

EBD+ depression

N° 1 Edition May 2022

**THE PATIENT ROOM IN MENTAL
HEALTH CLINICS**

evidence based strategies to support the
design of healing environments

Concept Design
Intervention /
Extract BA DMI

EBD+ Guidelines for
Healthcare Design –
Depression in Adulthood

Prototype Guideline
Subject to changes and adjustments
Author Volken T.

PDF HANDLING

EBD+ Guidelines contain both standard and interactive PDF functions. It is suggested that a current Adobe Acrobat Reader or similar PDF viewing software to enable interactive features for references, orientation and wayfinding.

Limitations: EBD+ cannot guarantee full interactivity if viewed on other mobile devices as iPad or mobile phone. However, for the purpose of printing, all the linked references are listed separately in the end of the guideline.

EBD+

Orientation & Back to Design Principle Title Page

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NATURE

The disconnection of people to nature is ever more critical nowadays, studies show a tremendous impact in reduce aggressions, less pain and overall feeling more grounded due to stimulations connected to nature¹².

sign based on the surrounding landscape and nature can enhance the feeling of being in nature even when residing indoors.¹³

Common wood species, waterfalls, stone regions in close proximity can serve as inspiration and foundation

Access Nr. 1 to see Source and Link and x to close

Windows. The a window to the outside can be calming rather restrain undertone of hospital stays.¹² It is also wished give the patients the opportunity to spend some time in front of the windows, either through seating bench or moveable armchair.

2. Psychiatric ward design can reduce aggressive behaviour.

18, Page 6

et al

Source

Windows. The a window to the outside can be calming rather restrain undertone of hospital stays.¹² It is also wished give the patients the opportunity to spend some time in front of the windows, either through seating bench or moveable armchair.

Scroll over color codes to see level of research

Potentially useful information however needs contextual analysis

CONTENTS

INTRODUCTION

DESIGN PRINCIPLES

DESIGN STRATEGIES

REFERENCES

INTRODUCTION – EBD+

Designing within the healthcare system is a challenging task and full of complexities. It requires the collaboration of various disciplines and exchange of expertise under the common vision to improve the healthcare system for the evermore important cause of care.

To design, can hold many meanings. Design as a term can be understood in relations to the process of care, the architecture itself, the creation of the experience as the patients interacts with the facility as an extended interface or one can even design a relationship program between patient and caregiver.¹

As wide as the design realm is, so is its potential.

EBD+

Never before have we observed a similar engagement and interest from organizations, researchers, or any similar agencies investigating how the physical environment can be improved and shifted to improve the experience and health of patients and staff.

As a result, the practice of evidence-based design as an inquiry and process, is gaining resonance and acceptance also in healthcare facilities, and a large body of research has been accumulated and put forth.

EBD+ mission is to collect this knowledge and make it accessible – with the overall aim to support architects, designers, planners, or project managers in their quest to design for the better.

The guidelines are context and disorder-specifically published, as differing needs and situations demand corresponding design choices. It is intended to assist the planners and be used as an additional tool for the planning phase and to humanize the sometimes-unfamiliar patient profile.

Under these specifications, current research and evidence-based practices are analyzed and concluded in overarching design principles, followed by design strategies informing about possible implementation options.

DESIGNING FOR DEPRESSION

Depression is known as the “silent disorder”. A frequent mood disorder that severely disables everyday life of individuals affected as well as society at large. In 2015, the World Health Organization stated that depression will become the most economically and socially burdensome disorder by 2030².

As of today, depression remains a disorder that carries a stigma of shame, guilt, and societal judgment so great that often individuals do not seek treatment at all. If an individual does seek help and treatment in a mental health clinic, social and work-related connection are most likely already disintegrated, and the disorder developed into severity and constituted with medications. Amongst all the disorder treated in mental health clinics, depression remains the most often diagnosed⁶ for men and women:

There is no single cause of depression, but factors influencing can stem from psychological, biological, social, diet, lifestyle and physical environment aspects⁴.

Wherein it is known that in levels of severity of middle to severe depression, also called major depression, the neurological functions are impaired due to the inefficiency of production and transmission of neurotransmitters such as serotonin, dopamine and noradrenalin⁵ the way out of a negative spiral is not as easy.

