Cette présentation a été effectuée le 12 mars 2010, au cours de la journée « Délibérer pour guider la prise de décision » dans le cadre des Journées annuelles de santé publique (JASP) 2010. L'ensemble des présentations est disponible sur le site Web des JASP, à l'adresse http://www.inspq.qc.ca/archives/.

Program in Policy Decision-Making McMaster University 12 March 2010



# Organizing and Evaluating Deliberative Dialogues in Canada and Elsewhere

Journées annuelles de santé publique Montréal, QC, Canada

John N. Lavis, MD, PhD
Professor and Canada Research Chair in Knowledge Transfer and Exchange
McMaster University

### **Overview**



Context for organizing and evaluating deliberative dialogues

Organizing deliberative dialogues

**Evaluating deliberative dialogues** 

Lessons learned (in only the most preliminary sense)

### **Context for Deliberative Dialogues**



### Decision-making is influenced by many forces

- Institutional constraints
- Interest group pressure
- Ideas
  - Personal beliefs
  - Values (what 'should be')
  - Research evidence (what 'is')
- External factors (e.g., recession, election)

Organizations are coming under increasing scrutiny about whether and how they use research evidence to inform decision-making (e.g., WHO, World Bank)

## **Context for Deliberative Dialogues (2)**



# Research evidence can inform many steps in the decision-making process

- Clarifying the problem
- Framing options and describing what is known about their benefits, harms, and costs
- Identifying potential implementation barriers/strategies
- Designing a monitoring and evaluation plan

Systematic reviews -- a summary of research studies addressing a clearly formulated question and using systematic and explicit methods to identify, select, and appraise research studies and to synthesize data from the included studies -- make this feasible

# Context for Deliberative Dialogues (3)



### **Evidence briefs**

Systematic reviews of research

Applied research studies, articles, and reports

Basic, theoretical and methodological innovations

5

# Context for Deliberative Dialogues (4)



Deliberative dialogues allow research evidence to be brought together with the views, experiences and tacit knowledge of those who will be involved in, or affected by, future decisions about a high-priority issue

Deliberative dialogues also enable interactions between decision-makers and researchers, which has been found to be one of the factors associated with the use of research evidence in policymaking

# Context for Deliberative Dialogues (5)



### Increasing interest in the use of deliberative dialogues has been fuelled by a number of factors

- Need for locally contextualised 'decision support' for decision-makers and stakeholders
- Research evidence is only one input into the decisionmaking processes of decision-makers and stakeholders
- Many stakeholders can add significant value to these processes
- Many stakeholders can take action to address highpriority issues, and not just decision-makers

# Context for Deliberative Dialogues (6)



### Deliberative dialogues can also be seen in the context of broader trends

- Evidence-based medicine 

  Evidence-informed health systems
- Problem-based learning → Collective problem solving
- Debate → Dialogue (and debate)

# Context for Deliberative Dialogues (7)



Debate	Dialogue
Oppositional	Collaborative
Winning	Common ground
Affirms perspectives	Enlarges perspectives
Searches for differences	Searches for agreement
Causes critique	Causes introspection
Looks for weaknesses	Looks for strengths
Defends assumptions	Re-evaluates assumptions
Listening for countering	Listening for meaning

Remains open-ended

# Context for Deliberative Dialogues (8)

Implies a conclusion



### My experiences with deliberative dialogues

- Evidence-Informed Policy Networks in 41 countries (many completed but evaluations just beginning)
- National Collaborating Centre for Healthy Public Policy (4 completed)
- McMaster Health Forum (6 completed in the last six months and 6 more planned for the next six months)
  - o We call them 'stakeholder dialogues'

## **Organizing Deliberative Dialogues**



Organizers of deliberative dialogues face many design decisions, few of which can be informed by available research evidence

We drew on both the limited available research evidence and our collective experiences with organizing, supporting the organization, and evaluating deliberative dialogues to develop a simple tool to aid in organizing deliberative dialogues (as one of 18 tools in the STP series)

