

**FROM EXPERIENCE,
WITH LOVE**

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Let's
begin

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Where I Started

MY 'WHY DSI?'

I was interested in design as a force for social change when I discovered DSI. I've been quoting Herbert Simon since my orientation presentation here.

I was always interested in healthcare. All my friends, and my brother, were studying to be doctors. I was around medical textbooks more than any other kind of literature. Public health was especially intriguing to me because of the work and writing of Atul Gawande. I was captured entirely by the idea that a doctor would spend that much time trying to change behaviour, trying to design.

His book *The Checklist Manifesto* shows the real ways that social design can impact health. By changing the social structure of the operating room, by empowering nurses to question surgeons at key points before a procedure occurs, lives were saved. To do

this Dr. Gawande interviewed and learned from all manner of professionals, but not once did he interview a designer.

To me the whole problem seemed so clearly a design problem. And once I understood doctors not properly sanitizing their hands as a design problem, most problems, if not all, seemed like design problems. Things that needed to be worked out systemically rather than aesthetically. I saw in the healthcare system, and the world, the invisible structures that held together the way things are done, and how they could be designed differently.

I came to DSI with the general idea that I wanted to work in healthcare, but I didn't know how.

**“EVERYONE DESIGNS
WHO DEVISES
COURSES OF ACTION
AIMED AT
CHANGING EXISTING
SITUATIONS INTO
PREFERRED ONES.”**

HERBERT SIMON



CHECKLIST MANIFESTO

Doctors often overlook or omit steps in the multitude of tasks we perform every day. As Atul Gawande argues in “The Checklist Manifesto,” these are situations where a simple to-do list could help. For example, a five-point checklist implemented in 2001 virtually eradicated central line infections in the intensive care unit at Johns Hopkins Hospital, preventing an estimated 43 infections and eight deaths over 27 months. Gawande notes that when it was later tested in I.C.U.’s in Michigan, the checklist decreased infections by 66 percent within three months and probably saved more than 1,500 lives within a year and a half.

Gawande, a professor of surgery at Harvard Medical School and a staff writer at The New Yorker, makes the case that checklists can help us manage the extreme complexity of the modern world. In medicine, he writes, the problem is “making sure we apply the knowledge we have consistently and correctly.” Failure, he argues, results not so much from ignorance (not knowing enough about what works) as from ineptitude (not properly applying what we know works).

THIS CITY WAS NOT BUILT FOR THE ELDERLY.

OPPORTUNITIES EMERGE

In the second semester of my first year we had a Communication Design course. The aim was to work with a client, which was a person or organization doing social impact work of some kind, to fulfill a pressing communication need.

One of the clients proposed for this was project City Health Works, a non-profit community health organization that improves health outcomes of seniors in East Harlem by providing home visits. Taking on this client, and their challenge of communicating their value to hospital systems, investors and patients, was my first experience working in healthcare.

I hadn't ever before thought much about what happens to people when they get older. I thought the norm in Trinidad and Tobago, of children living with their parents until adulthood, and inheriting the family house when the parents pass away, was normal.

The experience of seniors in East Harlem was entirely foreign to me. Most of them lived independently, taking care of their chores and bills with minimal help from

their adult children and grandchildren. The seniors I met over the course of this project were sharp, smart and all a little lost. They were now without jobs, their spouses had passed away and their days revolved around babysitting grandchildren and taking care of their health and their household needs. Visits to the doctor or to the grocery store seemed like the only kind of visits they had in their lives.

They couldn't go very far from their apartments without help, and they were now rendered so vulnerable by their aging bodies that the world seemed more dangerous than interesting. They could not keep up with the pace of the city, the screeching of the subway, the squeezing, squishing, sweaty crowds of a bus at rush hour. This city was not built for the elderly.

Not even hospitals were built for the elderly. Doctors spend as little time as possible with a patient. They don't establish trusting relationships with their patients. That's where City Health Works is trying to intervene. They were aiming to be bridge between the hospital and the home in order for seniors to lead healthier lifestyles and thus avoid medical emergencies and preventable hospital room visits by using a technology regularly used in 'developing countries' where people in remote areas spend little time with doctors because they are physically difficult to reach. They were using community health workers.

COMMUNITY HEALTH WORKERS

These are regular people from a community who are trained with basic knowledge of public health and dispatched to counsel others in the community. They allow information to be spread more rapidly and consistently, and by bringing healthcare out of the hospital and to the kitchen table of someone's apartment, it gives seniors much needed social interaction. The health workers listen to their problems, try to understand their personal contexts and assist as best as possible in given circumstances.

What intrigued me the most was that City Health Works was attempting to find ways to measure the impact of the social interaction provided to the seniors by their health workers. That this social interaction was in itself a kind of innovation.

That this social
interaction was
in itself a kind of
innovation.

I HAD A DEFINITE MOMENT OF PANIC HERE.

