



EUROPEAN POLICY BRIEF

CIT-PART

Impact of Citizen Participation on Decision-Making in a Knowledge Intensive Policy Field

Main results and policy implications of CIT-PART, a research project involving seven partners from European universities and a non-university research institute

June 2012

INTRODUCTION

Objective of the research

CIT-PART comparatively studied the use and impact of participatory technology assessment (PTA) and expert based technology assessment (TA) in science and technology policy in several EU Member States and organizations such as Austria (AT), Denmark (DK), Great Britain (GB), Italy (IT), Latvia (LV), The Netherlands (NL), Sweden (SE), the European Commission (EC), the OECD, Canada (CA), Switzerland (CH) and The Holy See (VA).

In contrast to existing comparative studies on PTA, CIT-PART compared the use and impact of TA and PTA in the context of the same technology.

The main questions were:

- To what extent was TA and PTA used?
- Which factors facilitated and constrained PTA?
- What was the impact of TA and PTA on policy-making?
- How can PTA increase citizen participation on decision-making?

CIT-PART studied these questions by taking xenotransplantation policies in the 1990s and early 2000s as an example.

Xenotransplantation involves the transplantation of cells, tissues and organs from animals to humans. It is representative of many contemporary technologies in the sense that it is a complex problem, possibly with huge potential benefits, on the one hand, but also risks and ethical challenges on the other. It is therefore potentially controversial in public.

Scientific approach/methodology

In addition to wide-ranging analysis of literature and policy-documents, 135 in-depth interviews were carried out at the national and international level with policy-makers, experts, stakeholders and representatives of NGOs involved in TA and PTA.

New knowledge and/or European added value

CIT-PART provides an overview of the use and impact of expert advice and formal citizen participation (PTA) in xenotransplantation policies in the selected countries and organizations. Moreover, it provides examples of good practices of PTA and factors, which facilitated and constrained its use in science and technology policy.

Key messages for policy-makers, businesses, trade unions and civil society actors

One of the most important issues highlighted by CIT-PART is that citizen participation, in terms of PTA, was rarely used in xenotransplantation policy-making. Civil servants and experts were the actors most heavily involved in policy development. They framed xenotransplantation primarily as a technical and scientific problem. The public, on the other hand, was only actively involved to a small degree. Although the three cases of PTA (CA, CH, and NL) did not have a direct impact on decision-making in the strictest sense, they did affect the way that the topic was discussed and handled. In the future, PTA should be strengthened, particularly in expert advisory bodies at the international level, since these are also pivotal for national policy-making. Narrow scientific framing as well as decision-making by closed and impermeable groups formed out of civil service personnel and experts are major obstacles for PTA.

KEY OBSERVATIONS

Diversity of policies

In the early 2000s, a diversity of xenotransplantation policies existed across Europe. They ranged from a wait and see position, in which no particular policies were formulated (AT), to permissive ones, which allowed clinical trials following approval by responsible authorities (EC, IT, LV, OECD, CH, GB, VA), to formal and informal moratoria on clinical trials (CA, DK, NL, SE).

Expert advice dominates

Expert TA dominated policy advice on xenotransplantation policies. Only a small minority of governments commissioned PTA to involve the public (CA, CH, NL). In some cases, academics initiated participatory exercises (AT, EC, and GB). These had no direct impact on decision-making in xenotransplantation policies.

Experts and civil servants are critical actors

In almost all of our cases, civil servants and experts were “the” critical actors in policy development. Elected politicians only contributed to policy making in a few countries (CA, CH, DK; NL, SE). Despite the fact that reports repeatedly mentioned ethical issues as critical, ethicists – either in the form of national ethics committees or single experts involved in TA and PTA - played a lesser role and only became strongly involved in a few cases (UK, CA, and VA). NGOs also became involved in only a few countries (GB, CA, CH, and NL). Particularly animal welfare organisations faced difficulties to participate. In some cases, there was almost no public involvement beyond information being made public (AT, IT, LV, VA, OECD). By contrast, industry and science were able to considerably contribute as stakeholders to policy development. Citizens only became actively involved in xenotransplantation policies in a minority of countries (CA, CH, and NL).

Diversity of framing, but organ shortage and risk often dominate

First, xenotransplantation was not a controversial topic or the subject of hot debate in all cases.

- In two countries there was no debate at all (AT, LV).
- In most cases xenotransplantation did not give rise to serious conflicts and was handled as “business as usual” (DK, EC, VA, IT, OECD, SE).
- In two countries a situation of managed tension arose (NL, CH).
- However, in Canada and Great Britain, xenotransplantation was discussed in the context of a serious crisis of trust in government regulation.

Second, framing of xenotransplantation as a topic was contingent on and varied between cases.

