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Design thinking for community-provider collaboration: Designing a culture- and user-friendly refugee wellness center

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Title: Design thinking for community-provider collaboration: Designing a culture- and user-friendly refugee wellness center

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Background: South Philadelphia has a growing immigrant and refugee population, increasing the need for a healthcare facility dedicated to refugee health that integrates cultural sensitivity with principles of community health. Design thinking (human-centered design) is a promising strategy to address health and social justice concerns through the development of innovative products and services that prioritize population needs. This project utilized design thinking to inform suggestions to the design of Hansjörg Wyss Wellness Center that promote a culturally sensitive and welcoming environment in order to improve healthcare outcomes for the refugee population in Philadelphia.

Methods: Standard qualitative data gathering methods were used to gather insight into the needs of the South Philadelphia refugee population. Seven focus groups were conducted with patient populations (7 ethnic groups) and community partners. Data were coded independently by four members of the research team, organized into themes, and presented to stakeholders.

Stakeholders (physicians, architects, designers, and community representatives) participated in a “Design Sprint” which utilized design thinking exercises to ideate and rapidly prototype solutions to common barriers refugees face to health and wellness.

Results: Common barriers to access to healthcare reported in the focus groups include: lack of adequate language interpretation (navigating appointments and understanding medical terminology), long wait times, and transportation. Incorporation of health education resources,

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space for community events, mental health care, and space/activities for children were commonly suggested priorities for services in the wellness center. Design sessions produced prototypes acceptable to community and staff and suitable for use by architects to inform values-driven development of wellness center.

Conclusions: Engaging end-users and stakeholders through design thinking is an effective strategy to gather community insight, achieve cultural sensitivity, and to promote health equity for underserved patient populations. Limitations to the project included little objective data, as surveys and responses were subjective experiences and opinions. The generalizability was also limited due to small sample size.

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