OPPORTUNITIES RECEDE

When the time rolled around to declare a thesis topic, I had decided to work on creating an intervention for socially isolated seniors. City Health Works focused on seniors who were diagnosed with chronic diseases, and since I'd grown up watching my parents and grandparents take their own blood pressure and blood sugar levels with various gadgets, I decided to do so as well. I was especially interested in senior with hypertension and diabetes since those were the two chronic diseases I knew the most about.

I approached City Health Works to form a partnership, and began interviewing their health workers. I interviewed health workers over the summer, but in the end they couldn't collaborate with me and I was left without a partner organization, and access to my target audience.

This was a blow. I was deep into the research, and the timeline but without access I wouldn't be able to move forward. I had a definite moment of panic here.

But my advisors got me through it. This was the last week of summer before I'd be back in New York for the fall semester. From my childhood bedroom in Trinidad, I sent off emails to every organization I could find online that worked in senior health services in New York. I focused specifically in East Harlem because I had data from City Health Works that identified that neighbourhood as being one of high need.

Around this time I also read *Being Mortal* by Atul Gawande and became fascinated with palliative care and designing for senior dignity.

BEING MORTAL

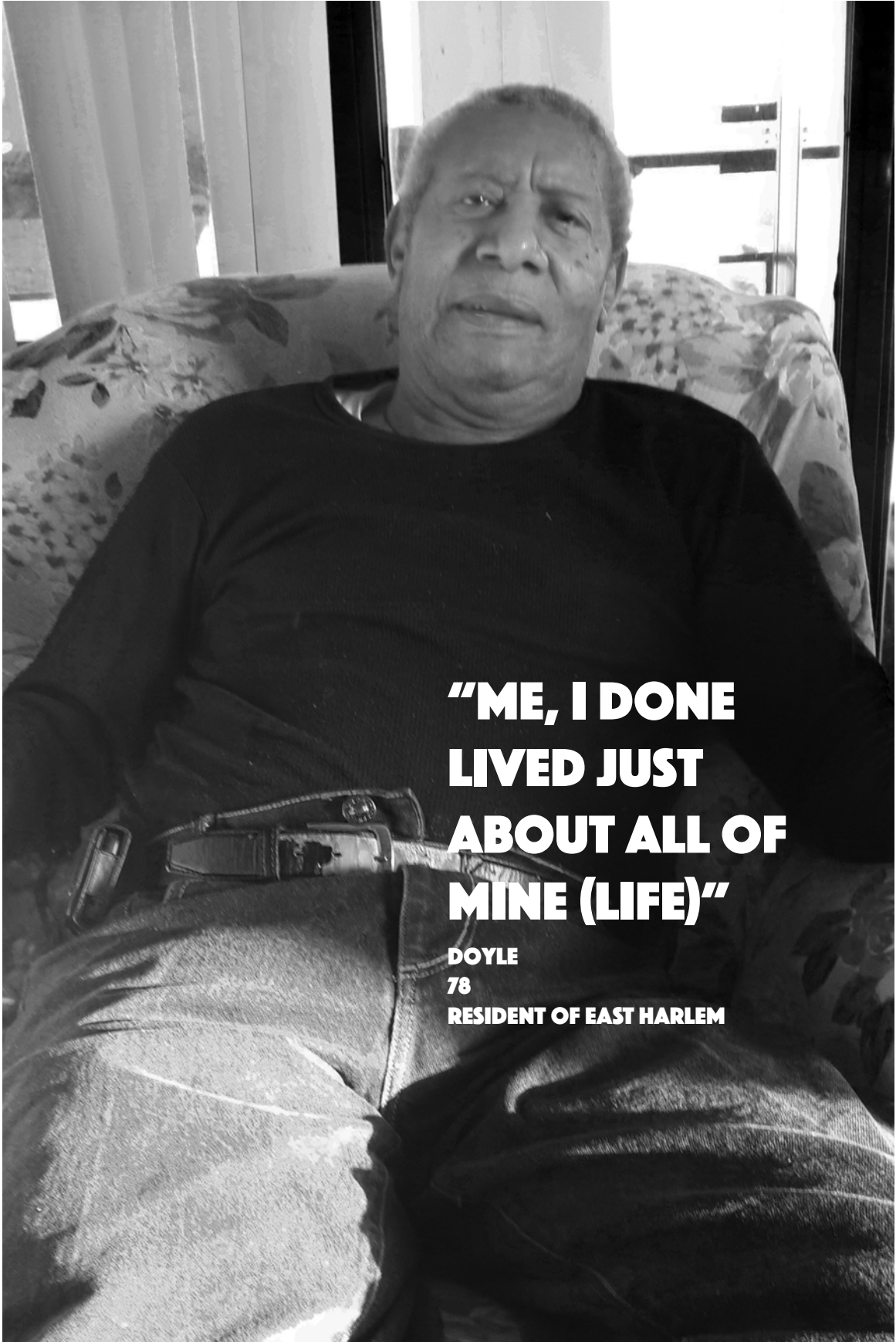
His new book, "Being Mortal," is a personal meditation on how we can better live with age-related frailty, serious illness and approaching death.

