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Citizens' juries in Burnley, UK: from deliberation to intervention

THEME SECTION 1

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Introduction

This article describes the experience of two innovative community-based citizens' juries that took place in Burnley, Lancashire, in northern England. Jury One was the first citizens' jury to be commissioned and part-funded by a community organisation for the benefit of the local community.¹ Local residents chose the topic of most concern, chaired the process and had input into process development. Over three months, the jury discussed the problem of drug-related burglaries in their neighbourhoods. They made over 80 recommendations on a broad range of topics such as housing, community safety, prevention, transport, parenting, service provision and support options for users. Although the process had great value for the community and professionals who participated, the jury's report led to no tangible outcomes in terms of changes in policy or practice. Despite prior agreement from key agencies, the agencies took no action because they did not have to – from the outset the process had been set up by us as an activist intervention in the exercise of power, but outside of local governance processes.

¹ The majority of the funding for Jury One came from the research project that author Elham Kashefi was working on, which was itself funded by a national sustainable development organisation.

Figure 1: Map of UK showing Burnley



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Two years later, a second citizens' jury was held in the area, this time considering what would improve the health and well-being of people living in the area.² Local activists working through a multi-agency steering group initiated this jury. They brought together professionals working in key agencies with local residents and grassroots community workers to develop and steer the process. Jurors met over one week and made more than 100 recommendations on a diverse range of topics relating to health and well-being. Contrary to experience with Jury One, many of their recommendations were acted upon. In particular, an innovative healthcare centre was opened in the area, with outreach and community work as its core values. The success of this jury rested on many factors, but most importantly, it may have been because there was a match between the issue of importance to local people and government targets for a reduction in health inequalities. As an insider project, this jury was networked into local governance processes.

About Burnley

Burnley is an industrial town situated in a valley in the north of England, which is populated by 88,000 people. Within the six square miles that form the urban part of Burnley are some of the most deprived neighbourhoods in the country. About a quarter of the population and households in Burnley live in areas classified in the top 10% most deprived neighbourhoods in England. South West Burnley (SWB) itself covers a small part of inner Burnley, and is a mixture of social housing, private rented terraced houses and owner-occupier accommodation a few miles from the town centre. About half of residents in the area live below the poverty line and a quarter are said to have long-term limiting illness. Until recently, much of the housing stock was considered unfit for habitation.

² Jury Two was commissioned by a state-funded health agency working at the local level.

Context for our work

The context within which we developed these juries needs a little explanation. When New Labour was elected in 1997, public agencies began to be mandated to involve the public in service planning and provision. Professionals had previously been trained to use their expertise to make decisions. They were now being asked to consult the public. They had to change their way of working from being insular and inward looking to being open, transparent and accountable. Not only was the public to be consulted on service planning but they were also to be asked to judge the performance of these agencies. This was a huge culture shift which, ten years on, is still far from complete. Nevertheless, social inclusion and public consultation became essential requirements for agency action. The demand for consultation work was responded to by the creation of what we can only describe as a consultation industry. A plethora of consultation methods, standardised toolkits and do-it-yourself manuals started to appear to deliver 'the' public view at a competitive price. The problem with these processes was that they delivered the public view in a sanitised and unproblematic package that could be used by service managers and policy makers as part of a tick-box process without regard to quality, effect or content.

During this period, the London-based think-tank, the Institute for Public Policy Research (IPPR), was developing citizens' juries as a way of reinvigorating democratic participation. In the mid-90s IPPR imported a version of citizens' juries from the Jefferson Centre in Minneapolis in the US. It promoted them as processes by which the public view could be obtained in an objective and scientific way. These juries were piloted in the UK by IPPR, the Kings Fund Policy Institute and the Local Government Management Board. They decided to pilot these juries in the UK and their process involved randomly recruiting 12-16 people to meet for 3-5 days to discuss a specific issue of concern to the jury commissioners (such as health agencies and local authorities). In these juries, expert witnesses are invited to make presentations and answer questions. At the end, jurors vote on the question and are given time to present their recommendations to the commissioners.

