

## **Playful Public Interactions for Unfolding Conversations about Digital Health**

HAY, Kiersten <<http://orcid.org/0009-0007-0247-0531>>, GOLMOHAMMADI, Lili <<http://orcid.org/0009-0009-8356-1228>>, DELANEY, Emelia <<http://orcid.org/0000-0002-8823-4412>>, CLEMMENS, Hannah <<http://orcid.org/0000-0001-6572-5828>> and HOWITT SPRENT, Annie <<http://orcid.org/0000-0003-0388-0990>>

Available from Sheffield Hallam University Research Archive (SHURA) at:

<https://shura.shu.ac.uk/37604/>

---

This document is the Published Version [VoR]

### **Citation:**

HAY, Kiersten, GOLMOHAMMADI, Lili, DELANEY, Emelia, CLEMMENS, Hannah and HOWITT SPRENT, Annie (2026). Playful Public Interactions for Unfolding Conversations about Digital Health. In: PDC '26: Proceedings of the 19th Participatory Design Conference 2026, Vol. 3: Workshops, Situated Actions, and PDC Places. Association for Computing Machinery, 127-129. [Book Section]

---

### **Copyright and re-use policy**

See <http://shura.shu.ac.uk/information.html>

# Playful Public Interactions for Unfolding Conversations about Digital Health

Kiersten Hay\*  
Sheffield Hallam University  
Sheffield, United Kingdom  
k.hay@shu.ac.uk

Lili Golmohammadi  
King's College London  
London, United Kingdom  
lili.golmohammadi@kcl.ac.uk

Emelia Delaney  
King's College London  
London, United Kingdom  
emelia.2.delaney@kcl.ac.uk

Hannah Clemmens  
Sheffield Hallam University  
Sheffield, United Kingdom  
h.clemmens@shu.ac.uk

Annie Howitt Sprent  
King's College London  
London, United Kingdom  
annie.howitt-sprent@kcl.ac.uk

## Abstract

The use and adoption of digital health (the combination of digital technologies with health and care) within healthcare provision is increasing globally. Research suggests that the design of public research engagement activities may be influenced by the meta-objectives of the groups or organizations that facilitate them, such as easing concerns or fears, limiting meaningful opportunities for public dialogue. We reflect that as public involvement and co-design practitioners working in digital health, our own assumptions of what the public may be interested in or concerned about may influence our design of public engagement and co-design activities and resources. Similarly, we note that participatory digital health engagements are often framed within formalized environments (such as meetings, focus groups, and/or workshops), the format(s) of which may inform how and who of the public is invited to participate. In response, we propose a Situated Action (SA) that invites the public to participate in a series of playful activities installed in public health/care spaces (or 'Interactions'); inspired by how creative acts can mediate playful dialogue and support critical and reflective engagement. A series of three Interactions will be installed in two sister locations (London and Sheffield, UK) over a three-month period, with subsequent Interactions being informed by previous public responses. In doing so, we will facilitate a dialogue with local communities, situated within local communities, to collaboratively conceptualize and explore digital health topics in new ways.

## CCS Concepts

• **Human-centered computing**; • **Interaction design** → Interaction design process and methods; Participatory design;

## Keywords

Digital Health, Dialogue, Co-Design

\*Correspondence author



This work is licensed under a Creative Commons Attribution 4.0 International License.

*PDC 2026 Vol. 3, Milan, Italy*

© 2026 Copyright held by the owner/author(s).

ACM ISBN 979-8-4007-2470-1/2026/06

<https://doi.org/10.1145/3789493.3797328>

## ACM Reference Format:

Kiersten Hay, Lili Golmohammadi, Emelia Delaney, Hannah Clemmens, and Annie Howitt Sprent. 2026. Playful Public Interactions for Unfolding Conversations about Digital Health. In *Participatory Design Conference 2026, Vol. 3: Workshops, Situated Actions, and PDC Places (PDC 2026 Vol. 3), June 15–19, 2026, Milan, Italy*. ACM, New York, NY, USA, 3 pages. <https://doi.org/10.1145/3789493.3797328>

## 1 Introduction

As digital health - the integration of digital technologies into health and social care - continues to expand globally, there is a critical need to ensure these innovations are developed equitably and collaboratively with those it aims to serve. Equity can be described as 'aim[ing] to identify and remove barriers that prevent some of us from fully participating [...] recogniz[ing] that each person has different circumstances and allocat[ing] resources and opportunities needed to reach an equal outcome' [3]; with equity in supporting wider participation in research advocated as key areas for development within the Digital Health Equity Charter [3], maintained by a growing digital health community of practice (ourselves included). However, inviting wider participation presents issues in how and who is invited to participate, including at the earliest stages of digital health research and engagement.

