedia.net. (2018) |
| ***7*** | Don't know | Health | Don’t know | Moretto et al. (2014) |
| ***8*** | Moderate influence (many references to endorsing initiatives in report and recognition of what is already being done) | Crime | Recommendation to Mayor, with commitment to respond to each, questions asked in Parliament | New Democracy Foundation (2014) |
| ***9*** | Moderate Influence (e.g. Submission are referred to throughout the recommendations report  | Crime | Report presented in Parliament (verbatim), criticised for being predictable and 'unsurprising' | New Democracy Foundation (2013) |
| ***10*** | Little influence | Health | The jurors produced a series of recommendations that were similar to those produced by the inquiry conducted by the Australian Government | Withall et al. (2016) |
| ***11*** | Don't know | Infrastructure | The council provided a detailed and technical response to the jury's recommendations | Chambers (2018) |
| ***12*** | Little influence | Health | Don’t know | Parella et al. (2016) |
| ***13*** | Don't know | Health | Don’t know | Street et al. (2017) |
| ***14*** | Moderate influence | Health | 50% of stakeholder said they would use the recommendations in the report | VicHealth (2016) |
| ***15*** | Don't know | Crime | Don’t know | Simpson et al. (2015) |

1. ***Are there any trends across the cases in each country that suggest certain types of social policy and practice are more open to evidence synthesised by mini-publics than others****?*

The small number of cases returned were almost all connected to health policy so it is not possible to compare and contrast with other certain types of social policy in the case of Australia and New Zealand. Health policy was an area that lent itself well to evidence synthesis. In each case study examined there seemed to be no problem with citizens understanding the evidence. Health policy appears to be an area where the synthesis of evidence takes place with considerable degrees of success. For example, the citizens’ jury, which looked at prioritizing government funding of adolescent vaccinations (case no. 12), presented participants with criteria for deciding funding priorities; these criteria included complex information such as disease severity, transmissibility and cost-effectiveness. What is interesting to note is that the participants were between the ages of 15-19 yet still able to formulate recommendations according to the criteria (Parrella et al. 2015). The evidence presented in an Australian mini-public on crime (case no. 8) were shown to have an impact on recommendations produced by citizens. For example, in one report, the specific sources of information (submissions from expert witnesses) are referenced directly, and in a report to the Mayor of New South Wales, there are several references to existing initiatives and reviews carried out by experts (New Democracy Foundation 2014).

**Citizens’ Jury on Pandemic Planning, Australia 2008**

**Background**

A two-day Citizens’ Jury was held in Adelaide, Australia in 2008 (case no.2) in order to include ordinary citizens in the planning of an influenza pandemic. This event followed two high profile pandemics, firstSARS (Severe Acute Respiratory Syndrome) in 2003 and avian H5N1 influenza A, known as ‘bird flu’ which prompted the World Health Organisation to urge national governments to put plans in place for pandemics indicating that this would be considered a ‘hot topic’ for participants.

The Citizens’ Jury was split across two forums where each forum was faced with different questions relating to what to do after an outbreak of disease. The first forum contained 9 participants, and the second contained 12. The forums in this experimental study were given scenarios to prompt their discussion and help them work through the arguments. Therefore, it is worthy of further investigation around using this type of facilitation and structure.

**Use of Witnesses**

There were at four expert witnesses (see specialities below) who provided expert presentations, following an introduction to the mini-public, and preceded by a public deliberation. Experts in infection control, virology, ethics, and public policy briefed participants (Rogers et al 2010: 331).

 The first day was facilitated by an expert facilitator who called experts, and controlled the discussion. The second day consisted of the deliberation between citizen-participants around three scenarios, with the aim of reaching consensus on questions for each scenario such as what information should the public receive, and how should this be communicated. During this stage, participants were requested to act as ‘community representatives’ and ‘citizens’ rather than ‘individuals’ (Rogers et al 2010: 333).

**Use of Evidence**

The nature of the expert presentations is not clear, but what is clear is the way the deliberations were structured around scenarios (Braunack-Mayer, A. J. et al. 2007:7) where participants either reached consensus on an outcome, or were divided over two possible outcomes. The influence of evidence on participants is not easy to ascertain, but participants were reported to have had confidence in the evidence provided by the expert witnesses (Rogers et al 2010:339).

A number of strategies about planning for pandemics from the mini-public have been included in the national influenza planning, for example providing telephone support for those in quarantine (Braunack-Mayer, A. J. et al. 2007:7), showing a direct influence on policy that could only be elicited through hearing perspectives around community values from citizen deliberations. Having said that, the degree to which these recommendations set the agenda is unclear, as another report suggests that the recommendations were ‘largely consistent with the existing national strategy’ (Rogers et al 2010: 331).

**Merits Further Study**

This citizens’ jury was conducted during the height of alarm surrounding the possible threats posed by the H1N1 virus and the aftermath of the Avian flu pandemic (Braunack-Mayer et al. 2008). The citizens’ knowledge of pandemic planning was low, and they were inserted into a politically charged environment with not a lot of time to synthesize evidence as much as they otherwise could have.

**Breast Screening Citizens’ Jury, New Zealand 2007**

**Background**

Cancer screening is widely considered to be a positive practice, but there are growing concerns about the risks and costs of the practice. In New Zealand in 2007 11 women took part in a citizens’ jury style to determine if breast screening in women aged between 40-49 years is a good idea (case no.1). The participants themselves were all women within that age category. The final 11 were self-selected out of an original group of 80 randomly selected participants who fit the specific demographic. The low turnout was the result of a mixture of low reply-rate from the original 80, and only 17 agreeing to take part (Rychetnik 2012: 380).

**Use of Witnesses**

There were three expert witnesses selected by the organisers for presentations to the participants, two with opposing views on the mammographic screening for women of this age group, and one public health worker who was neutral:

1. a public health physician at the National Screening Unit of the Ministry of Health (a neutral policy advisor),
2. a breast surgeon and member of the New Zealand Breast Cancer Foundation (an advocacy group in favour of breast screening for women from 40),
3. an epidemiologist from the University of Otago, Christchurch (who was opposed to the implementation of breast screening for women under age 50)

(Paul et al. 2008 p. 315). The witnesses all used comparable information about the harms from trials and extrapolations from existing breast screening programmes.

**Use of Evidence**

The participants were briefed on the Wednesday ahead of the deliberative event that started on Friday with presentations from expert witnesses, followed by questions from participants facilitated by an independent moderator. On the third day participants conferred without advisors and reached a consensus (10-1) on a list of recommendations for the reasons why they had made their recommendations. A potential weakness of this study is the outcome could be highly dependent on the selection of expert witnesses. The outcome from the citizens’ jury is to elicit community members’ views, and was not linked in any direct or purposeful way to policy outcomes.

**Merits Further Study**

First, its representativeness raises a point of interest. It featured just 11 women of 80 invited. Given the complexity of the nature of breast cancer and the diversity of female populations, it is difficult to capture all populations of women predisposed to breast cancer with just 11 participants. Second, of the 11 women, 10 voted against free mammographic screening for women aged 40-49. 9 of the 10 changed their position after receiving expert information. Such a large swing is noteworthy and may say something about the nature of the expertise that made it so powerfully persuasive. Further investigation into why this expert information was so influential is therefore worth conducting (Paul et al. 2008).

**Denmark and Finland**

**Table 6: Denmark and Finland: Overview of Mini-Public Cases**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Case*** | ***Mini-Public*** | ***Location*** | ***Date*** | ***Duration*** | ***No. Participants*** | ***Sampling Method*** |
| ***16*** | GM Foods | Consensus Conference | Copenhagen | 1999 | 4 days | 14 | Don't know |
| ***17*** | Physical activity  | Consensus Conference | Snekkersten | 2016 | 4 days | 24 | Other (self-selected) |
| ***18*** | Health Care Reform | Consensus Conference | Copenhagen | 2016 | Don't know | Don't know | Don't know |
| ***19*** | Euthenasia | Citizens' Assembly | Various Finnish cities | 2013 | 4hrs | 97 | Random |
| ***20*** | Nuclear Power | Citizens' Jury | Don't know | 2006 | Don't know | 90 | Don't know |
| ***21*** | Immigration | Deliberative Poll | Turku | 2012 | Don't know | 207 | Probability sampling |
| ***22*** | Dialogue Day | Citizens' Jury | Vaasa | 2008 | Don't know | 302 | Don't know |
| ***23*** | Immigration attitudes | Citizens' Assembly | Finland | 2012 | Don't know | Don't know | Don't know |

1. ***Are there any trends across the cases in each country that suggest the organisational features of the mini-public influence citizens’ engagement with evidence?***

Of the mini-publics reported on in Finland there is not enough evidence to indicate a trend in the engagement of citizens with evidence. There were several examples of Citizens’ Assemblies, Citizens’ Juries, and a Deliberative Poll, on ‘non-social policy’ issues. These mini-publics showed a trend to focus on topics that could be considered as controversial, such as nuclear power, immigration, and euthanasia. Although some of the identified cases were within the wider policy theme of health, none were social policy, meaning any links between mini-public type and social policy impacts, or between witness experts and social policy impact are not possible to determine.

The Denmark search, highlighted several examples of consensus conferences, particularly those carried out the The Danish Board of Technology (DBT), a quasi-independent body appointed by parliament. Alas, none of these example represent an engagement with social policy issues, so can offer no insights into the impact of such. In addition to the consensus conferences there is one example of a Deliberative Poll on the Euro which again falls beyond the social policy remit.

1. ***Are there any trends across the cases in each country that suggest some types of mini-public have had more frequent and extensive impact on social policy and practice than others?***

The cases identified in Denmark show no indication that any particular type of mini-publics had a more frequent or extensive impact on policy and practice. Of those sources that reported on the policy impact, most were critical of the lack of influence: ‘At the same time, they all appeared to agree that the conference had little direct, visible impact on policy- and decision-making and public debate’ (Joss & Klüver 2001: 53; Dryzek & Tucker 2008).

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences citizens’ engagement with evidence in mini-publics?***

In the cases identified where this information is available, the types of expert were a range of knowledge expets from NGOs and other public bodies deemed to be on either side of the argument. The expert witnesses where selected by the organising institution. This was criticised for allowing the steering committee to manipulate the results by controlling the flow of information to the deliberators through the selection of readings and expert witnesses, as well as by choosing issues and questions to put forward to the experts (Tucker 2008:128). The sole format of evidence was question and answer session with particpants and expert witnesses.

As such the influence on citizens was only moderate. However, the citizens agreed on actions that were reflective of the disagreement between experts. This is reflected in the final report the citizens produced as an outcome of the minipublic: ‘There is absolutely no doubt that the production of GM foods affects nature’s cycle. However, experts strongly disagree about the seriousness of the effect’ (Joss & Klüver 2001: 51-52). The sole format of evidence was question and answer session with particpants and expert witnesses. This has approach has been criticised for providing a insufficient opportunities for engagement between experts and citizens (Dryzek & Tucker 2008), being described as ‘like any other meeting’ (Bereano 1999: 6).

**Table 7: Denmark and Finland: Witnesses and Evidence in Mini-Public Cases**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Activities*** | ***No.*** ***witnesses*** | ***Type of witnesses*** | ***Witness recruitment method*** | ***No. witness sessions*** | ***Format of evidence presentation*** |
| ***16*** | Don't know | 13 | Knowledge experts  | Mini-public organisers | 2 | Question & Answer |
| ***17*** | Combination of plenary and group | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***18*** | Don't know | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***19*** | Small group discussions | 11 | Don't know | Mini-public organisers | 1 | Don't know |
| ***20*** | Small group | Don't know | Facilitators | Don't know | Don't know | Don't know |
| ***21*** | Small group discussions | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***22*** | Don't know | 15 | Don't know | Don't know | Don't know | Don't know |
| ***23*** | Don't know | Don't know | Don't know | Don't know | Don't know | Don't know |

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences the liklihood a mini-public will influence policy and practice?***

There is a trend toward recomendations to express a will for better democratisation of the process, and more information available to citizens outside of the mini-public. Possibly due to the range of views heard by citizens, and the dominant type of experts selected (those from Government Organisations and civic groups that advocate for change), the citizens’ report from the consensus conference focused their reconmendations on legislation, accountibility, and access to information (Joss & Klüver 2001: 51–52).

