

**File of the participant**

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**SCIENTIFIC  
EXPERTISE**

**IN THE FACE OF CRISES  
overhaul or adjustments?**

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**Speakers**

**Dominique Le Guludec,**

president of the French National Authority for Health (HAS)

Over the past two years, the Covid pandemic has put in the limelight the role of scientific expertise in providing insights for governmental decision-making in a context of deep uncertainty.

This role proved all the more challenging that due to the lack of data this expertise was built up “on the fly” as the crisis progressed with its multiple twists and turns: variants, treatments, vaccines, lockdowns, curfews, easing of restrictions,...

A role that was all the more diffuse due to the emergence of new venues of expertise, along with risks linked to overlapping missions, or even to the publication of divergent views.

This international and participatory symposium is designed to return to the fundamentals of scientific expertise, with its successes and limitations. And attempt to elucidate, jointly with our peers from NICE, INESSS and EUNETHA, the best modes of producing expertise in a context of urgency where available data are scarce. How did we respond to the expectations of public authorities, while preserving our fundamentals of rigour, transparency and independence?

The symposium will then look at how this expertise is received by professionals and most of all by citizens – a public who proved so eager for scientific explanations, and yet paradoxically accepted some outlandish or even dangerous ideas that circulated on TV news channels and social media. To what extent did these self-appointed supposed experts, so numerous considering the actually low number of genuine experts in this field, contribute to blur the media landscape?

Last but not least, and this is not a premiere, the public authorities will most likely be keen to re-examine scientific expertise and its organisation. What lessons can we learn collectively from the pandemic? What benefits can we preserve from the adjustments made during the crisis for our routine expertise in the future?

All of these topics will no doubt give rise to numerous debates during the symposium. This announcement is also an opportunity for me to thank warmly all of the guest speakers who have agreed to honour us with their presence and will join our debates on the scientific expertise of tomorrow.

A handwritten signature in blue ink, appearing to be 'D. Le Guludec'.

**14:00** | **Reception and opening address**

**Dominique Le Guludec**, president of the French National Authority for Health (HAS)

**14:20** | **Session n°1: Scientific expertise and its ambitions****Putting public expertise into perspective: governing through science from the 17<sup>th</sup> century to the present day**

**Jérôme Lamy**, researcher at CNRS

*The history of scientific expertise conducted by and for governments is a long story. In the 17th century, the Royal state wanted to gain knowledge on its territory in order to control its borders, resources (e.g. mines...) and sources of income (taxes, land register). As of the late 18<sup>th</sup> century and throughout the 19<sup>th</sup>, the goal was to take the population into consideration and regard people as a resource to preserve order in the country. The 20<sup>th</sup> century then witnessed the emergence of a concern for military expertise and tight control through standards. Has the pandemic challenged the forms of the governance model by and for sciences?*

**Issues of taking into account SHS in the expertise**

**Marie Gaille**, director of the Institute of Human and Social Sciences of the CNRS

*Nullam scelerisque, risus volutpat molestie pharetra, risus erat faucibus neque, eu maximus diam nisi quis purus. Nulla congue, risus vel eleifend vulputate, tellus quam vulputate eros, vitae euismod diam ipsum quis massa. Duis porta nulla quis sapien bibendum, sit amet rhoncus massa imperdiet. Integer aliquam vitae nulla id fringilla. Donec laoreet, ligula id vehicula posuere, justo risus luctus arcu, vitae luctus est est in odio.*

**Do research with people, not for people**

**Bruno Spire**, research Director at Inserm and Honorary President of the AIDES association

*Since its creation, AIDES has endeavoured to transform society via 4 pillars: grassroots initiatives and individual needs, recognition of experiential knowledge, advocacy in favour of social transformation, and collective action. The alliance between non-profit organisations and the world of research has resulted in many breakthroughs thanks to participatory research projects, with concrete windfalls in HIV screening and prevention in France. This experience is worth transferring to other public health scopes.*

**The knowledge synthesis model**

**Laurent Fleury**, head of the Collective Expertise Pole at Inserm

*The main objective of the INSERM collective expert reviews is to provide independent and multidisciplinary scientific insights about health issues, as a support to public authorities in their decision-making process. Due to the growing production and increasing specialisation of research data, it has become difficult to process and use the high volumes of data generated on any single health issue, in particular for public health topics where numerous elements of various origins are interdependent and interact in a frequently subtle way. During the SARS-CoV2 crisis, the INSERM placed its expertise and know-how, in terms of expert identification and documentary research, in the service of the inter-ministerial Covid management task force via the REACTing consortium.*

