



**WHAT WORKS?  
DEVELOPING A GLOBAL  
EVIDENCE BASE FOR PUBLIC  
ENGAGEMENT**

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—  
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**OTT Consulting**

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## ABOUT THIS REPORT

In 2020, the Wellcome Trust commissioned OTT Consulting to recommend the best approach for enabling public engagement communities to share and gather evidence on public engagement practice globally, and in particular to assess the suitability of an approach adapted from the UK ‘What Works Centres’. This report is the output from that commission. It draws from a desk-based literature review, workshops in India, Peru and the UK, and a series of stakeholder interviews with international organisations.

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## ACRONYMS AND ABBREVIATIONS

<b>Ada</b>	Ada Lovelace Institute
<b>AHPSR</b>	The Alliance for Health Policy and Systems Research
<b>NICE</b>	National Institute for Health and Care Excellence
<b>ODI</b>	Overseas Development Institute
<b>PE</b>	Public Engagement
<b>RAPID</b>	Research and Policy in Development
<b>THIS</b>	The Health Improvement Studies Institute
<b>UPD</b>	Understanding Patient Data
<b>Wellcome</b>	Wellcome Trust
<b>WHO</b>	World Health Organisation

## EXECUTIVE SUMMARY

In 2020, the Wellcome Trust commissioned OTT Consulting to recommend the best approach for enabling public engagement communities to share and gather evidence on public engagement practice globally, and in particular to assess the suitability of an approach adapted from the UK 'What Works Centres'. This report is the output from that commission. It draws from a desk-based literature review, workshops in India, Peru and the UK, and a series of stakeholder interviews with international organisations.

The key themes that emerged from stakeholder interviews and workshops were that, in order for evidence about public engagement to help inform and shape public engagement practice, and for public engagement to be used and deployed effectively, there has to be an approach that can:

- **Understand the audience(s)** for the evidence, and the need for evidence among a range of varied audiences.
- **Broaden out how 'evidence' is understood and generated:** recognise the potential value of an approach that seeks to understand what works, for whom, in what context, how, why and to what extent. Such an approach is likely to be more suited and valuable to a wide range of audiences.
- **Think strategically about how evidence affects and informs practice:** take a strategic and tailored approach to communicating evidence with this range of audiences.
- **Understand the complexity of the system dynamics within which public engagement (and evidence about public engagement) operates:** both public engagement and evidence about it operate in a context characterised by power asymmetries between publics and power holders, as well as by research and policy cultures that struggle to assimilate public engagement approaches within highly expert-dominated disciplines.

Our consultations suggested that while there is a clear need for improved evidence about public engagement practice, that evidence should be construed broadly rather than narrowly, and encompass a range of different approaches and methods, rather than a single one. As such, the model of a 'What Works Centre' is unlikely to be suitable. The primary critique of an 'evidence-' only model is that, in some instances, the generation of evidence in and of itself does not always have the intended impact on practice that it could have. As a consequence, we propose that a consortium of like-minded funders interested in the issue of evidence as it relates to public engagement should consider the

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resourcing and funding of a Centre for Public Engagement Impact.<sup>1</sup> Such an initiative would be informed by, and develop, evidence, but it would also take a strategic and user-centred approach to ensuring that the evidence informs and influences public engagement innovation and practice, thus having impact.

Articulating and evidencing the impact of public engagement is complicated because some public engagement activities, particularly those that seek to engage, empower and collaborate with the publics, involve diverse people in shaping environments that are complex, on topics and issues that are usually highly contentious. These can be in contexts where there is often much at stake for experts, people and society and where the issues can be complex and controversial. Numerous stakeholders also pointed out that both public engagement, and evidence about it, operates in a context characterised often by stark power asymmetries between publics and power holders as well as research and policy cultures that struggle to articulate, understand or embed public engagement approaches within highly expert-dominated disciplines.

We take the need for an understanding of the complex systems within which public engagement operates as the starting point for what a global initiative about public engagement evidence would need to consider in order to be valuable and impactful for a range of stakeholders. Taking such a systems approach would allow the centre to understand the challenges and opportunities for good public engagement within the wider systems and contexts in which public engagement inevitably operates – for instance, research and policy cultures. Evidence about public engagement could be generated with the intent of understanding the ‘leverage points’ in these complex systems with respect to engagement that will enable a fundamental shift towards more sustainable, legitimate and durable research, and evidence-led and democratic systems. A new Centre for Public Engagement Impact could see its own role as a catalyst in working with a range of organisations and actors to spark this systems innovation and change, focusing on evidence for impact.

Building out from the systems change lens, a Centre for Public Engagement Impact is likely to have a dual focus.

- Understanding the necessary conditions for good public engagement: it will seek to understand what is required for a range of public engagement approaches to increase their impact and effectiveness. This will not, however, be adequate to enable a public engagement process to have impact, since such initiatives operate in complex systems.

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<sup>1</sup> For convenience, in what follows, we refer to the initiative we propose as a ‘centre’, but Section 8.4 sets out a number of different structures that might be used to implement the initiative.

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- Understanding what is required in the underlying systems (policy, research and democratic cultures) to enable more effective public engagement: as a consequence, the centre will also need to develop an understanding as to what is necessary in the wider ecosystem to enable public engagement to have and to realise the impact it needs.

Evidence will play an important role in helping systems and actors within the system themselves to learn, and the new centre would advocate an approach to learning that is internalised and embedded. We propose a model that draws evidence from practice and the collective knowledge of the emerging field of public engagement, in turn helping to catalyse field building, network building and contributing towards a more systematic approach to evidence about public engagement. It is for this reason that we do not think that it would be effective to 'carve off' evidence from practice, innovation or convening. The approach we propose broadly follows an 'action learning cycle', which recognises that the practice of, and innovation in, public engagement is itself a useful contributor towards evidence.

The action learning evidence wheel (Figure 1, next page) illustrates the type of activities such an initiative might wish to undertake in order to build out and expand from evidence towards piloting, innovation, strategic communications of evidence and capacity building of public engagement practitioners.

In practical terms we identify three options that a network of funders could pursue in developing such an initiative:

1. Commissioning an outside institution that is an established practitioner in the landscape to create a centre.
2. In-house incubation of a centre within a funding body.
3. Seed funding an international group of institutions with a view to forming an 'airline alliance' of research partnerships.

This report recommends that a network of funders resource the scoping and identification of a feasible option from these three.

**Figure 1: The action learning evidence wheel <sup>2</sup>**



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<sup>2</sup> This diagram has been iterated from the experiential learning and 'action learning' cycle, which is discussed in more detail in Section 8.3.

## 1. BACKGROUND AND CONTEXT

In August 2019 the Wellcome Trust ('Wellcome') issued a request for proposals to explore and recommend the best approach for enabling global public engagement (PE) communities across different sectors to gather and share evidence on methods and outcomes relating to public engagement practice. Wellcome's starting point was that public engagement practice is currently poorly evidenced, which limits its ability to become embedded at scale and create impact, and that there is a paucity of resourcing, skills and capacity to evaluate engagement for impact. Building the evidence base for public engagement has the potential to enable more effective approaches to its use, which in turn has the potential to improve the quality, trustworthiness and efficacy of research and public policy.

Since Wellcome commissioned this work, and between 2019 and 2020 as this research was undertaken, several developments have highlighted the extent to which a richer and deeper understanding of public engagement's impact is necessary and warranted. The nature of the pandemic response and pandemic recovery as contingent upon influencing and shaping the behaviour of individuals and groups has highlighted the importance and centrality of public understanding of science to the effectiveness and legitimacy of both science and public health policy.

Additionally, the death of George Floyd in the USA and the subsequent extent and nature of the unequal impacts of the COVID-19 pandemic has prompted a broader global conversation about the importance of involving the perspectives of marginalised and underrepresented people and groups in policy making and decision making, and highlighted the asymmetries of power that can play out between institutions and people, including through the practice of public engagement.

This report is informed by a multi-method study that draws upon a synthesis and review of the grey and academic literature in this field; three roundtables convened in London (UK), Lima (Peru) and Bengaluru (India); and a series of over twenty interviews with a wide range of stakeholders involved in the development of public engagement and in the field of evaluation practice. This research process sought to understand the nature of the need for evidence about public engagement and the gaps that exist in this evidence. This report articulates how public engagement is commonly defined and understood by practitioners in the field, and explores the needs of its potential audience in key sectors. It reports key trends in the study of PE in different sectors and different regions, through the lens of 'field-building' and the role that an evidence centre could play in helping to build the field.

## 2. THE NEED FOR EVIDENCE ON PUBLIC ENGAGEMENT

The insight generated from this mixed methods research confirms that there is a need for a ‘global PE evidence initiative’, though this should not be modelled after the existing ‘What Works Centres’ in the UK. This report summarises the key features of such an initiative that stakeholders identified as being of potential value and benefit to beneficiaries. It also outlines a range of potential operating models for such an evidence initiative, drawing upon existing models where they exist. In preparing this report seven types of structures were considered and fifteen examples of these structures from across the globe were reviewed.

