

IN-HABIT - INclusive Health And well-being In small and medium size ciTies

## D7.3 - ANNEX 3 Guidelines for the local community activators

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## 1. The baseline study in brief

In order to assess the impact of co-deployed Visionary and Integrated Solutions (VIS) in terms of changes affecting mental health, socio-economic well-being and healthy lifestyles of people in the re-designed city areas, it is necessary to measure and isolate the changes produced by the project compared to a baseline.

A baseline study is an analysis of the current situation to identify the starting points for a programme or project. It represents a benchmark against which future progress can be assessed or comparisons made.

The study will adopt a four-levels participatory mechanism described in the “Citizen Science Inclusion Mechanism” (see Annex 2).

The baseline study on Inclusive Health and Well-being (IHW) is included in task 7.3 of the WP7 and it will be run in each city from July to October 2021.

In particular, the activities that will be carried out with the collaboration of the LCAs are:

### 1) City survey on Inclusive Health and Well-being

One general survey on IHW will be administered in each city. At least 300 structured questionnaires will be distributed on line and in person with the involvement of local community activators, city partners and local observers

### 2) Focus groups (online and/or in persons depending on the local conditions).

One focus group per city will be organized with the involvement of five-ten local inhabitants living (or attending daily) the intervention area. Participants will be selected with the help of city partners and local observers. Semi-structured interviews can be used to complement the focus groups or replace them in case of Covid-19 restrictions.

### 3) Stories

Around five stories per city will be collected by local community activators through direct engagement of local observers, members of the organized groups or local inhabitants living or attending daily the intervention areas.

## Baseline study: sub -tasks and deadlines for the LCAs

Sub-task	Deadline
Translation of the materials: Survey (Annex 1), invitation letter focus groups/interviews (Annex 5) and Information	by the 25th of June

sheet+privacy notice+consent form focus groups/interviews (Annex 6)	
Definition of a plan of activities during the period 5th July - 15th October. Share this plan (model presented in Annex 3) with Isimpact	by the 30th of June
Implementation of the planned activities and production of the progress report (model presented in Annex 4) at least twice during the distribution period	20th of July 20th September

## 2. Survey distribution

### Questionnaire structure

The baseline city survey on IHW is based on a structured questionnaire (Annex 1) Questions are referring IHW impact indicators, grouped into four section:

- Section 1: socio-demographic indicators
- Section 2: mental health indicators
- Section 3: healthy lifestyles indicators
- Section 4: social well-being indicators

### Definition of the control group

Respondents belonging to the control groups will be identified through the setting of specific filter questions (Q2 and Q4) that will allow to reconstruct information on the area of residence of the respondents as well as on their attendance of the intervention areas.

### Distribution period

The questionnaires should be distributed in the period from 05.07.2021 to 15.10.2021

### Sampling method

The baseline city survey on IHW will make use of a combination of two non-probability sampling methods, in particular:

self -selection sampling, which is useful since we want to allow people to choose to take part in our impact assessment on their own accord. To this aim we will advertise the survey through the project website and social network,

inviting all the people aged >18 and living in the 4 cities to participate in the survey

snowball sampling, where research participants are asked to assist researchers in identifying other potential participants among the target groups.

The snowballing distribution of the survey will reduce the risk of self-selection of the respondents which is associated to an uncontrolled dissemination of an online questionnaire.

### City target groups

Based on the “value chain” exercise carried in task 7.1, a map of the city specific target groups, including groups at risk of discrimination and exclusion, has been produced

City maps of the target groups				
City	Cordoba	Riga	Lucca	Nitra
Targets groups identified by local partners	Women Persons with disabilities Young people aged 18 – 30 Ethnic minorities Religious minorities LGBTQI+ people	Persons with disabilities Young people aged 18 – 30 Students Ethnic minorities Elderly Persons living alone LGBTQI+ people	Women Persons with disabilities Pet owners Ethnic minorities Elderly Persons living alone	Students Migrants Women Persons with disabilities Ethnic minorities (Roma) Elderly Persons living alone
Additional GDEI target groups of interest	Elderly (65+)	Women Religious minorities	LGBTQI+ people Religious minorities	LGBTQI+ people Religious minorities

### Distribution modalities

Data will be collected through an on-line form, using Microsoft Forms, that will allow the collection of responses while ensuring the anonymity of the respondents and the collection of data matrices that will then be subjected to statistical analysis exclusively in aggregate form for evaluation purposes.