SYMPTOMS⁶

Feelings of sadness, tearfulness, emptiness or hopelessness

Angry outbursts, irritability or frustration, even over small matters

Loss of interest or pleasure in most or all normal activities, such as sex, hobbies or sports

Sleep disturbances, including insomnia or sleeping too much

Tiredness and lack of energy, so even small tasks take extra effort

Reduced appetite and weight loss or increased cravings for food and weight gain

Anxiety, agitation or restlessness

Slowed thinking, speaking or body movements

Feelings of worthlessness or guilt, fixating on past failures or self-blame

Trouble thinking, concentrating, making decisions and remembering things

Frequent or recurrent thoughts of death, suicidal thoughts, suicide attempts or suicide

Unexplained physical problems, such as back pain or headaches

DESIGNING FOR DEPRESSION

The most prominent symptoms observed from patients are the feeling of hopelessness and unworthiness, high irritability or frustration, sleep disturbances, lack of energy and motivation for the easiest task at hand, troubles in thinking and making decisions, unexplained physical body pains and reoccurring suicidal thoughts (see table above). Consequences of inadequate treatment can be fatal and include next to loss of body weight, panic attacks, social phobia, difficulties in social relationships unto self-mutilation to ease the pain (see table on the right).

Treatment

As detrimental the consequences can be, there is hope, as depression is treatable. Research today shows great emphasize upon an integrative treatment plan for recovery. This approach depicted from research conducted that showed that solely psychotherapy and pharmacological interventions, which are the most common treatments, are not sufficient to treat depression adequately and widely⁷.

What a better place than a mental health clinic to cater to a wholesome treatment environment to support the individuals healing and recovery process.

CONSEQUENCES⁶

Weight loss or gain, leads to heart disease and diabetes

Pain or physical illness

Alcohol or drug misuse

Anxiety, panic disorder or social phobia

Family conflicts, relationship difficulties

Social isolation

Suicidal feelings, suicide attempts or suicide

Self-mutilation, such as cutting

Premature death from medical conditions

DESIGN PRINCIPLES INTRODUCTION

DP

PATIENT ROOM

In this guideline, focuses on the individual patient rooms. If a healthcare clinic is to improve its physical environment, it should be done within the patient rooms⁸. Nevertheless, some design principles are well worth considering in a broader application, e.g. waiting areas or common spaces on the same level of facility department, as long as they occupy the same disorder group and are carefully analyzed before implementation.

The patient room is the only environment that holds a personal value to the patients and acts as the most direct interface of the service and care provided by the clinic. For the patients, it becomes their home away from home and is particularly important for recuperation, contemplation, processing, and personal rediscovery.

