

Design specialty

# Influx in healthcare and senior living means big opportunities for architects

By Kathleen M. O'Donnell, May 14, 2018



YOUNG DESIGNERS IN PERKINS EASTMAN'S PITTSBURGH OFFICE IDENTIFY SOLUTIONS FOR A SENIOR LIVING COMMUNITY.

The need for senior living and healthcare facilities is greater than ever with an aging population and changing needs in health

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## services. How can architects and emerging professionals rise to the occasion?

Many architects are drawn to practice because something inspired them very early in life. Choosing an area of focus in their career—whether it be a practice area or functional expertise—can be a more difficult task.

For emerging professional Max Winters, Assoc. AIA, specializing in senior living architecture wasn't a choice so much as a calling. He knew he wanted to design for the aging when he witnessed his grandparents transition into new living arrangements. "I saw a link between their experiences—both positive and negative—and the environments they were taking place in," he says. "It was something I felt I could address."

That calling came at just the right time. In the next four decades, the number of Americans over age 65 **will double**, rising from 45 million to 98 million, and account for approximately one quarter of the total US population. There are currently **about 45,000** residential care communities and nursing homes in the US, but to accommodate the growing senior population, they may also have to double in number by 2060.

The aging population, combined with general population growth, is affecting another practice area as well: healthcare. While the number of registered US hospitals is decreasing slightly, individuals admitted for care increased by **almost 100,000** in 2016. Different types of healthcare facilities from the traditional hospital are on the horizon to address changes in health services and upticks in patient numbers.

All this points to a growing need for a strong talent pool in senior living and healthcare practice. But architects specializing in those areas don't always see enthusiasm from younger practitioners. "Young professionals are really looking at all the different things they can do. It's a bit of a challenge to get somebody who's at an earlier point in their career to see senior living as something they could plant their flag in," says Claire Dickey, AIA, associate at Perkins Eastman in Washington, DC, and AIA **Design for Aging** advisory board member.

Winters, who also works with Perkins Eastman out of the firm's Pittsburgh office, concurs. "Good architecture requires empathy for the people you're designing for," he says. "It's a lot harder for people at the earlier stage of their career to have a strong connection to the experience of aging. Some other practice areas are easier for them to sink their teeth into."

"Good architecture requires empathy for the people you're designing for." -Max Winters, Assoc. AIA

Senior living and healthcare practice have similar attributes from a functional standpoint, but in the workforce, there is more curiosity about the latter. “I haven’t necessarily seen a lot of people who are interested in senior living as its own entity. Most of the time I’m seeing people interested in healthcare design and senior living might play into that in some capacity,” Dickey says.

Tushar Gupta, AIA, came to his firm, EYP, through the Tradewell Fellowship, a program targeting young professionals seeking careers in healthcare architecture. Seventeen years later, he is the lead healthcare designer for EYP’s Houston office and serves as president-elect of AIA’s [Academy of Architecture for Health](#). He believes healthcare is getting more attention in part because universities are dedicating curricula to medical planning and design. “I see a positive trend towards people getting interested in healthcare,” says Gupta. “More schools are offering certificates and opportunities, and that’s very promising.”

A recent graduate of such a program at Clemson University, Kirsten Staloch, Assoc. AIA, thinks it’s definitely still a challenge to get young people interested in her field. “Some have embraced healthcare, and some have rejected it because of this idea that it’s standardized and institutional – that it’s not broadening what they thought architecture was,” she says, adding that her peers at HGA in Minneapolis who enjoy working in healthcare often identify with the aspects of wellness and compassion involved.

## **The value propositions**

Not every emerging professional will have a strong personal connection to either of these building types, but healthcare and senior living practice come with many unique enticements.

Gupta and Dickey have been designing in their respective areas for more than 15 years, and both agree that the variety of work is one of the best parts. “Senior living design is a really wide sector. People think it is just nursing homes, but there are a number of types of facilities,” says Dickey. “You get an opportunity to branch out and dip your toes into design that other practice areas are doing like education or hospitality.”