The IPPR model was a research tool, used to find out what people thought about an issue of relevance to the commissioners. Expert testimony was central to these processes. The construction of citizens here was very much as uninformed lay people who needed to be presented with information from experts in order to make rational and informed decisions. Also, in pursuance of 'objective'

Table 1: Contrasts in underlying assumptions of different models of citizens' juries

Underlying assumptions of IPPR juries	Underlying assumptions of SWB juries
To increase legitimacy of liberal democratic decision-making processes	To establish legitimacy of, and increase trust in, local/community-based decision-making
To increase trust in local and national government	
Recruitment aims to be broadly representative of community	Recruitment to expressly include participation by marginalised members of community
To deliberate on questions of relevance to authority/commissioners	To deliberate on questions of relevance to community
To promote dialogue about pre-defined options	To question underlying assumptions behind pre-defined options
Discussions must focus on a specific question set by commissioners/steering group	Deliberations to be guided by participants problematising their own situation
Facilitators' role is to remain neutral and objective	Facilitators state their position of alignment with jurors
Jurors need expert witnesses to inform them	Jurors seen as having expertise based on their life experience
Experts invited to impart knowledge	Experts invited as co-enquirers and informants
Citizens' juries can act as a platform for decision makers to communicate their way of working and hence increase public understanding	Citizens' juries can act as a platform for decision makers to be held directly accountable and be challenged to reconsider oppressive ways of working
Process aimed at producing a report for consideration by policy committees	Process aimed at bringing about locally-defined action
Process seen as one-off piece of consultation to complement professional decision-making	Process seen as means of engaging with local people as part of ongoing community action
Deliberation involves being serious, rational, logical and un-emotive	Deliberation involves being emotional and humorous as well as logical and practical.
Deliberations to be contained and temporally bounded.	Deliberative process to be 'porous' over time i.e. allow outside world to come inside, and inside world to go out.

(Kashefi, 2006)

or 'scientific' claims by the Jefferson Centre and IPPR, facilitators were briefed to remain neutral and merely chair the debates. We, as facilitators, were fuelled by anger at the injustices we saw and felt passionate about doing something to intervene. We made no pretensions to be neutral or objective. We wanted the jury to be an activist tool that could lead to change at the local level, to open up possibilities for professionals to come face-to-face with people experiencing the effects of their policies, and to humanise 'policy' and its implications. We wanted the experts to be held accountable to the community. In short, we wanted to create a totally different space to the juries we had read about. We took the IPPR model and adapted it for our own purpose.

Jury One: community responses to drug-related crime

This jury was commissioned by a local community organisa-

tion working on sustainable development issues within the neighbourhood.³ When we began developing the first jury, we had no pre-determined ideas about the topic for the jury, the recruitment process or how the jury itself would work. All we knew was that we wanted to find a way for local people to be involved in decisions that affected them. As far as we could see, millions of pounds of public money was being spent 'regenerating' the area but this did not seem to be improving the lives of anyone living there.

We were keen to involve agencies with responsibility for the area from the outset. Over the next 12 months we held meetings with key agencies, councillors, and local authority officers. We explained why we were interested in the jury process and what we planned to do. It was important to have these agencies' support. Each agreed to respond to the jury's

³ Elham Kashefi was the researcher evaluating this project; Chris Keene was the chair of the organisation.

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report within three months of receiving it.

In September 1998, 10 local people met for the first time, as a citizens' jury.⁴ We met one night a week in a local pub, the atmosphere was that of an informal community project. Six expert witnesses were invited to make presentations to the jury.⁵ For the rest of the time, jurors discussed the issue of drug-related crime amongst themselves, to develop their own recommendations. After 11 sessions over 3 months, the jury made more than 80 recommendations on topics such as housing, community safety, prevention, youth work, transport and support for parents. For example, jurors recommended that the Health Authority should fund a drugs-testing facility in the neighbourhood to prevent fatalities from impure drugs and that the Health Authority should draw on the expertise of local people in creating drugs prevention strategies.

