

Inclusion by design.

"There is no place like home"

Dwelling graduation studio



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INTRODUCTION

Dear reader,

You are reading the graduation report written in the context of the Dutch Housing Graduation Studio called Between Standard And Ideals. The aim of the research is to investigate how adequate housing and inclusion of vulnerable target groups in Amsterdam can be achieved.

The Dutch society is in transition. Everyone who can do so is asked to take responsibility for his own life and environment. The transition is both a political ideology and austerity measure.

As a result of the cutbacks (phasing out inpatient facilities), citizens who are in a vulnerable position must be received as little as possible and be able to move on to self-sufficient living again as soon as possible and stand on their own feet. As a result, the number of vulnerable people in the neighborhood is increasing, which leads to an increased demand for small and affordable housing, and also housing forms that pay attention to fellow residents.

Only a roof over the head is not enough. Social networks and support are needed for recovery and stability. Vulnerable persons traditionally have a complex relationship with neighborhoods where they settle. They do not always have professional help and often do not have a personal network that can support them. In doing so, they are dependent on local residents and volunteers. Partly due to lack of connection with the neighborhood in which they live, social isolation and loneliness are lurking.

Because it concerns a housing assignment, it is interesting to investigate how vulnerable target groups can get a house and how that house can become a home. That question is dealt with in this research.

The subject of mutual support has been keeping me busy for quite some time. I can describe myself as blessed because I have a strong social network that can support me in an emergency. But what if that is not there? It is not difficult to give someone a helping hand. I have written this research with that thought and conviction.

I would also like to express my gratitude to Nico Ooms, project leader of the De Tussenvoorziening foundation for participating in the interview. And finally to the residents of the Parana housing association for showing your beautiful complex and sharing your experiences.

MANIFESTO

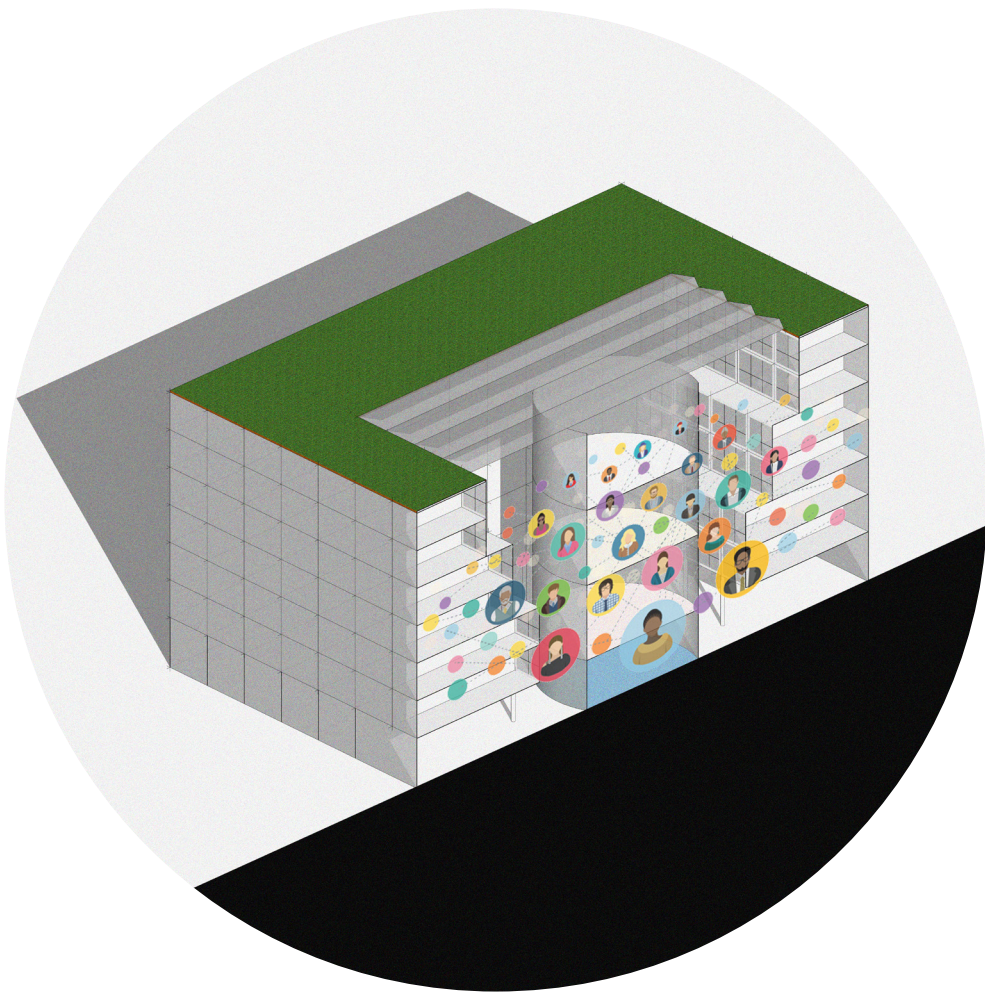
Everyone deserves an equal place in society - these are my words.

Self-realization is the core of being human. The nature of every person is out to bring opportunities and talents to fulfillment.

The Dutch society is in transition. Until recently, it was self-evident that the government provided its citizens from the cradle to the grave. Due to economic transitions and ideological shifts, the self-direction of people and charity are now being called upon. A turnaround to the old way in which citizens took care of their neighbors.

Unlike before, vulnerable people come to live self-sufficient as much as possible, instead of being admitted to institutions. We must welcome them and not exclude them!

All citizens want to be part of the society and contribute to this in their own unique way. They feel at home in a society that welcomes diversity, respects differences and is proud that all people are involved in society. We call such a society an inclusive society. We must create an environment where vulnerable people can also fulfill their selves. Social networks and support are needed for recovery and stability. Be open to people who are different and help them when needed. Another mindset is needed, but also in architecture, new housing forms are needed to give vulnerable people a suitable home.



PROBLEM STATEMENT

King Willem Alexander introduced the term participation society during his first speech from the throne in 2013. Everyone who is capable of doing so is asked to take responsibility for his or her own life and environment (Movisie, 2017).

Striving for a participation society is both a political ideology and a cost-cutting measure. Because of the rising costs, the government wants to cut down on the welfare state and tries to pass more and more tasks onto the individual civilian. On the other hand, it is assumed that the civilian himself will also expect and need less interference from the government.

Because of the decentralisation of governmental tasks to municipalities, the governments have to make sure that people can keep on living at home for as long as possible. However, the municipalities are also responsible for support of people who are not self-sufficient. The municipality stimulates people to do as much as possible by themselves or with the help of others (Gemeente Amsterdam, Ketenregisseur MO/BW, 2018 b, p.8).

As a consequence of the reduction policy for intramural care, civilians who are in a vulnerable position should be taken into intramural settings as little as possible and flow through to self-sufficient living and standing on their own two feet as quickly as possible (Davelaar, Gruppen, & Knevel, 2018, p.15).

Besides a reduction of intramural provisions, the role of the (welfare) professional also changes; the professional must draw upon the civilian's own strengths as much as possible (Jonkers & Machielse, 2013, p.10). From the perspective of the Wmo, in which civilians arrange their necessary help by themselves as much as possible, especially this group depends on neighbours and volunteers (Jonkers & Machielse, 2013, p.10).

Social networks and support are needed for recovery and stability. Vulnerable civilians often do not receive professional help and they often also do not have a personal social network that can support them (Jonkers & Machielse, 2013, p.14). Moreover, vulnerable target groups have traditionally had a complex relationship with the districts and neighbourhoods in which they settle. They are regularly repelled from neighbourhoods or regarded with suspicion (Davelaar, Gruppen, & Knevel, 2018, p.15). Partly because of a lack of connection with the neighbourhood they belong to, social isolation and loneliness are lurking (Gemeente Texel, 2018, p.23).

Rigid ideals such as 'the mixed district' (supporting and vulnerable inhabitants of the district mean something to each other) and 'the participation society' (the resident takes on more things in society, irrespective of institutions) appear to have difficulties with taking off in the Netherlands (Van Klaveren, Van Triest, & Van der Velden, 2018, p.31).

In order to establish complete citizenship of vulnerable people, inclusion of these people is important. There is a need for self-sufficient housing for vulnerable target groups. Within a society that is in a transition, it is important to investigate how housing of vulnerable target groups can best be established and how housing can be connected to the socialisation of care.

Research question

How do I create a building in which vulnerable target groups can live self-sufficiently and take part in an inclusive community?



Volunurable



Affordable housing



Social network



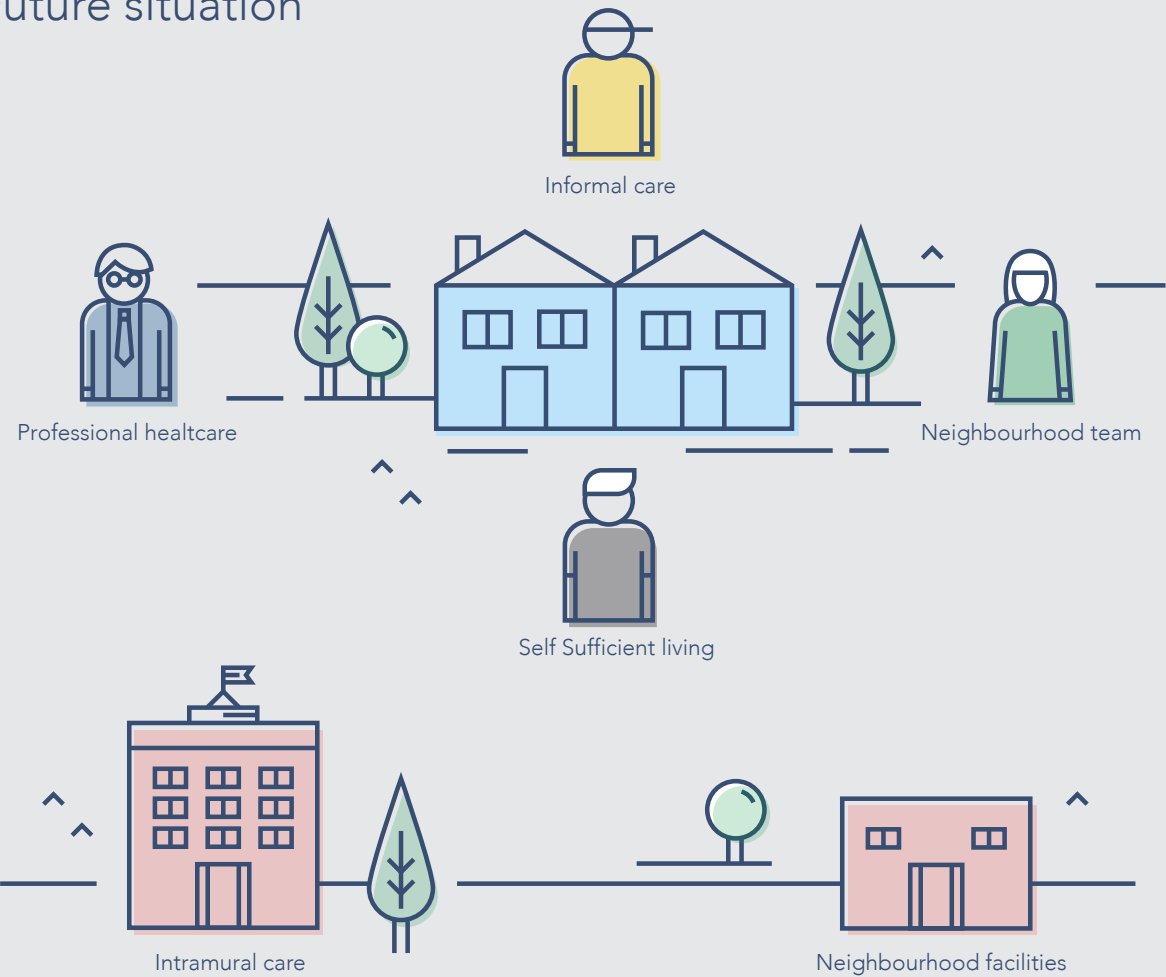
Inclusion

IMPRESSION PROBLEM STATEMENT

Current state



Future situation

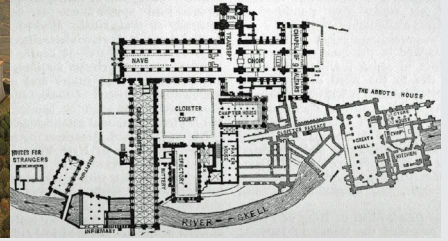




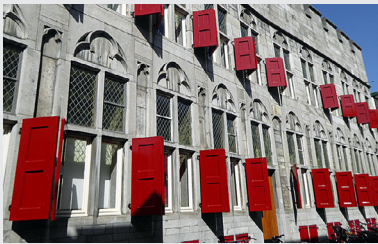
356
Monastery of Saint Anthony



557
Monastery of Saint Anthony



1122
Guesthouse



1492
Orphanage
Zoudenbalchhuis in Utrecht



1422
Madhouse
Reinier van Arkel

1395
Almshouse
Bakenesser kamer



HISTORICAL SIGNIFICANCE

Guidelines and regulations have existed since time immemorial – mostly religiously inspired – to offer help to people who are ill, poor, or in any other need. Neighbourhoods organised help at birth, diseases, and death, as natural as they took care of the public services like safety, keeping the streets clean, the availability of water, and extinguishing fires. Poor and rich lived close to each other, they knew each other. The mutual care connected to the story of Christian charity as the people inherited this in words and images (Van der Linde, 2016, p.59). Civilians played a big part as wardens and volunteers, the contribution of the government was limited. Until the end of the 18th century, there had hardly been any interferences by the government in the field of public health and welfare. The work of volunteers was taken over by professionals in the following years. During the last ten years, the government wanted to reverse those developments. The development of social work is described in this chapter. We will also focus on the development of architecture of social relief and the psychiatry.