It is also a call for a change in the philosophy of health care. Gawande writes that members of the medical profession, himself included, have been wrong about what their job is. Rather than ensuring health and survival, it is "to enable well-being."

If that sounds vague, Gawande has plenty of engaging and nuanced stories to leave the reader with a good sense of what he means. In a society that values independence, what happens when that is no longer possible? We need to reckon with the reality of the body's eventual decline, he argues, think about what matters most to us, and adapt our society and medical profession to help people achieve that.

The New York Times Atul Gawande's 'Being Mortal' By Sheri Fink
Published: Nov. 6, 2014

**FOR MANY, SUCH
TALK, HOWEVER
CAREFULLY
FRAMED, RAISES
THE SPECTER OF A
SOCIETY
READYING ITSELF
TO SACRIFICE ITS
SICK AND AGED.
BUT WHAT IF THE
SICK AND AGED
ARE ALREADY
BEING SACRIFICED
— VICTIMS OF OUR
REFUSAL TO
ACCEPT THE
INEXORABILITY OF
OUR LIFE CYCLE?**



**“ME, I DONE
LIVED JUST
ABOUT ALL OF
MINE (LIFE)”**

DOYLE

78

RESIDENT OF EAST HARLEM

Where I Ended Up

UNION SETTLEMENT

I followed up with everyone that replied to my desperate emailing, and finally I connected with Maria Alejandro, the Director of Senior Services at Union Settlement at Jefferson Senior Center. I interviewed her about the kind of work Union Settlement does with seniors, and we discussed how I could approach some of the seniors they worked with.

Union Settlement is an on-the-ground resource for East Harlem residents of all ages, and a passionate advocate for the needs of underserved communities. Since opening our doors in 1895, we have brought education, wellness and community-building programs to our neighborhood, empowering New Yorkers with opportunities to better their lives. By helping our neighbors realize their goals, we build the vitality and success of East Harlem.

unionsettlement.org/about

People don't want to socialize with old people because they are not old in their mind. Or they don't want to socialize with people who are poor

Feeling that someone is giving you something isn't easy

A lot of people don't want to be visited

People who come here to eat don't come because they're hungry, but because we have a human need to socialize

The Meals-On-Wheels delivery person becomes a critical connection for that person and the outside world

In that same meeting she set me up with the coordinator of programs at the center, and with Autrice, who worked in their Meals-On-Wheels department. I didn't know it yet, but meeting Autrice would be the best thing that could've possibly happened to me.

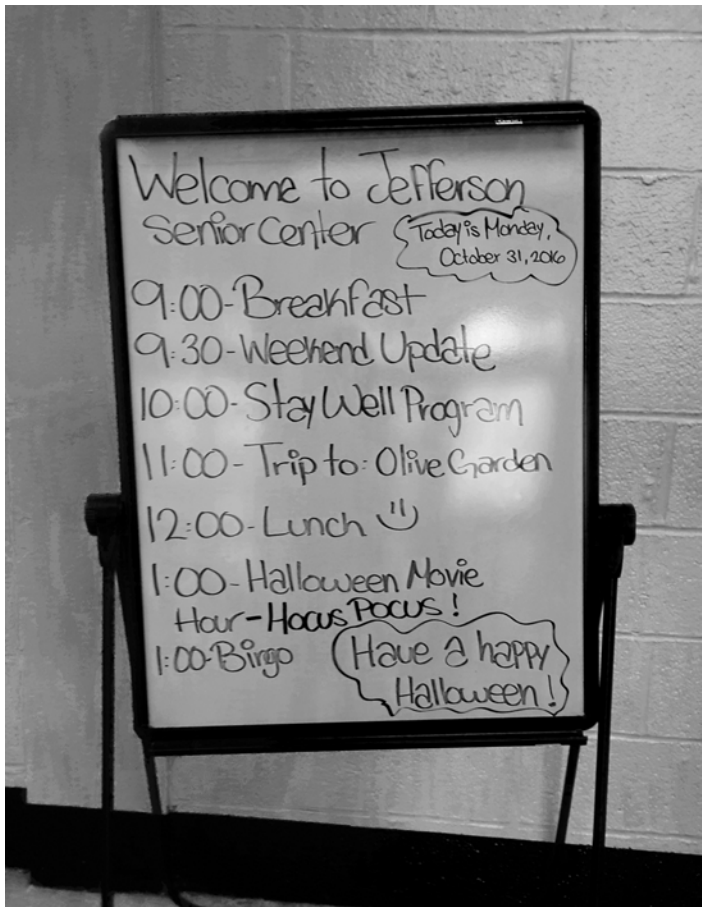
Over the next month I visited the center a lot. I did interviews with seniors who came in for daily breakfast, I researched the various programs they offered, but mostly I just hung out with the seniors. They were intrigued by new people, interested in the fact that I went to the School of Visual Arts, and far more active than I would've ever expected. And there were an overwhelming number of women.

Men seemed to be strangely absent from the environment. When I commented on this to one of the ladies, she told me "Men just find it harder to admit they need help." And the Senior Center was where people went to get help. It was a place that served the needs of seniors, as they interpreted them.

