Design for Health

Conversation Guide: Talking Points on Design

www.designforhealth.org
ABOUT THIS RESOURCE

This conversation guide provides design pioneers and design advocates in the global health community with credible, relatable, and concrete talking points that address the questions and concerns of others in the community who might be reluctant, curious or enthusiastic about using design in their work. While this guide has been developed from the point of view of a design pioneer, it can be used by anyone advocating on behalf of design in the global health community.

RESOURCE FEATURES

The conversation guide includes:

- An assessment tool that can help you identify and understand your audience
- Talking points to address the concerns and needs of skeptics and new users of design
- Resources and activities that support the talking points

HOW WAS THIS RESOURCE DEVELOPED?

- We spoke to people, from a representative cross-section of the global health community, who have encountered design in their work, so as to understand their questions and concerns about design’s use in global health.
- We engaged a group of advisors consisting of designers, funders, implementing partners, and other global health and design experts to respond to these concerns.
- These responses were then synthesized to identify themes around which the general talking points, resources, and activities have been built.
The tone and content of your conversation with your audience will have to vary based on their level of experience with design and willingness to engage with it.

We have created four, broad but distinct, audience profiles that you might encounter.

As the first step, identify the profile type that best matches your audience by answering the two questions provided on the following page.

Having identified your audience profile, you should now try to understand what might or might not work for them in a conversation about design.

We have listed some of the broader do’s and don’ts along with specific questions or concerns that each of the profile types might have.

In the second step, you can get a quick overview of your audience profile and then click on any specific question or concern about which you want more detailed guidance.

Now that you have isolated a specific audience concern, it is important to address this concern with compelling points.

For each of the questions or concerns listed, we have included the main conversation points, supporting resources, and suggested activities that can make your conversation more compelling.

It is also important to recognize that you might encounter people who don’t perfectly fit in any single profile. To that end, we have listed other profile types that the conversation might be applicable to.
Identifying Your Audience Profile
I like the theory behind design, but have not seen it work yet. I’ll give it a shot, but I remain skeptical.

The Curious

“I wonder how I would integrate design into my work. To be honest, I am still unsure about how this is different than what we already do.”

The Newbie

“Is there anyone who can give me a plain and simple definition of what exactly you mean by design? It sounds like another fad to me...”

The Trialist

“I like the theory behind design, but have not seen it work yet. I’ll give it a shot, but I remain skeptical.”

The Believer

“I’ve seen what design can do and I try to advocate for it, but I am no expert so I need better ways to guide and encourage others.”

IDENTIFY YOUR AUDIENCE PROFILE

Ask your audience members the two questions below and compare their answers with the information under each profile to find the best match.

- What is your level of experience with using design in global health?
- How valuable do you believe design is to global health projects?
Understanding Your Audience

The Newbie
The Newbie
“Is there anyone who can give me a plain and simple definition of what exactly you mean by design? It sounds like another fad to me…”

**WHAT WORKS FOR ME**

- I prefer explanations of what design is without the jargon.
- Show me the benefits of design using data and examples from successful global health related projects.
- Clearly articulate the limitations of design.

**WHAT DOES NOT WORK FOR ME**

- I don’t believe it when designers speak of design as a silver bullet that can solve all problems.
- I dislike the use of a patronizing tone that does not acknowledge the depth of my expertise and knowledge.
- I switch off when I hear the design jargon and lofty language to present simple facts.

**MY QUESTIONS AND CONCERNS**

- “I am getting a little tired of hearing about design because it is never really clear, especially when designers talk about it as a way to change our thinking processes.”
- “The struggle we had was that the design person speaking didn’t understand the technical topic area.”
- “Don’t start with the assumption that people know what design in programs, policies, services, etc. means. It doesn’t tell me very much. You need to illustrate through examples.”
- “It seems risky! The design process requires people to fully invest in all the steps in the process without being sure of the outcome.”
- “The designers’ language was very rigid. It was like they were selling products rather than facilitating our ability to think differently and to actually solve a problem.”
- “Do you really expect us to give you months to understand the context? That is really going to set us back, timewise!”
- “Designing a specific product/service by observing only a few people is not a proper process.”
- “Until I see hard numbers and facts about its impact, I cannot even start talking about design.”
Converse With Your Audience

The Newbie
QUESTIONS AND CONCERNS

“I am getting a little tired of hearing about design because it is never really clear, especially when designers talk about it as a way to change our thinking processes.”

MAIN CONVERSATION POINTS

1. Help them understand the design process by giving them an overview of it. You can refer to the Glossary of Design Terms for a definition of design and other related words.

2. Share the different ways in which design provides value. Your talking points will be stronger if you can highlight the specific values that are relevant to your project/conversation. You can also refer to the Value of Design.

3. Explain that design is highly experiential and that, if feasible, the best way to understand design is to go through the process.

