

Stakeholder engagement in radiation protection – what can we learn from practice?

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Stakeholder engagement in practice - ENGAGE

ENGAGE: ENhancing stAkeholder participation in the governance of radiological risks for improved radiation protection and informed decision making

- How are Radiation Protection communities responding to Stakeholder Engagement mandates, demands, or expectations ?
- Which forms of participation can be observed in RP practice?



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INDOOR RADON

Source images: ENGAGE, www.engage-concert.eu

ENGAGE first step: analysis of existing experiences



**RADIOACTIVE
WASTE
GOVERNANCE**



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**INDOOR
RADON**



**INFORMED
CONSENT**

Sources: image RWG: BFS, www.bfs.de; images EP&R, Radon: ENGAGE

Lessons learned from radioactive waste governance

- **Early experiences:**
a first of a kind wide public involvement process in the governance of radiological risks
- **Rationales for stakeholder engagement:**
 - Primarily: **social justice towards citizens**
 - Secondary: **better knowledge generation**
 - Typical for RWG: **essential part of the stakeholders is missing** (the future generations) → **ethical questions related to accountability**



**RADIOACTIVE
WASTE
GOVERNANCE**

Source image RWG: BFS, www.bfs.de

These are a few examples, for further information please see other presentations and sessions at RICOMET 2018

Challenges for stakeholder engagement in radioactive waste governance

- Robustness and sustainability of the participatory process
 - danger of 'stakeholder fatigue',
 - danger of **loss of political support**,
 - danger of **loss of records, knowledge and memory** across generations
- Representativity: is a tool such as a partnership a good democratic representation?
- Social recognition and reward



RADIOACTIVE WASTE GOVERNANCE

Source image RWG: BFS, www.bfs.de

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PREPARE: Stakeholder participation process - challenges

- **Identify, attract, engage, keep active and coordinate all these stakeholders**
- Stakeholders **lack previous experience and radiation protection background**
- **Different approaches** are required **at each phase** after a radiological event
- All stakeholders have **different roles and responsibilities** but they are **not familiar with others'** roles and responsibilities.



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PREPARE: added value of stakeholders participation

- Opportunity for stakeholders to gain **new knowledge and insights**
- Increased **networking** opportunities
- Building **trust** and **understanding** between actors



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Lessons learned: view of a Civil Society Organisation

- Need for detailed **Civil Society Organisation (CSO) evaluation** of EP&R provisions in each country
- Need for **CSO and public engagement in planning and management** at local, national and trans-boundary levels - need for a legal framework
- Need for **quality control procedures** including **feed-back** of new events, exercises & drills (learning process)



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Lessons learned from Radon

- The result of non-stakeholder engagement:
 - information with **short term effect**
 - **low** radon risk awareness
 - protective actions have **not been taken**
- Effect of participatory practice: success in implementing radon action plans
 - Hungary: all detectors placed in peoples homes have been returned for analysis
 - Ireland: public awareness on radon risks has significantly increased
 - Sweden: radon subsidy budget taken up by homeowners to greater level.



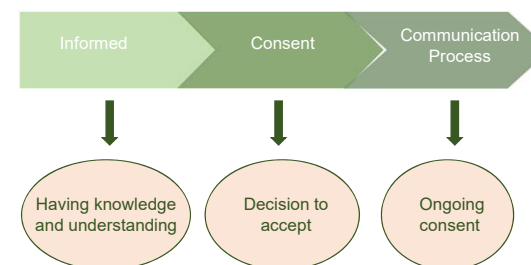
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Medical exposure: Informed consent



- Healthcare practitioners:
 - clinical responsibility to communicate about the risks of radiation-induced effects of diagnostic and therapeutic procedures
 - obtain consent for exposing them to radiation



Medical exposure: Informed consent

Problems identified

- The **uncertainty/lack of professional guidance** to consent for diagnostic and therapeutical procedures using radiation.
- Difficulties **describing radiation risk** to patients; Not taking into consideration the education and needs of patients
- The **mechanism** for provision of **risk information** to patients.
- The **timing** for provision of **risk information** to patients; The type of consent to be sought to ensure its validity.
- Appropriate **documentation** of consent.
- **Responsibility** for the consent process

Solutions?

- Association of stakeholders?
- Standardized **templates**: verbal and written communication; Individualizing the information to encounter the needs of patients
- Dissemination of information
- 2 Stages for consent process: (i) the patients receive information and (ii) confirmation the consent prior the procedure
- Consent **forms**
- Legislation, litigation; robust local policy

References:

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3. Zener et al., Canadian Association of radiologists Journal 69 (2018) 30-37
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Expectations: Dilemmas of stakeholder engagement

- **Aims:**
Interest management, Knowledge management/sharing, Listening, learning about concerns, Active participation, Managing reputation
- **Motives**
Risk aversion, personal interest, (lack of) trust, perceived injustice...
- **Approaches:**
rational, emotional scientific, political

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Results SE in practice: general

- Low level of knowledge of **guiding principles** for Stakeholder engagement
- Stakeholder engagement is always matter of **power** distribution and **knowledge** allocation
- Also internal stakeholders matter!
- Evaluation of Stakeholder engagement:
 - Depending on originator / evaluator
 - Depending on expectations

Interim-Recommendations

- Build a strategy for Stakeholder engagement - define success
- Combine procedure and methods with aims of SE:
 - Different engagement techniques at different levels / aims of engagement
 - Democratic dialogue mechanisms to empower a broad range of stakeholders to contribute effectively
- Build criteria for identifying and grouping stakeholders (internal-external; power, legitimacy, urgency; proximity)
- Evaluate from a holistic point of view and theory based

ENGAGE next step: Case studies Preliminary guiding questions

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- Levels of **awareness** about stakeholder engagement in RP?
- How do researchers and practitioners **understand and practice** stakeholder engagement (at individual and institutional level)?
- What were the **rationales** for stakeholder engagement, the **final objectives**? Has there been a **critical evaluation**? Have there been any **guided improvement** activities?
- What forms of **acceptance, resistance, denial, or alteration** of engagement?
- What are RP actors and communities doing that may *de facto* count as stakeholder engagement?
- Are there any alignments/misalignments between practice and external prescriptions?
- Which **challenges** and **opportunities** for stakeholder engagement?
- Looking at: Researchers / practitioners; individual / institutional; formal / informal

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Thank you very much for
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