- In most countries the topics of organ shortage and risk dominated the discussion.
- In some cases xenotransplantation was discussed in the context of national economic competitiveness (CH, EC, GB, LV, OECD, and SE).
- Less frequently ethical issues (CA, CH, SE, and VA) and animal welfare (CH, EC, NL, and VA) were critical and they became significant topics only in a few cases.
- In two cases trust in government (CA, GB) became critical.
- In one country xenotransplantation gave rise to struggles for competencies between parliament and government (NL).

Weak role of the public

The public was mostly involved in the weakest possible form, i.e. through surveys (in all cases except CH, LV, OECD, and VA). Additionally, with the exception of AT, almost all countries informed the public in one way or another. This was done to varying degrees, ranging from full-blown information campaigns (CA, CH, NL, SE) to simply publishing reports online (EC, DK, IT, OECD, VA). In a few cases the public was consulted. The intensity of consultation varied and was found to be very strong in some cases (CA, CH, GB, SE), strong in others (SE), or rather weak (EC, OECD). Again, the public was only involved in PTA exercises in CA, CH and NL.

Little direct but a variety of broader impact of PTA

Although policy-makers approved - in all the cases in which PTA was carried out - of both the PTA itself and its results, no unambiguous direct impact of these exercises could be established.

- In the Netherlands, the results of the PTA were available only after xenotransplantation policies were adopted and the organizers of the PTA did not have concrete plans for feeding them into policy-making. As it turned out, PTA results and official xenotransplantation policies were congruent.
- The same was true for Switzerland, where there was again an agreement between PTA results and government policies, which were determined before the end of the participatory exercise.
- In the Canadian case, it was hard to pinpoint a direct impact of the consultation exercise because the government did not make an official statement on its xenotransplantation policies and, in accordance with the public consultations' opinion, thereafter no clinical trials were carried out.

However, adopting a perspective on impact assessment that goes beyond the mere handing over of a final report, all three PTAs had an impact on the development of xenotransplantation regulation. The PTAs contributed to creating public awareness of the issue and to a (re)configuration of the relationship between relevant actor groups. PTAs also played a part in the definition of xenotransplantation as an issue by legitimizing and giving authority to claims made and to actor positions in the debate and regulatory procedures. In all three cases, PTA exercises were by and large considered legitimate and meaningful ways to gain knowledge and to involve the public in a debate about science and technology policy.

Varied impact of TA as well

Difficulties in the integration of findings from assessment studies into policy-making are not restricted to PTA. Expert TA also faced difficulties in directly impacting the regulation process. While in three of our cases, the TA exercises had a strong impact on policy-making (DK, GB, and OECD); in another two cases direct impact was weaker or at best 'mixed' (EC, VA). However, in three cases there was no direct impact on policy-making at all (IT, LV, SE). Important factors that co-determined a study's impact were:

- The kind of institution in which an advisory body is located;
 - Its mandate as advisory or regulatory body;
 - The extent to which its connection to policy-making was institutionalised, and
 - Its reputation as a competent and independent organisation.
- Moreover, the technical development of the policy issue and its framing in political and broader public debate played a role.
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Facilitating factors

Facilitating factors include:

- Existing traditions that PTA can build on, i.e. commissions involving participatory elements, adult education, direct democracy, consultation;
 - Existing practices of accountability and openness;
 - Coordination with responsible policy-making authorities and departments;
 - Combinations of various methods (e.g., surveys, emails, plays, consensus conferences);
 - Involvement of the wider social and political context in the organisation of PTA and dissemination of its results;
 - Involvement of antagonistic groups in the PTA.
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Constraining factors

Constraining factors include:

- When a topic is not perceived as political at all because it is only framed as a scientific issue - excluding or postponing e.g. questions of collective risk, ethics, human rights, politics and economics - or considered as a matter of individual choice;
- Case-by-case decision-making on individual clinical trials, which undermine an understanding of xenotransplantation as a fundamentally political issue;
- When the public does not consider itself to be a legitimate actor vis-à-vis policy-makers and experts;
- Traditions of paternalism, neo-corporatism and a strong and exclusive links between elites from science and the civil service that exclude the public;
- Lack of infrastructure and funding.

RECOMMENDATIONS FOR POLICY-MAKERS

Use of PTA should be increased

PTA was only carried out to regulate xenotransplantation in a minority of cases and had little direct impact on regulation. However, when assessed in terms of the process-oriented impact assessment framework developed in the CIT-PART project, PTA can be considered a success, given its numerous positive effects in creating and stimulating public debate.

The use of PTA should therefore be increased at the national level in general but in international expert bodies and at the EU level in particular, where discussions of technologies tend to be purely framed in terms of “sound science”. This poses new challenges for international organizations of ensuring a broader framing of issues.

