

A Pattern Language for Better Health



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A Pattern Language for Better Health

1 Civic Intelligence



An effective and principled civic intelligence is necessary to help humankind deal collectively with its collective challenges. People need to develop theories, models and tools of civic intelligence that can help integrate thought and action more effectively. (Douglas Schuler)

The challenges within the U.S. Health Care System are numerous and widespread. In 2008 almost 47 million Americans were uninsured, and the U.S. ranks 36th in the world for overall health status. Though the passage of the Patient Protection and Affordable Care Act was a step in the right direction, legislation itself does little to fix a fragmented delivery system or mitigate the deep-seeded health disparities among minorities. Ordinary citizens on the front lines of these problems must work collectively with health care providers, stakeholders, and representatives in order to address these challenges. A shared vision of better health for everyone must be realized, and the civic good placed above individual interests.

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3 The Good Life



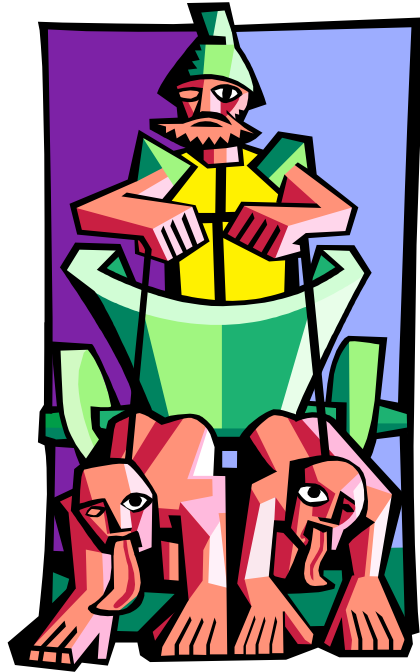
A revitalization of the idea of the "good life" should reinvigorate the ancient appeal of civic humanism, or "reverent humanism," that can embrace human potential...the development of such an ideal should be...among groups dedicated to progressive social change..."living the change you want" should become an essential part of the mission of all such groups. (Gary Chapman)

Better Health is a cornerstone of the shared vision of the "good life." Society must lend itself to the compassion and "civic humanism" necessary for all persons to realize that being healthy is a privilege, not a right; and without it human potential is compromised.

Better Health is The Good Life.

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4 Social Dominance Attenuation



A society that genuinely wants to reduce its own inequity is obviously more likely to actually adopt new policies and perspectives over the long haul than one who begrudges every dime spend on schools for poor people or health care for the elderly and the foreign-born. (Douglas Schuler)

This pattern directly speaks to the disparities in health care. According to Michael Marmot, author of *The Status Syndrome*, there is a social gradient in health; in other words, the higher your status, the better your health.

“...when traveling...12 miles on the Wash., DC, Metro from downtown to Montgomery Co., Maryland, life expectancy of the local population...rises about a year and a half for each mile traveled. Poor black men at one end of the journey have a life expectancy of 57 years, and rich white men at the other end have a life expectancy of 76.7 years.”

Health policy must be directed at reducing health inequities.

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5 Health as a Universal Right



Humankind is faced with the massive problem of declining public health. To be successful it will need to redirect its resources from activities that exacerbate the crisis to ones that overcome it. (Douglas Schuler)

Without the belief that being healthy is a right, not a privilege, ordinary citizens will continue to be the victims of a health care system that is designed to further widen economic and social divisions. The emphasis on emergent, acute care detracts resources from preventative and wellness-based care that solidifies long-term, patient-centered health and wellbeing. All citizens are entitled to living long, productive, and healthy lives—resources must be reallocated from siloed funding that reinforces fragmentation, to integrated care and services that helps to promote the right to healthy environments, bodies and minds.

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9 Matrifocal Orientation



Regardless of whether a group consists of men or women or both, having a matrifocal orientation means that people ask, “How is the problem we perceive exacerbated by patriarchy, and how has our way of responding to it been limited by patriarchal thinking?” Resisting androcentric norms by putting women’s perspectives in the center, rather than the periphery, of social debates is a first step toward undermining patriarchy and the social ills it perpetuates. (Lori Blewett)

Though this pattern speaks to androcentric society, it is important to note that sexism extends well beyond the relationship between male and female—bell Hooks’ feminist theory discusses the importance of ending sexist oppression, with sexism defined as a relationship in which there is dominance and submission. There is perhaps no better example than male versus female in which this idea is exemplified; however, on a systematic level, the health care system is another construct that reinforces the oppressive relationship between profiteer and patient. This oppression must be dismantled by bringing marginalized perspectives to the center of discussion.

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13 Back to the Roots



Humankind has developed incredibly complex intellectual, cultural, physical, and technological artifacts over the years. This has put a wide chasm between our present status and our "roots" where we all were closer to nature, closer to the source and sustenance of our lives. (Douglas Schuler)

We live in a society where health care quantity trumps quality, harsh chemicals are prescribed as antidote to the latest condition, and naturopathic remedies are viewed as outlandish, anti-American, and even criminal. Instead of assuming a mental health problem must be solved by the latest antidepressant, physicians and other providers must be encouraged and rewarded for looking first at other solutions: diet, exercise, work conditions, and extracurricular activities, to name a few. Health is not merely the mending of bones or the stitching of wounds—it is an individual's and society's ongoing relationship with their surroundings.