Many of Jury One's recommendations were about increasing democratic control and accountability of public services, in particular the police. So, for example, the jury recommended that agencies involved in administering parenting and curfew orders should meet with community groups and local residents to plan how the orders are used, or that the rules of entrapment of drug dealers should be published and openly discussed with residents of South West Burnley. There were also many recommendations about how public money should be spent – that is, that juries could be used as vehicles for priority setting priorities for public expenditure.

Even though we had done a lot of development work with agencies beforehand, we received a negative response from most statutory sector agencies. The Drugs Service was angry at many jury recommendations (for example, legalising cannabis to break the link with harder drugs and community drugs testing facilities). The police ignored the report, although the chair of the Police Authority wrote a letter in support. The Borough Council wrote a full response

⁴ The steering group drew up a recruitment profile for the jury based on local census data and local knowledge. This profile was then used by a market research professional who talked with residents in the streets and in their homes until she was able to recruit enough people to satisfy the profile.

⁵ These were senior workers from health promotion, probation, the police, youth justice, youth work and the local council.

to the jury's recommendations but nothing ever came out of its response. A local NGO also wrote a response but again, we did not hear of anything changing as a result. No one else responded. All the work that had gone into building up community-based responses to drug-related crime fell on deaf ears.

Although at the time this felt like a lack of success, later analysis of the transcripts and follow-up with some of the people involved has shown that the process in itself was successful in other ways. First and foremost, it allowed for the organic unfolding of knowledge, in all its messiness and with all its contradictions and complexities. Secondly, the process enabled stories to be told and heard, and this act of storytelling and listening was key to the development of the recommendations and how the experts who were there were opened to new ways of looking at their work. For example, at the final feedback meeting with local agencies and community representatives where the jury's recommendations were being presented, one senior officer remained silent throughout the discussions and when asked why he had not contributed to the discussion, he became tearful and said, 'I wish some one had told me all this years ago. I've been doing the wrong thing for 20 years.' Many other professionals had similar experiences. Thirdly, Jury One was a situated process that intervened in the exercise of power in that time, in that place, with those people. In many small yet significant ways, we made interventions in the exercise of power, especially in subverting the dominant paradigm of professionals as experts and sole holders of expertise.

Jury Two: what would improve the health and well-being of local people?

One of the reasons for the lack of action from agencies in Jury One was that we did not have funding for a dedicated worker who could follow up the report and campaign on behalf of the jury. Another reason was that we had set up the process as an outsider project in oppositional mode, and this positioning left few, if any, direct avenues into 'official' spaces we sought to affect. We were aware of these shortcomings and these reflections informed our action on the second jury that was held in the area.

Jury Two was initiated by a multi-agency working group (the Health and Social Group) in SWB that was brought together by a local community development organisation to improve the health of people living in SWB. In 1999, discussions in the group turned to exploring possibilities for setting up a Healthy Living Centre as a way of addressing residents' needs, but the funding bid required evidence of community

involvement in the development of the bid. So the Burnley Primary Care Group, acting on behalf of the group, commissioned a citizens' jury on what would improve the health and well-being of people living in SWB.⁶ The membership of this group would eventually prove to be a key factor in the success of the jury because it had senior representation from key public sector agencies and local NGOs, i.e. the people who would be able to act on the jury's recommendations.

Twelve local people were recruited to the jury and met over one week in 2000. Each was paid for their participation and for child- or elder-care. Throughout the week the jury heard from 21 witnesses ranging from doctors, social workers, health visitors, community development workers and senior policy makers to mental health service users and residents. One key aspect of this jury was the reconstruction of expertise. Here it was the residents who were seen as the experts on their own lives, who were holding the professionals to account, and who were doing the problematising.