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15:00

## Session n°2: **Benefits and tensions in the light of COVID-19**

### **Scientific expertise and emergency**

**Fiona Glen**, programme Director, National Institute for Health and Care Excellence (NICE)

*Developing new, and updating current evidence-based guidelines is a substantial process that requires considerable time and resources. While a well-established methodology exists for the development of guideline recommendations, the process itself has been criticised for being inefficient, taking anything up to 2 years sometimes to update a guideline. The COVID-19 pandemic forced NICE to do things differently; having to take a dynamic approach as each wave saw different requirements for evidence-based guidance. I will talk about why a 'living' guideline approach was the only way NICE could deliver the right information at the right time throughout each stage of the pandemic and how this approach is adaptable to deal with unknown future needs.*

**Michèle de Guise**, scientific Vice-Présidente, National Institute of Excellence in Health and Social Services of Quebec (Inesss)

*The pandemic upheaval hit Quebec a few weeks after the outbreak in Europe. The INESSS (National Institute of Excellence in Health and Social Services) rapidly joined the crisis task force created by the Ministry of Health to handle this unprecedented situation. Working on the front lines, we were able to provide dynamic and real-time support to decision-making processes on health care and service recommendations in a context of high uncertainty. We proved able of adapting our methods to quickly generate sufficiently nuanced responses in this environment where no evidence-based data were available and knowledge was both fragmentary and constantly evolving. The solution was partly to produce evolutionary guidelines, adjusted virtually in real time to follow the new developments in our knowledge. This work would have been impossible without the support of health care professionals and experts who collaborated closely with us throughout the crisis.*

### **Scientific expertise and independence**

**Marcus Guardian**, chief Operating Officer, European Network for Health Technology Assessment (EUnetHTA)

*The intervention will look at the question to what extent quality and independence of scientific expertise in HTA can be maintained during crisis situations. Challenges for national and international HTA work will be outlined, along with responses to these challenges and risks that come with them. Covid-19 tested healthcare systems globally, and HTA in Europe was no exception; however while still facing many challenges, European HTA came out stronger.*

### **Appropriation of expertise in the field**

16:00

## Focus: **Scientific expertise and the people's perception**

**Mathias Girel**, associate Professor ENS-PSL, Associate of Philosophy

*Expertise, whether individual or collective, within an agency, a commission or an organization, is often poorly understood. Although as a general rule it is a process governed by strict rules, likely to lead to nuanced opinions and multiple viewpoints, scientific expertise is often "jostled around" and mistreated by the public image of so-called "experts" conveyed by TV news channels or even by the media coverage given to people who, because they have a competence in a specific area, feel authorized to share their opinions in other disciplines or other issues. My talk will elaborate on these various issues, looking at the preconceived idea that public distrust is supposedly growing against scientific expertise.*

CONTINUATION OF THE PROGRAM [➔](#)

**16:30**

## Session n°3: **Towards new adjustments in scientific expertise?**

### **Organizational dimensions of expertise in times of crisis**

**Henri Bergeron** and **Olivier Borraz**, Research Directors at the CNRS at the Center for Sociology of Organizations at Sciences Po

*The COVID-19 pandemic in France has led to the creation of numerous ad hoc organizations, related both to scientific expertise and to crisis management, even though the country had been preparing for a long time to cope with this type of event. How can this organizational proliferation be analysed? What problems has it generated? Our talk will also address the limitations of the experience feedback and lessons learned from this type of crisis. Lastly, it will look at the meaning of such crisis management in terms of citizens' trust in our institutions, of the institutions' trust in citizens, and of political leaders' trust in their own institutions.*

### **Round Table**

- **Catherine Deroche**, president of the Senate Social Affairs Committee
- **Audrey Dufeu**, vice-president of the social affairs committee of the National Assembly
- **Henri Bergeron** and **Olivier Borraz**, research Directors at the CNRS at the Center for Sociology of Organizations at Sciences Po
- **Dominique Le Guludec**, president of the French National Authority for Health (HAS)



**Henri Bergeron,**  
research Directors at the CNRS at the Center  
for Sociology of Organizations at Sciences Po

Henri Bergeron, Research Director at CNRS, Sciences Po Centre for Sociology of Organizations, is also Director of the *Organizations & Human Resources Management* Master's programme and of the *Public Policy Management Executive* Master's programme at Sciences Po, as well as Director of the Health programme of LIEPP (Interdisciplinary Public Policy Assessment Laboratory). He serves as scientific coordinator of the Sciences Po Health Chair and the *Management & Public Affairs* Master's programme. He conducts research in public health policies and the transformations of practices in the medical profession through various topics: illicit drugs, alcohol, obesity, medical research, public health.

