

Reading 4 Response

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1 Reading Summary

The two papers evaluate the importance of building design and its effects on occupant health with the focus narrowed down to healthcare facilities and patient, family and staff health. Healing environment provides an exhaustive review of all literature about building environment effects on occupants. They identify relevant research papers and extract their findings about aspects of healthcare facilities affecting patients and staff and whether these findings are evidence based, scientifically proven or not proven. Circadian Stimulus on the other hand, talks very specifically about the benefits of daylight on circadian rhythm resetting for patients of dementia. The paper elaborates on their experimental setup and their results.

2 My thoughts

I believe, before anything else, healthcare buildings need to get smarter and healthier. The two papers provided a good lay of the land of research in this area. Starting with the generic occupant needs and positive health effects on occupants to a specific case study. The number of research papers that talk about the role of healthcare facilities as mentioned in the Healthy Environment came as a surprise to me. The number seemed too low after having read the previous readings in class and having discussed multiple health implication of a sick building.

3 Discussion points

1. Healthy environment paper begins by screening papers which talk about healthcare facilities and their effects from occupants perspective alone. Although, for healthcare buildings, occupants are of prime importance, I wonder how much research has been done with the building designer and project developer perspective in mind. As mentioned in the paper, evidence based designs are being used but are there any conflicts between the evidence based design and a building developer's design? If so what kind of conflicts are those?
2. Healthy environment talks about identical rooms and high lighting levels as an effective way to reduce the staff errors. After the reading the Circadian Stimulus paper, I feel that not every patient is going to be same and so their lighting prescriptions would be different as well. I disagree with building identical rooms and similar lighting levels for reducing errors. Instead, maybe increasing staff comfort level can help reduce errors.
3. There's very little mention of staff outcomes in healthy environments and I think staff outcomes are equally important if not more.
4. The experiments mentioned in Circadian Stimulus are carried out in a 13 week period and hence it probably doesn't consider seasonal daylight effects on dementia. Is the daylight level during cold and cloudy weather enough to produce the stimulus? If not, is there any way to study the indoor lighting intensity, colors and their architectural placement as a backup for the shortcomings of daylight levels?