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23 Anti-Racism



Only by recognizing racism (personal and institutional) and actively challenging it, can we hope to overcome the racial divisions that inhibit effective problem solving and weaken progressive movements. An anti-racist orientation to social change can help organizations successfully challenge policies and practices that mask power, exploitation, and resource grabbing behind the guise of liberal individualism and national interests. (Lori Blewett)

Race is a primary factor in widening health care disparities, evidenced by the following statistics:

- From 2000-2006, 60% of quality of care and 64% of access to care measures stayed the same or worsened for minority populations;
- 43% of African Americans have at least one chronic condition;
- From 2003-2005, non-white populations accounted for 72 percent of diabetes-related deaths in Washington State.

An anti-racist orientation to change within our health care system is paramount for reducing health care disparities.

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27 Big Picture Health Information



Health information cannot focus solely on individual change. Many detriments to health cannot be eradicated without changes to the physical and social world that people inhabit. (Jenny Epstein)

Health is all around us, in everything that we do, every day of our lives. It is the homes we live in, our workplace, the sidewalks we traverse, the availability of health resources in communities, and the efforts we make to improve the conditions in which we live our lives. Health disparities are linked to social and economic inequalities—the very life expectancy of a person is often determined by his or her race, and obesity is more largely seen in communities with fewer grocery stores and more cheap fast food venues. Without the “Big Picture,” efforts to improve overall health status are futile and often appear as “blips” or temporary improvements. Groups addressing detriments to health must expand their scope of examination to include other determinants such as environment and social and economic status.

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28 Whole Cost



Through the clothes we buy, the food we eat, the cars we drive, the way we dispose of our trash or sewage, where and how we live, and how we make a living or recreate, people everyday and everywhere make impacts — large and small, good and bad — on the world. (Douglas Schuler)

The historic emphasis on acute, emergent health care has allowed patients and providers alike to be “in the moment” rather than considering prevention and wellness. A fleeting comment to drop a few pounds, or watch the sugar intake, is a far cry from the ongoing relationship between doctor and patient to ensure long-term health. Holistic, preventative, and wellness-centered health care takes into account the Whole Cost of behaviors or circumstances that are detrimental to individual and public health. On a larger scale, consideration of having millions of uninsured must go beyond self-interest; the whole cost is a reality in which those without health insurance are the most expensive patients in the health care system.

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29 Indicators



Citizens need to construct community and civic indicators, publish them, discuss them, measure them, publicize them and develop policy and projects that address them. (Douglas Schuler)

Public health and personal health issues are realized through indicators—a temperature being taken, and influx of flu patients in a physician practice, or a particular neighborhood having higher instances of chronic disease than the surrounding areas. Without these indicators, citizens often feel uninformed and helpless when addressing their health and the health of their community.

Many public health departments have adopted a “Health Report Card” that summarizes the health status of their county. Information such as mortality and chronic disease rates, teen pregnancy numbers, public safety arrests, and environmental hazards is reported and published for the community. Encouraging this practice across counties, states, and even the U.S. makes health information available to ordinary citizens, thereby enabling them to actively participate in problem-solving efforts.

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30 Public Agenda



We need to think about what belongs on the public agenda and what we can do to put it there and keep it there. This may mean working in opposition to — and in cooperation with — existing media systems. It must certainly involve developing diverse and specialized "public agendas"...
(Douglas Schuler)

The health of a community and its citizens should be a permanent fixture on the public agenda, or be a specialized public agenda. Improved health, both public and individual, is not an end result; but rather an ongoing journey that addresses the challenges of that point in time. There will never be a perfect health care system, or a society in which all of its citizens are perfectly healthy without disease or disparities. Health must always be a priority at the forefront of any public agenda.

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32 Big Tent for Social Change



Bringing groups together in a “big tent” where a multiplicity of perspectives is encouraged allows more opportunities for discussion of solutions to social problems and sharing of ideas that help other groups working on the same or similar issues. (Mary Reister and Shari McCarthy)

Varying agendas, lack of shared vision, competing interests, and independent efforts—these all contribute to a severely fragmented health care system in which those without the tools to navigate it will fall through the cracks. A U.S. Health Social Forum is warranted, bringing together stakeholders, lawmakers, patients, providers, and social progressives to address the chasms that prevent access to and quality of care.

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37 Citizen Science



Use and develop means of collaboration between science and communities. People benefit by bringing both scientific knowledge and local knowledge to bear on the problems that they experience. Citizen groups, policymakers and professional scientists all gain from proven ways to do this. (Stewart Dutfield)

This pattern is highly relevant to the betterment of an individual's or community's health. Without questioning the environment around you or collecting and reporting data attributed to one's health, vital statistics that make up health status are incomplete. Whether it's conducting a mold test in your home or reporting the spread of chicken pox—citizens act as scientists in not only creating the health picture, but also the avenue for addressing health problems.

