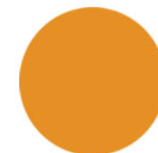


# Improving Healthcare Resilience Through an Equity Focused Framework

Tiffany Broyles Yost, AIA, LEED AP D+C, Fitwel Amb.

Greg Coni, AIA, CPHC

Angela Mazzi, FAIA, FACHA, EDAC



# GOALS

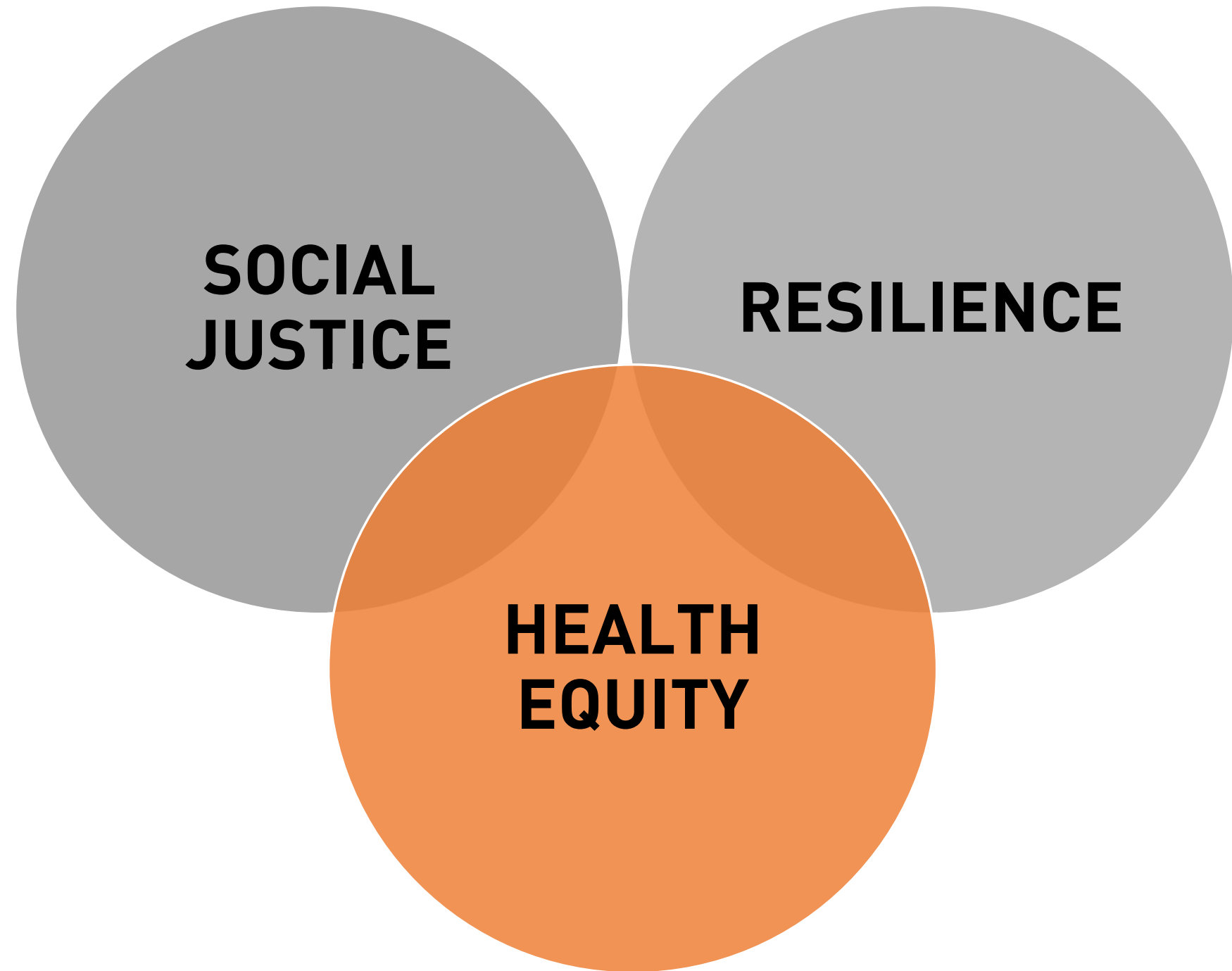
1. Understand terms, organizations and concepts around health equity
2. Define the exposome and the environmental, economic and social factors it comprises to understand its impact on health outcomes.
3. Understand how to apply our resilience framework to individual campus/building locations and easily see the strengths and gaps in your health equity strategy.
4. Name three hidden ways your budget is being impacted by your sustainability and resiliency strategy that have nothing to do with energy savings.
5. Learn how to identify community and individual challenges and how to respond to them through the built environment,

# TERMINOLOGY

**Social justice** is justice in terms of the distribution of wealth, opportunities, and privileges within a society.

**Resilience** is the capacity to recover quickly from difficulties

**Health equity** means everyone has a fair and just opportunity to achieve optimal health. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.



# WHO CARES:



What  
makes a  
community  
healthy or  
sick?

