Now What? Think Fast: Using Healthcare Clinics as Universal Language to Maximize Learning for International Students in a Graduate Classroom

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ABSTRACT

International students in Masters programs come to the US optimistic and willing to learn. Upon arrival and entrance into programs, they often encounter unexpected environments. Culture shock and language barriers may seem like obvious hurdles, but work ethic and scope of visual knowledge also pose unique challenges for both students and design educators.

Although all students share new challenges in graduate school, international students face tougher impediments in studio environments where they express themselves both visually and verbally. Additionally, much of design uses humor, idioms, and visual clues only understood in English. So how do educators help international students build on what they already know? How do educators break barriers between domestic and international students so they may teach one another through a shared language?

In fall 2015, my Conceptual Development and Implementation class was struggling to exchange ideas in the classroom. We moved through that struggle by developing a shared language around each student’s experiences with healthcare clinics in their country of origin. Students explained what makes healthcare clinics reputable; how people access information in India, China, small towns and larger urban areas; and where people look for trustworthy information. This paper discusses how one educator used student experience of healthcare clinics to find a universal language to maximize learning for international students in design education.

Key words: design, healthcare, education, universal, language

FIRST SEMESTER IN VCD: A DESIGN PROBLEM

Both domestic and international students face difficult challenges in their first semester in any graduate program, especially in a rigorous design program such as the School of Visual Communication Design at Kent State University. Noted for its strong work ethic and high standards, the school demands that students adapt quickly, rise to the high expectations of a demanding curriculum, and demonstrate excellence in their processes and outcomes. For most students, this is an exciting time to adapt to new environments, and assimilate to the school’s culture and community. Despite the excitement of new adventures, it isn’t unusual for students to experience stress, anxiety and even depression during their first semester. Fortunately, most students acclimate with few residual issues finding friendships and faculty connections which enable them to succeed. Having watched this process in its iterations for many years now, as both faculty and an administrator, I expect these challenges to creep into the first semester classrooms adding to the normal course dialogue, especially in studio courses. Keeping lines of communication open between students during this time is vital for faculty as they discern and assess the classroom, adjusting the curricula as necessary.

In the last 10 years, The School of Visual Communication Design has increased international student enrollment so more international students in the classroom hasn’t been out of the ordinary. However, a class of almost half international students, like the kind that occurred in fall of 2015, was unusual. Conceptual Development and Implementation had nine students: three Indian, one Chinese and five domestic students. Additionally, the three Indian students, all with various levels of English proficiency, came from different parts of India; one from a small rural coast town, and the other two from larger towns on the opposite sides of the country with distinct customs and dialects. The Chinese student knew very little English, so for her, language was the biggest obstacle in the class.

Equally, domestic students came from varied backgrounds and skill sets as well. One had an undergraduate degree in design but lacked formal skills in typography and layout; one was a practicing designer working professionally without a formal design background; one worked in KSU’s admissions office producing university publications, but lacked formal design training; one had an undergraduate degree in nutrition with a design minor; and, one had an undergraduate degree in marketing but lacked visual design background.

Conceptual Development and Implementation was a seven-week course where students had to craft creative messages for specific audiences in appropriate venues using design principles to create aesthetically pleasing designs. After several weeks of the course, the first project completed, it became apparent that creative curriculum adjustments would have to be made for the unusual student mix because students were not connecting nor exchanging feedback in critiques the way I had hoped.

SOLVING FOR “L” IN DESIGN STUDIO: PRACTICE BASED TEACHING+THEORY+INTUITION

Before we discuss how the students and I used our joint knowledge and experiences to address this culture gap, we’ll step back and take a broad look at design theories and practices that inform this classroom.