4. Share relevant examples, from personal experience, in which design played a role in changing ways of thinking or pick an example from the Project Library.

RELEVANT AUDIENCE

The Newbie

SUPPORTING LINKS

- Glossary of Design Terms
- Value of Design
- Project Library

SUGGESTED ACTIVITIES

- Encourage participation in a workshop that can take them through the HCD process, if feasible.

- Ask them to talk to a colleague who has had first hand experience with HCD whenever new questions arise.
QUESTIONS AND CONCERNS

“The struggle we had was that the design person speaking didn’t understand the technical topic area.”

MAIN CONVERSATION POINTS

1. Explain that while designers might not have in-depth knowledge of the specific GH areas they are working in, they do have technical expertise in the design process and can help bring a fresh perspective. The design process is rooted in listening, curiosity, and questions and can involve probing, what may seem like, basic questions to avoid making assumptions. This can lead to additional insights.

2. To work most effectively, designers collaborate with global health practitioners by learning from them and using their expertise and guidance to scope out the knowledge gaps where further research can be done. Collaboration that combines different areas of expertise can achieve innovative results and is critical in order to avoid duplicative learnings.

3. Share relevant example from personal experience or pick examples from the Project Library.

RELEVANT AUDIENCE

The Newbie

The Trialist

SUPPORTING LINKS

● Project Library

SUGGESTED ACTIVITIES

● Before collaborating, use different types of stakeholder collaboration techniques to ensure technical alignment with all members of the project team including designers. A simple example of this could be to go around the project team in a circle and ask each person to explain their expertise in a simple one liner that begins with “I am an expert in...” Compare notes at the end of the share-out.
QUESTIONS AND CONCERNS

“Don’t start with the assumption that people know what design in programs, policies, services, etc. means. It doesn’t tell me very much. You need to illustrate through examples.”

MAIN CONVERSATION POINTS

1. Sharing examples is important. It is easier for people to see the Value of Design when they are provided with practical illustrations of how designers immerse themselves in the life of users and how they try to answer questions about what motivates and inspires them, what appeals to them, etc. Their feedback can help designers create a better experience for users and increase adoption down the line.

2. Point to the fact that, in the past few years, there has been an increase in the application of design in global health because of its ability to help address a number of challenges that are critical to achieving global health goals. Read more in the What is the history of design in health? and Design for value and growth report by McKinsey.

3. Share relevant examples from personal experience or pick examples from the Project Library.

RELEVANT AUDIENCE

The Newbie
The Curious
The Trialist

SUPPORTING LINKS

- What is the history of design in health?
- Glossary of Design Terms
- Value of Design
- Project Library
"It seems risky! The design process requires people to fully invest in all the steps in the process without being sure of the outcome."

MAIN CONVERSATION POINTS

1. Explain that while investing in the complete process of design may seem risky, design builds in checkpoints that make sure the process is on the right path. With design, you ask the user, “What do you think?” throughout the whole process. This is better than fully implementing a solution, only to find out later that it wasn’t adopted, or that it actually didn’t solve a deeper challenge. Through design, the user, the designer, and the global health practitioners co-create solutions that fit users’ needs and are relevant to their community.

2. Encourage an open discussion about the role of everyone on the team—global health practitioners and designers alike—to generate solutions that are both practical and feasible. Ensuring that the design, development, and implementation phases of a project go hand-in-hand can also help to ensure that the ideas are implemented well.

RELEVANT AUDIENCE

The Newbie
The Curious

SUPPORTING LINKS

- Value of Design
- Why Design for Health?
QUESTIONS AND CONCERNS

“The designers’ language was very rigid. It was like they were selling products, rather than facilitating our ability to think differently and to actually solve a problem.”

MAIN CONVERSATION POINTS

1. Remind them how design, like most other professions, might have its own language, or jargon. Encourage them to ask designers for clarification during discussions whenever something isn’t clear.

2. Suggest that familiarizing themselves with basic design processes and methods will help them see beyond the jargon, to the core ideas that designers are trying to convey. Read What is Design for Health?

3. Ask them to refer to the Glossary of Design Terms, whenever useful for further clarification.

RELEVANT AUDIENCE

The Newbie  The Curious  The Trialist

SUPPORTING LINKS

- What is Design for Health?
- Glossary of Design Terms

SUGGESTED ACTIVITIES

- Try out a workshop or a working session with the design team in which you can openly discuss key challenges of working together and learn ways to mitigate barriers and risks.
QUESTIONS AND CONCERNS

“Do you really expect us to give you months to understand the context? That is really going to set us back, timewise!”

MAIN CONVERSATION POINTS

1. Explain how, by investing time up-front to listen to users and develop a more complete understanding of a problem, design can save a lot of time that would otherwise be lost on solutions that don’t have the desired impact.

2. Explain how, by investing time up-front to listen to users and develop a more complete understanding of a problem, design can save a lot of effort that would otherwise be lost on solutions that don’t have the desired impact.