This report argues that a **Centre for Public Engagement Impact** is a viable model for core funders to consider. Such a centre would build on practice and use that practice, as well as drawing upon evidence and analysis to help support innovation. Drawing on experience in a range of different contexts, this report also sets out three potential approaches that Wellcome and similar core funders could consider in beginning the establishment of a centre. Such an initiative would be distinct from What Works Centres in several important respects, considering that public engagement is less of a field within social policy, and more of a *practice-based* endeavour; and considering the need to encompass, in this context, more experiential forms of evidence rather than purely academic or desk-based research about public engagement.

## 2. DEFINING AND UNDERSTANDING PUBLIC ENGAGEMENT

Public engagement has specific connotations and meanings in an academic context – the National Coordinating Centre for Public Engagement, for instance, defines it as describing ‘the myriad of ways in which the activity and benefits of higher education and research can be shared with the public’ across a range of contexts and sectors (National Coordinating Centre for Public Engagement, 2021a). In the Lima and Bengaluru workshops, great emphasis was placed on the role and value of science communication in particular.

*‘Public engagement is a collaborative and flexible process that seeks to communicate research findings but also feeds from the perceptions and experience of research users or the “public”.’  
Contributor, Lima workshop*

In a broader context, however, public engagement may be understood as having a range of different objectives, all involving people, which in turn helps inform and shape what method of engagement and activity might be most appropriate in a given context. It is notoriously challenging to provide a single definition of public engagement that succeeds in capturing both the breadth of public engagement activity that is possible, and the uniqueness of distinct forms of public engagement in design and purpose.

The definition suggested by Vincent (2019) is one that was found to resonate, perhaps because it connects with the more familiar notion of community (or stakeholder) engagement:

*‘Public engagement refers to the process of encouraging people in general to become more aware and involved with science, its impacts on society and the ethical questions it brings.’*

This definition also connects to science communication, a sub-domain of engagement that is also familiar to many. Vincent goes on to define a related set of activities:

*‘Community engagement refers to working with specific geographically and identity-based communities who are affected by particular research projects or initiatives.’ (Vincent, 2019)*

Vincent’s definitions are centred around activities. The PE team at Wellcome has taken a different approach, defining PE, not in terms of the activities that it involves, but the ‘outcomes’ it seeks to achieve:

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‘Public engagement is a broad term, used differently in different sectors. Our definition of Public Engagement is broad, which seeks to achieve one of the following three outcomes:

Empowers people – helping them access, use, respond to, and participate in health research and innovation

Creates people-centred health research – improving our understanding of people’s experiences and using that knowledge to improve research

Helps society value research – bridging the gaps between research and society so that research and innovation are trustworthy and valued by people.’ (Wellcome Trust, 2019)

Defining PE in this way, terms of **impact and outcomes having to do with the relationship between science and society** has important advantages, not least when it comes to evaluation, but some stakeholders struggle with this definition and prefer definitions such as those presented by Vincent. The contrast in these definitions illustrates one challenge faced in attempting to survey the PE landscape – the wide range of terms used to describe PE itself.

Other initiatives and organisations, such as the International Association for Public Participation, and Health Canada, also tend to focus less on the activity and method, turning their attention instead towards the envisaged goal of the activity and method, and the associated expectations engendered by the activity. Depending on the goal, the public engagement activity is likely to vary (for instance, those seeking to inform members of the public may deploy communication strategies and transparency-based approaches, while those seeking a higher level of public involvement and influence may adopt approaches that enable that level of involvement, such as citizen juries). Figure 2 and Figure 3 illustrate the extent to which the potential for improved social impact through the public engagement activity increases as institutions shift from the left to the right of the spectrum:

Figure 2: RSA's spectrum of public engagement <sup>3</sup>

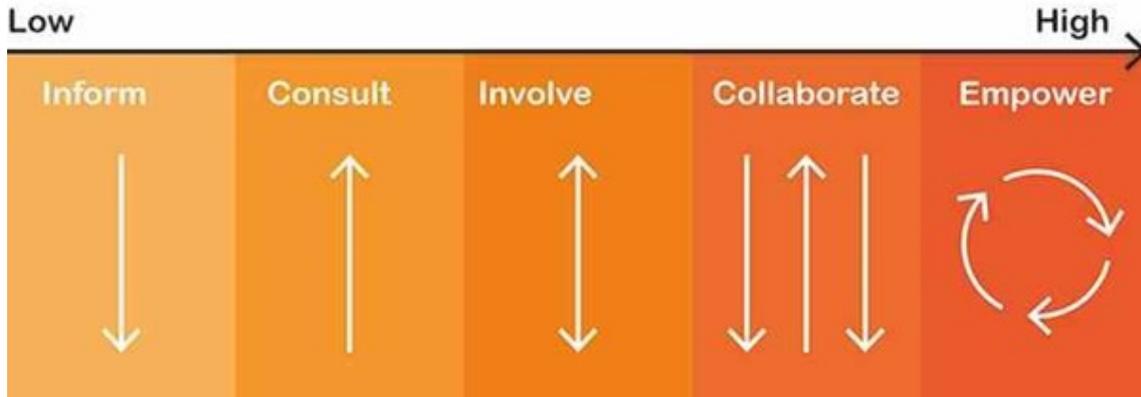
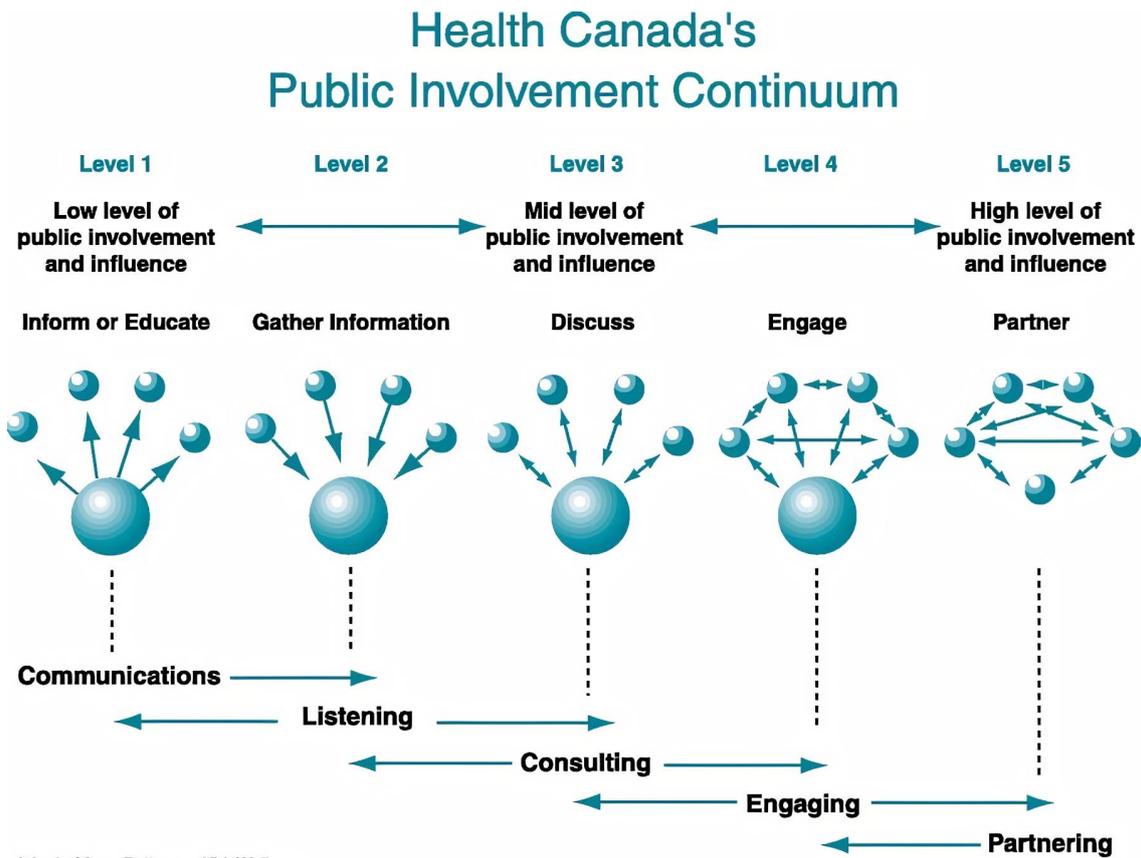


Figure 3: Health Canada's public involvement continuum <sup>4</sup>



Adapted from Patterson Kirk Wallace

<sup>3</sup> Patel and Gibbon (2017)

<sup>4</sup> Health Canada (2000)

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As the diagrams illustrate, some public engagement activities may include science communication<sup>5</sup> and the explicit objective to inform members of the public on a particular aspect of research or a decision, but others will be designed with the intent to shape a highly collaborative approach to the development of research and policy solutions, with a strong focus on partnering with and empowering people to effect change themselves. Still others might conceive of public engagement as not additional to, but rather as an extension of, research undertaken in a particular field, particularly where the research questions are focused on understanding public insight on questions of ethics, trustworthiness or legitimacy.<sup>6</sup>

Particularly high profile examples of approaches that are considered as moving beyond informing and gathering information include the use of deliberative public engagement approaches such as citizens' juries and citizen assemblies (these tend to have a specific focus on policy impact and influence rather than on research) (Chwalisz, 2017). Other examples include those of the Gram Sabha (pioneered in India, to enable effective co-creation and village development) – in this context, public engagement plays a central role in ensuring critical scrutiny and accountability on the part of publics in a development context. Another such example is that of participatory budgeting, famously developed in the region of Porto Alegre, Brazil, and institutionalised since 1987 (World Bank, 2008) but also subsequently implemented in regions such as the Democratic Republic of the Congo (World Bank, 2012). This approach to understanding public engagement as purposive – with the intent to shift power dynamics – was first posited by Sherry Arnstein in her field-shaping paper on the ladder of citizen participation, and has since been adapted by practitioners into a spectrum (Arnstein, 1969).

