

# The costs of coproduction

Kathryn Oliver  
@oliver\_Kathryn

LONDON  
SCHOOL of  
HYGIENE  
& TROPICAL  
MEDICINE



Research Utilisation Research Unit, St Andrews  
8<sup>th</sup> October 2019

# Major thanks to

Anita Kothari  
Annette Boaz  
Graham Martin  
Paul Cairney  
Rachel Bray  
Bev Gibbs  
Heather Douglas  
Theo Lorenc  
Roman Kislov  
Kat Smith  
Sandy Oliver

Sara Shaw  
Jill Russell  
Warren Pearce  
Emily St Denny  
Vicky Ward  
My family  
& all my previous bosses and  
colleagues

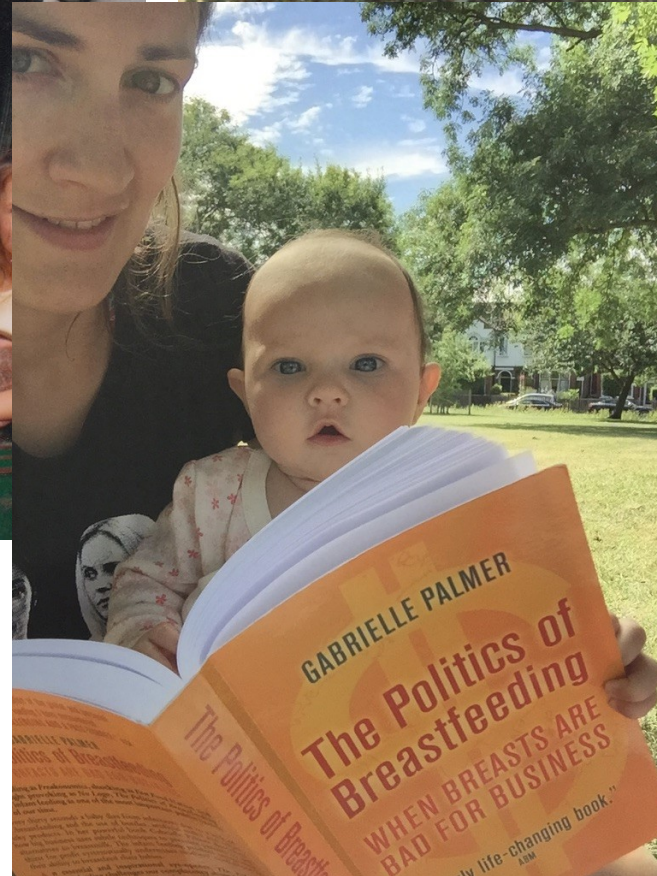
Representing HSR,  
public health, STS,  
political science, public  
policy, engineering,  
research policy, moral  
philosophy....

