

Episode: *Author Interview: “What Should Health Professions Trainees Learn About Built Environment Activism?”*

Guest: William J. Hercules, MArch

Host: Tim Hoff

Transcript: Cheryl Green

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[bright theme music]

[00:00:03] TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I'm your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Mr William Hercules, the founder and chief executive officer of WJH Health. He's here to discuss his article, coauthored with Dr David A. Deemer, “*What Should Health Professions Trainees Learn About Built Environment Activism?*,” in the December 2024 issue of the Journal, [Evidence-Based Design in Health Care](#). Mr Hercules, thank you so much for being here.
[music fades]

WILLIAM HERCULES: Thank you very much, Tim. It's a pleasure to be here.

[00:00:45] HOFF: So, what's the main ethics point that you and Dr Deemer are making in this article?

HERCULES: Well, over the past few years, my coauthor, Dr David Deemer, and I and a couple of other colleagues have been exploring this idea about how environments impact the health outcomes. And the research is pointing to some things that are similar to medical interventions. So, armed with this knowledge of how environments are affecting health outcomes, not just in a health care environment directly in a formal kind of way, but in everyday kind of spaces, it leads to the bigger question of, how should the professions respond? And clearly, physicians have an obligation in this, but there are many other professions that do as well: architects, hospital administrators, and other kinds of caregivers. So, while everybody might suggest that we're all looking for the most safe and beneficial outcomes here, we've really got to ask ourselves, well, what are they? And where does the research really point to? How do they inform choices that are made, either if you're building a brand-new hospital, or quite frankly, even if you're creating outdoor spaces in a community setting that isn't about treating patients directly. And where is the voice of the medical professions in particular, which carry considerable professional authority, especially in this space? Where are they in these discussions across that continuum?

[00:02:35] HOFF: And so, what do you see as the most important thing for health professions students and trainees to take from your article?

HERCULES: Well, we think that, especially in the civic space, there's a considerable amount of influence that trainees, even though they haven't perfected their licensure yet or perhaps even their medical education, have a considerable authority around what they are, and their voice does matter. They are trained in research methods to understand whether or not research is good or not. They are trained in how to correlate a number of these confounding variables, etc., where most people are not. So, asserting themselves in a civic environment is extremely important. Also, even within a hospital environment where they may be the kid, if you will—to sound in some cases pejorative—where their voice may not be as elevated as senior docs with 30 years of experience, and they're bringing in tens of millions of dollars of revenue into a hospital, that sort of thing, finding your voice there may be a little more difficult. But what we're suggesting is that bringing the research and the data to ask the questions really enables and empowers those voices, especially for younger trainees.

[00:04:09] HOFF: And finally, if you could add a point to this article that you didn't have the time or space to fully explore, what would that be?

HERCULES: Well, just a couple months ago, the American Institute of Architects—and I am an architect, full disclosure—ratified a proposal around a study that I had led last year that conflates the practice of architecture and the existing research around health outcomes. And we cited a number of examples, and David and I and our colleagues have lectured on this multiple times. But ultimately, we convinced the American Institute of Architects, which is the professional organization around the practice of architecture, to adopt number one, the recognition of this as an issue. Number two, that it's an ethical issue to ignore it. And number three, to use its influence in the public realm and also in education space. [theme music returns] So, just by virtue of the editorial cycles and where we were in writing this, we couldn't really talk about it because that hadn't quite happened yet. But that's fresh news.

[00:05:25] HOFF: Mr Hercules, thank you so much for being on the podcast today, and thanks to you and your coauthor for your contribution to the Journal this month.

HERCULES: Great. Thank you very much, Tim.

HOFF: To read the full article, as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.