

MAPPING DIVERSITY,
NEGOTIATING
DIFFERENCES.

Constitutional Discussions on a Shared Island

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The research began in 2019, when Dr. Joanne McEvoy and Professor Jennifer Todd discussed the need to map the diversity of voices on constitutional issues in Northern Ireland and the Republic. Joanne applied for DFAT Reconciliation Funding for the Northern Ireland research with Jennifer as partner, and the following year Jennifer applied for DFAT reconciliation Funding for the Republic of Ireland research with Joanne and Dawn Walsh (UCD SPIRe and IBIS/CPPC) as partners. As the research proceeded, Jennifer applied for and gained ARINS/University of Notre Dame funding.

As the research was ending in 2020, Jennifer and Joanne decided to apply for IRC New Foundations funding, to explore how far the 'Shared Island' agenda led into critical constitutional discussion. This 'Negotiating difference' project was undertaken in 2022/23. As part of this project, a two-day conference and policy workshop was held in RIA in June 2023, coordinated by Joanne, Jennifer, Dr. Dawn Walsh and Dr. Shelley Deane and funded by DFAT/IRC/ARINS/UND/UCDCOSSL/UCDIBIS/ U Aberdeen.

We wish to thank all who participated in the research.

Research Team and Community Partners

The primary researchers were Joanne McEvoy (U Aberdeen) and Jennifer Todd (UCD). Dawn Walsh (UCD) joined the team for the second phase of 'Diversity of Voices'; she conducted interviews and focus groups with Joanne and Jennifer in the Republic of Ireland, and co-authored the first publication, then had to cut back her involvement because of other commitments. Shelley Deane was an informed commentator and advisor.

Professor Yvonne Galligan (TUD), Professor Gladys Ganiel (QUB) and Dr. Jonathan Evershed (then UCD) participated in early discussions of 'Negotiating Differences' and in some of the deliberative cafés. Brian O'Neill designed the posters for the youth café. Dr. Ann Nolan (TCD), Bulelani Mfaco (DCU and MASI), and Dr. Ulrike Vieten (QUB) were our experts in Question/Answer sessions in the cafés.

The team included three excellent research officers/assistants, first Dr. Sarah Curristan, followed by Dr. Dyuti Chakravarty who worked with us through much of the research, and finally Diana Cenusa (UCD) who helped prepare this research report and final publications.

Among community partners we wish to thank Women's Collective Ireland, Women's Council of Ireland (formerly National Collective of Community Based Women's Networks), especially National Coordinator Miriam Holt and colleagues in Dochas Monaghan, Ursula McKenna and Lynn McElvaney. We also thank Fermanagh Women's Voices, the Falls Women's Centre and Shankill Women's Centre, Belfast, the Northern Ireland Council for Racial Equality, and New Communities Partnership, especially Francesco de Salvia. We thank the Union of Students in Ireland, the Washington Ireland Programme, Youth Initiative, Belfast, especially Doug Smith and Lynda Whinnery, and Foroige Drogheda, especially Teresa Comiskey, and the numerous politicians and officials who agreed to be interviewed and/or participate in our conferences and workshops.



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Mapping the Diversity of Voices on Post-Brexit Constitutional Debate 2020-21

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This research began by acknowledging the multiplicity of voices beyond unionism and nationalism which have barely been heard in the constitutional debate. It explored the possibility of a more inclusive and legitimate process of discussion. It engaged marginalized and disengaged clusters of the population - diverse voices from migrant, youth, women and gender activist communities - in discussion about the processes of potential constitutional change. Politicians were also interviewed. It used focus groups and interviews – virtual because of COVID restrictions – to map how different voices approach the debate, whether they have or have not so far participated in it and if not why not, whether they would wish to participate in the future and, if so, how they would define the constitutional agenda. We engaged with well over 70 participants in Northern Ireland, the Republic of Ireland and cross-border, including numerous political representatives.