All mistakes,  
experiences  
and misunderstandings  
mine

# About me



# About me



Health care

Public health

Research and  
Science Policy

Science and  
Technology  
studies

Knowledge  
production

Knowledge  
mobilisation

Research  
uptake

Pract  
and outputs  
of science

Research on  
research

Conservation

History and  
philosophy of  
science

Evidence  
production  
and use

Environment

Knowledge  
economy

Meta-  
science

Psychology and  
neurobiology

Political science

EBP

Science of  
Science

Social policy

LOND  
SCHOOL  
HYGIEN  
& TROPIC  
MEDICIN

Development

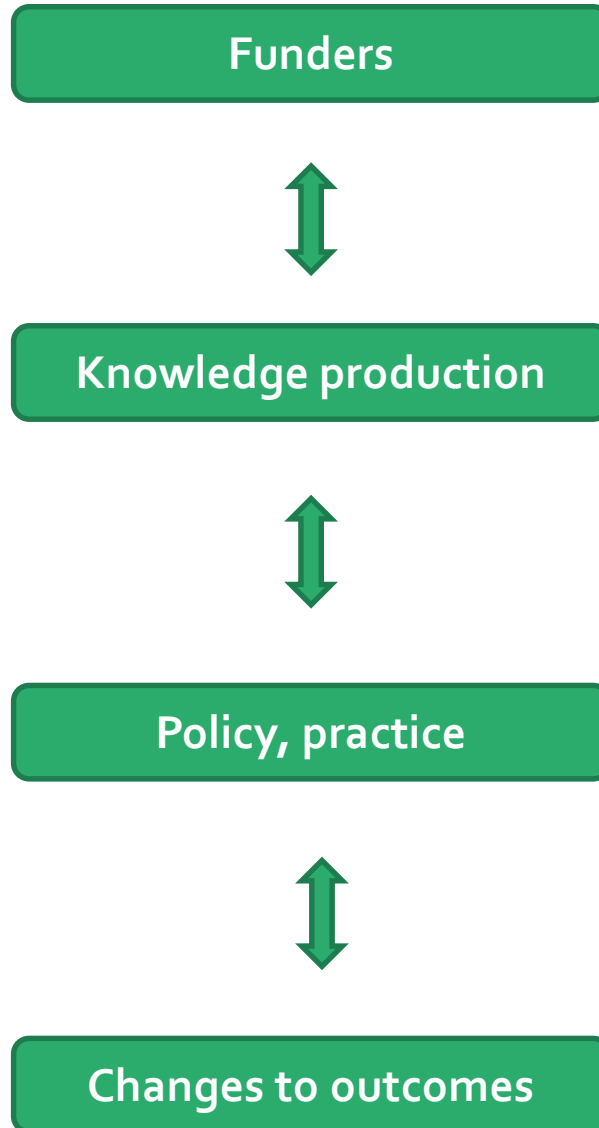
Evidence-  
based  
decision-  
making

Evidence  
use

Public Policy

Humanitarian aid

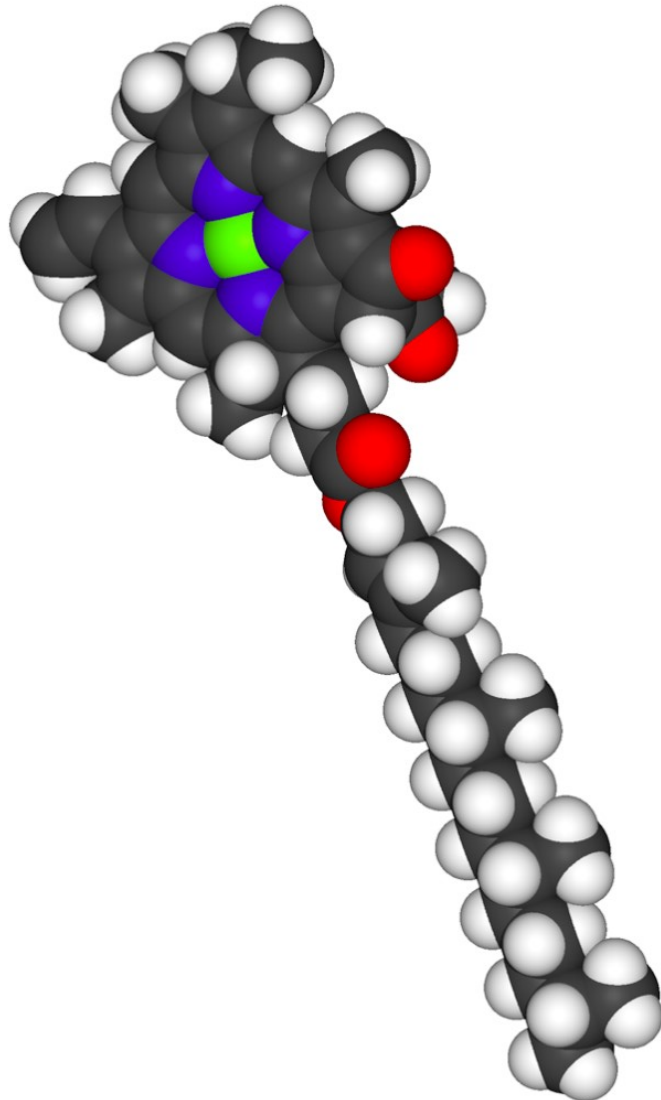
# Everyone loves impact



By:

- Maximising the value of investment
- Ensuring social outcomes are improved
- Move beyond 'telling good stories' about impact
- Bring rigour to the transformation of the production and use of research for society

# And now for something completely different...



## CHLOROPHYLL SYNTHESIS AND PROTOCHLOROPHYLLIDE REDUCTION IN THE BARLEY MUTANT *albina-f*<sup>17</sup>

by

RICHARD P. OLIVER<sup>1,2)</sup> and W. TREVOR GRIFFITHS<sup>1)</sup>

<sup>1)</sup> University of Bristol, Department of Biochemistry, Bristol BS8 1TD

<sup>2)</sup> Department of Physiology, Carlsberg Laboratory,  
Gamle Carlsberg Vej 10, DK-2500 Copenhagen Valby

Present address: School of Biological Sciences,  
University of East Anglia, Norwich NR4 7TJ, England

---

**Keywords:** Etioplast, chlorophyll synthetase, esterification, Shibata shift, chlorophyllide

Plastids isolated from dark-grown leaves of the barley chlorophyll mutant *alb-f*<sup>17</sup> contain only 40% of the protochlorophyllide reductase enzyme present in the wild-type. The low level of enzyme is functionally linked to the similarly low level of protochlorophyllide in whole leaves. The chlorophyllide in illuminated leaves fails to undergo the Shibata shift. However, when dark-grown shoots are fed  $\delta$ -aminolaevulinate, resulting in accumulation of non-photoconvertible protochlorophyllide, the newly-formed chlorophyllide undergoes a Shibata shift (18). The rate of the Shibata shift is proportional to the amount of accumulated non-photoconvertible protochlorophyllide.