**Table 8: Denmark and Finland: Impact in Mini-Public Cases**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***No.*** | ***Influence of evidence on participants*** | ***Policy area***  | ***Extent of policy/ practice influence*** | ***Key references*** |
| ***16*** | Moderate influence  | Health | No influence | Dryzek & Tucker (2008); Joss & Kluver (2001) |
| ***17*** | Don't know | Health/ Education | Don't know | Bangsbo et al. (2016) |
| ***18*** | Don't know | Health | Don't know | Raisio (2010) |
| ***19*** | Don't know | Health | No influence | Raisio & Vartiainen (2015) |
| ***20*** | Don't know | Energy | Don't know | Himmelroos (2017) |
| ***21*** | Don't know | Immigration | No influence | Karjalainen & Rapeli (2015) |
| ***22*** | Don't know | Education | Don't know | Bulling et al. (2013) |
| ***23*** | Don't know | Immigration | Don't know | Grönlund et al. (2010) |

1. ***Are there any trends across the cases in each country that suggest certain types of social policy and practice are more open to evidence synthesised by mini-publics than others?***

There are no suggestions that certain types of policy are more open to evidence synthesised by mini-publics than others, although timing is relevant. The GM food mini-publics (case no. 16) was evaluated as being held too late (Joss & Klüver 2001: 46; Dryzek & Tucker 2008), as it was not carried out during the media and wider public debate, but rather a year later. It was suggested that the evidence presented and subsequent deliberation would have been more effective when it was a hot topic.

**Consensus Conference on Physical Activity in Schools, Bangsbo 2016**

**Background**

In 2016 a Consensus Conference in Snekkersten, Denmark was organised around the issue of physical activity in schools (case no.17). The mini-public participants were from eight countries, and consisted of 24 academic researchers from disciplines related to various disciplines around physical fitness. The participants reached agreement on a 21 item statement around the themes of ‘fitness and health’, cognitive functioning’ engagement, motivation, psychological well-being’ and ‘social inclusion’. The statement includes educational and physical activity implementation strategies, for example: *‘*Whole school approaches and the provision of physical activity-conducive environments such as bike lanes, parks and playgrounds, are both effective strategies for providing equitable access to, and enhancing physical activity for, children and youth*.’* (Bangsbo et al. 2016: 1178). The process lasted 4 days.

**Use of Witnesses**

It is not clear if any expert witnesses took part. The participants themselves (n=24) took part in a combination of plenary and group activities suggesting they acted as ‘expert witness’ in the delivery of evidence from their specific discipline, before group discussions.

**Use of Evidence**

The authors report presentations of the ‘state-of-the art’ in each domain. Beyond this there is little indication on the types of presentation, or the influence on policy from the consensus statement and recommendations. Further, the purpose of the consensus conference is unclear, but we do know that it was organised and participated in by ‘experts’ from academic disciplines with an interest in the impacts of physical activity, and provides strategies and guidance for schools.

**Merits Further Research**

This case study is particularly interesting, and in need of further investigation due to its recruitment of participant and expert witnesses. The organisers, expert witnesses, and participants seem to take on multiple roles throughout the consensus conference. From the reports available it seems the authors, also organised and took part in the conference, as well as acting as expert witnesses (Bangsbo et al. 2016). It would also be useful to establish the relationship to policy outcomes, particularly in the context of experts and participants dynamic outlined above. Finally, Out of the Danish cases it is the most orientated to social policy.

From Finland the consensus conference on Finish health care reform (case no.18) should be investigated (Raisio 2010). Similarly, out of the Finish cases it is the most orientated to social policy. However, at present we have little information on it.

**France**

**Table 9: France: Overview of Mini-Public Cases**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Case*** | ***Mini-Public*** | ***Location*** | ***Date*** | ***Duration*** | ***No. Participants*** | ***Sampling Method*** |
| ***24*** | Evaluation of Regional Public Polices  | Citizens' Jury | Poitou-Charentes, France | 5th-26th of April and 16th-17th of May 2008 [2] | 4 days | 25 | Random selection  |
| ***25*** | Genetically Modified Organisms (GMO) | Consensus Conference | National | 1998 | Don't know | Don't know | Don't know |
| ***26*** | Health Technology Assessment (HTA) | Consensus Conference | Don't know | 1993 - 2000 | Don't know | Don't know | Don't know |
| ***27*** | Hepatitis C | Consensus Conference | Don't know | 1997 - 2002 (Held every 6 months) | Don't know | Don't know | Don't know |
| ***28*** | Chronically medicated psychotic disorders | Consensus Conference | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***29*** | Teaching and learning in schools | Consensus Conference | Paris | Jan 2015 | 2 days | 25 | Don't know |

1. ***Are there any trends across the cases in each country that suggest the organisational features of the mini-public influence citizens’ engagement with evidence?***

There is limited data and research on the Consensus Conferences held in France, and it is not clear how the organisational features influenced citizens’ engagement with evidence. However, there was an interesting insight from a Consensus Conference held on Genetically Modified Organisms (GMOs) in 1998 (case no. 25). This may be reflective of the fact that this Consensus Conference was held 20 years ago, but in a report published in 2007, Neilsen et al. (2007: 26) argued that ‘in France, the consensus conference model was perceived to be somewhat controversial.’ The authors found that ‘several interviewees referred to the conference as an unusual procedure that was in some ways incompatible with French political culture.’

Dryzek (2010) categorises political systems into three broad types, based upon two types of dimensions: whether states are inclusive or exclusive in terms of integrating social interests into the policy process and whether inclusivity and exclusivity is active or passive. Inclusive states accept a myriad of social interests in the policy process, while exclusive states limit the interests that are seen as legitimate participants in the policy process. States that are passively exclusive, such as France, only enable a few select groups to participate in the policy process.

The fact that this mini-public was still seen as controversial may explain how the Consensus Conference was organised, and the fact that the focus was on how the session would function, rather than what effects arose from it. As Neilsen et al. (2007: 26) found, the ‘novelty of the situation meant that the organisers and the steering committee were focussed on how this method could function in a French political context, rather than how well it served as a forum for broadening debates on GMOs.’ Unfortunately, there is a lack of research available to show how the Consensus Conference was structured to fit a French context, or how citizens engaged with the evidence.

There were two Citizens’ Jurys held in France, one held in Poitou-Charentes in 2008 and one in Calais 2011, and lasted 4 and 5 days respectively. The Poitou-Charentes Citizens’ Jury used a specialised recruitment company to select residents based on sociodemographic characteristics, whilst the Citizens’ Jury in Calais drew lots from the electoral roll. Both Citizens’ Jurys used a mix of facilitated sessions and presentations to convey and discuss the evidence. It is not clear from the Poitou-Charentes Citizen Jury how it influenced the citizens’ engagement with evidence. However, with the Citizens’ Jury in Calais, there was criticism of how participants were engaged, and the influence the evidence had on them. Revel (2012: 181) states that the report produced at the end of the Citizens’ Jury ‘did not produce major changes.’ One year later, a meeting was organised to feed back to citizens on the changes implemented based on their advice. At this meeting, Revel (2012) says ‘there was poor content as to the main suggestion made by citizens.’

1. ***Are there any trends across the cases in each country that suggest some types of mini-public have had more frequent and extensive impact on social policy and practice than others?***

As there is limited data on the mini-publics in France it is not possible to establish which have had the most frequent or extensive impact on social policy or practice. However, there are interesting findings from the case studies which have been analysed.

The Citizens’ Jury in Poitou-Charentes (case no. 24) was an important test case in the use of mini-publics. Following the Citizens’ Jury, the Poitou-Charentes region launched the European Network for Participatory Democracy (Fletcher 2017). However, there was strong criticism of the Citizens’ Jury held in Calais. Revel (2012) argues that there was little content on how the citizens’ feedback had been used to affect change and concluded that ‘the question remains of the purpose of such participatory devices which seem to be seen by politicians as a way of legitimizing their position inside the political arena more than a real attempt to integrate citizen views.’ This damning critique may stem from how the Calais Citizens Jury was set up, with the main question of the mini-public regarded as ‘quite general and vague’ (Revel 2012: 180-181).

The only Consensus Conference that we found, which has been studied to show the impact on policy and practice, is the Consensus Conference on GMOs (case no. 25). This Consensus Conference, researched by Neilsen et al. (2007: 25), was the first Consensus Conference to be organised in France and ‘turned out to have quite a significant effect on the ways in which the conferences were conceptualized.’ Neilsen et al. (2007: 25) argue that consultation with the public is often dismissed in France as it is seen to ‘interfere with the legitimacy and political equality associated with representative democracy.’ Even the organisation sponsoring the Consensus Conference on GMOs, the Parliamentary Office for the Evaluation of Scientific and Technological Choices (OPECST), were critical of the model. One of the organising civil servants described the atmosphere surrounding the Consensus Conference: ‘the senators and the parliamentarians said ‘‘but there’s really no need to organize a citizens’ conference, because we are the ones representing the citizens. Why this madness? Why would you want to organize in the midst of the assemblies a procedure which contradicts the essence of representative democracy?’’’ Another civil servant said, ‘in France, any kind of citizen intervention is looked upon as a pervasion of representative democracy. And especially within parliament, where they don’t really have much power left now with everything being decided in Brussels, or in the government, or in in the trade organisations. So they are already left with next to nothing if you take away from their roles as representatives of the people’ (Neilsen et al. 2007: 27). This shows that not only civil servants, but also elected politicians were sceptical about the process. Unfortunately, there is no research to show whether this Consensus Conferenced helped to influence political opinion about the mini-public, or if and how the Consensus Conference influenced the policy and practice surrounding GMOs.

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences citizens’ engagement with evidence in mini-publics?***

For all the mini-publics held in France - both the Citizens’ Jurys and the Consensus Conferences - it is not clear how experts were recuited, how many witness sessions were held, or how the evidence was presented, beyond knowing that there were presentations and facilitated discussions. As a result, it is not possible to say how the experts influence citizens’ engagement with evidence.

**Table 10: France: Witnesses and Evidence in Mini-Public Cases**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Activities*** | ***No.*** ***witnesses*** | ***Type of witnesses*** | ***Witness recruitment method*** | ***No. witness sessions*** | ***Format of evidence presentation*** |
| ***24*** | Facilitated and plenary small group discussion  | Don't know | Don't know | Don't know | Don't know | Small group discussions and plenary  |
| ***25*** | Don't know | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***26*** | Don't know | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***27*** | Don't know | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***28*** | Don't know | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***29*** | Two preparatory meetings were held with the jury so that they could learn how to read a research report and to manage the results. Followed by small group discussion. | 15 | Knowledge experts | Don't know | Don't know | Written reports, discussion sessions |

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences the liklihood a mini-public will influence policy and practice****?*

Again there is a lack of relevant information reported accross the identified cases to make this assessment.