Three possible distribution modalities are foreseen:

1. **on-line modality:** a web link will be disseminated through the project website, the social networks (Instagram, Facebook, LinkedIn, Twitter), targeting local groups/pages and organizations' profiles on social networks. Community activators and project partners (BOT, local partners) should support the dissemination of the link as much as possible

2. **In paper mode with subsequent recording of responses:** in this case, the community activator may distribute the paper forms of the survey and, only later, he/she will take care of recording the answers (including the consent form part).

The paper version of the questionnaire, including the consent form, must be stored in locked cabinets till the end of the project. It must be destroyed afterwards. This modality may help reaching those target groups who may have difficulties with accessing and/or using digital technologies and it will imply the active involvement of local observers and organized groups as supporters/multipliers of the survey

3. **Interview mode with immediate recording of responses:** the survey can be administered directly by the community activator, through a face-to-face interview. In this case, the recording of responses (including the consent form part) will take place simultaneously, via digital support. This modality may help involving inhabitants with low literacy level, cognitive disabilities or with low linguistic skills (in this case the voluntary support of local linguistic mediators may be helpful).

#### **Role of the Local Community Activators in the distribution of the survey**

LCAs should translate the questionnaire and support its distribution among the local inhabitants following these distribution objectives:

a. the survey is addressed to adults (age 18+) who are resident in the pilot cities. This requirement will be advertised when distributing the survey on line. Other

people may answer the online survey as well, but their answers will not be analysed

b. the study should involve respondents from the city target groups

c. the survey should reach at least 150 respondents who live or who attend in a relevant way (at least 4 hours a week) the intervention areas (experimental group) and at least 150 respondents who do not live nor attend such areas (control group)

### Intervention areas

Cordoba	Las Palmeras neighbourhood
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Nitra	People living or frequenting one of the neighbourhoods listed in Q2 (Dražovce, Čermáň, Diely, Horné Krškany, Dolné Krškany, Klokočina, Kynek, Chrenová, Mlynárce, Párovské Háje, Staré Mesto,
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Riga	Āgenskalns neighbourhood
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Lucca	The old city center and the city parks “Parco del fiume Serchio”, “Acquedotto Nottolini” and “Parco delle mura urbane”
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In order to engender the “snowball effect” and support the distribution of the survey, LCAs should identify a first group of “gatekeepers” among the members of the IN-HUBS, namely local observers and members of organized groups who represent or may be in contact with the groups of inhabitants included in the city map. The identification of the gatekeepers will take into account the necessity to involve both the intervention and the control group in each pilot city.

Gatekeepers can be reached and involved by local community activators through direct personal contacts (e-mail, face to face, phone contact, social media), only after having received their informed consent regarding participation in the research and use of personal data.

Additional sample units (respondents) should be engaged with the help of the gatekeepers, who may (i) further spread the link of the survey or the paper questionnaire to their primary contact and/or (ii) provide local community activators with the contacts of other inhabitants and organizations belonging to the same target

groups. Personal contacts may be collected by local community activators only after the informed consent of the interested persons.

Examples of actions that can be implemented by the LCAs to support the three distribution modalities

**Example n. 1 on snowball mechanism– online distribution mode**

The LCA sends an e-mail or calls the local observers to ask for their availability in taking part to the research and collects the informed consent form signed (on line or on paper)

The LCA sends a second e-mail to the local observer with the request to fill in the survey and to forward the e-mail to other people (i.e. members of the association)

The local observers forwards the e-mail with the request to fill in the survey to other people, without communicating the contacts of these people to the LCA

**Example n. 2 on snowball mechanism– online distribution mode**

The LCA and/or BOT contact relevant local institutions and organized groups through the IN-HABIT social networks and spread the link to the post which invites to fill in the survey

The local institutions/organized groups may forward the same post to other local people and/or organizations

**Example n. 3 – paper distribution mode**

The LCA sends an e-mail/meets or calls the local observers to ask for their availability in taking part to the research and collects the informed consent form signed (on line/on paper/voice recording)