It has been suggested that *alb-f*<sup>17</sup> is blocked in the synthesis of esterified protochlorophyll and chlorophyll. It is shown that prolonged incubation of illuminated mutant leaves, whether or not fed with  $\delta$ -aminolaevulinate, results in a significant accumulation of chlorophyll. The data support the view that the primary lesion is in the control of  $\delta$ -aminolaevulinate synthesis.

# For many, this means....coproduction!

- Both political science and public health / HSR research proposes working with stakeholders as the solution to the problem of evidence use
- Collaboration & close relationships SAID TO BE a facilitator of evidence-uptake (Innvaer 2002, Oliver 2014)
- Encompasses co-production, co-design, co-creation, stakeholder and public engagement and participation/involvement....
- In fact, any process of involving non-researchers in (mainly) research





# Reasons to do coproduction

- 1. Substantive:** make research more useful (Barber 2011, 2012, Goodyear-Smith 2016), help researchers and policymakers develop a holistic understanding of a context and an issue (Walter 2003, Oliver 2012)
- 2. Instrumental:** Makes research more likely to be used (Duncan 2017), Play a social function by upskilling and creating capacity amongst non-academics (Iedema 2010, Goodyear 2016)
- 3. Normative:** make users feel more empowered & included (Muir-Gray 2004, Beresford 2005). The 'right' thing to do. Be fairer & more ethical (Doubleday & Wynne 2011, Stewart & Liabo 2012)

# Reasons to do coproduction

1. **Substantive:** make research more useful (Barber 2011, 2012, Goodyear-Smith 2016), help researchers and policymakers develop a holistic understanding of a context and an issue (Walter 2003, Oliver 2012)
2. **Instrumental:** Makes research more likely to be used (Duncan 2017), Play a social function by upskilling and creating capacity amongst non-academics (Iedema 2010, Goodyear 2016)
3. **Normative:** The 'right' thing to do. Be fairer & more ethical (Doubleday & Wynne 2011, Stewart & Liabo 2012)

## Political (expedience):

- Have to do it anyway (required in grant application)
- May make policymakers look more favourably on us and increase chance of future funding
- Improve trust, relevance, legitimacy (Coleman 2001, Albert 2007), increase sense of ownership, so 'they' regard 'our' research as credible (Ghate 2018)
- Make users feel more empowered & included (Muir-Gray 2004, Beresford 2005)
- increase likelihood of evidence sharing (Dobbins 2009, Armstrong 2012),
- reduces negative stereotypes (Oliver 2014),



