

Building capacities to author change: community-based participatory design as a form of positive youth development and adolescent sexual and reproductive health care intervention design

Lucknow, Uttar Pradesh, India

BACKGROUND

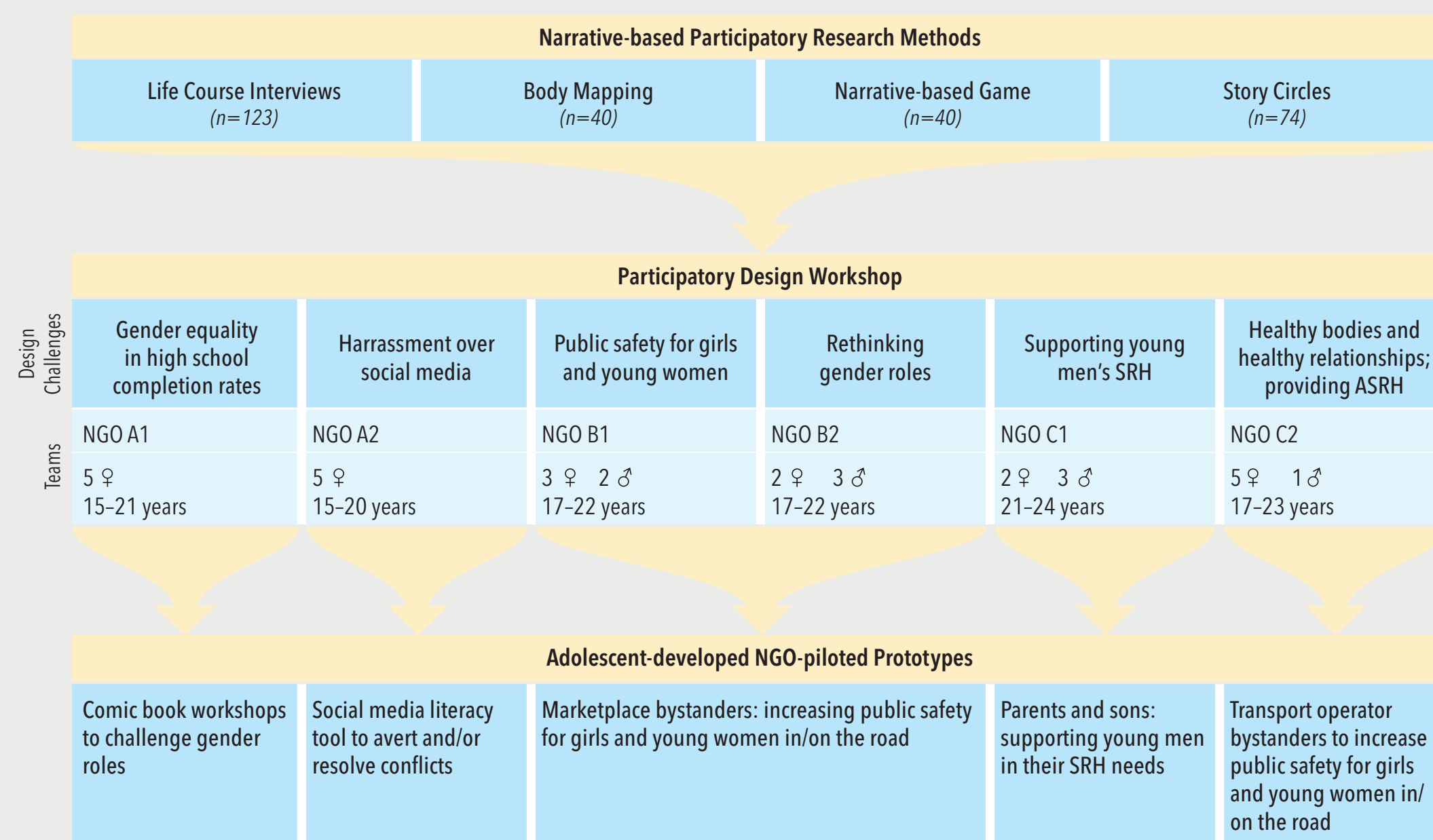
Understanding what participants gain from participation represents another way for us to understand and evaluate the distributed and diffuse impacts from community-based participatory design (CBPD).