Because the practice area or studio is usually on the smaller side within a firm, senior living specialists also get to touch more phases of the process. “You get to do everything under the umbrella of one project. That keeps it fresh,” says Dickey.

For Gupta, a large hospital system is akin to a city. It has aspects that span all spaces within a community including workplace, hospitality, religion, and education. “Healthcare touches upon all the practices you see. It’s all-encompassing,” he says. “For me personally, that’s why it’s so gratifying. When I work on a healthcare project, I get to work on all these aspects of architecture.”

Variety is key for satisfying a young mind, and Staloch enjoys the challenge. “Every floor of a hospital is different. There are different departments and needs,” she says. “I love that I get to interact with all these stakeholders every day. There are so many complications and so much need in these spaces. It’s exciting to figure out what the right solution is.”

Professional advancement comes quicker in senior living practice, thanks to the small talent pool and client-centered nature of the work. “There is definitely a lot of opportunity to shine in senior living design because people aren’t banging down the door to get involved with it,” Dickey says. And Winters has taken full advantage. Though he has only been out of school for three years, he works directly with clients, presents at national conferences, and is involved with master and strategic planning. “I truly don’t believe I would be doing any of that in a different practice area,” he says.

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## Meeting the boom

According to the most recent [AIA Firm Survey Report](#), approximately 11 percent of US architecture firm billings are attributed to healthcare and another 11 percent cover multifamily residential, the category many senior living facilities fall under. The report reflects steady demand for healthcare and multifamily buildings over the last few years.

Firms will require motivated talent in these areas to keep up with the need for these facilities and sustain their own futures. Late-career senior living and healthcare practitioners are looking at the younger generation to take over, and seizing those openings may pay dividends for advancement at a firm. Of his colleagues, Winters says, “They are really willing to bring people in, mentor them, and pass on this expertise. Somebody who knows what they’re doing and is passionate about senior living has a huge leg up in terms of their career.”

Job security is an encouraging reason to pursue these specializations. As the statistics indicate, the demand for senior living facilities and architects’ knowledge is very real and developers and property managers are just starting to notice the market boom. “They’re looking for architects that have expertise and can get them up to speed,” says Winters.

The need for access to quality healthcare facilities won’t be going away either. A shift toward outpatient care is requiring an upswing in construction of newer models like ambulatory care facilities. “There will always be a need for wellness and health, but how a person is a consumer for health is changing,” says Staloch. While it’s unclear exactly what the changes implicate, trauma, specialty medical services, and research will be carried out in hospitals for the foreseeable future. “I don’t believe hospitals are going to shrink,” says Gupta. “There is going to be a push for outpatient care, but at the same time there’s going to be growth at big hospitals and academic teaching facilities where research is happening and the future of medicine evolves.”

Advancements and changes in these buildings types speak to the desires of today's young architects, who are notably interested in exploring new technologies and design excellence. About her fellow emerging professionals' misconceptions, Staloch says, "The apprehension is that healthcare doesn't have quality design and that frustrates me. There are beautiful buildings in the world that are hospitals and clinics. And they don't give it a chance." To design on the cutting edge is somewhat of an untapped frontier in healthcare, according to Gupta. "Healthcare has the greatest need for amazing designers. There is still space for creativity and good design. We need people to lead the way," he says.

"Healthcare has the greatest need for amazing designers...we need people to lead the way." -Tushar Gupta, AIA

Within senior living, a movement toward community-based and intergenerational design is catching fire, aligning with the millennial generation's demonstrated interest in collective experiences and social impact. "I've spoken to a number of young professionals and across the board, they want to do work that makes a difference. They are really looking for ways to help humanity," says Dickey.

Senior living is starting to be entrenched in cities, to the benefit of the public and architects alike. "Not only are we impacting the people in the senior living community," Dickey adds, "But we're also having an opportunity to impact development of cities and how society functions as a whole."

Contributing to something bigger than themselves—connecting with people and creating spaces that enhance their lives—this is the most compelling reason for architects to pursue senior living and healthcare. "The most rewarding part is interacting with the residents for whom we design. You can really feel the impact you've had on people lives and these communities that really need change," says Winters. "It makes the headaches and intricacies of the architectural process worth it."

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