Co-Researching and Co-Designing Mental Health Services with Teenagers

Simon Bowen  
Digital Interaction, Culture Lab  
King’s Walk  
Newcastle University  
Newcastle upon Tyne  
NE1 7RU UK  
simon.bowen@newcastle.ac.uk

Helena Sustar  
Visiting Researcher  
Department of Design  
Aalto University  
Group I Hämeentie 135 C  
Helsinki, Finland  
helena.sustar@aalto.fi

Daniel Wolstenholme  
Visiting Researcher  
Art & Design Research Centre  
Sheffield Hallam University  
Sheffield, S1 2NU, UK  
daniel.wolstenholme@sth.nhs.uk

Andy Dearden  
Communication & Computing Research Centre  
Sheffield Hallam University  
Sheffield, S1 2NU, UK  
a.m.dearden@shu.ac.uk

Abstract

To explore “how should teenagers be involved in UX design,” we describe a PD project where young people and health professionals co-researched and co-designed mental health services for teenagers. Applying a four-phase ‘Double Diamond’ model meant ensuring young people’s were involved in exploring problems and designing solutions. Our particular challenge was making these activities understandable and engaging (e.g. analysing interviews). We describe how story gathering, forum theatre, and comic-book creation enabled young people to propose new services that, through better fit to their lifestyles, had enhanced UX.

Author Keywords

Teenagers, Participatory Design, Health Services

ACM Classification Keywords

H.5.m. Information interfaces and presentation (e.g., HCI): Miscellaneous.

Introduction

This case study contributes towards the workshop aim “how should teenagers be engaged in User Experience Design?” In particular, we ask what can be learned from adopting a Participatory Design (PD) methodology (e.g. [3]) with pragmatic consideration of the relevance of information and communications technology (ICT) to...
teens’ lifestyles, and moral consideration of those teens’ democratic right to influence the design of ICT that impacts on their lives[3]. The latter is of prime importance in the design of health services that can reduce or prevent illness and increase teenagers’ personal wellbeing. And, because such health services are increasingly delivered partly through ICT, the former is important in understanding the practices and preferences of teenagers as ‘digital natives’ to ensure the UX of such systems closely fits their needs. Further, PD offers a methodology for both research into and the design of ICT so, here, teenage participants should be considered as co-researchers and co-designers.

Engaging teenagers in design projects can be challenging [7][8][6]. We suggest that this is more difficult in health-related design (e.g.[4]), where teenagers have little enthusiasm for or ownership of the design domain to motivate their participation.

In this paper, we describe co-researching and co-designing a mental health service with teenagers in Sheffield, UK. Following PD principles we ensured young people’s input throughout, building on previous work [8] that demonstrated that design activities should be both understandable and enjoyable to engage participants and move design work forwards.

**Case Study: Teens’ Mental Health Services**
The authors were part of User-centred Healthcare Design (UCHD)¹, a research programme investigating how methods and thinking from design could be applied to improve and innovate services within healthcare. The final 11-month phase of this programme involved us mentoring health and social care professionals in using ‘designerly’ means to undertake their own improvement projects from November 2012. One such project forms our case study: a collaboration between Chilypep², a third-sector organization focused on young people’s empowerment, and IAPT³, a Sheffield mental health service. IAPT had recognised that their current, adult-focused service did not meet the needs of the increasing number of young people accessing it and, with Chilypep, wanted to improve their service for teenagers accordingly.

Mentoring was broadly constructed as Action Research: the authors sharing design principles and practices via demonstrations and online resources; co-design of project activities with partners; and regular, collective reflection on project challenges and strategies for tackling them. Further, we provided resources to help facilitate activities and produce materials (e.g. prototypes) where partners requested such expertise. We framed our design approach using the UK Design Council’s ‘Double Diamond’ design process model⁴ to explain design as involving divergent explorations of both problem and solution in addition to convergence to problem specifications and design solutions.

Two professionals from IAPT and Chilypep ran the design project with our support as mentors. Eight young people, male and female, aged 15-25 years and with experience of accessing mental health services, participated in design activities.