The LCA sends a second e-mail (or calls) the local observer with the request to arrange the paper distribution in person

The local observer receives the paper copies of the survey from the LCA and distributes the copies to a group of people. The copies are collected by the local observer and delivered to the LCA, who will then record the answers in the digital form

The LCA distributes the copies to a group of people, collects the copies (i.e. in a box) and then records the answers in the digital form

#### Example n. 4 – Interview mode

The LCA sends an e-mail/meets or calls the local observers to ask for their availability in taking part to the research and collects the informed consent form signed (on line/on paper/voice recording)

The LCA sends a second e-mail (or calls) the local observer with the request to arrange the interviews. In case of transfer of personal contacts to the LCAs, the informed consent of the interested person must be collected

The LCA runs the interviews (in person/by phone/via Zoom or google meet) by reading both questions and answers and immediately recording the responses in the digital form. In case of need the LCA may ask for the support of a local linguistic mediator or social operator (if available, no budget is foreseen)

### 3. Focus group

Focus Group is a qualitative tool that involves a group of people who are asked about their perceptions, attitudes, opinions, beliefs, and views regarding a list of predefined

topics provided by ISIM and selected around one or more qualitative IHW dimensions/indicators.

## Working steps and tips for organizing and running the focus group

### a. Selecting participants

Define the group of participants, by selecting minim 8- maximum 10 persons who live, work or frequent the intervention area on a daily basis. They can be chosen among the local observers.

Bear in mind that, in case of online focus groups, the ideal number participants is 4-5 persons. Therefore, in case you decide to run online focus groups, you should organize two sessions to reach the total number.

Try to ensure heterogeneity of participants, by involving people from the city-specific target groups.

Try to identify those people who are likely to live/work in the intervention area for the next 5 years.

### b. Establish Place/date/hour and duration

Find an accessible place that can accommodate 10 people and choose a day and time when it is easier for people to attend.

The venue should be accessible by persons in wheelchair and easy to reach with public transport.

Alternatively, organize an online meeting and make sure that the people attending do not have difficulty accessing the internet.

The duration should be:

- in person: min 90 – maximum 120 minutes.
- online: min 60 – maximum 90 minutes.

### c. Inviting the participants and collecting their informed consent

Participants should receive an invitation letter (by e-mail, if possible). A model of invitation letter is included in Annex 5.

The consent for the participation to the interview, including the information sheet, privacy notice and the consent for the processing of personal data (see Annex 6)

should be signed (in paper or in digital format) by the participant before the beginning of the focus group.

When proposed in paper format, the signed consent form should be stored in locked cabinets and the digital copy should be stored in the IN-HABIT Microsoft Sharepoint repository (not on personal computers).

#### d. Conducting the Focus Group

Focus Group must be audio recorded and transcribed afterwards. So remember to bring a record with you.

Introduce yourself and the purposes of the focus group. Thank people for coming!

Explain the purpose for conducting the focus group and what your goals are.

Describe how the meeting will proceed and how participants can contribute.

Moderate the discussion by using the guiding questions provided below.

#### Additional tips:

Compared to survey research, conducting a focus group requires the facilitator/moderator to adopt a less directive and more flexible behaviour that is able to facilitate active and proactive participation in the group discussion. Moderating and keeping control of the conversation is imperative to the success of your focus group. Facilitator should grant that all the participants could give their contribution and therefore try to contain more talkative people and invite to talk people who speak less. It's easy for one person to sway other members of the group to start thinking and feeling the way they do. It's important not to let that happen, ensure participants that their individual opinion is essential to the success of the focus group, do not allow a single group member to be the center of attention for very long.

#### e. Reporting

After the focus group you should upload in Microsoft Sharepoint the following documents:

- audio file of the focus group

- information sheets including privacy notice and consent forms filled and signed by the participants

- focus group report in EN (model available in Annex 7). When transcribing the participants' contributions/responses please pay attention to never identifying

people by name, but only by an alphanumeric code. (Person A o 1 says, Person B or 2 says etc.)

## BASELINE FOCUS GROUP GUIDING QUESTIONS

Before starting with the questions, please clarify to the participants that the discussion refers to the intervention areas of the pilot.

The following questions are only a guide to make your discussion more adherent to the IHW sub-dimensions and indicators of interest. Feel free to modify and adapt the questions to the audience and the conversation.