3. Share relevant examples from personal experience or pick examples from the Project Library.

RELEVANT AUDIENCE

The Newbie

The Curious

SUPPORTING LINKS

- Project Library
QUESTIONS AND CONCERNS

“Designing a specific product/service by observing only a few people is not a proper process.”

MAIN CONVERSATION POINTS

1. Point to the fact that design relies on qualitative data that helps it quickly identify trends and patterns. It starts with a nuanced understanding of what motivates a set of people and why. And then, through several rounds of iteration and testing, it provides data that informs designers what will work for a larger group or population. Working with relatively smaller groups of people allows design to go in-depth with that group, be flexible, test ideas quickly, and make pivots if necessary.

2. Explain that design can work with other approaches that are more quantitative as well. In fact, projects can be made richer by marrying quantitative methods with qualitative ones. Qualitative design research methods can help answer ‘why’ questions, while quantitative data can provide inputs on large behavior patterns in the desired user population. For example, if behavior change is the ultimate goal when addressing a problem, design can use inputs from quantitative methods to build concepts that make for a more effective solution.

3. Inform them how designers make use of ‘Personas’ or ‘User Profiles’ to represent different types of users or stakeholders they need to cater to. Using personas ensures that designers don’t see the target audience as a single homogenous group, but instead, understand that it is made up of individuals with differing needs and concerns. Such personas represent user segments with shared needs and characteristics within a target audience. They help add crucial context by focusing on the key characteristics that make each group different from the others.

4. Refer to the Complementary Approaches resource to learn how design can work with other approaches.

RELEVANT AUDIENCE

The Newbie  The Curious  The Trialist

SUPPORTING LINKS

- Why design for health?
- Complementary Approaches
- Glossary of Design Terms
"Until I see hard numbers and facts about its impact, I cannot even start talking about design."

**MAIN CONVERSATION POINTS**

1. Point to the fact that the community of practice, including designers, agrees that evidence is extremely important. However, results need not be limited to just numbers that can be measured. Design can add value in many ways some of which are intangible. Refer to the [Value of Design](#) resource. The Value of Design resource showcases the benefits of design classified into four broad themes:
   - Better outcomes (User)
   - Improved processes (Program)
   - Expanded capabilities (Organization)
   - Increased equity (System)

2. Highlight the fact that, in past few years, there has been an increase in the application of design in global health due to its ability to help address a number of challenges that are critical to achieving global health goals. Read more in the [What is the history of design in health?](#) and [Design for value and growth report by McKinsey](#).

3. Suggest that solutions developed through a design process can initially be run as pilots to measure impact before scaling.

4. Share how, as a community, we are actively trying to build an evidence base for design practices. You can read more about these efforts in [Roadmap for building evidence](#). Please share comments, if interested.
Understanding Your Audience
The Curious
The Curious

“I wonder how I would integrate design into my work. To be honest, I am still unsure about how this is different than what we already do.”

“What works for me

Show me the benefits of design through examples from successful, global health related projects.

Tell me how design is different from other approaches I am familiar with.

Tell me how I can integrate design into structured projects that already use other approaches.

What does not work for me

Uncertainty about budgets due to the fact that design interventions and solutions are often not clear until the final stages of a project.

Design proposals that need repeated reading to be understood.

Sharing benefits of design that are not unique from other approaches.

My questions and concerns

- “My interest in design stems from hearing about examples in which design changed a product/service to increase adoption and lead to direct health outcomes.”

- “Some of the design language was a bit hard to get my head around.”

- “It would be good to understand the different cases for how design is useful.”

- “I understand design for a product, but it is trickier to think of design for more complex system problems.”

- “We couldn’t find the right partner to do this facilitation. I was not able to understand the proposal. I had to read it again and again.”

- “I feel scared as a buyer. So much has to do with buying-in to a particular designer’s personality. I don’t want to work with an annoying person who is preaching design and not listening to what I need.”

- “It’s really difficult to create the budget for a very detailed work plan if you won’t know what your intervention is going to be for months.”

- “I need tools that are real, practical, and specific, and that support me when I talk about design with others.”

- “I had difficulty articulating the end result of the design process to other stakeholders—especially when they already had a clear idea about what output they wanted.”
Converse With Your Audience

The Curious
“My interest in design stems from hearing about examples in which design changed a product/service to increase adoption and lead to direct health outcomes.”

**MAIN CONVERSATION POINTS**

1. Encourage them to explore other ways design has been used in global health. While the application of design in product related projects might be easier to see, design has been used in a wide variety of ways. Point to the fact that, in the past few years, there has been an increase in the application of design in global health due to its ability to help address a number of issues critical to achieving global health goals. Read more in: What is the history of design in health?