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39 Techno-Criticism

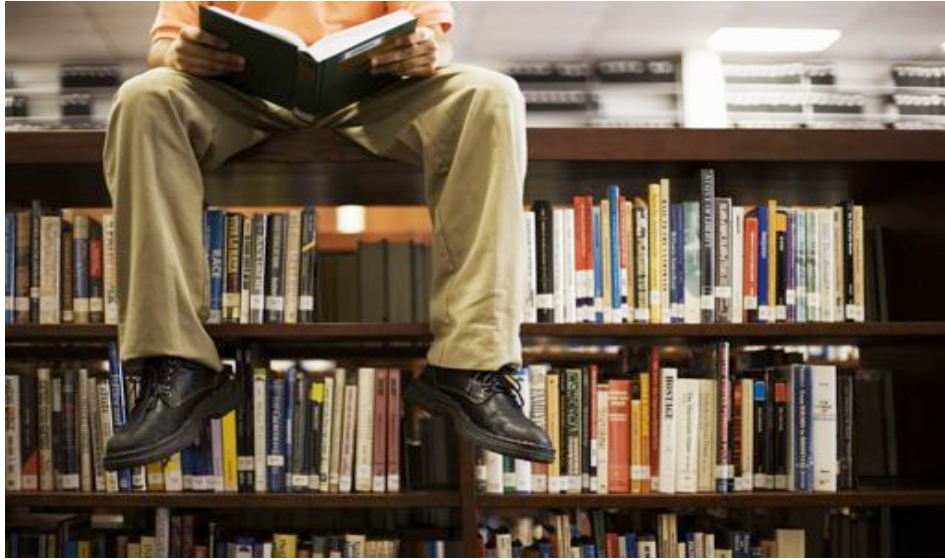


Technology often alters power relations between people, generally amplifying the power for some and not for others...People need to understand or at least anticipate to some degree not only the effects of specific technological artifacts...but the socio-technological systems that they support or destabilize. (Douglas Schuler)

In the context of better health, this pattern speaks to the reliance of our health care system on the latest, greatest, and (usually) most expensive technologies. Furthermore, it is also important to consider the access to these technologies, even when needed, that disparate communities may or may not have due to social status. In order to cut health care costs, re-builders of the health care system must determine which technologies are essential, and which are frivolous. Additionally, these essential technologies must be made available to all providers and patients in order to reduce health access disparities.

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45 Open Action and Research Network

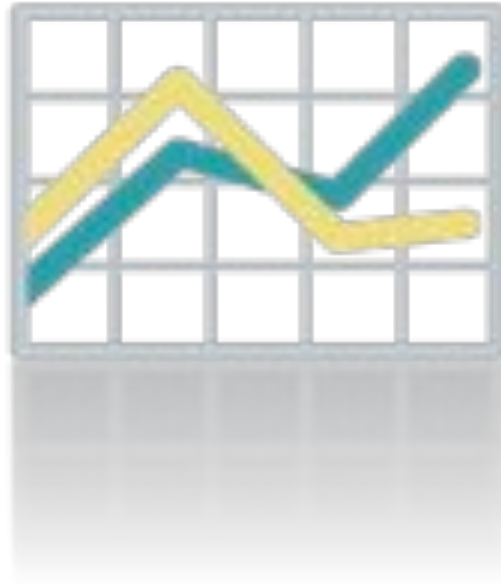


Jazz Ensemble or “Herding Cats?” (Douglas Schuler)

There are hundreds of organizations and a multitude of individuals engaged in solving some of the most complex problems within our health care systems. However, since the problems are widely known, it can be assumed that similar questions are being asked across these organizations, similar conversations are ensuing, and resources are being allocated to address them. It’s the HOW that can vary starkly, and this information must be captured and shared. A network that captures this knowledge and methodologies would be a highly useful tool for large scale collaborative effort towards addressing the problems in the health care system.

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46 Alternative Progress Indices



Alternative indexes like the Genuine Progress Indicator that include natural and human capital can illuminate our world on the real picture of human well being that can be obfuscated by traditional economic indexes. (Burl Humana and Richard Reiss)

The recent health care reform debate focused primarily on the rising cost of health care and how to slow it down. But does a more cost-effective system necessarily mean that people are receiving better care? Does it mean they are healthier? Though the evidence is often anecdotal, it is imperative that health care data not only express success and/or failure in dollars and cents; it must also capture how we are improving the quality of care. For instance, have health care disparities increased or decreased? Are there less instances of chronic disease? Childhood obesity? Analyzing the cost of health care is only part of puzzle; how patients are faring within the system is a flesh and blood measure of success.

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47 Meaningful Maps



Create a map that displays the information you care about in the area where you are working. Design easily readable icons and visual features to make the map interesting to look at, and the facts easy to see. (Andy Dearden and Scot Fletcher)

If people don't know where health resources are, then how can they be used? This is especially important for groups marginalized by economic status, education, and language. Maps are tools that are easily read and interpreted, and can be produced for little cost. Mapping where local food banks, shelters, clinics, and other health providers are located will help connect people to the care and services they need.