Design has been and continues to be a practice-based discipline. In graduate studio classes, students are typically asked to solve unframed problems that usually include a visual component. Although design is typically a profession that is seen as making
something, increasingly, that isn’t always the case. “Contemporary design problems are increasingly complex and defined in terms of experiences rather than objects” [Davis, 2012]. One good example of that is the creation of Zipcar, http://www.zipcar.com/, a worldwide car sharing company that, as Meredith Davis in her book “Design Theory” explains, was a project “designed as a service experience, and illustrates the fact that the focus of design need not be object-driven” [Davis, 2012]. In studio classrooms, students define, solve and create prototypes through iterations presented in class critiques. The expectations are that the concept (idea or art direction) and form (type, space, layout, images, color) will be fused together to create something, an artifact or an idea (website, brochure, identity, exhibition design, experience, interface design, motion graphic, signage, packaging, etc.) for a specific purpose (promotion, branding, increase sales or exposure, public awareness, change perceptions, etc.). Students use the design principle taught in undergraduate programs and make prototypes with the expectation that they will be innovative, appropriate and have measurable results.

Studio courses are a combination of lectures, demonstrations and full class and individual critiques that provide feedback to students in each stage of the problem. The solution starts with research and analysis, moves on to brainstorming and sketching ideas, refining ideas and creating final prototypes for testing. Each stage of the project is shared with the class where students provide feedback, offering suggestions on how to improve the work, while exploring creative possibilities. In this iterative process, students learn about their own creative potential while solving the given problem. Language and visuals each play a role in communicating messages, so, although visual designers tend to focus on “visual” aspects of communication, successful solutions often depend on creative use of language. Interpreting research, synthesizing findings and creating solutions are tightly integrated in the design process, which is why the “L” factor, or language, coupled with understanding of one’s audiences plays an important role in shaping messages. Ivan Chermayeff said, “Good design at least part of the time, includes the criteria of being direct in relation to the problem at hand—not obscure, trendy, or stylish. A new language, visual or verbal, must be couched in a language that is already understood” [Friedman, 1989].

Successful design depends on a synthesis of the complex and the simple, which is more challenging than would appear. John Maeda in his book The Laws of Simplicity: Design, Technology, Business, Life said, “Simplicity is about subtracting the obvious and adding the meaningful” [Maeda, 2006]. And, as most design researchers understand, one has to conduct much research, and understand the complex before synthesizing into something simple, usable and elegant. Whether it be a product, an interactive experience or a printed brochure, the synthesis is the same. Designers strip out the unnecessary and bring to light the essential in creative, effective and sometimes witty ways. If, in the process, an artifact can inspire, change viewer’s minds— better yet. And, if the artifact through a shared vision can impact the social condition for the better, designers may say they have done their jobs well.

The paradigm became necessary in our multicultural classroom, not just in the designs we produced, but even more fundamentally, in how we were able to work together to produce designs. In order to communicate with one another, we needed shared vision, we needed to highlight the essential, and we needed artifacts which could serve as touchstones for each student’s experiences.

**MERGING THEORY AND PRACTICE INTO DESIGN FOR POTENTIAL SOCIAL GOOD**

Almost regardless of cultural background, students come to classroom with an understanding of the trajectory of modern design. Collectively, another cultural touchstone becomes the philosophy of “design for social good”. In the last 10 years design has also become much more responsive to designing for social change. Numerous books, courses and workshops have been conducted on design for social good. The topic merges academic achievement and real world outcomes to help local and international communities. AIGA, the “profession’s oldest and largest professional membership organization for design—with 70 chapters and more than 25,000 members” [AIGA, 2016], has promoted this idea of design for social good and has supported “designers who play a catalytic role in communities through projects that create positive social impact” [AIGA, 2016]. Businesses specifically designed to assist with the social good are sprouting all over. One of the earliest adopters of this idea is IDEO who defines itself as “a global design company” which creates “positive impact through design.” Their mission is to help “organizations innovate by empowering the people who drive them.” Additionally, they believe in the philosophy that complex “problems are best solved collaboratively.” IDEO brings together networks to act on systemic challenges in education, sustainable food, mobility, and aging and death” https://www.ideo.com/us/about.

**Design for Good**

According to AIGA, “Design for Good supports and sustains designers who play a catalytic role in communities through projects that create positive social impact. By connecting and empowering designers through online networking tools, inspirational stories, chapter events, training, national advocacy and promotion, Design for Good serves as a powerful resource for designers who wish to work in this area and a beacon for designers leading the charge” [AIGA, 2016]. In my own research with local healthcare providers, such as Neighborhood Family Practice and The Cleveland Sight Center, I have worked in local communities to affect change and have encouraged my students to think about how their design can impact the world.