2. Share relevant examples from personal experience or pick examples from the Project Library.

**RELEVANT AUDIENCE**

- The Curious
- The Trialist

**SUPPORTING LINKS**

- What is Design for Health?
- Value of Design

**SUGGESTED ACTIVITIES**

- Encourage them to refer to the ‘Why design for health?’ section in the public goods website to widen their understanding of what design can offer.
QUESTIONS AND CONCERNS

“Some of the design language was a bit hard to get my head around.”

MAIN CONVERSATION POINTS

1. Remind them how design, like most other professions, might have its own jargon, and that that jargon might not be used consistently, even by the designers themselves. Encourage them to ask designers for clarification during discussions whenever something isn’t clear.

2. Emphasize that, more than the language, it’s important to learn about the design methods and how and when to apply them.

3. Ask them to refer to the Glossary of Design Terms, whenever useful for further clarification.

RELEVANT AUDIENCE

SUPPORTING LINKS

- Glossary of Design Terms

SUGGESTED ACTIVITIES

- Try out a workshop or a working session with the design team in which you can openly discuss key challenges of working together and learn ways to mitigate barriers and risks.
“It would be good to understand the different cases for how design is useful.”

MAIN CONVERSATION POINTS

1. Share the different ways in which design provides value. Your talking points will be stronger if you can highlight the specific values that are relevant to your project/conversation. You can also refer to the Value of Design.

2. Point to the fact that, in the past few years, there has been an increase in the application of design in global health due to its ability to help address a number of issues critical to achieving global health goals. Read more in: What is Design for Health?

3. Share relevant examples from personal experience or pick examples from the Project Library.
QUESTIONS AND CONCERNS

“I understand design for a product, but it is trickier to think of design for more complex system problems.”

MAIN CONVERSATION POINTS

1. Point out that this is a fairly common problem because design, when applied to system-level problems, can seem intangible. This makes it challenging for the majority of people to understand it.

2. Help them understand the design process by giving them an overview of it. The design process may remain consistent, but the scope of which users to engage, changes. For a product, the users are usually more clearly defined, while for a system-level problem, it is often necessary to address the need of various users and stakeholders across multiple relevant touchpoints in a system.

3. You can refer to the What is Design and Why Design for Health? to learn more about the design process and to the Glossary of Design Terms for definitions of design and other related words.

4. Share examples from personal experience to showcase how design has played a role in system/service experience projects. View the Project Library for additional compelling examples.

RELEVANT AUDIENCE

The Newbie The Curious The Trialist

SUPPORTING LINKS

- Why Design for Health?
- Glossary of Design Terms
- Project Library

SUGGESTED ACTIVITIES

- Talk to designers about system design projects they were personally involved with, or are familiar with.
QUESTIONS AND CONCERNS

“We couldn’t find the right partner to do this facilitation. I was not able to understand the proposal. I had to read it again and again.”

MAIN CONVERSATION POINTS

1. Emphasize how incredibly important it is to find the right partner. It’s a bit like matchmaking. Before choosing a partner they should ask for several proposals. Suggest that they have several follow-up conversations to ask questions so that they can make sure that they and their design partners are using words that mean the same thing to them both (e.g., pilot). Review What is Design for Health? for help.

2. Different projects usually require different types of design skills. Read more about these skills in Design as a skillset. Refer to the Glossary of Design Terms where helpful.
QUESTIONS AND CONCERNS

“I feel scared as a buyer. So much has to do with buying-in to a particular designer’s personality. I don’t want to work with an annoying person who is preaching design and not listening to what I need.”

MAIN CONVERSATION POINTS

1. Make clear how crucial it is to choose the right design partners, especially when bringing new thinking into organizations. It is important to consider a potential design partners’ experience, skills, and personality. A good design collaborator would help bring a different perspective to issues and perhaps even challenge existing knowledge and assumptions. So, they should ask the designer to explain the tools and techniques they would use to facilitate such discussions.

RELEVANT AUDIENCE

- The Curious
- The Trialist

SUPPORTING LINKS

- What is Design for Health?

SUGGESTED ACTIVITIES

- Recommend conducting a session in which the facilitator demonstrates the tools and techniques they would use to facilitate a discussion in an imaginary scenario wherein each person on your team is on a different page. Such an exercise will help you and your team establish a level of comfort with the facilitator and his/her ability to resolve conflicts.
QUESTIONS AND CONCERNS

“It’s really difficult to create the budget for a very detailed work plan if you won’t know what your intervention is going to be for months.”

MAIN CONVERSATION POINTS

1. Encourage them to let the design team know what budget envelope the solutions need to fit within. Design can adapt to work within different types of constraints, including budgets, to ensure feasibility.

2. Design is an iterative process in which you might have a new perspective that necessitates a change in course. So, build in some flexibility using a phased approach or set aside the maximum you are able to spend.