This way of understanding the choices determining the use of specific public engagement activities has ramifications additionally for the evaluation of engagement, and the creation of an evidence base around its impact.

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<sup>5</sup> Science communication is the practice of informing, educating and raising awareness of science-related topics, and increasing the sense of wonder about scientific discoveries and arguments. Science communicators and audiences are ambiguously defined and the expertise and level of science knowledge varies with each group.

<sup>6</sup> See, for instance, the Ada Lovelace Institute's explanation of the value and role public engagement plays in shaping their research: <https://www.adalovelaceinstitute.org/about/how-to-work-with-us/publics/>. Ada is an independent research institute with a mission to make data and AI work for people and society.

### 3. GENERATING EVIDENCE ABOUT PUBLIC ENGAGEMENT – IT’S COMPLICATED

Articulating and evidencing the impact of public engagement is complicated because some public engagement activities, particularly those that seek to engage, empower and collaborate with the publics, involve diverse people in shaping environments that are complex, on topics and issues that are usually highly contentious where there may be only limited consensus. These can be in contexts where there is often much at stake for experts, people and society. In particular, public engagement activities concerning health, science and social science policy, particularly those that go beyond or build on communication, usually involve people in discussion about issues that are complex and controversial, for example genome editing, genetic engineering of crops, the development and use of artificial intelligence and health data sharing.<sup>7</sup> As such, in these contexts there can be debate and disagreement about the appropriate and proper role of the public, disagreement among the public, a divergence between people participating and those making decisions and conducting research, and a lack of clarity among decision makers about how public engagement sits alongside the many other myriad factors influencing policy, research or decision making.

Despite these complexities, much evidence and research to date illustrates that when undertaken effectively, public engagement can open up discussion about the plurality of options available for researchers, scientists and policymakers, and can help empower patients and the public, and can also help researchers, scientists and policymakers identify the right and most relevant research questions (Özdemir and Springer, 2018) But when undertaken poorly, there is great risk of marginalising those perspectives most required to enable effective science and health policy interventions, or tokenism, in turn undermining, rather than strengthening the trustworthiness of research and policy (Involve, 2005).

These issues are exacerbated when we consider the extent to which cultures and working practices in the research and policy communities can create asymmetries of power and have the potential to perpetuate cultures of deference between people and the professional (Arko, 2019). Additionally, ‘the publics’ are not a homogenous, nebulous grouping, but comprise a diverse range of stakeholders from different walks of life (National Coordinating Centre for Public Engagement, 2021b). Different lived experiences, membership of communities and groups, and differential individual experiences of institutions can and do shape perceptions of institutions that are engaging

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<sup>7</sup> See, for instance, the UKRI Sciencewise public engagement programme, which has undertaken well over fifty public dialogues since 2004, when it was established.

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publics and can contribute towards engendering a ‘participation gap’ (Dalton, 2017). Influential and impactful public engagement initiatives often consider not just the form and the method of public engagement, but also who is engaged and involved in the public engagement initiative, and how best to design the initiative to ensure that those voices most marginalised and/or directly impacted by a particular research agenda or policy are actively involved at different stages. The aim is to engender greater ‘equity of voice’ and enabling the levelling of a playing field, in addition to the context and climate in which public engagement takes place (cultural and democratic expectations and norms, for instance, can play a central role in shaping different forms of public engagement).

All of these considerations create a range of socially indeterminate variables that are hard to measure and track with great ease. Developing a nuanced understanding of the evidence base around and impact of public engagement, will therefore need to consider the complex environment and dynamics of power in which many public engagement initiatives are situated.

## 4. REALIST APPROACHES TO EVIDENCE IN THE PUBLIC ENGAGEMENT FIELD

An analysis of ‘what works’ in public engagement therefore requires approaches to evaluation that are able to account for the conditions that enable good public engagement to flourish, or the barriers to the widespread use and adoption of public engagement that prevent engagement from realising its full potential, for instance (in addition to the narrower questions of quality and best or good practice for specific public engagement activities). While a range of evaluation approaches have the potential to be valuable in shaping evidence about the effectiveness of public engagement, a number of stakeholder interviews suggested that in this particular context, drawing upon and learning from realist approaches to evidence could have considerable potential for exploration by a new centre looking at evidence for public engagement.

A realist evaluation asks, not simply ‘what works?’, or even, ‘to what extent does it work?’, but rather, ‘what works for whom, in what respects, in what contexts, and how?’ (Clarke, Pawson and Tilley, 1998). The purpose of a realist approaches to evaluation is not to answer, in a binary sense whether or not ‘X public engagement intervention’ worked, but rather to seek to provide the academic research, policy and practice community with a rich, detailed, mixed methods qualitative and quantitative analysis of how public engagement interacts with a complex social and political environment, and the value it engenders in these circumstances (Better Evaluation, 2014). The objective of such an approach would not be to deliver a ‘verdict’ on ‘gold standard’ public engagement practice or specific methods, but rather to ensure that public engagement practice and fields are adequately equipped and informed with the knowledge, understanding, resources and capabilities to implement and institutionalise public engagement well at global, national, regional and local levels.

## 5. KEY THEMES EMERGING FROM INTERNATIONAL STAKEHOLDER ENGAGEMENT RESEARCH

### 1.1 THERE IS AN EVIDENCE GAP IN THE INTERNATIONAL LANDSCAPE

Public engagement has some established global practice and sharing of learning, but this has tended to vary enormously by nation and continent, a point confirmed through stakeholder interviews conducted with the Open Government Partnership,<sup>8</sup> a multilateral organisation that identified the need for mechanisms and resourcing to share learning across regions and sub-regions; particularly in a development context where much public engagement activity can be contingent on time-limited project funding.

There is, however, some fragmented practice of sharing learning and insights across national borders, although this tends largely to be by and for practitioner audiences rather than grounded in the generation of evidence or capacity building for a broader audience such as scientists, healthcare professionals and those in the policy profession. Examples of such learning initiatives include the OECD's Innovative Citizen Participation Network,<sup>9</sup> the Participedia website,<sup>10</sup> and the International Association for Public Participation.<sup>11</sup> In addition, there are many communities of practice and informal networks that have established themselves around the practice of specific forms of public engagement in a sectoral context, for instance in health and care, bioethics, development and science and technology. Others have chosen to adopt a methodological focus, such as through the lens of science communication, deliberative democracy, participatory budgeting, stakeholder and public dialogue, or citizen science. The reasons for this narrowing to a sectoral and/or methods-based approach are understandable, particularly given the range of public engagement practice. Contributors to our interviews stressed that there can be great diversity of practice even across sub-regions, which makes comparative practice difficult to achieve. Stakeholders did note, however, that there remains a gap for the development of a taxonomy or a typology of different

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<sup>8</sup> The Open Government Partnership is an international network of reformers within and outside of government seeking to effect change in how government serves citizens: [www.opengovpartnership.org/](http://www.opengovpartnership.org/).

<sup>9</sup> The OECD's Innovation Citizen Participation Network analyses and researches new forms of deliberative, collective and participatory decision making across the globe: [www.oecd.org/gov/innovative-citizen-participation.htm](http://www.oecd.org/gov/innovative-citizen-participation.htm).

<sup>10</sup> Participedia defines itself as a global network and crowdsourcing platform for those interested in democratic innovations: <https://participedia.net/>.

<sup>11</sup> The International Association for Public Participation aims to extend public participation practice through professional development, certification, standards and advocacy: [www.iap2.org/mpage/Home](http://www.iap2.org/mpage/Home).

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approaches to PE, which might enable a more comparative evaluative approach that accounts for diversity of context, and enables the sharing of innovative best practice internationally.

