

Evaluation of a BBSRC Public Dialogue on Health

Dr. Gene Rowe

Executive Summary

- This report provides a *limited* evaluation of a BBSRC workshop held on Saturday 6th October, 2012, in Swindon.
- The workshop lasted from 10.00-16.00, and involved a number of plenary and smaller-group sessions, in which participants (who totalled 21) were divided into two groups sat at separate tables.
- Each table/group was presided over by two members of the contractor organisation (a facilitator and a rapporteur/scribe), and was attended by two members of the BBSRC (who observed and provided relevant information when necessary). Conversations were recorded. The evaluator sat at the back of the room and observed the process (moving between tables at breaks).
- The morning session generally considered the issue of 'what is healthy'. A plenary presentation from a member of the BBSRC on the remit of the organisation was provided before lunch. After lunch, the sessions generally considered the health agenda for BBSRC (what it funds and ought to fund; what ought its mission statement to be).
- The results here are largely based upon responses to questionnaires completed by ALL participants following the event. The questions in the participant questionnaire largely concerned issues to do with 'information translation' and generic satisfaction, but also included open questions in which participants essentially gave their own analyses of event quality.
- Additional evaluative insights are also provided from observations of the event made by the evaluator following an 'observation protocol'.
- Results suggest that most participants were clear on the aims of the day, although some thought this could have been clearer and would have been aided by the BBSRC presentation occurring first.
- Respondents generally thought that they had been given the opportunity to say what they had wanted to say; had sufficient time to discuss issues; that the relevant topics had been discussed; and that facilitator summing-up had been accurate (all generally implying 'good translation'). However, some thought that some of the discussions went 'round in circles'.
- Participants generally thought the workshop was well run, and were 'fairly' or 'very' satisfied with the event.
- The evaluator observations largely concurred with participant perceptions regarding how well the events were facilitated and how well information was dispensed and elicited. There

was generally a positive attitude throughout the day, and most of the participants became involved in the discussions.

- Participants generally thought that the results from the workshops ought to influence BBSRC policy.
- When asked what was best about the events, participants generally said having the chance to discuss matters with others. Participants also appreciated learning some new things, particularly about the BBSRC, and meeting with other people.
- When asked about negatives, most left this blank or said 'nothing'. The main issue (raised by four) was that some aspects seemed to drag on (particularly the early discussion on what healthy means).
- When asked how the workshop could be improved in future, various suggestions were made, the main one being that there should be more clarity at the outset, perhaps by starting with a BBSRC presentation outlining the key questions it wanted to have addressed.
- In summary, we commend the workshop and how well it was run. However, we would recommend a few improvements for events like this in future, including: considering the structure of the event; using multiple events with wider involvement (and taking care in allocating participants to break out groups); having additional expertise able to answer participants' queries about health; and, having separate rooms for break-out groups (though recognising this can be difficult/costly).
- Ultimately, the value of the event must rest on BBSRC satisfaction with the nature and format of results, which this report does not address.

Preamble

This document provides a brief and limited evaluation of a workshop run for the BBSRC by Ipsos MORI on Saturday 6th October, 2012, in Swindon. This workshop was opportunistically arranged at short notice in order to pilot a process in order to see whether it might have some merit for future use in helping BBSRC decide priorities for research. The evaluation discussed here was also rapidly arranged, and should not be considered incontestable, since it is limited to interpretations from short participant questionnaires and evaluator observation, without support from other activities that might normally be applied in a more formal and complete evaluation (such as analysis of documents /materials around the process and interviews with participants, sponsors, and organisers).

The Workshop

The workshop will be described here only briefly, as it will be described more completely by the contractors in their report.

The event began at approximately 10 a.m. and concluded at approximately 4 p.m. I understand 25 participants were invited to attend, selected to faithfully correspond to a number of broad population characteristics (e.g. male-female ratio). A total of 21 turned up and took part; I do not have the details on non-responders and so cannot comment on the degree to which this may have unbalanced the sample attending, although I will comment upon an age-related issue later. Apparently the participants had been pre-selected or matched to ensure that two initial sub-groups were not demographically (etc.) unbalanced, that is, participants were given labels directing them to sit at one of two large tables in the room where the workshop took place. (There was some mixing of participants following lunch.)

Some of the workshop proceeded in plenary, whereas at other times tasks were performed separately in smaller groups by participants at the two tables. At each table there was one facilitator and one scribe/rapporteur (and there were also a total of four BBSRC representatives, two of whom sat at each of the tables). The evaluator sat behind the tables, and moved from one to the other during the day to get a sense of the similarities of process between the two groups. Recording devices were also used at each table, while a projector at the front of the room enabled slides to be shown. The facilitators also made use of flip charts.