3. It can be helpful, when thinking about how to plan funding for Design, to consider needs in terms of dosage. Does the problem need design as a spark to facilitate a small part of the process; does it need design as one of the main ingredients; or does design need to lead the problem solving effort end-to-end in a project cycle? These frameworks could also help in thinking through how to build in phasing. Read more about the lenses different professionals bring to their approach to problem solving by looking at Complementary Approaches.

4. Share examples from experience of what has worked for you in the past.

RELEVANT AUDIENCE

The Curious  The Trialist  The Believer

SUPPORTING LINKS

- Complementary Approaches
- What is Design for Health?
QUESTIONS AND CONCERNS

“I need tools that are real, practical, and specific, and that support me when I talk about design with others.”

MAIN CONVERSATION POINTS

1. Share openly available tools and resources such as: Glossary of Design Terms; Value of Design; Common Principles of Design and Global Health and Project Library.

RELEVANT AUDIENCE

The Curious

The Trialist

SUPPORTING LINKS

- Glossary of Design Terms
- Value of Design
- Common Principles of Design and Global Health
- Project Library
"I had difficulty articulating the end result of the design process to other stakeholders—especially when they already had a clear idea about what output they wanted."

**MAIN CONVERSATION POINTS**

1. Share examples of compelling projects and the impact they had based on the relevant context. Supplement these with examples available in the [Project Library](#).

2. Even if the stakeholders have a clear sense of the output they expect, having a designer on the team can add value in several different ways. Read further in the [Value of Design](#).

3. Share with them the [Common Principles of Design and Global Health](#), a set of statements that outlines a code of practice for design in global health and demonstrates design’s alignment with longstanding global health principles and values.

**RELEVANT AUDIENCE**

- The Curious
- The Trialist
- The Believer

**SUPPORTING LINKS**

- Project Library
- Value of Design
- Common Principles of Design and Global Health
Understanding Your Audience

The Trialist
# UNDERSTAND YOUR AUDIENCE: THE TRIALIST

**The Trialist**

“I like the theory behind design, but have not seen it work yet. I’ll give it a shot, but I remain skeptical.”

<table>
<thead>
<tr>
<th>WHAT WORKS FOR ME</th>
<th>MY QUESTIONS AND CONCERNS</th>
</tr>
</thead>
<tbody>
<tr>
<td>I like to see multiple examples of projects in which design was used in different ways.</td>
<td>“I don’t see the difference between design and other participatory learning methods.”</td>
</tr>
<tr>
<td>I want resources that answer questions about how design can be operationalized.</td>
<td>“I don’t know who are the right partners to bring in for design projects.”</td>
</tr>
<tr>
<td>I like the co-creation aspect of design. Rapid iteration of ideas and prototyping with users is interesting.</td>
<td>“I want to learn how to ask the right questions so I can scope a design project more strategically.”</td>
</tr>
<tr>
<td></td>
<td>“What can I drop or add to the design process, based on my time and budget constraints, without compromising the value of design.”</td>
</tr>
<tr>
<td></td>
<td>“How can I be more flexible with my approach to design.”</td>
</tr>
<tr>
<td></td>
<td>“How do I know who, from my project team, should be involved in the design process? We need to pair designers with senior technical experts. However, junior staff might be more open to the design process.”</td>
</tr>
<tr>
<td></td>
<td>“I don’t like when buzz words and stories are used as a communications strategies in design. I want to communicate my experiences more meaningfully and with greater emphasis on rigor.”</td>
</tr>
</tbody>
</table>

**WHAT DOES NOT WORK FOR ME**

Talking about tools and processes without details about how design was operationalized in projects.

Design processes that seem inflexible.

Claims that design can fix all structural problems.
Converse With Your Audience
The Trialist
QUESTIONS AND CONCERNS

“I don’t see the difference between design and other participatory learning methods.”

MAIN CONVERSATION POINTS

1. Explain how every approach, even if it relies on other similar methods, provides a unique perspective. Design primarily views problems from a user’s perspective. Ask them to refer to the Complementary Approaches cards to explore how these approaches differ.

2. Showcase how design is extremely participatory in its nature and even one-on-one interviews, group interviews, and co-creating sessions require participants and users to be highly engaged. Make these activities more inviting and accessible to them. Explain techniques like rapid prototyping and co-creating with users to continuously iterate on solutions till they fit the user’s specific needs. By using such methods, design can have a high degree of flexibility through the process and make pivots when necessary to find solutions that seem better suited to the users.

3. Suggest looking at examples of how design has been used in other global health projects. These provide the most tangible and compelling cases of the unique value design can bring to a project.

4. Point them to the Value of Design that lists the benefits of design and the Complementary Approaches which shows the unique points of view different approaches can provide, the outputs one can expect from them, and even the limitations they have.
"I don't know who are the right partners to bring in for design projects."

**MAIN CONVERSATION POINTS**

1. Emphasize how incredibly important it is to find the right partner. It’s a bit like matchmaking. Before choosing a partner they should ask for several proposals. Suggest that they have several follow-up conversations to ask questions so that they can make sure that they and their design partners are using words that mean the same thing to them both (e.g., pilot).