Social care by monasteries and arrangements for the poor

Monasteries have played an important role in the care for the poor for centuries. Antonius (251-356) is regarded as the founder of the monasticism and as the father of the monks. In following Jesus, he experienced his possessions as impediments; he sold his properties and offered the revenues to the poor. Antonius stimulated monasteries to become refuges for people who are poor and in need (Ibidem, p.46-47). The monastery of Saint Antonius was built in 356 on the location of Antonius' grave.

Also all throughout Europe, monasteries were founded in a high tempo. This was very important for the spread of the Christian care of the poor. The early monasteries generally followed the example of the monastery in the Italian Monte Casino from the middle of the sixth century. Benedictus van Nursia (480-547) was the founder of this monastery. Anyone who joins the monastery promises to live in poverty, to refrain from sexual intercourse, and to obey to the abbot. The activities during the day were divided into three: eight hours of praying (chorus singing and Bible study), eight hours of working (this provided the monasteries with an own economic basis) and eight hours of rest (ibidem, p.47).

Already during the early medieval care of the poor, rules were formulated to define which categories of the poor were entitled to social care. Three criteria were recognisable in nearly all categories of the poor at an early stage, being: inadequacy, proximity, and compliance. The criterium inadequacy denoted the inability to meet the needs of the own life support. Whoever was disabled and unable to work could claim help. When someone in need of help could not be cared for by their loved ones, the place where one was living was obliged to help. At last, there was the criterium of compliance, in other words: were the poor decent and awaiting at home, or were they beggars or tramps who went on the streets to mob people, or were they tramps who united in groups or even gangs and made the area unsafe? Anyone who does not have a fixed abode and is capable of travelling can be regarded as being capable of working (ibidem, p.49).

From monastery to guesthouses: the medieval care

Monasteries housed pilgrims. The oldest guesthouses were founded in the sixth and seventh centuries as apart guesthouses. A guesthouse was often not more than a chapel with several beds instead of pews along the side. They offered hospitality, some care, and accommodation to travellers, tramps, and pilgrims (often indiscernible), but also to the ill, the old, and the disabled.

Several departments arose in the guesthouses; a transient home, a refuge for foundlings and orphans, a hospital ward, care of 'curable diseases'. Departments in which the prebendaries lived also arose. These were elderly who had bought themselves in in exchange for care (Ibidem, p.54).

Madhouses

The number of 'mad' people increased in the bigger cities during the sixteenth century, and this did not stimulate the tolerance regarding the madness. Madmen were always tied and locked up. 'Little madhouses' had also been used for a long time already. These were movable cages in which raging madmen could be locked at home. The first apart madhouses for the 'mentally ill' arose around 1450. The oldest madhouse in the Netherlands that was specially meant for 'poor sinless people' is the Reinier van Arkel in 's -Her-togenbosch (1442).

With the foundation of these madhouses, the little madhouses in the city were replaced for a new building. The conditions under which the mentally ill were living in the madhouse were harsh. They resided in cells or cages with a feeding hatch in the door and a hole in the floor that served as a toilet. Sometimes, they were chained to the wall with an iron chain (Ibidem, p.57-58). Unchaining madmen was a humanitarian act, which was in line with the starting points of the Enlightenment: it was hard to unite the creation of ideal, natural environmental factors with chaining those who could benefit most from this (Mens, 2003, p.17).

Madhouses and guesthouses in which patients resided in cells made room for big closed buildings in forests and dunes, which again were replaced by complexes with loose, detached pavilions and recently by urban housings and small clinics next to hospitals or in residential areas. Big, massive dormitories and day care centres were gradually replaced by individual bedrooms and small apartments (Mens, 2003, p.5). Forced and later on unforced work was part of the reintegration of the 'madmen'.

Social relief

The transient home – de Bayart, also called Baayerd or Beyer named after the old word Bayern: cherishing, caring for – was meant to offer shelter to travelling clergy and pilgrims, but also to other, less exclusive folks such as tramps, penniless merry fellows, discarded soldiers, and banned criminals. In this Baayerd, people were usually allowed to spend up to three nights (Van der Linde, 2016, p.55).

Stealing homeless persons, beggars, crackers, and tramps had to face terrifying corporal punishments for a long time. As the end of the sixteenth century approached, the idea arose that corporal punishments were perhaps not the most appropriate solution. Forced labour could get the form of galley slavery or deployment in public works. This gave rise to penitentiaries like 'rasphuizen', 'spinhuisen', detention centres, and later on peat districts, Christian agricultural colonies (Steyaert, 2016).

With the support of king Willem I, Van de Bosch founded the Society of Humanitarianism (Dutch: 'Maatschappij van Weldadigheid'). The Society of Humanitarianism wanted to forcibly educate the beggars into farmhands in a self-funding project. Several work colonies were founded after 1818 (Steyaert, 2017).

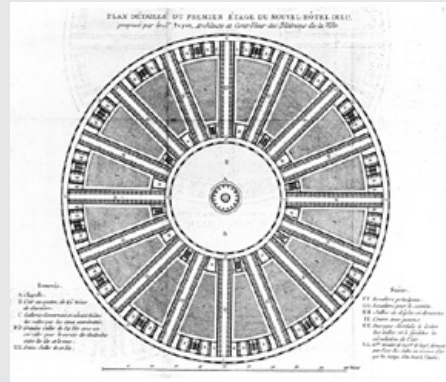
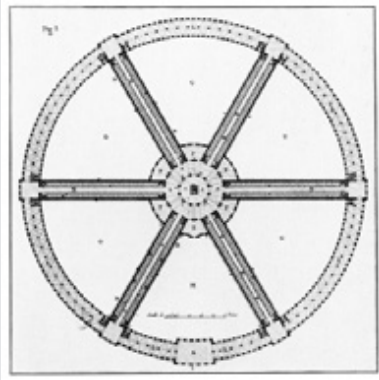
Several decades later, the misery that an alcohol addiction could cause was literally laying on the streets (in later years the other forms of addictions as well). An increasing number of civilians began to experience public drunkenness as a problem. Therefore, the Drinking Law of 1881 determined that 'habitual drunkards' – people who were regularly responsible for drunkenness, had to be sent to a labour colony in Hoorn or Veenhuizen. There, they were subjected to a regime of labour and discipline (Blok, 2016).

The Salvation Army (Dutch: Leger des Heils) opened different shelters for homeless people around 1900, including many alcohol addicts. The temperance society against alcohol

abuse (Dutch: Volksbond tegen Drankmisbruik), an organisation of wealthy doctors, businessmen, and politicians, wanted to offer an alternative to jail. The temperance society was the founder of the sanatory for alcohol addicts Hoog-Hullen in Eelde (1891) and of the Medical consultation office for Alcoholism in Amsterdam (1909) (ibidem).

Partly on the basis of such colonies, a system of unemployment relief projects, social workplaces and reception facilities developed, in which people who ended up between the margin could be re-socialised. Originally self-sufficient and paid for with private money sources, and increasingly explicitly financed by the government during the second half of the twentieth century (Van der Lans, 2016).

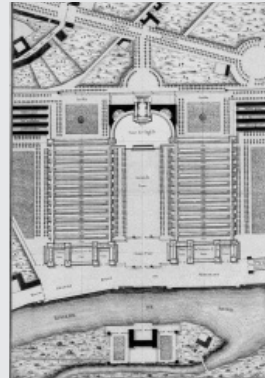
The first educational villages for problematic families were founded in the suburbs in 1933 (Van der Lans 2016). Also within social relief, a strong movement back to the district has occurred during the last years.



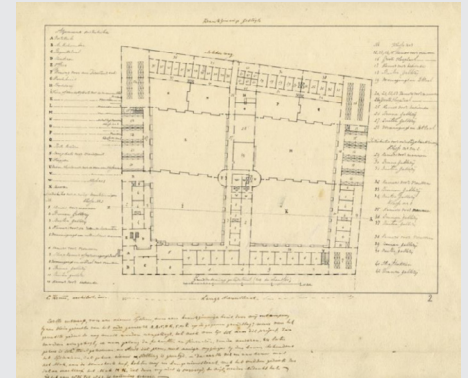
B. Poyet, Hôtel-Dieu, Paris, 1785



J. B. Leroy and C. F. Viel, Hôtel-Dieu, Paris, 1773



B. Leroy and C. F. Viel, Hôtel-Dieu, Paris, 1773



J.C.L. Kok Willem Arntsz Huis, Utecht, 1844

1562

Insane people were tied up and locked up in Panopticon and 'Carré isolé'- architecture

1773

1844

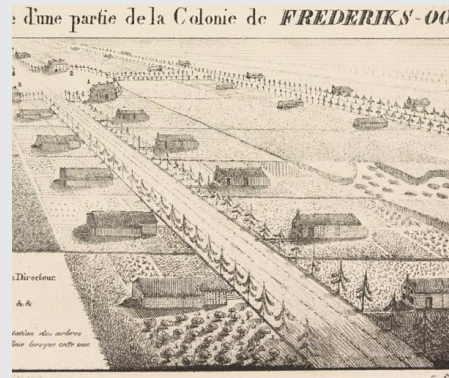
The big reconstruction- Insane people were unleashed

1854

Armenwet



Clarissenklooster, rasphuis, Amsterdam



De Kolonie Frederiksoord, 1818

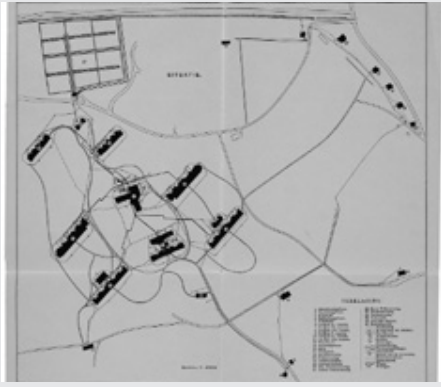
1596

1818

1850

Het Asyl Steenbeek op, vrouwenopvang

1887-1



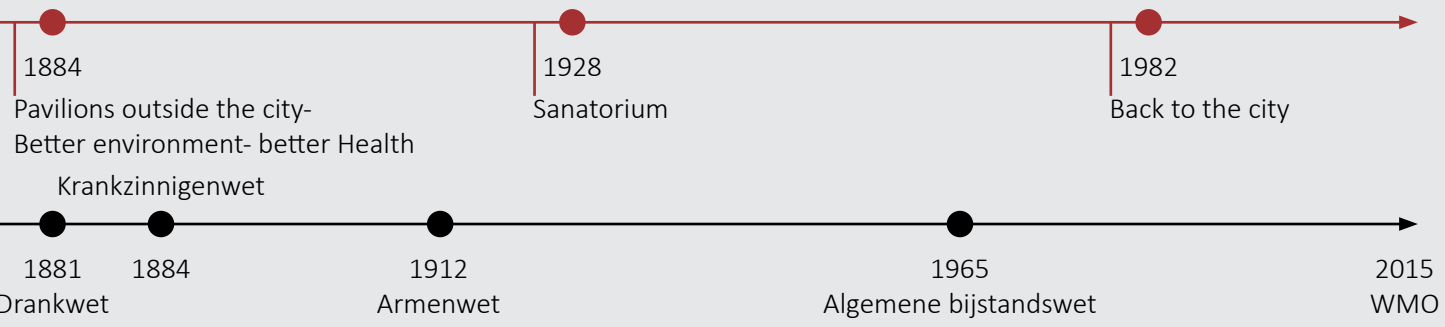
J.A. Mulock Houwer, De Brinkgreve, Deventer, 1913



E.G. Wentink, Veldwijk, Ermelo, 1884



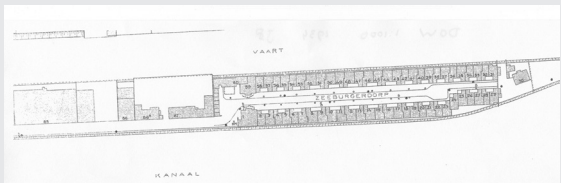
'Heeren Paviljoen', Christelijk Sanatorium voor Zenuwlijders



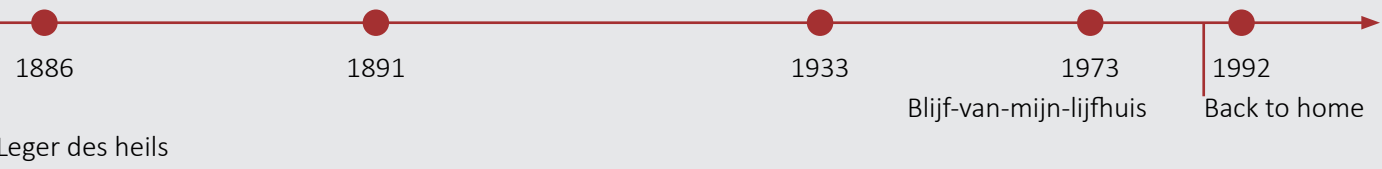
Rijkswerkinrichting Hoorn



Sanatorium voor dronkzuchtigen Hoog-Hullen in Eelde



Zeeburgerdorp, 1933



VULNERABLE TARGET GROUPS

The program Housing Vulnerable Target Groups (Dutch: Huisvesting Kwetsbare Groepen) has the goal that a fitting living space will be offered to all urgent vulnerable groups within three months (Gemeente Amsterdam, 2015, p.3). 30% of the social housing stock is intended for vulnerable groups (Gemeente Amsterdam, 2015, p.23).

As described earlier on in the study, the municipalities have had a broader responsibility since 2015 because of the new Act for social support (Dutch: Wet maatschappelijk ondersteuning; Wmo). The municipalities have the task to organise the social support for their civilians. Besides Social relief, 'Beschermd Wonen' has also taken part in these responsibilities since 2015 (Gemeente Amsterdam, 2018, p.5). A transformation is occurring within these domains.

