Body, Ritual and Behaviour Workshop Summary

Being and Dying London, April 2015



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An overview

Body, Ritual and Behaviour was a workshop comprised of varied practitioners and specialists, exploring the relationship between behaviour change, holistic health and design, held at Somerset House on March 27 2015.

The expected outcome from the workshop was to produce a framework and proposal for an in-depth project based on explorations found on that day. This summary forms a part of that framework.

The expectation in general was – as a group – to explore practical applications of holistic health, understand the realities of habits and behaviour through rituals, utilise design thinking to experiment and rapidly test ideas. We did this through a series of exercises, discussions and tasks. The workshop was led by Ivor Williams. It was attended by Jamie Robson, Dr. Jane Hartley, Ed Gardiner, Felix de Pass and Cassie Robinson.

Understanding health and habits

In an introductory lecture we defined ritual, holistic and health in the following, basic terms: *Ritual*, as a ceremony or action one does in a customary or particular way *Holistic*, as thinking about the whole self, considering body, mind & spirit *Health*, as in good health, preventative health. With a focus on avoiding disease or illness.

We understood that current implementation for behaviour change can be focused heavily on device-driven solutions, such as the Apple Watch. We asked what scope there was for investigating 'dumb' objects: objects that are specifically designed, and exclusively use limited or no advanced technology to power it or enable its usage.



Understanding behaviour change

We defined possible methods to change behaviour in the following ways:

Prompting to stimulate behaviour, e.g. telephone reminder

Self-monitoring and recording behaviour, e.g. writing an activity diary or app

Personalised messages, i.e. tailored to stages of change, with resources and context

Goal-setting, e.g. step-goals monitored with pedometer or smart watch

We also noted that a framework for behaviour change should be defined by some key statements that act as a checklist for effectiveness. For lasting change we must:

Make it understood Make it easy Make it desirable Make it rewarding Make it a habit

A 2013 Pew Research Centre survey noted that 69% of adults track health indicators for themselves or others. Most interestingly, of those, 50% do it 'informally'. Meaning they do so in their head. This recognises that although many people use specific software or exercises to track health indicators, many do so without any assistance. This is useful to understand that complex tracking systems are not always required, and that enthusiasm for tracking is not limited to those who use technology to do so.

This tracking and quantification of health indicators has been successfully defined as the Quantified Self movement. Established in 2007, and now a world-wide practice used by millions, the use of quantified data to aide people in behaviour change has been well-researched and well-documented. The questions raised in the workshop however point to behaviour change that is more diffused than simple exercise tracking.

We proposed that what is important, perhaps more important than understanding and valuing the *quantity* of your health and lifestyle, is the *quality* of it. If we understand the Quantified Self is defined as "self knowledge through numbers" we can define the Qualified Self as "self-knowledge through personal insights" What this practically means is: we would try to remove data collection from process, focus on areas of health that are not data-driven per se and move to activities that improve health over time, and which are by their nature, subtle.



One example discussed was the Sitting Rising test (SRT). The participants are asked to try to sit and then to rise from the floor, using the minimum support that they believe is needed. The maximum possible score for is 10: 5 points for sitting down and 5 points for getting back up. Use of a hand, forearm knee, or the side of their leg on the ground, or their hand on their own knee, each result in a deduction of one point, down to a minimum possible score of o. Their best scores for sitting and rising are used in their final score. Musculoskeletal fitness, as assessed by SRT, was a significant predictor of mortality in subjects aged between 51 and 80-years-old, as those with the lowest scores were more likely to die.

An example like this – as a holistic health exercise –gives us opportunity to define further key points: to focus on self-care to improve wellbeing, to exploring practices that support healthy body & mind and to use your own body as a device, or use 'dumb' objects to support body practices.

Understanding interaction design

As the workshop is framed around design, it was important to establish some principles of interaction design, as discussions led to how design would play a fundamental role in the workshop. As an overview of a complex discipline, interaction design could be generally understood through 3 probing questions. This helped us understand the idea of design as an interactive discipline. To think not only about *what* we use, but *how* we use it. We framed these questions through the notion of what one does when interacting with objects:

How do you do?

What sort of ways do you affect the world: poke it, manipulate it, sit on it? How do you feel?

What do you sense of the world and what are the sensory qualities that shape objects?

How do you know?

What are the ways that you learn and plan (or perhaps, how we want you to think)?

To compliment these questions, it is critical to point out that any interaction with a designed object or experience should be *easy*, *effective* and *enjoyable*.

We looked at useful examples of products, experiences and interactions that combined elements of these key points.



Muji toothbrush holder. As an easy and effective way to keep brushes clean and tidy.



City Peaks. As an enjoyable and easy way to use existing technology (London Oyster card) to track steps in an office environment, turning it into a game.



