



## KEY POINT SUMMARY

### OBJECTIVES

This qualitative study included input from pediatric patients of varying ages and physical abilities to inform the remodel of a pediatric facility in Germany.

## Designing well-being: A qualitative investigation of young patients' perspectives on the material hospital environment

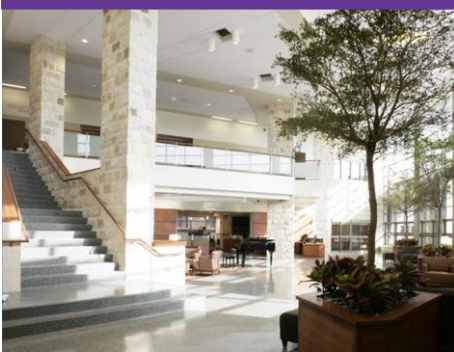
Payam, S., Hossaini, J., Zaszka, K., Friedmann, A., Mall, V., 2023 | HERD: Health Environments Research & Design Journal. Volume 16, Issue 3, Page(s) 168-181

### Key Concepts/Context

Healthcare design research often includes user perspectives, but typically focuses on adult input. Young patients can provide useful insights into the remodel of pediatric facilities to better meet their unique needs. Environments tailored to a variety of developmental stages and physical abilities are more welcoming and engaging for young patients. The results of this study suggest that open spaces, distracting features, and spaces that can be personalized are important to young users.

### Methods

Researchers used arts-based research techniques by encouraging participants to draw or write about their preferred lobby and patient room. Researchers then used the artistic work to guide semi-structured interviews about participant experiences and perspectives regarding each space. After requesting permission to photograph art pieces, researchers returned the originals to their creator. Many older patients declined to write or draw and preferred to just participate in interviews. To support a sense of autonomy, participants could select where they wanted interview conversations to take place and the interview location often coincided with the questions: lobby or a model patient room. The only exclusion criteria were patients who had disabilities that prevented them from communicating and assenting to the study. Thirty participants gave input on the model room and 20 on the lobby. Sixteen participants made drawings and five wrote descriptions. Parents were present for 19 of the 37 interviews with 13 patients electing to address both the lobby and the patient room. Data were analyzed based on a structured, critical realism framework, and an inductive approach was used to determine themes.



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Rather than the traditional focus on rich description, the qualitative approach used explored congruence with existing literature for verification.

## Findings

Findings included three overarching themes and associated subthemes. First, was recognition that participants preferred a facility that was *not a (typical) hospital environment*. Children, early adolescents, and older participants with cognitive delays shared a desire for spaces to play and acknowledged their preference for distracting design features such as aquariums. Participants of all age groups emphasized the importance of accessible features (natural and otherwise), especially via wheelchair. Both young adolescents and children in this sample valued fun, child-friendly designs (example: pirate or princess bed) over medicalized features (example: hospital bed) and spaces. The second theme demonstrated perceptions of the lobby as an *overwhelming and confined space*. All participants over the age of 6 shared challenges with wayfinding and perceived the traditional lobby as crowded and confusing. Participants desired more open space, wheelchair accessibility to play areas, Wi-Fi and internet, clear signage, adequate lighting, and an inviting environment to facilitate the transition from the outside world to the more constricting inpatient setting. The final theme was *a practical room to fit everyone's needs*. This theme targeted participants' desire for their room to allow freedom of movement when using a wheelchair, include easy-to-use furniture, and the ability to personalize the space. Participants mentioned equal accessibility for different ages, abilities, and even easy-to-use furniture for their parents. They also emphasized the importance of usability and accessibility to a sense of autonomy, especially in managing their daily routines independently..

## Limitations

The decision to not collect demographic data to preserve participant confidentiality created a limitation, such that conclusions could not be drawn based on socioeconomic status or cultural background. Additionally, generalization is somewhat limited by the small sample, and the focus on only two areas in one facility; however, it is important to recognize that these findings represent often overlooked perspectives.



## Design Implications

Pediatric facilities should be spacious and include distracting features resembling places that are fun and/or familiar, but accommodate a wide variety of developmental stages and physical abilities. Environments should be user-friendly for both patients and parents and include automated furniture and doors and facilitate personalization, independence, and freedom of movement for wheelchair users.

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