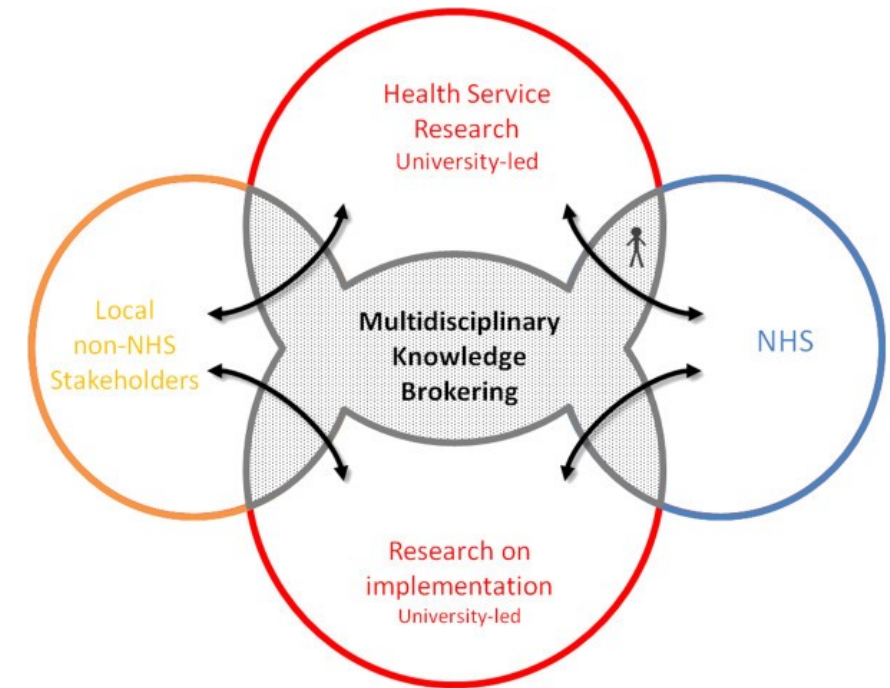
# INVOLVE

- “Co-production” is doing a lot of work (improving quality, ethical practice, logistics and practicality, capacity building, improving scientific literacy of users, making research more relevant and interesting, making research ‘better’)
- What do different forms of collaborative research try and “do”, and how well do they “do” it?
- Is this the ‘answer’ to the ‘problem’ of EBP?



# CLAHRCs, FUSE: health research (2006-2014)

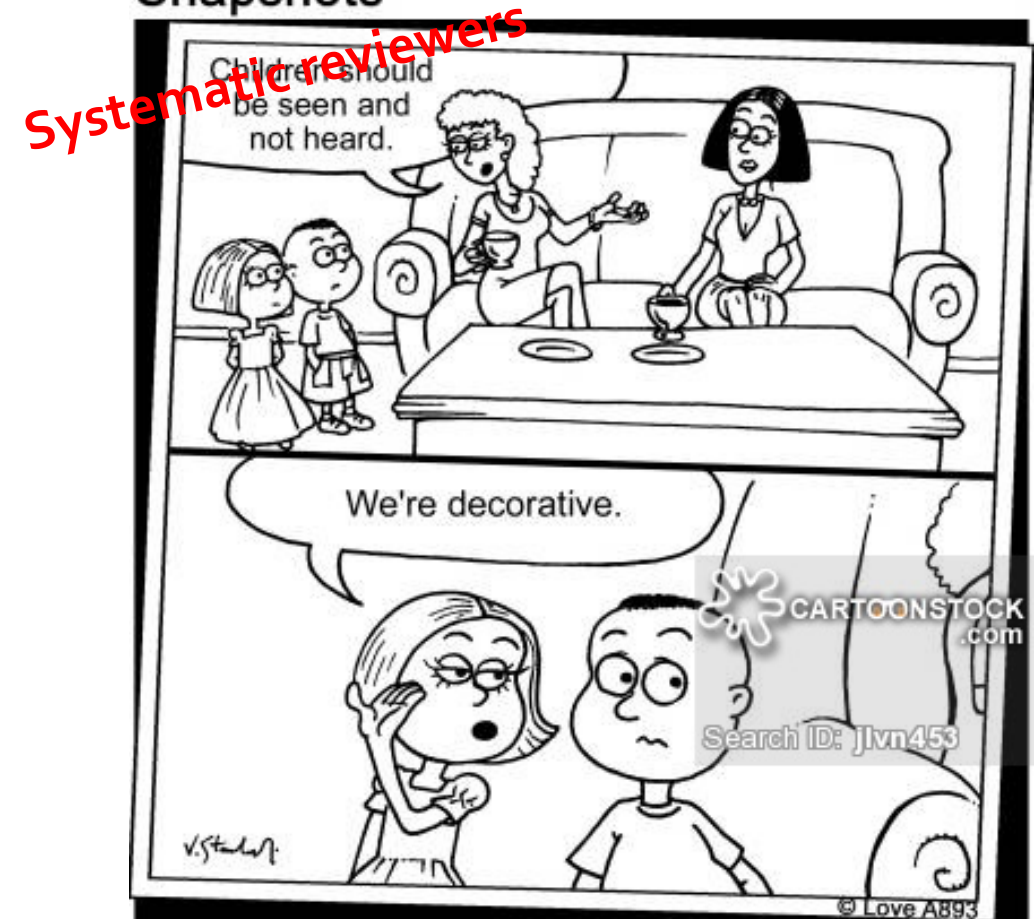
- Clinical and research leads plus quality improvement staff (usually nurses)
- Researchers (provided content and wrote highfalutin papers about process)
- Addressed genuine local need
- Occasionally hard to devise intellectually interesting research studies with novel RQs
- No news on whether improves research or patient outcomes



Oborn 2013

- Clinical chair, other AHPs Lay/patient “representative”, health economist
- My role: Systematic reviewer for clinical guideline group, content provider
- Speak on invitation only
- Systematic review of patient experiences
- Their roles: Experts and decision-makers

## Snapshots



# With a policy partner (2014)

- Commissioned to conduct a survey of knowledge translation practices across WHO
- How is evidence being used by our staff? How can we help?
- Sold as start of a larger project
- Co-designed survey, 4% response rate



# Some helpful suggestions

- Strong (social / financial) pressure on researcher (me) to produce the 'right' conclusions
- Form of research, actually internal management
- Choice: retain relationship or point out the lack of evidence for their conclusions
- Am I a hired writer?

