Research & innovation approaches in architecture & urban design

Within the three guiding topics, the ARCH19 ‘Building for better health’ calls for papers that have a focus on one of the three research approaches related to architecture and urban design:

A. research into the design process
B. the impact of innovation on the physical design
C. evaluation of the design’s quality

A) research into architecture & urban design processes in care & health

Papers with theoretical perspective towards evidence-based design as design process and how to connect research in design processes to co-design approaches. Main topics in this category involves quality in briefing, design and planning processes, user involvement, co-design and the impact on the architectural esthetical quality of the built environment in healthcare.

B) innovation in care & health and their impact on architecture & urban design

Many technological innovations for care & health have also consequences for the design of the physical environment, but the physical environment has also impact on the practical applicability and usability of these innovations. Innovations in Information and Communication Technology, robotics, new treatment possibilities from medicine but also innovative solutions for health promoting behaviour or new service models for taking care of patients in their own houses and neighbourhoods change the demands on architecture, the management of the existing building stock for healthcare services and urban planning of our cities, villages and neighbourhoods.

C) evaluation of the quality of architecture & urban design for care & health

Papers with a focus on the quality of architectural and urban design and the way this quality can be evaluated and assessed. Methods and tools for evaluating buildings in use to gather user experience from existing buildings as a basis for improving them, as input when designing new buildings, or as a reference when choosing new premises. Of special interest is the impact of the design on the outcome for people and the impact of the design on the organisation of the care production process, workflow and optimisation of resources.