

INCLUSIVE IMPACT ASSESSMENT

The purpose of the
methodology, what it is
about and its relevance to
IN-HABIT.

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Assessing the impact of IN-HABIT's visionary and integrated solutions on people's Inclusive Health and Well-being (IHW) will allow us to capture the short- to medium-term changes affecting people's condition in the four pilot cities.

In particular, we will focus on the dimensions of social well-being, economic well-being, healthy lifestyles, and mental health.



The purpose of this evaluation includes the following elements:

- it aims to **isolate the changes** which are - at least in part - attributable to the IN-HABIT solutions
- it aims to **measure the quality and quantity** of these changes compared to a baseline;
- it will look at both **expected and unexpected changes** produced by the solutions.



We will try to answer the following **evaluation questions**:

- How and to what extent have people's health and well-being improved thanks to the IN-HABIT solutions?
- Does the impact show any significant difference among the groups at risk of discrimination in each city?
- Which sub-dimensions of health and well-being have been most affected by the solutions?
- How and to what extent have the results of the project been influenced by the Covid-19 pandemic?



Within the IN-HABIT project, **IHW** is defined as “an equitable distribution of health and well-being in a society, in a way that takes particular account of the needs of groups vulnerable to discrimination and exclusion such as the elderly, women, migrants, ethnic minorities, LGBTIQ+ people, and persons with disabilities”. [1]

The assessment of the IN-HABIT project’s impact will take into account the role of Gender, Diversity, Equity, and Inclusion (GDEI) in the solutions’ success in terms of enhancing the health and well-being of inhabitants in the four pilot cities.

The GDEI perspective is mainstreamed across the whole evaluation plan, considering the following assumptions:

- 1) The envisaged nature based, social, cultural, and digital solutions may have different impacts on local inhabitants depending on their personal characteristics, since they may benefit from these solutions in different ways.
- 2) GDEI personal characteristics and conditions such as age, gender, legal status, country of birth, ethnicity, sexual orientation, gender identity, disability, religion, and belief may influence the perception of well-being and health and, consequently, the definition of expected results, indicators, and self-reported changes.

[1]Glossary, GDEI Toolkit for Stakeholder Engagement, IN-HABIT D5.1



We make use of an **inclusive impact assessment approach**, where:

- project results which may be influenced by GDEI personal characteristics are empirically defined through **GDEI indicators**;
- people at risk of discrimination and exclusion are **involved in the co-design of the results indicators** from the start, as well as in the **data collection actions**;
- specific attention is paid to those incentives and actions that may **encourage the participation of persons at risk of discrimination and exclusion in the research activities**, thanks to the involvement of local observers and activators.

The proposed evaluation framework is characterised by the **strategic and cross-use of qualitative/quantitative research methods** such as **surveys** (including gamified surveys and mobile experience sampling) and **secondary data analysis**, as well as **content analysis** from storytelling, behavioural games, focus groups, and interviews.

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