2. Suggest asking designers questions regarding their prior experience working on global health projects, addressing complex system-level problems, etc. Such conversation will help them gauge their alignment with the various possible partners.

3. In addition to learning about designers' prior experiences and skills, they should ask what tools and techniques the designers would use to facilitate discussions.

**RELEVANT AUDIENCE**

- The Curious
- The Trialist

**SUPPORTING LINKS**

- Complementary Approaches

**SUGGESTED ACTIVITIES**

- Recommend conducting a session in which the facilitator demonstrates the tools and techniques he/she would use to navigate a discussion in an imaginary scenario wherein each person on your team is on a different page. Such an exercise will help you and your team establish a level of comfort with the facilitator and his/her ability to resolve conflicts.
QUESTIONS AND CONCERNS

“I want to learn how to ask the right questions so I can scope a design project more strategically.”

MAIN CONVERSATION POINTS

1. Suggest working with experienced designers who can guide them through the process of scoping a project.

2. Explain how scoping a project well involves access to the right resources, clarity on the goals, and a shared understanding of the expectations at each stage of the project. Ask questions that help in clarifying these broader aspects of a project.

3. Ask designers to be transparent about the risks and challenges in a project, from their perspective. It is best to address these early on, as it will minimize the chance of unforeseen scenarios later in the process when they would be harder to tackle.
QUESTIONS AND CONCERNS

“What can I drop or add to the design process, based on my time and budget constraints, without compromising the value of design.”

MAIN CONVERSATION POINTS

1. Suggest thinking about design in terms of dosage. Does the problem need design as a spark to facilitate a small part of the process; does it need design as one of the main ingredients; or does it need design to lead the problem solving effort end-to-end in a project cycle? This could also help with thinking about how to plan funding and how to build in phasing. Read more about what lenses different professionals bring to their approach to problem solving by looking at Complementary Approaches.

2. Suggest asking designers questions about what design can provide at different stages of a project with the budget constraints clearly laid out. This will help determine where design might add the most value in a project.

3. Recommend looking at prior examples of projects where design has been used in different ways.

RELEVANT AUDIENCE

The Curious

The Trialist

SUPPORTING LINKS

- Complementary Approaches
- What is Design for Health?
- Project Library
QUESTIONS AND CONCERNS

“How can I be more flexible with my approach to design.”

MAIN CONVERSATION POINTS

1. Help them understand the design process. Communicate how it is based on an iterative cycle that takes user feedback into account at each stage. This gives it flexibility to make changes based on those inputs and improves the chance of creating solutions that speak to user needs.

2. Recommend providing designers access to subject matter experts whose inputs they can take into account. This will ensure the project has user inputs guided by experts.

3. Recommend working with experienced designers and suggest setting clear, agreed-upon goals and realistic expectations at the start of a project. Discussions with designers about which aspects of a project are pliable and which aspects need to fit within an existing system ultimately enhance both flexibility and accountability.
QUESTIONS AND CONCERNS

“How do I know who, from my project team, should be involved in the design process? We need to pair designers with senior technical experts. However, junior staff might be more open to the design process.”

MAIN CONVERSATION POINTS

1. Encourage them to consider the technical expertise required in a specific project and then involve those who would have that expertise. Their involvement can be structured and planned to maintain a healthy working relationship.

2. Suggest that people participating in the design process should be willing to question existing assumptions even if they are long held beliefs.

3. Suggest they work with designers who appreciate the fact that the design process can seem intimidating and confusing to those who are new to it. It is the job of the designers on a project to empower the non-designers to ask questions and provide feedback and input when necessary.

4. Refer to the What is Design for Health? and the Complementary Approaches to better understand how project teams can be formed and how design can work with other approaches adopted in global health projects.

RELEVANT AUDIENCE

- The Trialist
- The Believer

SUPPORTING LINKS

- Complementary Approaches
QUESTIONS AND CONCERNS

“I don’t like when buzz words and stories are used as a communications strategies in design. I want to communicate my experiences more meaningfully and with greater emphasis on rigor.”

MAIN CONVERSATION POINTS

1. Encourage them to work with the design team to set expectations of outputs and deliverables early on in the project; to share examples that resonate; and to guide designers throughout, to create such materials.

2. Designers tend to create presentations with supporting stories, insights, and outputs from research. Detailed information on methods and comprehensive reports on findings are extremely valuable for the community but might require considerable extra effort to be developed by the team. In order to create such reports, a team should discuss outputs earlier in the process and scope the work appropriately.

3. Explain that, while plenty of quality design work is being done, it can be difficult to expose people, outside the initial project team, to the existing deliverables. To encourage multiple groups and organizations to utilize existing research, designers need to ensure comprehensible and actionable deliverables as well as adequate dissemination platforms.