Different from what previously applied, people are placed at a self-sufficient place for living as much as possible (60% of the new inflow). At the same time, a reduction in the 24-hour care of 20% in 2020 is being worked on (Gemeente Amsterdam, 2018, p.6). The municipality of Amsterdam states that the costs of a place in a reception facility are high. A transition to more self-sufficient housing forms brings a saving in costs. The extent of self-sufficiency is estimated by means of a self-sufficiency matrix. Also after a trajectory in the Social relief or assisted living, people flow out more quickly (Amsterdam, 2017). The guidance form is based on 'light' formal guidance and building up informal networks.

The target groups are described below:

Social relief:

According to research (Gemeente Amsterdam, Ketenregisseur MO/BW, 2018 b, p.9), someone qualifies for social relief when he/she is 23 years or older, is homeless, and furtherly has an accumulation of problems in different aspects of life that cannot be solved in a different way than by offering MO. It concerns clients who:

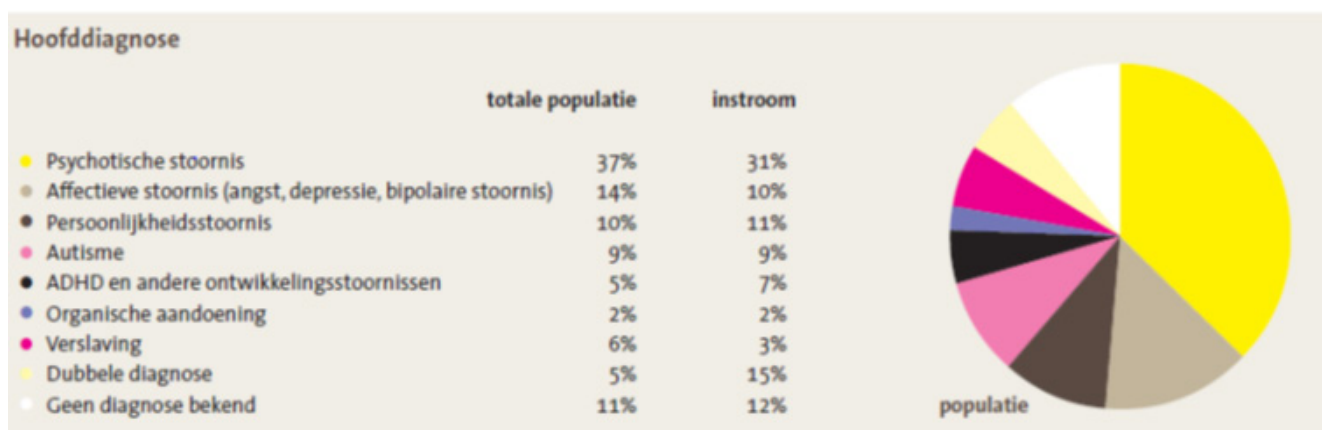
- are homeless
- are not self-sufficient
- are not or not sufficiently capable of meeting the own living conditions (roof over the head, food, income, social contacts, selfcare)
- have problems in multiple aspects of life, including for example inadequate selfcare, social isolation, soiling of the living space and/or surroundings, lack of a fixed or stable living space, behavioural problems, and addiction problems
- are not (yet) able to live independently
- do not get the care they need to maintain themselves in society according to the professional assistance and who do not have a request for help that fits the regular assistance – family, neighbours, bystanders often ask for help – which is why unrequested interference or assistance occur.

Beschermd Wonen (Protected housing):

According to research (Gemeente Amsterdam, Ketenregisseur MO/BW, 2018 a, p.10), someone becomes eligible for protected housing (formerly GGZ-C care intensity package) when this person has psychiatric problems that make a protected home environment necessary. It then concerns people who cannot (yet) completely independently live and function within society. Within protected housing, people get a combination of living with supervision and guidance, aimed at stimulating the self-sufficiency.

It concerns clients with mental problems who:

- are beyond recovery,
- cannot (yet) live self-sufficiently,
- need protected housing because of this,
- are 18 years or older



Homeless



Mental problems



Variety of problems

As described earlier in the study, there is a shift from formal to informal care in addition to a decrease in hospital care institutions. Due to the socialization (vermaatschappelijking) of healthcare, the role of the care provider changes. This chapter defines the concept of informal care. It also describes how informal care is brought about in current policy and how it finds its connection with the target groups mentioned.



Support

Informal care can be interpreted broadly. It is not just about help in the household, personal care, and nursery, but also about emotional support, assistance in transportation, or guidance in arranging help (De Klerk, De Broer, Plaisier, Schyns, & Kooiker, 2015, p.6). Some civilians benefit enough by the so-called small boost of help. Others benefit more from structured guidance.

Drawing upon the civilian's own strengths means that the professional has to take a step back. The professional does continue to fulfil an important and steering role towards vulnerable civilians in neighbourhoods (Jonkers & Machielse, 2013, p.10). Informal 'support systems' are gradually and gropingly developed in districts and neighbourhoods (making quarters, neighbourhood circles, and other forms of peer support) to support vulnerable civilians to live 'as ordinarily and self-sufficiently as possible' in the district (Davelaar, Gruppen, & Knevel, 2018, p.15).

This is achieved by deploying new social professionals such as the social broker or the social worker who signals the welfare needs of civilians in districts and mobilises and streamlines a, preferably informal, offer. Besides that, vulnerable civilians are offered individual support in which a specialised form of formal and/or informal help is given because support by social connections of family, friends, and relatives is not or no longer sufficient (Jonkers & Machielse, 2013, p.13).

Although informal care is often used as a synonym for family care, it can be discerned into family care and volunteer care. Family care is described as 'the care that is given to someone in need by someone in the direct surroundings of this person' (Oudijk et al., in De Boer & De Klerk, 2013, p.10). It always concerns the care for someone with health problems, so for example it does not concern the execution of tasks, babysitting, or the everyday care for a healthy child. Volunteer care concerns 'volunteers who perform activities in an organised and unpaid way without obligation for others who need care and support and with whom they do not have a personal relation at the start' (Scholten, in De Boer & De Klerk, 2013, p.10).

Despite the alteration in the role of the professional, Movisie – the national knowledge institute for a coherent approach to social questions – describes numerous proven guidance methods for vulnerable people. Many methods are applicable to different target groups. They empower self-sufficiency or promote participation. Many methods aim at the general empowerment of the own possibilities and deployment of the social network of (vulnerable) civilians. Examples include buddy projects for people with a psychiatric background.

Target groups described in the study, transition from Social relief and Assisted Living receive support from volunteers. Informal care is mostly aimed at mutuality. With mutuality, giving and taking are equivalent between the vulnerable and the resilient civilian. Depending on the indication, a connection with a volunteer is sought via different projects. When the helping hand is aimed more at guidance, the inhabitants should communicate their signals to the professionals assigned for this (ibidem, p.26).

As described earlier in the study, vulnerable target groups have traditionally had a complex relationship with neighborhoods where they settle. Partly due to lack of connection, social isolation and loneliness are lurking (Gemeente Texel, 2018, p.23). Being excluded is not good for the individual and exclusion is also not good for society. This chapter defines the concept of inclusion, and describes which elements are important for reaching vulnerable target groups. In the remainder of the research, an attempt is being made to implement it in architecture.



Inclusion

The Thesaurus for Care and Wealth describes inclusion as follows: vision on participation that assumes equal possibilities and chances for every individual, regardless of limitations, age, gender, social-cultural background, ethnicity, etc., with complete acceptance and valuation of the society; also the process of a society becoming more inclusive (Stimulansz, 2018).

There is a strong movement to enable vulnerable civilians to live as self-sufficiently as possible instead of in institutions and protected housing forms. Embedment of care in the community, enhancement of autonomy of the civilians who receive care and support and drawing upon the own strengths of vulnerable civilians and their social surroundings have gradually become the new starting points (Davelaar, Gruppen, & Knevel 2018, p.25).

The Dutch society is in a transition, including people who are 'different' in society is important. Meanwhile, inclusion has become an assignment for all government levels and partners (Davelaar, Gruppen, & Knevel, 2018, p.26).

Researchers describe that inclusion should occur both by developing interpersonal relationships and by participation in the society, and that both domains are coherent and overlap each other (Simplican et al., in Davelaar, Gruppen, & Knevel, 2018, p. 27).

In the study Good neighbours: lessons from mixed housing projects in Utrecht (Dutch: Goede buren: lessen uit gemeente woonprojecten in Utrecht) (Davelaar, Gruppen, & Knevel, 2018), the authors describe several possibilities for building an inclusive society.

Limitation can contribute to mutuality

Where meetings are light and limited and include delineated and clear roles by nature or by social projects, it appears to be possible to develop pleasant contacts between people with and without a demand for care, that are of value to everyone. Both groups experience these clear and delineated roles as nice because they can gain experience outside of their own worlds safely and controllably (Bredewold, in Davelaar, Gruppen, & Knevel, 2018, p.30). By organising activities together, it offers people with a demand for care the chance to contribute as well, to be in a giving position (Bredewold; Muusse, & Van Rooijen, in Davelaar, Gruppen, & Knevel, 2018, p.30). Creating situations in which someone can also mean something to the other contributes to more equal relationships and therefore to empowerment and recovery. Mutuality includes equal giving and taking by both the vulnerable and the resilient civilian. Imbalance is at stake when the contacts become more intensive, which will result in charity or exhaustion (Davelaar, Gruppen, & Knevel 2018, p.34).



Mutuality

Social care close to the people in the district

On behalf of the vulnerable civilians, a broad range of 'recovery support' should be built to improve selfcare and self-management and to increase the chances of recovery and societal participation (Taskforce EPA, in Davelaar, Gruppen, & Knevel, 2018, p.31). The care should be closer to the people, and intensive when needed, allowing prevention and early signalling (Koekkoek, in Davelaar, Gruppen, & Knevel, 2018, p.31).



Social care

Introducing vulnerable civilians in a new environment, for example via 'making quarters', is also of importance in this (Kal; Kal, Post & Scholtens, in Davelaar, Gruppen, & Knevel, 2018, p.31).

Early signalling

Local residents of vulnerable civilians often do not know where to go with their questions and worries. They should be able to call on professional help and to report suspicions about people being in demand for care quickly (Taskforce EPA; Commissie toekomst beschermd wonen, in Davelaar, Gruppen, & Knevel, 2018, p.31).

Deployment experiential expertise

People who have experience with mental or other vulnerabilities or who live with a disability are actively deployed in an increasing number of places to support others who have to deal with similar issues. Initiatives by (ex) clients/experiential experts are taking an increasingly bigger role in care networks. The experiential expertise can play an important role in the information provision about clinical pictures and their consequences.

Learning from other collective housing forms

'Co-housing is often explained as a form of living that emphasizes more collectivity, mutuality, and collaboration between civilians than is the case (...) in "regular" housings. Collective intentions of residents, aimed at facilitating a community spirit, are also often given as a criterium for co-housing' (Butot, in Davelaar, Gruppen, & Knevel, 2018, p.32).



Knowhow



Community

INCLUSION IN RELATION TO ARCHITECTURE

As was described previously in the study, there is a strong movement going on to enable vulnerable civilians to live as self-sufficiently as possible. The embedment of care in the society, strengthening of autonomy of the civilians who receive care and support, and drawing upon the own powers of vulnerable civilians and their social surroundings are also gradually becoming the new starting points (Davelaar, Gruppen, & Knevel, 2018, p.25). A historic overview has been given, the vulnerable target groups have been elaborated, the way in which care is arranged, and the points to create an inclusive society have been raised in the previous chapters. In this chapter, a connection with the architecture is described by means of research and interviews. A design question is also described at each of the different components.

Within the domains societal relief and assisted living, a transition is occurring towards self-sufficient housing forms. When research is performed to the housing variants, the following models are described (Van Klaveren, Van Triest, & Van der Velden, 2018, p.15):

- Independent housing (in a rental house with an own rental agreement or a purchased house)
- Independent housing with a (rental) contract at a healthcare institution
- Independent (group) housing with multiple persons in a house
- Housing in a residential complex or a housing provision with ten to twenty co-inhabitants

Several of these housing forms can be designated as less effective. As stated in the problem definition, vulnerable target groups have had a complex relation with the districts and neighbourhoods in which they settle. In the case of independent living in the district, making and maintaining contacts, organising activities during the day and signalling relapse do not appear to occur without any obstacles (ibidem, p.8). It is also explicitly depicted that the second variant does not deserve preference, to decrease the dependency of clients of healthcare organisations (ibidem, p.15). The remaining described housing forms attain a certain extent of clustering. The collective housing forms were raised in the previous chapter as an instrument to promote inclusion.

Society (How do I create a building in which the vulnerable target groups can take part in an inclusive society?)

Rigid ideals such as 'the mixed district' (bearing and vulnerable residents in the district mean something to each other) and the 'participation society' (the inhabitant societally takes on more, distant from institutions) appear to come off difficultly in the Netherlands. There are, however, examples of housing forms in which these ideals do take shape. Here, it concerns housing forms in which a mix of vulnerable inhabitants and regular tenants live under the same roof (Van Klaveren, Van Triest, & Van der Velden, 2018, p.31).

The thought behind mixing groups of tenants that differ in bearing strength, is that the mix contributes to a good living environment for people with problems. The so-called bearing inhabitants can also help the so-called demanding inhabitants when this is needed. In practice, we see that the vulnerable people also support each other (Van Klaveren, Van Triest, & Van der Velden 2018, p.18). The 'demanding inhabitants' feel 'seen, accepted, and allowed to be there', experience positive social control, and also benefit from the mutual contacts. The 'bearing inhabitants', on the other hand, cherish the contacts and activities. They also indicate to appreciate learning from people who are 'different' (Davelaar, Gruppen, & Knevel 2018, p.8).