SENIORS HAD A PROBLEM WITH NUTRITION, SO THEY SERVED BREAKFAST EVERYDAY AND PROVIDED MEALS-ON-WHEELS SERVICES.

SENIORS GENERALLY DON'T GET ENOUGH EXERCISE, SO THEY HAD EXERCISE CLASSES.

SENIORS HAVE PROBLEMS GETTING AROUND THE CITY, SO THEY ARRANGED DAY TRIPS TO PLACES SENIORS EXPRESSED INTEREST IN GOING TO, LIKE OLIVE GARDEN.



*I'm looking for a boyfriend,
young with a little money.*

*I dated her because she was my
mother's nurse.*

*I have to go to the hospital today
to pray for the sick*

*You send Trump that and tell him
we need a couple dollars.*

NOTES FROM OBSERVATION AT THE SENIOR CENTER



**"I DON'T LIKE TO
STAY HOME ALL
DAY ALONE"**

**YOLANDA
83
RESIDENT OF EAST HARLEM**

At first I looked first at the turnout of seniors at the center. Why weren't more people attending? My logic was that there were existing services for seniors readily available, and active seniors were taking advantage of them, so maybe the isolated seniors just didn't know about the services, or they weren't excited about the way they were being advertised. So I set out on a mission to make senior services more appealing.

To make senior services sexy.

REASONS WHY THIS DIDN'T WORK:

A lot of seniors don't want to be called senior. The word carries a lot of baggage around with it. It implies frailty, sickliness, uselessness. People don't want to be associated with its connotations. No one likes seeing themselves as anything less than whole. So I pitched ideas to administration about other words for seniors: older adults, elders...but rebranding an entire department was completely out of the question. They were senior services. Despite all its connotations, 'senior' was also a technical term used to refer to someone over 60 and no one was about to change it.

I tried to challenge the connotations around the word seniors and trying to build a community of engaged people over 60. But this idea was particularly short lived. When I pitched it in a presentation to some of the thesis advisors their feedback was to pay attention to whether this would be possible with the cultural complexities of East Harlem. It's hard to get people together in one place. What would be my hook? My target audience was far too general for me to come up with a compelling reason they should all gather together.

After this particular dead end, I tagged along on a meals-on-wheels delivery route. It was an intense experience. The seniors on the route lived in such a variety of circumstances. I hadn't realized before that there were whole apartment buildings dedicated to housing seniors. And they were dreary places. Hunched over white haired ladies wandered hallways. Seniors took ages to get to the door when we knocked, and showed up, peering over their walkers or out of breath from the effort of making it to the door. Some were in a rehab facility that I wasn't allowed to enter, and others in a veterans' home, the dark, dank interior of which utterly broke my heart.

I BEGAN TO FEEL OVERWHELMED. HOW COULD ANYTHING I MAKE POSSIBLY HELP THESE PEOPLE?

I came back to DSI after a morning of delivering meals in Harlem and cried. The problem felt too huge. Having seen the situation up close, it seemed too dire. Making senior services more appealing would never help these people who couldn't leave their homes. And these were the people that needed help the most. It was logical that the people, who were in effect trapped in their homes, were the ones that were most socially isolated. I felt at a loss to help them.



**WHEN I FEEL
DOWN, LONELY,
OUT, I FIND
SOMETHING TO
DO IN THE HOUSE**

**LULU
84
RESIDENT OF EAST HARLEM**

SO I TALKED TO THEM.

I set up interviews with housebound seniors, and worked through my discussion guide with them. I tried to figure out how much social contact they had, what their routines were like, and what were the things that they wanted to do but didn't often get the opportunity to.

Using these interviews and my previous interviews with seniors who were at the senior center, I started doing a deeper analysis of the data to mine for interesting insights.

OBSERVATION

Seniors do not like to stay at home all day

DEDUCTION

Seniors enjoy being outdoors and interacting with other people, even if those interactions are brief and not substantive

**INSIGHT**

Seniors have an unfulfilled emotional need for tangible, physical human connection

OBSERVATION

The majority of social interaction experienced by seniors take place in the context of volunteering or giving back to the community

DEDUCTION

Seniors derive pleasure and a sense of self worth from the feeling of being needed and valued by their community

**INSIGHT**

Seniors believe that if they do not actively contribute to their community they will become irrelevant and their lives will lose meaning

THE 4 KINDS OF SOCIAL INTERACTIONS I IDENTIFIED:

SECURITY:

The safeguard of being part of a larger group with resources that allow for comfort and safety

DEEP CONNECTION:

A personal connection forged around mutual understanding, empathy and willingness to listen to someone's personal experience of the world

CONSULTATION:

Sharing of knowledge or experience. Purely a teaching interaction in which there is a definite hierarchy of power

CONTRIBUTION:

Involvement in a social activity that involves using one's skills or abilities in service of others

I wasn't sure how to move forward, these insights could lead in any of a million directions.