**Table 11: France: Impact in Mini-Public Cases**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***No.*** | ***Influence of evidence on participants*** | ***Policy area***  | ***Extent of policy/ practice influence*** | ***Key references*** |
| ***24*** | Don't know | Education; health | In 2008, Poitou-Charentes Region launches a European Network for Participatory Democracy following the Citizen Juries | Fletcher (2017) |
| ***25*** | Don't know | Health | No influence | Neilsen et al. (2007); Tucker (2008); Lemaire et al. (2010) |
| ***26*** | Don't know | Health | Don't know | Weill & Banta (2009) |
| ***27*** | Don't know | Health | Don't know | Salmon-Ceron et al. (2012) |
| ***28*** | Don't know | Health | Don't know | Arbus et al. (2012) |
| ***29*** | Don't know | Education | Don't know | Rey & Gaussel (2016) |

1. ***Are there any trends across the cases in each country that suggest certain types of social policy and practice are more open to evidence synthesised by mini-publics than others?***

In France, the mini publics spanned different policy areas: health, social benefits, and education. However, there is a lack of research into how the mini-publics used – Citizens’ Jurys and Consensus Conferences - influenced policy and practice or how cititzens were influenced by the evidence presented.

|  |
| --- |
| **Consensus Conference on Teaching and Learning, Paris, 2015****Background**In January 2015, a Consensus Conference on teaching and learning was held in Paris. It was convened by the French Institute of Education through its National Council for School System Evaluation (CNESCO). The Consensus Conference focussed on the issue of grade retention (repeating the year) (Rey & Gaussel 2016). The event lasted three days and was held in a high school. The jury panel was comprised of twenty-five educational stakeholders, including teachers, head teachers, inspectors, and parents (Rey & Gaussel 2016). It is not clear how they were recruited and selected. **Use of Witnesses** The witnesses were comprised of 15 expert scholars, experts from the educational system (i.e. principals) and from institutions, such as the EU and French Ministries. The expert scholars contributed to the conference by writing a short paper prior to the event and presented their research during the first two days of the public conference. All the witnesses were asked questions by the jury (Rey & Gaussel 2016). It is not clear how and why the witnesses were selected. **Use of Evidence** There was activity and engagement ahead of the Consensus Conference. In the six months preceding the Consensus Conference, an extensive literature review was undertaken to explore the issue (Rey & Gaussel 2016). Also, ahead of the Consensus Conference, two preparatory meetings were held with the jury so that they could learn how to read a research report and to manage the results. This included discussion of the differences between experimental and non-experimental research, what research evidence means, and how research can inform practice (Rey & Gaussel 2016). During this same period, a panel of schools were asked to explain and describe the issues they faced and their concerns about students repeating years. The teachers and headteachers from these schools were asked to prepare a list of questions, and it was these questions which informed the conference programme. In addition, in the run-up to the conference, fifteen academics wrote short papers, which they then presented during the public conference (Rey & Gaussel 2016). It is not clear how and why these academics were selected. Evidence was presented in written reports, oral presentations, and discussion sessions. During the third and final day, no witnesses were present, and instead the members of the jury wrote the ‘recommendations’. The recommendations were presented at an event in the French Senate. The recommendations discussed how the issue of grade retention is not particular to France, and that the extensive literature review and evidence presented during the conference showed that repeating a year does not improve educational outcomes, and in some instances, could negatively affect future employment prospects. As well as stating the findings of the research, the jury also suggested alternatives to repeating a year. The jury drew upon the research to recommend new interventions and innovations to be used by teachers in the classroom. As Rey & Gaussel (2016: 585) note, the jury decided that as ‘learning difficulties appear in the classroom, so they have to be tackled in the classroom, even if the causes of failure lie outside the school’, therefore teachers need to be made aware of, and encouraged to use, alternative solutions. It is not clear if any of these solutions were adopted, or how these recommendations influenced policy and practice.**Merits Further Research**In 1998, a Consensus Conference was held on GMOs and was deemed controversial and incompatible with the French political system. This mini-public could be investigated further to understand whether Consensus Conferences are still viewed in this way in France (Rey & Gaussel 2016). This would further our understanding of how political systems influence the ability of mini-publics to achieve policy and practice impact.  |

**Germany and the Netherlands**

**Table 12: Germany and The Netherlands: Overview of Mini-Public Cases**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Case*** | ***Mini-Public*** | ***Location*** | ***Date*** | ***Duration*** | ***No. Participants*** | ***Sampling Method*** |
| ***30*** | GAMBA ("Gene Activated Matrix for Bone and Cartilage Regeneration on Arthritis") Patient and Citizen Panels | Citizens' Jury | Bayern | May-11 | 3 to 4 days | 50 | Random and stratified selection |
| ***31*** | Participatory Budgeting in Berlin-Lichtenberg | Citizen Assemblies | Berlin-Lichtenberg, a borough in Eastern Berlin | 2005 - ongoing | Don't know | 600 [participated in 2008] | Online registration, selection is unclear |
| ***32*** | Children's rheumatology | Consensus Conference | Dusseldorf [2] | 9th of May 2007, 1st of August 2007 and 15th of January 2010  | 1 day each | Don't know | Don't know |
| ***33*** | Unipolar Depression Diagnostic | Consensus Conference | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***34*** | Evaluating complex evaluations in health | Consensus Conference | Don't know | Don't know | 1 day | No citizens - 45 "expert" attendees | Don't know |
| ***35*** | Chronic disease | Consensus Conference | Berlin | 15 - 16 March 2011 | 2 days | No citizens - 36 medical professionals and academics | Don't know |
| ***36*** | Concussion in sport | Consensus Conference | Berlin | 27 - 28 October 2016 | 2 days | No citizens - 420 medical professionals and academics | Don't know |
| ***37*** | Land use | Citizens' Jury | Flevoland | 2007 | Don’t know | 36-40 | Other: mixture of self-selection, then sampling based on lack of specific interest in topic and motivations for participation |

1. ***Are there any trends across the cases in each country that suggest the organisational features of the mini-public influence citizens’ engagement with evidence?***

The Netherlands search showed no mini-publics with a focus on social policy. Looking across the German mini-publics, their duration is similar, where data exists. The Citizens’ Jury in Bayern lasted 3 days, the Consensus Conferences lasted for 2 days, but the duration of the Citizen Assembly is not clear. All the mini-publics presented evidence in similar ways, with participants introduced to the topic by expert presentations. These were followed by question and answer sessions, and small group discussions. The group discussions were usually facilitated.

From the sample, there are two case studies, which have been researched in enough depth to identify the influence of evidence on citizens. Firstly, the medical Citizens’ Jury in Bayern (case no. 30) focussed heavily on ‘empowering’ participants in the topic (European Commission 2014). The organisers adopted four approaches to help foster this empowerment. The first was to ensure that a balanced view was presented in the witness presentations. The project organisers selected the experts to present, and the panellists then selected additional outside experts to provide ‘testimony’, to help assure participants that they were hearing all sides of the argument. The second approach they used was to ensure the participant discussions were effectively facilitated. To do this, independent facilitators were used to aid the deliberation. The third approach was deployed on the second day, and this was to enable the participants to select the experts from the presenters they had heard from on days 1 and 2 to present at the second weekend. The fourth tactic was to enable participants to become ‘ambassadors.’ These ambassadors were individual participants who adopted an issue on behalf of the panel, and presented their results on the third day. These presentations were heard alongside the presentations from the experts the participants had selected. Because of these four tactics, the evidence had an impact on the participants. The European Commission (2014: 11) research concluded that this led to ‘medical empowerment of participants’, and cited the facilitators as particularly important, helping ‘empower the self-confidence and the assessment skills of the participants, allowing a discussion between laypersons and experts.’

The second case study, which has been studied in enough depth to identify the influence on citizens, is the Citizen Assembly in Berlin (case no.31). It is not clear how many Assemblies were held, but within these, participants heard about the budget and the implications of different budgeting decisions and were then able to cast votes on budget suggestions. A review of this process, undertaken by Shkabatur (2010) identified that citizens were often ‘left in the dark.’ This is because the project structure meant that it took a long time - up to two years – before citizens felt the benefits of the process. In addition, many of the citizens’ suggestions were rejected as they were deemed unviable, however, this was not communicated to the citizens. As the project progressed, the organisers tried to rectify the breakdown in communication by putting all suggestions online so that citizens could track the progress, and to discuss these via networking sites, such as Twitter and Facebook (Shkabatur 2010).

The original question for this section focusses on the influence that the evidence has on citizens. It is worth noting that not all the mini-publics aimed to engage ‘citizens’ per se. Instead the mini-publics were often used to engage with practitioners and professionals. For example, there was a Citizens’ Jury on arthritis which involved osteoarthritis professionals from academia and the healthcare sector. Another example was a Consensus Conference on chronic disease which was attended by medical professionals and academics. Rather than citizens, or the ‘lay’ public, attending these mini-publics, they were instead attended by paid professionals, drawn largely from medical and academic fields, which makes their recruitment more closed and selective, and not representative of the wider population, as many mini-publics aspire.

1. ***Are there any trends across the cases in each country that suggest some types of mini-public have had more frequent and extensive impact on social policy and practice than others?***

Based on the limited amount of cases in this review, the citizens’ jury is the most popular form of mini-public in the Netherlands but the impact on policy could not accurately be described as frequent or extensive.

Out of the seven mini-publics identified in Germany, only two have details on how they influenced policy and practice. The first is the Citizens’ Jury on arthritis (case no.30), where, because of the Citizens’ Jury, 20 papers were published in scientific journals, nine masters and PhD theses were completed by students working on the project, partners attended international meetings, and education material was prepared (Fletcher 2017). However, this activity is comprised of outputs, and do not necessarily indicate impact on social policy and practice.

The second mini-public which has been reviewed to show the influence on social policy and practice is the Citizen Assembly in Berlin (case no.31). The Mayor declared that over 90% of citizens’ suggestions had been implemented, and that the most common reason suggestions were rejected, was because they had been tried previously and had not been successful (Shkabatur 2010). One suggestion that was implemented was a project offering native language literature in Russian and Vietnamese in the district's libraries. This proposal received the most votes in the year, and was supported by the Russian and Vietnamese population, but also by German participants (Sozialistische Tageszeitung 2009). However, it is not clear if these impacts were the results of the Citizen Assembly or are the result of the wider participatory budgeting programme of which the Citizen Assembly formed part.

What seems most important to policy impact on the cases identified, is elements of institutional design by which the mini-public is directly associated with a policy-making process. In other words, those mini-publics that were organised by a public authority, or as part of a policy-making process led by a public authority on a specific policy. This form of mini-public, operating as a policy device, differs from many others that seem experimental, and organised and led by civil society organisations, or research teams. Of those identified citizens’ juries seem more likely to be configured in a way that they are part of an existing policy-making process. The fact that the examples cited here are Citizens’ Jurys and Citizen Assemblies does not necessarily mean that these types of mini-public have a more frequent and extensive impact on social policy and practice than others. Rather, it might just be reflective of where evidence or institutional connections exists.

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences citizens’ engagement with evidence in mini-publics?***

The reports in the literature review indicate that the organisers of the mini-public recruited expert witnesses in the majority of cases. The selection process is often justified as the expert witnesses hold expert knowledge and diverse expertise, interests, and viewpoints with regard to the issue under consideration (Huitema et al. 2007: 302). In the cases identified where this information is available (see Cuppen 2011; Hendriks 2009), the types of expert witnesses were a range of knowledge experts from NGOs and other public bodies deemed to be on either side of the argumnt, or in two cases government actors deemed to be neutral.

However, in one case (no.37) the organisers allowed jurors to choose witnessses, whom they then invited and briefed. The reports indicate that allowing particpants to select expert witnesses influences their engagement with evidence (Huitema et al. 2007: 209). In this case the citizens requested that government officials be brought in to create a more ‘neutrel’ expert witness panel, and it was found that ‘interactions with the witnesses had enlarged their knowledge” (Huitema et al. 2007: 303), when the witnesses were selected by the the particpataing citizens. This suggests evidence that is considered ‘neutral’ by participants is more likely to impact or influence on their recommendations. Citizen-particpants’ felt that the witnesses’ presentations had increased their ability to make informed judgments and formulate recommendations.

Another interesting case is the Citizens’ Jury in Bayern (case no.30). Here the lines between ‘expert’ and ‘participant’ became blurred. Participants could volunteeer to act as ‘ambassadors’ to pursue issues on behalf of the expert panel, and to then present evidence. This was one of the tactics deployed which helped empower the participants to feel more confident about the evidence on the topic (European Commission 2014).

**Table 13: Germany and The Netherlands: Witnesses and Evidence in Mini-Public Cases**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Activities*** | ***No.*** ***witnesses*** | ***Type of witnesses*** | ***Witness recruitment method*** | ***No. witness sessions*** | ***Format of evidence presentation*** |
| ***30*** | Facilitated and small group and plenary deliberations. | Don't know | Knowledge experts (scientists) | Don't know | Don't know | Expert presentations, expert testimony, Q&A, facilitated discussion with audience |
| ***31*** | Plenary discussion and voting | Don't know | Stakeholders (Public officials) | Don't know | Don't know | Discussion |
| ***32*** | Facilitated and small group deliberations. | Don't know | knowledge experts, stakeholders, experiential publics | Don't know | Don't know | Don't know |
| ***33*** | Don't know | Don't know | Don't know | Don't know | Don't know | Don't know |
| ***34*** | Presentations, small group discussions | 45 | Knowledge experts | Don't know | Don't know | Verbal presentations, written representation of data in report format, discussion |
| ***35*** | Presentations and discussion | 7 | Knowledge experts | Don't know | Don't know | Verbal presentations and written reports |
| ***36*** | 2-day open format, a 1-day closed expert panel meeting and two additional half day meetings to develop the Concussion Recognition Tool 5 (Pocket CRT5), Sport Concussion Assessment Tool 5 (SCAT5) and Child SCAT5 | 33 | Sports medicine academics and professionals | Mini-public organisers | 12 | Plenary and small group discussions  |
| ***37*** | Presentation by expert witnesses | Don't know | Don't know | Chosen by jury | Don't know | Q&A |

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences the liklihood a mini-public will influence policy and practice?***

It is not clear from the research on mini-publics in Germany and the Netherlands as to how the types of expert, methods of expert recruitment, and the methods of presentatin of evidence influences policy and practice. The one insight that can be gleaned from across the examples is that the mini-publics were often attended by practitioners and professionals, rather than ‘lay’ citizens, which may explain why the influences often focus on policy statements and academic outputs.