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54 Mutual Help Medical Websites



People suffering from chronic medical conditions need both information about their condition and the support of others who share their problems...The Internet allows us to become content providers as well as users. (Andy Dearden and Patricia Radin)

All of the scientific data in the world could never describe how it “feels” to live with cancer. Medical journals don’t capture the emotional and mental struggles of chronic disease, the frontlines reality of losing one’s health insurance, or the little known home remedy that alleviates pain. With the advent of the internet, an opportunity for receivers to become transmitters came to light, and it has yet to be realized to its potential. Online communities have the power to disseminate vital information, build solidarity, and heal.

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Wisdom Discovery



Local and global communities are faced with complex problems, requiring innovative solutions from out-of-the-box thinkers and agents of change. Pockets of "positive deviants" exist in communities large and small, and are already employing uncommon tactics to mitigate the complexities in every spoke of the social strata, and with great success. However, because positive deviants inhabit the far right tail of the performance curve (less than 2 percent of the population), they tend to keep their unorthodox behaviors sheltered from the general population. In order to capture and replicate knowledge that could prove to be revolutionary, these outliers must be identified and, a "discovery" process administered to harness what the rest of us don't know.

Fixing the health care system means surfacing innovative ideas. The Wisdom Discovery process would capture this innovation and knowledge that might have been otherwise unrealized in a more traditional setting.

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Health Safety-Net Councils



Fragmentation, the lack of resources, and a growing need for social health services make the prospect of any individual group or organization attempting to mitigate these circumstances an overwhelming and insurmountable challenge. In order to devise and deploy methods to stabilize a community's health safety-net, leadership from hospitals, physician groups, public health, mental health, and other community-based health organizations must work collaboratively and with intent to maximize community benefit. Health safety-net councils within large and small communities will reveal available health resources, and create opportunity spaces for innovative solutions and collaborative decision making to address the health care needs of vulnerable populations and bridge the gaps of a fragmented health care delivery system.

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Collaborative Care Networks



Health care capacity is inadequate for vulnerable populations; the number of unemployed continues to grow; hospitals are overcrowded with inappropriate Emergency Department (ED) use; and patient care is severely fragmented. While there are several health-related programs in communities aimed at the disadvantaged, operational and administrative efficiencies are mediocre at best, thereby hindering the patient care coordination essential for reinforcing the health care safety net in volatile economic, political and social environments. Collaborative Care Networks provide the linkages between various community-based health and social service programs and projects, helping to identify and manage the most complex and high-risk patients that typically utilize health care services at disproportionately higher rates.

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Wraparound



Youth who develop the severe behavioral problems may endanger their own safety and that of their families. Traditional individual therapy can and frequently does fail these young people, who are at risk of losing home and community connection. Wraparound is a longitudinal process, invoking the connection between an entire network of professional and personal supports and a youth with severe behavioral and emotional problems. The goal is to make it possible for a youth at risk of losing their home or being incarcerated to remain in their homes and communities, developing the strong and positive relationships that they need to become healthy and engaged adults. Wraparound has succeeded in many cases where a more traditional approach has failed, allowing the wounded/damaged youth to heal under the influence of a protective network.

Although it is currently only applied to youth, the wraparound process has potential to be helpful for others who are severely ill, or at risk of losing their health and wellbeing, including isolated seniors or mothers of young children. (Nancy Anderson)

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Geomedicine



Today, medical records contain information primarily about genetics and lifestyle choices. Location-based factors, such as growing up in an industrial town, are not collected as part of the patient medical history. Information about where a patient has lived his/her life could provide very good indicators about overall health tendencies and risks.

Geography should be a part of a patient's medical history. Currently, doctors ask for information regarding genetics (e.g., history of breast cancer, mental disorder, etc.) and lifestyle choices (e.g. exercise, diet, etc.). Having historical information about where one has lived can help create a more comprehensive picture of overall health, which in turn could help better define preventative actions one could take to ensure a more healthy future. (Heather Glock)

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74 Positive Health Information



The style of language and the content of information are very important in how information makes people perceive the world. Authors in many fields have noted patterns of communication that create distrust and enforce dependency by emphasizing danger from external, uncontrollable forces. If people have a sense of helplessness in the face of this threat, they do not act upon their own feelings and perceptions.

Health information should emphasize the idea that people are inherently healthy. It must inspire trust in the body's ability to heal itself, once a healthy path has been taken. (Jenny Epstein)

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78 Grassroots Public Policy Development



Ironically, public policy development is very unpublic. It's often silent, invisible, and developed "behind the scene." This results in poor public policy that favors narrow interests and blocks progress. As power and wealth become more concentrated, wealthy people and institutions become more and more dominant in the policy arena. When that happens, local and marginalized voices are not heard; people feel disempowered and disengage further from the political process. (Douglas Schuler and Michael Maranda)

Health policy should reflect the voices of health care consumers and stakeholders alike, especially all along the spectrum of economic and social status. Major changes to health care typically impact the most vulnerable in the system; therefore, their voices should be amplified in policy discussions and decision-making.