# THE RESILIENCE ORG CHART

A SPATIALIZATION OF RIGHTS



EXISTING FRAMEWORKS

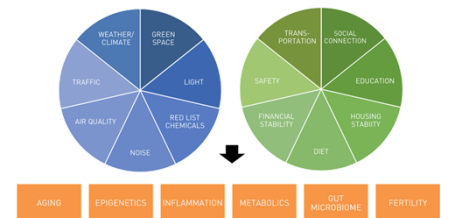


SCALES OF RESILIENCE

RESOURCES TO COPE



SALUTOGENESIS



EXPOSOME

HUMAN

BUILDING

INFRASTRUCTURE

# RESOURCES = RESILIENCE

## ECONOMIC

- Education level
- Economic wherewithal
- Generational wealth

## ENVIRONMENTAL

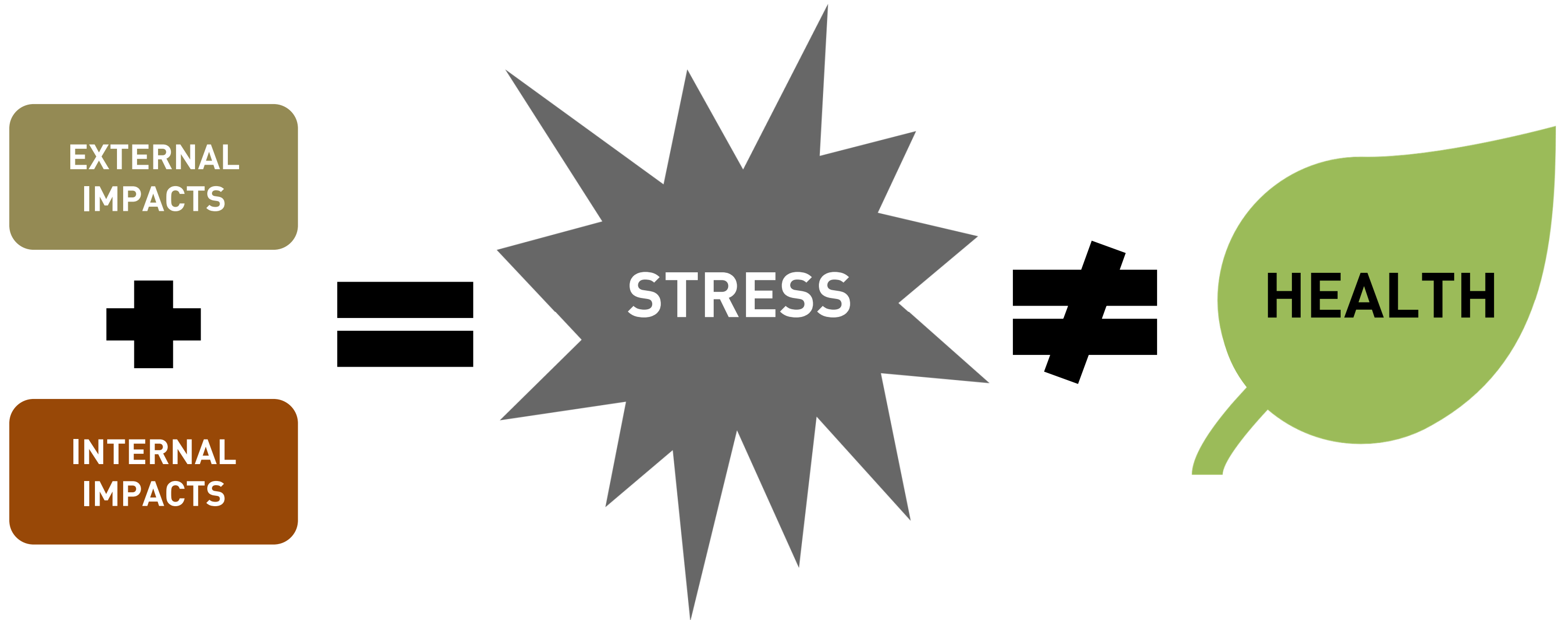
- Supportive and safe
- Accessible:
  - To places/events
  - For activities
- Neutralize adverse climate events

## SOCIAL

- Diverse
- Culturally competent
- Robust networks
- Health Literate
- Age sensitive