**Table 14: Germany and The Netherlands: Impact in Mini-Public Cases**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***No.*** | ***Influence of evidence on participants*** | ***Policy area***  | ***Extent of policy/ practice influence*** | ***Key references*** |
| ***30*** | Moderate influence | Health | Limited influence | Fletcher (2017) |
| ***31*** | Moderate influence | Various | Policy and practice influence | Shkabatur (2010) |
| ***32*** | Don't know | Health | Don't know | Horneff et al. (2017) |
| ***33*** | Don't know | Health | Don't know | Härter et al. (2010) |
| ***34*** | Don't know | Health | Don't know | Möhler et al. (2015) |
| ***35*** | Don't know | Health | Don't know | Renz et al. (2011) |
| ***36*** | Don't know | Health | Don't know | Meeuwisse (2017) |
| ***37*** | Moderate | Housing | Don't know | Huitema et al. (2008) |

1. ***Are there any trends across the cases in each country that suggest certain types of social policy and practice are more open to evidence synthesised by mini-publics than others?***

It is not possible to deduce that certain areas of social policy are more open to evidence from mini-publics, but there are clear trends about which policy areas use mini-publics, and in the case of Germany they predominalty ralted to medicine. This includes all of the Consensus Conferences which were in medicine, and spanned numerous sub-fields, including rhemutaology, mental health, sports science and chronic disease. In addition, the only Citizens’ Jury identified in Germany was in medicine, and focussed on arthritis.

|  |
| --- |
| **Citizens’ Jury on Arthritis, Bayern, 2011****Background**In May 2011, a 4-day Citizens’ Jury was held to discuss GAMBA: Gene Activated Matrix for Bone and Cartilage Regeneration on Arthritis (case np. 30). GAMBA is an innovative treatment of osteoarthritis (Fletcher 2017). The Citizens’ Jury was convened to assess what patients and citizens know about GAMBA, and if they have any particular interests or concerns. In addition, the mini-public aimed to understand patients and citizens recommendations to regulators, industry, and the media, about the opportunities, risks, and ethical implications of GAMBA. Fifty healthcare practitioners and professionals attended (Fletcher 2017). **Use of Witnesses** The witnesses were comprised of scientists. Fletcher (2017) reports that they were selected to ‘assure participants that they were hearing all sides of the argument.’ In addition, panellists could have selected outside experts to give testimony. Unfortunately, there is not more detail on their background, how many took part, or how they were selected. We do know that evidence was presented through expert presentations, expert testimony, Q&A, and facilitated discussion with the audience (Fletcher 2017). **Use of Evidence** Evidence was presented through expert presentations and facilitated Q&As sessions. The structure of each involved: * Day 1: After participants had been given an opportunity to get to know each other and were provided with an outline of the schedule, they listened to an introductory presentation on osteoarthritis, were given an overview of the GAMBA research project, put their questions to the speakers and discussed the issues with them.
* Day 2: On the second day, participants considered GAMBA in depth. The lay participants also listened to presentations on the possible risks related to the GAMBA field of research and on the ethical aspects. The session concluded with participants selecting experts for a hearing on the second weekend.
* Day 3: On the third day, those participants who had prepared an ‘ambassadorship’ presented or discussed their results with their fellow panellists. Then the hearing with the experts selected by the participants took place.
* Day 4: The fourth and last day was used for an in-depth discussion and for the assessment of the GAMBA field of research.

The citizens’ jury focussed heavily on ‘empowering’ participants in the topic (European Commission 2014). The organisers adopted four approaches to helping foster this empowerment. The first was to ensure that a balanced view was provided in the witness presentations. The project organisers selected the experts to present, and the panellists then selected additional outside experts to provide ‘testimony’, to help assure participants that they were hearing all sides of the argument. The second approach they used was to ensure the participant discussions were effectively facilitated. To do this, independent facilitators were used to aid the deliberation. The third approach was deployed on the second day, and this was to enable the participants to select the experts from the presenters they had heard from on days 1 and 2 to present at the second weekend. The fourth tactic was to enable participants to become ‘ambassadors’, adopting an issue to pursue on behalf of the panel, these ambassadors presented their results on the third day, alongside hearing from the experts the participants had selected. **Merits Further Research**The Citizens’ Jury on arthritis could warrant further exploration to help understand in greater depth how the tactics used in the activities and the blurring of boundaries of participants and experts – such as by using “ambassadors” (detailed below) - helped shaped the influence of evidence on participants, and the influence on policy and practice (European Commission 2014).Because of these four tactics, the evidence had an impact on the participants. The European Commission (2014) research concluded that this led to ‘methodical empowerment of participants’, and cited the facilitators as particular important, helping ‘empower the self-confidence and the assessment skills of the participants, allowing a discussion between laypersons and experts’. The panel’s conclusions were compiled into a report for public distribution. Fletcher (2017) states that this report offers a ‘balanced, professionally developed and scientifically sound summary of the risks and ethical aspects of innovative osteoarthritis treatments. The audience of the report includes clinics, interested companies, medical professionals as well as the media and the broader public.’ It is not clear what impact this report had on practice. However, because of the GAMBA project, several outputs were created. Because of the Citizens’ Jury, 20 papers were published in scientific journals, nine masters and PhD theses were completed by students working on the project, partners attended international meetings, and education material was prepared (Fletcher 2017). However, this activity is comprised of outputs, and do not necessarily indicate impact on social policy and practice.  |

**Citizens’ Jury on Land use in the Netherlands, 2007**

**Background**

A citizens Jury of around 40 citizens was held in Flevoland in 2007 to help determine land-use policies in the region, for example the ways public transport could be improved between cities in the region through the construction of a rail line (case no.37). The process lasted seven months, and included three separate mini-public events of 12-14 participants from the wider regional area. There was some concern over the low reply-rate to invitations to the mini-public (6%), when focusing on the selection of participants.

**Use of Witnesses**

It is not clear how many expert witnesses took part in the mini-public. What is clear is that jurors had a large role in selecting expert witnesses. Expert witnesses where invited by organisers through organisations. Organisers asked relevant organisations to send a representative with appropriate communication skills, and who would be open to questioning, to be witnesses (Huitema et al 2007: 302). Participants were also sent briefing materials, in the form of a reading list of publications and some background material that was screened by the organisers for factuality and neutrality. There is no indication that this affected participants’ views, and there was an indication that participants’ own pre-existing expertise was the most important factor. For example, the authors noted: ‘stark differences among jury members in their capacities to understand issues, to ask questions, and to engage with other jurors. Our impression—it is no more than such at this time—was that these capacities were largely associated with previous participation in public decision-making’(Huitema et al. 2007 p. 304).

**Overview of Evidence**

Presentation of evidence was in a Q&A format where participants could ask question at the end of each presentation. There was a moderate amount of influence on the participants during the process: ‘They also felt that the witnesses’ presentations had increased their ability to make informed judgments and formulate recommendations’(Huitema et al. 2007: 303). As this jury was commissioned by the provisional parliament, which is the level of governance that produces a legally required plan, the recommendations fed in to the regional land-use planning process (Huitema et al 2007: 297). However, there is no clear explanation on what the outputs of the process were and how, if at all, they affected the eventual policy outcomes.

**Merits Further Research**

The Citizens’ Jury on land-use warrants further investigation into its connection to the policy process. Huitema et al. (2007) describe how the jury was commissioned by local authority officials, but do not outline how this process of transmission between the two arenas took place.

**The United Kingdom**

**Table 15: The United Kingdom: Overview of Mini-Public Cases**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Case*** | ***Mini-Public*** | ***Location*** | ***Date*** | ***Duration*** | ***No. Participants*** | ***Sampling Method*** |
| ***38*** | Brexit | Citizen Assemblies | Manchester | 7 - 30 September, 2017 | 6 days | 50 | Random selection |
| ***39*** | Detection of atrial fibrillation | Consensus Conference | Edinburgh | 1–2 March 2012 | 2 days | Don't know | Don't know |
| ***40*** | Alzheimers | Consensus Conference | London | Don't know | 1 day | Don't know | Don't know |
| ***41*** | Future of the NHS | Deliberative Poll | Don't know | 1998 | 2 days | Don't know | Random sampling |
| ***42*** | Future of local schools | Deliberative Poll | Omagh | 27 Jan 2007 | 1 day | 127 | Random sample of parents  |
| ***43*** | Build Phase of NHS Citizen: Citizen Jury [to identify issues to take to the Citizen Assembly - see r below] | Citizen Jury  | Stoke on Trent  | 27 & 28 October 2015  | 2 days  | 15 | Stratified sampling |
| ***44*** | Proposed use of health data | Citizen Jury  | Manchester & York | 2 & 9 November 2016 | 4 days per Jury | 36 (18 at each Jury) | 694 people applied to be jurors. |
| ***45*** | Build Phase of NHS Citizen | Citizen Assembly | East London | 25-Nov-15 | 1 day | 250 participants | Voluntary members, elected or nominated representatives, random stratified sampling or purposeful sampling. |
| ***46*** | Inaugural NHS Citizen Assembly | Citizen Assemblies | Westminster, London | 18-Sep-14 | 1 day | 200 | 200 patients, carers, activists, volunteers, voluntary sector and public service workers |
| ***47*** | Community bonfires | Citizen Jury  | North East Scotland | Oct-16 | 2 days | 16 citizens (only 12 attended both days) | Random selection, with representation across socioeconomic factors. |
| ***48*** | Genetic testing for common disorders | Citizen Jury  | Wales | Nov-97 | 4.5 days | 15 | Stratified sampling |
| ***49*** | NanoJury UK (Citizens' Jury on Crime & Nanotechnologies) | Citizens' Jury |   | June and July 2005 | Each jury was two and a half hours, twice a week for five weeks, with additional meetings when required. | 16 | "A cross section of people from across West Yorkshire" - exact recruitment method is unclear |

1. ***Are there any trends across the cases in each country that suggest the organisational features of the mini-public influence citizens’ engagement with evidence?***

Out of the mini-publics held in the UK, only a few case studies detail the influence of the evidence on citizens. The citizens’ jury on Nanotechnology (case no. 49) explicitly evaluated and analysed how the mini-public affected public engagement. This involved participant observation of the nano jury sessions, interviews with the jurors on first two nights to ascertain their expectations of the process, and a focus group on the final evening of the jury to elicit jurors’ views on the most successful aspects of the jury. These insights informed a qualitative survey which was sent out to all jurors following the citizens’ jury (Rogers-Hayden & Pidgeon 2006). A key element of the mini-public was to introduce a broad range of views into the discussion by recruiting a varied mix of nanotechnology advocates and sceptics, and to faciliate sesssions in such a way that enabled jurors to freely construct recommendations. Rogers-Hayden & Pidgeon (2006: 176) found that this bottom-up approach allowed the jurors more control over the process, however many jurors did feedback that the process could have been more focsused to enable a more contained set of recommendations to emerge.

It is clear from the NHS Citizen Assembly in London that the duration of a mini-public impacts on the citizens’ engagement with the evidence. In this case, 200 patients, carers, activists, and voluntary sector and public service workers, were convened for a day to discuss the NHS Citizen Assembly (case no.46). The day had a full agenda, with five topics discussed, with several presentations, and break-out group discussions. The lack of time meant that ‘not all groups were able to reach the stage of solutions, but all conversations helped clarify the problems and highlighted areas of agreement and disagreement on how these problems should be addressed’ (Adebowale, Devane & Kelsey 2015). Adebowale, Devane & Kelsey’s (2015) review of the event concluded that time was an issue, and that future events should be at least two days long.

Another one day Citizen Assembly followed the NHS Citizen Assembly to help progress NHS Citizen Assembly to the ‘build phase’, to focus on building the technical infrastructure and establishing NHS Citizen as a way of working (case no.45) (Involve 2016). The fact that this event was only 2 months after the initial citizen assembly meant that recruitment was difficult, and it was found that a longer time between the events could have aided recruitment (Fletcher 2017). There were two ways in which the evidence influenced citizens. Firstly, citizens would have welcomed a recap of the first assembly to help them judge how their decisions reached in the first phase were implemented. Secondly, and linked to this, over the longer term, participants, and the wider public, often struggled to see the link between the assembly meeting and the influence on NHS England (Fletcher 2017).