But my advisor again came to the rescue. Miya advised that I think about the things that I love, that I'm already interested in, and how those things could fit into my thesis project.

So I made a list of the things I loved:

- ♥ **BOOKS AND WRITING**
- ♥ **STORYTELLING AND FAIRY TALES**
- ♥ **MAGIC AND MYSTERY**
- ♥ **NATURE AND SUNSHINE**
- ♥ **OBJECTS WITH SECRET STORIES BEHIND THEM**
- ♥ **HOME AND THAT FEELING OF BELONGING**

From this, I tried to frame my intervention within one of my loves. I decided on writing and narrative. It was a way of communication and connection, and I reasoned that it was a slower form of communication, and if it was analog, like letter writing it would give seniors something novel to do during the day when they say that they “just try to keep busy.”

My first idea was that I’d get seniors to write letters to each other. It would be a self-sustaining system, with seniors providing companionship to each other. I also leveraged that Meals-on-wheels would deliver the letters between seniors

REASONS THIS DIDN'T WORK:

Mostly, seniors didn’t want to get involved with other seniors and their lives. They saw other people their age as coming along with a whole lot of baggage. They didn’t want to deeply engage with other seniors, didn’t want the burden of their problems.

Hi
My name is Lulu
McMillon I am a
Senior of 83 yrs old,
and I ~~was~~ would like
to ~~write~~ write letters
to you, to share my
long time history,
I am in process of
writing my story about
my life, and about
my childhood in the
Country, if I can share
my story, please feel free
to let me hear from you

LETTER FROM LULU TO ANOTHER HOUSEBOUND SENIOR

So I learned that my seniors weren't interested in deep connection with each other, but perhaps I could use contribution and consultation to my advantage, while leaving the other two forms of interaction open as possibilities they could direct themselves.

I pivoted to trying to connect seniors with young people. Writing to young people made them feel like they were contributing to society, like they were doing something, not for themselves, but for others. They all thought they would be helping young people by talking to them. This was particularly interesting finding.

So I tried to create something that would connect them to young people, but also include the aspect of 'deep connection' that I had discovered. And I came up with the idea of a sort of advice column by seniors. An advice mail service if you will, for all the questions about life that young people have that they can't ask anyone else.

And I started prototyping.

First, I had to figure out the right age of these ‘young’ people. I tried high schoolers in Harlem, but most teenagers and younger in Harlem know their grandparents and have close relationships with them. I learned that in Harlem a lot of kids are raised by their grandparents while their parents are at work. They didn’t get the concept of writing to a different old person for advice, they’d just ask their questions to their grandparents.

**AND I REALIZED THAT’S
WHAT YOUR EARLY
TWENTIES ARE ALL
ABOUT: SEEKING.**

So I thought about what would make a person ask someone older for advice. They would have to be able to appreciate that age brings wisdom and life experience of infinite worth, and they’d have to be people that have perhaps already lost their grandparents. People who are actively seeking. And I realized that’s what your early twenties are all about: seeking.

Deciding to prototype with **target audience in their early twenties**, I asked my friends in their early twenties what kind of things they’d ask someone in their 70’s or 80’s. I framed it as being an exciting opportunity to ask someone older and wiser for advice on just one thing in life right now. And the responses varied:

“My partner and I had been living together in the US for close to a decade. I want to go back to Puerto Rico, where we are originally from, to be close to friends and family. Although he is willing to try, this is not what he really wants. How can we make this work without our relationship falling apart? I will love to hear your advice”.

“I know that in life different people come into our lives and leave our lives. I turn 25 soon. I made lots and lots of friends, but most of them have disappeared from my life now. This makes me sad. How can I continue to cultivate these loving & meaningful relationships over time? Who must I keep and who do I let go off?”

While my senior cohort maintained they were interested in answering questions from young people, they entirely misunderstood some of the questions I presented.

Some curation had to occur on both sides.

1. When young people write in questions I had to make sure it was in language that my seniors would understand

2. When seniors responded, I needed to make sure that it was in terms my younger cohort could understand

What would seniors do if they got questions that weren't interesting to them?

What would young people do if they got advice that wasn't interesting to them?

So I tried to control at least one of those things. I needed to design an experience that was meaningful to my seniors. This meant understanding the kind of questions they wanted to answer, and the right amount of background information they wanted to be provided with from the asker of the questions. It was my working theory that this background information helped build the 'deep connection' part of the interaction and would allow my seniors to get greater context behind the question.

I ran several prototypes to try to figure this out.

First, I tried to develop categories for my seniors to choose from. I picked 4 very different questions and tried to make one liner topics from them, and have the seniors choose which ones they'd answer.



**A QUESTION ABOUT
RELATIONSHIPS**



**A QUESTION ABOUT
WHAT YOU MIGHT CHANGE**



**A QUESTION ABOUT
EMPATHY**



**A QUESTION ABOUT
GROWING UP**

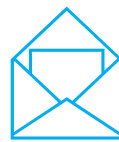
They gravitated toward the topic of growing up a lot more than any of the others. It was a good learning that seniors like to talk about their past, and their childhood memories. But the topics were written in way that maybe they were angling toward the growing up questions because the others seemed really difficult.