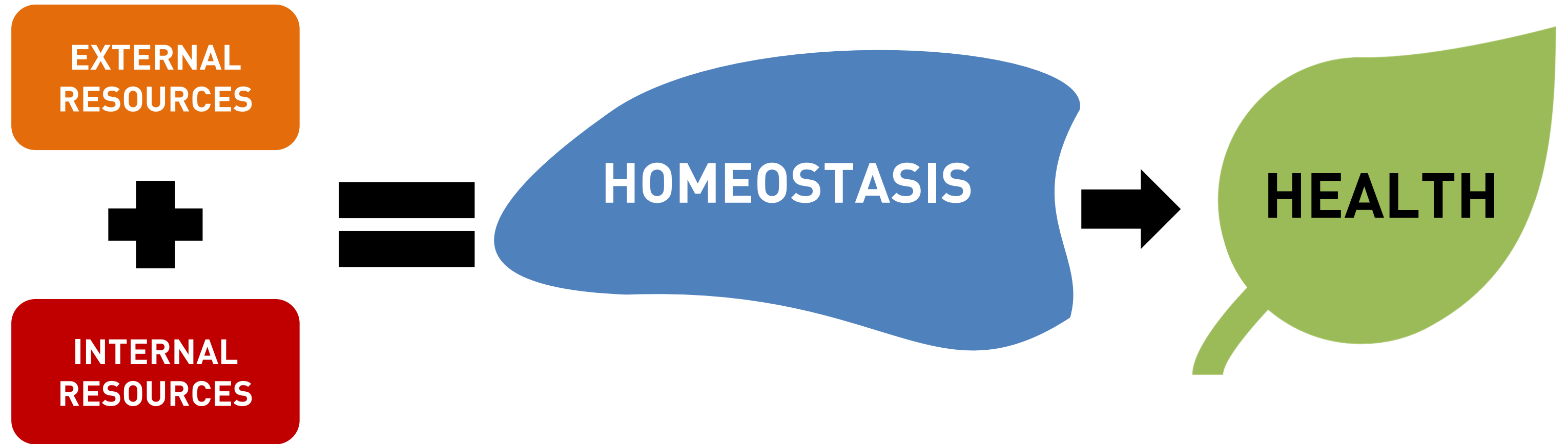


# DIS-EASE EQUATION



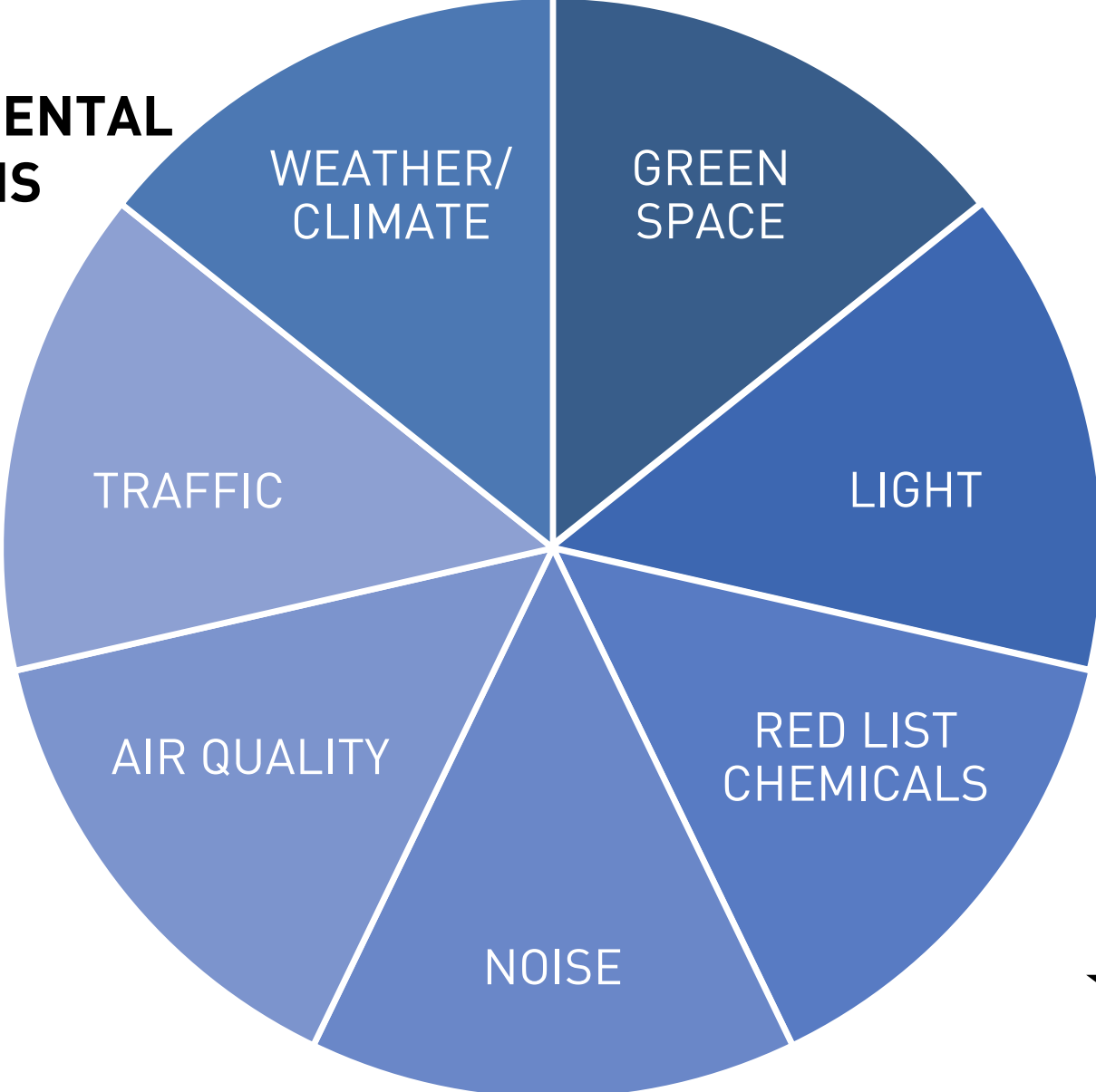


# HEALTH EQUATION

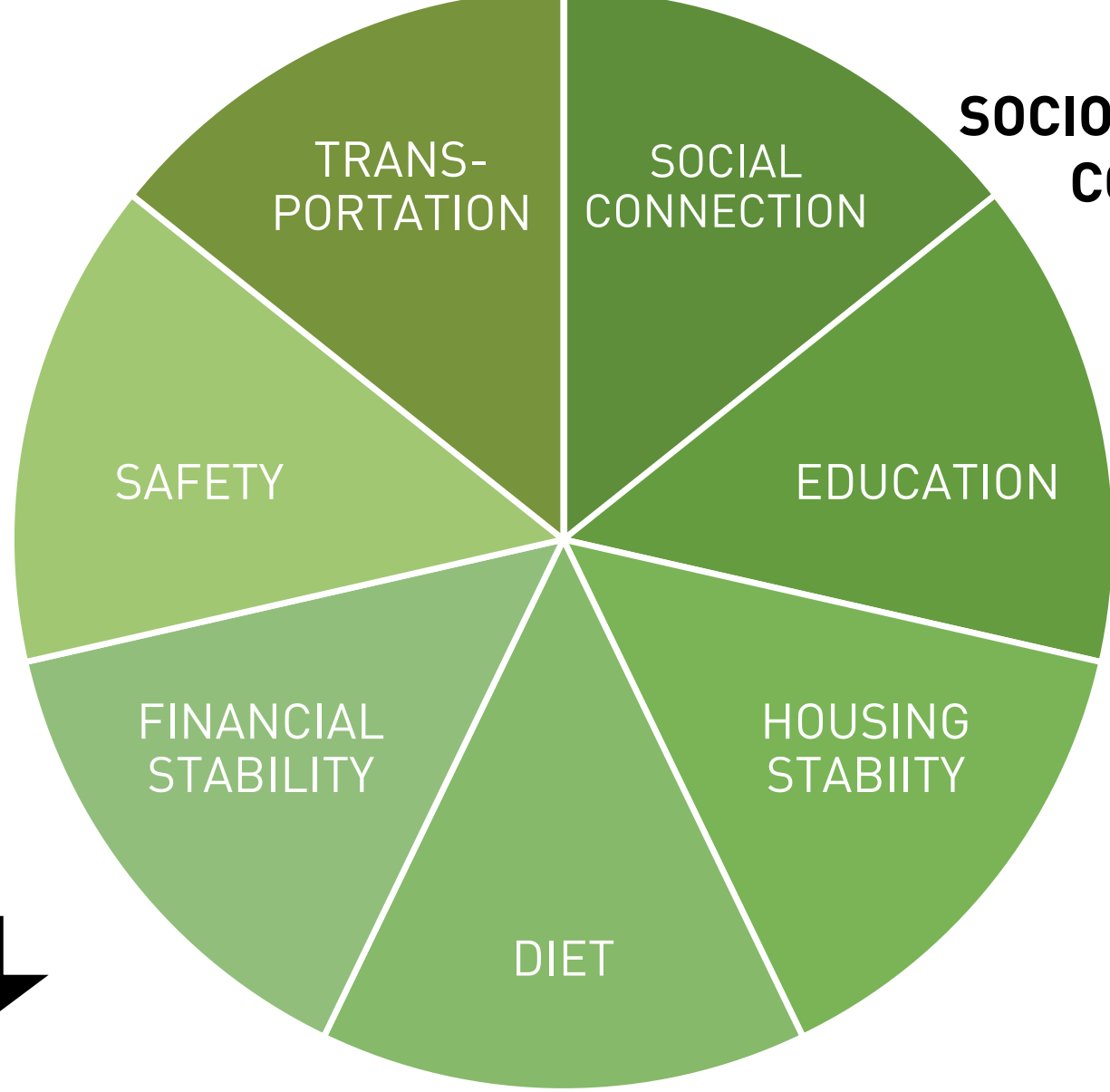


# HEALTH EQUITY AND THE EXPOSOME

**EXTERNAL ENVIRONMENTAL CONDITIONS**



**EXTERNAL SOCIOECONOMIC CONDITIONS**



**INTERNAL BODILY PROCESSES**

AGING

EPIGENETICS

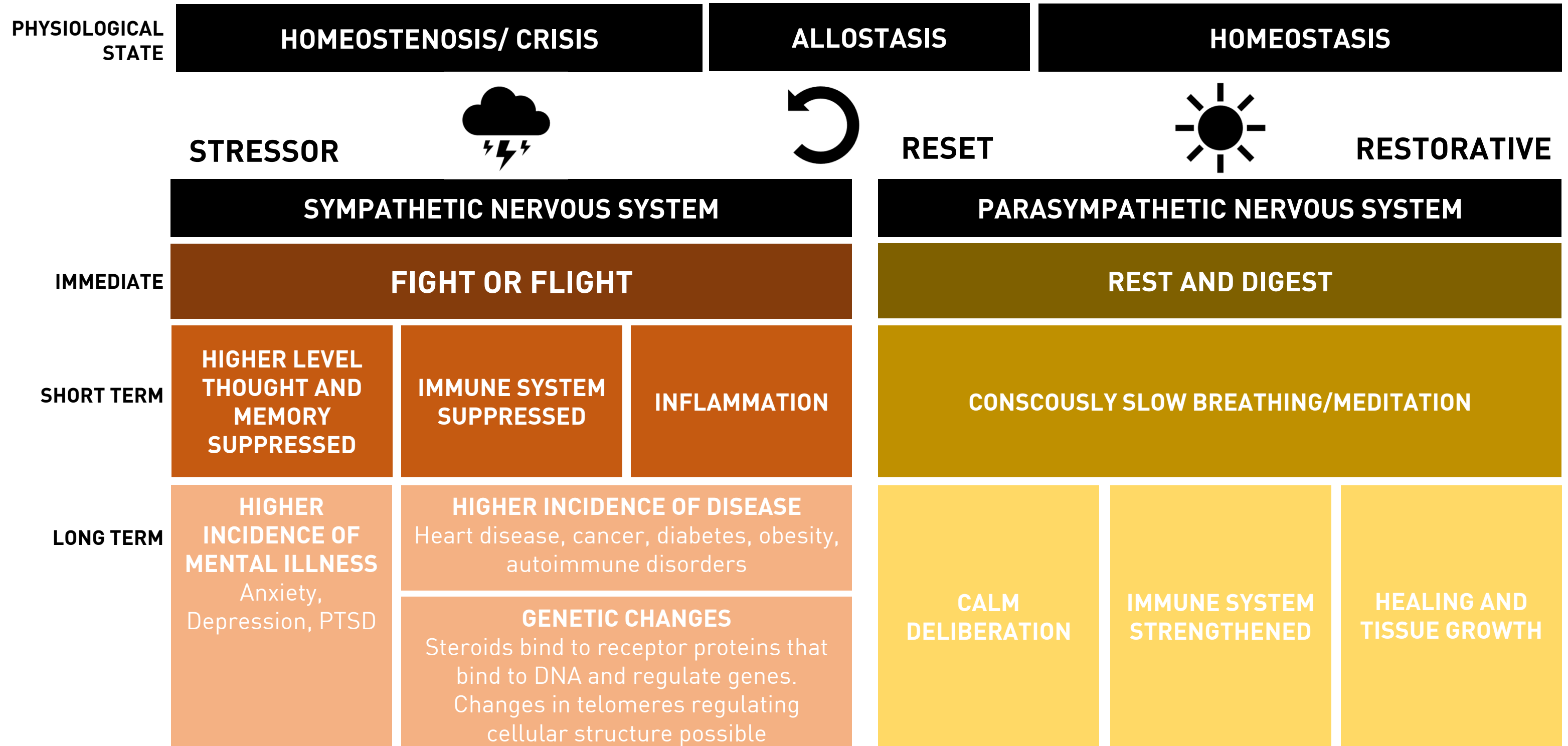
INFLAMMATION

METABOLICS

GUT MICROBIOME

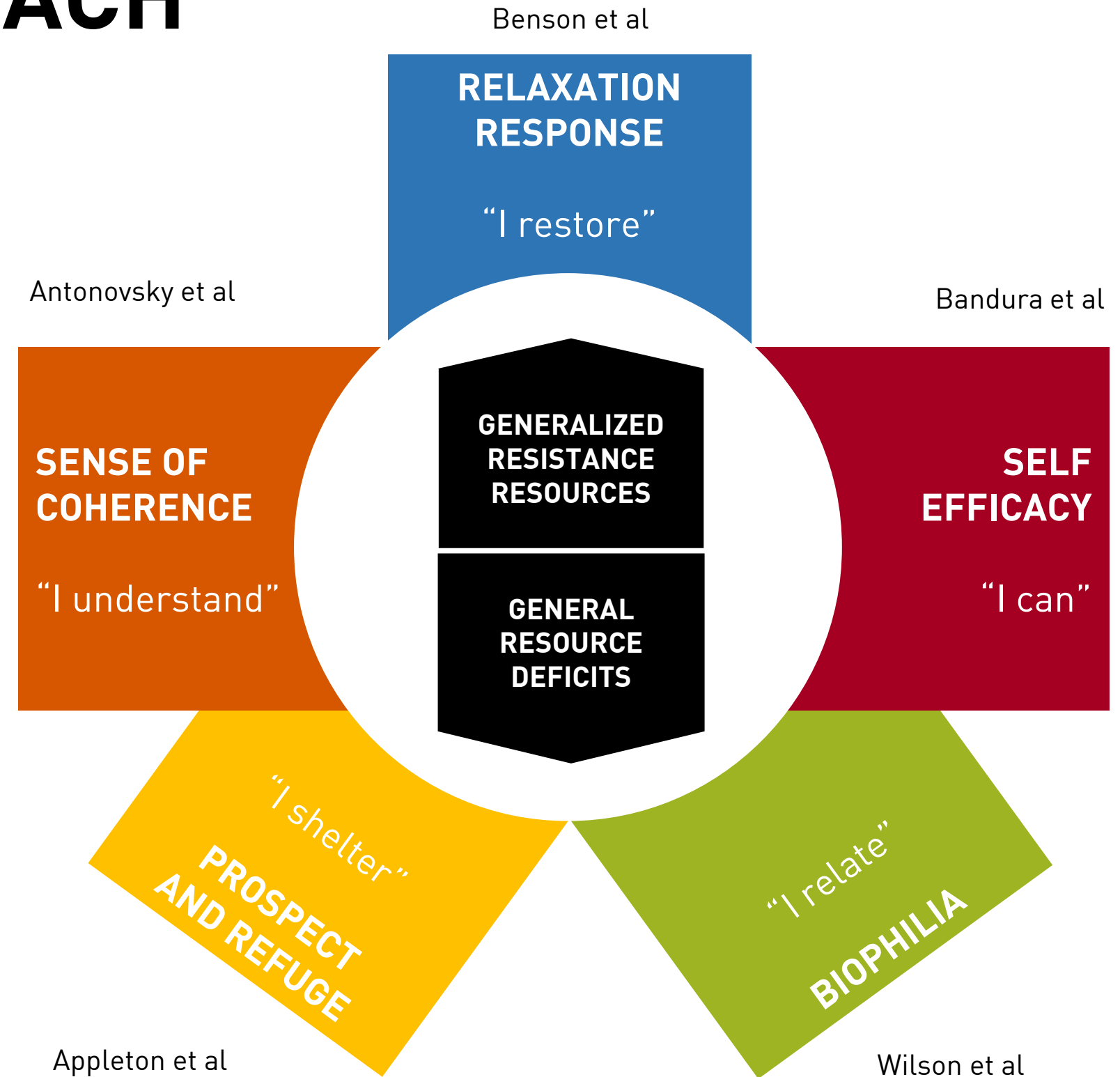
FERTILITY

# AUTONOMIC NERVOUS SYSTEM AND STRESS



# A SALUTOGENIC APPROACH

Focus on alleviating stress and building resilience by providing an abundance of environmental resources for patients, families and staff



How are  
resilience,  
sustainability,  
and equity  
related?

# SUSTAINABLE, RESILIENT, & EQUITABLE



White people are exposed to approximately **17% less** air pollution than is caused by their consumption.