The day broadly proceeded as follows. First, the lead facilitator introduced the day, described who they were, and gave a brief over-view of the purpose of the day. Next, the separate groups

performed an ice-breaker exercise, in which participants talked to their neighbour and then introduced them to the rest of the table (group). The participants at each table were then asked to consider the question 'what does healthy mean for me?' This question was later broadened to include what 'healthy' might mean for family, for society as a whole in the UK, etc. *Post-its* were available for participants to write ideas on, and these were transferred to flip charts by the table facilitators and discussed in the groups. Facilitators used various probes to elicit reasons behind the answers given.

After a tea break, in which the flip chart pages were stuck on walls, and on which participants were encouraged to place stickers to indicate which areas of health they thought most important, participants were again sent to their separate tables and now asked to identify the biggest health challenges the UK faced as a society. Five main challenges were identified by each table (facilitated as before).

Just before lunch, a BBSRC representative gave a plenary presentation, describing BBSRC, and emphasizing its role in funding research, as well as differentiating the research BBSRC funds from that funded by MRC.

After lunch (with participants at the table mixed up somewhat), participants were provided with 'flashcards' on which were briefly described over a dozen pieces of research, related to health, that BBSRC had funded. By-and-large, the participants at each table were separated into further smaller groups to consider a small number of the cards (3-4), and to identify the health challenges the research thereon addressed, including issues such as which were seen by participants as their favourites. Further discussion of the issues then took place at the table-level.

The final phase involved participants considering, initially at the table level, a couple of 'straw man' vision statements about BBSRC and the health research it should fund. Various alternative statements were then developed, and following a final tea break, participants in plenary were asked to vote on which of a number of the new statements (written on flip chart pages and put on the walls) was their favourite. After this, participants were asked to complete the evaluation questionnaire, and were then given their honorarium for attending.

The Evaluation

The questions in the participant questionnaire were largely designed to address the quality of 'information translation'. The idea of good translation is that all relevant information should be efficiently, fully, and in a non-biased way, presented to participants, who then have ample opportunity to reflect upon and explore that information, and then to express their opinions in a full

and non-biased way (with such information being comprehensively recorded, coded, and summarised by the event organisers). Arguably dialogue will be deficient if translation is not perfect – for example, if the event organisers give participants only partial information; if the participants represent a highly biased sample (who lack the full range of information and perspectives of the intended population being sampled); if participants do not fully understand information they are given, or lack time and opportunity to fully elaborate problems or fully discuss them to their desired solution; if participants' information (opinions) is inefficiently summarised or collected; and so on.

As well as to addressing translational issues, the questionnaire also considers participant satisfaction and potential event impact. It also includes a number of open questions about what is best and worst about the event, to enable participants to implicitly indicate their own evaluation criteria (which past results demonstrate are often related to translational issues, but which may not be). Further, in this questionnaire, the contractors suggested the inclusion of three additional questions that, while not 'evaluative', did address some interesting factual issues about respondent knowledge – as will be discussed later.

The following section reveals the results from the questionnaire. Relevant observations of the evaluator – based upon following an observation protocol (concerned with information translation) – are inserted in the section where appropriate. Observation is important, because participants may not be able to observe all significant activities of the event organisers and facilitators (because they are involved in the process *per se*).

The Results

a) Translational issues

The first question asked participants whether the aims were clearly specified at the start of the workshop. Of the 21 respondents, two-thirds (14) said 'yes', four said they were unsure (19%), and three said 'no' (14%). This suggests that the purpose could perhaps have been more clearly elaborated at the outset of the event to reduce possible confusion. Indeed, one participant added that it 'would [have] been better and more to the point if [the BBSRC speaker who presented just before lunch] said his bit 1st'. It may be that for this participant – and perhaps others – the purpose only truly became obvious after that presentation. (Other participant comments may be pertinent to this – as will be discussed later.)

Question 2 asked whether the participants thought that those involved were appropriate for this event. A total of 17 agreed (81%); three were uncertain and only one said 'no'. The one who said 'no'

did not elaborate; one of the others suggested that 'more professionals' would have been useful, while another suggested that 'some seemed to be here so they were getting paid but unwilling to really participate as quote 'it doesn't affect me so why should I care''. The latter issue, alas, is difficult to avoid, but by-and-large participants were content that there was no real bias in participant selection. (Note: some closed questions had spaces for open responses in which respondents were asked to elaborate the reasons for their answers.)