Mixture of



Volunurable

And



Non-volunurable

Contributes to



Support

and



Mutuality

Housing (How do I create appropriate apartments for vulnerable target groups and regular inhabitants on the housing market?):

As has been described previously in the study, the reduction policy for intramural care has increased the demand for small and affordable housings for vulnerable target groups and for housing environments in which there is attention for co-inhabitants. It has also been declared that mixing demanding and bearing inhabitants promotes the mutual contact and support between inhabitants and is experienced as positive.

Research has shown that the average apartment for vulnerable target groups is 30-35 m², with a good affordability (Van Klaveren, Van Triest, & Van der Velden, 2018, p.25). In addition to this, another pressing societal quest can be mentioned: the necessity to have sufficient and affordable housings available for starters on the housing market. The selection of bearing inhabitants in the projects does not appear to be hard in general. Bearing inhabitants are often 'just socially engaged types, but preferably not half caregivers'. Bearing inhabitants – mostly young people and students – are often asked to fulfil an exemplary role or be a role model for the demanding inhabitants. Bearing inhabitants are often motivated to mean something to others. Besides that, nearly all projects offer affordable, good living spaces against reasonable prices (Davelaar, Gruppen, & Knevel, 2018, p.51).

It cannot be said what mix of target groups is most successful: there is no ideal recipe for the mix.' In most projects, the parties keep on searching for a correct mix (Davelaar, Gruppen, & Knevel p.24).

It has become clear that there are different projects in which the groups live mixed, also called speckled housing (Dutch: gespikkeld wonen). Inhabitants with an intensive demand for care are often clustered (Van Klaveren, Van Triest, & Van der Velden, 2018, p.18). By looking at a number of well-described reference projects, it can be concluded that the ratio between demanding and bearing inhabitants varies between 1:1 And 1:2.

Distributions inhabitants reference projects:

Housing complex mixed housing	Regular	Vulnerable
t Groene Sticht	69	38
Parana	24	24
Majella Wonen	39	35

Participation (How do I create a housing in which the themes: learning, working, doing, and help come together and are visible?)

It has turned out that besides the housing, also the nearby provisions such as walk-ins, meetings, and availability services are important. These provisions empower the own social network and prevent loneliness.

Continuum of education, training, volunteer work, and paid work, is crucial for the self-realisation of people (Van Klaveren, Van Triest, & Van der Velden, 2018, p.27). Vulnerable civilians often have difficulties with starting or maintaining participation independently. Support in participation is also called activation. Jekuntmeer.nl offers the current participation offer in Amsterdam to inhabitants and professionals by order of the Municipality of Amsterdam. In this, a distinction is made between the themes learning, working, doing, and help. It concern activities, courses, and work.

Although the ground floor may only form 10% of a building, it determines 90% of the experience at eye level in the city (Gemeente Utrecht, 2017, p.6). Therefore, the skirting board is appropriate for realising approachable walk-in centres in the district for meetings, activities, and support in daily questions. This way, the building creates and added value to the district.

Interpersonal relationships (How do I create a space that is appropriate for meetings and reciprocity?)

As has just been described in the study, education, training, voluntary work, and paid work are crucial for the self-realisation of people. These components create the first domain that is deemed necessary to establish inclusion, participation. The second domain is interpersonal relations. Social networks and support are needed for recovery and stability. As a consequence of socialization of care, the care shifts from formal caregivers to informal support. Research has shown that mixing groups of tenants that differ in bearing power positively contributes to the establishment of interpersonal relations and informal support. In the context of the research, an interview has been taken with Nico Ooms, project leader of the Foundation 'De Tussenvoorziening' (Foundation 'De Tussenvoorziening' helps homeless people in the city of Utrecht and its surroundings). The presence of municipal and meeting places is emphasized in the interview.

From this, it appears that formal guidance remains needed for the target group from the protected housing and the societal relief (the extent of guidance is person-specific, both the intensity and the duration are individually assessed), but also that inhabitants can support each other on components and that vulnerable civilians can also deploy their qualities for the other inhabitants by themselves. It appears that the continuous contact stimulates the neighbourliness and looking after each other. In this way, the informal support provides a contribution to the social recognition of vulnerable tenants and prevents social isolation and loneliness. The informal support also has a function in the daily supervision on each other in terms of monitoring (Van Klaveren, Van Triest, & Van der Velden, 2018, p.6)

Informal support is facilitated and stimulated by applying mutuality as a requirement for being allowed to live in the complex. It then concerns deploying oneself for a number of hours per week or month for the complex and/or its inhabitants. This may include support in daily cases, such as doing groceries for each other, helping with administration, or helping with odd jobs at home. When the helping hand is aimed more at guidance, the inhabitants should pass on their signals to the designated professionals (ibidem, p.26). Besides having sufficient space for meeting each other, a contact point in case of relapse is also necessary. If the built surrounding does not seduce us to social contact, the social



Work



Education



Support



Mutuality

Herman Hertzberger: Important though it is to make sufficient place-like areas that invite short- or long-term stays with 'official' or informal seating areas, this in itself is not enough. If a building is to function properly, it is essential that it is organized so that people do indeed encounter one another. When organizing the design, you can do a long way in influencing visual relationships and possibilities for encountering or voiding others. Strategic sight lines, places for sojourn and intersections of circulation routes articulated by inserting voids, landings, bridges, light and dark places, transparency, views out, views through and screens to conceal and protect – these are some of the means architects have at their disposal. This is an essential and enduring design theme. Space through its organization can have an attracting effect and bring or hold people together like a kind of electromagnetic field, by creating the conditions that best focus their attention on each other and keep it there (Hertzberger, 1999, p.156).

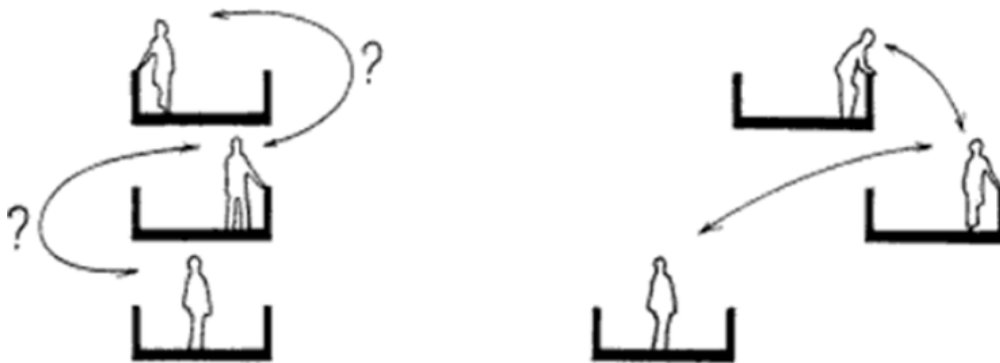


Figure: (n.d.). Social interaction Herman Herzberger [Illustration]. Retrieved from (12-12-2018), <https://nl.pinterest.com/pin/441563938443903933/?lp=true>

Common/meeting rooms (How do I create an appropriate room for organising activities and meeting each other?):

Almost all projects have a common room in which activities can occur. In most projects, common activities are organised, often by the inhabitants themselves, sometimes by an assistance or welfare organisation. Housing association Parana (a form of mixed living) was visited for the study, and some 'kitchen table talks' were held with the inhabitants. In the conversations, it turned out that the positioning of the common rooms is very important. The experience shows that the common room near the care office is better used than other common rooms.



Meeting

Design question:

How do I cluster apartments, common rooms, and district and care provisions to offer space for meeting?

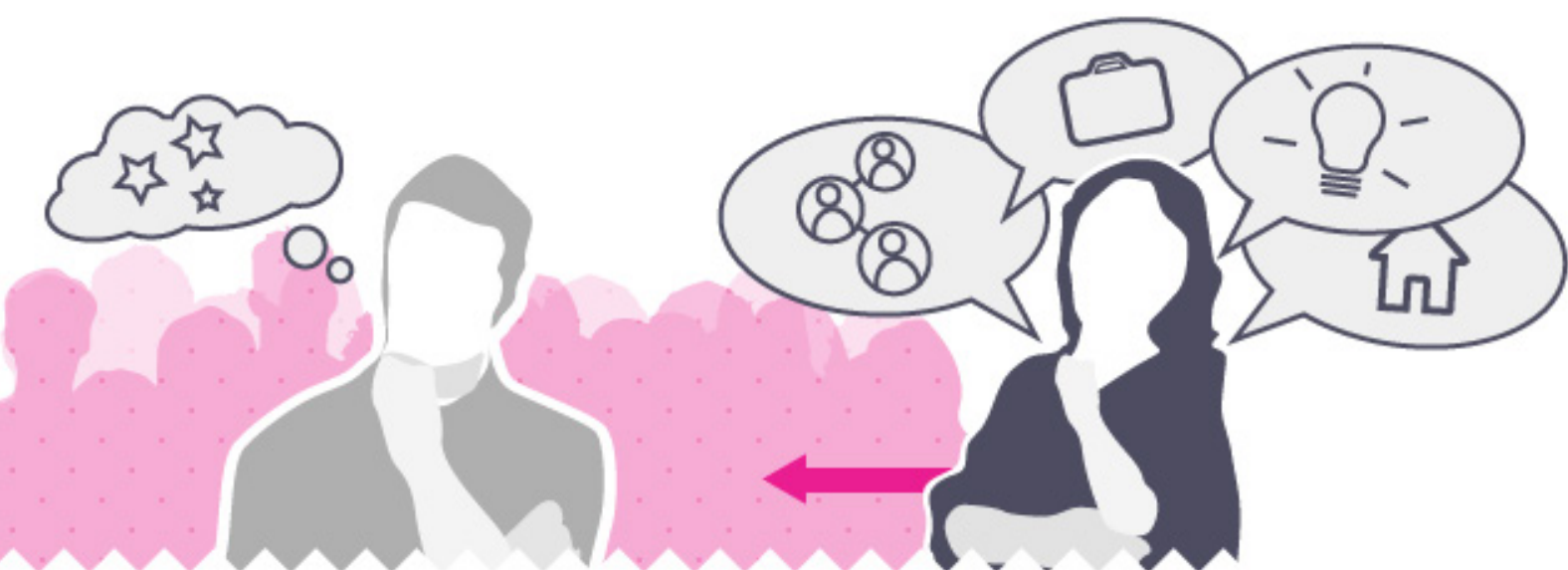
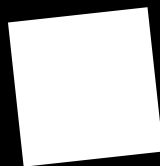
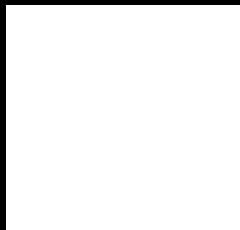
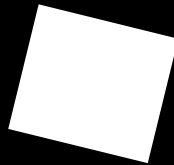
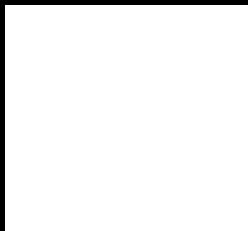
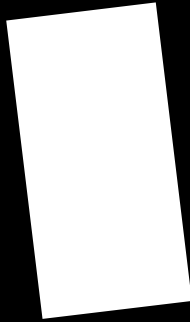
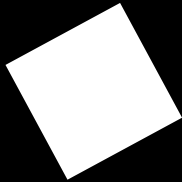
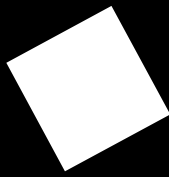


Figure: Kennisplein gehandicaptensector (2019, April, 02). Strategieën bij werken aan inclusie: Persoonlijke Toekomst Planning (PTP) [Illustration]. Retrieved from (12-12-2018), <https://www.kennispleingehandicaptensector.nl/inclusie/persoonlijke-toekomst-planning-ptp-strategieen-emb-eiv>



INTRODUCTION

Müllerpier is a peninsula surrounded by Parkhaven, Sint-Jobshaven and the Meuse in Rotterdam, the Netherlands. The former harbour pier was named after the founder of the transportation and trading company that owned the pier in the early twentieth century; the German Wilhelm Müller. In 1998, KCAP Architects & Planners was commissioned with the design of the redevelopment of the pier into a living, working and care area. The 6 hectares plan consists of 13 autonomous objects placed carefully next to each other to create an intimate, urban labyrinth contrasting the vast expanse of water. The 13 buildings with 575 dwelling units and public amenities are designed by four different architects: EGM Architects, Architecten Cie, Neutelings Riedijk and KCAP Architects & Planners self.



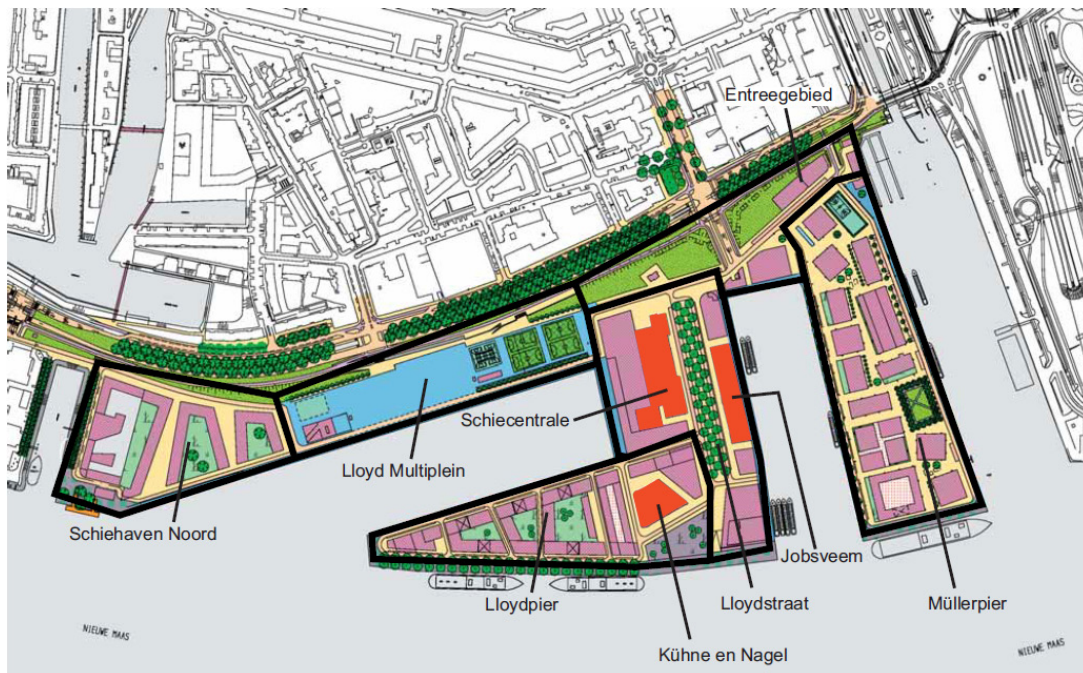
LLOYDKWARTIER

Lloydkwartier is a transformation of a former harbour area. Even though the harbour business has moved to the Hoek van Holland due to the enlargement of scale, the original function is still visible today. The railways, the warehouses, the offices and quay are still part of the identity of the Lloydkwartier today.