A number of additional barriers to a global, strategic approach to public engagement evidence were identified by the stakeholders that we interviewed:

- **Fragmentation and lack of coordination of public engagement practice and evaluation** – PE funding, where it exists, is often fragmented rather than collaborative with a view to enabling maximum impact on policy and research practice, with evaluation often an afterthought and/or limited sharing of any evaluation. There is also a lack of coordination when it comes to sharing findings of PE initiatives with those who have the power to effect change.
- **The communities engaged in public engagement tend to work in ‘silos’**: Public engagement serves as a label for a wide range of activities, and each type of engagement activity seems to take place on what could be described as an isolated island: there is a great deal of activity on each island, but few, if any, instances of exchanges of ideas or practice between the islands. The relatively ‘siloed’ nature of the communities involved in these activities made it difficult to communicate and exchange new ideas and practices among these ‘islands of activity’.
- **Lack of public engagement evaluation sustainability**: in a global and development context, civil society organisations are predominantly the organisations pushing public engagement approaches forward. As such, these approaches are often tied to short-term project funding rather than long-term core funding, with limited or even no resources available for impact evaluation. Impact evaluation is also particularly difficult when it comes to ‘one-off’ initiatives funded by project resources, as opposed to more durable initiatives embedded within institutions. Esmée Fairbairn has, for instance, highlighted the importance of core-funded initiatives for improved outcomes and more impactful practice in a range of social sectors, particularly with respect to encouraging innovation, risk taking, proactive decision making and long-term policy changes (Esmée Fairbairn Foundation, 2021). Here power dynamics make evidence generation about the *impact* of PE difficult to achieve, understand and measure.
- **Insufficient resources (material, human and financial)**: evidence and evaluation relating to the practice of public engagement is still a relatively underdeveloped field globally, with a scarcity of adequate resources (skills, knowledge, expertise and investment).
- **Evaluation and evidence generation encounters barriers in an environment that is widely perceived as ‘unsafe’**: given the very under-resourced nature of the public engagement sector, and the extent to which those

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undertaking qualitative research have to justify their work in ways that quantitative researchers do not, evidence that does exist is difficult, hard to access and hard to use due to the lack of a safe environment; and there are limited incentives and reasons for generating evidence where it does not exist. In addition, some commissioners of public engagement activities are reluctant to resource, commission and publish evaluations.

Stakeholder interviewees also suggested that Wellcome and other independent core funders of such an independent initiative would be well placed to:

- **Ensure financial and human (skills-based) resourcing is available** to support impact analysis and evaluation of public engagement, in particular, by moving beyond project-based funding (one-off, distributed in less granular ways) towards more substantial institutionalised funding of evidence generation and learning.
- **Enable international synthesis** across regions, bringing together what we already do know across regions.
- **Help to address the fragmentation and coordination challenge**, using its reach and networks to be able to bring together and coordinate together other existing networks and initiatives, and funders to enable scale and impact.
- **Enable cross cultural learning to be shared** potentially through infrastructure that creates these spaces, which currently do not exist.
- **Help forge relationships and build capacity** with government and policymakers around generating and using evidence of engagement (as is the case with evidence generation of research impact).

### 5.1 THE UK GOVERNMENT'S 'WHAT WORKS CENTRE' MODEL

‘There is a danger in creating a centre on the assumption that a lack of academic papers and reports on the subjects means there is no evidence – as that insults experience and other ways of sharing knowledge, so clarity on what is meant by evidence and what kinds of knowledge are valued is essential ...’ Contributor, London workshop

In 2013, the UK government established a network of ‘What Works Centres’ that aimed to improve the way that government and other publicly funded organisations create, share and use high quality evidence in decision making. Part of the brief from Wellcome was to explore whether these centres provide a model that would be useful in designing an evidence centre for public engagement.

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These ‘What Works Centres’ include a number of high-profile initiatives, such as NICE (National Institute for Health and Care Excellence), the Education Endowment Foundation, the Early Intervention Foundation, and the What Works Centre for Wellbeing, which together have undertaken nearly fifty systematic reviews and nearly 300 evidence reviews (Cabinet Office, 2018). These centres are core funded by the UK government and a mixture of non-government sources (such as the Research Councils). Their remit has primarily tended to focus on specific areas of social policy, rather than the practice of a particular methodology, and they undertake activities that include (Cabinet Office, 2013):

- **Collating existing evidence** on the effectiveness of programmes and practices.
- Producing **high-quality synthesis reports and systematic reviews** in areas where they do not currently exist.
- Assessing the **effectiveness of policies and practices** against an agreed set of outcomes.
- **Filling gaps in the evidence base** by commissioning **new trials and evaluations**.
- **Sharing findings** in an accessible way.
- **Supporting practitioners, commissioners and policymakers** to use these findings.

Crucially, in the government’s five-year review of these centres, the report emphasised that the centres were only one part of the ‘What Works’ initiative. They were complemented by a programme of activity across government to ensure that knowledge about what works informs key decisions – which had the effect of seeking to ensure that the initiative was more firmly embedded in the training and development of the policy profession. This has important implications for the design of an evidence initiative: its work in building an evidence base should be complemented by efforts to change individual expectations and institutional cultures regarding evidence and how it is used.

## 5.2 WHAT REALLY WORKS? – GOING BEYOND THE WHAT WORKS CENTRE MODEL

‘Put the question mark back into “what works”.’ Contributor, London workshop

While contributors to the research commissioned by Wellcome agreed that there was a need for an initiative that generated evidence about the impacts and outcomes of public

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engagement activities,<sup>12</sup> many critiqued the ‘What Works’ network model as inappropriate for generating evidence about the impact and outcomes of these activities. Broadly, there was acknowledgement of the importance of multiple strategies that seek to influence decision making and practice around public engagement. Simply developing an evidence base would be inadequate. Some of the criticisms raised were:

- **The risk of ‘ivory tower approaches’ that exclude experiential and practice-based evidence:** there is a risk of creating a narrow definition of and a hierarchy about ‘high-quality’ evidence that does not capture experiential learning and enable that to be shared effectively with audiences (What Works Centres have tended to implicitly prioritise academic research such as systematic reviews and randomised controlled trials, which has substantially narrowed the audience for its research). A ‘centre’ implies an ivory tower approach to knowledge sharing, rather than a distributive, partnership-based and flexible model that has a range of audiences it intends to inform and influence.
- **Desire to see greater breadth of audiences and beneficiaries than the ‘What Works’ model:** there is potential to have greater ambition for this initiative than was envisaged for the What Works Centres in government, as Wellcome is an influential actor that operates across geographic borders and is independent of governments. Some contributors to this research suggested that Wellcome could therefore be ‘braver’ in its approach than a government-funded initiative such as the What Works Centres could be in articulating why some approaches to public engagement might have struggled to achieve their intended outcomes or effect change.
- **A ‘gold standard’ approach at the expense of facilitating innovation in practice:** there is a risk of creating a culture that aims to standardise or create ‘gold standard’ approaches to public engagement, instead of using evidence as a tool for learning and innovation in practice.
- **Relatively limited desk-based evidence about public engagement:** the lack of evidence that is presently generated and made readily available about public engagement (and the extent to which available evidence for synthesis is considerably limited, and/or highly inaccessible – for instance in journals trapped behind academic paywalls or in end-of-grant reports to foundations) would present a barrier to a ‘What Works’ model being adopted for evidence about public engagement, with its heavy emphasis on evidence review and synthesis.

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<sup>12</sup> This has been confirmed by additional landscape mapping research undertaken by OTT Consulting. While there have been specific evaluation programmes of particular forms of public engagement initiatives, such as the UK Sciencewise programme and within the UK’s DFID, there is no systematic effort to understand and share evidence and impact about public engagement at a global level.

- **Do we know whether the ‘What Works’ models themselves work?**  
There is presently very limited evidence of impact from the UK What Works Network. It is not clear that the What Works Centres are indeed ‘what works’ or have improved policy making and practice.

### 5.3 BROADENING HOW ‘EVIDENCE’ ABOUT PUBLIC ENGAGEMENT IS UNDERSTOOD AND DEVELOPED

In addition to the research traditionally undertaken by What Works Centres (synthesis of existing evidence, systematic reviews and randomised controlled trials), stakeholder interviewees and workshop participants suggested a range of ways in which evidence could be understood more broadly. These included:

- **Generating, analysing and sharing** analyses, case studies of PE evaluations and creating accessible repositories for these.
- **Capacity and field building resources:** frameworks and toolkits for generating evidence and for using evidence to assess impact and to promote organisational learning.
- **Systematic and formal training for practitioners:** formal courses and online webinars about how best to understand the impact of public engagement activities for those designing and delivering PE.
- **Systematic and formal capacity building for policymakers, scientists and health professionals:** training that seeks to ensure evidence about public engagement’s impact is influencing research and training for those in the policy profession.
- **Peer-to-peer learning networks and forums:** workshops, conferences and other meetings to exchange information and experiences about the evidence base for PE.

It is worth noting that the National Coordinating Centre for Public Engagement is already engaged in many of these activities, but its focus is mainly the higher education sector in the UK, and our research identified additional needs and a broader audience.