GUIDING QUESTIONS	CORRESPONDING INDICATORS
<p>TOPIC: SPATIAL WELL-BEING</p> <p><u>INITIAL Question</u> How would you describe your neighborhood/the intervention area to a new resident?</p> <p><u>Follow-up Probes</u> What image does it have on the outside? Do you think it has gotten better or worse in recent years?</p> <p>What would you do to improve this neighborhood(area)?</p> <p>Are you satisfied with its green spaces?</p> <p>Is it easy to access cultural events/space in such neighborhood/area?</p>	<p>Try to bring out the following information::</p> <ul style="list-style-type: none"> <li>- <b>Accessibility of local resources (57p):</b> persons who think in their neighborhood is easy to find help from others; find job opportunities; training opportunities; find safe, pleasant and accessible green areas, participate in cultural events; find adequate social and health assistance, find a place to do sports, find healthy food, find children playgrounds, moving on foot, moving by bike;</li> <li>- <b>Satisfaction with urban green areas (58p):</b> persons who are satisfied with public green areas of their neighborhood in terms of accessibility, safety, inclusiveness, beauty, comfort;</li> <li>- <b>Inclusiveness of public squares and green areas (62p):</b> Persons who feel free to access, to use and to move within the public squares and green areas in their neighborhood;</li> <li>- <b>Sense of belonging and perception of the neighborhood (65p):</b> Number of</li> </ul>

	<p>persons who like their neighborhood; who think that it has a good reputation; who think that the image of the neighborhood has improved in the past two years; who think it could attract more tourists in the next years; who would not move to another neighborhood</p>
<p>TOPIC: SOCIAL WELL-BEING</p> <p><u>INITIAL Question</u></p> <p>We are interested in your thoughts about the social life in your living area. Please tell us how human relationships are like in this area.</p> <p><u>Follow-up Probes</u></p> <p>Is it easy to make friends in the neighborhood?</p> <p>Is it easy to participate in some voluntary activities (social, cultural, educational, religious)</p> <p>Are you involved in some of these?</p> <p>Are there any of you involved in political activity in the neighborhood?</p> <p>Do you feel that people can improve the situation of this neighborhood/area? How/to what extent?</p>	<p>Try to bring out:</p> <ul style="list-style-type: none"> <li>- <b>Sense of inclusion (37p):</b> persons who feel to be part of the community;</li> <li>- <b>Social engagement 1(40p):</b> persons who declare to participate in voluntary activities (social, cultural, educational, religious);</li> <li>- <b>Social engagement 2 (41p)</b> persons who are satisfied with their level of involvement in the local community life</li> <li>- <b>Civil Engagement (2) (39p):</b> persons who believe they can influence local policies/political decisions;</li> <li>- <b>Change - making attitude (43p):</b> persons who believe they can change the reality of their neighborhood (social situation, beauty/attractiveness of the space, economic situation);</li> <li>- <b>Sense of being treated equally (45p):</b> Persons who feel they are treated with less courtesy and respect than others (or other groups)</li> </ul>
<p>TOPIC DISCRIMINATION</p>	<p>Try to bring out:</p>

INITIAL Question

Now we would like to investigate the issue of discrimination in this neighborhood/city area.

Are you aware of any form discrimination in the neighborhood?

Follow-up Probes

Are there members or groups within the community who may feel left out?

Please share a few examples

- Perception of discrimination in society (54p): persons who believe that minority groups are considered dangerous/dishonest/ criminals/ unreliable/ bad neighbours by local citizens

- Perceived personal condition of discrimination (55p): Persons who believe that minority groups are considered dangerous/dishonest/ criminals/ unreliable/ bad neighbours by local citizens

- Collective self-esteem (56p): persons who feel proud of their community, feel a sense of self-esteem as a community (Cordoba)

## 4. Storytelling

Five stories per city should be collected by LCAs for the baseline study. Each story should tell the change affecting specific aspects (sub-dimensions) of people's socio-economic well-being and healthy lifestyles after COVID 19.