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True Pro Family Policies



Women supposedly have a choice to keep or terminate pregnancies. But do we really? Our society is structured in ways which promote male-oriented policies. These structures do not allow pregnancies to be anything other than career inhibiting, economically arresting, and eliminating of a women's ability to continue or complete her education. It is time to implement approaches which encourage women to pursue pregnancy, should they desire it. These programs include: paid maternity leave; reduced costs for pregnancy, natal, and toddler medical care; reduced costs for childcare; safer and more varied childcare options programs which realistically allow for women to pursue their education while the parent of a young child or infant; encouraging adoption as an option for pregnant individuals and for individuals wishing to become parents; encouraging the placement and support of foster children; and when possible, encouraging the involvement of fathers and extended family in early childcare. (Hannah Moats and Jerome Wilen)

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Low-Tech Medical Care



Many people in the U.S. do not have health insurance. They need health information and an approach to taking care of themselves that is low tech, affordable and also brings the social causes of illness into the discussion of health.

Lack of access to medical care and a growing incidence of chronic, non-infectious diseases affects a significant segment of the population in the US. High tech medical treatments, which help with curing or treating symptoms rather than the cause, are not affordable for this population. Information is needed that focuses on prevention, is pragmatic and easily applicable. (Jenny Epstein)

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Health Promotion through Urban Design



Not only can cities make you sick, there are many ways that cities can actually help make people healthy. We should adopt the approaches that we know have value and continue to develop, test, and disseminate new ones. (Douglas Schuler)

Mason County, Washington has integrated healthy developments into their “Comprehensive Plan” which is typically reserved for land use. Walking trails have been designed in conjunction with other land development prospects, and is therefore an excellent example of this pattern.

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83 Voices of the Unheard



Despite the significant effort and thought that goes into decision making and design, bad decisions and designs are frequently conceived and implemented primarily because a critical and relevant perspective was not brought to bear. This is especially true if the missing perspective represents that of someone who holds a stake in the outcome. (John Thomas)

Economic status, social standing, and language barriers inhibit the voices of some of the most vulnerable health care consumers to be heard. Though it is unreasonable to assume that all individuals could be involved in decision-making processes, the needs and wants of the more marginalized populations should always be represented. Storytelling and indicators are great tools through which this representation could happen.

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85 Civic Capabilities



Peoples can often find the path to social and economic empowerment blocked to them due to any number of circumstances whether they be lack of literacy and information, limited access to health care, a low-level of durable assets, political marginalization and so forth. (Justin Smith)

Individuals and communities are full of unique ideas and abilities. Harnessing these is critical to shaping the health care system to be that which is most beneficial. This pattern also speaks to the expansion of freedoms such as the right to better health, and access to quality health care.

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87 Value Sensitive Design



Through its theory and methods, Value Sensitive Design asks that we extend the traditional criteria (e.g., reliability, correctness) by which we judge the quality of systems to include those of human values. (Baty Friedman)

If you asked any person on the street if gouging the public of hard-earned money was an American value, you might get several sarcastic affirmative responses. But in reality, it's not a human value. Human values are also rooted in basic human rights—the right to exist without fear of harm is a value that we hold dear and often find compromised, yet it is still valued. This applies to a person's right to better health, including quality health care. As we embark on redesigning the broken tenets of our health care system, human values must be a part of that plan.

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88 Future Design



*Develop visions of the future and ideas about how to achieve them.
(Douglas Schuler)*

We all have visions of what we want our lives to look like. What is there stopping us from achieving such aims? And, what are we doing to overcome those obstacles? The same goes for our health care system, individual health, and the health of communities. Today we lay the groundwork for what tomorrow will be—though we must concede that the future is unknowable, it is betterment toward which we should always strive.

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95 Patient Access to Medical Records



Patients and the public traditionally have very poor, if any, access to information in their medical records. Unless they are with a personal doctor who knows them well, many patients have great difficulty describing their condition accurately. At the same time, the clinician whom they are seeing is expected to provide excellent care without having up-to-date information about their patient's health. To compound the problems further, medical records often contain inaccuracies of which neither patient nor medical providers are aware.

Use patient access to online medical records as a bridge between the precise art of medical science and its practice as the patient experiences it. Let the public, patients, clinicians and other healthcare providers have up-to-date access to accurate medical information, regardless of location. Develop robust systems to protect privacy and confidentiality. Above all, educate and encourage practitioners and the public in patients' use of online medical records to actively manage their health. (Amir Hannan)

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102 Community Animators



Through their lived experience, community members trained in assessment techniques and information gathering can provide contextual understandings of the assets and liabilities a community possesses that would otherwise go unnoticed to the outside professional. Similarly they can act as agent for the process of conscientization and subsequent mobilization for peoples to pursue change and empowerment. (Justin Smith)

Community Animators are essential in isolated communities or amongst marginalized populations. Dissemination of health information is particularly important as these groups are often stymied by access to information, transportation, translators, and other factors that prohibit the uncompromised dissemination of information. Without community animators, too large a population is in the dark.