### 5.4 A ‘USER CENTRED’ APPROACH – WHO IS THE AUDIENCE FOR THE EVIDENCE?

Stakeholders identified particular value in thinking through who the *audience* for the evidence is likely to be and designing work/evidence that helps inform practice. Adopting a broader understanding of how evidence is applied, and for whom it is intended (the audience), could aim:

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- To help encourage and inform the **commissioning and funding of public engagement** activity by trusts, foundations and governments.
- To help inform **strategic development** (for instance, approaches to institutionalising public engagement in sectors, governments and across nations).
- To help inform the **beneficiaries from, and contributors to**, public engagement activity (these can include publics who participated, but also scientists, health professionals and other experts who have contributed as well as societal stakeholders and beneficiaries at large – this will vary depending on the context and nature of the activity).
- To help **develop capabilities that will support public engagement to realise its impact and value** – these could embed skills, knowledge and training for public engagement for practitioners, civil society organisations, think tanks, scientists and social scientists, and policy professionals in established training policy curricula, for instance.
- To help inform the **development of research** in academia and public policy, including a better understanding of the impact public engagement has on research quality (‘does public engagement help produce better research?’); and shifting research culture to better understand the value of public engagement.
- To help inform the **practice of public engagement**, particularly where it relates to cross-fertilisation of different methods, sharing innovative best practice and cross-sectoral learning.

## 6. A CENTRE FOR PUBLIC ENGAGEMENT IMPACT

The key themes that emerged from stakeholder interviews and workshops were that, in order for evidence about public engagement to help inform and shape public engagement practice, and for public engagement to be used and deployed effectively, there has to be an approach that can:

- **Understand the audience(s)** for the evidence, and the need among its audiences. These are likely to be varied, and include practitioners, researchers, universities, policy makers and a range of different sectoral networks. The audience is also likely to vary by region and location.
- **Broaden out how ‘evidence’ is understood and generated:** recognise the potential value of a realist approach to evidence generation (not simply understanding what works, but rather, understanding what works, for whom, in what context, how, why and to what extent?). Such an approach is likely to be more suited and valuable to a wider range of audiences than the narrower audience to which the What Works Centres have been adapted for, for instance.
- **Think strategically about how evidence affects and informs practice:** take a strategic approach to communicating evidence with this range of audiences; in particular, recognising that evidence about public engagement might need to be tailored or presented in different ways for it to help inform decision making about public engagement practice.
- **Understand the complexity of the system dynamics within which public engagement (and evidence about public engagement) operates:** numerous stakeholders pointed out that both public engagement, and evidence about it operates in a context characterised often by stark power asymmetries between the public and power holders as well as research and policy cultures that struggle to articulate, understand or embed public engagement approaches within highly expert-dominated disciplines. The Chicago Beyond research initiative, for instance, highlights the importance of uncovering equitable insights and of acknowledging the uneven field on which public engagement and research practices can often be designed, in turn blocking information flows that could better serve people and communities most in need (Chicago Beyond, 2019).

In order to respond to these concerns, the work of a centre would need to conform to the following principles:

- **Rigorous** in its approach, with a robust and neutral approach to building the evidence base.

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- **Independent** of commercial and market forces, and of governments – independent in funding as well as in practice.
- **Balanced** – able to understand the pressures public engagement practitioners often face, but also able to balance those with an understanding of the challenges researchers and policymakers face.
- **Diversity and equity focused** – able to convene a diverse range of actors across a global landscape, and able to engage actors thoughtfully in dialogue about how to engender equity and diversity of approaches through PE.
- **Outcomes focused** – impartial on methods – able to take an outcomes-oriented approach to public engagement that does not prescribe a ‘gold standard’ or ‘single best model’ for public engagement.

We propose that a consortium of like-minded funders interested in the issue of evidence as it relates to public engagement should consider the resourcing and funding of a Centre for Public Engagement Impact. Such an initiative would be informed by, and develop, evidence, but it would also take a strategic and user-centred approach to ensuring that the evidence informs and influences public engagement innovation and practice, thus having impact.

The initiative we propose would have two important characteristics:

1. It would take as its starting point the need to understand the complex systems within which public engagement operates. The centre would have a dual focus:
  - Understanding the necessary conditions for good public engagement.
  - Understanding what is required in the underlying systems (policy, research and democratic cultures) to enable more effective public engagement.

Sections 8.1 and 8.2 describe how taking such a ‘systems approach’ would allow the centre to understand the challenges and opportunities for good public engagement within the wider systems and contexts in which public engagement inevitably operates.

2. Evidence will play an important role in helping systems and actors within the system themselves to learn, and the new centre would advocate an approach to learning that is internalised and embedded. It will draw evidence from practice and the collective knowledge of the emerging field of public engagement, in turn helping to catalyse field building, network building and contributing towards a more systematic approach to evidence about public engagement.

Section 8.3 outlines the proposed approach.

## 6.1 A SYSTEMS THINKING APPROACH

Can evidence about public engagement give us a better understanding of how PE is shaped by – and in turn shapes – complex systems such as the policy and research environments that affect science or health policy? We can understand these systems as ‘interconnected webs of activity that link many organisations, technologies and people’ (Mulgan, 2021). Taking the systems lens allows us to understand the challenges and opportunities for good public engagement within the wider systems and contexts in which public engagement inevitably operates – for instance, research and policy cultures. We take the need for an understanding of the complex systems within which public engagement operates as the starting point for what a global initiative about PE evidence would need to consider in order to be valuable and impactful for a range of stakeholders.

Systems (and particularly complex systems) have the intrinsic feature of emergence – they have the potential to be able to surprise and resist prediction or modelling, particularly in the long term. This is only possible because the elements of a system can often interact over a period of time to produce surprising or otherwise unlikely effects – take, for instance, the long-term patterns and trends that led to the 2008 financial crisis and shocks across the financial system, which defied prediction and modelling.

Emergence gives rise to what Donella Meadows describes as leverage points – places in a system where ‘a small shift in one thing can produce big changes in everything’ (Meadows, 1999). The proposed centre would focus on identifying such leverage points within public engagement, where evidence could trigger wider systemic change.

Leverage points are places, moments and contexts in which a finely tuned, strategic intervention is capable of creating lasting change. Usually, this requires coordinated identification of the leverage point, the action required and the resources of more than one or two actors in isolation, through convening, mobilisation, field building and capacity building. Key actors seeking to do this are often described as ‘field catalysts’ – unseen actors that seek to subtly influence other actors to effect systems change (Hussein, Plummer and Breen, 2018).

Evidence about public engagement could be generated with the intent of understanding what precisely the ‘leverage points’ are with respect to engagement that will enable a fundamental shift towards more sustainable, legitimate and durable research, and evidence-led and democratic systems. A new Centre for Public Engagement Impact could see its own role as a catalyst in working with a range of organisations and actors to spark that systems innovation and change, focusing on evidence for impact. Evidence will play an important role in helping systems and actors within the system themselves to learn, and the new centre would advocate an approach to learning that is internalised and embedded, as Mulgan suggests:

‘Learning can be externalised – treated as a role for central commands, external inspection and evaluation. Or it can be internalised and embedded. As a general rule, the more that learning can be embedded the more likely it is that systems will adjust intelligently.’ (Mulgan, 2021)

In this regard it is worth noting that in setting up the What Works Centres the UK government also worked to ensure changes in institutional culture within government departments regarding what is evidence and how it is used. The effectiveness of a new Centre for Public Engagement Impact will hinge on ensuring that evidence and learning is embedded and internalised within the systems it seeks to influence and change – systems that may include both government departments and scientific research communities.

## 6.2 EVIDENCE BUILDING AS A CATALYST FOR SYSTEMS INNOVATION

*System innovation*, a term used by the Rockwool Foundation, takes place when there is a requirement for fundamental structural change (Frantzeskaki and de Haan, 2009) and we observe ‘a transition from one socio-technical system to another’ (Geels, 2004). A new Centre for Public Engagement Impact is most likely to ensure that evidence building will engender ‘system innovation’ when it is clear that the present system is no longer adequate.

We propose a model that draws evidence from practice and the collective knowledge of the emerging field of public engagement, in turn helping to catalyse field building, network building and contributing towards a more systematic approach to evidence about public engagement. It is for this reason that we do not think that it would be effective to ‘carve off’ evidence from practice, innovation or convening. The model we propose broadly follows that an ‘action learning cycle’, which recognises that practice of, and innovation in, public engagement is itself a useful contributor towards evidence.

Building out from the systems change lens, a Centre for Public Engagement Impact is likely to have a dual focus.

- **Understanding the necessary conditions for good public engagement:** it will seek to understand what is required for a range of public engagement approaches to increase their impact and effectiveness. This will not, however, be adequate to enable a public engagement process to have impact, since such initiatives operate in complex systems.
- **Understanding what is required in the underlying systems, policy, research (including science and health research) and democratic cultures to enable more effective public engagement:** as a consequence,

a centre will also need to develop an understanding as to what is necessary in the wider ecosystem to enable public engagement to have and to realise the impact it needs to have.

Such an initiative will therefore need to be able to understand or articulate the *different ways* in which public engagement has impacts, adapting in particular to the range of objectives actors have for public engagement (these can vary significantly, as Arnstein set out in her seminal [1969] paper). It will need to be able to take account of the varying factors that impinge upon the ability of public engagement to achieve its intended outcomes (taking a contextual, qualitative and grassroots approach, in addition to the ‘bird’s eye’ view that evaluations tend to adopt).