### Main characteristics of the stories used for impact assessment

No rigid interview scheme, but open dialogue

Each story is built around at least one impact indicator

The main narrative pattern is "how the aspect of the protagonist's life changed"

The narrative is organized around a before /after scheme with a triggering event in the middle

The story tells a process of change/evolution

At the end of the story the protagonist lives in a new situation

### Working steps and tips for collecting and editing a story for impact assessment

#### a. Preparing the Story

- Identify the protagonist: choose 5 people with different personal characteristics (representing the city target groups) that live, work or spend their time on a daily basis in the area of intervention.
- Identify the most suitable medium and language to collect the story (in person or online meeting, self-recording of a video by the protagonist etc.).
- Identify the IHW sub-dimension and key impact indicators that may be suitable for each participant based on the indicators grid provided below as well as on your knowledge of their personal story. Prepare the story track based on the example

provided below. Contact and speak with the participant in advance if necessary to decide the topic of the story.

### Storytelling: Sub-dimensions and indicators involved (CORDOBA)

Sub-dimension	Indicator/Description
Social Inclusion	<p><b>Domestic isolation (36.1p)</b> Persons who spend the majority of their time alone at home</p> <p><b>Social engagement 2 (41p)</b> persons who are satisfied with their level of involvement in the local community life</p> <p><b>Social engagement 3 (42p)</b> People who are committed to take care of public spaces and green areas in their neighbourhood</p> <p><b>Change-making attitude (43p)</b> persons who believe they can change the reality of their neighbourhood (social situation, beauty/attractiveness of the space, economic situation</p> <p><b>Openness to diversity (44p)</b> persons who are open towards new values and alternative way of living and thinking</p>
Equality	<p><b>Sense of being treated equally (45p)</b> Persons who feel they are treated with less courtesy and respect than others (or other groups)</p> <p><b>Equal access to culture and leisure (48p)</b> Persons who believe to have the same opportunity than others to access the available cultural and leisure opportunities in their city/neighbourhood</p> <p><b>Obstacles for the access to culture and leisure (49p)</b> Persons who think to have economic, time, family, mobility, cognitive, cultural obstacles in the access to culture and leisure opportunities in their City/neighbourhood</p> <p><b>Obstacles for the access to social care services and health services (51p)</b> Persons who think to have economic, time, family, mobility, cognitive, linguistic/cultural, social obstacles in the access to social care and health services in their city/neighborhood</p> <p><b>Obstacles for the access to training opportunities (53p)</b> Persons who think to have economic, time, family, mobility, cognitive, linguistic/cultural, social obstacles in the access to training opportunities in their city</p>

Spatial well-being	<p><b>Inclusiveness of public squares and green areas (62p)</b>  Persons who feel free to access, to use and to move within the public squares and green areas in their neighbourhood</p> <p><b>Sense of belonging and perception of the neighborhood (65p)</b>  Number of persons who like their neighborhood; who think that it has a good reputation; who think that the image of the neighborhood has improved in the past two years; who think it could attract more tourists in the next years; who would not move to another neighborhood</p>
Determinants of Health	<p><b>Self-grown fruit and vegetables consumption (58p)</b>  persons who declare to consume self-grown fruit and vegetables</p> <p><b>Awareness and motivation towards healthy habits (66.1p)</b> persons who are aware about healthy habits and motivated to change their lifestyles</p>
Sport Facilities	<p><b>Benefits from Sports (64p)</b>  persons who think that sports/physical activity contributes to their well-being</p>
Cultural Consumption	<p><b>Benefits from culture (67p)</b>  persons who think that cultural activity contributes to their well-being</p>
Leisure and free time	<p><b>Practice of healthy leisure (70.1p)</b>  People who practice healthy behaviours for leisure /avoid unhealthy leisure</p> <p><b>Benefits from social and recreational public spaces (81p)</b>  persons who think that social and recreational public spaces contribute to their well-being</p>
Employment	<p><b>Opportunity to find a job in the city(83p)</b>  persons who are satisfied with the opportunities offered by the job market at city level</p> <p><b>Expected sector of occupation (84p)</b>  persons who think they can find a job in a specific sector in the next 6 months (options depending on the city context: i.e. tourism for Cordoba; pets care/pets related social and entertainment services for Lucca; food related services for Riga)</p> <p><b>Satisfaction with one's own competencies, skills 1 (85p)</b>  persons who are satisfied with their level of skills and competences</p> <p><b>Satisfaction with one's own competencies, skills 2 (86p)</b>  Persons who think that their education, skills and competences will be helpful to find a paid job in the city</p>