# Interdisciplinary and local gov (2015-6)

Designers working with local government to improve services

- Iterative, client-led,
- Sprints and reflections
  
- My role, officially: Evaluation of the collaborative process
  
- In practice: Teaching colleagues about social science (ethics, data, research processes)
  
- Feeding information (data) back to participants/team censored by PI, so no damage to partner relationship with local gov



**public  
collaboration  
lab**



# NGO and activists (2017)

- Research planned to explore social contexts and experiences of poverty
- NGO worked with small number of families to transform lives
- Research seen as 'extractive' and 'exploitative' so resisted discourse of sampling, representativeness, generalisability
- My role officially: produce grant proposal
- In practice: to learn





*Everything I think and everything I do is wrong.*

# Points of tension around the research process



### Practical costs

- Large administrative burden arranging meetings, rooms, travel
- Expensive in terms of researcher time and resources

### Personal costs to researchers

- Increased interpersonal conflict
- Burnout and stress

### Professional costs to researchers

- Independence and credibility questioned
- Reputational damage

### Costs to research

- Managing relationships takes time, effort
- Investing in relationships with no guarantee of outcome

### Costs to stakeholders

- Sacrificing time from day job (if not officially sanctioned)
- Career costs

### Costs to the research profession

- Reduced motivation for stakeholder to engage or use research
- Credibility and utility of evidence questioned
- Research evidence become just another voice



## 1. Create and maintain good relationships

- Which takes time, effort, biting tongue, doing favours, possibly no benefit a lot of the time

## 2. Managing engagement process

- resolving conflict (untrained), managing group dynamics, not letting loudest shout, balancing different voices (experiential vs expert), making the most of everyone's resources