Existing research indicates that public engagement activities are often shaped by the 'meta-objectives' of the facilitating organizations, which may focus on alleviating public concerns rather than opening space for genuine, critical dialogue [7]. As practitioners in patient and public involvement and co-design in digital health, we recognize that our own professional assumptions regarding what the public finds interesting or worrying can inadvertently limit the scope of engagement. This limitation is often reinforced by the use of formalized environments, such as traditional workshops and focus groups, which may dictate both the format of the conversation and the specific demographics of the public who are able or invited to participate.

In response, this paper proposes a Situated Action (SA) that transitions digital health dialogues into everyday public health and care spaces. We view this approach as an important route to supporting equitable future co-design practice for digital health [5, 8], where public and patient voices are meaningfully included from earliest stages of research and design; expanding how public and

patients may be invited to participate in ongoing digital health decision making, design, and research.

Our approach is centered on a three-part series of activities – ‘Interactions’, which will take place in two sister locations (London and Sheffield, UK) over a three-month period. The proposed Interactions in this SA deliberately avoid being solution focused [1], instead exploring alternative formats for equitable dialogue in public spaces, and how playful interaction mediums might invite wider participation to guide research priorities. The SA will ensure three key points: First, promote playful dialogue, using creative acts to mediate reflective and critical engagement. Second, make engagement accessible and reach diverse audiences, including those who may not participate in traditional collaborative research activities. Third, foster iterative collaboration, where each subsequent Interaction is based on previous public responses, thereby allowing for an evolving conversation. This approach is informed by participatory museum approaches that invite the public to actively engage in early sense and decision making to guide ongoing work [e.g., 2] – co-developing themes to shape their practice in dialogue with their audience(s) while challenging power imbalances.

By situating dialogue directly within local communities, we aim to collaboratively conceptualize digital health topics in ways that move beyond solution-focused agendas and toward a more equitable and participatory future.

## 2 Relationship with PDC 2026 Conference Topics

This SA addresses conference themes by facilitating a playful public dialogue, creatively exploring how conversations about digital health topics may take equitable shape(s) in public health space(s). This approach, where people are passing through, invites diverse audiences to take part; expanding the invitation to participate to those who may otherwise be unable or uninterested in taking part in other collaborative research activities (such as co-design workshops or advisory groups). We aim to explore how researchers may approach new means for dialogue with those we seek to collaborate with, with aspirations to support wider involvement.

## 3 Situated Action Overview

### 3.1 Location

This SA will take place concurrently in two locations (London & Sheffield, UK) in advance of the conference. Three Interactions will be installed in two ‘sister’ public locations relating to health-care (e.g., hospital cafeteria or lobby, community center) over the course of three months; each time being installed in the same location at each site to allow for spontaneous and/or repeated dialogues with their respective communities (including staff, carers, patients, service users, and visitors). These spaces, where people’s health and wellbeing are a priority, were purposefully selected for their informal and transitory environments. While exact specifications of the Interactions will be adapted in partnership with the venues to suit their respective conditions and needs, communal and casual settings within both sites (such as a cafeteria or lobby) were chosen as spaces where the public may be open to spending short periods of transitional time: sites of passing through or pause creating

space for a moment of playful dialogue within a familiar health context.

### 3.2 Interactions Design

Three Interactions will be installed over three months. Each Interaction will be installed for a minimum of a half-day, duration dependent on the venue’s requirements and restrictions. Interactions will be designed similarly for both locations (London and Sheffield) to be inviting and unintrusive in public spaces, and to open up discussions on digital health in quick, fun, and playful ways. Responses to both locations will be reviewed together to inform the subsequent Interaction(s), with previous responses displayed as a collaged thematic mapping alongside each new installation to show topic development. Each Interaction will include (1) an explanation of the SA, (2) an interactive activity, (3) researchers’ contact details and research website URLs, and (4) a previous Interaction(s) response collage.

The three Interaction stages below give an overview of potential interactive activities; however, these will be refined based on pragmatic place/space requirements of the installation locations. Interactions 2 and 3 will also develop flexibly in response to previous engagement. All Interactions will be framed in consultation with the King’s Health Partners’ Patient and Public Involvement and Engagement (PPIE) members, who will support ongoing review of the SA.

**Stage 1** will focus on conceptualizing what ‘digital health’ means to people. This stage will invite the audience to consider existing definitions of ‘digital health’ and respond with their own ideas. Individuals will be invited to respond through sketching, written text, and/or reconfiguring or adding words as a form of word-based play (e.g., fridge magnet poetry [6]).

**Stage 2** will focus on the perceived importance, interest, and/or concern the audience feels for digital health topics. A range of topics (such as data privacy, cost of digital health tools, etc.) will be shown, drawn from and informed by responses to Stage 1. Individuals will be asked to respond to these topics through a graffiti format: adding new topics or responses to existing ones, and/or ‘voting’ with size-coded stickers on or near topics that interest or concern them (inspired by Yayoi Kusama’s ‘Obliteration Room’ installation [9]).