Balance Stool. As an easy and effective way to use the chair as a space for continual movement, minimising negative effects of sedentary working in the office.



Lapka BAM (Breath Alcohol Monitor). As an enjoyable way to monitor breath alcohol levels, a luxurious object that makes awareness of your drinking easy.



Upstanding desk. As a low-cost effective way to build and install standing desks, which are popular in reducing sitting time in the workplace.



Key Moment. A simple, effective mechanic that gives the user the option to choose to travel via bike or car. Selecting the car key, drops the bike key on the floor, forcing a re-consideration of choices.

Closing thoughts

The introductory session was closed with the following questions:

How can we use design, to make objects or interactions, that inform rituals or behaviours that can be used to improve our health, holistically?

What kinds of objects are used in everyday rituals?

What is important about them?

What are the most important aspects of holistic health we can promote? How do habits really change and finally stick?

The group discussed these questions, and used them as a foundation for short exercises. The following sections detail some of the emerging themes that arose out of group discussion and exercises undertaken by the group, highlighting a brief case study in a possible outcome, and outlining a framework for further development.

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Emerging themes

Concluding a morning of short warm-up exercises, brainstorming and discussions around health practices and where the opportunities between disciplines lay, some emerging themes arose.

It is important to note that the activities and the workshop itself revolved around rapidly generated ideas and thoughts. Working within a limited timeframe, the opportunities that came out of the exercises and sessions point to ideas that can be developed further, and at this point form a sketch rather than an exhaustive plan.

Important concepts

With behaviour change and sociology insight, two factors rose to the top early on: the problem of distraction and the pressure to succeed.

In relation to health, preventative health and habit forming practices, attention was drawn to the problem of rituals acting as a quick and easy distraction. On a larger social scale, was the inherent modern dissatisfaction and distraction that affects people when it comes to taking care of their health. This can be caused by over-information around issues, or the stress from the awareness to 'do well', when it comes to personal health. The presumed expectation to do well, and the fact that some people simply don't want to do good things, for a multitude of reasons creates a complex mix of push-and-pull factors that stop people from actively achieving health goals.

On top of this, was a underscoring of key behaviour change traits that needed to be recognised. Fundamental to this, for any successful implementation, was the role of a 'habit loop'. Where any *environment* provides a space for an *action*, which generates a *reward*. If this cycle can be looped, a habit can be formed. Understanding that the environment - a gym, a room, a positive space - enables actions - exercise, mindful decisions - to happen, and that they are on some level rewarded for that action. In the Quantified Self model, the reward could come from a gamified update, with medals, achievements and scores to acknowledge the action.

It was also pointed out that as designers, we should not seek to break bad habits, but rather replace them. It is important to reward good habits, not punish bad ones. This is where incentives can play a part to help kick start rewarding good habits, or replacing bad ones. Actively drawing attention to the task is another way to close the gap between actions that are performed singularly, and ones that can become habit-forming. It is also important to say that these incentives and attention-seeking elements do not necessarily need to be health-related, even though the overall goal is.

These key concepts form one group of ideas, that can be mixed with more specific themes.

Theme 1: Everyday Household Mysticism

Important to this theme was the idea of finding meaning in everyday interactions - tying a shoe, combing hair, watching television. One remark was made about the deeper significance in television watching, which is a daily habit for millions of people every day. Acting as a primitive form of meditation, the television acts as a contemporary fireplace, where people participate in 'fire watching': the action of idly watching the fire or television can have a profound effect on calming the mind, by de-focusing the eyes and losing oneself in thought.

This idea ties into the importance of daydreaming, as an act of mental relaxation. Appreciating that there may be some 'normal' spaces in the house that can provide optimal spaces for day-dreaming (washing dishes for example) and are currently unexploited spaces.

Theme 2: Role of environments

One interesting aspect the emerged when discussing the role of environment was the idea of particular spaces being inherently conducive to particular practices. That a room in the personal environment - the household - could become a room for transformation. With particular tactile materials, or use of lighting to compliment this. This small theme fed into the next, around the bathroom.

Theme 3: Bathroom experience

Appreciating that the bathroom is the only real private space for an individual in their home - usually because of a lock on the door - and that as a space it is the most unique environment available to people: with tiles or waterproof walls and floors, plenty of water, pleasant smells, humidity and often bright, white light. The role of water as a element used to wake one from sleep, and the activity of cleaning and washing, marks the shower and bathroom as a very ritualised experience, by its very nature. The purifying nature of the bathroom has powerful connotations, and as a space for personal wellness, it could easily become a space for general and preventative health.