Question 3 asked: 'during the event, did you have the opportunity to have your say?' Seventeen respondents (81%) ticked that 'I said all I wanted to say', two (10%) ticked 'I said most of what I wanted to say' and two (10%) ticked 'I was only able to say a little of what I wanted to say' (one of the latter mentioned 'strong characters in the group' as an implicit excuse). These proportions correspond quite well with the evaluator's observations: the facilitation was by-and-large good and inclusive, with the facilitators making efforts to ensure involvement of all participants – with participant involvement being further helped by the ice breaking exercise, which got people talking and helped create a generally positive atmosphere during the day. There was, however, one person at each of the tables who appeared to the evaluator to be rather quiet and less-involved in the process, although this proportion is to be expected given that some are less outgoing than others. Greater involvement might have been achieved had there been three rather than two break-out groups, although this would have necessitated further resources from the contractor and would not seem worthwhile given the pilot nature of this exercise.

Question 4 asked 'was there sufficient time to discuss all that needed to be discussed?' All but one participant answered 'yes', with only one being 'unsure' (although this respondent did not elaborate). Indeed, for some – as will be discussed – it was the case that matters could have been dealt with in less time (one respondent noted here that there was 'too much going round in circles talking about the same thing e.g. obesity'). The evaluator's observations concurred that the facilitators were certainly very concerned with ensuring that they had exhausted each issue, leaving nothing unsaid.

Question 5 relatedly asked whether there were any significant issues 'that were NOT discussed, but which should have been'. Sixteen respondents (76%) either said 'no' or left the open question blank. The four who did suggest additional issues noted: how research is conducted; impacts of research and animal testing; genetics (and how it could prevent certain illnesses in the future); and the particular issue that BBSRC funds research that not only has UK impact but which might also have worldwide health impacts (an issue which the respondent suggested could have been discussed earlier). All of these issues are notable as requiring more expert input. In any further exercise such as

this, it might be useful to consider having additional available expertise (perhaps in the form of answers to key questions on hand-outs or through experts who might be quizzed) to answer such queries.

Question 6 asked participants whether they had learnt much from the workshop – a question that is probably less relevant here than in other engagement exercises, given that the present focus was on understanding participant perspectives (with relatively little expert input). However, 11 (52%) indicated that they had ‘learnt a lot of new things’, nine (43%) indicated that they had ‘learnt a few new things’ and just one (5%) suggested that they were ‘not sure [they had] learnt anything new’. The latter indicated that this was because they had ‘lost concentration very quickly’. One of the others noted that they had learnt ‘about BBSRC’, which is arguably a positive extra to the process. Indeed, on this issue, question 10 had asked whether participants had heard of BBSRC before, and only eight had said yes (38%) (i.e. 13 had said ‘no’ (62%)). Following this, question 11 had asked ‘how much do you feel you now know about the BBSRC’s work?’, to which four (19%) responded ‘a great deal’, 15 (71%) responded ‘a fair amount’ and only two (10%) responded ‘a little’.

Question 7 asked participants whether they thought ‘the summaries after each section of the workshop accurately reflected what was discussed during each exercise’ All but two respondents answered ‘yes’ (i.e. 90%), with the other two answering that they were ‘unsure’ (and these did not elaborate on why they were unsure). This would suggest that the choice of most important health challenges recorded by the facilitators and read back to participants is accurate.

b) Respondent satisfaction and overall appraisals

Two questions asked about participants’ overall impression of the workshop and its quality.

Question 8 asked: ‘overall, do you think the workshop was well run?’ The respondents gave the event a positive endorsement: 20 (95%) said ‘yes’ while the other respondent answered ‘unsure’. The latter reiterated an earlier point about there having been ‘too much going around in circles’, while one of the other respondents indicated that they wanted ‘more topics but less discussion time’ (though they also described the event as ‘professional’ and ‘fairly informative’). The positive endorsement was confirmed in responses to question 9, which asked how ‘satisfied’ were participants with the ‘event overall’. Twelve (60%) responded ‘very satisfied’; seven (33%) responded ‘fairly satisfied’; one (5%) responded ‘neither satisfied nor dissatisfied’, and just one (5%) responded ‘not very satisfied’.