We found considerable convergences between the interests and concerns of 'disengaged' and 'transversal' voices on each side of the border, and, unexpectedly, between these grass roots participants and many politicians. When people accessed through their transversal, intersectional identities - as migrants, women, youth, Igbtqi+ - they responded to constitutional in dialogic, constructive discussion convergent ways. They insisted that unbiased information needs to be publicly available, comprehensive, and thoroughly researched. Greater participation and inclusion did not increase polarization, as some have feared, but decreased it (see McEvoy and Todd, 2023).

Even the 'disengaged' were interested in the issues and welcomed participation. But they wanted widespread discussion that arose from experience not ideology, with a high level of accountability.

They emphasized 'bread and butter' issues of socio-economic and gender rights (see McEvoy, Todd and Walsh, 2022). But they recounted obstacles to participation (see Todd and McEvoy, 2023).

Some were *situational*: Women faced difficulties in participating in constitutional discussion because of work and home commitments. Rural dwellers noted that they felt forgotten in constitutional discussions, with migrants hesitating to engage in dialogue as they stressed that such issues remain the interest of the two main communities.

Some were *emotional*: Fear, wariness of returning to the problems and high emotions of the past, sensitivity, and awareness of the need to tread carefully. Many described consultation fatigue; border dwellers and women were often consulted, but this was – they felt – a 'box-ticking' exercise and their contributions were just 'filed away'.

Some were *discursive*: Participants were turned off theoretical and institutionalist discussions of constitutional change. The very language of 'united Ireland' evoked traditional ideologies that they rejected and identities that they have actively distanced themselves from. They wanted discussion beginning from 'experience', not ideology, and focusing on 'organic' North-South links and dysfunctions.

Some were *institutional*: the lack of effective two-way channels between policy makers and grass roots impeded information, meaningful consultation and increased disengagement.

'Negotiating Differences on a Shared Island': Agonism, commonality or critical constitutionalism? 2022-2023

Funded by IRC through the Shared Island Unit

This research project took up the radically inclusive and participatory conclusions of 'Diverse Voices' and explored how far grass roots communities who began with their own lived experience of 'organic' cross-border links and dysfunctions and largely determined the agenda of discussion would 'scale up and out' to policy, political, and constitutional issues. It engaged border women and disadvantaged youth in small scale deliberative cafés to discuss contentious policy issues of importance to the 'shared island' agenda – cross border health, migration. It provided access to unbiased information on these issues, and analysed how discussion proceeded over three hours of deliberation.

Through these in-person deliberative cafés, participants from both North and South were engaged in discussions on shared-island issues. The cafés were structured around three sessions, interspersed with refreshments, information and informal discussion. Participants were informed by information sheets and short online videos and posters (which they accessed independently, before and between sessions), very short (3 minute) initial briefings, and experts available on Zoom for question-answer sessions. The first 50-minute session was devoted to introductions and shared personal experience on the topic; the second to policy issues and questions for the expert; after a 15 minute Zoom Q/A, the shorter third session addressed political implications.

Border Health

Three deliberative cafés centered around women's health in the border region were held in February/March 2022, with 35 women from the border counties, North and South, Protestant, Catholic and other, coming together to discuss the issue of healthcare in the border region. Participants expertly scaled up and out to map and to diagnose the systemic barriers to health coordination in the border region. They emphasized the political and bureaucratic barriers to resolving them. They did not systematically address political or constitutional issues, and their failure to find a way forward – short of more effective policy consultation - frustrated some of them.

On Immigration

In another deliberative café, 11 relatively disadvantaged young people from North and South, of Protestant and Catholic backgrounds, and with a minority of incomers, discussed the topic of immigration. Most were in their mid-late teens. There were large posters and visual computer linked information outlets in the room, which participants were encouraged to view. Discussion began with shared experiences of the meaning of home and the experience of migration. The lack of knowledge of conditions in the other jurisdiction was clear, and some participants from the North were shocked when they discovered in the Q/A discussion how 'direct provision' worked in the Republic of Ireland. Finally, participants came up with some suggestions on how to resolve the problems – they had little faith in politics or politicians, but they emphasized the need for information, sharing knowledge across the two jurisdictions, and human rights.