Theme 4: Value of natural functions

When prompted by the question, what was a 'natural function'? Several interesting elements described the everyday, almost invisible, actions. High on the list, which bared repeating was the importance and power of simple breathing, and the significance of air. in people's health. Second to this was the reclamation of mobility, and the mobility of children, with the inherent flexibility and extensibility that comes from bodies lacking the tension that adults suffer from. Included in this was the prompt whether a 'neutral' position was acceptable or even preferable: is sitting neutral or increasingly negative? These questions and thoughts focused themselves around the physical activities we undertake. Moving emphasis away from cardiological exercises or traditional gym exercises with weights and machines to ones that are closer to Yoga or Chinese movement exercises like Chi Kung or Tai Chi.

These initial themes provide a overview of topics that emerged in the early stages of the workshop. The conversations and thoughts quickly coalesced into pools of thought about the role of environments - in particular the bathroom - and the activities and meaning of those activities that take place in the bathroom.

During the afternoon the group delved deeper into those ideas, and they described possible outcomes that responded to these themes. Small groups formed and prototyped sketches and rudimentary models that investigated these ideas further.

The following outcome is one the most promising, and is used to enable a framework for further development for the project in a wider sense.

Next steps

This summary document acts primarily as a record for the workshop that took place on the 27th March 2015 at Somerset House.

It secondly acts as a document to gather interest from parties who would be interested in joining the team to develop the project further.

For Being and Dying, the immediate next steps are the following:

- To agree upon a transdisciplinary team who would meet to discuss research and preliminary ideas
- To understand the landscape for funding available for such a project, and begin the funding process
- To begin research in the areas mentioned earlier, as a pre-text to a second workshop, to understand the realities of user groups and health practices that would form the basis of a project

About the team

The workshop was comprised of the following participants, and we are grateful for the invaluable contributions to the day.

Ed Gardiner

Ed leads a partnership with the Design Council called the Behavioural Design Lab, applying insights and methods from behavioural science to support the design of new products and services with a social purpose. Before joining WBS, Ed worked for the advertising agency, Rainey Kelly Campbell Roalfe / Y&R, managing creative campaigns for private and public sector clients. He holds an MA in Natural Sciences (Psychology) from the University of Cambridge and an MSc in Cognitive and Decision Sciences from UCL. Ed is also part of the Create programme at WBS, exploring new teaching and research opportunities on the role of design and creativity in business.

Cassie Robinson

Cassie specialises in strategic design, social innovation and networks and has been committed to advocating, facilitating and building the social and cultural innovation system in the UK over the last 9 years at both a practical and strategic level. She is currently leading the Point People's work with Lankelly Chase, working for Government Digital Service part-time, and is a co-founder of Tech For Good TV. She is also one of the creators of the Civic Crowd and the Civic Workshop.

Felix de Pass

Felix de Pass is a British designer based in London. His studio focuses on the design and development of furniture, product, lighting and interior design projects. Informed by a passion for materials and processes, Felix de Pass's studio is committed to delivering appropriate and functional solutions with a simple and direct design language. The studio engages in an exploration of cutting edge technologies, rigorous research and a dynamic and creative design process that evolves in dialogue with the client and manufacturer. He is Guest Tutor at the Royal College of Art and Kingston University

Jamie Robson

Jamie Robson is a holistic health consultant and associate of Being and Dying. He works with a diverse range of clients, including professional athletes, specialist firms and

design companies. With twenty years of continued exploration both in ancient wisdom and modern science, Jamie's unique approach investigates all major facets of human well-being. Jamie's passion extends into the historical aspects of physical culture, reaching back to early man and the origins of holism.

Jane Hartley

Dr. Jane Hartley is a sociologist and associate of Being and Dying. Her education and research experience is a combination of social anthropology, medical sociology and public health. She completed her PhD at the Medical Research Council at the University of Glasgow. She is currently working as a Research Fellow at the Scottish Collaboration for Public Health Research and Policy at the University of Edinburgh. Her research interests include exploring how people live in consumer capitalist societies and what impact this has on their health, with a particular interest in: socioeconomic inequalities; health-related 'risk behaviours'; gender-identities including sexual behaviours; and the relationship between the mind and the body.

Ivor Williams

Ivor Williams is principal designer and founder of Being and Dying. He was trained at the Glasgow School of Art, and has worked at some of the most prestigious design studios including Graphic Thought Facility, John Morgan studio and Tellart, working a wide range of commercial, corporate and cultural clients. He is focused on ensuring that design provides for people, and can be used as a catalyst for positive change. Previously he was studio director at the Italian design research centre, Fabrica. He is visiting professor of Information Design at Università luav di Venezia and visiting lecturer of Communication Design at the Glasgow School of Art and Man & Wellbeing at Design Academy Eindhoven.

To discuss further

If you would like to know more about the workshop, the project or the studio, please do not hesitate to get in touch with Ivor Williams at Being and Dying.

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