His research leverages the tools from public action sociology, social movements, and organizations to elucidate the dynamics at work in the production of public action and in processes governing reconfigurations of the organizational and institutional spheres. He has a particular interest in the linkage between knowledge, expertise and policy, and more generally in organisational and institutional change.

He recently published *Sociologie politique de la santé* (Presses Universitaires de France, 2018) with **Patrick Castel**, and *Covid 19: Une crise organisationnelle* (Presses de Sciences PO, 2020) with **O. Borraz, P. Castel & F. Dedieu**.



**Olivier Borraz,**  
research Directors at the CNRS at the Center  
for Sociology of Organizations at Sciences Po

Olivier Borraz is Research Director at CNRS, and Director of the Sciences Po Centre for Sociology of Organizations (UMR 7116 CNRS-Sciences Po). His research addresses the fields of risk governance and crisis management and preparedness. His publications include among other *Les politiques du risque* (in 2008) and *Covid-19: Une crise organisationnelle* (Presses de Sciences Po, 2020) co-authored with **H. Bergeron, P. Castel** and **D. Dedieu**. He currently coordinates the ANR CrisOrg project (Organizations in Crisis) as well as a working group on "Decision-making and Organizational Rationales during the Health and Social Crisis" in the *Action Concertée Covid & SHS* programme conducted by the REACTing consortium on Emerging Infectious Diseases.



**Catherine Deroche,**  
president of the Senate Social Affairs Committee

Dr Catherine Deroche is a cancerologist. She has been a senator since 2010 and is currently President of the Senate Social Affairs Committee, as well as rapporteur for the inquiry commission on the assessment of public policies in major pandemics as related to the Covid-19 crisis and its management (Report dated 08/12/20). **Catherine Deroche** is a member of the joint information mission in charge of assessing the effect of measures adopted or contemplated as related to lockdowns or restrictions. She was the rapporteur for the disease branch of the PLFSS 2017, 2018 and 2019 plans, and president of the task force on cancer (2016-2020). She is also a standing member of the Board of Directors of the Institut National du Cancer (Inca) and of the Social Security Finance Commission (CCSS).





**Audrey Dufeu,**  
vice-president of the social affairs committee  
of the National Assembly

**Audrey Dufeu** is a member of the French parliament representing the Loire-Atlantique region and Vice-president of the Social Affairs Commission. She is a specialist of matters related to elderly care and is committed to health issues. She also works on the topic of health sovereignty in France and on the prevention of alcohol-related risks. Before her election as an MP, she headed a healthcare centre specialized in post-acute care and rehabilitation.



**Laurent Fleury,**  
head of the Collective Expertise Pole at Inserm

**Laurent Fleury** has a PhD in pharmacy with a 25-year experience in public health. After spending 10 years in a hospital working in risk management, he joined the Medicines Agency where he held several roles in topics of scientific information, decision transparency and scientific policy.

Since May 2016, **Laurent Fleury** has headed the Collective Expertise unit at Inserm (*Institut national de la santé et de la recherche médicale*) providing scientific insights for decision-making on public health policy. He is in charge of scientific scoping, bibliographic support, coordination and valorisation of collective expert reviews.



**Marie Gaille,**  
director of the Institute of Human and Social  
Sciences of the CNRS

**Marie Gaille** is Director of Research in philosophy at CNRS, affiliated to the UMR SPHERE. Her research addresses the topic of medical decisions involving a concept of “*life deserves to be lived at various ages*” and relations between health, sickness and environment, and their conceptual, normative and clinical implications. As of 1 September 2021, she is also Director of the CNRS Institute of Human and Social Sciences.



**Mathias Girel,**  
associate Professor ENS-PSL, Associate  
of Philosophy

**Mathias Girel** is a philosopher, lecturer in the department of philosophy at the Ecole Normale Supérieure (ENS-PSL) and Director of CAPHES, the Archives Centre in Philosophy, History and Publication of Science. He is also head of the Centre Cavallès team in the République des Savoirs unit. He is a specialist of American philosophy and the pragmatism current in particular. He also conducts research in philosophy and history of science on the themes of doubt instrumentalizing and the “production of ignorance”.