DESIGN PRINCIPLE 01 SOCIAL CONNECTION

DP01

DESIGN
PRINCIPLE 01

**FOSTER
COMMUNICATION**

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DP01 – SOCIAL CONNECTION

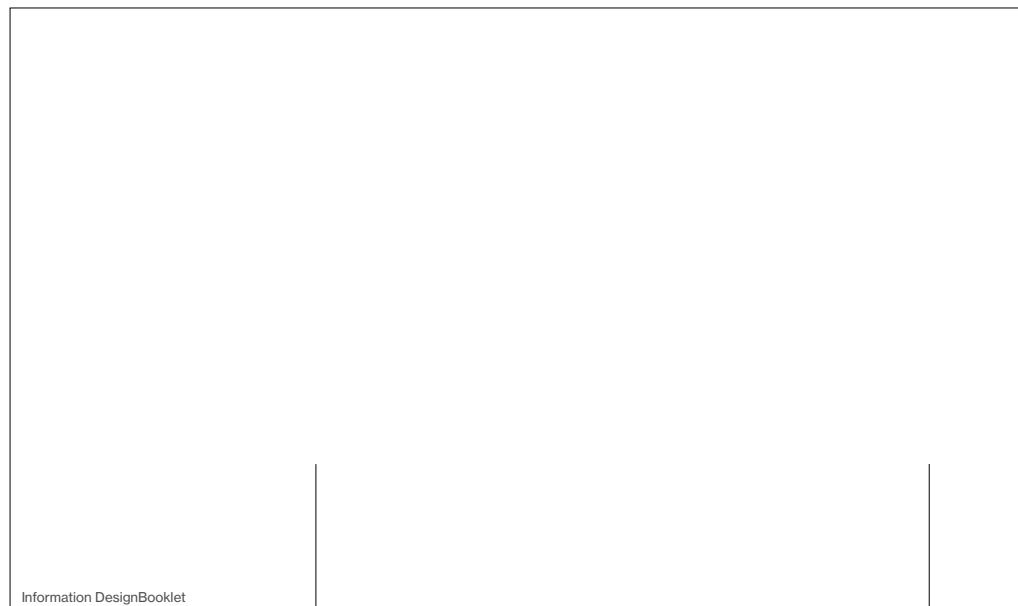
DESIGN
STRATEGY

S 01.2 COMMUNICATION

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Information DesignBooklet

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DESIGN PRINCIPLE 02 STIMULATION

DP02

DESIGN PRINCIPLE 02

S 02.1
NATURE

S 02.2
LIGHT

S 02.3
COLORS

S 02.4
FORM

S 02.5
NOISE

STEER STIMULATION

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DP02 – STIMULATION

DESIGN STRATEGY

S 02.1 NATURE

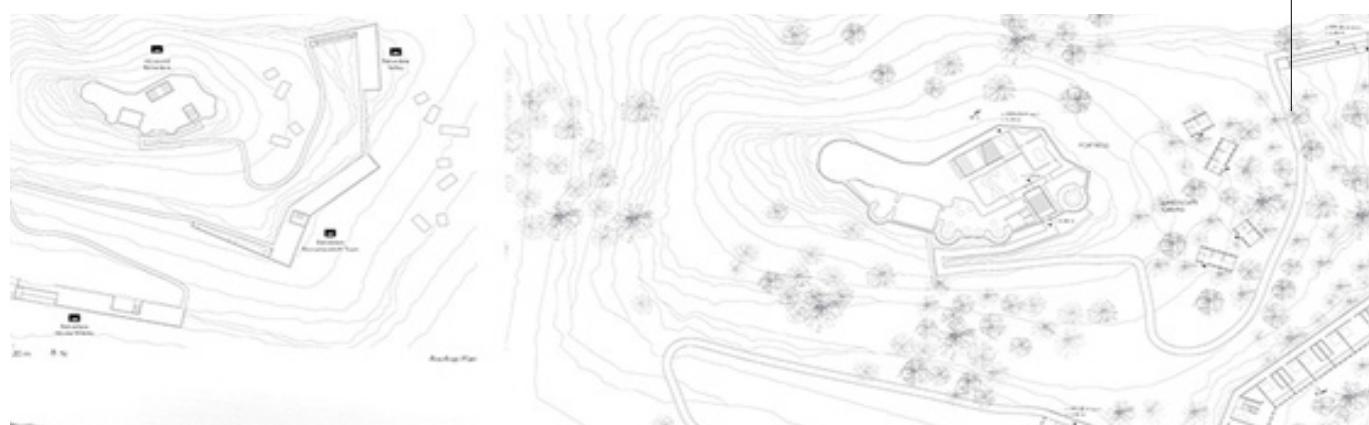
The disconnection of people to nature is ever more critical nowadays, studies show a tremendous impact on reducing aggressions, pain and improved well-being due to stimulations connected to nature¹².

C: Location.

Design of buildings should consider the location, nature and sometimes even culture around. Choosing

elements based on the surrounding landscape and nature can enhance the feeling of being in nature even when residing indoors.¹³

Common wood species, waterfalls, stone regions in close proximity can serve as inspiration and foundation



Visual: Archdaily, Giora

A: Windows.

The sense of being in nature can be achieved by ensuring large windows, but also a visual of nature, almost

acting as a window to the outside, which can be calming given rather restraint undertone of hospital stays.¹² It is also wished to give the

patients the opportunity to spend some time in front of the windows, either through seating bench or moveable armchair.

A: Materials.

The material choices are an essential part of supporting the feel of naturality within a stigmatized sterile clinic environment and ensure low toxins.

Wood like oak or arve are good options, wherein cold materials like metal, chrome should be avoided.

Vinyl or linoleum floors showed positive results in practice

Pine wood is known to be scent neutralizing



Pine Wood



Oak Wood

C: Odor

Neutralizing. Natural materials can have scent neutralizing characteristics, which can reduce the scents and stronger odor of patients due to medication intakes.¹⁵

Mixture of natural materials, stone, wood ensure a nature like perception



Clinicum Alpinum

B: Artworks.