**Stage 3** will focus on inviting curiosity towards different digital health technologies (such as wearable or smartphone devices) related to topics highlighted in Stage 2. Individuals will be invited to ask questions to, or make demands of, these technologies. These can be given by completing a sentence using a string connecting different option points (inspired by ‘Data Strings’ installations [4]); and/or submitting written questions or concerns.

Insights from this SA will guide a future public exhibition on digital health. Across and beyond the SA we will invite communities across both sites to stay connected to see how their input contributes to this unfolding work: through collaged summaries at each Interaction, a webpage that evolves with the project, and acknowledged within the future exhibition. While the situation of this SA is ephemeral, we aim for these Interactions to illuminate the potential of expanding the means, and location(s), and the invitation of digital health research involvement: exploring how

situating a moment of play could help expand who gets to shape the future of digital health.

#### 4 Author Biographies

**Dr. Kiersten Hay** is a Research Fellow at the South Yorkshire Digital Health Hub (Sheffield Hallam University), where her design research focuses on supporting meaningful involvement within digital health research.

**Dr. Lili Golmohammadi** is an interdisciplinary Research Associate at King's College London, where she also acts as Associate Director for King's Centre for Technology and the Body. At the King's Health Partners Digital Health Hub she supports diverse stakeholders in applying co-design.

**Dr. Emelia Delaney** is a Research Associate at King's College London. As part of the co-design team within King's Health Partners Digital Health Hub, she supports diverse stakeholders in applying co-design, drawing on her background in sustainable design.

**Hannah Clemmens** is the Training Lead for the South Yorkshire Digital Health Hub (Sheffield Hallam University), where she leads the Hub's Skills and Training programme.

**Dr. Annie Howitt Sprent** is the Senior Patient and Public Involvement and Engagement Officer for the King's Health Partners Digital Health Hub (King's College London), where she coordinates the Hub's public involvement and engagement activities.

#### Acknowledgments

We would like to thank our Digital Health Hubs' wider team members for their ongoing support. From the King's Health Partner's Digital Health Hub's Co-design team—Professor Glenn Robert, Professor Wei Liu, Professor Louise Rose, Dr Siobhan O'Connor, Professor Sebastien Ourselin; our Patient and Public Involvement and

Engagement members; and from the Training team, Hira Husain for her support with creating the short film. From the South Yorkshire Digital Health Hub - Professor George Peat, Dr. Márjory Da Costa-Abreu, Sarah Redding; our public and community collaborators; and Dan Redding for his support in creating the Interactions materials. The King's Health Partners Digital Health Hub is funded by the Engineering and Physical Sciences Research Council [EP/X030628/1]. The South Yorkshire Digital Health Hub is funded by the Engineering and Physical Sciences Research Council [EP/X03075X/1].

#### References

- [1] Mark Blythe, Kristina Andersen, Rachel Clarke, and Peter Wright. 2016. Anti-Solutionist Strategies: Seriously Silly Design Fiction. In Proceedings of the 2016 CHI Conference on Human Factors in Computing Systems (CHI '16). Association for Computing Machinery, New York, NY, USA, 4968–4978. <https://doi.org/10.1145/2858036.2858482>
- [2] Nicole Carfora, Bridget Ferguson, Lauren Bailey, Ingrid Gwilt, and Kristina Alford. 2024. A participatory approach to exhibition theme development. *Museum Management and Curatorship* (2024), 1–18. <https://doi.org/10.1080/09647775.2024.2408258>
- [3] Digital Equity Charter. 2025. Principles. *EquityCharter.digital*. Retrieved from <https://www.equitycharter.digital/principles>
- [4] Domestic Data Streamers. 2026. Data Strings. *DomesticStreamers.com*. Retrieved from <https://www.domesticstreamers.com/work/data-strings/>
- [5] Josephine Ensor, Rebecca Farnan, and Samantha Johnson. 2024. Equity in medical devices: a sociotechnical approach. *BMJ Innovations* 10, 4 (2024), 124–128. <https://doi.org/10.1136/bmjinnov2024001306>
- [6] Magnetic Poetry. 2026. *MagneticPoetry.com*. Retrieved from <https://magneticpoetry.com/>
- [7] Emily Rempel, James Barnett, and Helen Durrant. 2019. The hidden assumptions in public engagement: A case study of engaging on ethics in government data analysis. *Research for All* 3, 2 (2019), 180–190. <https://doi.org/10.18546/RFA.03.2.05>
- [8] Elizabeth B.N. Sanders and Pieter Jan Stappers. 2008. Cocreation and the new landscapes of design. *CoDesign: International Journal of CoCreation in Design and the Arts* 4, 1 (Jun. 2008), 5–18. <https://doi.org/10.1080/15710880701875068>
- [9] Tate. 2022. Yayoi Kusama's Obliteration Room. *Tate.org.uk*. Retrieved from <https://www.tate.org.uk/art/artists/yayoi-kusama-8094/yayoi-kusamas-obliteration-room>