**56%** of the population living near toxic waste are people of color.



Black people are exposed to approximately **56% more** air pollution than is caused by their consumption.



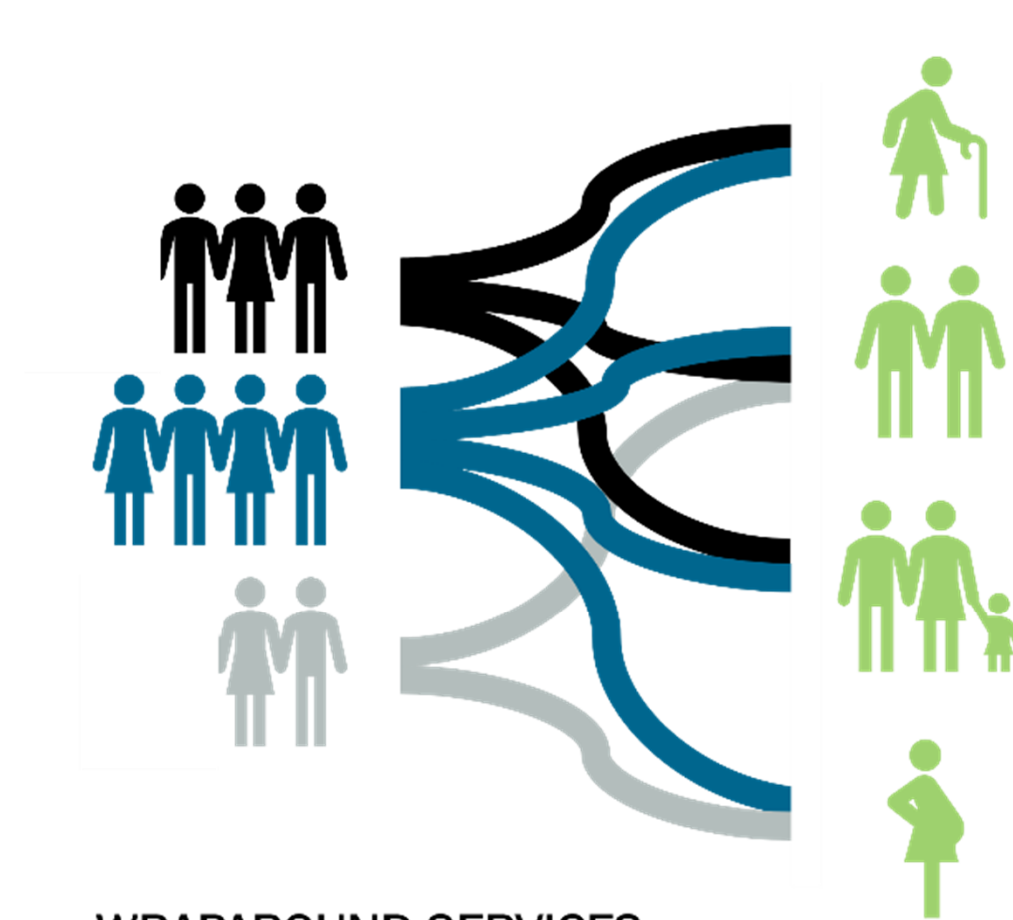
Hispanic people are exposed to approximately **63% more** air pollution than is caused by their consumption.

# DESIGNING FOR EQUITY

	ELDERLY	LGBTQIA+	TRAUMA	MENTAL ILLNESS
URBAN				
RURAL				
MENTAL ILLNESS				
TRAUMA				
LGBTQIA+				
ELDERLY				

## UNDERSERVED POPULATIONS

These populations are not monolithic- their needs across multiple dimensions must be considered.



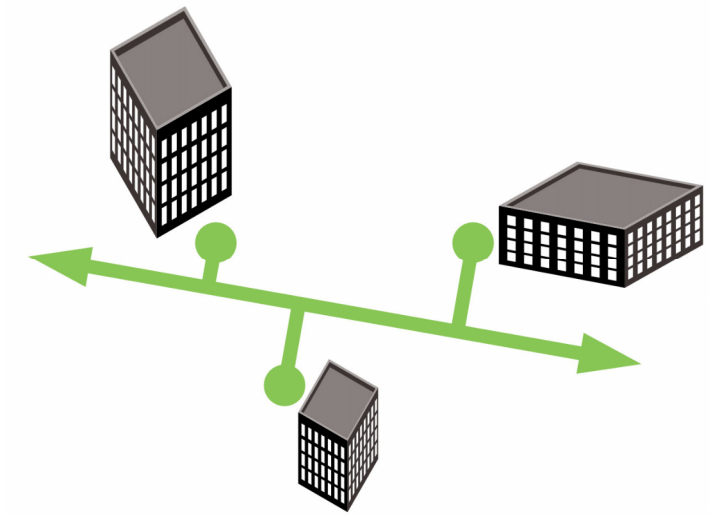
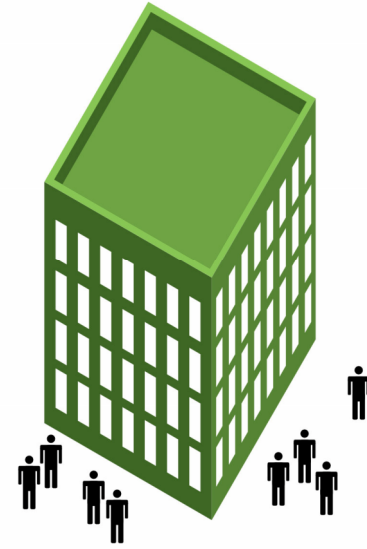
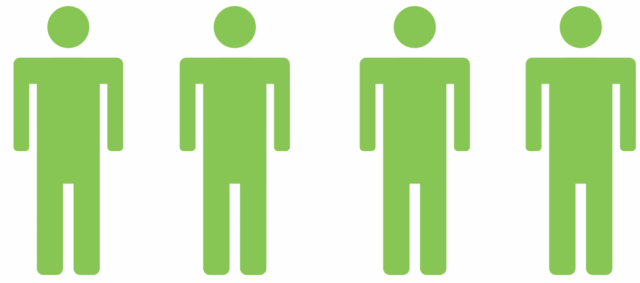
## WRAPAROUND SERVICES

In a single visit, patients can access expanded services that address other social determinants to health

How can built  
environments  
provide a  
wellness  
intervention?



# SCALES OF RESILIENCE



	HUMAN	BUILDING	INFRASTRUCTURE
WHAT	Mental and physical wellbeing of the individual	Buildings and physical spaces for one individual to a community	Connecting transportation, utilities, and public commodities
HOW	Providing for respite and recovery	Flexibility to adapt to potential future stressors	Minimizing impact of future use and growth
	Equitable access to healthcare and resources	Using equitable design to increase accessibility	Providing equitable access to resources for all communities
	Optimizing for safety and security from stressors	Minimizing exposure to external stressors	Maintaining systems for optimal operation

# HIGH IMPACT RESILIENCE

**ZERO CARBON BUILDINGS:** Design buildings that are ready for and adaptable to future uses, energy sources, and technologies.