**Theories + Intuition Lead to New Ideas**

Although I didn’t intentionally set out to employ either Socratic or Freireian theories in my curriculum, looking back on my class, I can see that experimentation, empowerment and responsible design all link to both Socratic or Freireian theory as well as to intuition, which is already interwoven with design thinking and processes. All three ways of knowing play an important role in shaping my pedagogy. The following paragraphs explain how both the Socratic and Freireian Theory played a role in shaping the new curriculum for my multicultural classroom.

**Socratic Theory:** The idea of designing using inquiry as a method of self-understanding is not new. Critiques in studio courses are all about asking questions on how the work can be better, what the student is learning and how they are applying self-discovery to their work. Clinton Golding in his book review on Saran and Neisser’s book “Inquiring Minds: Socratic dialogue in education,” talks about how the Socratic method of inquiry is still used in today’s classrooms. Golding states, “The model of Socratic dialogue is one in which educators are
creating the space for students to engage in self-directed learning and to learn how to uncover what is true for themselves. The students learn for themselves, but, more than this, they learn to apply their thinking to one problem for extended periods of time in order to reach sound reasoned judgments or get to truth. This sort of dialogue leads to a greater depth of understanding to which traditional education rarely comes close” [Golding, 2005]. For designers, this method of encouraging self-discovery is deeply entrenched in design pedagogy.

**Freireian Theory:** In the same way Socratic method of inquiry is used by designers in self-directed learning, Freireian theories can be used as the basis for designers using design for change or for betterment of society, which is the basis for “design for good” mentioned earlier. The employment of this theory in the classroom echoes back to the theories of Brazilian educator, Paulo Freire, described by Reflect as follows. “The central premise of Freire's theory is that no education is neutral — it can be used for domestication or liberation. Fundamental to Freire's educational philosophy is the notion of collective action and continuing struggle on the part of the oppressed to liberate themselves from all forms of domination. The oppressed are active subjects in their own struggle” [Reflect, 2016]. Freire’s theories and pedagogies have been interpreted and used by scholars and educators to achieve different results. For example, in his article “A Pedagogy of Social Justice Education: Social Identity Theory, Intersectionality, and Empowerment,” Aaron J. Hahn Tapper discusses how he used Freire’s theories in his work. “Based on in-depth interviews conducted with and surveys completed by administrators, educators, and student participants of the organization’s programs, this article analyzes a case example of social justice education that integrates Freirean thought, social identity theory, intersectionality, and experiential education, including empowerment and responsibility education. Offering different programs aimed at distinct constituencies yet all based in the same pedagogy, the organization’s primary goal is to empower participants to engage in social justice activism” [Tapper, 2013].

As a new course objective evolved in my classroom, using each student’s common, yet culturally distinct experiences with healthcare clinics, we observed the dynamic of both empowerment and experimental methodologies at work in our solutions. Translating these theories into “real world” solutions has the potential to make an impact in global healthcare, an area which undoubtedly is riddled with problems needing to be solved.

**Intuition:** “Innovation begins within the embryo of intuition, is nourished by imagination and breathed into life with ingenuity and hard work. In the beginning, there is intuition. The dictionary definition of creativity is ‘having the quality of being creative as opposed to imitative,’ which is rather circular definition. For most professional practitioners, creativity is defined as making novel, useful connections that allow one to arrive at a unique or innovative solution” [Weintraub, 2011]. Intuition is another component employed in the design process and used in many creative fields, including fine arts, industrial design, architecture and writing. Design shares similar processes with those fields.

Brainstorming, or generating as many possible ways to solve the problem, is a process where any and all ideas emerge after the obvious solutions have been exhausted. In order to go beyond the obvious, designers often tap into irrational solutions, much like artists and fiction writers seek out new ideas. They use intuition to explore and discover solutions to concrete problems. By combining tuition, design thinking and research, designers discover new solutions to problems. This method too, was employed in the Conceptual Development and Implementation class.