Another options to incorporate natural elements are trough artworks.¹⁶

This aspect has been studied by Ulrich et al. However, studies high-

light the careful use of artworks due personal tastes in age groups of patients and remain undecided whether to use photographs or abstract paintings.

DP02 – STIMULATION

DESIGN
STRATEGY

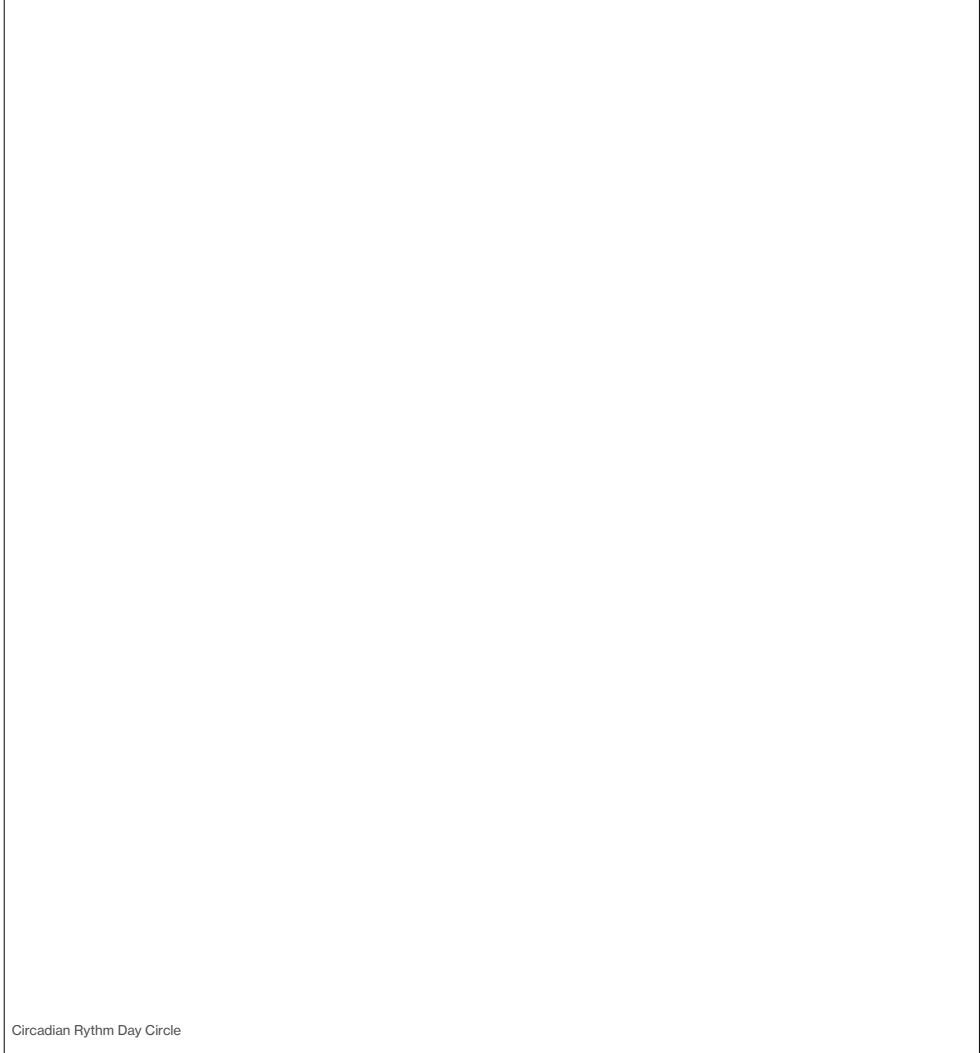
S 02.2 **LIGHT**

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A: Human Centric
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C: Light Fixtures.

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B: Regulation.

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DP02 – STIMULATION

DESIGN
STRATEGY

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C: Activating Positive Memory. Oluptiusciate nonestio. Aquidus preribus unt ad maioribusam quiae perum voluptusam fugia que pore volorio rrorrum volo blaut ra plignum peli quam, corume nient aut licaere mi, tem laut que resequas reprovit iume cusdand erezia venihicid que verum aut omnihicia quas et harchilictas aut inum del iuntori busam que offictotae volore perum quam.