**Mathias Girel** published the French edition of Robert Proctor’s *Golden Holocaust, Origins of the Cigarette Catastrophe and the Case for Abolition*, 2012 (publication March 2014), as well as *Science et Territoires de l’ignorance* (Quae). He recently published *L’Esprit en acte* (Vrin).



**Fiona Glen,**

programme Director, National Institute for Health and Care Excellence (NICE)

Fiona Glen is Programme Director of the *Centre for Guidelines* at the National Institute for Health & Care Excellence (NICE) in the UK, where she supervises the development of evidence-based guidance in the sectors of healthcare, public health and social services. After starting her career in academic research, she then joined the public sector at the Office for National Statistics where she first focused on health and disability, and later worked for the Equality & Human Rights Commission as a researcher, before becoming Director of Research and Public Policy. **Dr Fiona Glen** headed the work on the evidence-based rapid COVID-19 guidelines developed by NICE over the past 18 months.

**Marcus Guardian,**

chief Operating Officer, European Network for Health Technology Assessment (EUnetHTA)

With an educational background in international law from the University of Dresden (Germany), in Business Administration (University of Qingdao, China), and in Diplomatic Studies (University of Leicester), **Marcus Guardian** has forged a career in network development, strategic guidance, and policy management through a diverse portfolio of global project experience. In 2016, he agreed to take on the challenge of heading EUnetHTA Joint Action 3 as Chief Operating Officer. In parallel, **Marcus Guardian** recently launched the *International Horizon Scanning Initiative* (IHSI) as General Manager, building a global stakeholders pool to adopt innovative data-driven tools that will significantly impact the negotiating potential on national healthcare products.

**Michèle de Guise,**

Scientific Vice-Présidente, National Institute of Excellence in Health and Social Services of Quebec (Inesss)

**Dr Michèle de Guise** has an MD degree with a speciality in cardiology from the University of Montreal. She pursued post-graduate specialization studies in cardiac rehabilitation, ultra-sound scanning, and the treatment and care of terminal heart failure patients. She worked as a cardiologist at the CHUM in Montreal, before adding to her credentials a Master's in Administration from McGill University and a fellowship in the use of evidence-based data in management at the Canadian Foundation for Healthcare Improvement (CFHI/FCASS). She has held a number of executive management positions at the CHUM hospital centre. Since February 2020 Dr de Guise has served as Scientific Vice-President at INESSS (National Institute of Excellence in Health and Social Services) where she had previously been Director of Health Services & Technology Assessment since July 2015.



### **Jérôme Lamy,** researcher at CNRS

**Jérôme Lamy** is a science historian and sociologist, and researcher at CNRS. Following an initial curriculum in history of sciences (PhD from EHESS, 2004), he then oriented his research to the fields of sociology (HDR, UVSQ, 2014) and anthropology. During his postdoctoral research conducted at the Observatoire de Paris, the University of Quebec in Montreal, the University of Toulouse, the CNES and the University of Versailles Saint-Quentin-en-Yvelines, he worked on the history of space policies, the materiality of knowledge and government sciences. He also built a series of surveys on the epistemology of social sciences (around Michel Foucault, on the history of S&TS).

**Jérôme Lamy** published among other *L'observatoire de Toulouse aux XVIII<sup>e</sup> et XIX<sup>e</sup> siècles. Archéologie d'un espace savant* (PUR, 2007), *Faire de la sociologie historique des sciences et des techniques* (Hermann, 2018), *Politique des savoirs. Michel Foucault, les éclats d'une œuvre* (Editions de la Sorbonne, 2019), and co-authored *Voir les savoirs. Lieux, objets et gestes de sciences* (Anamosa, 2021) with **Jean-François Bert**.



### **Bruno Spire,** research Director at Inserm and Honorary President of the AIDES association

**Dr Bruno Spire**, MD, is a researcher who lives with HIV and an activist member of AIDES, the French HIV NGO. He is Director of Research at INSERM where he heads the SESSTIM "Health & Community Research" team in Marseille.

A virologist and medical doctor by training, he later switched the focus of his research to social sciences applied to public health. His main topics of research address the interface between clinical research and SHS, and participatory HIV community research.

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**Symposium** - 11/15/2021

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