

Human-Centered Design in Emergency Public Health Response

LESSONS LEARNED

AGENDA

About IDEO.org + NRC-RIM

What is co-design and how do we do it?

What community-led has looked like for this program

Learnings + reflections

1. IT'S NICE



TO MEET YOU

About IDEO.org, The National Resource Center for Refugees, Immigrants and Migrants (NRC-RIM), and why we're gathered here today

NRC-RIM

Funded by the CDC to support health departments + community orgs working with refugee, immigrant, and migrant communities that have been disproportionately affected by COVID-19.



IDEO.ORG

Leveraging a human-centered design approach to co-creating with communities



CO-DESIGN

We follow a human-centered process where those who will benefit, deliver, or use a solution are an integral part of its creation



HCD + PUBLIC HEALTH

The pandemic has underscored the potential of co-design in health

Relevant

By centering community needs, we aim to better understand and design for specific community needs, concerns, and myths surrounding COVID-19.

Co-Owned

The process of co-designing with communities also means co-ownership, where solutions are developed with the change agents that will implement and scale them.

Culturally-Affirming

We recognize that developing moving messaging goes beyond accurate translations. By working closely with community leaders we're building customizable tools that can be adapted to serve hyperlocal needs.

Inclusive of Diversity

Our hope is to engage everyone with various vaccine perspectives in conversations. To help shift mindsets, we need tools that make everyone feel heard and validated.

As part of our Vaccine Confidence work, we have co-designed:



Mothers x Mothers

Mothers for Mothers (MxM) is a peer health meetup hosted by mothers, for mothers to discuss the COVID-19 vaccine. The toolkits enable organizations to easily plan, budget, and host MxM meetups.



Makespace

Vaccination Is consists of a series of templates that can be used to create hyperlocal messaging including posters, social media posts, fact sheets, and more that encourage refugee, immigrant, and migrant communities to consider the COVID-19 vaccine.



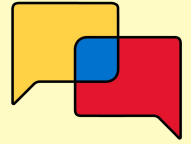
#NoJudgment

#NoJudgment was developed with a youth collective, and includes tools that help youth from refugee, immigrant, and migrant communities engage in judgment-free conversations around the COVID-19 vaccine. These tools help foster and navigate conversations.

WHY WE'RE HERE**TOGETHER,
WE'LL EXPLORE:**

- 1) Principles that guide our approach to co-design
- 2) Guidelines on how we set up co-design experience with our partners
- 3) Activities we did to co-design community driven messaging
- 4) Reflections on an evolving process

2. WHAT IS



CO-DESIGN

WHY and HOW do we do it

Co-design is a participatory approach that aims to design with, not for, people.

The goal of co-design is to involve people in shaping decisions about future services, programs, systems, and/or policies that directly impact them. In this way, it seeks to redistribute and shift power.



A co-designed poster from the Dari/Afghan community

We're exploring what it means to shift our work towards meaningful co-creation and self-determination

DONE FOR



CRAFT-CENTRIC

Designers craft ideas from their frame of reference and their interpretation of the people's needs.

DONE WITH



CO-CREATION

Those who will benefit, deliver or have the power to influence the solution create the design solution at each stage of the project progression.

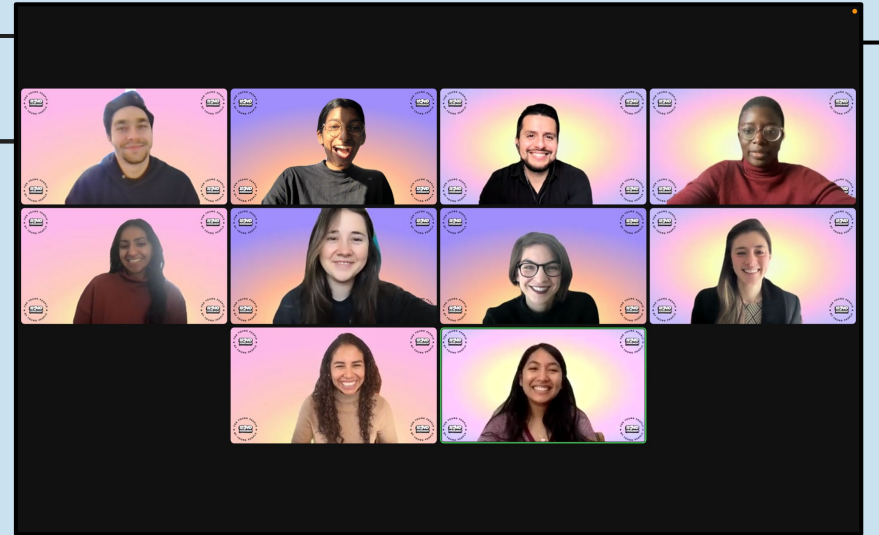
DONE BY



SELF-DETERMINED

The manifestation of solutions are led and determined by people who serve to benefit.