This study aimed to better understand participant gains from a design workshop conducted with 31 young people aged 15-25, over 2.5 weeks, in Lucknow, Uttar Pradesh, India. It aimed to: (1) build the capacities of young people; (2) guide young people in the creation of novel and locally relevant gender and sexual and reproductive health (SRH) solutions; and, (3) bring voices of young people into research and programmatic questions around gender and SRH in the public health domain.

EVALUATION

Baseline and endline surveys were conducted before and after the workshop and aimed to measure participant attitudes and capabilities. The survey data was analyzed using the Wilcoxon signed rank tests and Mann Whitney tests in STATA. Focus group discussions were completed with each team. Focus group audio recordings were translated and transcribed, de-identified, and coded for major themes.

Overview of project activities (see article for details)



RESULTS

Analyses of the data suggest that the use of a participatory design workshop as a form of positive youth development resulted in user gains in three areas: building relationships and networks, skill building, and an increase in adolescent sexual reproductive health (ASRH) awareness and knowledge.



Building Relationships and Networks

Focus group data suggest that the workshop provided a unique opportunity to work in mixed-gender groups, resulting in greater exposure and comfort in collaborating with the opposite sex.

“I had individually worked at a lot of places, but this was my first opportunity to work in a group. . . .

There were girls with us in the group as well, so that was an entirely different experience.” (FGD 06)



Skill Building

Focus group and survey data suggested an increase in participants' likelihood to generate new ideas in response to a social problem, and to speak to someone they had never met before to help solve it.

According to survey data, both young men and women reported an increase in capacity for implementing design activities; however, young men reported a stronger change in this compared to girls.

“To make an idea and to present that — it was difficult as well as challenging.” (FGD 03)



Increase in ASRH Awareness & Knowledge

The workshop raised awareness about issues in ASRH and gender, and generated further interest in learning about them.

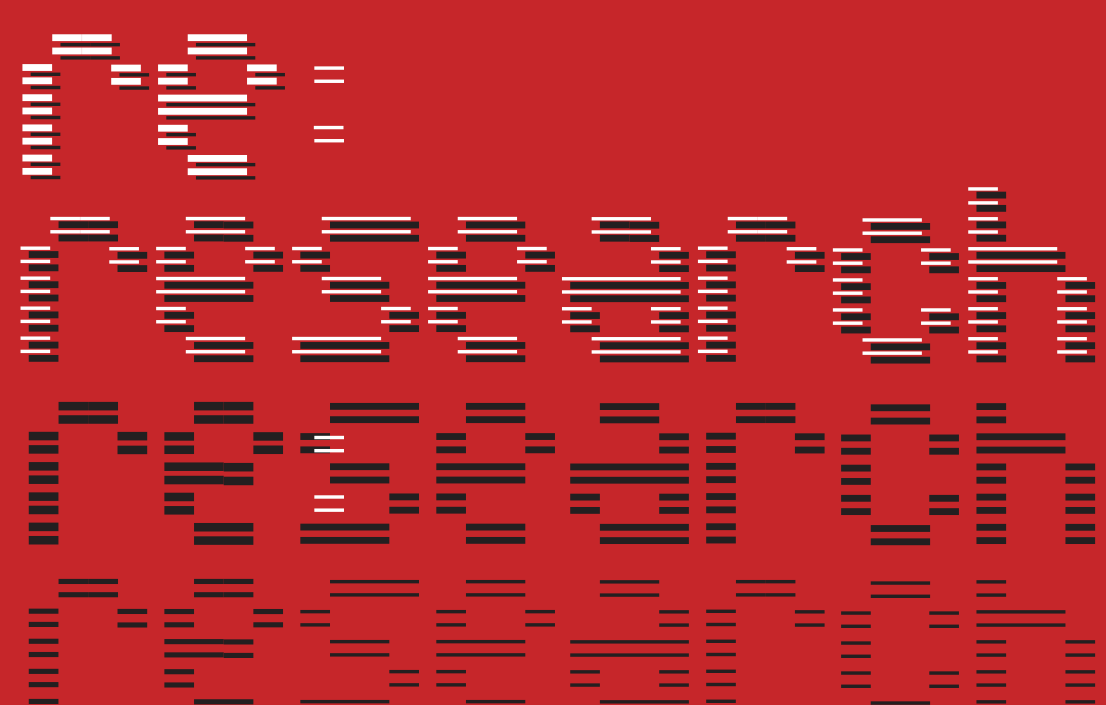
“Things like we were not aware about body parts and what happens between girls and boys during sex, but we came to know on that day, and we were stunned to see and hear that these sorts of things happen between girls and boys.” (FGD 05)