To be able to undertake this task particularly well, the initiative cannot adopt a ‘centre-’ based or ‘ivory tower’ approach to the generation of evidence: it must be distributed and agile, not constrained and aloof. The new normal ways of remote and distributed working thus offer possibilities for a distributive approach to collaboration. Such a model is also more likely to bring together actors across a range of disciplines, regional and global contexts, and sectors in order to share learning, challenges and opportunities. It is also much more likely to play a role in mobilising actors if the initiative is to be successful in its ambitions to address leverage points that influence systems change. It will be necessary to develop among these diverse actors a shared set of goals or missions, something that all collectively believe is important to address.

### 6.3 DEVELOPING THE EVIDENCE BASE THROUGH ACTION LEARNING

It is difficult to establish boundaries around what counts as evidence about public engagement by attempting to define narrowly what public engagement comprises. Any effort to do so risks stifling innovation or the recognition that practice can and will adapt and evolve to take account of emerging changes in the landscape. It is for that reason that Wellcome understands evidence about public engagement as being about what engenders improved and more effective *outcomes*, as set out earlier in this report. An impact- and outcomes-oriented approach thus enables space for innovation and learning, and a dynamic relationship between both.

As already mentioned, the model we propose recognises that practice of, and innovation in, public engagement is itself a useful contributor towards evidence – when accompanied by reflection and iteration. One example of such an approach is the Evaluation Exchange, which was established as part of the Harvard Family Research Project on the basis of the belief that policies and programmes must be grounded in continuous action learning (Harvard Family Research Project, 2016).

**Developing the evidence base on public engagement impact through action learning:** central to the activity of such an initiative will be the generation, synthesis and analysis of evidence – stakeholder workshops and interviews confirmed that the evidence base around public engagement is at present relatively limited. It will also take account of the importance of taking a strategic approach to communicating that evidence. This dual approach will help inform the centre’s ability to describe ‘what works’ and articulate *success* – with the pragmatic intention of informing more effective public engagement interventions. Where the initiative focuses on *what has not worked so well*, it will be in a constructive manner – with a view to developing an analysis of the system dynamics that undermined the effectiveness of a public engagement intervention; or with a view to learning directly from efforts to innovate, prototype or test a new (and therefore risky) approach to public engagement.

Such an independent approach, informed by innovative public engagement practice and convening, as much as by research, will serve to help inform a rigorous and practically valuable evidence base that will help shape practice going forward. It will also aim to support policymakers and researchers in their work to ensure that public engagement is embedded appropriately across research and policy institutions and endeavours (particularly where culture change is identified as required) – as well as to help articulate a clearer understanding about the boundaries to public engagement (i.e. an understanding of what public engagement *can’t do* as well as what it can do).

It will enable the appropriate identification of areas where there are gaps in good public engagement practice, or opportunities for new public engagement innovations – the centre would be able to provide both in-kind, financial and evaluative support to help incubate, sandbox and learn from new approaches to public engagement (as indicated in a recent review of the UKRI-funded public engagement programme Sciencewise by Risk and Policy Analysts [2015], there is a considerable paucity of innovative public engagement practice, and a need for the right conditions in which innovation can be enabled to thrive).

These activities can help the initiative and actors contributing to the initiative develop a deeper, systems-wide understanding of what works, in turn helping to shape the richer, more realist and broader type of ‘evidence’ required to enable public engagement to have impact.

We set out below the range of activities that form part of the ‘action-learning wheel’ for the new Centre for Public Engagement impact – all of the activities will seek (indirectly or directly) to develop evidence about the impact of public engagement, and also aid in the strategic communication of that evidence, so as to ensure that the work of the centre effects system change. These approaches map onto three types of social change

interventions or ‘leverage points’ as described in a recent set of studies by Stachowiak, Gienapp and Karia (2020a, b, c):

- i. **Field-building**, understood as the development of ‘a community of organizations and individuals working together to solve a common set of problems, develop a common body of theory and knowledge, or advance and apply common practices’.
- ii. **Network-building**, understood as ‘a group of individuals or organizations connected through meaningful relationships, that have space for self organization and that leverage new technologies for visualization, connection, and collective action. In the social change space, networks “provide the mechanism for like-minded groups and individuals to work together across a particular issue or constituency’.
- iii. **Promoting the uptake of practices**, understood as developing a set of processes by which an idea or practice is ‘spread to and sustained in a larger context with renewable revenue sources over time’.

The action-learning evidence wheel, depicted in Figure 1 (Kolb, 1984; Kolb and Fry, 1975; Kolb et al., 1984) seeks to reflect the range of activities that strike the balance between building the evidence base and knowledge about the field of public engagement; convening actors who are knowledgeable about public engagement to share their knowledge and work together; and taking a strategic approach to influencing research and policy to adopt public engagement in a more informed fashion – thus more sustainably and with greater potential for impact. In informing this model, we have drawn substantially from the example of the Alliance for Health Policy and Systems Research, hosted and managed by the World Health Organization. The initiative has similarly thought about evidence and research, with a focus on practice-based approaches (more information about this initiative can be found in the Annex).

## 6.4 POSSIBLE STRUCTURES FOR A CENTRE

Sections 8.1, 8.2 and 8.3 describe the distinctive approach the new centre will take to building (and using) an evidence base for public engagement. This section outlines three structures we have identified that would allow the development of such a centre, and which all feature feasibility and financial viability worthy of a more detailed investigation.

The Annex presents case studies of three major field building initiatives: The Alliance for Health Policy and Systems Research (AHPSR), initiated by the World Health Organization; THIS, initiated by The Health Foundation; and RAPID, a programme hosted by the Overseas Development Institute, but involving a network of partner institutions in the Global South. We draw on the THIS and AHPSR experiences to formulate our first option, which involves ‘commissioning out’ a new centre. We draw on

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the RAPID experience to inform our third option, which involves establishing a looser global consortium of institutions working on evidence for public engagement. The Annex also presents case studies of two initiatives, Understanding Patient Data, hosted by the Wellcome Trust; and the Ada Lovelace Institute, hosted by the Nuffield Foundation. These case studies have informed our second option, involving incubation within an existing funding body.

The first option we set out is for a funder or network of funders to begin a competitive dialogue process, seeking to allocate funding for a long-term field building initiative, and to ‘commission out’ this work to existing actors in the field. This was an approach taken by the Health Foundation in their approach to establishing the Health Improvement Science Institute, described in more detail in the Annex. This enabled the Health Foundation to establish a very ambitious and large-scale initiative at arm’s length, taking a gradual and progressive approach towards doing so and building relationships with existing actors in the landscape; but it also took almost six years to achieve. Such an approach is therefore likely to be highly resource intensive, but also appropriate should a network of funders choose to allocate a substantial amount of funding towards an initiative, in a context with a range of existing actors who are knowledgeable about the landscape. In this particular case study, the Health Foundation allocated £40 million over a period of ten years.

A second option is for a funder or network of funders to begin a lighter-touch approach to incubating an initiative in-house with a relatively small secretariat, with a view to expanding the team over some years. This is an approach taken by the Wellcome Trust in establishing the independent research initiative Understanding Patient Data, and by the Nuffield Foundation in establishing the Ada Lovelace Institute and the National Council on Bioethics, both described in the Annex.

The potential advantages of this approach are that it enables rapid development (particularly at an early stage) at a relatively low cost (back office costs are substantially reduced), and it enables the initiative to be positioned to effectively influence research and practice by virtue of its location within the funder. Understanding Patient Data, for example, plays a central role in advising and supporting other Wellcome teams on approaches to data governance. There are also disadvantages: such initiatives can struggle to be perceived as independent of their hosts, and can struggle to take a geographically distributed approach to their work, perceived as being ‘based in a single location’. This, however, may be less relevant in the era of remote working.

The third option that we have identified as showing promise is for a funder or network of funders to begin with a lighter-touch approach towards developing seed-funded partnerships with a range of research or policy partners across a range of regions. The objective would be to identify like-minded partners to help inform and shape the

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establishment of what Simon Maxwell (Maxwell, 2011) has termed an ‘airline alliance’: a group of connected centres of evidence and expertise, shaped and informed by context and knowledge of local issues but each financially independent of each other, and ultimately envisaged to be independent and sustainable on their own footing. In conceiving of the evidence initiative in this way, it would be able to benefit from the range of insights across such regions, while strengthening its global brand and presence. We draw from the example of RAPID to help inform this approach – an example that has helped build a field of study in how researchers engage with policymakers. Many of the insights from this process can be readily applied to ensuring that engagement practitioners engage with policymakers as well. Table 4 in the Annex describes how RAPID, a sixteen-year initiative supported by the Overseas Development Institute (ODI) succeeded in doing so. Its key endeavour to build the field was identifying partner organisations (mainly think tanks) in different regions in the Global South (tapping into the networks that ODI already had through its other programmes) to first replicate and then adapt to their context ODI’s work on linking research and policy; adopt and adapt many of RAPID’s original ideas and take them forward; and translate ODI’s tools and ideas to share more broadly in their region. RAPID provided these partners with seed funding to develop this work: generating evidence, organising events to foster more debate and outreach. While this initiative is more likely to succeed in efforts to be global, it is also more likely to create an unequal relationship between the funder and the funded organisations, and to be at considerable risk of fragmentation.

