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Co-designing public services with vulnerable and disadvantaged populations: Insights from an international collaboration

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Abstract

In recent years, co-production has become a mainstream activity in many countries. Despite the increasing attention to co-production (and the role of co-design approaches therein), critical challenges exist when working with vulnerable populations. Failure to involve these populations may reinforce existing inequities across societies. An international collaboration has recently been established to foster international exchange and learning relating to co-designing services and service improvements with vulnerable and disadvantaged populations. Here we report on the findings of a two-day international co-design process held in December 2017, that involved 23 participants including health care and service professionals and design practitioners (5), service users (6) and academics (11) to identify challenges and suggest improvements to co-design and co-production approaches when working with vulnerable and disadvantaged populations.

At the symposium each panel of 3 or 4 presenters shared their experiences in particular cases. Working in small groups, participants discussed why the problem exists, then individually and collectively brainstormed solutions and integrated the ideas into a common solution and developed a visual prototype. All content was recorded, and videotapes were transcribed.

We adopted a modified case study approach, and focused on 8 cases that featured (a) service users that are members of a vulnerable and disadvantaged population and (b) service providers working together in non-hierarchical and ongoing ways to co-design improvements to health or social services. Populations included adult and youth mental health services, personality disorders, domestic violence survivors, young offenders and indigenous peoples. Services included health and community services, ambulance services, employment support, police and justice services. The data was synthesized to create case summaries. Cross-case analysis identified common challenges, as well as principles and tactics to address them.

A number of challenges were common across all cases: issues with initial recruitment, securing ongoing participant engagement throughout the co-design process as well as power imbalances. Other challenges in several cases included unpredictability of participant health status, precarious economic and social circumstances, as well as insufficient or unstable funding. There was an overarching sense that core principles should be established and attended to rather than a series of rigid sequential steps. The findings suggest the need for an intersectional approach, as most participants faced a combination of health, social, financial issues. Relationships were central throughout the processes, as was the need to be flexible and responsive to participants needs. There is also a need to empower participants and share power through co-design processes characterized by a 'downward accountability' to participants rather than an 'upward accountability' to funders. This attention to the 'human side' of co-design rather than institutional restrictions was considered essential when working with vulnerable and disadvantaged populations. We present a conceptual framework that relates the identified challenges to principles and tactics to address them and which may assist other service designers when working with vulnerable and disadvantaged populations.

KEYWORDS: co-design, vulnerable populations, public services