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103 Online Anti-Poverty Community



Lack of access to communication severely limits opportunities for building communities where poor people can help themselves access the resources they need and for advocates and activists in the anti-poverty community to be involved in organizing for social change locally, nationally and internationally. (Penny Goldsmith)

As economic status is a determinant of health, online anti-poverty communities are ideal locations for disseminating health information. Health care advocates and activists must also be inclusive of these communities when organizing for reform. These online venues are also ideal grounds for penetrating hard-to-reach communities with vital health statistics.

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104 Sense of Struggle

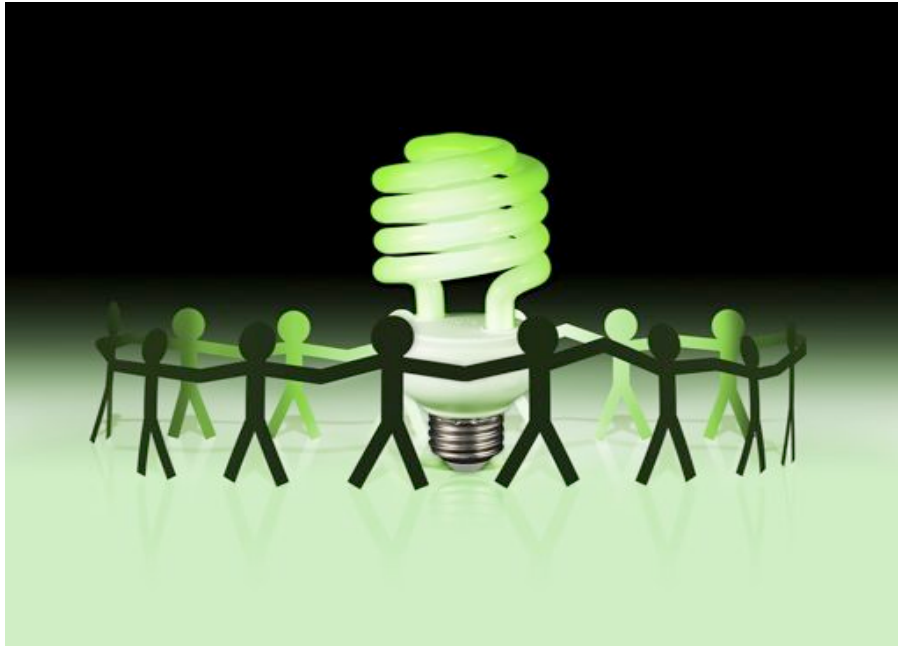


"If there is no struggle, there is no progress. Those who profess to favor freedom and yet deprecate agitation, are men who want crops without ploughing up the ground; they want rain without thunder and lightning; they want the ocean without the awful roar of its mighty waters. Power concedes nothing without a demand!" -Frederick Douglass

Struggle can help to build solidarity within a group fighting for change. In health care, struggle is the place where acknowledgement of the broken system meets the inevitability of smart people working to fix it. Struggle is also important for remembering how far we've come.

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122 Community Inquiry



Communities face a wide variety of challenges in areas of health, education, economic development, sustainable environments, and social order. But regardless of the difficulty of these challenges, a necessary condition for addressing them is for communities to find ways for members to work together. (Ann Bishop and Bertram (Chip) Bruce)

There are multiple challenges in health care, ranging from the large scale nation level all the way to the individual. When these problems arise, it is important that the community not only focus on the immediate fix, but also on understanding wants and needs, and using the opportunity to build solidarity. Similar to the health care system's over-emphasis on acute and emergent care, so communities must use challenges as a chance to build capacity and overall wellbeing.

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105 Self-Help Groups



Organizing groups to support collective and individual credit acquisition, as well as formal and informal skills training can assist peoples in accessing the capital necessary to initiate small businesses and ultimately help build livelihoods for families and communities. (Justin Smith)

Though this pattern speaks primarily to economic capacity building, self-help groups are useful tools for sharing health information, remedies, and providing other forms of collective support. Health-oriented self-help groups are tools through which better health and community building can be achieved.

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106 Self-Designed Development



When pursuing a development project peoples must come together, discuss, plan and decide what they want. If the community chooses to maintain a traditional way of life it becomes up to them on how they will protect that. And in the event that a community does seek outside assistance it is up to them to define the nature and terms of that relationship to those working with them from the outside. (Justin Smith)

The health connotation for this pattern is directly related to Voices of the Unheard, Community Inquiry, and Participatory Design. As is the premise with those patterns, this one relates to the need for all groups and individuals to participate in the design of the health care system. That could mean something as small as deciding where a community free clinic will be located, to something on a larger scale such as treatment protocols for emergencies.

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116 Everyday Heroism



Produce — and consider — more popular media that involves "ordinary" people and "everyday" lives. Celebrate the heroes among us and strive to be one yourself. Even an "ordinary" one. (Douglas Schuler)

The staff at CHOICE Regional Health Network are not famous or recognizable in the community. They work long hours for modest pay. What you can't tell just by looking at them is that they get people the health care they need. They connect clients to free specialty care; they allow people to have both food on the table and needed prescriptions medications, instead of having to choose; and they go to doctor's appointments with clients to help them feel more at ease. There are everyday heroes like this working tirelessly in the health care system to bring better health to everyone. These are the stories that must be told and revered.