4. Look at Project Library to see what type of project documentation appeals to you and collect examples - this way you can provide your design team guidance on outputs.

RELEVANT AUDIENCE

The Trialist  The Believer

SUPPORTING LINKS

● Project Library
Understanding Your Audience

The Believer
I've seen what design can do and I try to advocate for it, but I am not an expert, and so need better ways to guide and encourage others.

I heard that design puts the user at the center of our decision-making. It speaks to me because it challenges my presuppositions about how people consume information and use the products we create.

I understand the power of design, especially its capacity to bridge experts with different languages and perspectives by focusing on the use case and the user.

Design offers an end-to-end process that considers how to ask, prioritize, and answer questions.

We need design to be positive and complementary, rather than critical, threatening, or replacing.

I can assure you that PowerPoint presentations are not a very effective way to train someone about design.

People are trained to work in a system and respect that system. Design helps people think outside the box, and they need to be allowed to work in that way.

Working in design requires more than knowledge. It requires a heart, a mindset, and a skillset.

From my own experience, I know design is unique. It is very special, but I am not able to talk about it concretely.

I need tools that communicate what design can do and that help others make decisions about design.

Advice on communicating the benefits of design effectively

A focus on design’s ability to adapt quickly and improvise when necessary

Clear guidance on how to set-up a project for success

When designers propose fancy solutions that don’t seem grounded in reality, in my opinion, it diminishes the credibility of design.

When individual designers use design terms differently it makes it hard for non-designers to follow them.

WHAT WORKS FOR ME

WHAT DOES NOT WORK FOR ME

WHAT DOES NOT WORK FOR ME

When designers propose fancy solutions that don’t seem grounded in reality, in my opinion, it diminishes the credibility of design.

When individual designers use design terms differently it makes it hard for non-designers to follow them.
Converse With Your Audience
The Believer
"I heard that design puts the user at the center of our decision-making. It speaks to me because it challenges my presuppositions about how people consume information and use the products we create."

1. Agree that including users in the process as equals is, in fact, one of the defining features of design. The user can inspire designers to create a product or service experience that speaks to them. While designers do rely on global health practitioners for their experience and knowledge, they also ask questions that challenge existing assumptions and provide fresh perspective about an issue.

2. Emphasize the great degree of alignment between the values and principles of Design and Global Health. Design’s focus on the user, when combined with the evidence-based approach typically used in global health, can result in new and innovative solutions that would otherwise not be possible.

SUPPORTING LINKS
- What is Design for Health?
- Glossary of Design Terms
- Common Principles of Design and Global Health
- Value of Design
"I understand the power of design, especially its capacity to bridge experts with different languages and perspectives by focusing on the use case and the user."

**MAIN CONVERSATION POINTS**

1. Explain how design is primarily a participatory approach that engages relevant stakeholders at various stages in the design process. By doing this, it can address different perspectives, concerns and needs to develop solutions that bring participants along.

2. Designers also rely on collaboration with the Global Health practitioners to learn from them and use their expertise and guidance for scoping out the knowledge gaps that they need to research. Collaboration that combines different areas of expertise can achieve innovative results and is critical in order to avoid duplicative learnings.

3. Add that design can also make use of various tools such as: use case facilitation systems, journey mapping, data visualizations, storytelling, etc. Such tools can make complex information easier to share and understand. This helps people focus more effectively and collaboratively on the users’ problems.

**SUPPORTING LINKS**

- What is Design for Health?
- Glossary of Design Terms
- Common Principles of Design and Global Health
- Value of Design

**RELEVANT AUDIENCE**

The Believer

---

**QUESTIONS AND CONCERNS**

"I understand the power of design, especially its capacity to bridge experts with different languages and perspectives by focusing on the use case and the user."
**QUESTIONS AND CONCERNS**

“Design offers an end-to-end process that considers how to ask, prioritise, and answer questions.”

**MAIN CONVERSATION POINTS**

1. Describe how design emphasizes active listening, being curious, understanding what motivates people, and translating that understanding into a product, service, or program. Design asks broad exploratory questions before honing in on key user and stakeholder priorities.

2. Ask them to look at the double diamond process in [What is Design for Health?](#) to learn more.

3. Caution them that design, by itself, might not be able to answer all the questions and that designers often need to collaborate with global health practitioners and use other [Complementary Approaches](#) to address knowledge gaps and recommend solutions.

**RELEVANT AUDIENCE**

- The Trialist
- The Believer

**SUPPORTING LINKS**

- [What is Design for Health?](#)
- [Complementary Approaches](#)
**CONVERSATION WITH THE BELIEVER**

### QUESTIONS AND CONCERNS

"I can assure you that PowerPoint presentations are not a very effective way to train someone about design."

### MAIN CONVERSATION POINTS

1. Start by explaining that design is not meant to function in isolation, nor is it a silver bullet that can solve complex global health challenges by itself. In fact, its effectiveness can be enhanced when it is combined with other Complementary Approaches.