Financial situation	Satisfaction with one's surroundings/living environment (91p) satisfaction related to one's own surroundings/living environment
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### Storytelling: Sub-dimensions and indicators involved (Nitra)

Sub-dimension	Indicator/Description
Social Inclusion	<p><b>Domestic isolation (36.1p)</b> Persons who spend the majority of their time alone at home</p> <p><b>Social engagement 2 (41p)</b> persons who are satisfied with their level of involvement in the local community life</p> <p><b>Social engagement 3 (42p)</b> People who are committed to take care of public spaces and green areas in their neighbourhood</p> <p><b>Change-making attitude (43p)</b> persons who believe they can change the reality of their neighbourhood (social situation, beauty/attractiveness of the space, economic situation)</p>
Equality	<p><b>Sense of being treated equally (45p)</b> Persons who feel they are treated with less courtesy and respect than others (or other groups)</p> <p><b>Equal access to culture and leisure (48p)</b> Persons who believe to have the same opportunity than others to access the available cultural and leisure opportunities in their city/neighbourhood</p> <p><b>Obstacles for the access to culture and leisure (49p)</b> Persons who think to have economic, time, family, mobility, cognitive, cultural obstacles in the access to culture and leisure opportunities in their City/neighbourhood</p> <p><b>Obstacles for the access to training opportunities (53p)</b> Persons who think to have economic, time, family, mobility, cognitive, linguistic/cultural, social obstacles in the access to training opportunities in their city</p>

Spatial well-being	<p><b>Inclusiveness of public squares and green areas (62p)</b> Persons who feel free to access, to use and to move within the public squares and green areas in their neighbourhood</p> <p><b>Sense of belonging and perception of the neighbourhood (65p)</b> Number of persons who like their neighbourhood; who think that it has a good reputation; who think that the image of the neighbourhood has improved in the past two years; who think it could attract more tourists in the next years; who would not move to another neighbourhood</p>
Determinants of Health	<p><b>Self-grown fruit and vegetables consumption (58p)</b> persons who declare to consume self-grown fruit and vegetables</p>
Sport Facilities	<p><b>Benefits from Sports (64p)</b> persons who think that sports/physical activity contributes to their well-being</p>
Cultural Consumption	<p><b>Benefits from culture (67p)</b> persons who think that cultural activity contributes to their well-being</p>
Leisure and free time	<p><b>Perceived quality of free time in public spaces (80.1p)</b> persons who think that the quality of their free time in public spaces is satisfactory</p> <p><b>Practice of healthy leisure (70.1p)</b> People who practice healthy behaviours for leisure /avoid unhealthy leisure</p> <p><b>Benefits from urban nature (72.1p)</b> Persons who think that urban nature contributes to their well-being</p> <p><b>Benefits from social and recreational public spaces (81p)</b> persons who think that social and recreational public spaces contribute to their well-being</p>
Employment	<p><b>Opportunity to find a job in the city(83p)</b> persons who are satisfied with the opportunities offered by the job market at city level</p> <p><b>Expected sector of occupation (84p)</b> persons who think they can find a job in a specific sector in the next 6 months (options depending on the city context: i.e. tourism for Nitra: pets care/pets related social and entertainment services for Lucca; food related services for Nitra)</p> <p><b>Satisfaction with one's own competencies, skills 1 (85p)</b> persons who are satisfied with their level of skills and competences</p>

	<p>Satisfaction with one's own competencies, skills 2 (86p)</p> <p>Persons who think that their education, skills and competences will be helpful to find a paid job in the city</p>
Financial situation	<p>Satisfaction with one's surroundings/living environment (91p)</p> <p>satisfaction related to one's own surroundings/living environment</p>