***How have you worked
with collaborators?***



Youth Design Collective who co-created #NoJudgment

We're exploring what it means to shift our work towards meaningful co-creation and self-determination

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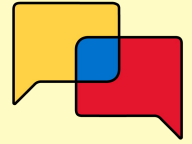
DONE BY



SELF-DETERMINED

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3. EXPLORING



THE SPECTRUM

What does co-design feel like? How do we practice it?

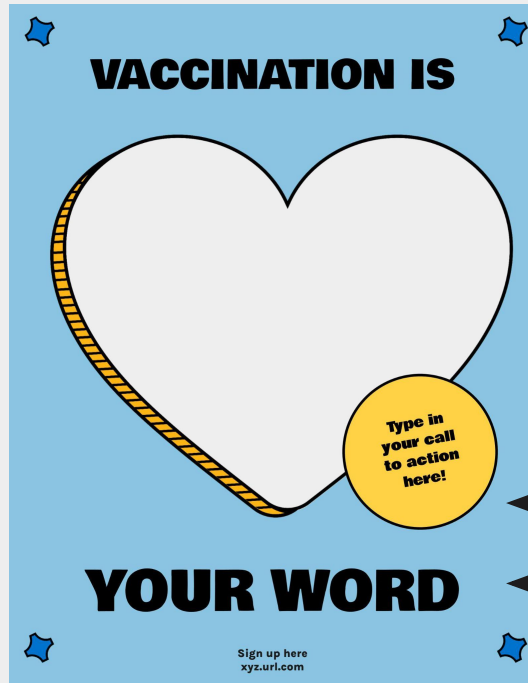


How might we create messaging campaign that advocates for the COVID-19 vaccine, and addresses reasons for vaccine hesitancy in your partner's community?

Your task for the next 20 minutes is to learn, and design for/with the person sitting next to you. For the sake of time, the person whose birthday is earlier in the year will represent their community, and the person whose birthday is later in the year will represent the designer.

STEP 1: take 4 minutes to get to know each other. Share your name + describe what you would consider to be your community (i.e. “east coast parent,” “Venezuelan immigrant woman”, “grassroots healthcare advocate” Describe what the vaccine represents in your community (both positive and negative)

EXERCISE #1



Step 2: Designers, given what you've heard from your partner, fill in the poster on the left. Add a word for the vaccine and type in your call to action.

Add a call to action.

Add a word

Where would you place what you've just done on this spectrum?

DONE FOR



DONE WITH



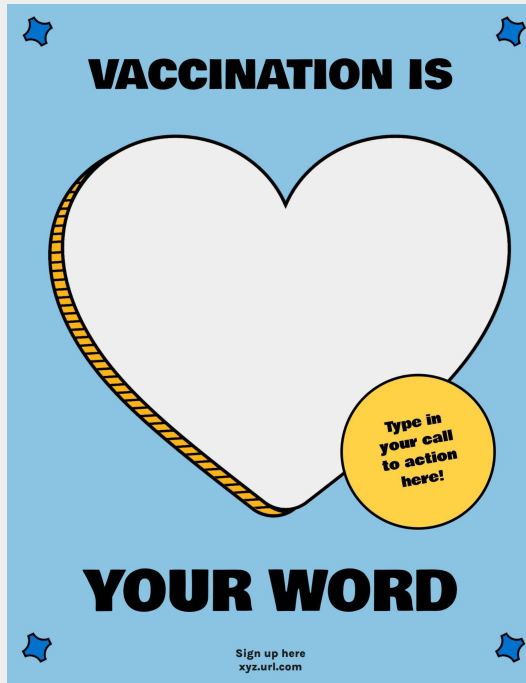
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HUMAN-CENTRIC

Those who are impacted by the solution are consulted to inform or inspire the final output.

EXERCISE #2



Step 1: This time, create 2-3 slogans (“Vaccination is ____”) based on what your partner shared.

Step 2: Share these slogans with your partner and ask them to pick the one that would best resonate with their community.

Where would you place what you've just done on this spectrum?

