Rethinking service design in addressing antimicrobial resistance in India

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Abstract

This abstract presents initial stages of a PhD project that is rethinking service design tools within the area of antimicrobial resistance (AMR) as an opportunity to critique their role in complex social challenges in the Global South, focusing on India.

AMR is when antimicrobial drugs designed to treat infections caused by micro-organisms become ineffective (O'Neill, 2016) and one key solution is to promote more effective usage of these drugs. To achieve this, any global focus in tackling AMR therefore needs to not only fit within people's everyday lives and communities (World Health Organisation, 2018) but also be sensitive to cultural practices and infrastructural healthcare issues in order to be valuable.

Service design's co-creative approach (Stickdorn, et al., 2018) enables the field to be well-placed in addressing unmet needs of individuals and communities, yet methods used in this bottom-up approach are still more commonly applied in Western systems. The applicability of service design to research projects based in India offers opportunities to rethink and

adapt service design practices to better suit the diversity of local customs and priorities within India, contributing to decolonising design around AMR and antibiotic stewardship.

Research methods include an initial review of literature and initiatives (of both academic and industrial natures) that discuss or provide examples where service and social design have been reframed, so to become more applicable to the environments within the Global South (Escobar, 2018, p. 6). Intermediary findings will engage discussion in the plurality of service design research projects addressing AMR in India.

Keywords: antimicrobial resistance, India, service design, decolonising design

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