**Trying something new —taking a risk on idea**

It became clear that the success of this class was dependent on the extent to which I could stimulate more meaningful, personal dialogue in our classroom community. I wondered how to explore the areas that international and domestic students have in common. How can domestic students teach international students and vice versa? Is there a shared language that can unify the class?

From my own work in healthcare, I know that common stories have a way of connecting people from different backgrounds. When people draw on personal, past experiences, they do so readily, connecting personal experiences to creative ideas. As stated by Casakin and Goldschmidt in their article, “Expertise and the Use of Visual Analogy: Implications for Design Education”, they talk about this memory retrieval. “As expertise develops, knowledge becomes more structured and better integrated with past experiences, so that it can be retrieved from memory in larger chunks” [H. Casakin, G. Goldschmidt, 1999]. Capitalizing on these past experiences in “larger chunks,” seemed like a natural path for the international students to tap into their native cultures for their last project. So, instead of assigning all nine students the promotion of one local clinic, I asked them to promote an opening in their own, hometown clinics. The project had to have a distinct audience; it had to be clear in its purpose; and must have a visual solution that would fit into their existing culture. This new objective was designed to accomplish two things: one, have students focus less on their new culture and instead focus on what they know; and two, use self-ethnography, the research of self, in their native cultures to share ideas with their classmates. The questions posed to them were as follows:

- Specifically name the exact region of the country/state/city where your health clinic will be located.
- Specifically state why your solution would appeal to the people of that region.
- How is your message unique or different from the expected?
- How do you think your audience will respond to your message? Why?
- How will your promotional piece be delivered? Mail, bus, by hand and to whom? Be specific.
- What makes your design trustworthy or reliable?
- If you are an international student, please present the work in your native language. Also provide an English translation of the work.

**Procedure:** The procedure for project development included conducting research, writing a brief creative summary and developing possible solutions to the problem. Analysis and content development required three different ideas for discussion. The process should include sketches, image samples and copy ideas (headline, text, call to action). After several class critiques and iterations, students had to choose the most effective solution, create a prototype and share it with the class.
Nicholas Tomlinson and John Stevens in their “Reflections on the Process of Visual Design” summarize this form making process as follows. “As a maker of forms, the designer—unlike the fine artist—is usually called upon to act as an intermediary, as an interpreter. The form which he regards as appropriate for a particular ‘message’ will depend directly upon his understanding of the nature of the message itself—for example, upon its relative simplicity or complexity. It will also depend upon the ‘audience’ for which the message is intended. Thirdly, the form will inevitably reflect the attitudes, skills, predilections and personality of the designer himself” [Tomlinson, Stevens, 1972].

**STUDENT SOLUTIONS**

After going through the process and creating various solutions in a three-week project, a number of interesting outcomes arose. The choice of clinics by each of the students was fascinating, revealing something about each of them and their native culture. Each student chose what was most familiar to him/her, indicating familiarity with that particular aspect of their background. The choice of projects indicated students who had certain leanings towards the subject matter that was not only familiar to them but was an area of particular personal interest. The Chinese female in her early 20s had a particular interest in cosmetic surgery, and her research collection was larger than most other students. For that reason, more will be explained about her project later in this paper. Nine students in the class, five domestic and four international, had the following solutions, which will be referred to as Domestic Student 1–5 and International Student 1–4.

**Domestic Students 1–5**

**Domestic Student 1**, a professional designer working without a formal design background, chose a small town, USA, where he grew up. He was clearly aware of his lower middle class audience and the type of people who lived in his town. Like many lower middle class neighborhoods, this one has its share of middle and lower-middle income people. In that neighborhood, many people simply can’t afford healthcare of any kind, and go to the doctor when they’re sick and not necessarily as part of suggested preventative healthcare. The audience of primarily working class people would most likely not respond well to a large clinic promotion via the Internet, nor expensive print publications, as that may imply more expensive healthcare but go to a local clinic when the need arises, usually in emergency situations. As with the Domestic Student 2, who worked on a large urban clinic, this student also had an effective understanding of her audience’s responses. Anecdotal evidence suggested her small brochure, also used as a refrigerator magnet, should focus on urgent care or emergency room services, primary services, and affordable pricing (Figure 4). In her secondary research, she discovered many people in this type of small town frequently choose local clinics in emergency situations only because they typically don’t get preventative care and use emergency services when an incident such as heart attack, appendicitis, broken bones, etc. occurs (Figure 5).