A comparative analysis sets out the respective strengths of these different models in the table below:

**Table 1. Three different models**

<i>Model</i>	<i>Commissioning out</i>	<i>Funder incubation</i>	<i>Consortium of international partners</i>
Relevant case study	The Health Improvement Studies Institute	Understanding Patient Data  The Ada Lovelace Institute	Research and Policy in Development (RAPID)
Model	Centralised, based at Cambridge University	Centralised, based at host funders	Distributed

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Time to establish	Approximately 6 years+	Approximately 1.5 years	Never fully established as the initiative was cut short
Allocated funding for establishment and operating costs	£40 million	£5 million over 5 years for the Ada Lovelace Institute	Funding for RAPID Programme was £7M from 2003–2009 from DFID, via a programme partnership arrangement. Before 2003 and after 2009 there was project-based funding.

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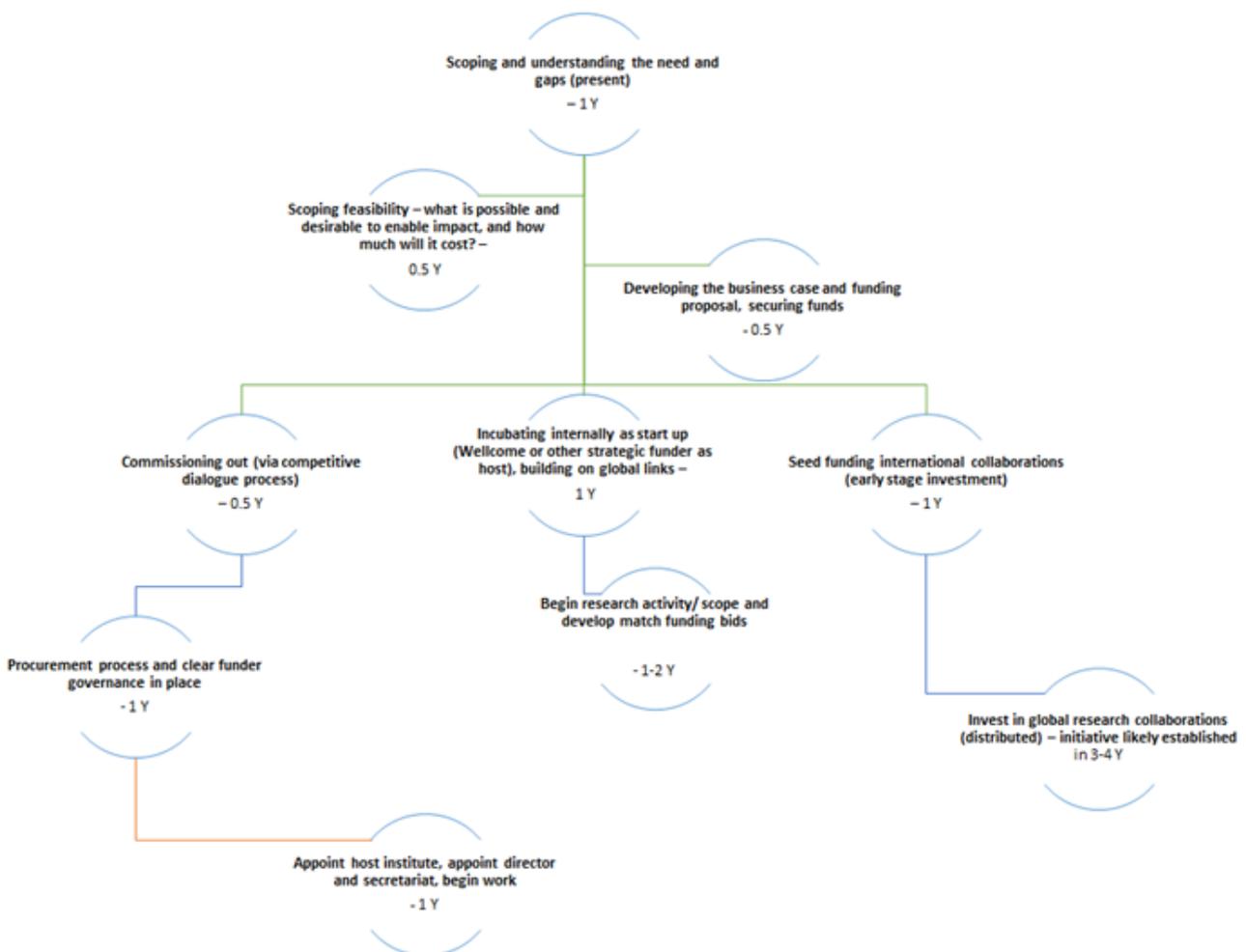
The discussion above sets out these three structures as alternatives, from which one structure is to be chosen. It may be more helpful, however, to view the initiative as moving from one structure to another as it evolves and grows. A small secretariat housed within an existing funding body could, for example, move towards a ‘centre’ model or towards an international alliance, depending on how the focus of its activities evolves.

## 7. NEXT STEPS

While this report has established the nature and extent of the user need for such an initiative, further investigation is needed to pin down the institutional and financial details of the operating models we suggest. The further development of such an initiative will require some financial contribution, the sign-off of a business case and the grant of initial core funding or allocation of staff time towards development.

Figure 4 sets out the decision tree for implementing each of these options as an immediate next step.

**Figure 4: Decision tree for next steps**



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Upon reviewing the evidence, we recommend that a consortium of core funders, including but not limited to Wellcome, take steps to scope all three of the above options, balancing feasibility and the availability of financial and human resources, with the intended uniqueness and impact.

For instance, while the second model (incubation) might be the easiest to realise within a shorter time frame and with limited resources, it is the least distributed and most centralised of the models. It might, however, have the potential to effect and realise shorter term, more rapid impact, than more long-term initiatives such as THIS. The other practical constraint is the level and availability of funding towards such an initiative. It may, for instance, be the case that a more centralised body will be easier to establish and will form a stable base from which there is potential to test and learn from the model, with a view to achieving over the longer term a model in which power and agency is more evenly distributed (Ashunka, 2021).

These scoping activities should take place prior to selecting an option out of the three and before beginning the process of building a business case and securing funding for the new Centre for Public Engagement Impact.

## ANNEX: CASE STUDIES

The study of the evidence landscape for PE revealed that an evidence base does not yet exist for the public engagement field, in the sense of a cohesive body of evidence from a wide range of PE activities that a new initiative could communicate to practitioners. If the evidence to be gathered, analysed, synthesised and translated does not yet exist, then one of the challenges for any new initiative may be to find ways of generating it.

This is why this initiative could be viewed as ‘building a field’. The steps involved in field building are well summarised in O’Neil (2015); and Stachowiak, Gienapp and Karia (2020a).<sup>13</sup> O’Neil defines a field as ‘a community of organizations and individuals working together to solve a common set of problems, develop a common body of theory and knowledge, or advance and apply common practices.’ In their report on field building the Bridgespan Group (2009, pp.4–5) identified five elements of a robust field: a shared identity anchored on the field; standards of codified practices; a knowledge base built on credible research; leadership and grassroots support that advances the field; and sufficient funding and supportive policies.

These kinds of activities featured in different ways in the efforts of the three initiatives we selected as case studies: the Alliance for Health Policy and Systems Research (AHPSR) initiated by the World Health Organization (WHO) (Box 1); the Healthcare Improvement Studies Institute, initiated by the Health Foundation (Table 3); and the RAPID programme at the Overseas Development Institute (Table 4).

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<sup>13</sup> A growing body of literature on ‘field building’ has emerged in the past twenty years. Stachowiak, Gienapp and Karia (2020a) offer a useful and up to date summary.

***Box 1: The Alliance for Health Policy and Systems Research and the WHO***

The experience of AHPSR, created in 1999, and hosted and managed by WHO, is an example of field building in the health sector. But its strategies and activities, and the design as a network of organisations suggests a more comprehensive approach to a field building effort rather than only evidence generation. AHSPR not only stimulates the generation of knowledge and innovations to nurture learning and resilience in health systems, but also provides a forum for the health policy and systems research community, supports institutional capacity for the conduct and uptake of health policy and systems research; and increases the demand for and use of knowledge for strengthening health systems. Moreover, AHSPR not only supports academic research, but also what it terms 'implementation research', that is, studies that draw on what is happening in 'real-world settings'. Thus, AHSPR not only funds pure research, but a variety of health policy and research systems projects, programmes and initiatives.

These experiences demonstrate how actions can be designed to start creating a body of evidence in a new field, either from the theory and from the practice, raising awareness of the importance of studying and understanding what happens in these fields, and building a community of stakeholders interested in them. While the vehicles to achieve their goals have been different in each case, they both involved a series of actions that required collaboration with a wide range of stakeholders over a lengthy period of time.