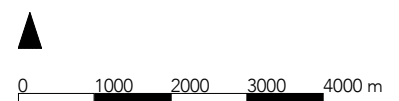
Lloydkwartier consists of four main areas: Müllerpier, Lloydpier, Schiehaven Noord and Lloydstraat together with Entreegebied. The Müllerpier and Lloydpier are developed as a residential area, whereas Schiehaven Noord will be

a combination of both living and working. The Lloydstraat and Entreegebied are characterised by the mix of living, working and recreation.

The four areas are differentiated because of the form, location, existing buildings and program. There are different ways to connect these areas, mainly by use of similar colours and texture of materials. The architecture refers to the former tough harbour environment.



Source: Welstandsparagraaf Lloydkwartier, 2005

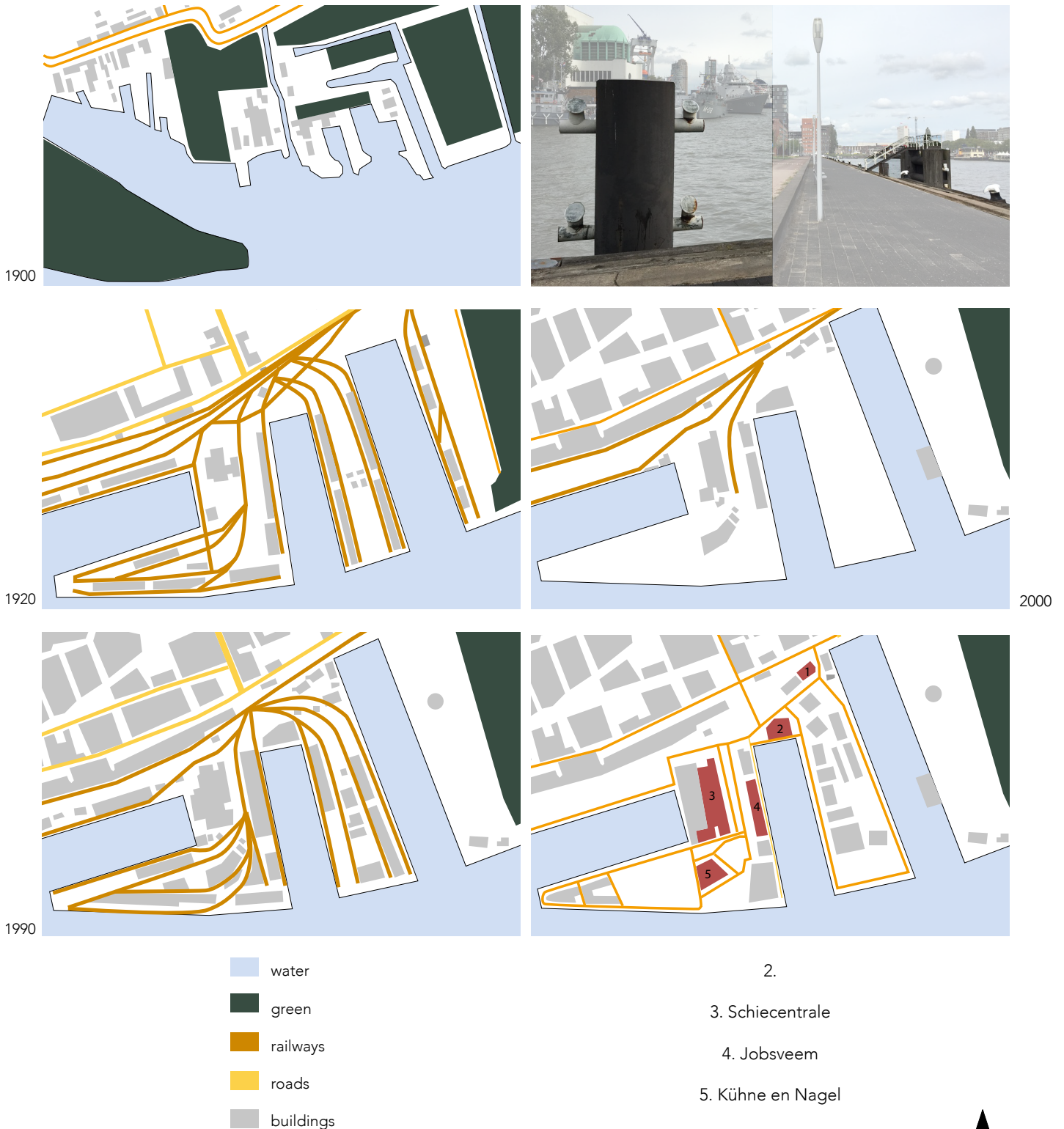


HARBOUR AREA TO RESIDENTIAL AREA

Müllerpier is surrounded by water from three sides. During the late 19th century the area was characterized as rural, which was transformed during the early 20th century to a harbour environment. The practicality of having the warehouses close to the water with adjacent railways had a great influence on the urban design. During the mid 20th century, most of the railways have been replaced by car roads and slow traffic. The late 20th century is characterized by the transformation of Lloydkwartier into a residential, working

and recreation area. Five buildings deemed historic buildings by the municipality of Rotterdam have been restored and reused. These buildings are the Maastheater, Schiecentrale, Jobsveem, Kühne and Nagel and a commercial building with an unknown name. A masterplan for Lloydkwartier was developed in 1997. In 1998 KCAP Architects & Planners designed the urban plan for Müllerpier, which is still under construction today.

TRANSFORMATION

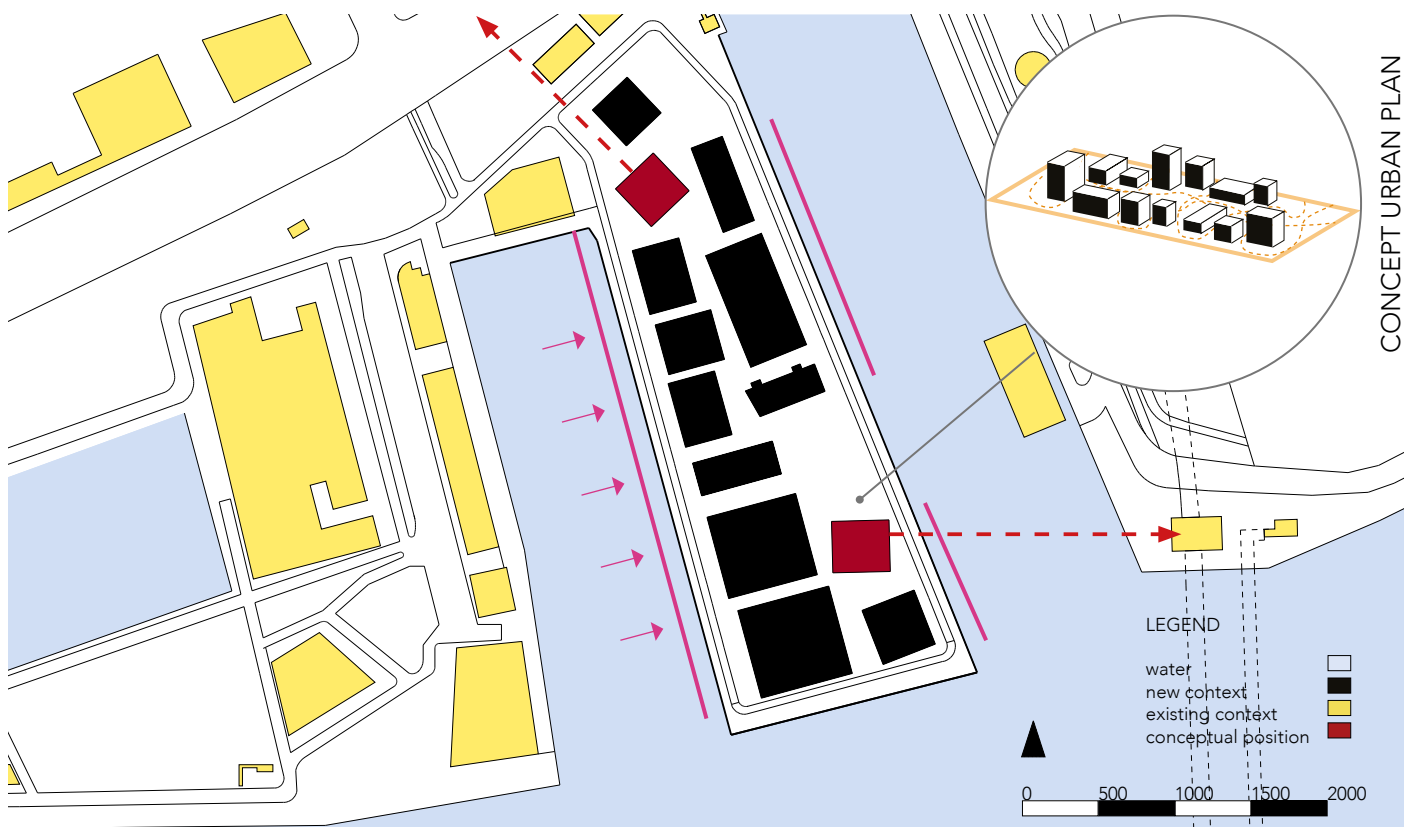
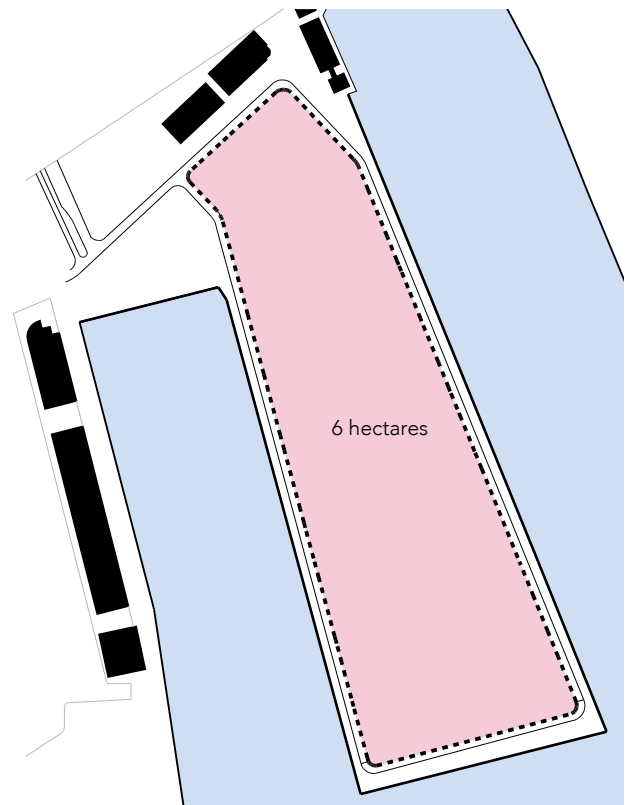
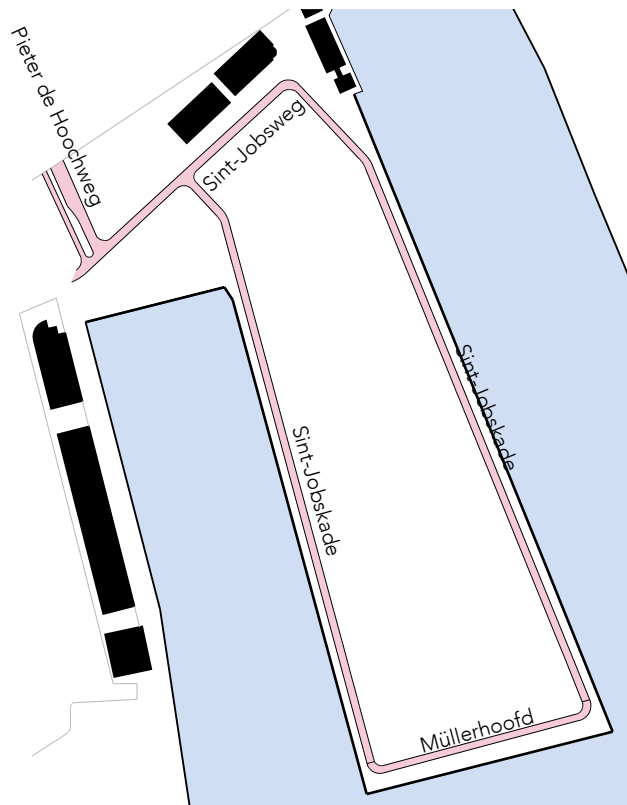


MÜLLERPIER

The urban plan for Müllerpier consists of 6 hectares area, with three existing buildings on the north side.