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A: Primary / Secondary Colors.

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Color Spectrum

DP02 – STIMULATION

DESIGN
STRATEGY

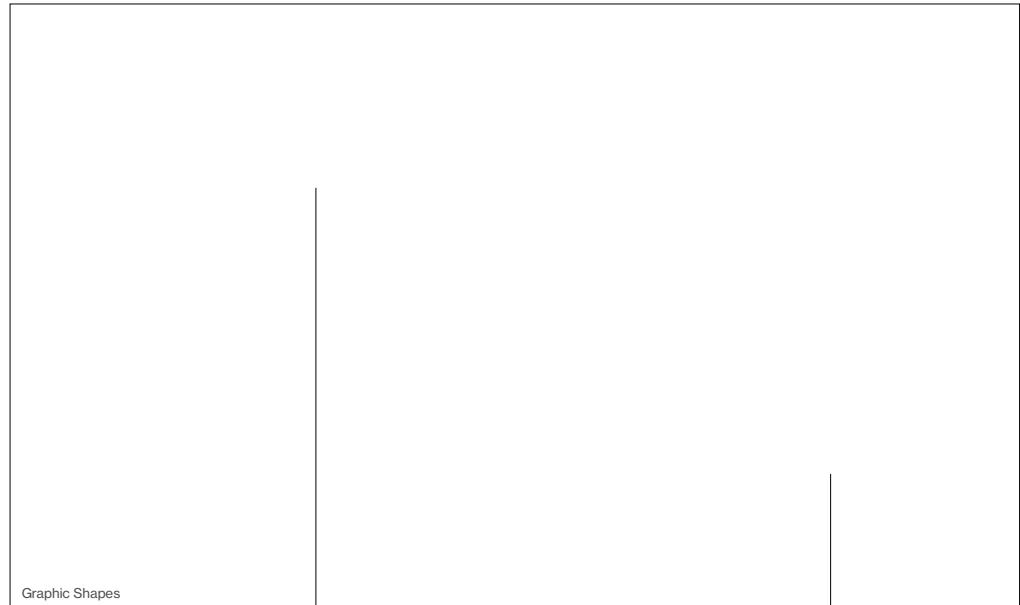
S 02.4

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C: Visual

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A: Touch.

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DP02 – STIMULATION

DESIGN STRATEGY

S 02.5

NOISE

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A: Built In

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DESIGN PRINCIPLE 03 PRIVACY

DP03

DESIGN
PRINCIPLE 03

ENSURE PRIVACY

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DP03 – PRIVACY

DESIGN
STRATEGY

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DESIGN PRINCIPLE 04 AUTONOMY

DP04

DESIGN
PRINCIPLE 04

S 04.1
PERSONALIZATION

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DP04 – AUTONOMY

DESIGN STRATEGY

S 4.1

PERSONALIZATION

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DESIGN PRINCIPLE 05 SAFETY

DP05

DESIGN PRINCIPLE 05

S 05.1
VENTILATION

S 05.2
INSTALLATIONS

ELIMINATE HEALTH HAZARDS

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DP05 – SAFETY & SECURITY

DESIGN STRATEGY

S 05.1 VENTILATION

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DP05 – SAFETY & SECURITY

DESIGN
STRATEGY

S 05.2 INSTALLATIONS

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Bathroom Visual

CASE STUDY 01 CLINICUM ALPINUM

CS01

BEST
PRACTICE

PRIVATE CLINIC,
LIECHTENSTEIN

Construction Year:
2014-2019

The Clinicum Alpinum is setting a milestone as the first clinic in the German-speaking world to consistently implement the concept of “healing architecture”.

In the midst of Gaflei, a Rhine valley region in Liechtenstein surrounded by mountains, forests, and alpine meadows, the first specifically stress-related clinic in a german speaking area opened its doors in 2019.

The “Clinicum Alpinum,” founded by Dr. med. Marc Risch and certified Sleep Therapist and Director Michaela Risch bring forth a novel approach to the clinic environment.

