**Sustainability | Individual communication**

# IC - (20823) - CODESIGNING HEALTHCARE BUILDINGS FOR PEOPLE WITH PSYCHOLOGICAL DISTRESS: CONSIDERING CONTRIBUTIONS FROM EVERY USER.

Fernanda De Moraes Goulart[1]; Rosaria Ono[1]

1 - Faculdade de Arquitetura e Urbanismo da Universidade de São Paulo

**Background and objectives**

Mental Healthcare facilities should support the patients with physical and cognitive deficiencies and facilitate the work of the caregivers. However, the design process of these spaces rarely includes end-users in decision-making. Some of the reasons are the difficulties of laypeople in understanding architectural blueprints and concisely expressing their impressions about the intended built environment. There is also the bias that the mental health patient supposedly "lacks insights", ultimately leading to the neglect of their voice in co-designing processes. This study explores using the co-creation framework "Participatory prototyping Cycle (PPC)" to accommodate healthcare providers' and patients' opinions in the design process.

**Process and methods (for empirical research)**

Three Psychosocial Care Centers (CAPS) were selected in São Paulo as case-study facilities for this research. The PPC of this study was entitled "Dream CAPS", consisting of three tools/activities: Interviews with illustrated cards, "Wish poems", and a 1:10 scale physical model of a Mental Healthcare Facility. The model is entirely customizable: each group of participants should decide the wall and floor finishings, the type of openings (windows, doors), furniture, and ornaments. Inpatients and healthcare workers participated at the PPC. All activities were audio-recorded, and textual analysis will qualify and categorize the content of conversations using the "Descending Hierarchical Classification" method.

**Main results (or main arguments in the case of critical reviews)**

By using the PCC it was possible to discuss several aspects of the physical environment. Preliminary results indicate that the model proved to be an excellent tool to keep the focus of the conversation onthe topic. However, to be successful, co-designing activities need to be flexible, with greater emphasis placed on listening to end-users.

**Implications for research and practice/policy | Importance and originality of the contribution**

This research contributes to the environmental quality of Mental Healthcare facilities by developing a Codesign framework proper for participatory projects in this context. Codesigning is a promising tool for facilitating communication between users and architects, designing spaces that promote the well-being of patients and caregivers.

**Palavras-chave : Codesign, Mental Healthcare, Environmental Quality, Participation**