11

# Organizing Deliberative Dialogues (2): Questions (from the STP series)



- 1. Does the dialogue address a high-priority issue?
- 2. Does the dialogue provide opportunities to discuss the problem, options for addressing the problem, and key implementation considerations?
- 3. Is the dialogue informed by a pre-circulated evidence brief and by a discussion about the full range of factors that can influence the policymaking process?
- 4. Does the dialogue ensure fair representation among those who will be involved in, or affected by, future decisions related to the issue?
- 5. Does the dialogue engage a facilitator, follow a rule about not attributing comments to individuals, and *not* aim for consensus?
- 6. Are outputs produced and follow-up activities undertaken to support action?

# Organizing Deliberative Dialogues (3): PPd **Q1: Priority**



### Does the dialogue address a high-priority issue?

Issue has to be on the governmental agenda and be widely perceived by many, if not all, stakeholders as a priority

## Organizing Deliberative Dialogues (4): Q2: Agenda



Does the dialogue provide opportunities to discuss the problem, options for addressing the problem, and key implementation considerations?

- Agenda may include separate deliberations about
  - **Problem** 0
  - Each option 0
  - Implementation considerations 0
  - Possible next steps for different constituencies
- However, organizers could modify this for their local context (e.g., having deliberations about the research evidence contained in the evidence brief)

# Organizing Deliberative Dialogues (5): Q3: Evidence & Other Considerations



Is the dialogue informed by a pre-circulated evidence brief and by a discussion about the full range of factors that can influence the policymaking process?

- Evidence brief has to be circulated at least ten days before the deliberative dialogue and is 'taken as read'
- Discussion has to address the full range of factors that influence the policymaking process, such as
  - Institutional constraints
  - Interest group pressure
  - Values and beliefs
  - External factors (e.g., economy)

15

# Organizing Deliberative Dialogues (6): Q4: Fair Representation



Does the dialogue ensure fair representation among those who will be involved in, or affected by, future decisions related to the issue?

- Stakeholder mapping exercise has to generate a list of decisionmakers, stakeholders (e.g., professional and civil society leaders) and researchers who will be involved in, or affected by, future decisions related to the issue
- Dialogue participants have to be chosen based on explicit criteria, such as the following
  - Ability to articulate the views and experiences of a particular constituency on the issue, while constructively engaging at the same time with participants drawn from other constituencies and learning from them
  - Ability to champion the actions that will address the issue within their constituencies

# Organizing Deliberative Dialogues (7): Q5: Facilitator, Attributions & Goal



# Does the dialogue engage a facilitator, follow a rule about not attributing comments to individuals, and *not* aim for consensus?

- Facilitator has to be perceived as skilled, knowledgeable, and neutral
- A rule has to be established about whether or not comments can be attributed
  - E.g., Chatham House Rule: "Participants are free to use the information received during the meeting, but neither the identity nor the affiliation of the speaker(s), nor that of any other participant, may be revealed."
- Goal for the dialogue has to be made clear
  - Aiming for consensus or not (but embracing it if it emerges spontaneously)

# Organizing Deliberative Dialogues (8): Q6: Next Steps



# Are outputs produced and follow-up activities undertaken to support action?

- Dialogue summary (without attributing comments) has to be produced and disseminated widely
- Optional
  - Personalized briefings to key policymakers?
  - o Media interviews with dialogue participants?
  - Video interviews with dialogue participants (for posting on YouTube)?
  - o Year-long evidence service?
  - Journal publication that describes brief, dialogue or both?