### Storytelling: Sub-dimensions and indicators involved (Riga)

Sub-dimension	Indicator/Description
Social Inclusion	<p><b>Domestic isolation (36.1p)</b> Persons who spend the majority of their time alone at home</p> <p><b>Social engagement 2 (41p)</b> persons who are satisfied with their level of involvement in the local community life</p> <p><b>Social engagement 3 (42p)</b> People who are committed to take care of public spaces and green areas in their neighbourhood</p> <p><b>Change-making attitude (43p)</b> persons who believe they can change the reality of their neighbourhood (social situation, beauty/attractiveness of the space, economic situation)</p>
Equality	<p><b>Sense of being treated equally (45p)</b> Persons who feel they are treated with less courtesy and respect than others (or other groups)</p> <p><b>Obstacles for the access to culture and leisure (49p)</b> Persons who think to have economic, time, family, mobility, cognitive, cultural obstacles in the access to culture and leisure opportunities in their City/neighbourhood</p> <p><b>Obstacles for the access to training opportunities (53p)</b> Persons who think to have economic, time, family, mobility, cognitive, linguistic/cultural, social obstacles in the access to training opportunities in their city</p>
Spatial well-being	<p><b>Inclusiveness of public squares and green areas (62p)</b></p>

	<p>Persons who feel free to access, to use and to move within the public squares and green areas in their neighbourhood</p> <p><b>Sense of belonging and perception of the neighbourhood (65p)</b></p> <p>Number of persons who like their neighbourhood; who think that it has a good reputation; who think that the image of the neighbourhood has improved in the past two years; who think it could attract more tourists in the next years; who would not move to another neighbourhood</p>
Determinants of Health	<p><b>Self-grown fruit and vegetables consumption (58p)</b></p> <p>persons who declare to consume self-grown fruit and vegetables</p> <p><b>Awareness and motivation towards healthy habits (66.1p)</b> persons who are aware about healthy habits and motivated to change their lifestyles</p>
Sport Facilities	<p><b>Benefits from Sports (64p)</b></p> <p>persons who think that sports/physical activity contributes to their well-being</p>
Leisure and free time	<p><b>Perceived quality of free time in public spaces (80.1p)</b></p> <p>persons who think that the quality of their free time in public spaces is satisfactory</p> <p><b>Benefits from social and recreational public spaces (81p)</b></p> <p>persons who think that social and recreational public spaces contribute to their well-being</p>
Employment	<p><b>Opportunity to find a job in the city(83p)</b></p> <p>persons who are satisfied with the opportunities offered by the job market at city level</p> <p><b>Expected sector of occupation (84p)</b></p> <p>persons who think they can find a job in a specific sector in the next 6 months (options depending on the city context: i.e. tourism for Riga: pets care/pets related social and entertainment services for Lucca; food related services for Riga)</p> <p><b>Satisfaction with one's own competencies, skills 1 (85p)</b></p> <p>persons who are satisfied with their level of skills and competences</p> <p><b>Satisfaction with one's own competencies, skills 2 (86p)</b></p> <p>Persons who think that their education, skills and competences will be helpful to find a paid job in the city</p>
Financial situation	<p><b>Satisfaction with one's surroundings/living environment (91p)</b></p> <p>satisfaction related to one's own surroundings/living environment</p>

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**Storytelling: Sub-dimensions and indicators involved (Lucca)**

Sub-dimension	Indicator/Description
Social Inclusion	<p><b>Freedom of personal contact (36.2p)</b> people who experience a sense of freedom, absence of discomfort and tranquility in personal relationships</p> <p><b>Domestic isolation (36.1p)</b> Persons who spend the majority of their time alone at home</p> <p><b>Social engagement 2 (41p)</b> persons who are satisfied with their level of involvement in the local community life</p> <p><b>Social engagement 3 (42p)</b> People who are committed to take care of public spaces and green areas in their neighbourhood</p> <p><b>Change-making attitude (43p)</b> persons who believe they can change the reality of their neighbourhood (social situation, beauty/attractiveness of the space, economic situation</p>
Equality	<p><b>Equal access to culture and leisure (48p)</b> Persons who believe to have the same opportunity than others to access the available cultural and leisure opportunities in their city/neighbourhood</p> <p><b>Obstacles for the access to culture and leisure (49p)</b> Persons who think to have economic, time, family, mobility, cognitive, cultural obstacles in the access to culture and leisure opportunities in their City/neighbourhood</p> <p><b>Equal access to pet's care services (50.1p)</b> Persons who believe to have the same opportunity than others to access pet's care services</p> <p><b>Obstacles for the access to social care services and health services (51p)</b> Persons who think to have economic, time, family, mobility, cognitive, linguistic/cultural, social obstacles in the access to social care and health services in their city/neighborhood</p> <p><b>Obstacles for the access to training opportunities (53p)</b></p>