**RESILIENT:** Design for adaptation and flexibility of the building and site by reviewing climate risks, determining the service life of the building, and projecting opportunities for incremental building performance over time.

**COMMUNITY RESILIENCE:** Design buildings to act as a community resource during disaster events, offering shelter, charging points, communication hubs, warming/cooling centers, and points of distribution.

**EQUITABLE:** Assess how your project can respond to current and future disaster events (natural or man-made) with designs that protect the most vulnerable members of the community and enable rapid recovery.

**HEALTHY:** Address the potential public health risks associated with climate change and design to improve community health.

# INTERVENTIONS

## SCALES OF RESILIENCY

**HUMAN**

**BUILDING**

**INFRASTRUCTURE**

SELF  
EFFICACY

RELAXATION  
RESPONSE

SENSE OF  
COHERENCE

PROSPECT  
AND REFUGE

BIOPHILIA/  
SUSTAINABILITY

RESILIENCE FACTORS



# INTERVENTIONS

## SCALES OF RESILIENCY

**HUMAN**

**BUILDING**

**INFRASTRUCTURE**

SELF EFFICACY

Incorporate spaces to sit along long corridor.

Provide a staff respite room (or multiple) that is/are easily accessible

Plan the campus to include multimodal transportation options.

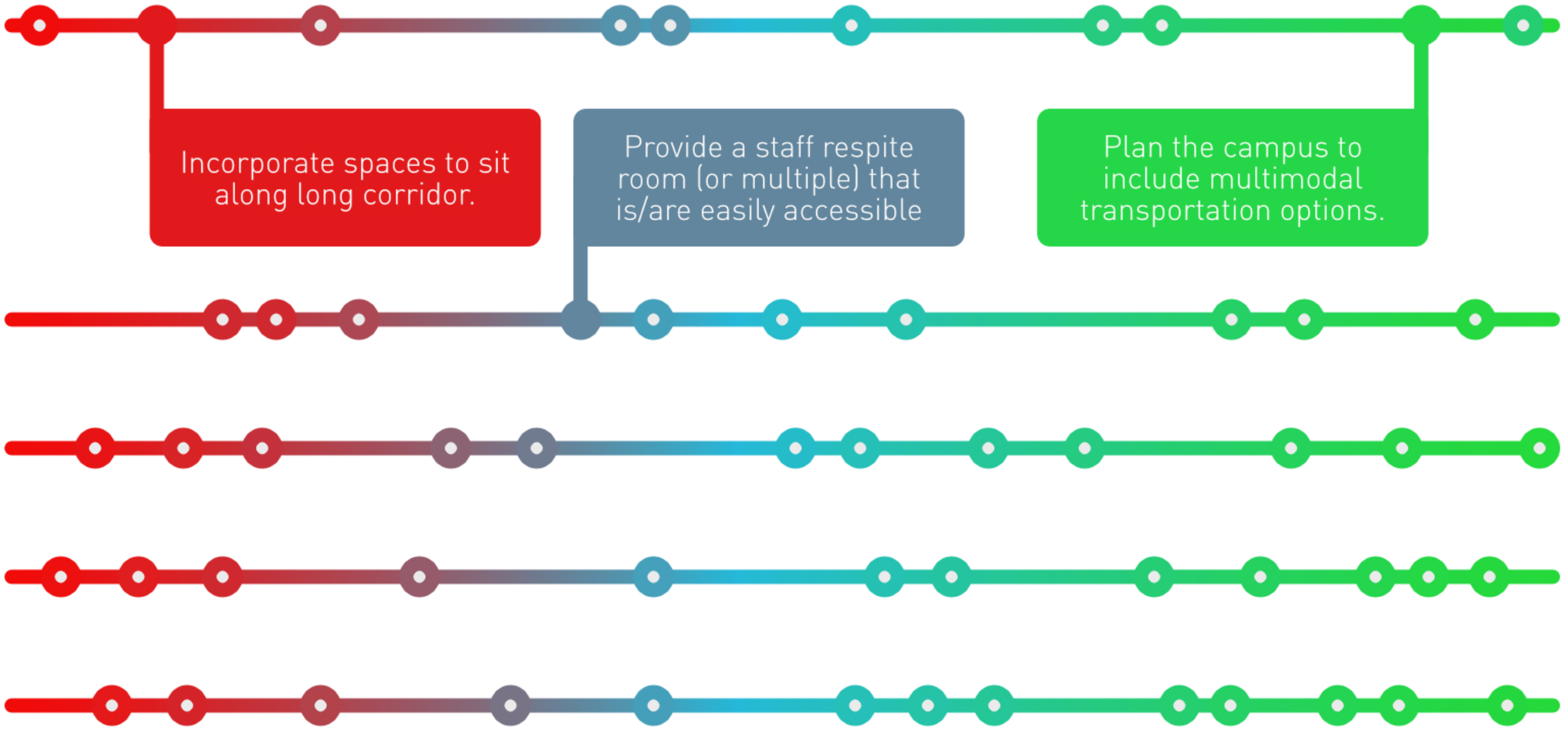
RELAXATION RESPONSE

SENSE OF COHERENCE

PROSPECT AND REFUGE

BIOPHILIA/SUSTAINABILITY

RESILIENCE FACTORS



# INTERVENTIONS

## SCALES OF RESILIENCY

**HUMAN**

**BUILDING**

**INFRASTRUCTURE**

Perioperative Floor Renovation



SELF EFFICACY



RELAXATION RESPONSE



SENSE OF COHERENCE



PROSPECT AND REFUGE



BIOPHILIA/ SUSTAINABILITY



RESILIENCE FACTORS

# INTERVENTIONS

## SCALES OF RESILIENCY

HUMAN

BUILDING

INFRASTRUCTURE

Campus Master Plan



SELF EFFICACY



RELAXATION RESPONSE



SENSE OF COHERENCE



PROSPECT AND REFUGE

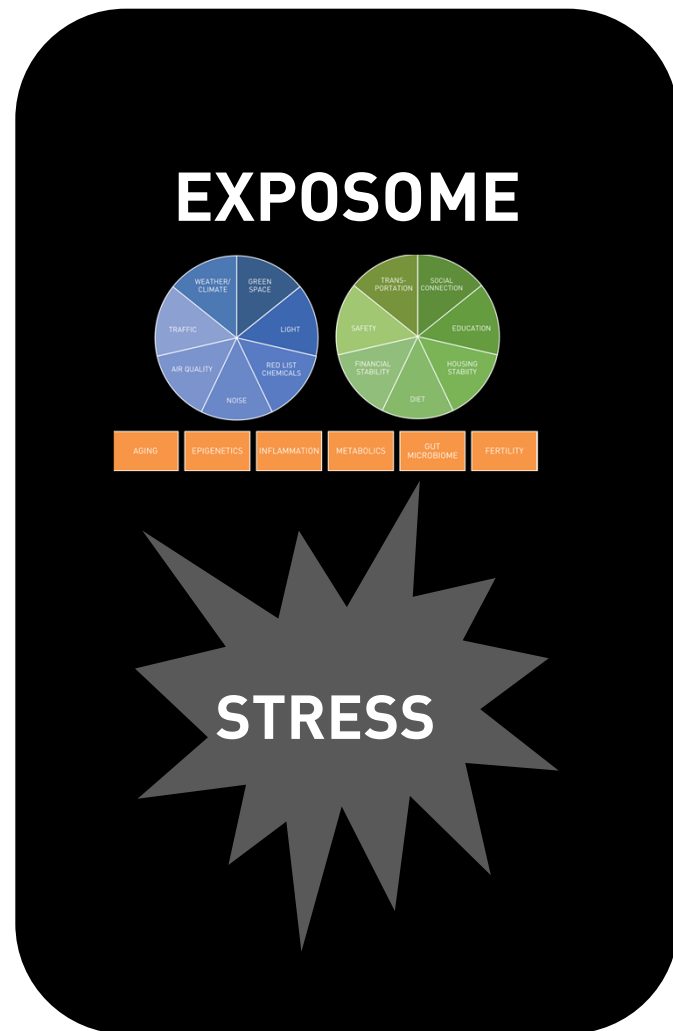


BIOPHILIA/SUSTAINABILITY

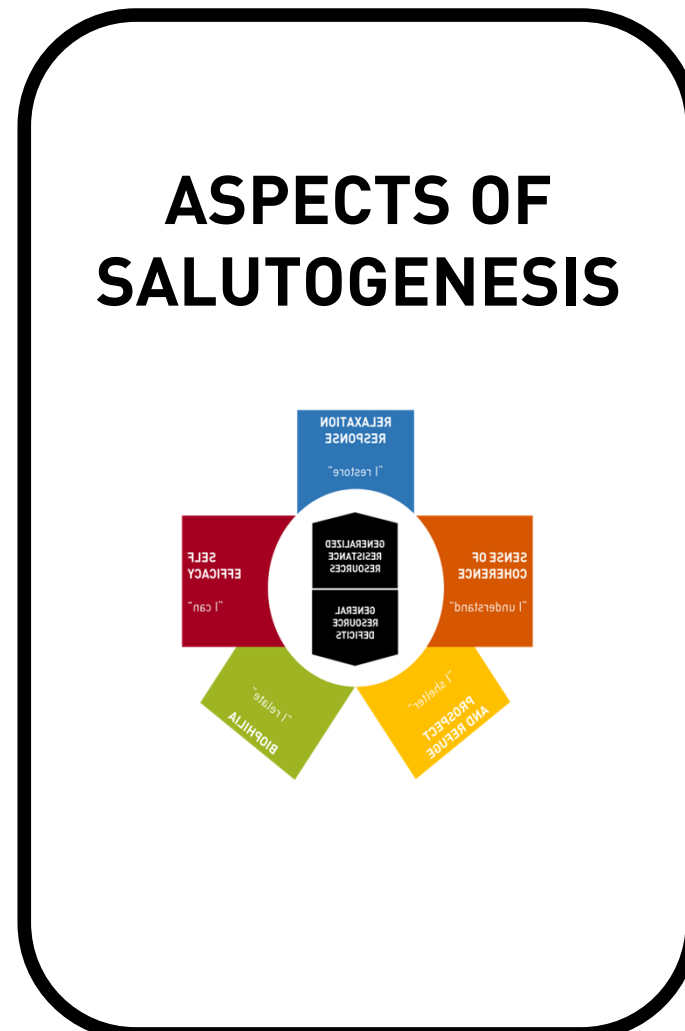


RESILIENCE FACTORS

# PUTTING IT TOGETHER



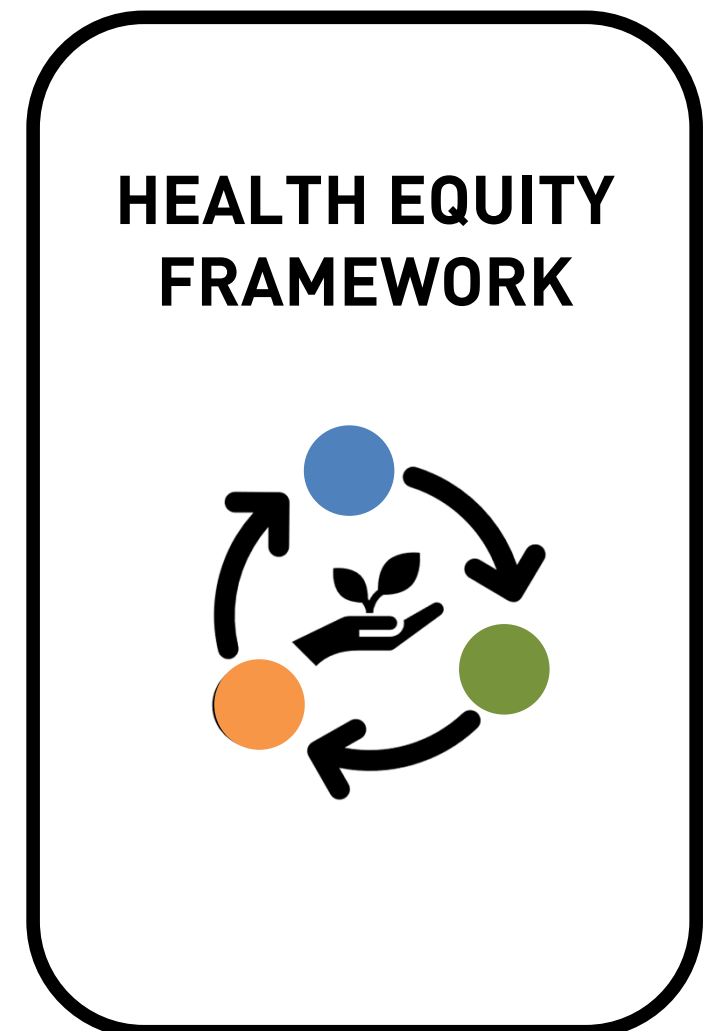
Counter negative external and internal impacts that inequitably cause dis-ease