# Organizing Deliberative Dialogues (9): Ppd **Other Considerations**



### Engaging title for the deliberative dialogue

#### **Invitation letter**

- Organizers and their affiliations
- Steering Committee members and their affiliations (if applicable)
- **Funders**

## **Evaluating Deliberative Dialogues**



Evaluators of deliberative dialogues face many design decisions, many of which are much more complicated in health system contexts compared to the clinical contexts where most 'decision support' interventions have been evaluated

We drew on both the limited available evaluation literature and our collective experiences to develop a simple formative evaluation tool and to test a possible summative evaluation tool

## **Evaluating Deliberative Dialogues (2)**



#### Formative evaluation

#### Issues and context



### **Design features (→ Outcomes → Impact)**

 Questionnaire needs to be adapted so that the questions match the design features of each deliberative dialogue

21

## **Evaluating Deliberative Dialogues (3)**



### Examples of design features of policy briefs

- Provided an opportunity to discuss different features of the problem, including (where possible) how it affects particular groups
- Aimed for fair representation among policymakers, stakeholders, and researchers
- Allowed for frank, off-the-record deliberations by following the Chatham House rule
- Did not aim for consensus

## **Evaluating Deliberative Dialogues (4)**



### (Moving towards) Summative evaluation

### Issues and context

### **Design features** → **Outcomes** (→ **Impact**)

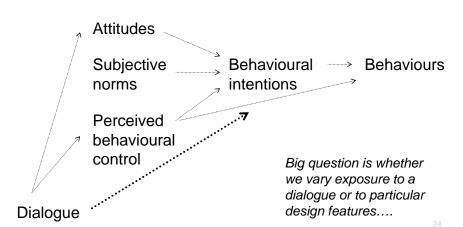
 Outcomes are measured using a tool based on the Theory of Planned Behaviour, and validity and reliability testing of the tool is underway

23

## **Evaluating Deliberative Dialogues (5)**



### **Theory of Planned Behaviour**



## **Lessons Learned (Preliminary)**



#### **Critical success factors**

- Terms of reference for the evidence brief
- Stakeholder mapping (for key informant interviews and dialogue invitations), including the seniority of the invited policymakers

### **Challenges**

- (For a minority) Lack of research evidence about how the problem/options affect particular groups
- (For a minority) Lack of recommendations in the evidence brief and lack of a consensus goal in the deliberative dialogue
- (For us) Nature of follow-up activities

25

### **Conclusions**



These are early days in the use of deliberative dialogues to inform health systems decision-making

Guidance currently available is preliminary at best

Evaluating deliberative dialogues using a common evaluation framework will aid cross-issue and cross-context learning

 Our evaluation tools will soon be available in English (thanks to the National Collaborating Centre for Methods and Tools) and in French (thanks to the World Health Organization)

### Resources



Oxman AD, Lavis JN, Fretheim A. Use of evidence in WHO recommendations. **The Lancet** 2007; 369: 1883-1889.

Hoffman SJ, Lavis JN, Bennett S. The use of research evidence in two international organizations' recommendations about health systems. **Healthcare Policy** 2009; 5(1): 66-86.

Lavis JN. How can we support the use of systematic reviews in policymaking? **PLoS Medicine** 2009; 6(11): e1000141. doi:10.1371/journal.pmed.1000141.

27

### Resources (2)



Lavis JN, Boyko J, Oxman AD, Lewin S, Fretheim A: SUPPORT Tools for evidence-informed health Policymaking (STP). 14. Organising and using policy dialogues to support evidence-informed policymaking. **Health Research Policy and Systems**; 2009, 7(Suppl 1):S14 doi:10.1186/1478-4505-7-S1-S14.

Lavis JN, Oxman AD, Lewin S, Fretheim A: SUPPORT Tools for evidence-informed health Policymaking (STP). Introduction. **Health Research Policy and Systems** 2009, 7(Suppl 1):I1 doi:10.1186/1478-4505-7-S1-I1.

 The STP series will soon be available in French at http://www.support-collaboration.org/ (thanks to CHSRF)

### Resources (3)



**Health Systems Evidence** (to find evidence briefs, overviews of reviews, and systematic reviews about health system arrangements and implementation strategies)

• http://www.healthsystemsevidence.org (with the search interface soon available in French thanks to F-P)

**McMaster Health Forum** (to find examples of how we approach evidence briefs and dialogue summaries)

http:// www.mcmasterhealthforum.org

**Program in Policy Decision-making** (to find our emerging research about deliberative dialogues)

http:// www.researchtopolicy.org