The importance of small scale deliberation came clearly out of our experiments. It was at once an educational tool, and it allowed a scaling up and out of personal experiences to a collective definition of the problems at hand. It did not immediately make a connection to constitutional debate although its findings are highly relevant to it. We conclude that sequenced small scale deliberative events on experiential 'shared island' issues should be combined with deliberation on constitutional reconfiguration, which directly address the regional and sectional impact of different constitutional arrangements (eg on border health coordination, on youth migration). By testing the 'constitutional' designs against the experienced problems, and by providing small scale deliberative forums with constitutional models whose impact on specific areas and sectors is emphasized and problematized, informed and participatory discussion can be achieved.

Soundings on Inclusive and Participatory Constitutional Discussion

Funding from ARINS, IRC, DFAT, UCD COSSL, UCD IBIS, RIA, U Aberdeen, PSAI, PSA

Arising from our research projects a two-day conference and policy workshop was held in the Royal Irish Academy in June 2022, titled 'Soundings Inclusive, **Participatory** Constitutional Discussion'. The conference involved academics, politicians, grass roots border participants and civil servants. Key issues included the dissonance between high-level political concepts and public interest, practical avenues and institutions for more inclusive and dialogue incorporating grass preferences and ways to adapt the constitutional agenda.

Key concepts raised by workshop participants included inclusion and exclusion. Territorial exclusion leads to systematic misperceptions between the different jurisdictions on the islands and the EU, and different usages of key terms

such as sovereignty, constitution, Union. In particular, the value for Northern Ireland unionists, and nationalists on the island of grasping the conflictual understandings of the 'Union' in Great Britain was emphasized.



Modes of deliberation:

There was much discussion of how inclusive participation can feed into policy. The gaps between pragmatic policy imperatives including the task of convening large Citizens' Assemblies - and grass roots imperatives were stark. So too was the practical question of which groups should be included in deliberation. Questions included: who should be included in these discussions; what questions should be posed; how should the order/sequencing of the events be organized; and how should participants' expectations be managed?

Two important conclusions were reached:

- Coordinated collaborative research on the island of Ireland is necessary now, to devise ways to maximise participation, inclusion and accountability.
 - Political parties play a potential role of mediating deliberation between policy makers and grass roots organizations.

The problem of grass-roots exclusion gives rise to dilemmas for academics. Are they to be legislators (clearly stating the choices for policy makers and voters); advocates for the disempowered, stating their views for policy makers; or critical translators and interpreters, showing the different understandings and how they lead to different types of priority?

There was discussion on whether the immediate need was for a clear constitutional choice to be presented to the people of NI by the Irish government, or whether the immediate need was for wider ranging debate on the constitutional agenda itself.

As a way of progressing the first imperative, a round table was held on the topic at the PSAI (Political Studies Association of Ireland) annual meeting in October, 2022, and a PSAI/PSA special workshop and conference is planned for autumn 2023 and spring 2024. The research has also impacted in other ways, with research leaders involved with Professor John Doyle, DCU, in analysing the ARINS/Irish Times focus groups on these issues (see Todd, McEvoy and Doyle, 2023) and in a number of academic and policy relevant presentations.

Findings and Recommendations

RESEARCH FINDINGS

- Alienation: there was considerable alienation from the technical language used to
 discuss constitutional issues. Participants wanted to discuss wider issues what a
 better society would look like and how it could be achieved before discussing
 institutional design for a united Ireland or the detailed process of constitutional change.
- Convergence: there was much convergence in the views of participants of different backgrounds and from different jurisdictions.
- Change: participants wanted discussions beginning from the bottom up, reflective of lived experience and real problems on the island, concerned with socio-economic issues not simply institutional ones.
- **Democratic Accountability**: participants wanted better channels of discussion and accountability between grass roots and policy makers.
- **Sequencing**: especially at the early stages, participants wanted the processes of discussion and deliberation to be radically inclusive.