1. [http://www.uchd.org.uk](http://www.uchd.org.uk)
2. [http://www.chilypep.org.uk/index.htm](http://www.chilypep.org.uk/index.htm)
3. [http://www.sheffieldiapt.shsc.nhs.uk](http://www.sheffieldiapt.shsc.nhs.uk)
**Discover: Gathering Stakeholder Stories**

To go beyond the IAPT service and consider young people’s experiences more broadly, the IAPT and Chilypep project facilitators mapped the broad group of people teenagers turn to for support in dealing with mental health issues, and interviewed a representative sample. E.g. a University tutor who provides pastoral care, a General Practitioner (GP) who refers young people for therapy or counselling. Interviewees were asked to share stories about young people’s access to services to gather accounts of specific experiences (rather than generalised opinion) and the emotional highs and lows of such patient journeys [1].

Although these interviews provided insights into the other stakeholders’ perspectives, it proved difficult to gather the experiences of young people themselves, e.g. the project received no responses to an a recruitment flyer sent to 100 teenage previous users of IAPT. Nonetheless, Chilypep were able to interview one young mental health service user who was known to them previously. Further, Chilypep realised that they had a wealth of young people’s stories that had been shared with their youth workers during the course of their work. Consequently the Chilypep project facilitator interviewed her colleagues to gather further stories.

**Define: Agreeing Design Focus via Theatre**

To ensure more direct involvement in this and subsequent phases, Chilypep identified a group of young people already involved in similar work evaluating another health service, some of who were willing to participate in the design project.

This group needed to agree particular issues for subsequent co-design work from interviewees’ stories. However we felt that a pile of interview transcripts would not encourage young people to engage in this activity. Working with Chilypep and IAPT, we devised the idea of translating interview stories into ‘plot-lines’ for an imaginary soap opera, and an event where teenagers could critique the relevance and importance of the issues raised through a forum theatre performance, then explore desirable alternatives using role-play to ‘sketch’ possibilities.

**Develop: Co-Designing New Services**

A co-design event involved IAPT managers and practitioners who, with the young people, explored how young people might seek help and how IAPT could engage with them better. From this, it became clear that IAPT already provided or were planning much of what young people wanted (e.g. text message appointment reminders, telephone and Skype consultations) and a key objective was to communicate this offering better. Young people felt this would increase use of the service and challenge the stigma of mental health issues amongst their peers.

**Deliver: Advertising IAPT Through Comic-strips**

UCHD designers translated the co-designed service proposals into ‘comic strips’ using an online tool⁵. Young people created their own avatars for these stories, and checked their content (Figure 1). An IAPT information leaflet was then created using these graphic stories.

The project team’s subsequently reflected that reading the stories aloud was a more effective method of communicating what had been learned. Therefore

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Figure 1: Personalising Avatars

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⁵ [http://bitstrips.com](http://bitstrips.com)
young people audio-recorded the stories, which were then incorporated into videos with the comic-book graphics.

**Discussion: Efficacy of Activities**
The forum theatre event engaged young people in their experiences of mental health services, and enabled them to critique how interactions with IAPT staff satisfied the important emotional needs they had identified. However, it was less effective in exploring alternatives and a planned strategy for exploring future possibilities using pastiche persona[2] was not employed as service-critique dominated the event.

Despite IAPT's initial reservations that young people would have unattainable service ideas, the co-design sessions worked well as, through their participation, young people were aware of practical constraints.

Young people were also positive about the comic-strips: valuing their personalisation (adding favourite clothing, music artists), and having pride in them (sharing them on Facebook). IAPT were also enthusiastic about the graphic stories as an alternative project output to the typical dry text report.

**Conclusion**
Following PD principles enabled our mentees to understand teenagers' needs for mental health services and, in collaboration with them, propose new services that would afford positive user experiences. However, such co-research and co-design is not straightforward, and attention is required in ensuring activities are engaging and understandable to participants.

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