Experiences of Paediatric Healthcare Built Environments among Children with Disabilities and their Families: A Scoping Review

Yu, C.,¹ Wong, E.,¹ Gignac, J.,¹ Walker, M.,¹ Ross, T.^{1,2,3}

1. EPIC Lab, Bloorview Research Institute; 2. Department of Geography & Planning, University of Toronto; 3. Rehabilitation Sciences Institute, University of Toronto

Background

- Paediatric healthcare built environments (e.g., architecture, interior design) are a key factor influencing how children experience care in paediatric settings¹
- Children with disabilities (CWD) may frequently visit healthcare settings;² in turn, their experiences in these spaces are important
- Understanding paediatric built environment experiences and preferences of CWD can help to optimize these spaces and improve quality of care

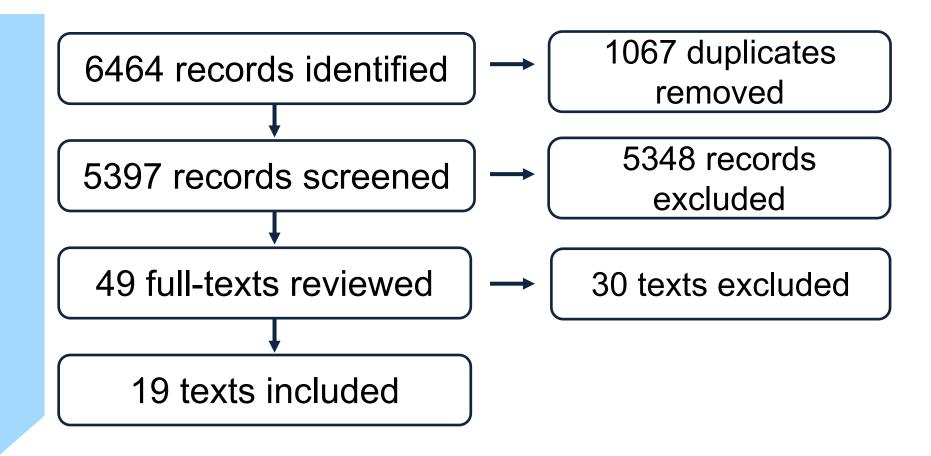
Objective

To explore how paediatric healthcare built environments are experienced among children with disabilities and their families.



Methods

- Employed a scoping review approach³
- 5 databases searched using key terms relating to child, disability, healthcare, and built environment



The designs of paediatric healthcare environments must account for the needs and preferences of children with disabilities relating to privacy, play, shared spaces, and parental presence



Results

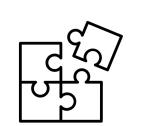
1. Experiences of **playrooms**, **waiting rooms**, and **patient rooms** are most reported in the literature



- 2. Design features supporting **privacy** are important but valued differently by parents and children of all ages
- 3. Age and sensory-friendly **play opportunities** in hospitals (i.e., beyond playrooms) are important to children



- 4. Various **shared spaces** fostering social engagement help children and families cope with hospitalization
- 5. Parental presence is important to children and Parental presence is important to children and should be considered in the designs of paediatric healthcare spaces
- 6. Little to no research has considered how children with developmental disabilities and their families experience healthcare spaces



Conclusion and Next Steps

- Children with disabilities and their families have unique healthcare environment needs and preferences
- Future research is needed to understand:
 - Built environment experiences/preferences of children with developmental disabilities and their families
 - How we can leverage ignored spaces (e.g., hallways) for play, social, and clinical opportunities

Relevance to Holland Bloorview

This work may help to inform designs of current and future Holland Bloorview spaces to ensure they are optimized for the needs of children and families.



Acknowledgements

Thank you to the Ward family for supporting this review. Thank you to Iveta Lewis for supporting the development of this review's search strategy.

References

- Kotzer, A. M., Zacharakis, S. K., Raynolds, M., & Buenning, F. (2011). Evaluation of the Built Environment: Staff and Family Satisfaction Pre- and Post-Occupancy of The Children's Hospital. HERD: Health Environments Research & Design Journal, 4(4), 60-78.
- 2. Newacheck, P. W., & Taylor, W. R. (1992). Childhood Chronic Illness: Prevalence, Severity, and Impact. American Journal of Public Health, 82(3), 364-371.
- 3. Arksey, H., & O'Malley, L. (2005). Scoping Studies: Towards a Methodological Framework. International Journal of Social Research Methodology, 8(1), 19-32.