POLICY RECOMMENDATIONS

- The Shared Island Initiative: a good starting point for discussing constitutional change.
- Participation: extensive locally based deliberations to be linked to larger ones.
- Systemic approach to deliberation: linking small scale cafés, middle level mini-publics and large citizen's assemblies and linking shared island and constitutional issues.
- Accountability: effective channels of communication.
- Centre to coordinate participation and deliberation: a dedicated centre to collect and collate research findings, put them in policy relevant form, feed small scale research into large scale planning and ensure cumulative, effective and accountable - research and deliberation on these nationally.

The Deliberative Café: Method

The deliberative café engages disadvantaged and disillusioned groups in a deliberative setting. Citizens come together to learn about certain issues, exchange perspectives and engage in dialogue to construct a common assertion about the issue at hand. Though such deliberative mechanisms cannot resolve conflict or contentious policy issues, they can minimize issues of "unequal citizen competence, partisanship and status inequality" (Curato et al, 2022: 57). Participants within these cafés are not representative, but rather are recruited through community groups allowing the establishment of trust to be built amongst those who may otherwise be excluded from the deliberative process.

This 'bottom-up' approach in qualitative research allows for diverse participants to recount and reflect on their lived experience, engaging others in sincere dialogue. Discussions are not guided by an interviewer but rather directed by the participants to enable all members to participate and contribute. This method is beneficial in collecting the participants' views, exploring themes which transcend different groups, while facilitating dialogue and mutual learning.

Our deliberative cafés were designed so participants can discuss contentious policy issues, consult experts in the field, compare different perspectives and share personal reflections on the matter. They were part of a wider Shared Island conversation that was happening in tandem in each Irish jurisdiction. Prior to the deliberative cafés we published a schedule of open-ended questions around a shared island problematique. The cafés were arranged as three-hour recorded sessions in a local hotel which facilitated grass roots participation in dialogue with experts in deliberative democracy, both in-person and via Zoom.

The general proceeding of meetings were as follows:

- Introductions (10-15 mins). Refreshments and information provided, with time set aside to establish ground rules for discussion.
- Session 1- sharing experience, sharing problems (50 mins). Participants were asked about their own experience with the theme and we sought to identify common narratives around their experience.
 Participants seemed frustrated and shared personal experience on the matter of crossborder health provision/coordination identified.
- Break 10 minutes.

- Session 2- Defining problems and policy options (40-50 minutes). Small group discussions where questions for the field experts are documented. Participants defined the problem in a policy-relevant way.
- Break refreshments 10 minutes.
- Zoom Q/A with a field expert (10-15 minutes).
- Session 3- resolving problems (40 minutes).
 Plenary round table where political
 implications and constitutional dimensions
 were considered. Concluded with participant
 feedback. Participants seemed frustrated and
 saw no easy political solution to the problems
 identified.

The Deliberative Café: Women and Youth Perspectives

Deliberative cafés for border women on healthcare in the border region.

With our community partner NCCWN/WCI, three deliberative cafés were held in a hotel in Monaghan on 28th Feb- 1st March. The topic discussed was health provision in the border region which was a topic of both interest and significance to the participants. Individuals from diverse migratory backgrounds and religious identities residing in the border counties, both North and South, were invited to participate. 35 participants attended, with the smallest café having 8 participants and the largest twenty. Demographic details were not requested; however, information was gleaned from personal introductions. Our participants were predominantly well educated, professional and working in community organisations or local NGOs. Most participants noted frequent cross-border movement for work and family reasons. While our cafés failed to attract the most excluded in society, they offered a positive aspect, allowing us to tap into the frustration /problems that do not stem from a lack of education or money. These professional women experienced barriers to health provisions and information within the border area, with their barriers being specific to trans-border regions.

Information on the extent of cross-border provision of health policy was presented with public health expert Dr Ann Nolan (TCD) in attendance through Zoom to answer participants' questions. The expert information was unbiased and radically participative; participants had the opportunity to formulate their own questions on the agenda for the future. Joanne McEvoy (U Aberdeen) and Jennifer Todd (UCD) facilitated the sessions in conjunction with two community organisers. After the first session concluded, revisions regarding the proceedings of the cafés were discussed. Cafés were framed as an opportunity to discuss cross-border health provisions with wider political and constitutional issues to be discussed later on in the session. Discussions in plenaries and break-out/small-group sessions were taped, transcribed and anonymised, coded in NVivo qualitative research software and analysed.

