What types of health evidence are persuasive in a complex system?



The issue

Tackling complex health problems requires joined up cross-sector working between stakeholders with diverse objectives. Evidence is one tool that can be used to bring stakeholders together and to influence decision-making processes. However, the challenge of using evidence to persuade policy actors to think more about health is enhanced when working in a complex system with multiple stakeholder groups with different priorities, preferences, values and skills.

Urban development in England is an example of a highly complex multi-actor system that is currently failing to produce the good quality urban environments that can support good public health. Our research suggests that one reason for this is that health evidence is insufficiently informing decision-making in this system.

Our response

We sought to understand what types of health evidence will appeal to different policy actors who shape urban development in England. Our analysis revealed insights into the evidence preferences of urban development policy actors that can be used when designing evidence to land across this system: Our central finding is that presenting evidence as a well-constructed narrative is an effective way to reach decision makers throughout the urban development system. Narratives based on real world or lived experiences that help stakeholders form emotional connection with evidence were consistently seen as powerful. However, there are some sectoral differences in the types of evidence that actors view as useful.

- Credibility of evidence is important. To have impact, narratives must be backed by credible data. Public sector actors, most prominently within central government, demonstrated a strong preference for quantitative data.
- Data linking features of the urban environment and health, particularly mortality and child health outcomes, are seen as persuasive, especially amongst public and third sector actors.
- Regulatory and institutional requirements act as a limit on how health objectives are currently included in decision-making. Demonstrating the economic impacts of health outcomes linked with features of the urban environment can be persuasive, particularly for private sector actors where data demonstrates a commercial advantage to developers or businesses.



Local authority partners

GMCA





University consortium

BATH







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The evidence

We wanted to understand how to use evidence to bring stakeholders together to tackle the challenge of creating healthier urban environments. Therefore, through analysis of qualitative interviews with 132 influential actors across the urban development system we sought to answer the central research question: *How can health evidence appeal to diverse actors in a complex system*?

Study participants across the urban development system					
Primary role	Public sector/ Local regional	Public sector national	Private sector	Other	Total
Property developer	5	2	24	0	31
Urban planner	15	3	5	3	26
Finance	0	3	18	0	21
Transport	6	3	3	1	13
Public Health	7	2	0	2	11
Politician	8	1	0	0	9
Environment/ Sustainability	3	2	1	1	7
Other	5	4	2	3	14
Total	49	20	53	10	132

The policy problem

Power and decision-making in the urban development system in England are spread over multiple sectors and processes:

- Private sector actors such as property developers, landowners and investors drive the development of urban areas and influence policy agendas,
- The private sector is subject to government policies, laws and regulations that are set out and enforced by politicians, civil servants and local officials,
- A range of organisations such as charities and policy institutes seek to influence the delivery of urban development, including advocating for healthier and more equitable urban places.

This includes a wide range of stakeholders, who hold different preferences and values that affects their use of evidence and how persuasive they find it. Stakeholders across the system are also subject to different regulatory requirements. Health is not always an important outcome against which success is judged and regulatory and institutional requirements can limit the ability to accommodate health in decision-making – particularly in the private sector. This does not mean that actors do not care about public health outcomes, but that achieving health outcomes are often superseded by other pressures. This limits the potential for health evidence to have impact in some urban development processes. Therefore, persuading stakeholders across the system not only requires designing evidence to appeal to all, but changes in governance and regulatory principles that will give urban policy actors the opportunity to demonstrate population health benefits alongside other requirements.

Recommendations

The insights from this study can be used to design evidence that meets the requirements of different urban development actors and can persuade them to think more about health in decision making processes.

Narratives designed to evoke an emotional response backed by credible data are influential across sectors and organisations.

Valuation tools that demonstrate the system-wide economic impacts from how the urban environment affects health outcomes can provide persuasive evidence.

About Truud

About TRUUD's economic valuation tool – HAUS identifies who gets ill and with what disease, as well as the economic cost of ill health and where these costs are incurred across the system. It provides a bank of clearly defined pathways covering a wide range of factors from air pollution to walkability and over 70 health outcomes. We produced a short video to explain how it works and the potential applications of HAUS. Watch our short film explaining how it works and could be used by developers, planners and other decision makers. www.youtube.com/ watch?v=bhcJN2WKAvo&t=76

'Tackling the Root causes Upstream of Unhealthy Urban Development' (<u>TRUUD</u>) is a 5-year, £6.7m research project that aims to design policy interventions to support the development of healthier urban environments. Our research seeks to promote a fundamental shift in thinking about how to prioritise healthy urban development. We are funded by the <u>UK Prevention Research Partnership</u>.

Contact the authors

Geoff Bates, Sarah Ayres and Andrew Barnfield specialise in TRUUD on influencing the wider determinates of health in Whitehall. For more information contact <u>truud-policy@</u> <u>bristol.ac.uk</u>. This briefing is based on their article "<u>What</u> <u>types of health evidence persuade actors in a complex</u> <u>policy system</u>" published in Policy and Politics.