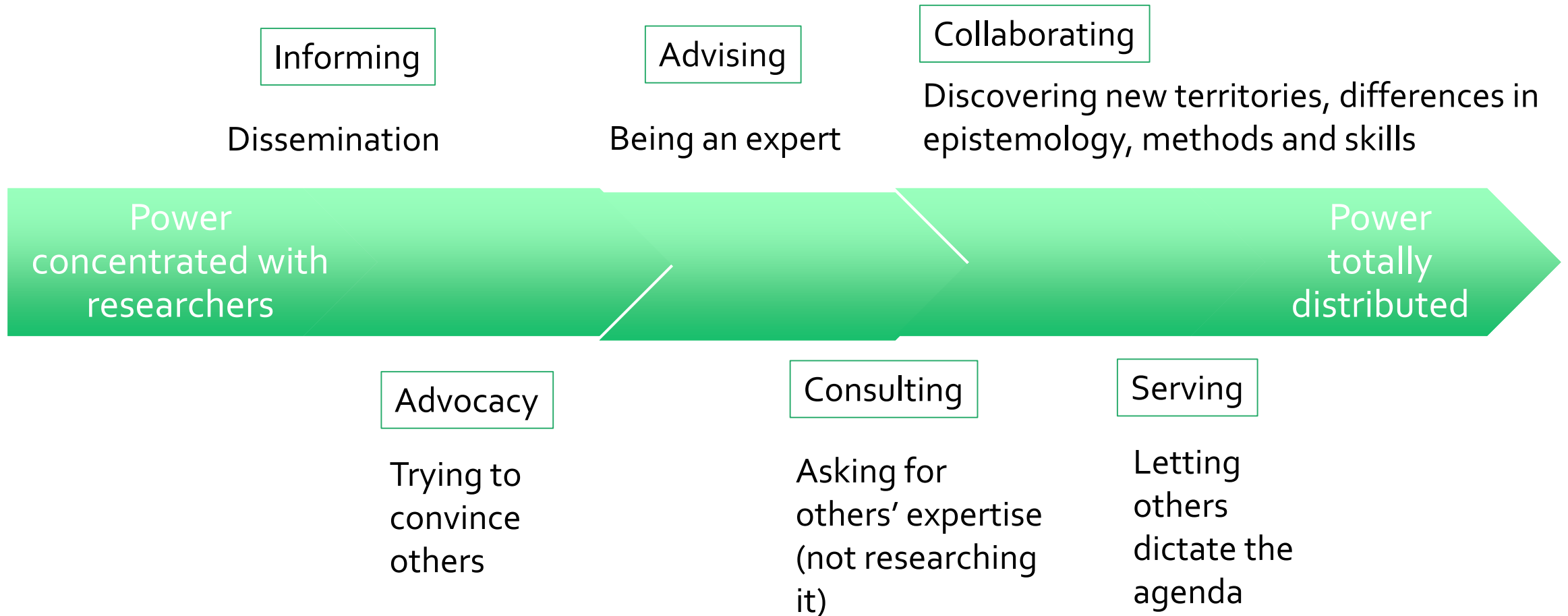
## 3. Investing long-term

- Sacrificing research and teaching time, not expecting guaranteed success, being able to take the hit, having resources to be around on the off-chance

## 4. Being good at it

- Wanting to do all this, having the personal and professional skills to do it well

# Interactions between researchers and others



# Sharing power, accountability and responsibility

“Science is a practice saturated with moral responsibility... and we have as individuals to shoulder the responsibility to the practice of science, to the scientific community and to the broader society.  
“(Douglas 2012)

## General responsibilities:

- Be decent, don't do harm
- Role responsibilities: Don't falsify data, apply for ethics
- Make choices consciously

At each of moment, what is my responsibility?

To

- Myself
- PI
- Funder
- Participants
- Colleagues
- Wider public
- Etc....?

# What is my role?

- Representative (of my peer group / profession)
- Bringing of **some** expertise (on the assumption that some is better than none)?
- To teach others (and learn from others) about research methods
- As researchers, to manage the dynamics and agendas of the above?
- To try and produce the “best” possible knowledge?

The end point of collaborative / coproductive research is deliberation

Can this solve these significant challenges?



# Why collaborate, when and how?

## 1. What is everyone bringing to the table?

- Policymakers/funders: Money, problem, knowledge of political context, pressure for answers...
- Researchers: expertise in topic, and in “doing” research (of different kinds)
- Public/patients: Lived experiences, practical experiential expertise

## 2. Under which circumstances are these needed?

- E.g. when is it better to have patient representative, and not a systematic review of patient experiences?

## 3. What are the costs?

- Time, administrative, cultural, professional

## 4. How are decisions taken, responsibility and accountability shared?

- Group dynamics? Market forces? Authority?

# What should researchers and universities think about?

- How to create (co-create) and support the infrastructure for coproduction, especially thinking about how to make opportunities, risks and rewards more equitable
- Training in coproduction helping researchers and funders take this seriously as a skill set
- What this does to the practice of research. What's the motivation for doing it (sincere, instrumental), especially since we don't know whether...
- Does it actually change policy and practice?



The emotive language and poorly supported argument are disturbing, including warnings of 'Damage to interpersonal or organisational relationships, research careers and research independence and credibility'.

Practi...

Professional costs to

Costs to res

**Len Demetriou** @LenDemetriou · 4h  
I don't think a paper has got me spitting this much tea in a long time. #madtwitter what are your thoughts on this #coproduction paper? I'd love to hear cos part of me is doing the self deprecating 'don't be so sensitive!'

**Health Research Policy and Systems**  
The dark side of coproduction: do the costs outwei...  
Coproduction, a collaborative model of research that includes stakeholders in the research process, has ...  
health-policy-systems.biomedcentral.com

7 2 3

**Oli Williams** @OliWilliamsPhD  
Replying to @LenDemetriou  
Definitely not just you. A bunch of us wrote a response to the original paper. It's currently under review with the journal - obviously not sure how long that process will take. In the meantime, some of that writing team presented on this @BSAMedsoc:

**Lost in the shadows: sociological reflections on recent critiq...**  
ESA, Manchester, August 2019  
prezi.com

**Pink Sky Thinking** @PinkSkyThinking · Oct 2  
Looking forward to #MadStudies Birmingham tomorrow! on down or Zoom in to join the debate on 'The Dark Side of Coproduction' by authors @oliver\_kathryn @anitarena & Nicholas May which was heavily criticised within the Survival movement.