A Citizens’ Assembly was held in Manchester during September 2017 over two weekends (case no.38). Fifty citizens took part, selected via an online panel-based survey, which was administered to a sample of 5000 respondents. From the respondents, over half were willing to participate in the Assembly, of whom one thousand said they could attend both weekends (Renwick *et al.* 2017). From this pool, the 50 Assembly Members were selected randomly, and all received a gift for their attendance. During the first weekend, the fifty attendees had presentations from experts and received briefing papers. The second weekend involved deliberations until decisions were reached, with these supported by facilitators (Renwick *et al.* 2017: 71).

Channel 4 held a Deliberative Poll on the NHS (case no.41). Its recruitment method was random selection, and the activities undertaken formed part of the standard deliberative poll format. There was a review of the influence of the evidence on citizens. It concluded that participants were reluctant to ‘confront the inevitability of some kind of rationing’ and ‘did not endorse any clear departure from current policy’ (Fishkin & Luskin 2006: 183).

The mini-public on genetic testing involved 15 citizens (case no.48). The recruitment was made through a survey, with the organisers deliberately excluding certain categories of respondents. This included health service staff, and elected politicians. Health service staff were excluded as it was felt that they could bring (potentially false) credibility as knowledgeable people, and politicians were excluded as it was felt that they may establish a more ‘representative’ role to assume greater weight in discussions. Without these two categories present, the organisers hoped to avoid ‘undermining the essential equality of the process’ and the ways in which citizens engaged with evidence (Longley 2006: 2).

In addition to the main jurors, the entire citizens’ jury on genetic testing process was open to ‘outside observers’, with a total of around 50 people who attended at some point during the 4-day process. To avoid any disruption or influence, these individuals were kept separate from the jurors and watched the plenary sessions on CCTV (Longley 2006). However, it is not clear who these individuals are, what motivated them to attend, or what the impact of the evidence was on them.

In 2016, Connected Health Cities (CHC) held two 4-day citizens’ juries in Manchester and York (case no.44). In total, 694 people applied to be a juror by completing an on-line survey. It is not clear how jurors were shortlisted, but those which were, were screened to identify ineligible candidates through a brief telephone interview. The final sample of 18 people recruited to each jury was representative of resident adults in the Northwest of England for the Manchester jury, and resident adults in Yorkshire and Humber, Northeast and North England for the York jury. The sample was controlled for gender, age, ethnicity and educational attainment. The jurors were paid £400 for their attendance and received travel expenses according to the distance to the venue from their home (Connected Health Cities 2017). Over the four days in each city, the citizens heard from, and asked questions of, expert witnesses, and carried out facilitated group discussion exercises to explore the jury questions. Citizens also received a ring binder of information on CHC’s health data proposals (Connected Health Cities 2017).

The citizens were polled on their individual views at the start and end of the jury (Connected Health Cities 2017). As a result, of the evidence presentation at the CHC citizen jury, the evidence influenced the citizens. In summary, most people were supportive of CHC’s planned use of health data. A significant minority did not support use of data for identifying frail elderly people who could be followed up for extra care or data for planning future demand for A&E service. Most jurors supported the potential use of data by industry partners. Jurors who voted against proposed uses often did so because they doubted the potential public benefit that would arise. Many of the jury changed their views to become more supportive in general of data sharing, even though they may have become less supportive of specific planned or potential uses (Connected Health Cities 2017).

In October 2016, a 2-day citizen jury was held in North East Scotland to discuss community bonfires (case no.47). Bland (2017) claims that this was the first time that a citizens’ jury had been used in police-community engagement in Scotland and the wider UK. The mini-public was convened as local police, fire service and council were concerned about a community bonfire, but the relationship with the organisers had ‘broken down’ and the jury was ‘seen by all parties as offering a kind of mediation’ (Bland 2017: 31). Typically, citizens’ juries last for five days, but this citizen jury lasted two days as this was considered ‘feasible and affordable’ (Bland 2017: 31). Sixteen citizens attended the first day, but only 12 of these attended the second day, despite jurors being compensated for their time, with the organisers attributing the 4 jurors’ absence to ‘reasons outside of their control’ (Bland 2017: 31). The two jury sessions took place on consecutive Wednesdays, from 9am to 5pm. Although the reasons for their absence is not stated, one reason could be because of the timing of the sessions, with jurors potentially affected by work and childcare commitments. In terms of how the citizens’ jury influenced the participants engagement with the evidence, the jury admitted initial doubt about the process, but by the end there was a unanimous support for the experience and all held a positive view about the deliberation process. It was felt that they worked well, and the discussion had helped them make up their minds about the future organisation of the bonfire event (Bland 2017).

1. ***Are there any trends across the cases in each country that suggest some types of mini-public have had more frequent and extensive impact on social policy and practice than others?***

The mini-publics in the UK were held across numerous policy areas, including policing, health, education, and social benefits.

A deliberative poll on education held in Omagh during 2007 with 127 parents of school children, helped influence policy (case no. 42). Luskin et al.’s review analysed the ways deliberative polls could be used to foster political and social cohesion. The research found that deliberative polls can be the key to a more conciliatory politics, they can encourage politicians to work together, and can ‘undercut the positions of hardliners decrying compromise as a sell-out,’ and help foster constructive dialogue between communities in deeply divided societies (Luskin et al. 2014). Channel 4 held a Deliberative Poll on the NHS. There was a review of the influence of the evidence on policy, which concluded that because the participants were reluctant to endorse any clear departure from current policy, there was minimal policy impact (Fishkin & Luskin 2006).

The citizens’ jury on nanotechnology – NanoJury UK – also analysed if and how this type of mini-public could be used in science (case no.49). Prior to it, there had been concerns that the public focus too heavily on negative issues and risks when appraising new technology. However, when presented with a balanced and varied range of views, Rogers-Hayden & Pidgeon (2006: 177) found this not to be the case, and it was concluded that the science and business community should not ‘fear’ public engagement.

This was similar to the citizens’ jury on genetic testing (case no.48). Prior to the mini-public, critics had said that ‘a group of lay people would be led by the witnesses to reach the conclusions [they] wanted or would fail to understand the complexity of the subject’ (Longley 2006: 6). However, Longley concludes that the citizens’ jury ‘emphatically answered those critics’ and ‘offer a useful way of empowering “ordinary” people to influence the policy-making process’ (Longley 2006: 6).

The citizens’ jury on community bonfires held in Scotland also revealed that mini-publics can usefully involve the public in decision making (case no.47). Bland (2017: 32) states that the citizens’ jury activated ‘latent enthusiasm and commitment’ to community problem solving in a way that conventional policy-community engagement techniques cannot achieve. Bland’s (2017: 32) review of the citizens’ jury found that as a result of it, all three local services – fire, police and local council - saw a great value in process as it helped to ‘unblock the stalemate, renew relationships and open dialogue with the bonfire organisers, and gave them a more nuanced understanding of the community view’ (Bland 2017: 32). Many of the witnesses were said to be surprised at the quality of their interaction with the jury, and, Bland (2017: 32) reports, they felt that the ‘jury listened closely, asked serious questions, and were thoughtful about what they heard’ (Bland 2017: 32). There was also an impact on policy and practice decisions with many of the jury recommendations implemented, although some were deemed impractical. As a result, ‘improvements were made to safety and organisation.’ However, the short timescales between the citizen jury and the bonfire event meant that the ‘fire itself was no smaller, and there was damage to a streetlamp’, which led to continuing concerns about safety (Bland 2017: 32). A lesson for future mini-publics would be to ensure that there is sufficient time to incorporate recommendations and lessons arising into policy and practice decisions.

An issue with both the Citizens’ Assemblies in health’s ability to influence stemmed from a disconnect between the NHS England Board and the participants in NHS Citizens’ Assemblies development (case nos. 45 & 46). Bussu (forthcoming 2018) found that the public were interested in broader topics, whilst the board wanted to focus on quantifiable issues of accountability. Because of the disconnect, the board disengaged, which could have marginalised the impact that the evidence from the Citizens’ Assemblies could have on NHS policy.

It is therefore, not possible from the cases to identify trends that suggest some mini-publics have a more frequent and extensive impact on UK social policy and practice.

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences citizens’ engagement with evidence in mini-publics?***

The citizens’ jury on Nanotechnology – NanoJury UK - was analysed to understand how the presentation of evidence influenced the participants engagement with evidence (case no.49). NanoJury UK encompassed a broad span of perspectives, including from nanoscientist, businesses, and civil society groups, some of which were supportive, and others critical of nanotechnology. The recruitment of these was overseen by an oversight panel, who explicity recruited witnesses that would provide participants with a rangee of views.[[1]](#footnote-1)The involvement of civil society actors and academics, also helped ensure that there was a broader framing of the issues, than just focussing on ‘the science’ (Rogers-Hayden & Pidgeon 2006: 175). The facilitators further helped open up the discsusion to a wide rage of questions, including political, religious, and social dimensions, enabling the jurors to freely create recommendations.

The citizens’ jury on genetic testing explicitly structured evidence presentation to shape the discussion (case no.48). During the mini-public there were 10 principal sessions, each beginning with a presentation from one or two speakers, followed by a question and answer session, and then small group discussions. The organisers’ intentions were ‘to begin with factual presentations on genetics and current service organization, and then to move, via patients, professionals, commercial, and other perspectives, toward a synthesis of views at the end’ (Longley 2006: 3). This citizens’ jury did encounter logistical issues, which impacted on citizens’ engagement with the evidence. The original order of expert sessions had to be modified to accommodate the availability of witnesses. In addition, on the third day, there was an opportunity for the jurors to call on unplanned witnesses. The jurors were keen to hear a religious perspective, however, in the time available, it was not possible to find an expert to fulfil the brief (Longley 2006).

In 2017, Connected Health Cities commissioned citizens’ juries to find out what the public thought about their planned use of health data (case no.44). Citizens’ juries were selected as the method of public engagement as it enabled jury members to ask questions and deliberate a range of evidence presented to them. Connected Health Cities stated that ‘the citizens’ jury method was chosen because it gives time for a broadly representative sample of citizens to learn about, and deliberate on, whether CHC’s plans are acceptable’ (Connected Health Cities 2017: 3). In terms of how the evidence influenced the jurors, a review by Connected Health Cities (2017: 2) found that ‘the majority of people were supportive about [Connected Health Cities’] plans, others felt they had legitimate reasons to be concerned about whether there would be public benefit from those uses. In particular, their prior beliefs about how and why the NHS operates raised concerns about whether improving efficiency would lead to inequitable distribution or closure of services and whether the lack of funding or political will to implement new services would lead to increased public dissatisfaction due to expectations having been falsely raised’ (Connected Health Cities 2017: 2). Connected Health Cities (CHC) analysed how the organisational features of the citizens’ jury could introduce bias and influence the participants’ engagement with evidence. To monitor and minimise bias, an oversight panel was appointed to review the jury design and materials and report potential bias. As well as trying to minimise bias through design, there was also attempts to identify bias during the mini-public itself. As part of this, a questionnaire was administered at the end of the jury to ask about bias, which revealed that witnesses on days 2 and 3 of the York jury were either ‘perhaps occasionally’ or ‘sometimes’ biased in favour of sharing health information. Other attempts to minimise the influence on citizens included ensuring CHC jury funders could help set jury questions but were not involved in the jury process or outcomes; and using facilitators to help citizens construct their own interpretation of findings (Connected Health Cities 2017). Unfortunately, it is not clear what element of the witness’ background, presentation, or discussion on days 2 and 3 introduced the sense of bias to influence the citizens’ interpretation of the evidence.

On day four – the final day of the CHC citizen jury, both the juries in Manchester and York voted on the jury questions, and suggested reasons for and against the options being considered. The facilitator of the juries then constructed a juries’ report with the voting data and ranked the reasons. The citizens were then led through the report, page by page, to ‘gain the jurors’ acceptance that it fairly represented their views.’ In addition, the reports were sent to the participants after the event so that any final changes could be suggested and made before the reports were published. Unfortunately, it is not clear if the jurors suggested any changes, and if any were incorporated.