Private clinic - therapy, hotel,
SPA, pool, gastronomy

Client: Clinicum Alpinum
Real Estate Ward

J2M Architects
Team: Christoph Mayr,
Andreas Metz, Pierre
Gisquet, Lucia Salas Cobos,
Margret Zellbeck, Yi Zhao

Photography: Bruno Klomfar

Competition 1st Price
Nomination DAM Prize 2021



Their mission is to put the patient in the center of their thoughts and operations. This is well observable through their treatment offerings, online presence, and, most importantly, the consistent concept of healing architecture for the physical clinic design. They state: "Being ill changes many things - including the perception of space. Buildings and rooms in which the needs of depressed people are taken into account promote the recovery process."

"Being ill changes many things - including the perception of space. Buildings and rooms in which the needs of depressed people are taken into account to promote the recovery process."

- Clinicum Alpinum

From the architects:

The special place - Gaflei, with its topography, the alpine meadow, the mountain forest, the rocks of the Alpspitz in the back, and the magnificent panoramic view into the Rhine valley, obliges to develop a building that integrates into the scenic situation.

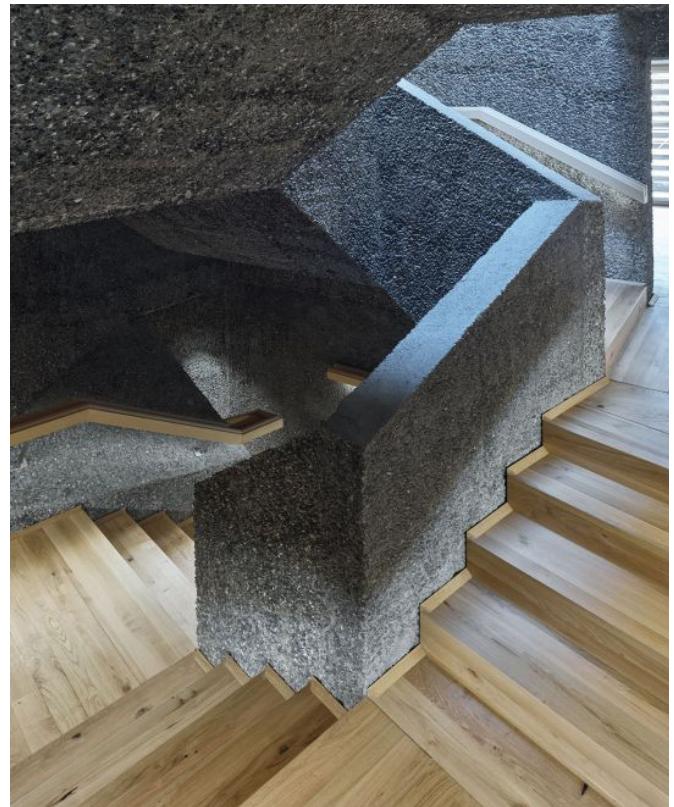
Here, this interest coincides quite naturally with the actual goal and purpose of the building, to create an environment that supports and promotes the therapy of patients with stress-related illnesses as much as possible.

A central aspect of this is to free the patient from their everyday and stressful situation, i.e., offering an environment that contrasts with their usual surroundings.

The entire building is based on a material canon of solely two materials – wood and stone. This not only serves the integration into the landscape, do state the architects, but also promotes a calm and concentrated mood and creates the appropriate background for the therapeutic measures taking part in the clinic.

"The material canon of the entire building, exterior and interior, is reduced to only two materials - wood and stone. This not only serves the integration into the landscape, but also promotes a calm and concentrated mood..."

- J2M Architects



Interior. In order to provide their clients with a place of retreat and sufficient privacy, the clinic offers exclusively spacious rooms built using natural materials such as clay, wood, and stone and furnished with care.

