Five areas should be prioritized to increase public participation and influence in local decision-making


What is the context of this review?

- More than ever, people want to have a greater say in shaping policies that affect their lives.
- Governments, communities, and other partners are experimenting with approaches to support public participation in health and local decision-making.
- Little is known about how these different approaches work, and how financial crises and the COVID-19 pandemic create more challenges in implementing these approaches.
- There is a growing body of evidence that a lack of control over decisions that affect our lives leads to poor health outcomes. Therefore, creating conditions for people to have an influence on their lives is very important to improving health and addressing health inequity.

What questions are being addressed?

- How effective are public participation approaches to influence local decisions that can affect health?
- What are the results of different approaches (their influence on long-term health outcomes and health inequities)?
- How resource constraints affect all the above?

How was the review done?

- A comprehensive search of electronic databases found a total of 11,218 documents, 42 of which were deemed relevant for the review after assessing their eligibility.
- This review was funded by the National Institute for Health Research (NIHR) School for Public Health Research (Grant Reference Number PD-SPH-2015).

Box 1: Coverage of OHT building blocks

This review addresses OHT building block #3:
1) defined patient population
2) in-scope services
3) patient partnership and community engagement (domain 9 – proactive patient and public engagement)
4) patient care and experience
5) digital health
6) leadership, accountability and governance
7) funding and incentive structure
8) performance measurement, quality improvement, and continuous learning
How up to date is this review?

• The authors of this review searched for documents published from 2008 to 2019.

What are the main results of the review?

• Lack of transparency in decision-making processes makes it often difficult to tell whether or how public participation and influence has shaped final decisions.
• Exclusion of marginalised groups may potentially reinforce inequalities and a lack of representation in decision-making processes.
• Resource constraints directly impact local governments’ public participation activities in decision-making, such as low investment in creating social spaces or community hubs that could foster greater public participation and empowerment.
• Increasing public participation and influence in local decision-making requires considerable political work. Evidence suggests five specific areas that local government should prioritize:
  o participation should be viewed as a long-term process rather than a one-off activity;
  o developing community capabilities is essential for participation and influence;
  o developing relationships between organizations and communities is key to share knowledge and other resources;
  o there is a need to create spaces for safer and more equitable forms of participation, both between community members as well as between community members and “professionals”; and
  o there is a need to change the culture and associated practices (for example, within local governments) to promote participation and influence (which may require training to enable people to work in new ways).

How confident are we in the results?

• This is a recent and moderate-quality systematic review with an AMSTAR score of 7/9.
• The authors identified a series of limitations to the current body of evidence:
  o Public participation is a complex and (often) poorly defined concept in the included studies.
  o It was sometimes difficult for the authors to discern the difference in some articles between the intention to involve, or actual public participation.
  o Despite it being a key focus of the review, there was limited data on public participation in decision-making during times of resource constraints.