**Domestic Student 3** also came from a small town, USA, mostly low-income population with little or no healthcare insurance. She chose to design a 24-hour walk-in clinic because a large percentage of people in her home town do not seek routine healthcare but go to a local clinic when the need arises, usually in emergency situations. As with the Domestic Student 2, who worked on a large urban clinic, this student also had an effective understanding of her audience’s responses. Anecdotal evidence suggested her small brochure, also used as a refrigerator magnet, should focus on urgent care or emergency room services, primary services, and affordable pricing (Figure 4). In her secondary research, she discovered many people in this type of small town frequently choose local clinics in emergency situations only because they typically don’t get preventative care and use emergency services when an incident such as heart attack, appendicitis, broken bones, etc. occurs (Figure 5).

**Domestic Student 4** focused on promoting a large, college campus, pet clinic because she discovered that students living on large urban campuses who own pets don’t have inexpensive on-campus pet care for their dogs, cats and rabbits (most common pets). She designed a small brochure to be placed near the checkout of the campus library. Students checking out materials would be able to pick up the brochure and receive an initial visit discount (Figure 6). She was given special permission to promote healthcare for pets instead of people. Her research indicated that students who live around the campus areas own pets which need veterinary services. In her large, undergraduate university community, there was a veterinary clinic on campus which frequently treated student’s pets. Students were grateful to have this service provided for them while they were in school. It’s proven that pets tend to distress students, and provide good companionship for students away from home, so having a veterinary clinic on campus was a good choice and her promotion was appropriate for the project.

**Domestic Student 5** has an undergraduate degree in marketing, and spent much of her life on a small, Caribbean Island working in a non-creative field. For her health clinic promotion, she thought that the relatively isolated island provided an ideal place to have a drug rehabilitation clinic catering mostly to celebrities and well-off clientele. She decided to design a high-end, professionally polished but non-intimidating brochure that would promote a kind of “vacation get-away” where people could recover and heal in the privacy of a beautiful island (Figure 7). The decision to promote this brochure came from many years of observing island life, seeing guests come and go from the island, and noting how the isolation of that community may in fact lend itself well to travelers seeking privacy, or a place to get away from everyday life. Promoting drug habilitation treatment made sense for her experience.

**International Students 1–4**

**International Student 1** has an undergraduate degree in design and comes from a large urban area in India. He focused on male
pattern baldness (MPB), beginning with initial sketches (Figure 8). In studying the problem, he discovered that this problem disproportionately affects more Indian men compared with the rest of the world due to high levels of pollution in urban India. MPB is a particularly embarrassing problem, especially for high level executives and people living in high income brackets. International Student 1 knew men in that part of India would best respond to conservative, corporate and discrete approaches in a small tri-fold brochure (Figure 9), which would be hand delivered, and slipped under the door of neighborhood apartments by a “building porter.” The inside of the brochure would discuss how to choose a doctor, a method of implanting or growing new hair and other details of the procedure (Figure 10). This hand delivery method received much discussion during the class because in the US this is unheard of. Building porters are uncommon, especially in small or rural towns in the US, so this idea of someone slipping something under one’s door was rather unusual, but the class learned much as it heard personal stories of how building porters deliver many such things discreetly in high rise apartment buildings in India.

**International Student 2** had no formal design background, and also came from a large urban center in a different part of India. This student decided that opening a cancer treatment center in his hometown would be beneficial because there was a shortage of these types of clinics where he lived. This came as a surprise to the US students since they expected that a large urban center would have such a facility. The international student in this case created two full-page ads that would appear in a large inexpensive, daily, English language newspaper. Because of the typically busy and overcrowded appearance of the newspapers, his ads would be visually subtle, clean and simple, standing out in a crowd of complex advertisements (Figure 11). The notion that most people still read traditional large newspapers was also a topic of much discussion, spurring on dialogue about technology and handheld devices, versus print, and how print advertising is still alive and well in India.