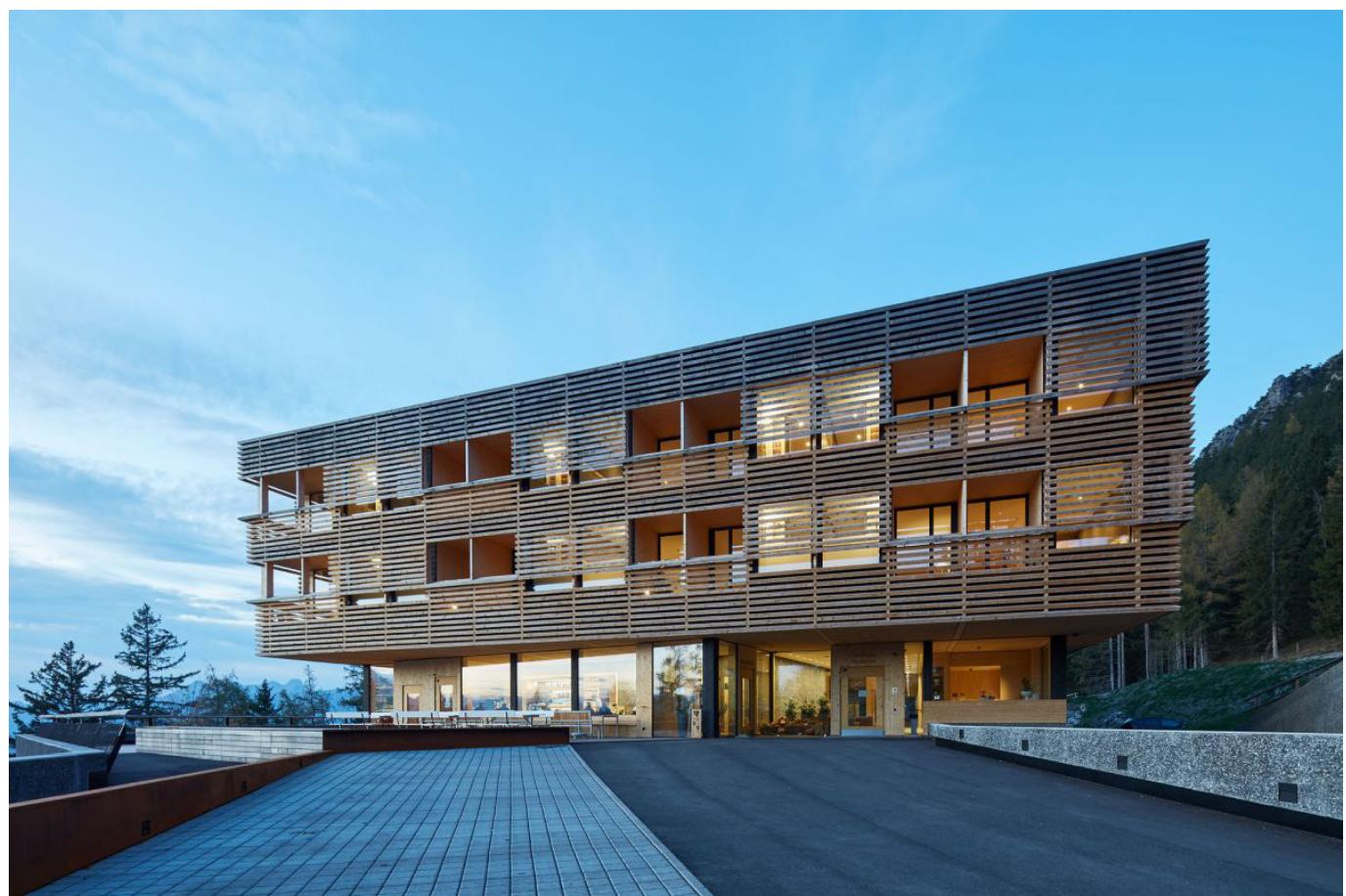
When designing the rooms, they focused on a healthy indoor climate. The focus is on a "healing architecture" in a "healing environment." Against this background, all electrical installations are shielded from the first sight and reduced. The floor, ceiling, and wall constructions are made of untreated wood, and every room has one wall made from clay. Natural furnishing materials, special daylight, and sleep-biologically effective night lighting contribute to an optimal recovery experience.



Discussion. Particularly interesting is the clear differentiation between disorders. Today, many clinics serve or try to cater to various diseases within the same walls. Wherein, Clinicum made it their vision to solely focus on depression-related conditions, which allowed for specific and holistic treatment offerings and the corresponding, supportive design of the building.

In their online appearance, a manifest is published.¹ It concludes in considerate words that the healing architecture from inside to outside not only serves the patients' healing process but also supports the sensibilization of non-affected people for the disease depression –

“We all could be affected by it tomorrow. “



ARCHIVE

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