They couldn't guess what a question about empathy would even be about.

So I rephrased my topics and tried again. Still everyone gravitated toward childhood.



**A QUESTION ABOUT
A BIG LIFE DECISION**



**A QUESTION ABOUT
TRYING TO BE A BETTER PERSON**



**A QUESTION ABOUT
THE PAST**



**A QUESTION ABOUT
GROWING UP**

My final decision on this was to co-create guidelines with the seniors about the kinds of questions they wanted to answer. I integrated this approach into the on-boarding process for my final intervention. It helped garner buy-in from the seniors by getting them to trust the whole process.

I also tried to understand what kind of personal information my seniors might want to know about the young people. First I tried just names, ages and where they were from. The seniors didn't seem to react much to this information.

Next I tried showing pictures of the people who were asking the questions (I faked some of them by asking my friends at DSI to pose for the pictures.) The seniors enjoyed this only a little more than the other prototype.

Not getting any significant learnings from this, I tackled it from the other end. I had been asking young people online to ask seniors questions. I launched a new ask, still wanting them to ask seniors questions, but now wanting them to volunteer personal narratives or expressions that would help the seniors get to know them better. Some people did it, and some didn't. Letting that guide me, I gave seniors both kinds of questions, some with it the personal information, and some without. They actually enjoyed the mix of both kinds. I realized it catered to both 'deep connection' and 'consultation' interactions. The personal information would help the seniors who wanted to get to

know the young people on a deeper level, and the questions without the personal information worked for the seniors who just wanted to give advice without establishing that deeper connection.

If people wanted to volunteer personal information, I'd make sure it was appropriate and send it to the seniors. If they didn't want to volunteer that, I'd still send the seniors their questions.



Meals-On-Wheels was an amazing partner for giving me access to seniors. I got all the contact information I wanted, and Autrice always called the seniors before to make sure they were willing to participate and to prep them for my visit. But actually getting things done with them was a slow process. Communicating with them meant I needed to go out to Harlem, they almost never answered the phone or responded to emails, and frequently forgot my requests until I showed up again and they'd work through whatever I'd asked for while I waited in the office. So I was hesitant to use them as a delivery method for my letters.

I thought I'd try the mail. But there were a few problems with this:

1. I know from my own troubled experiences with the New York City post offices and my grumpy mailman, that mail can get easily lost. It troubled me that my entire thesis might fall apart if my mailman was in a bad mood.

2. It cost money. My intervention needed to be as sustainable as possible. If I was thinking about mail, I had to be thinking about stamps. Who was going to buy these stamps?

3. My intervention needed to work without me. Who would replace me as editor of letter and middleman who sorted and sent mail. It would be a full time job.

For a while I just shuffled between apartment buildings in Harlem, delivering letters myself and getting entirely worn out by the experience.

I finally approached Meals-On-Wheels about the project, and they happily agreed to deliver the letters.

“SURE, THAT’S EASY ENOUGH. I’LL GIVE THOSE OUT RIGHT NOW.”

**AUTRICE
CO-ORDINATOR
MEALS-ON-WHEELS
JEFFERSON SENIOR CENTER**

But I had waited too long. A new phenomenon emerged. When I was delivering the letters myself, the seniors felt more obligated to respond, without me scheduling pick up times in which I’d show up at their door steps, they took much longer to respond.

I wound up prototyping this only at a very small scale, with 7 seniors.

Without the personal on-boarding and hand delivery, the return rate on the questions was 4 out of the 7.

2 seniors’ letters got lost on their way to them. And one person who spoke to Autrice about the intervention and agreed to it, just never answered the phone when I called to check in.