**International Student 3** has professional experience in design, and also came from India but took a very different approach to the opening promotion of his clinic. His was a health clinic located on the southern tip of India that uses traditional Indian healing treatments called “Ayurveda” or The Art of Being (Figure 12). The ancient, time-tested treatments have helped people regain energy and well-being for generations. The class had many questions about this ancient practice, comparing it to holistic medicine or Eastern medicine in the US. Students wanted to know exactly how a sick person is healed through this process, and why people in his part of the world still hold on to these traditions. Since western medicine is increasing across India, his brochure would remind people that traditional healing has stood the test of time. This information would be discussed inside the brochure (Figure 13). And, since most people in this region would respond to this easily understood message, his brochure would be the most effective way to inform people about the new service. The brochure would be a giveaway inserted into the daily newspapers. He said that his audience would respond well to natural, graphic elements, colors and patterns found in Indian traditions. His brochure would be created in English because most of the people in that region are comfortable reading this language.

And lastly, the Chinese student or **International Student 4** whom I mentioned previously, created a full-page magazine insert for a popular teen magazine, advertising a new cosmetic surgery clinic located in a large urban area. Like other students, she started out with early sketches (Figure 14). She ended up with the new two-page magazine insert (Figure 15). Also, she designed an accompanying advertisement that would appear in giant lights on a building in a large urban center. This was an interesting project, maybe more so than others, because the subject matter of cosmetic surgery for very young Chinese women opened a surprisingly interesting discussion.

The project began the same as the others; initial secondary research, followed by visual examples, and an explanation of why this particular clinic would be useful and necessary in China. International Student 4 explained that young women in China, and many other places throughout Eastern cultures, wish to look more like “Western” women. In her spreads, she emphasized a “before and after” photograph of surgically adjusted eyes, nose and mouth (Figure 16). She showed teen magazine insert which would appear in a magazine (Figure 17). She explained how this model of beauty has been prevalent in her culture for a long time. She included a photo of a woman whom her audience would perceive as a “classic Chinese beauty” with large eyes, smaller sculpted nose and an “adjusted mouth” (Figure 18). Furthermore, she went on to explain that this “cultural tradition” is deeply entrenched in the Chinese culture, and girls from a very young age (pre-teen to teen) are weaned on the idea that they need to be “adjusted” to be beautiful. The student brought in numerous examples showing ways Chinese women’s eyes, nose and mouth were “adjusted” through cosmetic surgery on a routine basis. She told the class it wasn’t unusual for young women graduating from high school to get the gift of cosmetic surgery as a graduation present from their families. The reason this particular project may have received more attention than others is because it seemed so different from its US counterparts. The whole notion that women in China had to be “adjusted” to be beautiful wasn’t entirely new to US culture, as there is certainly pressure on women in Western cultures to look youthful and therefore beautiful; however, the age at which young women were highly encouraged to have cosmetic surgery was very different from the US small town expectations. The topic generated much discussion prompting what seemed like an age old questions of feminine beauty, and the expectations of women to look beautiful regardless of their country of origin. What was particularly interesting to the students in the class is how much Chinese women wanted to look like “Western” women, to the point of specifically adjusting their native features to fit into the perfect beauty ideal. What was equally surprising to the class is that International Student 4 could not understand why her topic would be surprising to domestic students. The day she presented her project to class was one full of surprises.

### RESOLUTION, RESULTS AND MORE THEORY

In addition to the Socratic and Freireian Theory, it is fair to say that Conceptual Development and Implementation students produced work which is in line with a prominent design theory called the Reception Theory, discussed in Meredith Davis’ book, *Graphic Design Theory*. Davis states, “that the meaning of something… is created not by the inherent qualities of communication (or literary text) but the relationship between the object and the reader” [Davis, 2012]. Both domestic and international students were familiar with their culture and understood the meaning of the messages they were designing.
In other words, they had a relationship to the subject matter; therefore, they were able to produce meaningful messages. Davis goes on to say, “If we shift our focus to visual message and its interpretive life cycle in society at large, we can describe communication as consisting of the message creation, reproduction, distribution, reception by individuals, consumption by culture. In this cycle, the message is first made concrete through creative process of representation, and encoding of the message in material form that has the intention in bringing to mind the appropriate concepts. This encoding process is the traditional domain of a graphic designer, which draws upon the language an understanding of the culture to craft visual, spatial, and temporal messages that stands for something to the intended audience” [Davis, 2012]. Davis’ diagram shows how this theory works in actual classroom projects with diverse students, thereby demonstrating how the students happen to derive their solutions (Figure 19). We see Reception Theory woven through the design process in this project.

