Design Principles and Provocations for Veterans residing in urban areas of the UK.
Lived realities of daily life with PTSD symptoms.
Community centres providing safe spaces for veterans.

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Design Principles and Provocations

Introduction

This document presents a perceptual and relational approach to the real lived experience of Veterans residing in urban areas of the UK, whose everyday life is deeply affected, shaped, and often constrained by the persistent presence of PTSD symptoms. These experiences unfold within community centres that aim to provide safe spaces for veterans, further nuanced by the peer support groups that facilitate open dialogue and trust. The design approach here is rooted in the philosophy and practice of Design with Real Lived Experience (RLX), as articulated in the RLX report which frames this context through five interrelated dimensions: purpose (designing for real lived experience), group (UK urban veterans), condition/event (daily life with PTSD symptoms), setting (community centres as safe spaces), and circumstance (peer support groups).

Importantly, this approach does not seek to “solve” or “intervene” on this field from an external vantage point. Instead, it moves from within the experience field, attuning to the emergent affects, intensities, and conditions that are already present, always holding open the possibility of transformation. It acknowledges the forces that hold this experience in place—power structures, habitual thought patterns, and social systems—while inviting the undoing of these limiting tendencies to open new spaces for co-composition and becoming.

The following sections explore: how the RLX field is perceived, how design can shift its approach to this complex lived reality, and a deep dive into each of the twelve RLX design principles, offering provocations to reimagine design’s relationship to the unfolding lived experience of veterans with PTSD.

1. How I perceive the field of this real lived experience

The field of Veterans living with PTSD symptoms in urban UK community centres pulses with layered relational depths — between bodies, histories, environments, and temporal rhythms. These community centres are not mere physical spaces but affective topographies where safety is fragile, negotiated, and re-constituted through peer support interactions. The experience field is saturated with tension: between the desire for openness and the fear of vulnerability; between the residual echoes of military life and the unpredictable flow of civilian urban rhythms.

Intensity concentrates in moments of trust and rupture within peer groups, where suppressed memories and affective surges ripple beneath surface calm. The PTSD experience is not a linear pathology but a flowing terrain of flare-ups, quiet durations, and intermittent openings. This temporal stretching and looping, where trauma reverberates across past, present, and future, is sensed palpably in the pauses, silences, and explosive disclosures among veterans.

Forces of recognition and alienation intersect here. The community centres attempt to hold a container for shared experience and healing, yet institutional logics and societal stigma often impose rigid boundaries—defining what is acceptable to express, what must remain hidden, and how identities of “veteran” and “trauma survivor” are coded. These tendencies hold back fuller emergence of embodied experience and relational trust, binding veterans within roles and narratives that can feel confining.

Yet beneath these constraints, something strives to become otherwise: the palpable emergence of collective care, moments of non-verbal attunement, and the slow reconfiguring of meaning around pain

and resilience. The peer support groups amplify this movement, creating openings where the virtual potentials of connection, understanding, and transformation press to surface. Yet these potentials often hover on the threshold, fragile and contingent on subtle ambient and relational conditions.

Nonhuman elements—the domestic furniture, the ambient light, the urban sounds leaking in—participate silently in composing this experience, shaping comfort or discomfort, safety or exposure. The material and spatial arrangements both enable and limit how veterans can inhabit these community spaces, how affect moves, and how the group's collective rhythms unfold.

Power circulates unevenly here: between institutional authority, military culture legacies, and the emergent, often marginalized, subjectivities of the veterans themselves. The stuckness is palpable where dominant discourses of mental health reduce lived trauma to clinical symptoms, obscuring the full relational and affective depth. Against this, a slow, subtle flow of becoming presses, inviting design to sense and amplify what is barely legible, and to co-compose with the field rather than impose external solutions.

2. How we can change our design approach

Design with RLX reorients the design task for this complex, layered experience field by refusing to reduce veterans' PTSD experience to problems, needs, or fixed identities. Instead, it immerses within the relational flows, affective intensities, and temporal durations that compose real lived experience. This approach is fundamentally different from conventional design methodologies that seek to categorise or fix experience into discrete, manageable chunks.