Following this, question 14 asked ‘do you think this event *should* have any influence on BBSRC policy?’ Perhaps unsurprisingly, 13 (62%) replied ‘yes’, and 7 (33%) were ‘unsure’ (one respondent

left the response blank, and no respondent suggested that the event *should not* have an influence). Of those who were positive, two noted that it would be wise to listen to the public's views on prevalent societal issues, and three more echoed this by suggesting that participants had diverse (hence useful) views that might be different to that of BBSRC/those involved in the process already. Two more suggested that the views should be used as long as they are part of a larger process, while a further respondent suggested that the event should be influential as long as the opinions 'mirror' those of other 'demographics in the country'. Two others who were 'unsure' noted this idea of a limited sample as a mitigating factor possibly against using this event to influence policy, while two other 'unsure' respondents had provisos related to the quality of participants (one wrote about there having been 'some odd comments', and another implied use only 'if the suggestions are clear and helpful'). Finally, one participant wasn't sure such an event should be influential because they thought that 'they [BBSRC?] know what they are doing'.

Question 15 followed this issue further by asking whether participants thought 'BBSRC should use this approach again in the future around other science areas or questions?' This time, 19 (90%) responded 'yes', with only one respondent (5%) being 'unsure', and one other leaving this question blank. However, written elaborations of these answers were not particularly informative with regards what precise areas might be targeted for similar activities. Indeed, eight respondents simply stated that it was good to get diverse public opinion (because normal 'unscientific' people 'may say something BBSRC didn't think of') and two suggested it would be good to do this so tax payers could see where their money was going. A caveat expressed by one respondent was to use this approach in cases where 'scientific research provides evidence to underpin policymaking', and another implied a need to use this approach on a more precise topic (without providing any example of what this might be). Only one respondent expressed uncertainty because such an approach is 'better aimed at people with knowledge of the subject...'

Question 17 asked 'overall, what was the best thing about the workshop?' Six respondents suggested that the best thing was the discussion itself, that is, being able to hear others' views and express their own. Five respondents thought that the best thing was learning about new things (such as what research is being carried out), four specifically identified the BBSRC presentation and speaker and learning about the BBSRC as being best, while another specifically wrote about learning how public bodies decide policies as being a positive. For two respondents, the best thing was meeting other people, and for two others it was the food, while one respondent essentially praised the demeanour and activities of the facilitators in enabling the discussions to effectively take place.

In contrast, question 18 asked ‘overall, what was the worst thing about the workshop?’ The first thing to note – and perhaps as expected, given the generally positive rating of the workshop – was that most participants (13) either left a blank answer or specifically stated that there was nothing bad about the workshop. However, four participants did raise roughly the same point, which was that they felt that some aspects of the discussion seemed to drag on, or be repeated, or take a long time (such as the work on ‘what health is’, which was ‘not entirely relevant to aims of the day, but took a long time’), with one of these writing about ‘information overload’. Indeed, this could well have been a consequence of the diligent efforts of the facilitators to constantly ask for reasons behind answers to ensure that nothing was missed (which, arguably, would have been the greater ‘crime’). One participant suggested that the main problem was the lack of differentiation between participants (all from ‘the same area’), while another criticised some participants for either only being there for the money, or for always speaking and not letting others talk. (Note that all of these observations relate to translational issues.) A final participant criticized the lack of coffee!

Finally in this section, one question (16) asked participants how they thought an event like this ‘could be improved if something similar was run in the future’. Perhaps half of the participants left this question blank, but those that did respond provided some interesting comments.

The main issue – noted by six different participants – was that they would have liked more clarity at the start of the day, starting ‘upfront with a clear question’ (there is perhaps some correlate here with the answers to the first question). Four of these participants were more specific, stating that the event should have *begun* with the powerpoint presentation on BBSRC and what it funded as this was the most relevant aspect of the day. Indeed, this was an issue – one of balance and prioritisation - that was noted by the observer. The morning was taken up with participants discussing what ‘healthy’ meant to them. Presumably there must be some prior research that discusses this issue; regardless, eliciting this information might perhaps be more efficiently (and cost-effectively?) achieved by convening a number of focus groups. Often in public engagement exercises such as this, the information that the sponsors wish to have considered comes earlier in the process, as opposed to half way through the day. If the exercise were repeated, one option might be to drastically reduce the amount of time for the first task (which was valuable, in the sense of getting participants to think of the health issue), leaving greater time to then focus on BBSRC priorities, or indeed, to jump straight into the opening contextualisation as some of the participants desired.

A second theme from responses was about the nature of the process - considered by five separate respondents in one way or another. These generally thought the process ‘too intense’, with solutions ranging from having more time to having less time but more than one group a day, and to

being more interactive. Three of these respondents actually suggested using quizzes, games, or polls, to ease the process.