Jury Two made many recommendations about schemes which could rebuild the fabric of the communities in South West Burnley, such as a community transport scheme, community arts festivals, inter-generational social/activity groups, equipment share schemes, a community garden scheme and a community care co-operative. Some of these projects were already developing with volunteers, but they needed financial backing. In all, the jurors made more than 100 recommendations, which the jurors presented to the commissioners on the last day.

All jurors were invited to participate in the follow-up process and many joined the Health and Social Group for some time as a result. After a prolonged period of consideration and many funding applications, the group developed an innovative health centre, which brought together many of the jury's recommendations. A community development worker rather than a medical professional now heads the health centre, which has a steering group made up of local residents and other professionals to direct its work plan. Two jurors sit on the steering group and one has become an integral actor within the centre. Rather than waiting for people to visit them with health problems, much of the work is done on an outreach basis in women's refuges, factories, pubs, workplaces, schools and any other place where people congregate. The centre houses anti-bullying workers, anger management workers, counsellors, health visitors, dentists and nurse practitioners. Health workers also provide activi-

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ties for local children during school holidays in recognition of the fact that without adult supervision, children's health may suffer.

The success of Jury Two, in the first instance, rested on having representatives from key agencies in the Health and Social Care Group. Secondly, this group then brought in researchers to develop the jury so that the outcome would be seen as independent from the commissioners.⁷ Thirdly, the jury process enabled jurors to hear from professionals and community activists who were brought in as co-inquirers.

Opening out the process in this way was crucial to the success of the jury process. The jury's recommendations were embedded within the Primary Care Group's programme of work because the issue that was important to local people – improved access to health care – directly matched the Group's target for reducing health inequalities. Furthermore, all H&SC group members could comment on any aspect of the jury process – for example, if they were not happy with the recruitment profile or recruitment process, or if they felt witnesses were not providing a balanced view. In this way, researchers tried to prevent subsequent marginalisation of the jury's recommendations by agencies claiming the process was invalid because of who was recruited, how they were recruited, or who provided evidence. This wider group also acted as a conduit to other agencies (such as the Borough Council or the Health Authority) once the jury report was published, and it was instrumental in the dissemination of the jury's findings.

Conclusion

The Burnley juries were groundbreaking because community groups rather than public sector agencies initiated them **for the benefit of the community** (and not for the benefit of the agencies). They were community interven-

⁶ Primary Care Groups, at the time, were health service commissioners. Based at the local level, they were seen to be effective mechanisms for responding to health needs at the local level.

⁷ Elham Kashfi and Maggie Mort, based at the Institute for Health Research, Lancaster University developed Jury Two with the steering group, facilitated the sessions, compiled the report and participated in the follow-up process.

tions because the force for change came from the direction of residents, local activists, community workers, and jurors themselves. They created a space where the notion of expertise was subverted, where local people were no longer constructed as lay people as empty vessels that needed filling up with information, but instead as experts of their own lives with valuable knowledge and wisdom that could shape policy and practice. They named oppressive practice. They were powerful vehicles where untold stories could be told and heard, and where these stories of pain and social injustice could directly intersect with policy and policy makers.

I think for the professionals that were there [at the jury meetings] it made them look at things differently ... They couldn't run away and hide from it. It was there in their face, there was evidence that these things weren't working. There was no excuses, there was no back door or tell 'em I'll ring them back later. They had to sit there and face it and really think about it. I don't think you can get away from some of those issues and some of those stories that were raised up there. They were really heartbreaking things that had happened. You'd have to be inhuman to not take that on board. (Anonymous community worker and Steering group member, Jury Two).

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NOTES

Elham Kashefi is a researcher based at the Department of Geography, Lancaster University. At the time of the juries, Elham Kashefi was working on a project to evaluate a local sustainable development project that became the commissioners for Jury One. She was the lead researcher and facilitator for both these juries.

Chris Keene is a community development activist, worker and consultant and resident of South West Burnley. He played a lead role in the development of Jury One and was also the Jury chairperson. He was an advisor and expert witness for Jury Two and was involved in the follow up process.