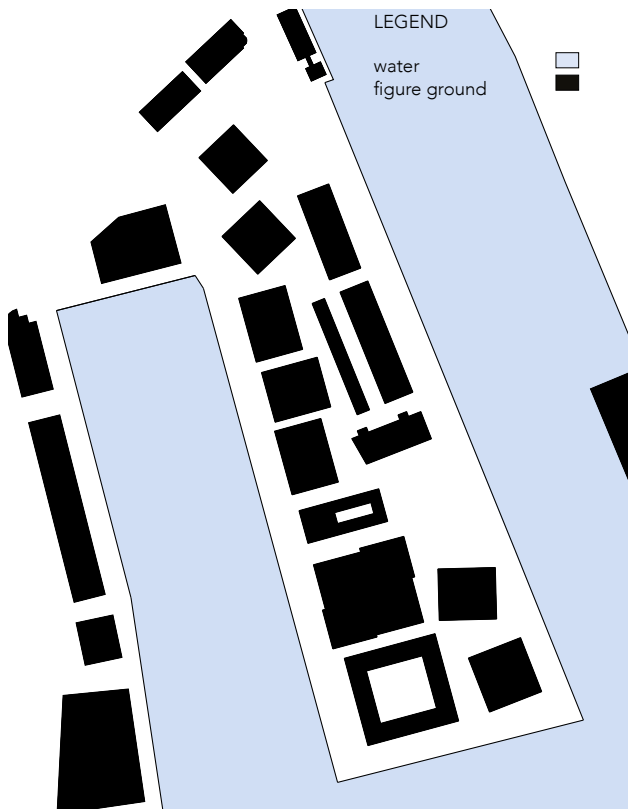
The plan is based on a car free area. Therefore, there is only

one main access road outlining the area. There are 13 geometrical blocks placed in the plan, two of which are twisted from their axis to face so called landmarks, to connect with the surrounding area.

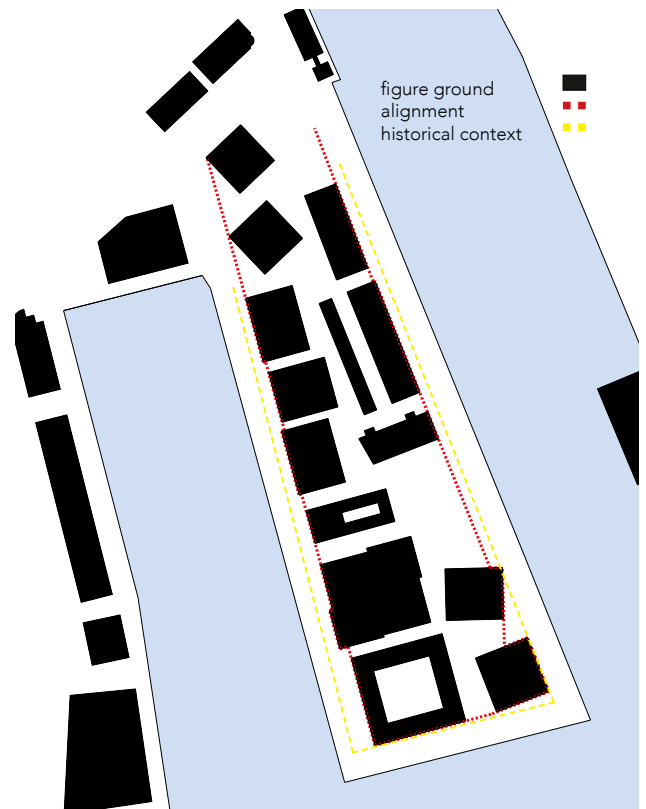


The buildings on the west side are placed closer together, to block the prevailing southwest wind. The buildings on the east side of the plan show more open spaces in between the blocks.

FIGURE GROUND

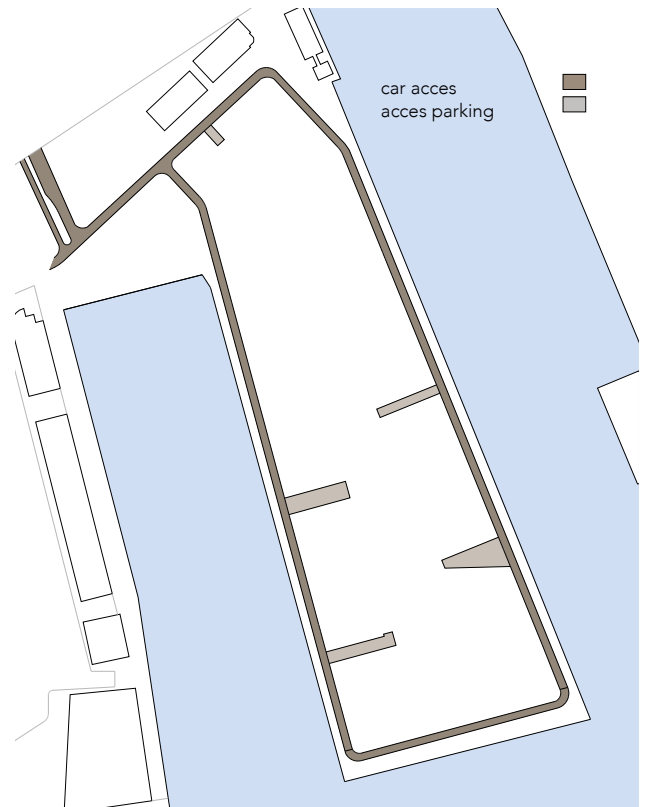


ALIGNMENT



The alignment of the buildings is determined by the former railways. The buildings are all designed within this building line, some of the buildings are more or less closer to this line.

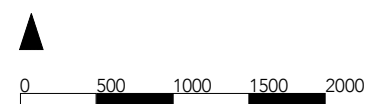
CAR ACCESS



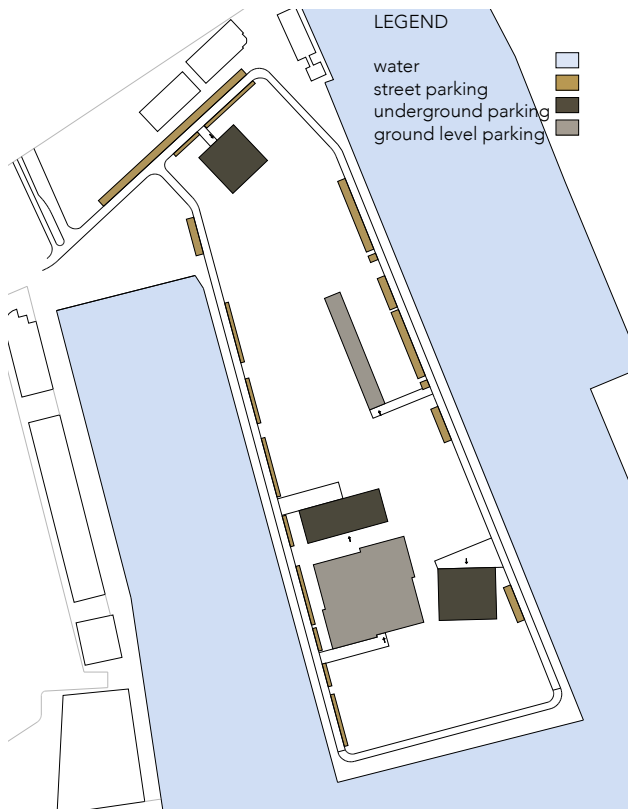
PLINTH FUNCTION



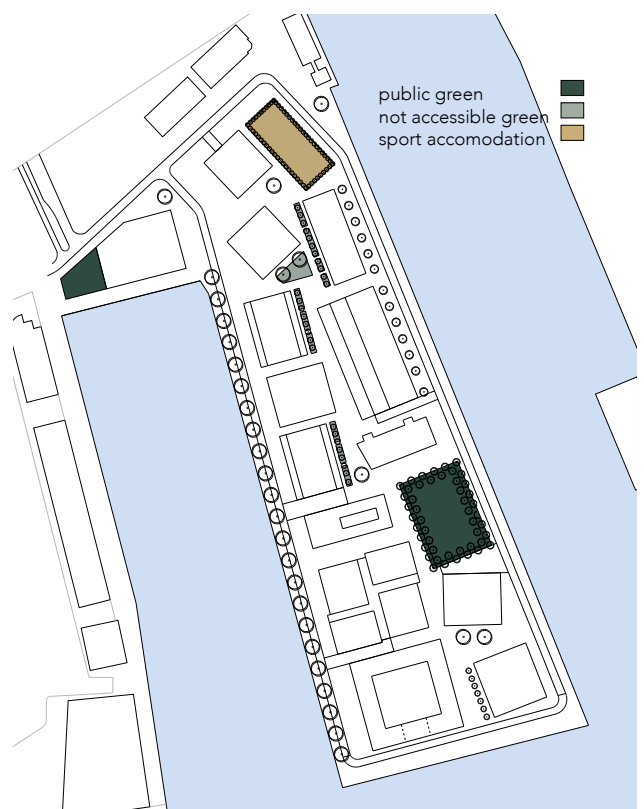
The urban plan is predominated by the residential buildings. There are a few amenities such as a kindergarten, restaurant and a gym. The ground floor height of each of the building blocks is 3,20 m to accommodate both living and working in order to anticipate future change.



PARKING

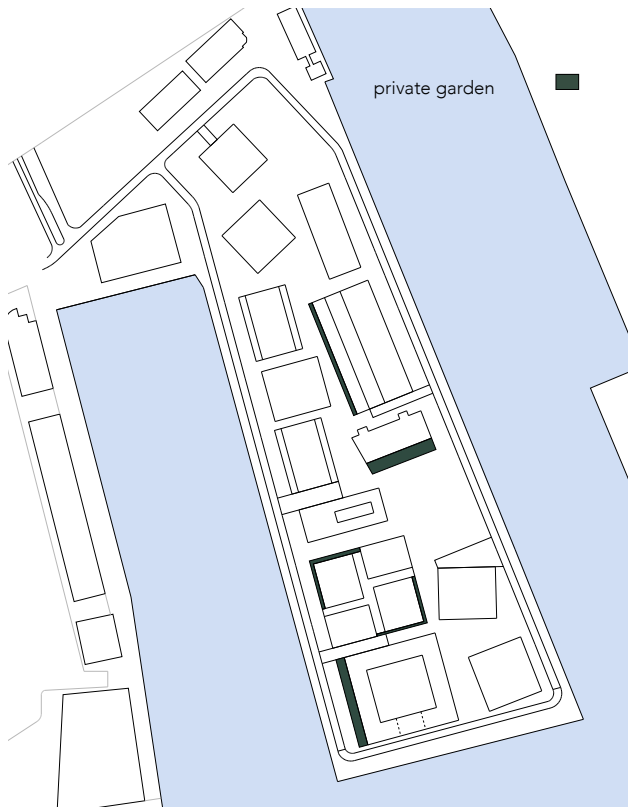


GREEN SPACE

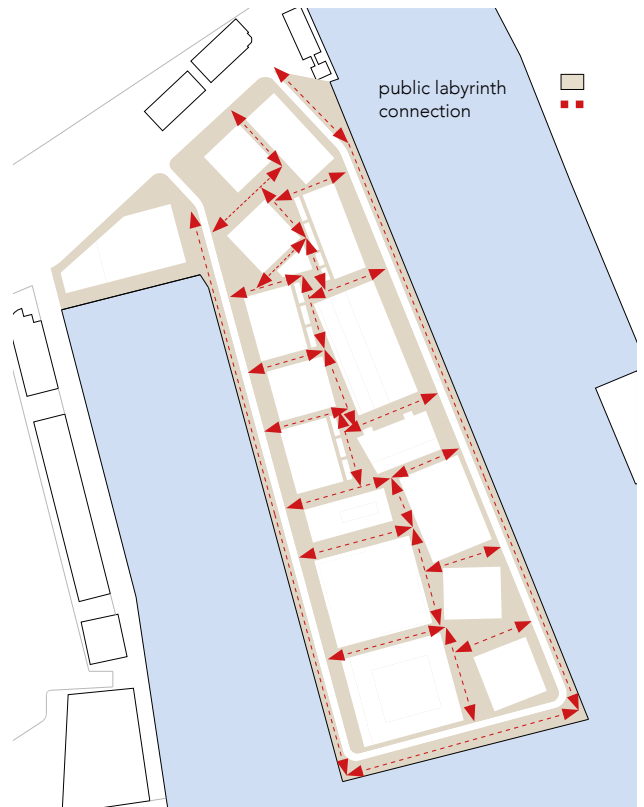


There are several types of public space to be differentiated in the area: green accessible, paved accessible, green inaccessible and trees.

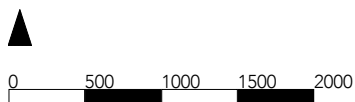
PRIVATE GARDENS



PEDESTRIAN LABYRINTH



The public path is characterised by the head architect as a pedestrian labyrinth. Meaning, one can go from one place to another by different ways and not always following a straight line.