DONE FOR



DONE WITH



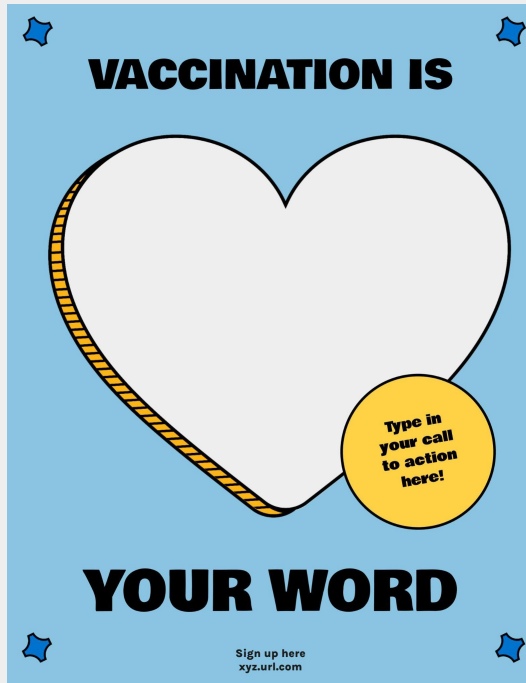
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PARTICIPATORY

Designers invite active participation and engagement from the end user in generative moments of making.

EXERCISE #3



Step 1: This time, show your partner the Vaccination is ___ poster. Ask your partner to wonder out loud on what could fill in the blank.

Step 2: Capture what was said.

Where would you place what you've just done on this spectrum?

DONE FOR



DONE WITH



DONE BY



CO-CREATION

Those who will benefit, deliver or have the power to influence the solution create the design solution at each stage of the project progression.

CO-DESIGN

As co-creators our role is to create the conditions for community members to bring their full selves to the work we do.



CONSIDERATIONS

What are the implications of moving further towards community-led work?

As power and ownership of decisions shift, the time investment required of co-designers also increases.

As ownership over ‘making’ shifts, we need to ensure that participants are positioned to show up in ways that match willingness, desire, and expertise.

Simply because greater community involvement has benefits, we do not assume that every community partner has the desire or availability to be a co-creator, OR that every project should be in a particular place on the co-design spectrum.

LINGERING QUESTIONS

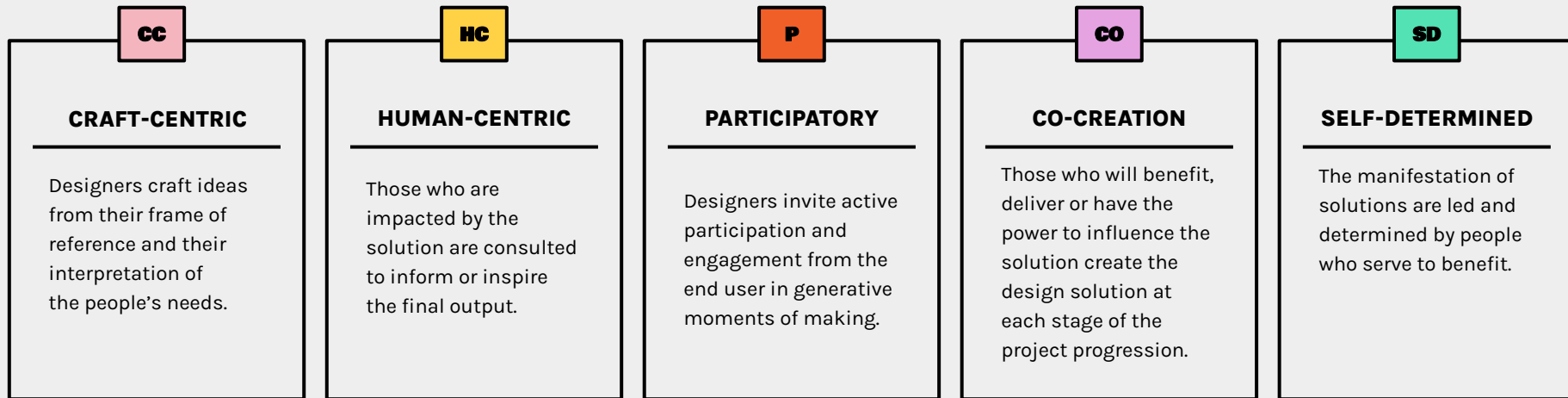
Questions we're asking ourselves

Promoting ownership and hyperlocalization inevitably means community leaders are taking on more work, in addition to the (often unpaid) work they are already leading in their communities. As a team, we have witnessed the value of taking a community-led approach, but are also asking ourselves:

- How can we effectively transfer ownership without making it more work?
- How can this community-driven design approach better serve leaders' visions for community health and well-being?
- How can we leverage these approaches to design more inclusive public health services and initiatives for marginalized communities?