Youth Deliberative Cafés

One three-hour café was held in a hotel in Dundalk, which centered around the topic of migration. Two experts were in attendance through Zoom. Four researchers and two community organizers participated alongside 11 young people ranging from teens to early 20s. The session commenced with introduction and lunch, followed by discussion on the ground rules and we invited participants to walk around the room, to engage with the videos and posters designed on the topic of migration.

In session one, experiences on 'moving' and the difficulties around it were shared which oscillated into dialogue around 'home', movement across communities, difficulties and benefits of migration, and the sharing of personal experiences, e.g. of one young migrant who had to translate for her mother.

After a break, a breakout session commenced at separate tables to come up with questions for the field experts. A 15-minute Zoom Q/A session with Bulelani Mfaco (MASI) followed. Following the first session, discussion focused on policy issues with questions being posed to our expert Ulrike Vieten (QUB). The final session saw participants come up with suggestions on how the problems identified could be resolved: little trust in politicians was salient however greater strides in human rights, communicating the positions of migrants and more information on North/South coordination was highlighted as important.

The Deliberative Café: Lessons Learned

Deliberative cafés are well suited to:

• 1) Enable participants to share experiences and narratives to craft a shared understanding of the parameters of contentious issues in light of their own experience.

This was evident in the border cafés where women were well-versed in negotiating border health care. They discussed and listened to different experiences all the while learning from each other.

During the youth café many participants did not know much about migration beforehand; thus, the task presented was more difficult. Framing the issues in terms of home/belonging/moving allowed them to understand and listen and learn from each other. Personal examples included one participant's grandmother who converted to Catholicism when she married but who now has dementia and talks as a Protestant. Other participants discussed the lower pay conditions offered to migrants.

In both cases the creation of a shared understanding of the problem was crucial, and allowed a basis for further discussion, even if views on what should be done differed.

• 2) *Defining the problem*- due to information provided and hearing from one another, participants moved from individual narratives to a shared definition of the problem.

This was made very clear during the border women's café as by the second session they were identifying aspects of the problem e.g lack of communication networks, lack of infrastructure etc. A mixture of their expertise and collective experiences provided evidence-based conditions in the border region. Their interaction with the public health expert showed how their insight could test out the effectiveness of different policy options.

In the youth café, where most participants had limited experience of migration, many learned about the dimensions of the problem and the differing treatment of migrants, North and South. New understandings were reached as evidenced by their questions posed which allowed participants to delineate the different gender and territorial conditions faced by migrants. In both cases, the new definition of the problem allowed participants to see it as a policy problem with possible resolutions.

The deliberative cafés were not designed to supply different policy options.

- 1) Resolving problems was not easily possible in this format. The more fine-grained a definition of the problem, the greater the difficulty in finding a resolution or looking at its political implication. Participants were frustrated by the intractability of problems delineated.
- 2) A possible second deliberative event beginning with policies and constitutional design would be necessary to move beyond participant frustration.
- 3) Participants in the youth café were quicker in delineating a resolution to the problem.

In conclusion, deliberative cafés are a valuable tool in highlighting and engaging local expertise on the shared problems on the island. Common problems can affect a multitude of people with differing perspectives. The deliberative cafés are one step to advance the shared island agenda in a participatory way. However, this is only one part of the dialogue- the shared island agenda alone is insufficient without engagement with differing political, and constitutional ways, to resolve problems identified.

The Deliberative Café - Women's Conclusions and Recommendations

Findings on cross border health provision.

Accountability and political will

- · Information and consultation with border dwellers is very limited. Consultation has no effect on policy
- There appears to be no political will to improve cross-border health provision.