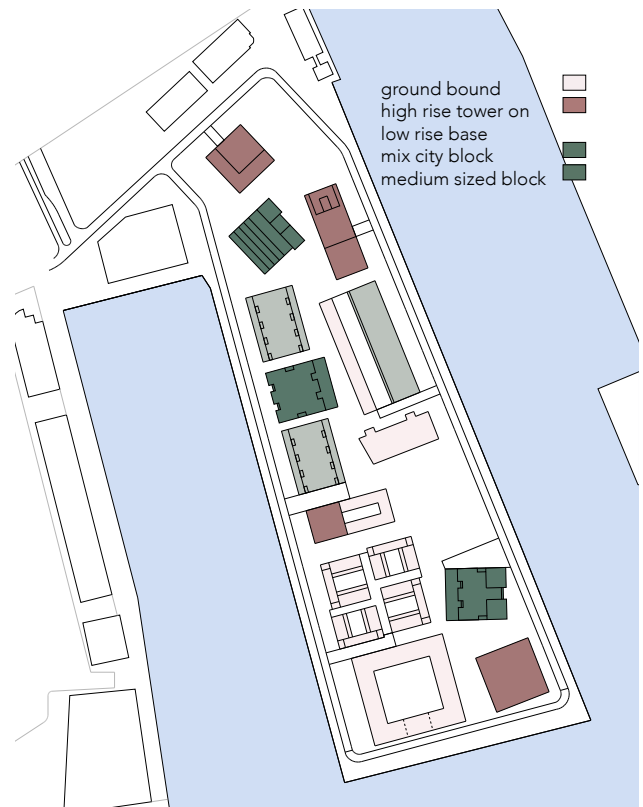


DWELLING ACCESS - STREET LEVEL

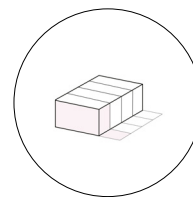


Each of the building blocks is accessible from all sides, to avoid dead corners.

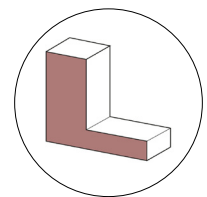
BLOCK TYPOLOGIES



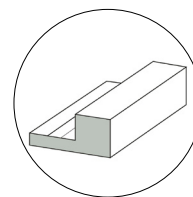
DWELLING TYPOLOGIES



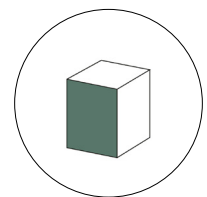
GROUND BOUND DWELLING



HIGH RISE TOWER ON LOW RISE BASE



MIXED CITY BLOCK



MEDIUM SIZED CUBE

The ground bound dwellings are primarily located on the south west side of the area, whilst the high-rise towers are located on the north and south east side of the urban plan. This has to do with the path of the sun, so during midday the towers won't block out the sun for the ground bound buildings. The urban block and the middle-sized cube form an intermediate form between the two height extremes.



Single family dwelling



Apartments



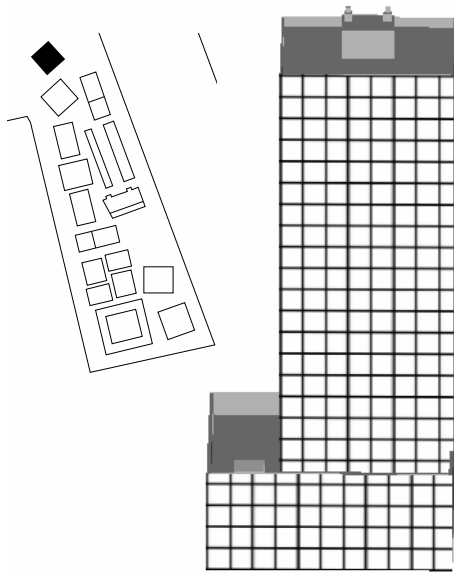
Maisonettes



0 500 1000 1500 2000

AXONOMETRIC PROJECTION

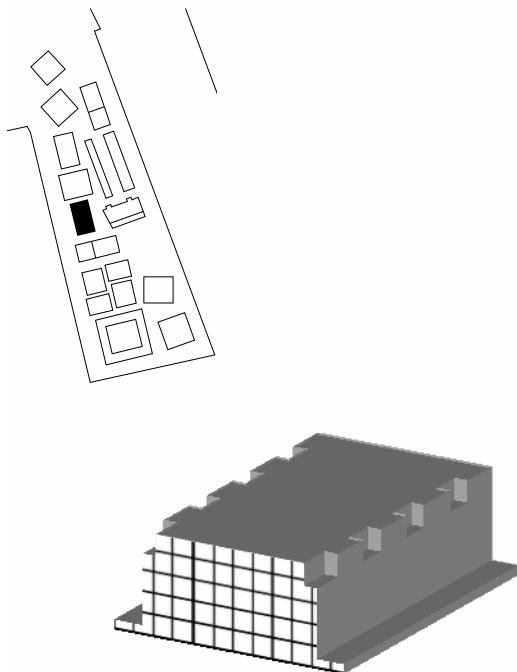
The form of the buildings can be characterized as a formal, closed, geometric block on the lower side, with a more articulated form on the top of the building.



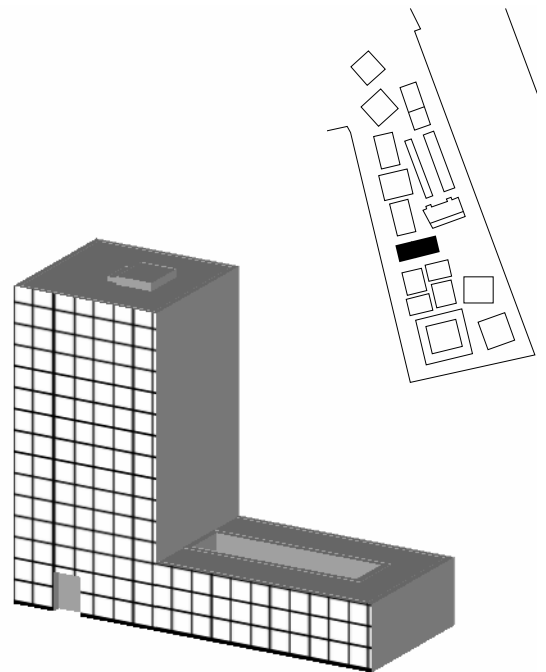
1. Witte de With – EGM Architecten (2003)
20 stories
86 apartments



2. Aert van Nes – Van Bergen Kolpa Architecten, Neutelings
Riedijk (2009)
10 stories
60 apartments
32 x 32 m footprint

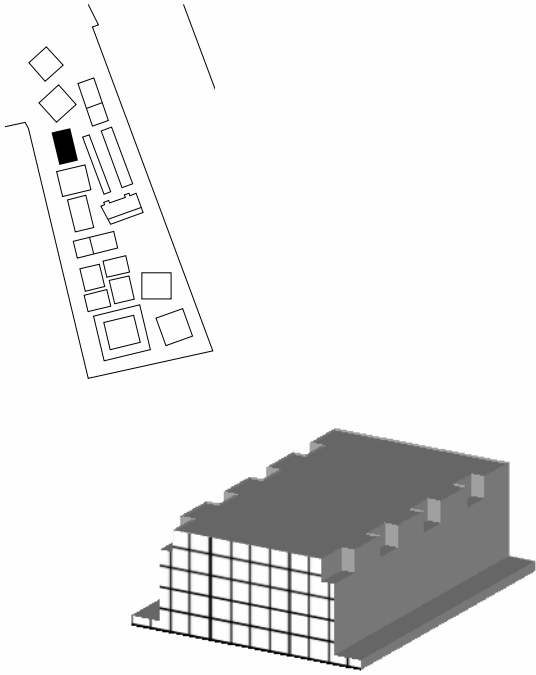


7. Oldenbarnevelt - Architecten Cie
21 apartments

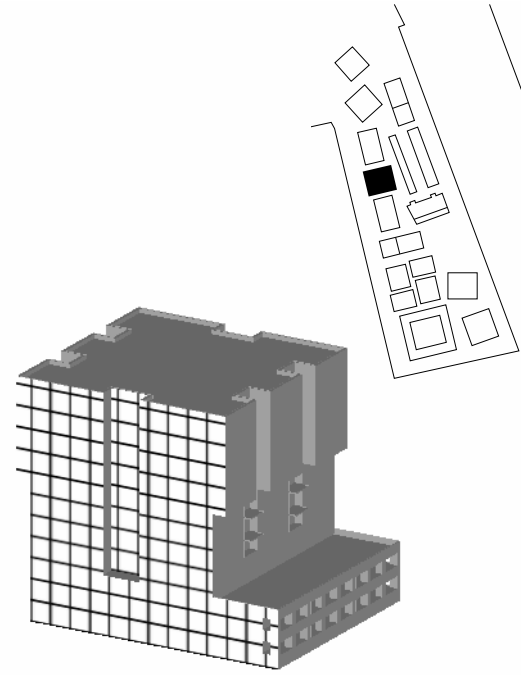


9. De Ruyter – Van Dongen-Koschuch (2008)
57 apartments
6 single family dwellings
54 parking spaces

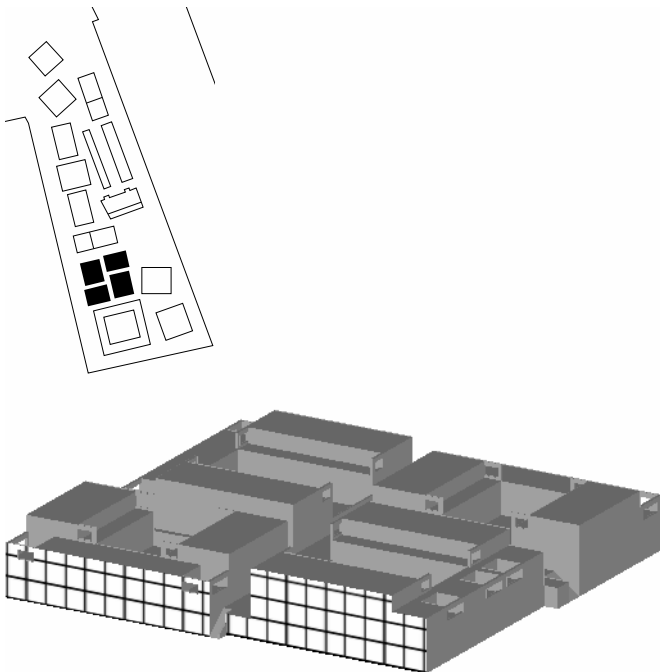
Axonometric projection 1:1000



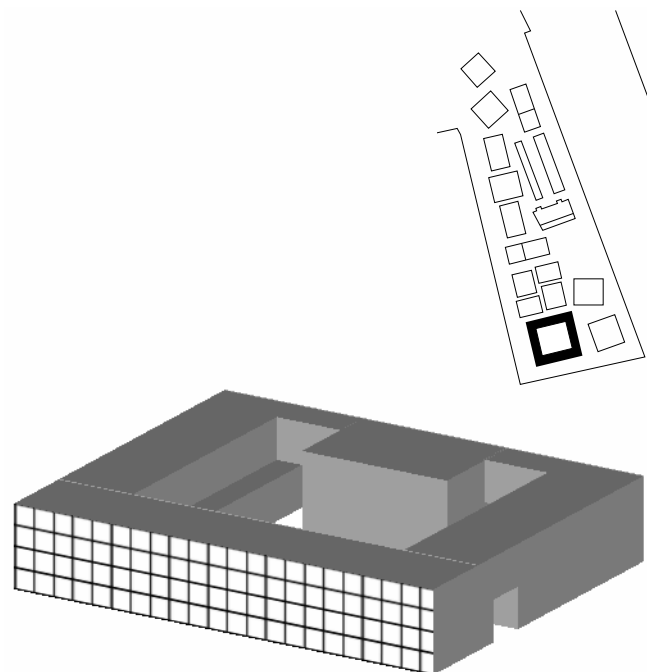
4. Tromp – Architecten Cie
21 apartments



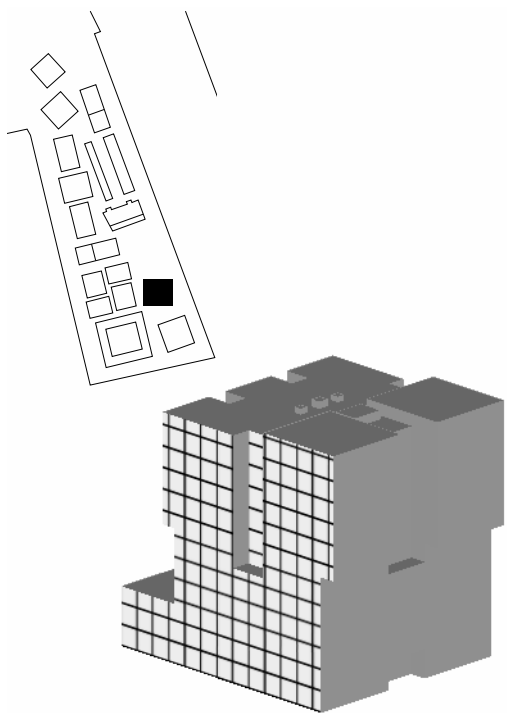
6. Hollandia – Neutelings Riedijk
50 apartments
31,5 x 31,5 m footprint