	Persons who think to have economic, time, family, mobility, cognitive, linguistic/cultural, social obstacles in the access to training opportunities in their city
Spatial well-being	<p><b>Inclusiveness of public squares and green areas (62p)</b> Persons who feel free to access, to use and to move within the public squares and green areas in their neighbourhood</p> <p><b>Sense of belonging and perception of the neighbourhood (65p)</b> Number of persons who like their neighbourhood; who think that it has a good reputation; who think that the image of the neighbourhood has improved in the past two years; who think it could attract more tourists in the next years; who would not move to another neighbourhood</p>
Determinants of Health	<p><b>Self-grown fruit and vegetables consumption (58p)</b> persons who declare to consume self-grown fruit and vegetables</p>
Sport Facilities	<p><b>Benefits from Sports (64p)</b> persons who think that sports/physical activity contributes to their well-being</p>
Cultural Consumption	<p><b>Benefits from culture (67p)</b> persons who think that cultural activity contributes to their well-being</p>
Leisure and free time	<p><b>Perceived quality of free time in public spaces (80.1p)</b> persons who think that the quality of their free time in public spaces is satisfactory</p> <p><b>Benefits from social and recreational public spaces (81p)</b> persons who think that social and recreational public spaces contribute to their well-being</p> <p><b>Benefits from human-animal bonds (82p)</b> persons who think that animals/pets contribute to their wellbeing</p>
Employment	<p><b>Opportunity to find a job in the city(83p)</b> persons who are satisfied with the opportunities offered by the job market at city level</p> <p><b>Expected sector of occupation (84p)</b></p>

	persons who think they can find a job in a specific sector in the next 6 months (options depending on the city context: i.e. tourism for Lucca: pets care/pets related social and entertainment services for Lucca; food related services for Lucca)
Financial situation	Satisfaction with one's surroundings/living environment (91p) satisfaction related to one's own surroundings/living environment

### b. Inviting the participants and collecting their informed consent

Participants may receive a forma invitation letter (by e-mail, if possible). A model of invitation letter is included in Annex 5. You can modify the model to arrange the date and time of the interview according the modality of story collection.

Participants must receive the information sheet, the privacy notice and they have to fill in and sign the informed consent for the participation to the interview as well as for the processing of personal data (see Annex 6), in paper or in digital format, before the beginning of the interview.

When proposed in paper format, the signed consent form should be stored in locked cabinets and the digital copy should be stored in the IN-HABIT Microsoft Sharepoint repository (not on personal computers).

### d. Collecting the Story

The interview should be recorded (in audio or video format). Start the open conversation with an initial question. Although it is an open interview without rigid scheme, try to guide the discussion in order to get the information described in the following story track.

### e. Reporting

After the interviews you should upload in Microsoft Sharepoint the following documents:

- audio or video file of the interviews

information sheet including privacy notice and consent forms filled and signed by the participants

5 storytelling reports in EN (model available in Annex 8). When transcribing the participants' contributions/responses please pay attention to never identifying people by name

**Storytelling track – baseline study** (Example based on the sub-dimensions of “employment”)

Help people telling how their life has changed after COVID 19 following this track

<p><b>Starting situation.</b> protagonists tell about their starting condition defined in time and space</p>	<p>The guiding question may be: “what was your employment situation before the Covid pandemic?” Were you satisfied about your job? How easy was it to find a job in the city which was adequate to your competences?</p>
<p><b>Triggering event.</b> It is a fact, or an event, which generates the change in a specific aspects of life. In this case the Covid 19 Pandemia</p>	
<p><b>Change.</b> How people's lives have changed in regard to one or more qualitative indicators?</p>	<p>How changed your job situation since the outbreak of the pandemic?</p>
<p><b>New situation.</b> The protagonist describes the new condition trying to bring out differences</p>	<p>What is your job situation now? Is the city offering adequate job opportunities?</p>
<p><b>Future evolution.</b> The protagonist reflect upon how their condition could change in the future as well</p>	<p>What do you expect from the future? Do you think that your competences will help you finding a job in the city?</p>