The diversity of student solutions for this project demonstrates what can happen when students draw on personal experience while connecting to new ideas learned in the classroom. For international students in particular, this project provided a way to openly share personal aspects of their lives, adding to the richness of outcomes, which probably would not have occurred had I not changed my curricula. The project gave students permission to talk about their differences and learn from one another through the universal language of healthcare. Also noted in the international students’ work is the diversity of their cultures and their own takes on what it means to start a healthcare clinic in their cities. This diversity is what I was hoping to tap into when I assigned the project, giving every student the opportunity to learn from one another and seeing how the design process works across different cultures.

The most noticeable improvement in the course was the burst of excitement and dialogue that spread like wildfire — which I never expected to see from this group. During class discussions, students pulled up photos and videos on their mobile phones and brought in publications in their native languages to share with their classmates. Equally and rather unexpectedly, something else occurred during the exchanges of design ideas. Students, and international students in particular, shared their personal stories, talked about their families, towns and hobbies and other interesting subjects—all relative to their cultures. We discussed food, cars, family expectations, modes of delivery, transportation. Everything became connected once the stories started to pour out.

Students also generated many more ideas on the second project than the first because they understood their audience: the messages, humor and cultural idioms made sense to them. Research became easier in their native language as did understanding cultural paradigms. There was a noticeable comfort level in these discussions, and students stayed to talk to each after class. After projects were turned in, international students told me they felt a little home sick thinking about their families. Most said they didn’t think they would be talking about their backgrounds in a Conceptual Development and Implementation course but would be trying to be more “American.” They told me they didn’t think that American students or faculty would want to hear about where they came from in design projects. These comments reminded me that despite the many events, dinners, sponsored family programs and mixers designed to make international students feel welcome, loneliness and isolation are a very real part of their experience on our campus.

Domestic students were also a little surprised that it was acceptable and encouraged to work something from their personal lives into design projects. They told me that this project made them feel like their design can start to effect change in their own communities, something they wanted to explore further throughout their graduate program. Design for good is a fairly substantial part of the graduate experience, as are open framed problems, so there is no shortage of opportunities for expansion on this idea of personal interest as students continue further in the program.

I was surprised by how much more visual the research became with “extra” background photos and stories brought into the classroom that didn’t happen on the first project, where everyone had to promote a local farmer’s market. The discussions in the second project also became more engaging, forthright and genuine. It was like the whole class came alive on the last project—something I couldn’t have predicted would happen. From a methodology standpoint, it can be deduced that students responded more positively to the personal nature of the project. Equally, it seems that healthcare was a topic that everyone can relate to on some level, which provided a universal playing field for discussion.

**SUMMARY**

By employing new methodologies, a combination of Socratic, Frierian, Reception Theory and intuitive methods, what started out as a challenging first semester graduate studio course ended with an evolving community and successful design outcomes. Methods employed worked successfully in equal part with both international and domestic students. Healthcare, as a universal language, proved to be good choice in unifying the class, which contributed to meaningful dialogue and successful prototypes in a three-week design project.

Perhaps unsurprisingly, what didn’t work is that students didn’t have enough time in three weeks to adequately develop their projects. A seven-week course has to be carefully orchestrated so that the projects are proportioned to the time allotted and there isn’t time to go into depth on any one project. It may be useful to experiment with a full semester class where students could conduct primary and secondary research on the same project, which may further reveal findings about how to break barriers between domestic and international students.