**I HAVE PROOF OF
CONCEPT FOR EACH
PART OF MY
INTERVENTION:**

**1. YOUNG PEOPLE WANT
TO ASK QUESTIONS TO
SENIORS**

**2. SENIORS WANT TO
RESPOND TO QUESTIONS
FROM YOUNG PEOPLE**

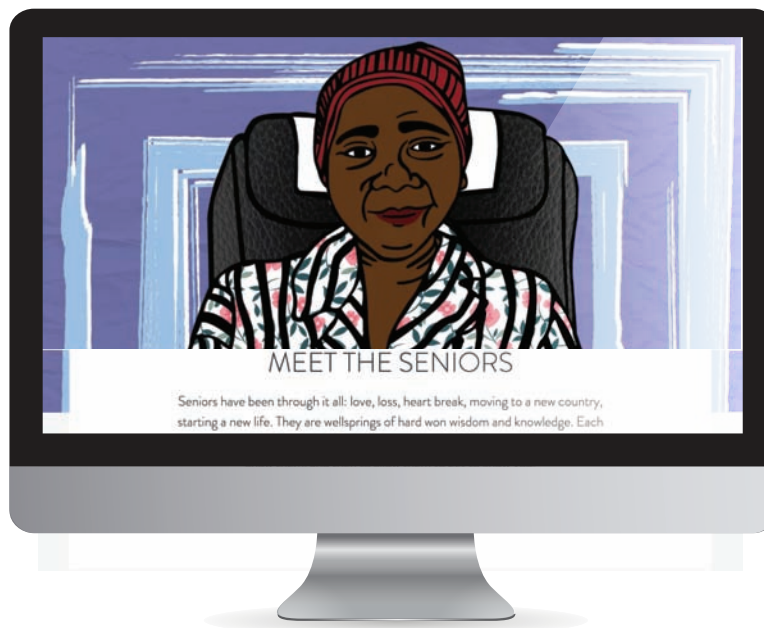
**3. MEALS-ON-WHEELS IS
WILLING TO
CO-ORDINATE THE
DELIVERY OF THE LETTERS**

**4. SENIORS WOULD
ACTUALLY WRITE
RESPONSES AND SEND
THEM BACK WITH THE
DELIVERERS**

What I Made

From experience with love is an intervention that moves fluidly from digital to analog to connect young internet users with housebound seniors in East Harlem who are not quite sure what the internet does. It seeks to tap into the curiosity of youth and the experience of age. Essentially young people will ask questions via the internet, and seniors will receive these questions as letters with their Meals-on-Wheels deliveries, and respond to them. The answers will be posted online to the askers. It is a far slower and lower tech but infinitely more human version of Google. Young people searching for answers, meet seniors who have been through it all.

ONLINE INTERFACES: WEBSITE



ONLINE INTERFACES: TUMBLR AND INSTAGRAM

IF YOU COULD ASK SOMEONE IN THEIR
70'S OR 80'S ONE THING RIGHT NOW,
WHAT WOULD IT BE?



What's the one
thing you can't
ask anyone else?

SOME OF THE RESPONSES TO THE ONLINE INTERFACES:



I love culture, history and hearing stories of a past that I was not able to see and of moments that remain as fond memories for others throughout life.

I remember snippets of the house I used to live in as a toddler and the smells of foods that I no longer eat. I'd love to be more nostalgic but at 25 I already have a memory that lasts as long as sand in a sieve.

Could you share with me a memorable moment in your childhood?

My name is Jeremy from the twin island state of Trinidad and Tobago and I am 24 years old with a family of 5. I like to read on a variety of issues, as well as having a passion for fictional novels in the fantasy genre. These days I carpool with some friends going to work in university and during the trips we end up talking about a variety of issues, to which I mostly listen although I have strong opinions on certain matters. Frequently and especially during conversations on religion and gender, the discussions get heated and sometimes end with someone being upset with another person.

My questions to you the seniors are, how can I explain my point of view to someone without causing offense to said person? Do I simply not say anything or do I compromise my own view for the sake of not causing offense? Most of the time, I try to understand the different sides of an argument instead of blindly picking a side, but other people don't understand where I coming from, mainly because I think they don't really consider the other side in their arguments. In that case, should I just stay quiet?

I feel that this is an issue which I will encounter many times in life and I will appreciate it greatly if you can offer some insight into how I might approach this when it presents itself again.

Right now work is hectic. I work an hour away from home and barely get time to do what I really want to. Should I stay just for the financial security? Or will I regret not enjoying my life right now?

Are you afraid of death?



**A LETTER DELIVERED BY
MEALS-ON-WHEELS ON
MS.BELL'S CROWDED SIDE
TABLE**



**MS. BELL RESPONDING TO
A LETTER FROM A CURIOUS
YOUNG PERSON**

**MS. BELL'S LETTER
TO THE CURIOUS
YOUNG PERSON**

Dear Jeremy,
The question of sharing your point of view without offending others is a good one. Some say topics relating to religion, politics & gender should be avoided. I disagree. When pre-
faced with love in word & deed, there is acceptance by some.
Your willingness to engage is healing for you & teaches others how to speak in love & not judgment. Maya Angelou said a person may not remember your name but will remember how you made them "feel".

There is an adage that says
"love thy neighbor as thyself."
As one would not hurt self you are
reminded not to hurt others because
of their point of view. We live in a
world of diversity & various
beliefs. Therefore all of us matter.
Even in speaking your beliefs,
not everyone will be accepting
you alone will determine
what topics to address. And you
cannot please everyone,
Never the less choose your battles
There are times that avoiding a
particular subject will be necessary.
I believe respect & empathy
is the way to approach any
discussion.

I commend you for being you
& willing to be guided in sharing
your point of view without hurting
others.

Sincerely
Captain Asha Jha Bell



**“WHEN I
WAS
YOUNGER I
TRAVELLED
ALL OVER
THE WORLD
AND NOW
THAT I’M
HERE IN THIS
BED,
THE WORLD
IS COMING
IN TO ME.”**

DESIGN RESEARCH:

Seniors have a need to feel needed. They have a strong emotional need to feel that their lives still retain value and meaning, and that they are necessary. While hesitant to connect with other seniors, they are willing to connect with younger people, to dispense advice and share stories, because they view this as them being helpful, as them contributing to society by sharing their experiences.

