



## KEY POINT SUMMARY

### OBJECTIVES

To investigate how a proposed “psychoenvironmental” model might help generate positive health outcomes for psychiatric patients.

## Objective and subjective evaluation of psychiatric ward redesign

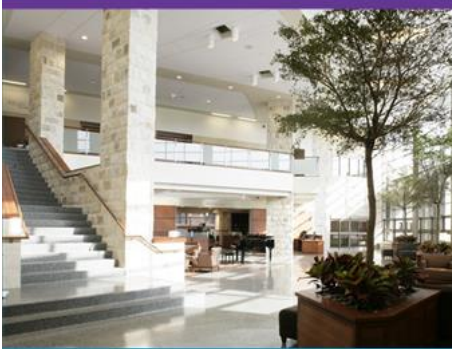
*Whitehead, C. C., Polsky, R. H., Crookshank, C., Fik, E. 1984 / The American Journal of Psychiatry, Volume 141, Issue 5, Pages 639-644*

### Key Concepts/Context

At the time of this study, relatively little research had been done to explore the potential benefits of incorporating architectural designs geared specifically towards improved patient well-being in psychiatric treatment environments. A “psychoenvironmental” model incorporating therapeutic architectural designs into psychiatric healthcare environments was developed before the publication of this study; however, this particular model had not yet been examined empirically. The authors proposed four hypotheses in order to examine this psychoenvironmental model: 1) changes in the physical environment correlate with changes in social behavior, 2) environmental changes affect the spatial distribution of behaviors, 3) changes in the physical environment can work to reduce the effects of mental illness in patients, and 4) the use of “social organizers”, or designs that promote increased social interactions, can focus the benefits of improved mental health into positive, therapeutic outlets.

### Methods

The study took place in a 30-bed psychiatric ward that was constructed in the early 1950s. The authors identified several architectural features about the ward’s original design (labeled Ward A) that could be altered in order to test the psychoenvironmental model (the altered ward would subsequently be labeled Ward A). Patient behavior was observed in Ward A prior to the four-month construction period, during which time patients and staff were moved to a different ward of identical design and were not observed. Patients were then observed for eight weeks in the newly redesigned Ward A using nonintrusive data collection methods and attitudinal measures to test the four psychoenvironmental model hypotheses.



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## Findings

Following the psychoenvironmental model redesign, researchers saw a 50% decrease in psychopathological (or erratic) behavior from patients within the day room area. Attitudinal measurements showed that patients reacted more strongly (both positively and, to a lesser extent, negatively) to the architectural changes than staff members in general, indicating that the redesigned ward may generally have affected patients more than staff. Patients showed increased social activity within the cafeteria, visiting room, and day room spaces under the new design, as opposed to interacting largely in hallway areas under the old design.

## Limitations

Given that this study took place with patient and staff populations that occupied a single psychiatric ward in a specific geographic location, the results from this study may not be universally applicable to all psychiatric patient or staff populations. Findings were derived from the observations of researchers and survey responses from patients and staff; more in-depth information concerning perceptions of which architectural designs were more or less effective could have narrowed down which architectural changes garnered the most impact.

## Design Implications

Designing psychiatric care spaces so that social interactions can be balanced with both patient and staff privacy could positively impact the overall treatment process for both populations. Visitation and day rooms that are geared less towards idle activities, such as watching television, and more towards interpersonal interactions appear to have noticeably positive effects across the board. Providing spaces for patients to interact with each other, as well as with staff members, may reduce feelings of isolation and other instances of negative patient behavior.

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