A CO-DESIGN SPECTRUM

Informed by existing resources on co-design, we use this spectrum within our program as a guiding tool to understand the type of co-design that is practiced in a particular project and to define partnerships with our partners.



THE 'DESIGNER'

CC

Strongly Held
Done "for"

HC

P

CO

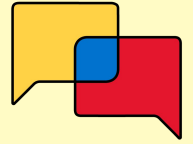
Shared
Done "with"

SD

Strongly Held
Done "by"

THE 'PEOPLE'

4. CO-DESIGN



IN PRACTICE

What community-led co-design has looked like for our work

CO-DESIGN

HOW WE SET-UP AND ENGAGED CO-DESIGNERS

Recruiting co-designers

- We look to people with lived experience who are well-connected in the community. We often rely on our community partner to help us identify great co-designers

Setting expectations

- Generally we ask for for 2-3 hours per week spent with the design team, and 2-3 hours spent with the community gathering inputs

Payment

- We typically extend flat fee stipend for each co-designer, \$2000 for 10 week project = ~\$33/hr. Additional involvement beyond ~4 hours a week is compensated separately.

Examples of evolution



Youth-Centered Info Source

Tool: website with content

Imagine an informational covid website that is designed to engage youth. This is a vibrant and easy to navigate website that simplifies vaccine concerns, explains myths, and shows information in a neutral way with youth-centered language and characters. It could include interactive elements like quizzes, videos, debates, or animations. Meant to be shared and read by youth who are curious to learn more.

What we'd make

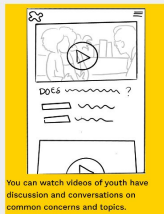
- virtual anonymous "confession booth" to share questions and concerns
- videos, audio, or text scripts demonstrating "two sides" of the conversation
- tools to create your own conversation pointers
- interactive quizzes to help you navigate information and concerns

Real Talk Reps Training A virtual training program for equipping youth community leaders and influencers to formally train them to lead "non-judgmental" conversations.	Testimonial Toolkit Guides and tools to help youth share their personal covid experience and testimonials on social media.	Post-Covid Challenge A quality and engaging post-covid challenge as a means to engage others in conversations and draw awareness to the realities of covid.	Spark Talks Kit Spark Talks, an in-depth kit to starting open, nonjudgmental conversations around vaccines.
Comedic Influencers Campaign An influencer campaign to spread messages and facts about the covid vaccine with more joy and irony.	Youth-Centered Info A vibrant and easy to navigate website that simplifies vaccine concerns, explains myths, and shows information in a neutral way.	Safe Space Convos Guides to moderating honest safe space conversations with hearing circles about covid vaccine concerns either existing organized conversation settings.	Eye-catching stickers Provocative stickers and messages to share with hearing circles about the covid vaccine being in hallways and public places where youth already hang out.

How it works



Imagine a website called "Vaccine Real Talk" made just for youth. It offers simple interactive updates on covid concerns and the vaccine in multiple languages.



You can watch videos of youth have discussion and conversations on common concerns and topics.



You can see text-based scenarios and exchanges of other youth as examples of conversations people are having about the vaccine, or even try an interactive text-message conversation or quiz on a topic.

Concept Questions

1. What is working well with this idea?
2. Is there anything about this idea that makes you question it?
3. What would make it better?
4. Could you see yourself using this? What kinds of people do you think this would be good for?
5. What websites do you go to for more vaccine information today? What do you love or hate about it? What websites do you love going to in general (not covid related)?

Reference example



Example

ballot.fyi explains ballot measures in California in a neutral, easy to understand way



Example


Isnotviolent.com uses interactive text-conversations to explain different kinds of partner-based violence

Examples of evolution

Explore Info Bites

It's ok to feel anxiety about the COVID-19 vaccine. Below is a set of clear responses to common vaccine concerns that we hope will help you make the best decision for yourself.


Safety Concerns




"Help me understand the Omicron variant and how it's different."

Omicron is basically the same, but has a few key differences from Delta, and the previous variants. Here are the 3 key ways it's different:

- It looks like omicron spreads from person to person more easily. Even when you don't have symptoms.
- For Delta, it takes about 5 days after exposure before you get symptoms. For Omicron, it's about 3 days.
- The good news: it looks like Omicron is less severe than Delta. BUT that's true mostly for boosted people. AND even if it's less severe, if more (mostly unvaccinated) people end up in the hospital, that could still overwhelm the healthcare system.



"I'm worried that the vaccine will affect my period."




"I just want to understand how the vaccine was developed. I'm worried that the vaccine was developed too quickly and isn't safe."




"I'm worried about all the side effects of the vaccine."

