ABSTRACT: Human health has always played a vital role in shaping cities’ architecture and urban design. However, its importance has often been overshadowed by other pressing social and economic concerns since we only realise the significance of health when it is no longer taken for granted. This paper presents the findings of a study that aimed to assess the current standing of health in the architectural profession among built environment practitioners and architecture students, with a particular focus on the urban design part of the profession, emphasising the urgent need for greater attention to this critical issue in the field. The research identified three main findings. Firstly, research revealed that developers currently play the most proactive role in promoting health in the built environment. Secondly, the health-improving projects and initiatives are limited only to physical health. Last but not least, a clear definition of health and design guidelines that are currently absent could help address increased interest in health-related design in the future.

KEY WORDS: Urban health, public health, education of architects, urban design practice, healthy city design, Slovakia

Introduction

One of the key global concerns nowadays is the epidemic of non-communicable or lifestyle diseases (Zimmet and Alberti 2006). The lifestyle people lead is influenced by many factors, including their beliefs, economic or social status, and the opportunities
and limitations of their living environment. The contribution of architecture and urban design to unhealthy lifestyles is significant (UN 2017). The particular impact of the built environment on health has been proven by numerous researches, mainly from medical disciplines (Chu, Thorne, and Guite 2004; Roe et al. 2013; Fisher et al. 2017; Galea, Merchant, and Lurie 2020; Yang and Xiang 2021). However, particularly among the built environment professionals, the debates are dedicated to the design of medical facilities. However, the understanding of the general role of health within architecture is still very scarce, especially in the field of urban design (Šimkovičová and Smatanová 2023).

As mentioned by Rice (2019), the inclusion of health in the architectural profession, including training, education, practice, and knowledge, lacks mandatory requirements across responsible institutions and agencies. Therefore, this research aims to contribute to understanding how Slovakia’s architecture and urban design professionals reflect the demanding health problems in their practice with a particular focus on city design.

**Methodology**

The study aimed to identify the role of health in the Slovak architectural community, composed of practitioners as well as students. The combination of these two study samples was elected to provide a comprehensive understanding of the researched topic. Data were collected during the spring of 2023 utilising digital questionnaires and structured interviews.

Digital questionnaires were administered to 151 architecture students from the Faculty of Architecture and Design, Slovak University of Technology in Bratislava. The questionnaire focused on the perception of the issue as well as on the context of education related to health topics.

Built environment practitioners underwent structured interviews based on the interview proforma designed by Urban Design for Mental Health (Journal of UD / MH), and were supplemented by questions defining the Slovak context.

The collected data underwent a synthesis process, followed by a thorough analysis of individual responses, to identify common patterns (Farthing 2016). Based on this analysis, conclusions were formulated to provide meaningful insights.

**Results and discussion**

The key general finding from the research revealed a common denominator: that all respondents consider health to be very important. Actually, 50% of respondents feel pressure from the general public to design for health, getting the topic of health-related design into the spotlight of our profession.
More precisely, the research identified three main particular findings. Firstly, it is developers who currently play the most proactive role in promoting health in the built environment. Secondly, the health-improving projects and initiatives are mainly focused on physical health, and, thirdly, a clear definition of health and the absence of design guidelines are seen as one of the causes of this situation.

**The proactive role of the developers in promoting health in the built environment**

Structured interviews showed that real estate developers in the current building practice put the biggest pressure on the implementation of health-related design. The international companies that are on the Slovak construction market use health-related certification design tools to ensure the high quality of their projects. In that way, they are bringing in real measures focused on a healthier environment, even though mainly in the field of architecture and interior design. Research showed that there is also some pressure from non-governmental organisations focusing on climate change and environmental dangers.

![Figure 1 Designing for health pressured by: (Source: author’s graphic)](image)

**Health-improving projects focused on physical health**

Slovak practitioners consider health in their projects mostly when it comes to designing for users from particular age groups or users with disabilities. However, the research discovered that no specific activities or knowledge have been developed to address mental health concerns in the built environment. Upon further questioning, most of the respondents talked about the growing interest in high-quality public spaces and parks as initiations supporting adequate conditions for people’s well-being in the cities. Many emphasised the need for technical standards to ensure adequate sun and light insulation, mandatory distances between buildings and the required amount of greenery. Student’s responses were similar, with most seeing adherence to technical standards as the key to ensuring good mental health.
Lack of clear definition of health and absence of design guidelines

There exists a current dearth of expert guidelines in the field that would comprehensively define health for the precise needs of architectural and urban design practices. The initial phase of the interviews showed an unclear understanding of health as a term. When the topic was focused particularly on mental health, developers filled the dearth with certification systems, even though the projects are concentrated mostly on the work environment. The research revealed that even if there are such parameters, they often remain underutilised and overlooked in both practice and education. Among students, the topic is linked to the technical aspects of the built environment, emphasising insulation norms and green technologies, while the majority of professionals from practice were not able to identify any.

Conclusion

Architects and urban designers urgently need to address the declining state of human health. While acute healthcare interventions are important, a lack of preventative
measures hampers positive outcomes. Evidence shows the crucial role played by the architectural industry in health outcomes.

Research indicates significant deficiencies in the Slovak architectural profession. A knowledge gap between professionals and students highlights the need to integrate health into education and training. Private real estate development companies are taking initial steps, but clear and comprehensive design guidelines are needed to promote health-related design.

References


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