A third theme concerned the issue of sample size: two thought that events like this should have bigger sample sizes and be held across the country, while one suggested the need for more participants from elsewhere in the UK and from different backgrounds. Indeed, were the BBSRC to be serious about involving the public, then multiple groups would seem sensible. The problem with relying upon one group seemed evident in one exchange observed by the evaluator, in one group, in which a number of older participants talked of different perceptions of healthiness across the ages, and were rather negative about the ‘invulnerability’ felt by teenagers. This group only had one teenager, who fortunately was bold enough to contest this view (probably the next youngest at this table was in his mid-twenties) – in a way that often will not happen (and so the exchange could have led the person to simply withdraw from the process and risk losing the perspective from a whole demographic). Perhaps a number of the non-attenders were of a similar age, leading to this person’s isolation? If age were a significant issue, then future organisers might wish to specifically recruit particular age cohorts for separate events, or to sit at separate tables in one event. Of course, none of this is intended to criticise the current event, which was clearly a pilot, but this one event demonstrates the need to take care in future events with recruitment, group allocation, and in putting all of one’s eggs in one basket.

The final theme raised by two separate respondents was the issue of noise and the desirability of having separate rooms for the group discussions. This is a perennial problem with events like this, and speaks to the availability of resources. The evaluator did observe this issue as a particular difficulty to start with (sitting one metre behind one table, he initially could not hear the discussion at all because of the noise from the other table). However, it did seem – as often occurs in such occasions – that participants gradually learned to moderate their voices and the noise issue did reduce through the day. One issue this might impact upon is the quality of the recordings at the tables, and whether they were able to perfectly record the conversations. Only the facilitators can comment on this. However, it was positive that the contractors were not totally reliant upon the recording devices, since they also had scribes/rapporteurs at the tables.

c) Respondent opinions on the discussion domain

Finally, this section will address the results from two questions that the contractors wished inserted into the questionnaire. These two questions were not strictly evaluative, and so will not be discussed

in detail, but they do reveal some thoughts on health and the BBSRC that may be of help to the contractors and will (hopefully) validate the opinions they recorded throughout the day.

Question 12 asked: 'Taking into account everything you've discussed and heard today, what do you think are the most important health issues facing the UK in the next 20 years, and why?' The answers, listed from most to least common, were:

- Lifestyle related to diet and food (including Obesity) – 9
- Ageing/age-related issues (e.g. more Alzheimers) - 7
- Addictions (including Alcohol)- 4
- Cancer - 4
- Heart disease - 2
- Genetic disease - 2
- Emotional/mental health problems - 2
- Environmental causes (e.g. asthma) - 2
- Overpopulation - 1
- Infectious diseases - 1
- AIDS - 1
- New viruses/pandemics - 1
- Social problems/ poverty (leading to stress) - 1
- Prevention (generic) - 1
- Lack of money - 1
- Young people - 1
- Generic (e.g. 'health issues over various ages') -1

Note that participants in every case simply stated one or more issue, but did not elaborate (i.e. state 'why').

Question 13 asked: 'Taking into account everything you've discussed and heard today, what do you think the BBSRC should aim to do, when deciding what kinds of research to fund in future?' The answers, listed from most to least common, were:

- Areas where most people are affected/will benefit – 5
- Research into conditions affecting quality of life (as opposed to age of life) - 3
- Ask public opinion - 3
- Preventing diseases - 2

- All aspects for all ages/ everything - 2
- Areas presently under-funded - 1
- Issues that the individual can't control - 1
- What will affect the next generation - 1
- Research that, if successful, can be passed to other universities (etc.) to develop – 1
- Research leading to understanding of cell process, ageing, genetics, population biology - 1

The latter list suggests a number of interesting criteria BBSRC might consider. Ultimately, whether this output is useful to the BBSRC is an important and additional question that this evaluation (because of its limitations) cannot address. It might be that, for any future exercise like this, the BBSRC should consider what precise questions it would like answered, and in what format it would like those answers.

Conclusion

This report focuses on the results from the participant questionnaires in addition to a number of additional insights gained by the evaluator through observing the event. This limited evaluation suggests the following conclusions:

- The event was well run and well facilitated ('translation' was good)
- Participants were satisfied with the event, and generally thought that more such events should be done/might be useful for BBSRC in the future
- However, there may have been an issue of balance that needs to be looked at if running further events like this, in particular, discussing the BBSRC and its issues earlier in the event and reducing the general discussion of 'what is 'healthy''
- Any future event should also carefully consider demographic issues (such as in the construction of break-out groups) and ensure wider representation in a number of events (not just one)
- Having extra experts or other resources available able to answer participants' questions about health might also be of use
- Separate rooms might be useful for breakout groups to aid the process (make it easier to hear, etc.) – although this is often not possible because of resource limitations

Ultimately, however, it is the thoughts of BBSRC on the nature and format of the outputs achieved in this exercise that will determine its worth, and these thoughts are not captured here.