Since this paper was written, the Conceptual Development and Implementation class, as well as the preceding class, Typographic Structures, which is geared towards teaching form to students, have been expanded to full 15-week studio courses. Starting in fall 2017, students will meet twice a week for 2.5 hours to engage with their research, fully immersing themselves in design thinking and in developing more professional prototypes. This decision evolved after offering both the aforementioned courses three times to groups of students with little or no undergraduate design background. Additionally, this experiment paved a way for a Spring 2017 MFA Graduate Studio course in which open framed problems about healthcare design are posed. In that course, many of the same methodologies are used but students in this course have an undergraduate design background, so their projects are even more expansive.
more open framed, dealing with less information directed from the faculty and more coming from the students. As well, primary and secondary research is employed by way of qualitative and quantitative methods through surveys, personal interviews and focus groups. Also, usability testing of prototypes is required before final prototypes were created.

Possibilities for future work may include using these methodologies in other design courses or other disciplines where writing about healthcare may point to new discoveries in design pedagogy. It would also be interesting to see how five to seven weeks, or all semester projects, may be used to dive deeper into solving specific worldwide healthcare problems such as work with aging populations, transportation and caregiving for the elderly, drug interaction in the elderly and many other prevalent world-wide healthcare issues. Also, it may be important to ask what other unifying languages may be used to connect international and domestic students? The methodologies employed in the Conceptual Development and Implementation course are significant because they demonstrate how creating empathy in design thinking can create open dialogue, which has the potential to form partnerships amongst domestic and international students. These partnerships may have the potential to impact change in real world solutions to healthcare problems. I believe that both undergraduate and graduate students would benefit from these experiments. It would also be interesting to see how students in traditionally “non-creative” fields would benefit from this experiment as they bring their unique voices to global education.

Integrating international and domestic students into design classes will continue to challenge design educators to create innovative globalized curricula as they deal with language and cultural barriers in their classrooms. In the Conceptual Development and Implementation case, autoethnography proved to be a productive tool for creating connections and empathy amongst students who felt somewhat isolated. This project used healthcare as a universal language for connecting students. Finding common ground through a universal language like healthcare proved to be liberating for both students and faculty. In an effort to bridge language gaps between domestic and international students, my risk-taking opened doors to educational innovation in academic globalization.

Equally important to further experimentation with class methodologies would be to bring different disciplines together into the same classroom to work on complex healthcare problems from a visual design perspective. I believe that bringing social scientists, healthcare sociologists, healthcare communication specialists, bio-engineers, philosophers, legal experts, developers, technology specialists and others to work on teams may begin to use the classroom as “living labs,” an idea discussed by Herbert Marshall McLuhan, born in July 21st, 1911, a man whose ideas were ahead of his time. In the first journal dedicated to his ideas, written in 2011, titled “Understanding Media, Today. McLuhan in the Era of Convergence Culture,” the authors talk about similar ideas of bringing disciplines together [D. de Kerckhove, E. McLuhan, 2011]. This journal’s dedication “to Aniko” reads, “Always the most beautiful answer is the one that asks a more beautiful question.” In my opinion, this quote is an educator’s call to action, a reminder that in order to inspire innovative results, we have to ask more inspiring questions.
REFERENCES


Figure 1: Yard signs for Family Clinic

Figure 2: First Aid Kit

Figure 3: Cleveland World Health Center Billboard

Figure 4: Urgent Care Front Cover

Figure 5: Urgent Care Inside

Figure 6: Campus Veterinary Clinic Back Cover
Figure 7: Caribbean Drug Rehabilitation Brochure Cover

Figure 8: Sketch for MPB idea

Figure 9: MPB Brochure Front Cover

Figure 10: Inside MPB Brochure
Figure 11: Cancer Diagnostic Clinic Newspaper Ad

Figure 12: “Ayurveda” or The Art of Being Front Cover

Figure 13: Ayurveda” or The Art of Being Inside

Figure 14: Early Magazine Layout Sketch

Figure 15: Finished New Inside Magazine Spread

Figure 16: Close up of the face “adjustment” after surgery
Figure 17: Chinese Teen Magazine

Figure 18: Ideal Chinese Beauty

Figure 19: Message Cycle by Meredith Davis