**WELCOME TO THE DARK SIDE**

Mad Studies Group Birmingham October Meeting  
Monthly Mad Studies Group with a Lived Experience Pract...  
pinkskythinking.com



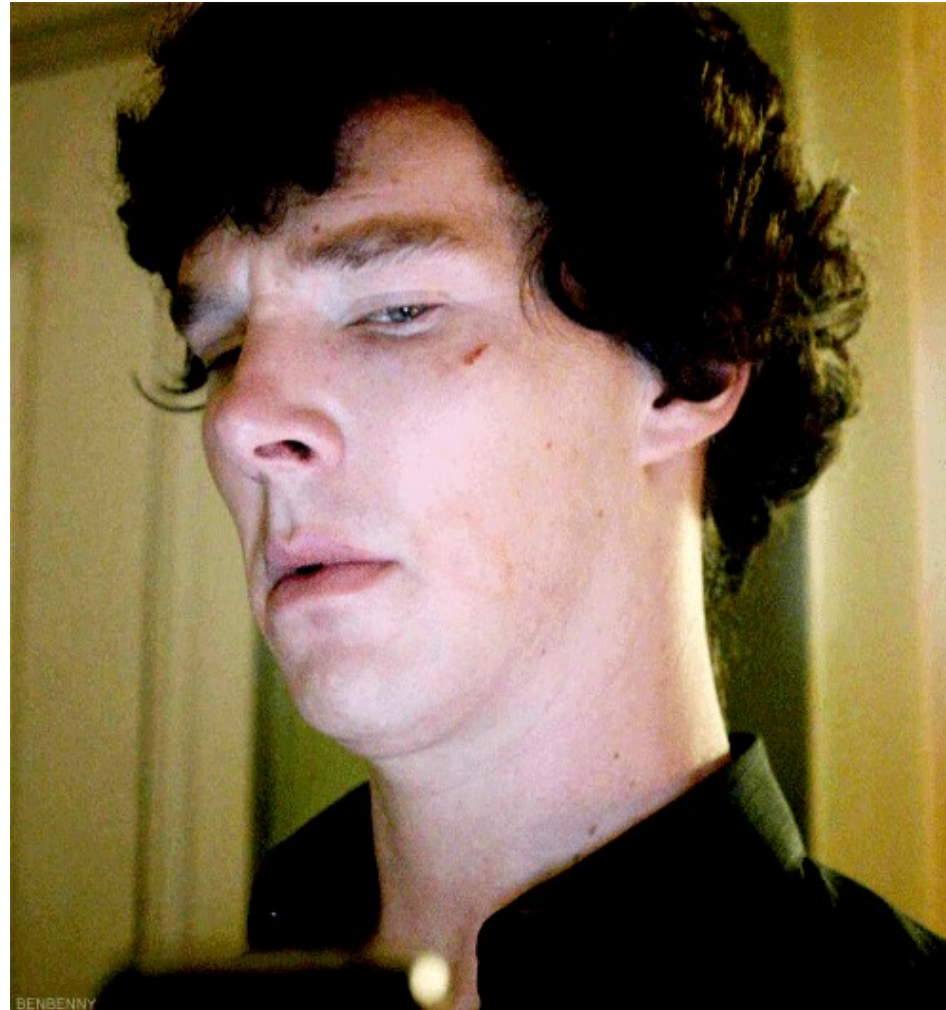
**RoseAnnieFlo** @RoseAnnieFlo · Jun 21  
Gloriously dreadful little paper on 'The Dark Side of Coproduction'

Read it (it's brief and open access) and weep for the poor entitled little twits fretting over the burden and career damage caused by coproduced research. Bless them.  
via @RTimoclea

ne from day job (if not officially sanctioned)

ivation for stakeholder to engage or use research  
d utility of evidence questioned  
ence become just another voice

Hmm



Health care

Public health

Research and  
Science Policy

Science and  
Technology  
studies

Knowledge  
production

Knowledge  
mobilisation

Research  
uptake

Pract  
and outputs  
of science

Research on  
research

Conservation

History and  
philosophy of  
science

Evidence  
production  
and use

Environment

Knowledge  
economy

Meta-  
science

Psychology and  
neurobiology

Political science

EBP

Science of  
Science

Social policy

LOND  
SCHOOL  
HYGIEN  
& TROPIC  
MEDICIN

Development

Evidence-  
based  
decision-  
making

Evidence  
use

Public Policy

Humanitarian aid

University systems - Civil society - Public engagement , Policy, practice and media - Funding streams

**Funders**

Capacity and skills



Leadership and collaboration

Training

**Knowledge production**

Research assessment - evaluation - quality



Boundary spanners  
Brokers - Networks

Strategies and interventions  
Communication - metrics

**Policy, practice**

Impact assessment  
systems implementation  
Engagement



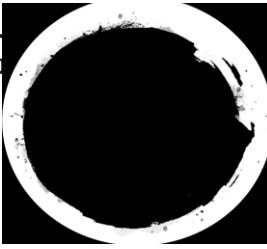
Professional  
Theory of change  
Altmetrics

