Applied Equity Example: Kingdon model

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Overview: In Turin, Italy, a city of 900,000 people, a team of researchers, local policy makers, and other community representatives from different sectors worked on an evidence-based decision-making process to address social health inequalities and foster intersectoral actions. Guided by the methodological approach of action-research, the team carried out the following three-step process: 1) Co-investigation (joint analysis of the city's health inequalities profile with city officials, informed by the Turin Longitudinal Study), 2) Co-decision (organization of a conference aimed at priority and target setting to reduce inequalities) and 3) Co-creation and implementation of actions (site and topic identification for a community-based pilot intervention). The article reports and reflects on the two-year process and aligns the Kingdon model with the project's phases.

Population: Residents of the city of Turin, Italy

Topic: Urban policies **Setting:** Turin, Italy

Socio-ecological level(s): Local city government

Sector(s): City

Type of study: Case study Framework(s): Kingdon model

Implementation stage: Pre-implementation

Health equity dimension(s): Health equity in all policies (HeiAP); community co-

design/participation

Implementation strategies: collaborative priority setting; organizational improvement team with a health equity audit; cooperative learning methodology to support intersectoral collaboration.

Dissemination and Implementation Science Framework: Kingdon model

How TMF is operationalized: The Kingdon model is used in coordination with the project's phases. The first phase (co-investigation) is used to define the problem stream. The second (co-decision) and third (co-creation) phases have to do with the proposed policy solution and the political stream which the authors show visually and also refer to the window of opportunity.

How equity is applied: This case highlighted two equity dimensions. With respect to <u>health</u> equity in all policies, the team brought together collaborators from multiple sectors within the city including: the Ministry for Social and Health Affairs, the Ministry of Innovation, public housing, the local health authority, trade unions, non-governmental organizations, and

businesses. The authors recognize that these different sectors need to be together at the table in order to foster equity policy-making for the city. Their work in this dimension builds on a tradition of health equity monitoring and advocacy that has been in place for several decades through a longitudinal study (a census-linked study that monitors health and social status) carried out in coordination between the local health authority and the municipal authority. During the project, collaborators began by analyzing epidemiological data on social inequalities in health. They were then asked to rate potential policies and interventions for their expected health and equity benefit, considering eight social determinants of health. They used the metric of health burden attributable to social inequalities.

For the <u>community co-design/participation</u> dimension, this project created a space for collaborators to participate equitably in co-investigation, co-decision, and co-creation. The project created a mutual learning space between researchers and city collaborators with an emphasis on creating horizontal social relationships. The process created a collaborative partnership or network and the definition of a pilot intervention to be implemented through intersectoral action.

Contribution to Dissemination and Implementation Science: This case contributes to the field by sharing an example of how to create governance structures and mechanisms for a health equity in all policies approach at the local level. The project shows how researchers and collaborators from different sectors can collaboratively analyze epidemiological data, prioritize policies and interventions based on their expected health and equity benefit, and define a pilot effort to implement through intersectoral action.