By working from within the experience field, design becomes a perceptual practice that senses the emergent movements and virtual potentials already present. It attends to the opaque, the unspeakable, and the threshold moments where transformation might unfold. This means embracing uncertainty, ambiguity, and the non-linear rhythms of trauma's unfolding, rather than forcing closure or resolution.

In the context of veterans with PTSD in urban community centres, RLX design principles such as perceiving experience in its emergence, engaging intensity before identity, and co-composing within the flow of experience are especially activated. These principles invite us to design with the affective surges and silences of peer support, to sense the nonhuman agencies of space and materials, and to undo limiting mental models of trauma as pathology alone.

Design becomes a practice of relational attunement, creating conditions for trust, care, and transformation that evolve with the experience rather than being pre-determined. Instead of designing "for" veterans, it is designing "with" them, their environments, and the forces shaping their real everyday lives. The impact is not merely functional improvement but the emergence of new rhythms, co-compositions, and perceptual openings that can shift how veterans experience themselves and their worlds.

This approach also challenges dominant power and knowledge structures that often silence or marginalise veterans' lived realities. It insists on the necessity of attending to difference in kind, seeing the relational field, and supporting transformation over intervention. As such, Design with RLX is not a method to fix, but a philosophy and mindset to move with experience toward becoming.

3. New design possibilities

1. Perceive Experience in Its Emergence

The potency of perceiving experience in its emergence lies in embracing the fluidity and unpredictability of veterans' lived realities with PTSD. These experiences are not static snapshots but living processes that pulse with shifting rhythms—flare-ups, quiet moments, ruptures, and healing. When design attunes to this unfolding nature, it can sense the subtle fluctuations in affect and relation that might otherwise be missed.

This principle calls for a sensitivity to the temporal textures of trauma—not just the visible symptoms but the invisible undercurrents of intensity, hesitation, and becoming that shape veterans' daily lives. It invites us to notice how trust builds and erodes, how memories surface and recede, and how group dynamics shift moment by moment in peer support settings.

By perceiving emergence, design resists the temptation to fix experience into predictable categories or linear stages. It instead opens to the complexity of lived duration—how moments fold into each other, how affective intensities accumulate or dissipate over time, and how transformation is an ongoing process rather than a point of arrival.

In this field, perceiving emergence also means acknowledging how place and materiality co-compose experience as it unfolds: the comfort or alienation elicited by community centre spaces, the ambient sounds filtering in from the urban environment, the tactile presence of shared objects or notes in peer groups. These elements are not background but active participants in the evolving experience.

Through this lens, design becomes an act of attentiveness to becoming — sensing what is stirring beneath the surface and holding space for it to unfold. It reframes the task from solving to perceiving, from controlling to co-moving with the living pulse of veterans' experience.

2. See the Experience in its Relational Field of Affects

Understanding veterans' PTSD experience demands seeing it not as isolated within an individual but as emergent from a complex web of relational forces. Bodies, social interactions, spatial settings, environmental cues, and even technologies converge to co-produce the experience field. Design attuned to this relationality perceives the affective flows that move through groups, the embodied synchronies and resistances, and the spatial atmospheres that shape sense-making.

The peer support groups exemplify this co-composition: trust, vulnerability, and disclosure arise through collective emotional resonance rather than from any single person. The community centre itself becomes a participant—its lighting, acoustics, furniture arrangement, and ambient urban noise shaping the possibilities for connection or withdrawal.

This principle disrupts individualised models of trauma by foregrounding how experience is always distributed and co-created. Design, therefore, shifts from targeting "users" to engaging with networks of relation and affect. It challenges static boundaries between inside/outside, self/other, human/nonhuman, inviting a more porous, dynamic perception of experience.

Such relational seeing reveals overlooked power dynamics and marginalised voices embedded in the social fabric—how stigma circulates, how institutional practices constrain, and how veterans' embodied presence resists or negotiates these forces. It opens design to the multiple agencies at play and

encourages interventions that resonate with the field's complex affective ecology.

3. Engage Intensity Before Identity

This principle foregrounds the pre-categorical realm of affective intensity—those felt surges, tensions, resistances, and openings that precede naming or identity formation. Veterans' PTSD experience is saturated with these raw intensities: sudden anxiety spikes, somatic tremors, bursts of memory or dissociation that defy easy articulation.