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Life Maps



People faced with unexpected life decisions are often ill-equipped in many ways to make them satisfactorily. For one thing the decisions may not be easy ones to make; for another the emotional strain may interfere.
(Douglas Schuler)

In no other circumstance is this pattern more applicable than in the context of health and health care. Life and death decisions are some of the biggest and hardest to make; without a light being shone on the roads previously taken, people in these situations may feel lost, misunderstood, or alone. Though tumultuous debate ensued over “End of Life Counseling” (dubbed “Death Panels” by right wing extremists) included in the original health care reform legislation, this pattern speaks precisely to the aim of such services. In a time of crisis, information and guidance is of utmost importance.

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Claiming the Color of Shame: Making Hope Matter



During most of the 20th century, the medical community defined severe and chronic mental illness as a lifelong process, associated with inevitable decline in function. During the 1980's however, people with mental illness began to be active in the health consumer movement, and later in the 1990's scientific research supported the recognition that people with mental illness who receive adequate support can thrive and be active, engaged members of their communities.

The recovery model of treatment for mental illness developed, catalyzed by both researchers and consumers. This treatment model focuses on: health and wellbeing, not just suppression of symptoms; on positive sense of self; on hope and the possibility of a meaningful life. As one present-day example, Washington State's Youth'nAction is focused on peer and professional community support for youth who need services. These youth have re-imagined the symbolism of exclusion, invoking the color green, a 19th century mark of stigma for the mentally ill, as a sign of hope and resilience in their lives. (Nancy Anderson)

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119 Great Good Place



Communities need to ensure that "third places," which are neither the home nor the workplace exist where anybody in the community is free to go and stay for as long as they want. These places can be cafes, plazas, community centers or simply places with chairs or benches. These locations can be privately owned but their de facto policies must support the needs of the community for them to serve as genuine third places. (Douglas Schuler)

Community spaces contribute to the overall good health status of a community. They also provide a venue for collaboration, collective problem-solving, and collective decision-making. These places should be well-known and cherished by the community as the place where neighbors near and far can gather.

A Pattern Language for Better Health

120 Soap Operas with Civic Messages



The concept of Soap Operas for Social Change, developed by Mexican television producer Miguel Sabido, deftly weaves health and other socially responsible information into “traditional” soap operas to raise consciousness without compromising the compelling everyday drama that the genre exemplifies. (Douglas Schuler)

Health information can easily be integrated into and disseminated via soap operas for the social good. This could also apply to more popular sitcom television so the working population is also exposed. In general, integrating health information into all popular media is an effective tool to reach a number of different groups.

A Pattern Language for Better Health

Green Hospitals for Good Health



Hospitals are sterile environments, which are hardly comforting and conducive to healing and serenity. By utilizing sustainable building techniques, green spaces and color palates derived from nature, hospitals could still maintain their sterile environment without the “sterile” feel. It is important to realize the healing power of environ nuances, staring at a white wall in a room without any views of green spaces will not put ones mind at ease like a natural colored wall with soothing art and views of outside nature. Besides the positive healing aspects of green design, it is our responsibility as stewards to this planet to treat it, and our sick, with respect. (Elissa Emde)

A Pattern Language for Better Health

Fact-based Sex Ed



Moral and social disagreements over the teaching of sex education in public schools has caused the current system to be composed of a variety of approaches including abstinence only education, and in some districts the class is not offered at all. Sex Ed classes based on social opinions and moral persuasion often fail to offer scientific facts about sex, pregnancy and STDs; this lack of knowledge leads to teens making uninformed decisions about their sexual health.

Fact based sex education is intended to supply teenagers with the most current research information available concerning contraception, STDs, vaccines, and other sexual issues. Armed with accurate information teens will be more prepared to make responsible and safe sexual choices. (Kial Anderson)

A Pattern Language for Better Health

Military Mental Health



Individuals in the armed forces are required to deal with frequent relocation, combat duty, and a variety of other scenarios which can stain mental health. Combat duty alone can cause stress in the following ways: physical danger, injury, the death of friends, moral dilemmas, separation from family (leading to relational or financial concerns), difficulty resuming prior lifestyle or re-entering non military work force. The mental vulnerabilities which can result from these circumstances are not fully met by the armed forces. This is demonstrated in the suicide rate among military personnel, which out paces the suicide rate among civilians.

Military personnel and civilians should work to promote: the utilization of mental health tools, identification of what good mental health looks like, and increased funding for the promotion of mental health. Civilians have a responsibility to the military because our collective politics and foreign policy can result in deployment to combat zones, which can weaken mental health for soldiers. The military branches are also in a unique position to promote good mental health by requiring frequent psychological evaluations and counseling for soldiers and their families. (Hannah Moats and Jerome Wilen)

A Pattern Language for Better Health **Home Environmentalism**



Health indicators can often be found in our homes and closely surrounding environments. By keeping close vigil on things that are toxic—cleaning agents, lead-based paint, fertilizers—bodily harm to household members is prevented. Also, home air quality is considered to be one of the leading “fixable” conditions to improve asthma and other breathing-related problems. Keeping the home clean of dust, conducting periodic mold tests, and providing an air filtration system are ways in which health can be positively impacted by keeping a clean house.