Explicitly trying to reduce bias was also a feature of the citizen jury in Scotland which focused on community bonfires (case no.47). Ensuring that the jury was ‘independent and impartial’ was built into the design and conduct of mini-public (Bland 2017: 31). To achieve this, a ‘Stewarding Board’ was set up, chaired by the lead organiser, What Works Scotland, with representatives from the local police, council, fire services, and bonfire organisers. The Stewarding Board agreed how jurors would be recruited, the selection of expert witnesses, and the activities the jury would undertake (Bland 2017: 31).

At the community bonfire citizens’ jury, there were three expert witness sessions, with two speakers per session. Each session consisted of two short presentations followed by an extended Q&A discussion. The presentations were followed by a facilitated discussion. There were 6 witnesses who were all representatives from local public services (it is not clear how they were recruited). A range of techniques were used by the facilitators to ‘provide equal opportunities for jurors to take part, and to support discussion’ (Bland 2017: 32)

**Table 16: The United Kingdom: Witnesses and Evidence in Mini-Public Cases**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***No.*** | ***Activities*** | ***No.*** ***witnesses*** | ***Type of witnesses*** | ***Witness recruitment method*** | ***No. witness sessions*** | ***Format of evidence presentation*** |
| ***38*** | Small group facilitated discussion | 15 | Members of Parliament (x 2), academics and practitioners  | Advisory Board | 5 | Verbal presentations, written policy papers |
| ***39*** | Reports, discussion, presentations | Don't know  | Don't know | Don't know | Don't know | Written and oral evidence |
| ***40*** | Facilitated discussion, presentations | Don't know  | Health practitioners, doctors, academics | Mini-public organisers | 1 | Formal presentation, written reports |
| ***41*** | Plenary and small group discussions | Don't know  | Don't know | Mini-public organisers | Don't know | Briefing materials, oral presentations and Q & A |
| ***42*** | Facilitated small and plenary group discussions | Don't know  | knowledge experts & stakeholders | Mini-public organisers | Don't know | Written reports, panel sessions |
| ***43*** | Facilitated deliberation | Don't know | Don't know | Mini-public organisers | Don't know | Presentations, Q & A |
| ***44*** | Facilitated plenary and small group discussions.  | 9 | Academics in health, data and law, NHS staff, and consultants.  | Don't know | 6 | Oral presentations, group discussions, and facilitated plenary |
| ***45*** | Facilitated plenary and small group discussion | Don't know  | Knowledge experts, stakeholders, experiential publics, representative publics. | Mini-public organisers | Don't know | Don't know |
| ***46*** | Facilitated small group and plenary discussion | 11 | NHS Citizen staff, NHS England Board members, practitioners, 4 participants | Don't know | 4 | Oral presentations, group discussions, facilitated plenary, video, and an online discussion forum. |
| ***47*** | Presentations followed by facilitated discussion.  | 6 | Representatives from local public services. | Don't know. | 3 | Presentations, Q & A |
| ***48*** | Facilitated small group and plenary discussion | 15 | Knowledge experts and stakeholders | Don't know | 10 | Presentations, Q & A |
| ***49*** | Small group facilitated discussion | Don't know  | Knowledge experts and stakeholders (Government, civil society, nanoscience, funding bodies, and academia).  | Recruited by the oversight panel. | Don't know | Presentations, Q & A |

1. ***Are there any trends across the cases in each country that suggest some types of expert, methods of expert recruitment, and the methods of presentation of evidence influences the liklihood a mini-public will influence policy and practice?***

Across the case studies, little data exists to show how experts were recruited to ascertain if there is a link with how likely the mini-public will influence policy and practice. In addition, it was not clear how many experts took part in the UK mini-publics. For those case studies wtih data available, it seems that evidence is presented through witness presentations, panel discussion sessions, facilitated discussion, and written outputs.

The one exception is NanoJury UK which analysed and evaluated the expert witness recruitment process, and the presentation of evidence (case no.49). The main focus of this evaluation was to understand how the mini-public could be used to foster public understanding of the topic, but it did have policy and practice implications, and lessons for how mini-publics could be used. Prior to NanoJury UK, there had been concerns that the public amplify risks. However, the explicit recruitment of a balanced range of advocates and critics from across different sectors fostered a wide ranging discussion. This meant that the public did not solely express concerns about the risks of nanotechnology, nor did they solely highlight negative consequences. This led Rogers-Hayden & Pidgeon (2006: 177) to conclude that the science and business community should not ‘fear’ public engagement as ‘such upstream dialogue can aid in the development processes of new technologies rather than inhibit them, by facilitating an exchange of ideas about values and societal aspirations before technologies and their trajectories are developed and locked in and before polarized public discourse has occurred’ (Hayden & Pidgeon: 178).

Another case study which raises lessons for expert recruitment is the Citizens’ Jury for the Build Phase of NHS Citizen (case no.43). The expert witnesses, who were presenters from NHS England, was ‘rushed’ and did not leave enough time for briefing ahead of the event (Fletcher 2017).

1. ***Are there any trends across the cases in each country that suggest certain types of social policy and practice are more open to evidence synthesised by mini-publics than others****?*

There is no discernible pattern between certain mini-publics and particular policy areas, and it is also not clear whether certain policy areas are more open to evidence synthesised by mini-publics.

One mini public which did have a direct opportunity to influence social policy and practice was the citizens’ jury on genetic testing for common disorders. The recommendations formulated during the mini-public were captured into a report. Following the mini-public, five of the jurors met with the Human Genetics Advisory Committe to present their findings, and to answer questions from the Committee (Longley 2006). However, despite indicating an interest in the citizens’ jury, it is not clear what influence this meeting had on the Human Genetics Advisory Committee.

**Table 17: The United Kingdom: Impact in Mini-Public Cases**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***No.*** | ***Influence of evidence on participants*** | ***Policy area***  | ***Extent of policy/ practice influence*** | ***Key references*** |
| ***38*** | Extensive influence | Various | Influence on policy/ practice debate | Hargreave (2018); Renwick et al. (2018) |
| ***39*** | Don't know | Health | Don't know | Christie (2012); Lip & Ramsay (2014) |
| ***40*** | Don't know | Health | Don't know | Webster et al. (2017) |
| ***41*** | Extensive influence | Health | No influence | Fishkin & Luskin (2006) |
| ***42*** | Moderate influence | Education | Influence on policy/ practice debate | Luskin et al (2014) |
| ***43*** | Don't know | Health | Limited influence | Fletcher (2017) |
| ***44*** | In summary, most people were supportive of CHC’s planned use of health data.  | Health | Don't know | Connected Health Cities (2017) |
| ***45*** | Don't know | Health | Limited influence | Fletcher (2017) |
| ***46*** | Moderate influence | Health | Influence on policy/ practice debate | Adebowale et al. (2015) |
| ***47*** | In summary, the jury admitted initial doubt about the process, but by the end there was a unanimous support for the experience and all held a positive view about the deliberation process. | Fire safety | Influence on policy/ practice debate | Bland (2017) |
| ***48*** | In summary, the jury appears to have cautiously welcomed the future advent of genetic testing, but to have taken a somewhat sceptical view of the ability of the health service to respond appropriately.  | Health | Influence on policy/ practice debate | Longley (2006) |
| ***49*** | Moderate influence (Evidence increased understanding of nanotechnology, and how to appraise it). | Crime & Health | Influence on policy/ practice debate | Rogers-Hayden & Pidgeon (2006) |

|  |
| --- |
| **Deliberative Poll on the Future of Schools, Omagh, 2007****Background**On 27 January 2007, a Deliberative Poll was held in Omagh on the future of local schools . The mini-public was attended by 127 people, drawn from a random sample of parents who were interviewed to assess their suitability (Luskin et al. 2014). **Use of Witnesses** It is not clear how many witnesses took part, but we know the witnesses comprised representatives of all the organisations responsible for managing Omagh’s school, and included the Department of Education, the Council for Catholic Maintained Schools, the Northern Ireland Council for Integrated Education, the Western and Library Board, Council for Irish Language Schools, and Christian Brothers. It is not clear how the representatives from these organisations were selected (Luskin et al. 2014). They were selected by the organisers to ensure a range of views and expertise on the topic.**Use of Evidence** Ahead of the event, citizens were sent briefing documents conveying relevant information, outlining the policy options and sketching the arguments for and against them (Luskin et al. 2014).During the deliberative poll, the evidence was presented in written reports and panel sessions. The discussions took place in randomly assigned small groups, numbering about ten participants apiece. The small group sessions were alternated with panel sessions, providing the participants with the opportunity to question panels of policy experts and policymakers (Luskin et al. 2014). The mini-public influenced the participants. Luskin et al. (2014 p. 117) reported that, ‘Once assembled, moreover the participants did deliberate. They exchanged views. They learned about the issues’.The deliberative poll influenced policy. Luskin et al.’s review analysed the ways deliberative polls could be used to foster political and social cohesion. The research found that deliberative polls can play a part in enabling a more conciliatory politics, they can encourage politicians to work together, and can ‘undercut the positions of hardliners decrying compromise as a sell-out,’ and help foster constructive dialogue between communities in deeply divided societies (Luskin et al. 2014 p. 133). Luskin et al. (2014 p. 133) argue that deliberative polls “show that civil, constructive discussion between communities is not only possible but fruitful - and an aid to mutual understanding. Even in deeply divided societies, it seems, mass deliberation, structured in this fashion, can be helpful".**Merits Future Research**This deliberative poll on education represents an interesting case in a deeply divided political environment to see if mini-publics can assist evidence based policy-making in such environments. We have also seen limited cases of deliberative polls in social policy (Luskin et al. 2014). |

**Overview of Cases**

This section moves away from country by country analysis to look at general trends across all the cases around the three research questions outlined earlier in the report. It commences by noting some limitations of the study.

Although we found 49 cases to form the basis of our analysis it is a fair assumption that there are more that the search strategy failed to identify as it was reliant on academic coverage of the cases. There will likely be other mini-publics on social policy issues in the selected countries that have only been reported on in the grey literature. We did do additional internet searches to try to identify some of these, but there are limitations to this approach. In particular, the grey literature in Denmark, Finland, France, Germany and the Netherlands covering relevant mini-publics is rarely in English. We expect that this accounts for why we found less cases in these countries. Further research in these countries on this topic would therefore greatly benefit from having speakers of the relevant native languages in the research team. It would also be worth extending the time frame of the research as many pertinent cases occurred prior to 2006. For example, Denmark has been home to the most consensus conferences (Joss and Durant 1995). Some of these addressed social policy issues, but were held before 2006.

1. **Assess which types of mini-public have had the most frequent and extensive impact on social policy and practice and how these organisational features influence the citizens’ engagement with evidence.**

From our sample of 49 we had 25 citizens’ juries, 15 consensus conferences, 6 Citizens’ Assemblies, and 3 deliberative polls. There is nothing to suggest from our case studies that citizens’ juries and consensus conferences are the most numerous because they are the most suitable types of mini-public for social policy and practice. We suspect that they are the most prevalent types of mini-public across all types of policy area simply because they are the cheapest and easiest to organise due to the small citizen sample assembled.

In general, from the available evidence, the majority of the mini-publics failed to achieve any substantive impact on social policy and practice. At best, they were able to influence the policy and practice debate around the issue. No type of mini-public seemed more capable of delivering impact than others. Rather it was the ties to other institutions and public authorities and administrators that was crucial to gaining the mini-public influence and such concrete ties were rare. Even when such institutional connections were in place e.g. mini-public recommendations discussed in parliament, there was no guarantee of impact being delivered. However, very few of the sources we consulted to glean information on the cases actually discussed the policy and practice impact of the mini-public. Moreover, the direct cause of a policy is unlikely to be driven by just one agent, but rather multiple. Discerning the extent of influence from a mini-public in relation to other policy actors is likely to require in-depth case analysis to interview key policy actors. It should also be noted, that many mini-publics are run as part of academic research projects, where the ostensible goal is not to influence policy and practice.

Similarly, but perhaps more surprisingly, many of the sources did not report on the changes in opinions to the citizens participating in the mini-publics. Where relevant information was provided it appears that, in general, the participants did change some of their views on the issue. However, we cannot conclude from this that this was due to the engagement with experts and evidence afforded by participating in the mini-public, as only a few of the studies discuss information gains amongst the citizen sample. Although research from mini-publics in other policy areas does indicate that it is expert evidence that is the key driver of opinion change in mini-publics (Thompson et al. 2015). There are no discernible trends to suggest that this is influenced by the type of mini-public, although studies on deliberative polls do seem the most adept at capturing this information, primarily because this is their principal aim.