Citizen involvement should be at the heart of framing

Expert bodies are advised to increase awareness of how their work may impact on the way that an issue is framed in national and international policy-making processes. In addition to the many mechanisms that increase accountability, the encouragement to include citizens in processes of analysis, judgement and even decision-making should be more than just an appendix to the recommendations. Only if the idea of civic engagement is at the heart of a body’s framing of the issue may it further help public involvement on a countrywide level.

Broad framing should be allowed for

Expert advice should allow for a broad framing that not only considers “sound science” but also allows for social, political, economic and ethical questions to be raised by stakeholders and the public.

PTA needs an addressee in policy-making

PTAs should be integrated into organisational practices of formal policy bodies to ensure that they can have an impact and that their outcome is acknowledged in decision-making arenas.

PTA should be embedded in institutions to allow for learning

Institutional learning should be embedded in such organisational practices. Most topics in science and technology policy present issues that cut across institutional borders. Specialisation in departments, however, might reinforce departmental fragmentation and struggles. PTA, as social innovation, must work against organisational fragmentation by involving responsible authorities, agencies and departments in order to increase the impact of PTA later on.

Existing participatory traditions and practices should be built on

In a number of cases, case studies revealed existing participatory traditions and practices (commissions, adult education, direct democracy, consultation, practices of accountability). PTA can build on and learn from these existing traditions.

International examples to identify and overcome factors constraining PTA can provide valuable lessons

Closeness of policy-making, closely knit policy communities, paternalism, expert orientation, and lack of accountability, transparency and openness, lack of open public debate and of an active mass media might represent severe obstacles for PTA. However, there are a number of international examples that worked to overcome these obstacles. It is possible to learn from and even to improve on these existing examples. Solutions to overcoming obstacles were also found to exist in TA; these were related to critical components such as transparency, openness, accountability, embedding, diversity of methods, involvement of antagonistic groups, overcoming the division between the different cultures of science, opening of framing, improving timing, and enhancing direct impact.

Impact should be planned

Direct impact on policy-making and impact on the public debate in a broader sense has to be planned and actively attended to.

Allow for time

Several cases showed that regulators felt a certain urgency to arrive at policies, which was produced by promises by xenotransplantation researchers that clinical trials were imminent. However, predictions that clinical application was ‘just around the corner’ turned out to be unrealistic. Participatory experiments need time. Policy-makers should therefore consider not responding to pressures produced by promises from science and industry too promptly. Policy-makers should instead allow sufficient time to stimulate proper civic engagement in procedures for political judgement on issues such as xenotransplantation, which touch on the very basics of our understanding of public health, medical choice, collective safety and human identity.

RESEARCH PARAMETERS

Objectives of the research

CIT-PART comparatively studied the use and impact of PTA and TA on policy-making in seven member- and two non-member countries, the European Commission, the OECD and the Holy See. From that CIT-PART drew conclusions about the use and potential impact of institutionalised citizen participation at the EU level.

**Scientific approach/
methodology**

CIT-PART included three phases:

1. Mapping the field including (a) analysis of democracy theory in order to obtain models and instruments of democratic participation, (b) overview on policies on xenotransplantation and the procedures upon which they were based as well as on public attitudes towards xenotransplantation, (c) classification of xenotransplantation policies.
 2. Case studies. In-depth case studies of xenotransplantation policies, as well as the use of TA and PTA therein, of selected countries and international organisations.
 3. Comparative Analysis.
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PROJECT IDENTITY

Coordinator	Dr. Erich Griessler, Institute for Advanced Studies, Vienna, AT
Consortium	<ul style="list-style-type: none">• University of Calgary, CA• Copenhagen Business School, DK• University of Siena, IT• University of Latvia, LV• University of Amsterdam, NL• Lund University, SE• University of York, GB
Duration	January 2009 – June 2012
Funding scheme	Collaborative Project. Small or medium-scale focused research project
Budget	EU contribution: € 1,000,000
Website	http://www.cit-part.at

Further reading

For a full list of publications and case studies see:

<http://www.cit-part.at/results.php>

Selected Publications:

Griessler, E.; Biegelbauer, P.; Hansen, J., Loeber, A. (2012): Citizen Participation in Decision-Making on Complex and Sensitive Issues? Experiences with Xenotransplantation. Report of the Project "Impact of Citizen Participation on Decision-Making in a Knowledge Intensive Policy Field" (CIT-PART). Vienna, www.cit-part.at

Griessler, E.; Biegelbauer, P.; Hansen, J. (Eds., 2011): Special issue on citizens' impact on knowledge-intensive policy. *Science and Public Policy*. Volume 38 Number 8, October 2011, with contributions by the CIT-PART consortium.

Hansson, K. (2011): The reconfigured body. Human-animal relations in xenotransplantation. *Kulturstudier*, 2, 142-156.

Griessler, E. et al. (2012): Xenotransplantation as policy problem: Comparing public debate and policies in an international perspective. *Xenotransplantation*, Volume 19/1, p.15.

For more information

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