LIMITATIONS

Evaluation tools were not pre-tested with Indian adolescents to address issues of clarity and acceptability of questions. Second, some participants had been involved in community-based work with local NGOs prior to the workshop. The overall project structure did not allow for a follow-up survey at a later time interval.

CONCLUSION

In the context of gender disparities in Uttar Pradesh, the user gains suggested by this small study challenge the usual ways how social and technical infrastructures might normally emerge in the design of public health interventions, allowing for the evolution of locally relevant approaches to mitigate gender disparities and improve ASRH.



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Poster Instructions –

Poster dimensions are 24 x 36 inches (609 x 914 mm). Must be displayed vertically.

Grid:

The enclosed indesign file includes a grid which is in place for guidance in placing text and images. You may follow as is, or use your own layout. Keeping the top and bottom layers in place.

Text & Banner:

Please replace text boxes with the proper information. You are welcome to add additional text, but must include required items.

Images:

Images should be high resolution (at least 300 dpi). You may include as many images as you like. Adding captions is optional, but recommended.

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Poster Examples –

DAAP Sustainability: DAAP Lives

Cincinnati, Ohio



The Seven Hills Neighborhood Houses (SHNH) in Cincinnati's West End has been a social services resource and community gathering place since 1961. It serves 1,500-2,500 at-risk children, teens, families, seniors, and disadvantaged citizens annually from one of Cincinnati's most socio-economically challenged areas via a wide variety of programming.

As part of a SKID MetroLab graduate studio in summer of 2015, students combined design and fabrication efforts to transform selected interior spaces at Seven Hills Neighborhood Houses. Course objectives included researching interior spaces for community centers, community engagement strategies, and prioritizing interior spaces at SHNH.

Graduate students worked closely with SHNH staff, board members, and local user groups.

to transform selected interior areas of SHNH. Interior spaces to be renovated were chosen based on the themes and core values of the Center—transforming existing spaces into welcoming spaces that enable advancement through education and technology. An important goal of the studio was to develop community relations between SKID and SHNH, support the student's creative vision for transforming interior spaces at SHNH, and explore - execute design ideas through a series of physical and spatial transformations - leading to finished interior projects by the end of the semester. The studio focused on four interior areas: the main meeting / conference room, a hallway mural, furnishings for teens, and a lounge with storage for volunteers.

Roche Medical Center Staff Housing

Roche, Tanzania

Revolutionizing local building practices: Northeastern Tanzania

Phase two of the Roche Health Center, the Staff Housing, accompanies a health care facility that services 20,000 villagers in rural Northeastern Tanzania. Opened in 2011, the outpatient clinic has provided access to a permanent healthcare facility for the first time in the region's history; however, it only operated part-time for several years due to the need to recruit full-time staff.

The Roche community, Village Life Outreach Project, and affiliated partner Shirati Health Education & Development Foundation, identified the construction of staff housing as a critical necessity to expand the clinic's operations. Beginning construction in 2015, the 3000 square foot duplex will be move-in ready in early 2016. Utilizing collaboration with a local team of contractors and residents of Roche Village, hundreds of men and women of the community have worked on the SHC Staff Housing Project.



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