1. **Investigate how the type and recruitment of experts and the presentation of evidence influences citizens’ engagement with evidence in mini-publics and furthermore the perceived legitimacy of the mini-public by policy makers and practitioners.**

With respect to the recruitment of witnesses, many of the studies consulted failed to detail this information, which is not uncommon (Street et al. 2014). Where this information was reported, it is usually the mini-public organisers that made the selection. The consequences of this are that the discussion can exclude important information and viewpoints from the start. Even if witness selection proceeds with the best of intentions, the mini-public organisers may simply not be the best people to decide what the participants need to know. The mini-public organisers are likely to use their personal networks to recruit witnesses, which might not deliver sufficiently on a diversity of views. Moreover, even if an excellent and diverse range witnesses are selected by the organisers the process may still be viewed as biased and overly manipulated (Carson and Shecter 2017). Indeed, it is argued that ‘allowing experts to determine the content of deliberations can recreate existing power relationships in how agendas are shaped’ (Roberts & Lightbody 2017: 2).

A few cases where the mini-public participants selected the witnesses were uncovered through the search. In these cases, it seemed that the participants trusted the evidence provided to a greater extent and perceived it to be more neutral in orientation. Studies from other policy areas support this conclusion (Gastil et al. 2015). In these circumstances, the evidence is then more likely to have an impact on the participants. However, there was no indication that having the participants select witnesses increased the potential of the mini-public to achieve policy and practice impact. There are also issues with having the citizens select the experts. It is not clear how the participants, at the start of the process can determine what they need to know about an issue on which they have little prior experience. Consequently, how can they identify the most suitable witnesses to fulfill their learning needs and provide a diversity of views? Their heads may therefore be turned by ‘celebrity’ witness, or there could be a confirmation bias where they select witnesses that support their already held views (Carson and Shecter 2017). In order to avoid manipulation and bias in witness selection Böker and Elstub (2015) suggest opening-up mini-publics so that all who want to give evidence can. However, this approach has, as yet, not been trialled in practice.

In terms of the delivery of evidence to the mini-public participants, once again this is not always reported. From reviewing the cases where this information was available it appears that there is very little experimentation in this respect. The majority of mini-publics provide evidence through written briefing materials, expert presentations, and question and answer sessions. This format is the norm across all the different types of mini-public. There were a few cases, which differed slightly in the evidence provision format with some using videos, but this is not a radical departure. The Bayern citizens’ jury was innovative here though. Experts participated along-side citizens in the manner advocated by Brown (2014) and were also given the role of researching specific elements of the topics to present to the rest of the mini-public.

1. **Analyse the extent that certain types of social policy and practice are more open to evidence synthesised by mini-publics than others.**

The majority (34) of our cases were related to health policy and practice. It is hard to say why there is this dominance but it could be because ‘deliberative inclusive approaches, as a vehicle for citizen engagement, have particular appeal because of the fiscal importance of health policy and because health matters touch the lives of citizens very personally’ (Street et al. 2014). However, there seems to be no obvious reason why mini-publics should not be used in other social policy areas too, and there are sufficient cases discussed here from other policy and practice areas to support this conclusion.

We conclude this section by detailing the cases that we have identified for further research. Given the lack of relevant data on the use of experts and evidence in mini-publics on social policy issues that we found in this study then we would recommend in-depth case analysis where additional qualitative data is collected. Interviews with the organisers and key stakeholders of the highlighted cases would further help answer the research questions identified here

**Table 18: Cases Nominated for Further Research**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Focus*** | ***Country*** | ***Mini-Public Type*** | ***Policy/ Practice Area*** | ***Reference*** |
| Pandemic Planning | Australia | Citizens’ Jury | Health | Braunack-Mayer et al., 2008 |
| Physical activity | Denmark | Consensus Conference | Health | Bangsbo 2016 |
| Health care reform | Finland | Consensus Conference | Health  | Raisio 2010 |
| Teaching and learning in schools | France | Consensus Conference | Education | Rey et al. 2016 |
| Arthritis | Germany | Citizens’ Jury | Health | Fletcher 2017 |
| Breast cancer screening | New Zealand | Citizens’ Jury | Health | Paul et al., 2008 |
| Land-use planning process | The Netherlands | Citizens’ Jury | Housing | Huitema et al. 2007 |
| Schools | UK | Deliberative Poll | Education | Luskin et al. 2014 |

In collecting this additional case data, other considerations should be taken into account that was not possible to gain sufficient insight on from this literature review, but that would be achievable through interviews. We discuss these in the final section of the report, to which we now turn.

**Lessons and Recommendations**

We conclude the report with some lessons recommendations to take the research project forward and for organisers and researchers of mini-publics to consider that are based on the findings of this study.

**Evidence Quality:** An issue, which was beyond the remit of this study but which merits investigation in the more in-depth case study analysis, is the quality of the evidence provided to mini-publics. This is less the case with the information packs, which are usually agreed by stakeholders with a diverse set of views on the issue, but does pertain to the witness presentations, which can vary in quality and reliability. One suggestion is that the organisers screen the evidence (Lansdell 2011), but of course there is a huge risk of bias and manipulation here. Other techniques to elevate evidence quality, such as briefing of witnesses, should be considered in future research on this topic. Evidence quality ultimately relates heavily to the process of witness identification and selection. Boker and Elstub (2015) suggest that anyone who wants to be a witness in a mini-public should be permitted to be. This would make the process more inclusive, but could lower evidence quality. The solution might be in training the citizen sample on critical thinking, which will help them discern good and bad quality evidence (Carson and Shecter 2017; Roberts and Lightbody 2017). NewDemocracy Foundation are making significant steps forward in incorporating this type of training in the mini-public designs (Carson 2017) and it was also present in some of our cases.

**Expert Briefing:** As can be seen from the issue discussed above, the witnesses need clear instructions on what their role is and the expectations of them, including guidance on how to effectively communicate with the participants in jargon free and accessible language (Carson 2017; Roberts and Lightbody 2017). The nature of witness briefing is hardy commented on at all in the mini-public cases we have considered here. A focus on this issue in the in-depth case study analysis proposed could therefore be particularly illuminating as it could well be a key determining factor with regards the relationship between evidence and mini-publics.

**Duration:** The duration of the mini-public is a very important factor with respect to the incorporation of evidence (Roberts and Lightbody 2017). The longer the process the more chance the participants have to become informed on the issues, and consider a broader range of perspectives (Street et al. 2014). Citizens participating in mini-publics frequently end the process asking for more time to consider the issue more fully (Roberts and Lightbody 2017). However, longer processes might make expert and participant recruitment more difficult. Nevertheless, there is no evidence to suggest it effects recruitment bias for the citizen participants (Street et al. 2014). Our findings here support those of Street et al. (2014) which indicate that most citizens’ juries are getting shorter than in the original design (see Elstub 2014).

We did not consider the number and types of expert that declined invitations to be witnesses and this was not an aspect commonly reported on. However, in studies outside of the social policy domain this is raised as a challenge for mini-public organisers, particularly non-advocate witnesses (Roberts and Lightbody 2017). Nevertheless, as Roberts and Lightbody (2017) note the greater the potential for the mini-public to have impact on policy and practice, the easier it is likely to be to recruit the desired witnesses.

**Additional Cases:** in addition to cases from the countries considered in this report, it would be worthwhile considering others too. There have been numerous mini-publics on social policy and practice issues in Canada, which merit further investigation. The Citizen Assembly in Ireland has been particularly influential on such issues as same-sex marriage and abortion and further exploration of how they used evidence and experts could be revealing as this mini-public has had some substantive impact. It further represents an intriguing case as politicians participated along-side the citizen sample, which is an unusual format for a mini-public (Harris forthcoming 2018). Furthermore, we have recommended a case study from each country. However, some of the cases we have suggested appear more interesting than others. Some of the countries covered had several relevant cases while others had very few. Investigating more than one case from some of the countries, at the expense of cases from others, could be beneficial to the research project.

**Evidence Provision Experimentation:** the results from our review indicate that little experimentation in mini-publics is occurring with respect to the provision of evidence to the participants; at least in the social policy and practice area. Nearly all use standard approaches of written briefing materials, expert presentations and question and answer sessions. Consequently, we do not really know that these are the most effective methods to communicate complex issues and evidence to a diverse sample of lay citizens. We would therefore encourage mini-public organisers to be more inventive and experimental in this area.

**Mini-public Research and Reports:** as highlighted in the previous section many of the sources covering various mini-public cases did not detail many of the salient features such as citizen and witness recruitment, evidence provision methods, influence of evidence on participants, and influence of the mini-public on policy and practice. These factors are crucial to ascertaining the robustness of any mini-public case. We therefore recommend that these factors must be more central to case reviews of mini-publics in the future, regardless of the precise focus of the study. Consequently, we agree with Street et al. (2014) ‘that improvements in reporting the practice of citizens’ juries could produce insights relevant to the macro-political uptake of deliberative processes and strengthen dialogue between deliberative practitioners and theoreticians.’

**References**

Adebowale, L., Devane, C. & Kelsey, T. (2015) ‘Review of NHS Citizen and the NHS Citizens Assembly at the AGM.’ Board Paper - NHS England, Paper: NHSE111403. Available online: https://www.england.nhs.uk/wp-content/uploads/2014/10/item5-board-1114.pdf

Arbus, C., Clement, J., Bougerol, T., Fremont, P., Lancrenon, S., & Camus, V. (2012) ‘Health management of older persons with chronically medicated psychotic disorders: The results of a survey in France.’ *International Psychogeriatrics*, 24(30): 496-502.

Bereano, P. (1999) *Report on Danish Citizen Consensus Conference on Genetically Engineered Foods*.

Bland, N. (2017) Local solutions to local problems: innovation in public services. *What Works Scotland*. Available online: http://whatworksscotland.ac.uk/wp-content/uploads/2017/06/SIPRAnnualReport2016NickBlandLocalParticipation.pdf

Böker, M. and Elstub, S. (2015) ‘The Possibility of Critical Mini-Publics: Realpolitik and Normative Cycles in Democratic Theory’, *Representation*,51(1): 125-144.

Braunack-Mayer, A. J., Street, J. M., Rogers, W. A., Givney, R., Moss, J. R., & Hiller, J. E. (2010) ‘Including the public in pandemic planning: a deliberative approach’, *BMC public health*, *10*(1): 501.

Brown, M. (2014) ‘Expertise and deliberative democracy.’ *In:* Elstub, S. & McLaverty, P.

(eds.) *Deliberative Democracy: Issues and Cases.* Edinburgh University Press.

Bussu, S. (Forthcoming 2018) ‘Collaborative Governance: Between Invited and Invented Spaces.’ in S. Elstub & O. Escobar (eds.), *Handbook of Democratic Innovations and Governance*, Edward Elgar.

Carson, L., and Schecter, D. (2017) ‘Choosing Expert Speakers’, The newDemocracy Foundation.

Carson, L. (2017) ‘Hearing from experts’, The newDemocracy Foundation.

Christie, B. (2012) ‘People over 65 should be screened for atrial fibrillation, say stroke specialists.’ *BMJ: British Medical Journal (Online)*, 344.

Connected Health Cities (2017) Connected Health Cities Citizens’ Juries Report: A report of two citizens’ juries designed to explore whether the planned and potential uses of health data by Connected Health Cities are acceptable to the public. Available at: <https://www.connectedhealthcities.org/wp-content/uploads/2016/08/CHC-juries-report-Feb-2017.pdf> [Accessed June 26, 2018].

Cuppen, E. (2011) ‘Diversity and constructive conflict in stakeholder dialogue: considerations for design and methods.’ Available at: https://search.proquest.com/socscijournals/docview/922808868/DCAA06B36C98461CPQ/19?accountid=12753 [Accessed February 27, 2018].

Dean, R.J (forthcoming 2018) 'Democratic Innovation in Social Policy', in S. Elstub & O. Escobar (eds.), *Handbook of Democratic Innovations and Governance*, Edward Elgar.

Dryzek, J.S. & Tucker, A. (2008) 'Deliberative Innovation to Different Effect: Consensus Conferences in Denmark, France, and the United States.' *Public Administration Review*, 68(5): 864–876.

Dryzek, J.S. (2010) *Foundations and Frontiers of Deliberative Governance,* Oxford: Oxford University Press.