From experience, with love leverages the most valuable resource that seniors have to offer, their hard won breadth of experience. Unlike other interventions addressing social isolation among seniors which portray seniors as helpless or in need, this intervention will empower seniors and show them as knowledgeable, valued resources.

Submerged in tightly connected, fast paced, digital world, younger people have a need to feel listened to, to feel authentic human connection. The target audience of young people are persons in their twenties. This age group can understand and appreciate what it means to have lived to be 70 or 80, and are curious about the experiences of others.

METHODS:

From experience, with love needs to be able to move fluidly from digital to analog. It needs to meet digital natives in familiar environments, and it needs to reach seniors in a form that they can properly interact with.

Young people will submit questions via digital platforms, the questions will be curated and sent to seniors as letters. The replies will be posted on the digital platforms either publicly or privately. The intervention will have built in methods that allow participants to further the conversation, so that the connection can be deepened beyond a one off interaction.

PROCESSES:***Young People***

Online digital and social media platforms will introduce from experience, with love to the digital natives of the world. They will see illustrations and stories from the seniors and read about their different personalities and experiences. They can choose to direct questions to a particular senior, or just to the senior community in general. The questions can be anonymous, in which case the answers will be posted publicly, or have names attached, in which case the person would have the option of a private or public reply. The questions will then go to a curator and editor. The asker will have the option to share something about themselves with the senior, a picture, a story, a drawing, something that would give the senior more context about their personality.

Curator/Editor

The curator/editor will review the questions to ensure appropriateness according to set guidelines that have been co-written with the seniors who are participating in the program. The editor will choose one question per week to send to each senior. The editor will coordinate the sending of the letters through Meals-on-Wheels, and the personal picture or story that the asker sent, to the seniors. Copies of all letters will be archived and kept safely.

The other questions that were not chosen that week will be parsed for common themes or popular concepts or questions. These themes will then be addressed in a monthly podcast with the seniors which will be distributed online.

The curator/editor is also responsible for collecting the replies to the letters and posting them to the appropriate public or private forum.

Senior

Seniors will choose categories of questions that they would be willing to answer. They can change their categories at any time by calling the curator/editor. They will receive one letter per week and will be asked to reply to this letter from experience, with love, and send it back to the curator/editor with the Meals-on-Wheels deliverer.

THEORY OF CHANGE: SENIORS

**IMPROVED PHYSICAL
AND MENTAL HEALTH
OUTCOMES FOR SENIORS**



**SENIORS TAKE GREATER
CARE OF THEIR PHYSICAL
HEALTH**



**SENIORS FEEL MORE
ENGAGED WITH THE WORLD
AND LESS LONELY**



**SENIORS INTERACT WITH
MORE PEOPLE**

THEORY OF CHANGE: YOUNG PEOPLE

**YOUNG PEOPLE FEEL
INCREASED SELF ASSURANCE
AND SELF CONFIDENCE**



**YOUNG PEOPLE FEEL LISTENED
TO AND ACKNOWLEDGED**



**YOUNG PEOPLE GET A
RESPONSE FROM SENIOR**



**YOUNG PEOPLE ENGAGE WITH
SENIORS VIRTUALLY BY
WRITING IN A QUESTION**



**YOUNG PEOPLE HAVE
QUESTIONS FOR SENIORS
ABOUT LIFE EXPERIENCES**

What Is Left to Be Done

MEASURE HEALTH OUTCOMES

With the limited timeline, I realized I was not going to be able to change health outcomes of seniors. Any measurable change in psychological state or management of chronic disease would understandably take more time than the one week full prototype that I pulled off. It would take more than one letter.

So instead I measured and evaluated the feasibility of the concept. I have strong enough anecdotal evidence and qualitative data to suggest that this kind of intervention should be tested at a larger scale, and have a longer pilot. From that pilot quantitative data could be gathered to decide if this has real potential to change outcomes in the field of public health.

TESTING WITH YOUNGER COHORT

I haven't done enough testing with young people to determine if my theory of change works. Some of the questions I received were submitted anonymously, and others were submitted without return emails so I didn't have a significant cohort to do measurement with. I need to gather a cohort of people in their twenties to prototype with, and build out measurement tools for them.

HOW DOES THIS SYSTEM WORK WITHOUT ME?

I'm in the process of figuring out ways that this intervention can exist without me as the curator. I have a meeting with Brooklyn Public Library to pitch my idea to their Older Adults Programs team. They have a Books-By-Mail service for housebound seniors, and I could potentially hack that system the same way I did Meals-On-Wheels to use it as a delivery method for letters. This has the added benefit that I know the seniors in this program enjoy reading. I'm also in conversation with Writopia, a creative writing lab for young people in New York about getting some of their members involved. I think bringing together seniors who love to read with young people who love to write could be wonderfully rewarding. I'm also trying to establish contacts with the veterans home that Meals-On-Wheels services, and with ROTC programs to connect those two cohorts through letter writing