Logistical Concerns




"How much will the vaccine cost? Do I need to get insurance to get it?"

Bottom line: it's free, and you don't need insurance! They might ask you for your insurance, but if you don't have it, you can still get a free vaccine. If you do have insurance, the vaccine won't cost you anything. Right now the most important thing is to keep everyone safe so that could be one reason that you don't need insurance to get the vaccine. If you are in college or in school, you can probably get the vaccine on campus! It should be totally free.




"I'm the only one who speaks English in my family - what's a good 1-2 sentence way to explain the need for and benefit of the vaccine to my family?"




"I want to get the vaccine but I can't afford to take time off work."

- Many employers are supportive of employees getting vaccinated. See if you can talk to your manager or boss about getting vaccinated and any time off that you might need. Some places have cash incentives for getting vaccinated to cover your time off if you have to take it unpaid.
- Many pharmacies also offer vaccinations late in the evening, you can try using [vaccines.gov](https://www.vaccines.gov) to find a location near you!
- If you get COVID-19 you might have to take at least 5-10 days off work - more than the time off from getting the vaccine.




"Will my visa or migration/ immigration status be affected?"
"What if I'm undocumented, can I still get the vaccine?"


Societal Concerns




"I just don't trust the government."




"All the incentives make me suspicious. If it's so great why do we need all of those?"



"People like me have been discriminated against by the healthcare system."



"I just don't want to be told what to do!"



"It's in God's hands. If I'm going to get it, I'm going to get it. If it's my time, it's my time."

INSPO

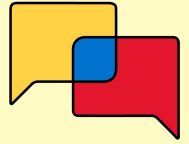
Who we are inspired by + what we're reading

A snapshot of the myriad thinkers who are informing and inspiring our work.

- [Refugee Women's Network](#)
- [Liberatory Design Cards](#)
- [Creative Reaction Lab's Field Guide to Equity Centered Community Design](#)
- [Design Justice Network's Zines](#)

Are there any resources you would recommend to the group?

4. SUMMARY



OF LEARNINGS

A few takeaways from our team

Invest time to build relation- ships.

While the urgency of the pandemic was making us want to work in faster, more top-down ways, this campaign process taught us that **grassroots approaches were quicker to pivot and more precise**, because they built off of a foundation of trust that leaders had spent years, even decades, cultivating with their communities. As we began bringing community members into the design process, that foundation of trust became evident: community members quickly provided opinions, tore apart bad ideas, and imagined their desired futures.

Design for flexibility, modularity and choice

In a rapidly evolving emergency response, having a small team of designers control the production of print and digital materials would be a bottleneck to getting the information out. So rather than stay locked up in inaccessible software programs, we used tools like Google Slides so leaders could easily and quickly add their slogan, choose from an expansive image bank, and craft a call-to-action that guided them to a state-specific resource. These **templates allowed community leaders to focus on what was important** and create with minimal support from a designer. It's given leaders an opportunity to practice their creativity in new ways.

Start with what's familiar

- **Ground in what's already working in communities:** instead of duplicating or reinventing the wheel. Chances are - people have created systems that are already working for them (such as WhatsApp group) that you can tap into.
- **Start with visuals, language, and tone that are familiar:** For example, write content in Dari and then translate to English
- **Find ways to leverage your leaders to take leaps instead of steps:** Leaders often have great intuition around what works well for their community. Trust in their instinct.

Make first

We strongly believe in bad first ideas.

We'll often hold brainstorming sessions where quantity > quality. If we can get big, broad, and divergent, and then narrow on quality ideas, we can often get further, faster.

Putting your ideas down on paper, in a low-fidelity way (a quick sketch, a draft paragraph), can allow you to get quick feedback on the core idea and help you build it out.

Be intentional about where you are on the spectrum

We know that engaging and embarking on a co-creation approach takes time, alignment, investment and trust. While a co-creation setup may not be the best approach for all projects, we fundamentally believe in the value of approaches that center community needs in augmenting healthcare service delivery. So we encourage you to explore opportunities to make work human-centric, participatory or co-created depending on the needs, capacity, availability and trust that exists between partners in any given project.

MOVING FORWARD

We're continuing to work towards a world where we make room for co-designers to co-create while also balancing the fact that co-creation requires more time, energy, commitment.

How can we effectively transfer ownership without making it more work? How can this community-driven design approach better serve leaders' visions for community health and well-being? How can we leverage these approaches to design more inclusive public health services and initiatives for marginalized communities?

CLOSING DISCUSSION

What's resonating with you? What's inspiring you?

Given what you've heard today, how are you inclined [or not] to rethink the way you approach your work?