

From Passive to Participatory: Healthcare Workshop Design for Continued Community Engagement

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MOTIVATION

Top-down global health efforts often miss local needs [1]. Grassroots, participatory models offer a stronger path by fostering ownership and co-created solutions [2]. Drawing on past SisonkeBiotik's Al-for-health workshops, this poster shares a framework for interactive, community-led design that builds lasting engagement and supports health innovation in Africa.

WORKSHOP SUMMARY

2024 Conference	Location	Hours	Audience
Deep Learning IndabaX (DLIXZA)	University of the Witwatersrand, South Africa	4	40
Deep Learning Indaba (DLI)	Amadou Mahtar Mbow University, Senegal	10	30

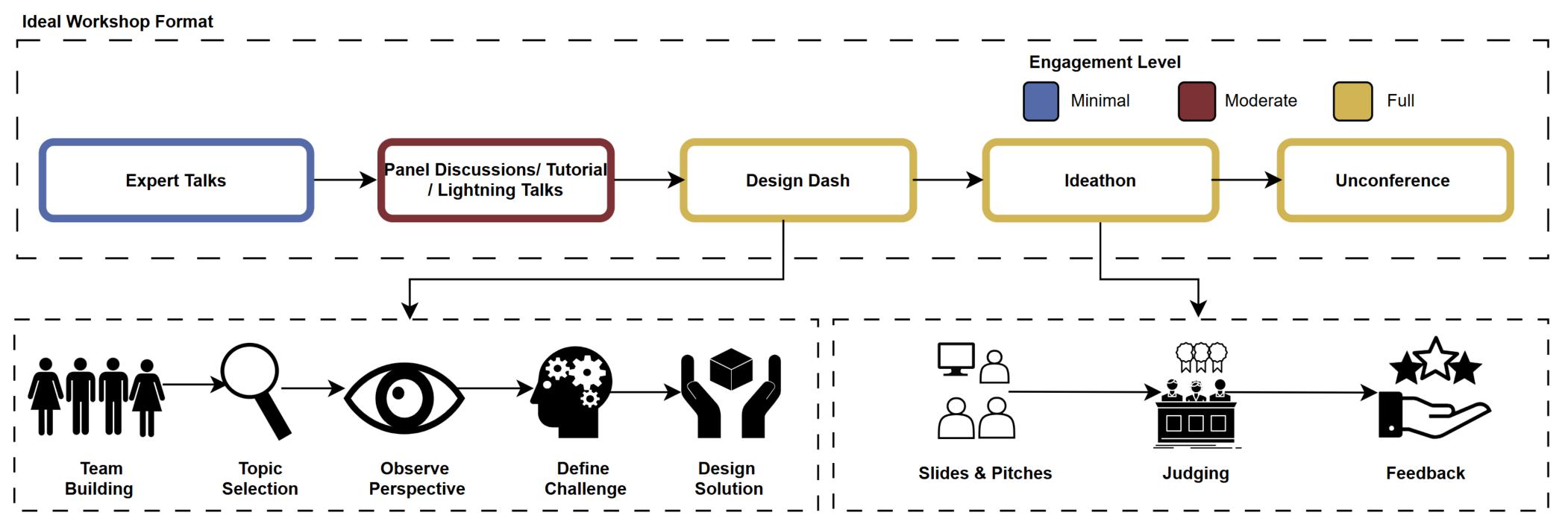


Fig. 1. SisonkeBiotik workshop design which progresses from minimal engagement to full engagement activities

RESULTS AND DISCUSSION

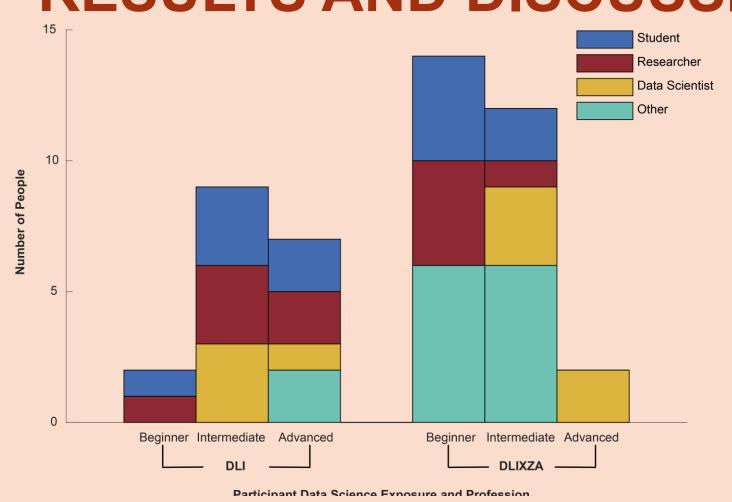


Fig. 2. Workshop Participant Self-Reported Identification and Al Proficiency

- •**DLI workshop**: 53% response rate; majority intermediate participants (56%)
- •**DLIXZA**: 100% response rate due to on-site collection; most participants beginners (46.7%)

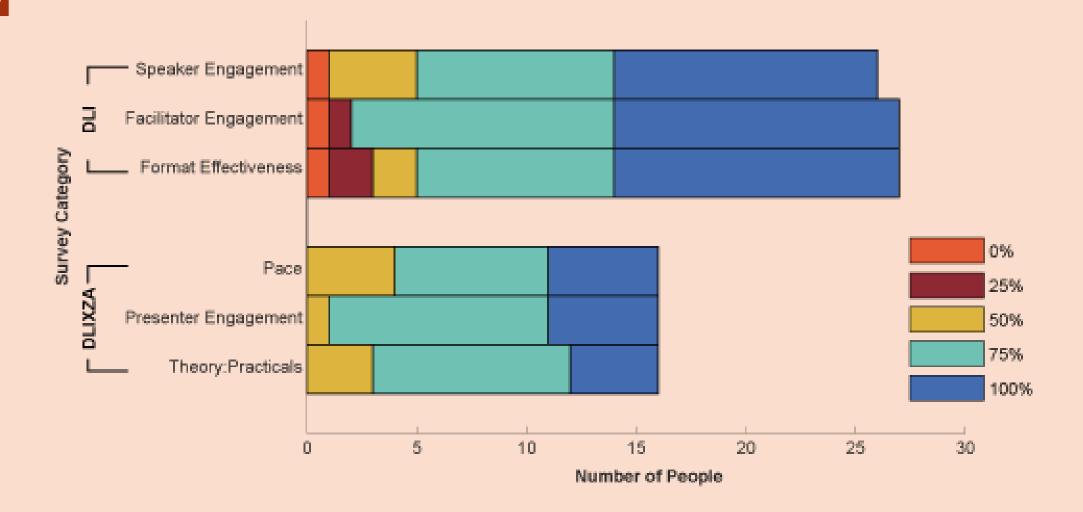


Fig. 3. Feedback survey from workshops' participants

Participants rated sessions highly (~75% average at DLI; mostly full marks at DLIXZA), with top highlights including the Ethics Panel, Design Dash, and collaboration. Common feedback called for more time for group work and clearer post-workshop pathways. Post-event impact includes 19 new community members and over 100 seminar participants in 2025.

RECOMMENDATIONS

To enhance participatory healthcare innovation, we recommend:

- Post-event support for Ideathon winners via incubators (mentorship, funding, regulatory help)
- Co-designing challenges with clinicians, patients, and data scientists
- Ensuring strong attendance through 3–6 months of publicity and early fundraising for incentives