***Box 2: THIS and the Health Foundation***

In 2009, the Health Foundation, which had been an important stakeholder in the field of health, took ‘the strategic decision of supporting the development of a field of study aimed at uncovering how sustainable improvements can be made to patient care’. One of its first actions was to convene ‘scholars from a diverse range of clinical and academic disciplines to initiate a explore leading ideas and knowledge of healthcare improvement’. The establishment of a thematic Working Group followed, with experts from around the world, whose goal was to ‘share their knowledge and develop underpinning theories and methods for this new field’. This was followed by an investment to strengthen the research and evidence base in this emerging field by awarding fellowships at PhD, postdoctoral and senior levels. Six years after the first meeting with experts in related fields, an improvement research institute was created in 2015 to expand the fellowships and networks internationally. This was subsequently hosted by the University of Cambridge, and finally became the THIS Institute, whose mission is: ‘To improve the health of those in low- and middle-income countries by supporting the generation and use of evidence that strengthens health systems’. While the Health Foundation still funds the THIS Institute, we can ask whether the THIS Institute would have been created without this sustained support.

The experience of the Health Foundation is interesting to contrast with the idea of setting up a What Works Centre, because it shows the many steps and actions that can be explored before creating a new structure aimed at building evidence in a field. Six years passed from the first meeting with experts in other related fields to the creation of a new institute. Six years in which efforts were made to generate evidence and a community of experts through other strategies, mainly the funding of individual academic research. This is an important consideration from a funding perspective as well. Bazalgette (2020, p.15) highlights the advice given to funders supporting the initial development of new evidence centres by Jen Gold (head of the What Works Team in the Cabinet Office): ‘it is important to be realistic and to recognise that they may need to be in this for the medium- to long-term [...] Evidence centres tend to need core funding to get going and realistically, many won’t be financially independent after a one- to three-year incubation period.’

The example of RAPID is also of relevance. While the idea of using evidence to improve decision making was starting to gain traction in the UK (see the discussion of What Works Centres above), evidence on what works in the field of research–policy linkages did not exist as a corpus of studies. While the context looked favourable, it was still necessary to build the evidence base in order to understand how to create effective linkages between research and policy. The concept of evidence-informed policy making

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is as cross-cutting as the concept of public engagement. There was no well-structured sector, but rather many niches in which to generate evidence on how these research-to-policy linkages are formed, developed and contribute to better decisions.

RAPID had a different starting point from the Health Foundation. It initiated its work by documenting cases of linkages between research and policy.<sup>14</sup> With this evidence, ODI started to organise events to discuss ‘why evidence matters’ with a range of stakeholders in the development sector, and built frameworks to collect tools and document new experiences. A key step in building the field was identifying partner organisations (mainly think tanks) in different regions (tapping into the networks that ODI already had through its other programmes). These partners adapted ODI’s work analysing the linkages between research and policy to their own context, adapting and developing many of RAPID’s original ideas, and translating and sharing more broadly the tools and ideas created by ODI. RAPID provided them with seed funding to develop this work: generate evidence, organise events to foster more debate, and outreach. Moreover, an important element of RAPID’s success in terms of building an emerging field was its ability to incorporate ideas and tools from other fields to generate its own narrative about evidence-informed policy making. These fields included government and public administration, political science, network theory and strategic communications.

In its almost sixteen years of existence,<sup>15</sup> RAPID was able to generate evidence on what works in the field, generate theory, build capacity at both the civil society (think tanks, academia) and government level to use evidence to make decisions, and expanded its work to other areas as well.<sup>16</sup>

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<sup>14</sup> Fifty summary case studies on research and policy links were collected and analysed in 2003. Cases come from seven different regions around the world, and from a range of sectors: ‘from macroeconomic issues to small enterprise development, livestock services, environmental management, governance issues and public administration reform’ (Court and Young, 2003, p.6).

<sup>15</sup> In 2019 the programme changed its focus and became the Digital Societies programme.

<sup>16</sup> Policy entrepreneurship; research communications; networks development and facilitation; monitoring, evaluation and learning; knowledge management; organisational and project management; among others.

***Box 3: Research and Policy in Development at ODI***

RAPID was created in 2002 within the Overseas Development Institute (ODI) to improve the use of research and evidence in development policy and practice, through research, advice and debate and by applying a transdisciplinary approach. In creating RAPID, ODI benefited from programmatic funding from DFID, which allowed ODI, an organisation already linked to the practice of evidence-informed policy making, to reflect on and conduct meta analysis of its own practice, thus providing ODI with an evidence base to better communicate its work and influence policy decisions. RAPID was a programme at ODI with its own director and staff (like other programmes within ODI) and worked collaboratively with programmatic areas within ODI.

RAPID's field building strategies included:

- Creating a small programme within ODI to reflect on and conduct meta analysis on the practice of linking evidence to policy making.
- Requesting that other ODI programmes ask their partners to reflect on their practice, by organising national events about the theme.
- Designing a light framework to help collect more cases of research–policy linkages (The RAPID Context, Evidence, Links Framework).
- Undertaking research on the linkages between evidence and policy, and related topics (policy entrepreneurship; research communications; networks development and facilitation; monitoring, evaluation and learning; knowledge management; organisational and project management).
- Developing practical tools, handbooks and toolkits to study and foster research–policy linkages, for example the RAPID Outcome Mapping Approach, an approach to improving policy engagement processes to influence change.

In terms of its international networking, RAPID:

- Began by identifying organisations in other regions that wanted to reflect on the practice too, to help build the field.
- Created and managed the Evidence Based Policy in Development Network, a network with regional chapters focused on learning about the practice of linking evidence with policy.
- Provided partners with seed funding to build evidence on linkages from their regions and with advice and mentoring on using evidence more effectively to inform policy.

Over time added 'associates' to its team based in Malawi, Peru, Vietnam, the Philippines, Nepal and Sierra Leone. This more 'decentralised' structure enabled team members to develop a better understanding of context, tap into local funding opportunities and provide more direct and tailored support.

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Another important lesson from RAPID's experience relevant to the creation of a new centre is that by funding a programme within ODI through a long-term but declining commitment, DFID transferred the incentives to raise funds to the organisation. The original DFID funding provided much of the space and time necessary to undertake innovative research and to test new ideas without having to depend on clients being interested in them, but in the long term RAPID had to develop new funds through grants and other consultancy work, which ultimately contributed to its sustainability.

The experience of the Health Foundation (which helped create the THIS Institute) and of RAPID in ODI are interesting in the sense that both provide alternative pathways to build a field, both of them successful in terms of contribution to the consolidation of those fields and in terms of sustainability.

It is important to note that while field building in public engagement may be necessary, it would not be without its own challenges. As O'Neil emphasises in his account of field building in public health:

‘Identity is critical to unifying a field. A vibrant field must embrace diversity, but it also must engender commitment and community based on a common identity.’ O'Neil (2015)

Establishing such a common identity is likely to be an important challenge for a PE evidence initiative because of the diversity of activities and the number of relatively isolated domains within PE. The proposed centre's emphasis on a systems approach and on active learning may provide a starting point for a shared identity.

The Ada Lovelace Institute (Ada) is an example of an initiative hosted and incubated within a funding organisation, in this case the Nuffield Foundation, which established it in 2018.

***Box 4: The Ada Lovelace Institute***

The Ada Lovelace Institute (Ada) is an independent research institute with a mission to make data and AI work for people and society. Ada was established in 2018 by the Nuffield Foundation, an independent charitable trust with a mission to advance social wellbeing, with core funding of £5M over four years. Ada also receives funding from partners who support the organisation's independence from government, academic institutions and the private sector – in 2020 Ada received additional funding from the Arts and Humanities Research Council, Luminare and the Health Foundation. Ada, alongside the Nuffield Council on Bioethics and the Nuffield Family Justice Observatory, use the Nuffield Foundation's facilities and administrative infrastructure, but operate independently of their funders.

Ada is overseen by an independent board, and is not required to produce an annual report for the Charities' Commission - the Nuffield Foundation does issue an annual report that includes Ada's activities. As of December 2021, Ada has a staff of 20, led by a Director.

Understanding Patient Data (UPD) is another, more recent, example of an initiative incubated within a funder (Wellcome), but operating independently of the funder with its own governance arrangements. UPD has been successful in attracting additional core funding and scaling out.

***Box 5: Understanding Patient Data***

Understanding Patient Data (UPD) is an independent initiative established in 2017 and led by a small core team based at Wellcome. It focuses on the data collected as part of a person's interactions with the health service, which might be used for purposes beyond individual care without explicit consent. This data is highly useful for research and planning purposes, but its use can be controversial. UPD aims to ensure such data is being managed and used in ways that are worthy of public trust, by providing objective information about how patient data is used. UPD sits within a broad landscape of different sectors and organisations all actively working on issues surrounding patient data.

UPD is funded by Wellcome, the Medical Research Council and the National Institute for Health Research. It was originally established to run for two years but this has been extended.

The team based at Wellcome has a 'lead' and six other staff. UPD also has a steering committee that provides 'strategic direction and oversight' of the initiative. UPD issues an annual report, and this report includes a breakdown of income and expenditure (£391K and £308K respectively in 2019/20).

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