Ambulance provision

• In some border areas (e.g. Louth) ambulances called to an urgent case, for example a heart attack, have a choice of a short drive to a hospital in Newry, or a much longer drive to a hospital in Drogheda. A longer drive may, in some cases, lead to bad medical outcomes. But there appears to be no medical pattern to their choice, e.g. it is not related to the seriousness of the case - locals believe the choice is made depending on whether the phone-call to the ambulance comes from a Northern or a Southern mobile phone.

Coordination and sharing of data among health providers.

- Cross-border patients (for example residents in one jurisdiction who were hospitalised in another) are not facilitated when released from hospital. There are no provisions for medical data to be transferred to doctors in the other jurisdiction.
- In some cases, patients themselves have to fax all the details of hospital care in Northern Ireland to their GPs and providers in the South.

Cross border health provision

- There is some effective cross-border provision, for example in paediatric cardiology.
- There are other conditions where provision is possible, for example some orthodontic services, and the patient has to pay for the treatment in the other jurisdiction, and is later partially reimbursed.
- And there are many conditions where cross-border provision is not possible.
- Why can provision not be generalised, even if some payment is necessary?

Mental Health

- There are particularly severe mental health problems in the border area and there is radically insufficient provision.
- There is a widespread feeling that the problem (suicides by car accident were mentioned) is just 'brushed under the carpet'.

Models

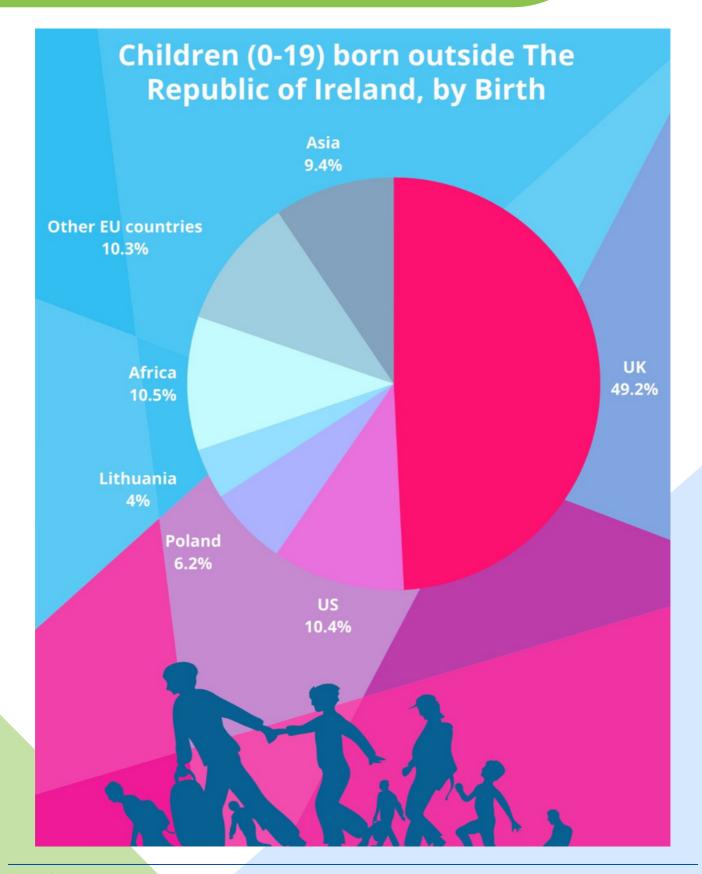
- There is effective cross border coordination in policing.
- There was effective cross border coordination for foot and mouth disease in cattle.
- Why is there no effective cross border coordination in health?

Regional Agencies of coordination

- CAWT sounds effective, but doesn't (or can't) actually do the job.
- There is so much bureaucracy that it prevents effective cross-border health coordination
- And funding is channeled through these agencies

Benchmarking: any political model of a united Ireland has to take account of existing dysfunctions. For example a united Ireland with devolution for Northern Ireland, and devolved healthcare, might simply reproduce the problems.

The Deliberative Café - Youth Information and Posters



The Deliberative Café - Youth Information and Posters