Dueckers, G., Guellac, N., Arbogast, M., Dannecker, G., Foeldvari, I., Frosch, M., Gasner, G., Heilienhaus, A., Horneff, G., Illhardt, A., Kopp, I., Krauspe, R., Markus, B., Michels, H., Schneider, M., Schneider, M., Singendonk, W., Sitter, H, Spamer, M., Wagner, N. & Niehues, T., (2012) 'Evidence and consensus based GKJR guidelines for the treatment of juvenile idiopathic arthritis', *Clinical Immunology*, 142(2): 176-193.

Elstub, S. (2014) Mini-publics: Issues and cases', in S. Elstub & P. McLaverty (eds.), *Deliberative democracy: Issues and cases*, Edinburgh: Edinburgh University Press.

Escobar, O. and Elstub, S. (2017) '[Deliberative innovations:](https://test123582.files.wordpress.com/2017/04/deliberativeinnovations-researchpaper.pdf)Using ‘mini-publics’ to improve participation and deliberation at the Scottish Parliament', prepared for the Scottish Parliament [Commission on Parliamentary Reform](https://parliamentaryreform.scot/).

European Commission (2014) 'Final Report Summary - GAMBA (Gene Activated Matrices for Bone and Cartilage Regeneration in Arthritis)', *Community and Development Information Service,* European Commission. Available online: https://cordis.europa.eu/result/rcn/141283\_en.html.

Fishkin, J. S. and Luskin, R. C. (2005) ‘Experimenting with a Democratic Ideal: Deliberative Polling and Public Opinion’, *Acta Politica*, 40 (3): 284-298.

Fishkin, J.S., and Luskin, R.C. (2006) 'Broadcasts of Deliberative Polls: Aspirations and Effects', *British Journal of Political Science*, 36(1): 184–188.

Fletcher, S. (2017) 'GAMBA Patient and Citizen Panels', *Participedia.* Available online: https://participedia.net/en/cases/gamba-patient-and-citizen-panels.

Fletcher, S. (2017) 'NHS Citizen', *Participedia*. Available online.

Gastil, J., Knobloch, K. R. & Richards, R. (2015) '*Building a More Informed Electorate:*

*Analysis of the Citizens' Initiative Review, 2010-2014'*, in. State College, Pennsylvania

State University.

Grönlund, K., A. Bächtiger, & M. Setälä (eds.) (2014) *Deliberative mini-publics: Involving citizens in the democratic process*, Colchester, UK: ECPR Press.

Hargreave, L. (2018) 'Citizens' Assembly on Brexit', *Participedia*. Available online: https://participedia.net/en/cases/citizens-assembly-brexit.

Harris, C. (forthcoming 2018) ‘Mini-Publics’, in S. Elstub & O. Escobar (eds.), *Handbook of Democratic Innovations and Governance*, Edward Elgar.

Härter, M., Klesse, C., Bermejo, I., Schneider, F., & Berger, M. (2010) 'Unipolar depression: Diagnostic and therapeutic recommendations from the current S3/National Clinical Practice Guideline', *Deutsches Ärzteblatt International*, 107(40): 700-708.

Henderson, J., House, E., Coveney, J., Meyer, S., Ankeny, R., Ward, P., & Calnan, M. (2013) ‘Evaluating the use of citizens’ juries in food policy: a case study of food regulation’, *BMC public health*, *13*(1): 596.

Hendriks, C.M. (2009) ‘Policy design without democracy? Making democratic sense of transition management’, *Policy Sciences*, 42: 341–368.

Horneff, G., Klein, A., Ganser, M., Sailer-Hock, A., Gunther, I., Foeldvari, F., Guenther, M. (2017) ‘Protocols on classification, monitoring and therapy in children's rheumatology (PRO-KIND): Results of the working group Polyarticular juvenile idiopathic arthritis’, *Paediatric Rheumatology*, 15(1): 78.

Huitema, D., van de Kerkhof, M. & Pesch, U. (2007) ‘The nature of the beast: Are citizens’ juries deliberative or pluralist?’ *Policy Sciences*, 40(4): 287–311.

Involve (2016) ‘NHS Citizen’, Available online: <https://www.involve.org.uk/programmes/z-programme-nhs-citizen/>

Joss, S. & Durant, J. (1995) *Public Participation in Science: The Role of Consensus Conference in Europe*, London: Science Museum.

Joss, S. & Klüver, L. (2001) *The Denmark National Report: Assessing Debate and Participative Technology Assessment (ADAPTA)*.

Lansdell, S. (2011) *The Use of Experts in Public Dialogues*, Sciencewise-ERC.

Lemaire, Olivier, Moneyron, Anne, & Masson, Jean E. (2010) ‘Interactive Technology Assessment and Beyond: The field trial of genetically modified grapevines at INRA-Colmar. *PLoS Biology*, 8(11): E1000551.

Lip, G.Y.H & Ramsay, S.G (2014) ‘Insights from the RCPE UK Consensus Conference on approaching the comprehensive management of atrial fibrillation’, *Expert Review of Cardiovascular Therapy*, 10:6: 697-700.

Longley, M.J (2006) ‘Citizens' Jury on Genetic Testing for Common Disorders’, *Encyclopaedia of Life Sciences*. John Wiley & Sons Ltd, Chichester.

Lowi, T.J. (1972) ‘Four Systems of Policy, Politics, and Choice’, *Public Administration Revi*ew, 32(4): 298-310.

Luskin, R.C., O'Flynn, I., Fishkin, J.S. & Russell, D. (2014) ‘Deliberating across Deep Divides’, *Political Studies*, 62: 116 – 135.

MacKenzie, M.K. and Warren, M. E. (2012) ‘Two Trust-based Uses of Minipublics in Democratic Systems’, in J. Parkinson and J. Mansbridge (eds.), *Deliberative Systems: Deliberative Democracy at the Large Scale*. Cambridge: Cambridge University Press.

Meeuwisse, W.H., Schneider, K.J., Dvorak, J.O., Onutobor T., Finch, C.F., Hayden, K.A., & McCrory, P.. (2017) ‘The Berlin 2016 process: A summary of methodology for the 5th International Consensus Conference on Concussion in Sport’, *British Journal of Sports Medicine*, 51(11): 873-876.

Möhler, R., Köpke, S., & Meyer, G. (2015) ‘Criteria for Reporting the Development and Evaluation of Complex Interventions in healthcare: Revised guideline (CReDECI 2).’ *Trials*, 16: 204.

Neilsen, A., Lassen, J. & Sandøe, P. (2007) ‘Democracy at its Best? The Consensus Conference in a Cross-national Perspective’, *Journal of Agricultural and Environmental Ethics*, 20(1): 13-35.

New Democracy Foundation (2014) ‘Report of the Citizens’ Policy Jury: Vibrant and Safe Sydney Nightlife.’ Sydney: newDemocracy Foundation.

Parkin, L., & Paul, C. (2010) ‘Public good, personal privacy: a citizens' deliberation about using medical information for pharmacoepidemiological research’, *Journal of Epidemiology & Community Health*, jech-2009.

Parrella, A., Braunack-Mayer, A., Collins, J., Clarke, M., Tooher, R., Ratcliffe, J., & Marshall, H. (2016) ‘Prioritizing government funding of adolescent vaccinations: recommendations from young people on a citizens’ jury’, *Vaccine*, *34*(31), 3592-3597.

Paul, C., Nicholls, R., Priest, P., & McGee, R. (2008) ‘Making policy decisions about population screening for breast cancer: the role of citizens’ deliberation’, *Health Policy*, *85*(3): 314-320.

Pomatto, G. (2016) ‘Deliberative Mini-Publics: The Best is yet to Come’, *Representation* 52(2-3): 239-248.

Raisio, H. (2010) ‘The public as policy expert: Deliberative democracy in the context of Finnish health care reforms and policies’, *Journal of Public Deliberation*. 6 (2).

Renwick, A., Allan, S., Jennings, W., McKee, R., Russell, M. & Smith, G. (2017*) A Considered Public Voice on Brexit: The Report of the Citizens' Assembly on Brexit*. London: The Constitution Unit, UCL.

Renz, H., Autenrieth, I., Brandtzæg, P., Cookson, W., Holgate, S., Von Mutius, E., Haller, D. (2011) ‘Gene-environment interaction in chronic disease: A European Science Foundation Forward Look’, *Journal of Allergy and Clinical Immunology*, 128(6): S27-S49.

Revel, M. (2012) ‘Bred or Wild Participation?’ *Przeglad Socjologiczny*, 61(4): 173-193.

Rey, O., & Gaussel, M. (2016) ‘The Conditions for the Successful Use of Research Results by Teachers: Reflections on Some Innovations in France*.’ European Journal of Teacher Education*, 39(5): 577-587.

Roberts, J. and Escobar, O. (2015) *Involving communities in deliberation: A study of three citizens’ juries on onshore wind farms in Scotland.* Edinburgh: ClimateXChange.

Roberts, J. and Lightbody, R. (2017) ‘The role of witnesses in deliberative processes.’ *Paper presented at the Political Studies Association of the UK Annual Conference*, Glasgow, April.

Rogers-Hayden; T. & Pidgeon, N. (2006) Reflecting upon the UK's Citizens' Jury on Nanotechnologies: NanoJury UK. *Nanotechnology Law & Business*: 167 – 178.

Rychetnik, L.,. Carter, S. M., Abelson, J., Thornton, H., Barratt, A., Entwistle, V. A., Mackenzie, G., Salkeld, G.. & Glasziou, P. (2013) ‘Enhancing citizen engagement in cancer screening through deliberative democracy’, *Journal of the National Cancer Institute:* 380–386.

Salmon-Ceron, D., Cohen, J., Winnock, M., Roux, P., Sadr, F.B., Rosenthal, E. & Carrieri, M.P. (2012) ‘Engaging HIV-HCV co-infected patients in HCV treatment: The roles played by the prescribing physician and patients' beliefs (ANRS CO13 HEPAVIH cohort, France).’ *BMC Health Services Research*, 12, 59.

Shared Futures (2017) *Citizens Jury Literature Review: Our Voice Citizens Jury Realistic medicine.* Manchester: Shared Future.

Shkabatur, J. (2010) ‘Participatory Budgeting in Berlin-Lichtenberg’, *Participedia*. Available online: https://participedia.net/en/cases/participatory-budgeting-berlin-lichtenberg.

Sozialistische Tageszeitung (2009) ‘With the citizens' budget through the country,’ Available online: <https://www.neues-deutschland.de/artikel/160457.mit-dem-buergeretat-durch-die-lande.html>

Street, J., Duszynski, K., Krawczyk, S., and Braunack-Mayer, A. (2014) ‘The use of citizens’ juries in health policy decision-making: A systematic review, *Social Science & Medicine*, 109: 1-9.

Thompson, A. Elstub, S., Escobar, E., Pamphilis, N., and Roberts, J. (2015) ‘Why do people change their minds? Evidence from 3 citizens’ juries deliberating on-shore wind farms in Scotland.’ *Paper presented at the Political Studies Association of the UK Annual Conference*, Sheffield, April.

Tucker, A. (2008) 'Pre-emptive democracy: Oligarchic tendencies in deliberative democracy', *Political Studies*, 56(1): 127–147.

Weale A. (forthcoming 2018) ‘Accountability and Democratic Innovations’, in S. Elstub & O. Escobar (eds.), *Handbook of Democratic Innovations and Governance*, Edward Elgar.

Webster, G., Grinbergs-Saull, H., Mountain, B. (2017) 'Core outcome measures for interventions to prevent or slow the progress of dementia for people living with mild to moderate dementia: Systematic review and consensus recommendations', *PLoS One*, 12(6): E0179521.

Weill, C., & Banta, D. (2009) 'Development of health technology assessment in France', *International Journal of Technology Assessment in Health Care*, 25(S1): 108-11.

Withall, E., Wilson, A. M., Henderson, J., Tonkin, E., Coveney, J., Meyer, S. B., & Ward, P. R. (2016) ‘Obtaining consumer perspectives using a citizens’ jury: does the current country of origin labelling in Australia allow for informed food choices?’ *BMC public health*, *16*(1): 12-41.

1. The oversight panel was comprised of the Cambridge Nanoscience Centre, Greenpeace U.K., and PEALS. The oversight panel was responsible for the citizens’ jury’s planning, publicity, and decision-making. [↑](#footnote-ref-1)