Using Salutogenic strategies



Expressed at multiple scales of impact



Incorporating an equity lens



# RESOURCES = RESILIENCE

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# HEALTH EQUITY FRAMEWORK

## WELCOMING AND INCLUSIVE

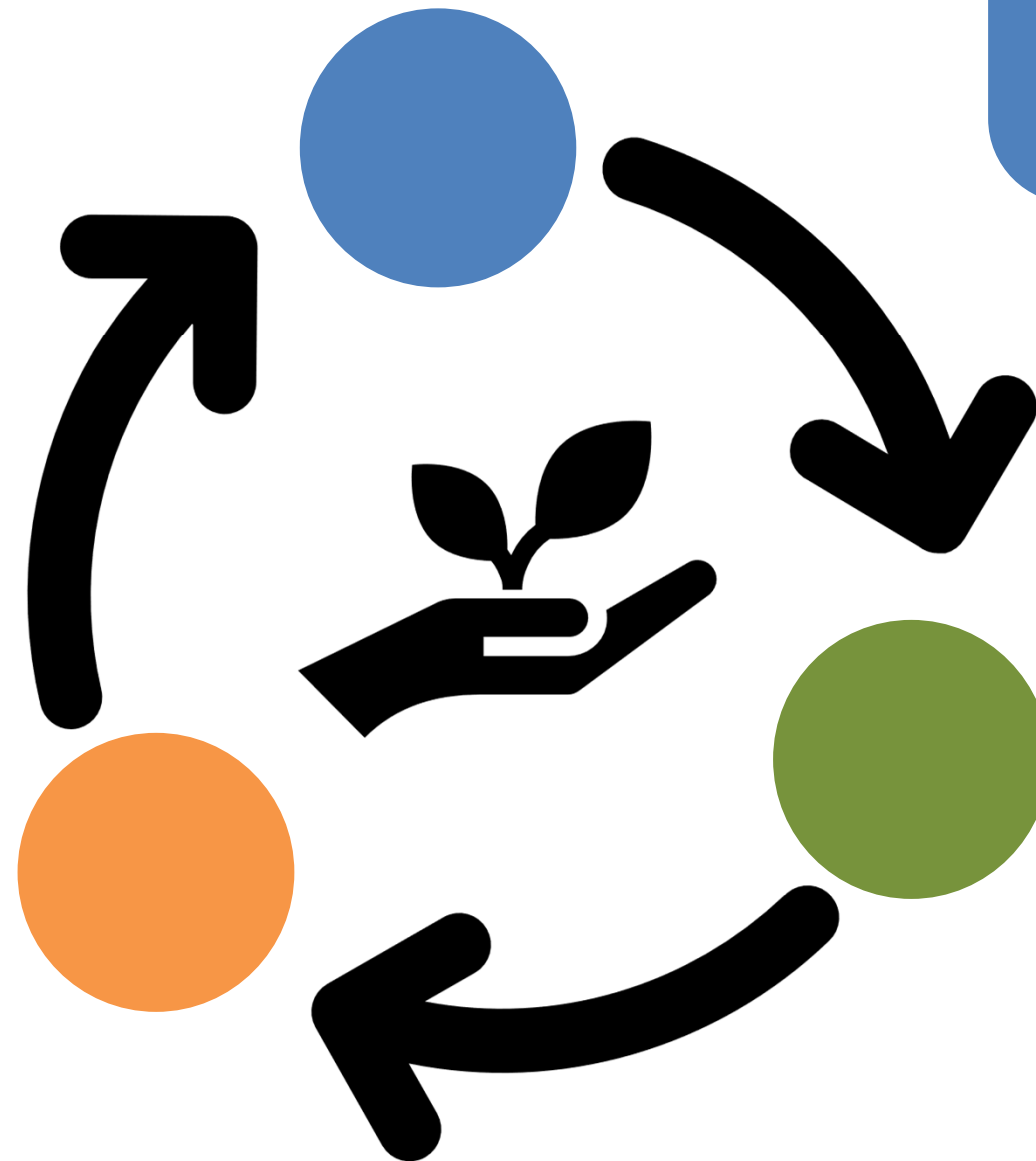
- Accessible
- Safe
- Open

## HEALTH BEYOND BUILDINGS

- Push Care
- Net Positive Community Impacts
- 24 Hour Buildings

## REGENERATIVE

- Energy Efficient
- Equitable Distribution of Resources
- Active Design
- Space for Seclusion and Reflection



# HEALTH BEYOND BUILDINGS

- Push instead of pull to screening/preventative care
  - Wraparound services
- Community net positive impacts
  - Employment
  - Skill building
  - Career modeling
  - Local vendors
  - Strategic partnerships/Health districts
- 24 Hour Buildings
  - What else can it be?
  - Increase space utilization



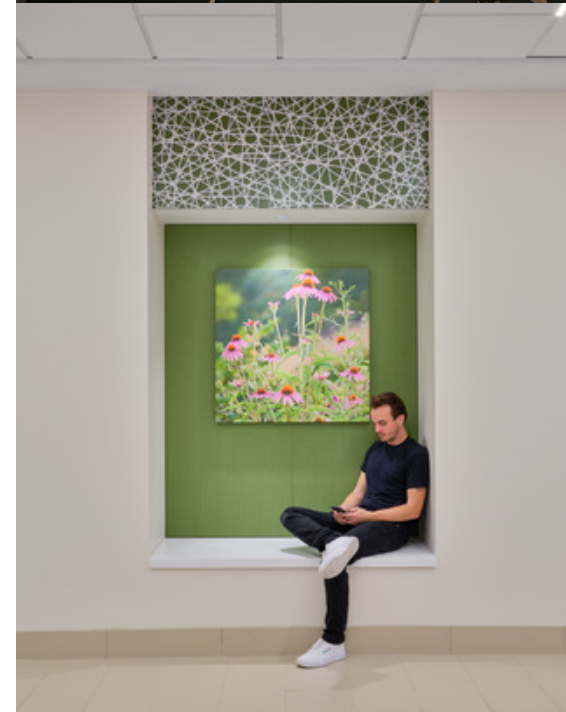
# WELCOMING

- Accessible
  - Bariatric
  - Accessible routes
  - Hearing and vision impaired
  - Neurodiversity
- Safe:
  - Crime prevention through environmental design (CPTED)
  - Psychological Safety
  - Non-toxic
- Open
  - Access to public transportation
  - Bike accessible



# REGENERATIVE

- Energy Efficient
  - Reducing energy consumption
  - Minimize reliance on central grid
  - Building upkeep and system upgrades
  - Optimization of systems
- Equitable distribution of resources
  - Access to daylight
  - Access to nature
  - Well ventilated
- Active design
  - Access to public transportation
  - Bike accessible
- Space for seclusion and reflection
  - Respite space
  - Religious accommodations



# THE RESILIENCE ORG CHART

A SPATIALIZATION OF RIGHTS

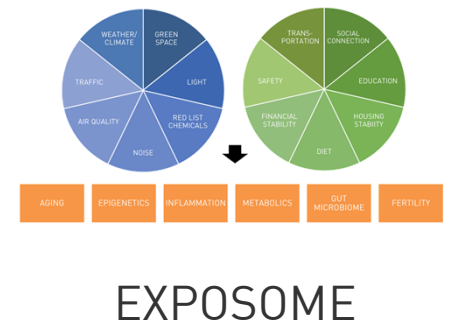


EXISTING FRAMEWORKS



SCALES OF RESILIENCE

RESOURCES TO COPE



HUMAN

BUILDING

INFRASTRUCTURE

# THANK YOU

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