**Changes to outcomes**

Impact assessment – inclusion and participation

# TRANSFORMING EVIDENCE

FOR POLICY AND PRACTICE



## Critical perspectives:

- Gender
- Race
- Power and politics
- Ethics and values
- Democratic processes



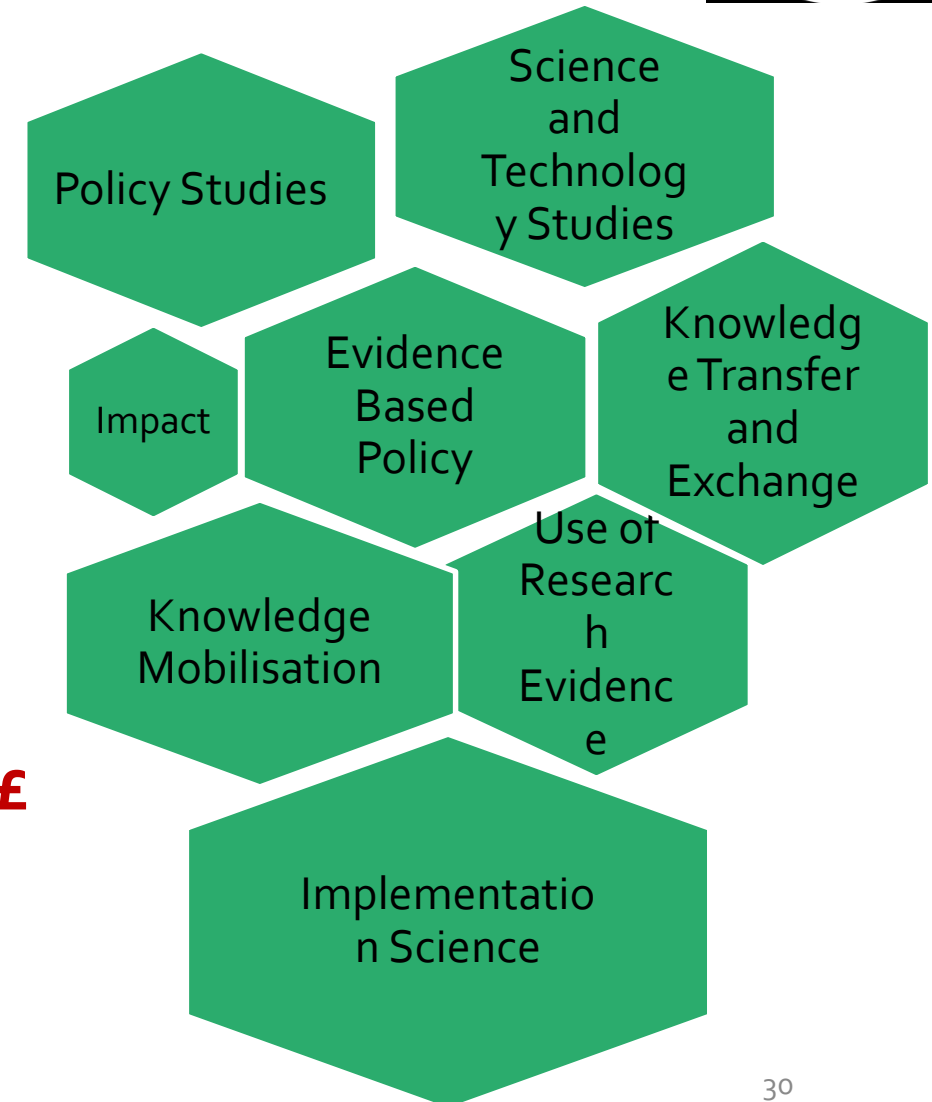
# What do we need to know?

## TRANSFORMING EVIDENCE

FOR POLICY AND PRACTICE



1. Understand evidence production
  - Creating and curating useful evidence base **\$**
  - Skills and workforce, diversity and inclusivity
  - Documenting funding flows **£**
2. Understand evidence use
  - Describing and documenting what 'use' we want to see
  - Describing what researchers do and why **\$**
  - Understanding what users do, how and why **\$**
  - Documenting impact **£**
3. Improve evidence use
  - What have we tried? Interventions, strategies, structures, data **£**
  - Develop methods to empirically investigate these
  - Bring critical perspectives to bear on these studies
  - Evaluate changes to social outcomes



- Interactions involve sharing power, accountability and responsibility in more and less explicit ways for different aims
- Unclear which approaches are best suited to which aims (advisory group vs co-design for)
- Clear that coproduction and participation may have a profound impact on practice of research and the process of decision-making,
- Unclear whether it actually ethically, practically, politically, or intellectually improves research
- Tensions and challenges, costs and opportunities are unequally experienced and borne
- Mindful engagement is essential for ethical practice of research