2. When a designer asks questions or challenge existing assumptions, it is not to undermine or threaten existing systems or approaches, but to push the thinking in new directions in order to develop solutions that are more effective for users.

3. Encourage them to attend design workshops and take online courses and training sessions. These can serve as an introduction to design and the design process, even if they cannot make people experts.

### SUPPORTING LINKS

- What is Design for Health?
- Why Design for Health?
- Complementary Approaches
QUESTIONS AND CONCERNS

“I can assure you that powerpoint presentations are not a very effective way to train someone about design.”

MAIN CONVERSATION POINTS

1. Agree that design is highly experiential and best understood through active participation in the process. Encourage them to participate personally in the design process where possible.

2. Encourage them to attend design workshops and take online courses and training sessions. These can serve as an introduction to design and the design process even if they cannot make them an expert on design.

3. Encourage them to talk with designers and other practitioners who have had prior experience of working with design and can teach from their experience.

4. Request that they share examples from their own work or refer to the Project Library to learn more from real-world projects in which design played a significant role.

RELEVANT AUDIENCE

The Trialist
The Believer

SUPPORTING LINKS

- What is Design for Health?
- Project Library

SUGGESTED ACTIVITIES

- Shadow designers who are working with you. Ask them questions. Be curious about their process!
“People are trained to work in a system and respect that system. Design helps people think outside of the box, and they need to be allowed to work in that way.”

MAIN CONVERSATION POINTS

1. Reiterate that design has to work with existing systems. In fact, design is stronger when it builds on existing knowledge. Design takes established ideas into account, rather than simply challenging them.

2. Remind them that, in an effort to push the boundaries of the existing thinking, design encourages people to adopt a flexible approach and think outside the box. While this can seem to be at odds with established systems, it only serves to push the envelope and generate concepts and solutions that are otherwise unlikely to surface.

3. Explain how design can be a force for cultural change at an organization, and can help those involved embrace a more creative and experimental work process, while still maintaining focus on the user.
QUESTIONS AND CONCERNS

“We need to think of ways to defend ourselves.”

MAIN CONVERSATION POINTS

1. Acknowledge that design work needs to be clearly articulated, especially when dealing with complex system-level problems like the ones typical in global health. Encourage them to work with experienced designers who can articulate the design process and design thinking to non-designers.

2. Understand and highlight the unique benefits of design. Encourage designers to work with subject matter experts and build upon existing knowledge and information but still bring in new and unique points of view. This helps establish a level of trust in the process.

3. Recommend that they avoid using buzzwords and design jargon that does not speak to non-designers and can make valid design work seem like a passing fad.

RELEVANT AUDIENCE

- The Trialist
- The Believer

SUPPORTING LINKS

- Project Library
- Value of Design
- Glossary of Design Terms
**Main Conversation Points**

1. Design is both a skillset and a mindset. To understand design as a skillset refer to What is Design for Health? Design as a mindset means being curious, having empathy for users, and listening to them.

2. Design is absolutely a mindset: a mindset of being curious, having empathy for users, and having faith that if people listen to those they're trying to serve and create experiences that resonate with them, they're going to see positive health impacts.

**Supporting Links**

- Value of Design
- What is Design for Health?

**Relevant Audience**

The Believer
"From my own experience, I know design is unique. It is very special, but I am not able to talk about it concretely."

**QUESTIONS AND CONCERNS**

**MAIN CONVERSATION POINTS**

1. Acknowledge that this is a common experience for many people. Point them to resources like the Conversation guide that address this specific issue.

2. Suggest using relevant examples from personal experience or from the Project Library when explaining concepts or processes related to design. Examples are always easier to relate to than theoretical explanations that can alienate global health practitioners who are new to design.

3. Encourage maintaining a humble outlook on this type of work. Acknowledge the fact that there is always more to learn and experience. Building experience through diverse projects will help them to more comfortably and confidently articulate what design can accomplish in global health.

**RELEVANT AUDIENCE**

**SUPPORTING LINKS**

- Conversation Guide
- Project Library

**SUGGESTED ACTIVITIES**

- Encourage them to participate in design workshops, training and projects
QUESTIONS AND CONCERNS

“I need tools that communicate what design can do and that help others make decisions about design.”

MAIN CONVERSATION POINTS

1. Point them to the various public goods tools that are useful in communicating: what design can do; the benefits of using design; how design can complement other approaches; and how to build an effective design team.

2. Suggest easily accessible, online resources from credible, well-established organizations that can help provide more information about design and the design process.

3. Share projects from personal experience that can make the design process and its benefits more tangible to those who are unfamiliar with it.

RELEVANT AUDIENCE

The Believer

SUPPORTING LINKS

- What is Design for Health?
- Value of Design
- Complementary Approaches
- Glossary of Design Terms