Design attuned to intensity before identity listens to these affective rhythms as primary, rather than filtering them through diagnostic labels or fixed roles. It recognises that these intensities carry vital information about the experience's movement and potential transformation.

By engaging intensity first, design can open spaces for expression that are not bound by stigma or categorisation, allowing veterans to inhabit their feelings fully before being defined by them. This shifts the focus from "who am I because of my PTSD" to "what is this felt surge telling me now?"

This principle also brings attention to the embodied, non-verbal registers of experience: trembling hands, breath patterns, posture shifts, silences — all of which convey intensity without words. Design that senses these can better support veterans in moments when language fails or is too risky.

4. Make the Virtual Perceptible

Veterans' experience is not only what is tangible and present but also what is possible, latent, and pressing to emerge. This principle invites design to become sensitive to the virtual — the desires, potentials, alternate paths, and transformative movements that hover just beyond current actuality.

In community centres and peer groups, subtle cues gesture toward new relational configurations: tentative trust, emerging solidarity, the glimmers of new narratives about trauma and resilience. These virtual potentials are often fragile, obscured by fear, stigma or environmental constraints.

Making the virtual perceptible means amplifying these often hidden currents without forcing them into premature form. It requires attuning to the "not yet" of experience, holding open space for what wants to become otherwise.

This principle challenges design to move beyond fixing existing problems and instead to tune into the life stirring in margins and gaps, supporting emergence of new modes of being and relating that may radically shift veterans' experience of self and community.

5. Recognise Differences in Kind, Not Just Degree

Veterans' lived experience with PTSD is singular in kind — not merely a more intense or less intense version of common stress or trauma. It reconfigures identity, temporality, relation, and sense-making in fundamentally different ways. This principle insists on perceiving these qualitative differences rather than reducing experience to a scale of severity or frequency.

Such recognition respects the uniqueness of trauma's becoming and the novel ways veterans inhabit the world post-service. It disrupts assumptions that veterans' experience can be assimilated into generic mental health frameworks or generic user categories.

Design that embraces difference in kind opens pathways to new modes of engagement that honour the singularity of veterans' relational and affective worlds. It insists on bespoke attentions rather than one-size-fits-all solutions, inviting a phenomenological depth that honours complexity and ambiguity.

6. See Events and their Expressions in Duration

Veterans' PTSD experience is a temporal phenomenon that stretches, loops, contracts, and accumulates over lived time rather than clock time. This principle invites design to attend to the rhythms and durations through which experience expresses itself—flashbacks that echo days later, trust that builds slowly over sessions, silences that linger.

By perceiving duration, design shifts from discrete moments or interventions to supporting experience as it flows and accumulates, honouring the temporal textures that shape transformation. It recognises that change may be slow, recursive, or non-linear, requiring patience and ongoing attunement.

This approach also foregrounds how community centre environments and peer support rhythms—session timings, breaks, spatial transitions—intersect with veterans' temporal experience, shaping what can emerge or be held in the group.

7. Reveal Thresholds and Their Conditions

Experience turns at thresholds—moments pregnant with possibility of shift, collapse, or opening. Veterans' journeys through PTSD symptoms are marked by such thresholds: deciding to share in a group, moments of emotional breakthrough or shutdown, shifts in self-understanding.

Design that reveals these thresholds and their subtle conditions—ambient cues, relational gestures, spatial arrangements—can participate in nurturing or protecting these openings. It learns to sense when an experience is on the verge of change and what enables or constrains that transition.

This principle challenges design to move beyond static forms to dynamic responsiveness, creating conditions that hold fragility and invite emergence rather than impose closure.

8. Recognise Directionality, Not Just Intervention

Design with RLX perceives the transformative movements already stirring in the margins of veterans' experience and seeks to amplify these rather than impose external interventions. This principle invites an orientation toward directionality — what is trying to become, reconfigure, or unfold in meaning, relation, or capacity.

In the context of PTSD and peer support, this might be the slow movement toward trust, the tentative reweaving of social bonds, or the emergence of new self-narratives. Design becomes a co-creator of these movements, supporting trajectories rather than fixing outcomes.