The Master Home Environmentalist Program was started by the American Lung Association in order to combat hazardous breathing conditions in the home. It would be beneficial to communities to have several trained volunteers ready to perform home inspections and conduct community briefs on maintaining clean air quality.

A Pattern Language for Better Health

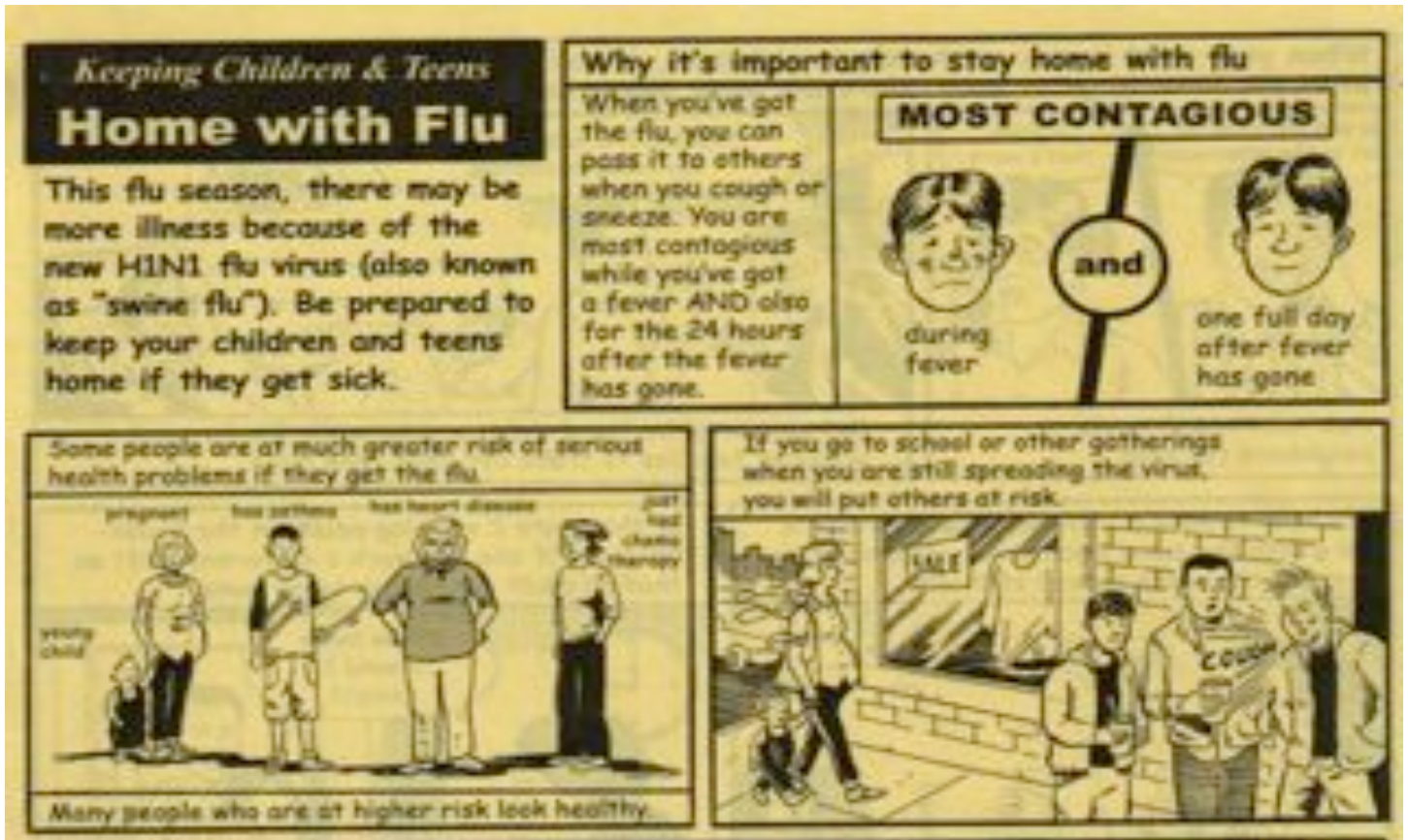
Publicizing Public Health



Public Health must be publicized — in all senses of word. It doesn't mean just placing more articles or opinion pieces in the newspaper. (Douglas Schuler)

Demonstrations, theater, activist road trips—all of these could be used to publicize public health. The meaning of public health must be reshaped in the minds of individuals—it is not just a county department that issues health warnings. Rather, it is a wellspring of information, initiatives, and actions that directly impact the environmental and personal health of a community and its members. The message must be portrayed, somehow, that public health is participatory by design, and its positive or negative condition is a direct reflection of the communities it serves.

A Pattern Language for Better Health Graphic Public Health Narrative



(Douglas Schuler)

Another tool through which the image of public health could be transformed, and public health information be disseminated.