A Conversation on Healthcare Interior Design

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w/ Alberto de Salvatierra

AS: Attila and Dak, in putting together this publication for the SoA, I wanted to get a better handle on our various programs. I’ve read our website’s elevator pitch, but wanted to dig deeper. What exactly is/falls-under-the-umbrella-of healthcare interior design? What sort of things is HID and what is it not?

DK: Like many other design programs that offer a concentration on health and wellbeing, we form our foundation on the World Health Organization’s definition of health as being the absence of disease and infirmity along with the complete psychological health of the individual and sociological health of interacting groups.

AL: The UNLV approach is therefore a creative and innovative strategic design process that harmonizes building performance with human cognitive and physical performance. My colleague frames this process as design that ultimately cares for human health.

AS: Given this is a universal concern, it is a serious and urgent undertaking then.

AL: Precisely. Most of us are born inside of a designed environment, and according to the Environmental Protection Agency we spend over 90% of our lives in interior environments—and many of us will transition to the afterlife within an interior environment as well. The impact of these spaces on individuals, families, communities, and our systems of care is therefore the most profound aspect of wellbeing. Adding to the complexity of health care interior design is the new era of design thinking where multicomponent design interventions are expected to account for their biological and behavioral impact on humans to promote health and wellbeing in the built environment.

DK: And our transition from an existence spent predominantly outside with only raw materials to aid in our comfort, to one where everyday activities have and are becoming more automated in a relatively short span of human existence—the importance of maintaining health and wellbeing is of paramount importance. The Healthcare Interior Design program at UNLV teaches students how to draw upon familiar technologies, integrate new technologies, and plan for future technologies in order to maintain optimal health and wellbeing of all people.

AS: You bring up automation and technology. With our attention shifting to these—as you say—to live more comfortably, is HID a growing industry?

AL: Demand for healthy and health-promoting interior environments permeate all segments of the building industry: from hotel, residential and corporate projects to hospital and allied health facilities. For example, major hospitality chains already are expanding their evidence-based health and wellness amenities for travelers to maintain their health and wellbeing while in transit. The next and urgent design challenge is likely to be school
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violence that will require a multilayered design approach to shift the public focus from persistent and recurring problems to solutions that are supported by evidence-based design strategies. The three trillion United States healthcare market, the largest healthcare industry in the world—that comprises approximately 18% of our GDP—also presents unprecedented opportunities to a new generation of entrepreneurial healthcare design professionals.

**DK:** All of this translates to a growing demand for greater depth of knowledge in human anatomy, biology, psychology, and social behaviors related to the designed environment.

**AS:** Three trillion presents huge market potential. Educational institutions across the United States must be seeking to capitalize on it. Why did you choose to do it? What makes us special?

**DK:** Twenty-first century creative and innovative professional practices of interior design manifest at the intersection of the arts and sciences. What makes UNLV’s Interior Design program uniquely poised to tackle this challenge is the bold step that few Interior Design programs in the nation have taken: adding a specific faculty position based on a strong biological and social science background.

**AL:** Also, both the cross-disciplinary Master of Healthcare Interior Design and the undergraduate Interior Architecture + Design programs integrate research and education that is coupled with real-world, design-research, problem-solving-based teaching and learning. These programs assure an educational experience that is responsive to current and projected modes of professional practice in the design of health-promoting and healthy environments. The professional development of the students is further enhanced by the program’s unique collaborative relationship with behavioral and health science organizations which include the Cleveland Clinic Ruvo Center for Brain Health (in the development of neuroscience-informed design strategies) and the University Medical Center of Southern Nevada (for professional internships).

**AS:** Excellent. Wow...this is comprehensive. And I’m hearing there are a multiplicity of angles by which to arrive at HID. What drove you to the discipline?

**DK:** Most of the respected professions have developed specializations in response to the expected level of knowledge required to excel. No longer is a Lawyer just a Lawyer; they are now Divorce, Corporate, Contract, and Criminal Defense Lawyers, etc. The same holds true for physicians; they are Cardiologists, Oncologists, Pediatricians, etc. In order for design to thrive in the future, designers will need to gain sets of expertise, and Healthcare Interior Design responds to the core values of health safety and welfare that underpins much of Interior Design.

**AL:** Also, because significant formative life experiences that take place inside buildings are impacted by interior spatial qualities, I embraced the study of the dynamic relationship among these, the human brain, and the spirit, and refocused the breadth of my priorities in both design practice and construction. I want to have a better understanding of the human experience I design.

**DK:** All environments are based on sets of power and control, and become reflections of a person. This representation can be unfair, lead to bias, and affects the treatment of people. For example, an environment full of medical equipment with hospital-type qualities suggests a person is sick and we treat them like a sick person. This treatment may be unwelcomed and could result in hostilities. Likewise, an abused woman who goes to a not-for-profit safe house may feel like she is now one step away from being homeless because the safe house lacks elements that inspire safety and security. She thus decides to return to the abuser who despite beating her, does provide a home. Understanding how people use environments and what those environments mean have equal importance and should be integrated into a thoughtful and meaningful design. These are some of the reasons that compelled me towards Healthcare Interior Design.

**AS:** I imagine these perspectives then translate into pedagogy.

**DK:** Yes. First, we acknowledge that only cross-disciplinary collaboration creates new knowledge to inform the development of innovative and creative design strategies. To this end, we incorporate courses with specific biological and psychological content into the curriculum. Second, we embrace and engage in cross-disciplinary collaboration that inspires new design thinking. This is done through seminars at the Ruvo Brain Institute—interacting with real clients from Las Ventanas’ Senior Living Community—and including Behavioral Councilors, Kinesiologists, and Physical Therapists in our studio reviews.

**AL:** We also limit dependence on precedence (studying environments in a different time, place, for different users with extant technologies) as a factor in design decisions that may influence design methodologies that close upon themselves and do not serve the interests of contemporary stakeholders. Most of our studio courses are co-taught by adjuncts who are practitioners in the field and bring in real-world factors, and faculty who promote theory exploration of thought. These differing but highly relevant and complementary expertise provide students with a greater breadth of knowledge. Every studio course is a new “collaboratory” of different disciplines integral to the project. Students in both programs having won numerous national and international awards and recognitions appear to underscore the viability of this educational experience. In short, our students are not just trained to be designers; they are prepared to be design leaders.

**AS:** Perhaps I should switch disciplines! This is all quite extraordinary. It is so imperative disciplines of today are framed by timely and real-world concerns and buttressed with interdisciplinary collaborations—all of which are at the core of our HID program. And ultimately, design with purpose leverages immense power and optimism for the improvement of the human condition. There is no better ideal for which to strive for. Thank you for that deep dive!

**DK:** Our pleasure Alberto!

**AL:** Indeed.