This perspective challenges static, problem-solving models and invites a dynamic, relational stance that honours the life already stirring beneath surface appearances.

9. Attend to What Is Not Yet Legible

Much of veterans' PTSD experience resides in the opaque, ambiguous, or unspeakable. This principle demands design's attentiveness to what resists articulation—traumatic memories too painful to name,

affective currents too complex to grasp fully.

Design that attends to opacity creates spaces that can hold this ambiguity without forcing premature form. It respects silence, hesitation, and the unknown as vital parts of the experience. This is especially important in peer support groups where what cannot yet be spoken shapes relational dynamics deeply.

This principle challenges transparency fetishism and invites a design sensibility that embraces mystery and fragility.

10. Undo Limiting Tendencies

Veterans' lived experience is often held within constraining patterns—mental models of trauma as weakness, institutional practices that pathologise, social stigma that silences. This principle calls on design to perceive these limiting tendencies and open possibilities for unthinking and letting go.

Undoing these patterns is a profound act of liberation, enabling veterans' experience to breathe and reconfigure beyond fixed categories or roles. It invites design to challenge dominant narratives and power structures that reduce or contain experience.

This principle is essential to creating generative spaces where transformation can emerge rather than be blocked.

11. Co-compose Within the Flow of Experience

Design does not take place outside or before experience but within its ongoing flow. This principle invites design to co-compose care, practice, knowledge, and response in real-time with veterans' affective rhythms and relational transitions.

Such co-composition dissolves boundaries between designer and lived experience, creating emergent, responsive forms that adapt and evolve alongside the veterans and their communities. It supports a practice of design as care and relational attunement.

This principle shifts the task from delivering fixed outputs to nurturing ongoing processes of becoming, grounded in mutual responsiveness.

12. Design Across the More-Than-Human

Veterans' PTSD experience is shaped not only by human interactions but also by materials, technologies, infrastructures, ecologies, and nonhuman agencies. This principle calls design to perceive and engage these more-than-human forces that co-compose lived experience.

Community centre architecture, ambient urban noise, furniture textures, digital communication tools, and even natural light participate actively in shaping affective atmospheres and relational possibilities. Design that attends to these agencies can open new pathways for experience to unfold differently.

This expanded field disrupts anthropocentric design and invites multisensory, ecological attentions that honour complexity and interdependence.

4. Emergent Possibilities

From within this reframed field, emergent possibilities unfold as capacities rather than fixed outcomes. The false necessities imposed by institutional logics, diagnostic categories, and social stigma can be undone, revealing new rhythms of trust, openness, and relational care. The veterans' experience field is thus not a closed system but a living ecology open to reconfiguration.

New perceptual openings arise to sense the subtle intensities, threshold moments, and virtual potentials pressing to become. The flow of experience may be co-composed with care practices and material arrangements that honour duration, ambiguity, and transformation, enabling veterans to inhabit their trauma with dignity and agency.

This undoing of limiting tendencies invites a collective remaking of community spaces, peer support dynamics, and cultural narratives—allowing veterans and their environments to co-evolve in ways that resist reduction and embrace complexity.

In this becoming, design is not a tool of control or correction but a perceptual practice of relational attunement and co-creation. It is a commitment to move with the lived experience, amplifying the life stirring beneath surface appearances and holding open the space for new forms of connection and meaning to emerge.

Next Steps

To pursue these design provocations and unlock new possibilities for real impact within the lived experience of UK urban veterans living with PTSD, Umio's Design with Real Lived Experience philosophy and approach offers a unique pathway. By grounding design in real experience models, relational frameworks, and ecosystem sensing, Umio helps uncover the subtle flows, intensities, and virtual potentials that conventional approaches overlook.

Engaging with Umio can support collaborative exploration and co-composition within community settings, peer support groups, and beyond—moving design from static interventions toward dynamic processes of transformation. This pathway honours the complexity, duration, and relational richness of veterans' experience, amplifying emergent capacities for trust, care, and becoming.

For further conversation or collaboration, please get in touch via the following:

You may also explore our resources to learn more about the Design with Real Lived Experience framework and how Umio can assist in creating generative, relational design pathways for veterans and other complex lived experience fields.

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