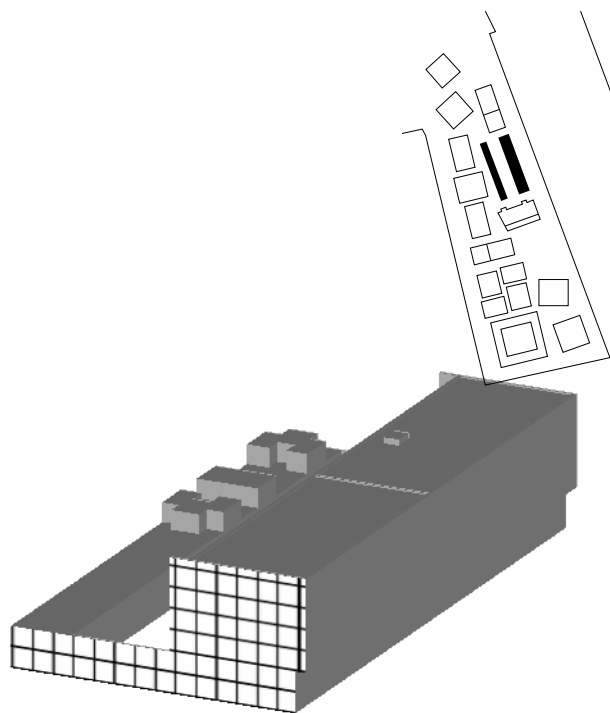
10. De Eendracht – EGM Architecten



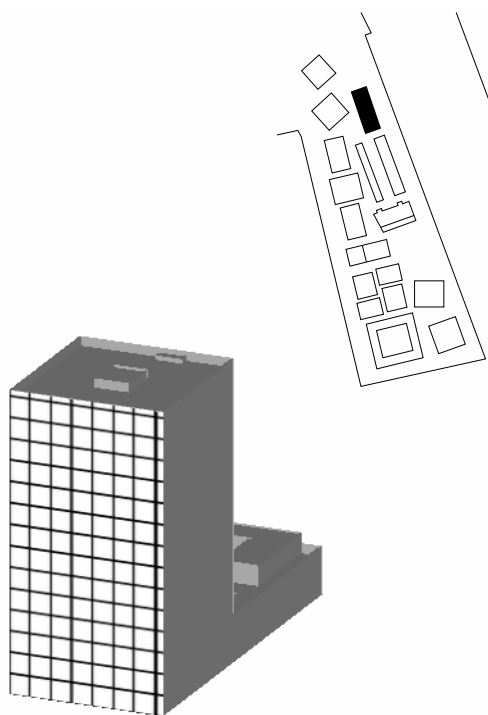
12. Create@Mullerpier -
30 single family dwellings



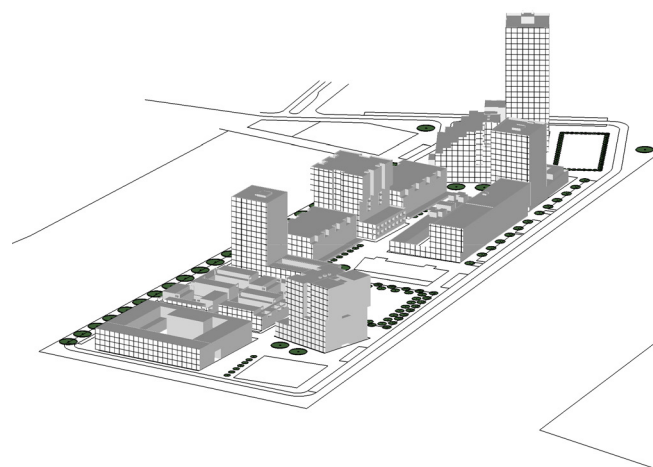
11. Mercurius – Van Bergen Kolpa Architecten ism Neutellings Riedijk (2009)
10 stories
60 apartments
32 x 32 m footprint



5. De Delft – EGM Architecten



3. Crescendo – Van Dongen-Koschuch
6 single family dwellings
57 apartments
54 parking spaces
49 m high
Axonometric projection 1:1000

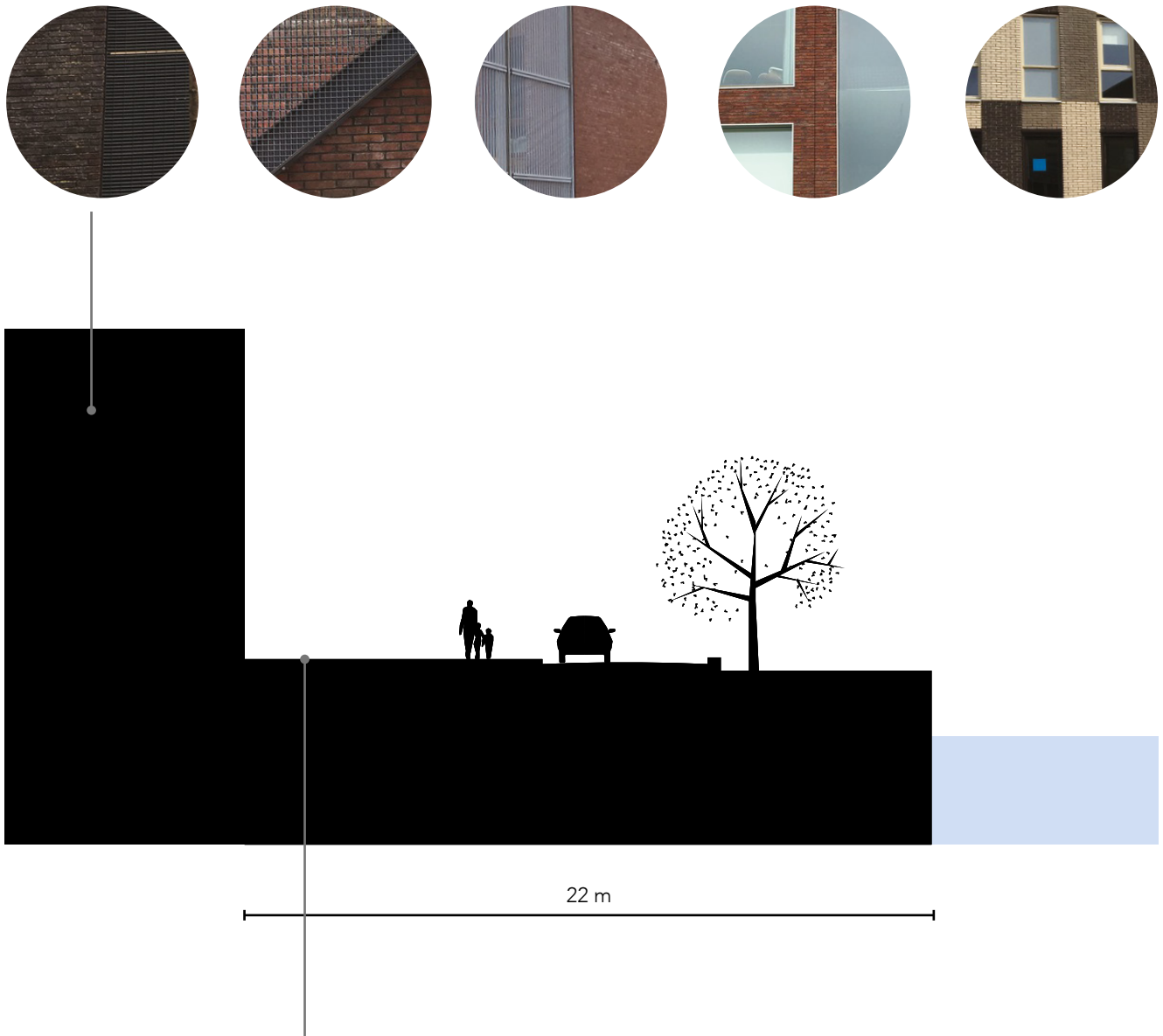


Overview- 1:2000

MATERIALISATION

Müllerpier is a peninsula surrounded by Parkhaven, Sint-Jobshaven and the Meuse in Rotterdam, the Netherlands. The former harbour pier was named after the founder of the transportation and trading company that owned the pier in the early twentieth century; the German Wilhelm Müller. In 1998, KCAP Architects & Planners was commissioned with the design of the redevelopment of the pier into a living, working and care area. The 6 hectares plan consists of 13 autonomous objects placed carefully next to each other to create an intimate, urban labyrinth contrasting the vast expanse of water. The 13 buildings with 575 dwelling units and public amenities are designed by four different architects: EGM Architects, Architecten Cie, Neutelings Riedijk and KCAP Architects & Planners self.

Facade materials



Ground paving



MASTERPLAN INTRODUCTION

The following pages contain the urban design proposal for Minervahaven. In this part, Minervahaven is analyzed and redesigned for new demands. As part of Westelijk havengebied, Minervahaven is being researched to transform from a high potential area to high-dense areas filled with mainly housing, in 2050. In regard to this research, a smaller piece, a new concept on Minervahaven is designed. With an analysis, an interpretation is made of potentials. These potentials combined with a vision have created a new concept of Minervahaven; "The active Harbor".

Analysis of Minervahaven combined with case-studies of Borneo-sporenburg, Müllerpier, Hamburg, and Norfolk have fed the design process for "The active Harbor". Besides the analysis, visualizations by drawings and models have helped to develop and elaborate on the new interpretation of Minervahaven. These products are shown in the following pages.

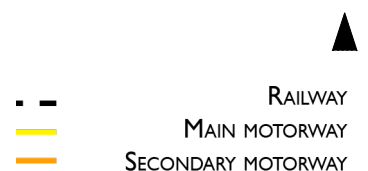
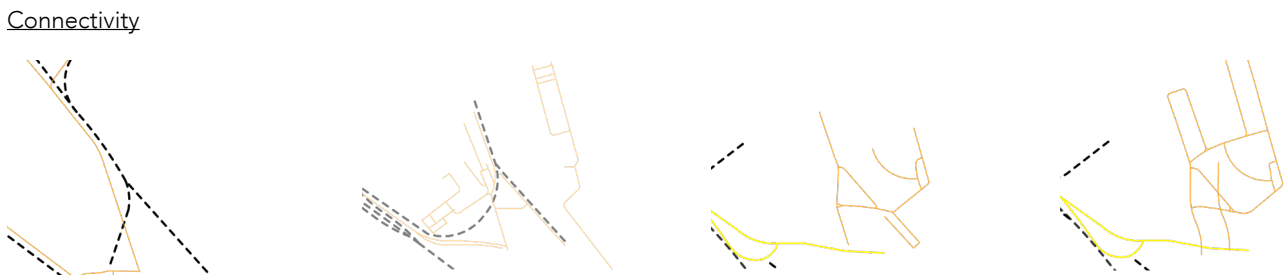
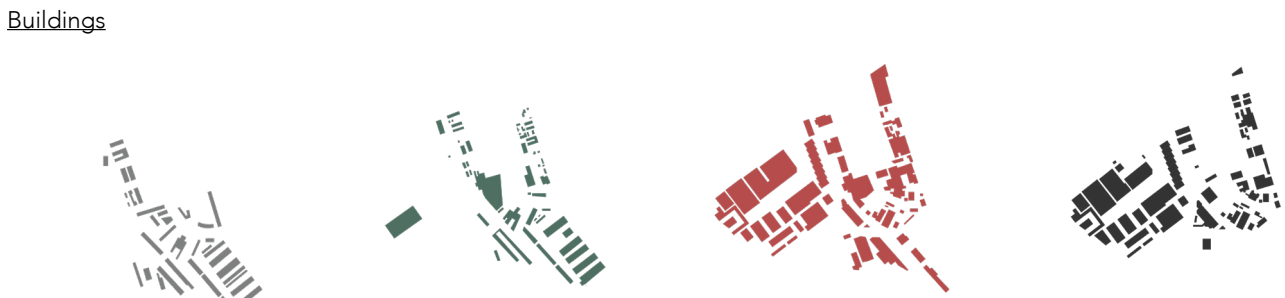
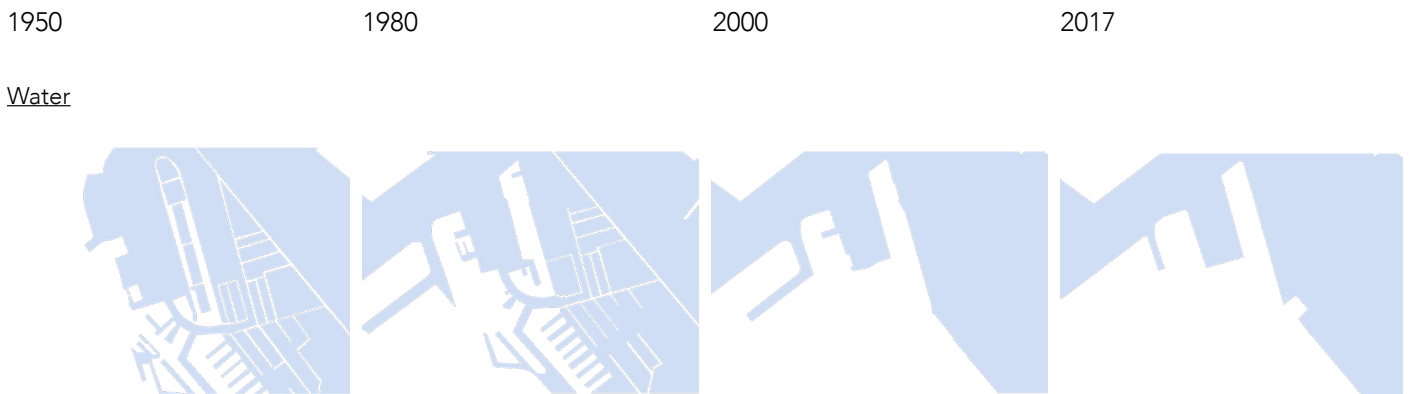
"The active Harbor" aims to focus on the scale of the human being. Organizations of amenities alongside the bay and fluctuations in building heights are examples of how this is aimed to be succeeded. A harmonious play between anonymity and identity keep the public realm a vivid experience to move through.

HISTORY

The Houthaven was developed in 1876, similar to the construction of the North Sea Canal, for the skip and storage of wood. It was the first dug harbor in Amsterdam. In the past, the profile of the area was clear; timber trade, transshipment, and storage took place in the area.

A map overview from 1867 from Minervahaven shows that the area is characterized by a continuous transformation. Depending on the need for space and the wishes of the users of the area, quays have been constructed, the land has been won, port facilities have been laid out and some of them have been filled in. Road and rail infrastructure has been realized. In the course of time, the built-up area has also increased.

Until the sixties and seventies, the business activities were 100% focused on wood transshipment and timber trade. In the 1970s and 1980s, the functional character of the area changed from large-scale water-based activities to more small-scale, land-based business activities. Wood companies in the area transport their raw materials and products less and less over the water and more and more often by road. Since the 1970s, other types of business activities have also entered the area. Wholesalers, machine factories, DIY stores are located in the area (Amsterdam 2007, p.7).



QUALITIES

Existing qualities



Harbor activity



Cultural heritage



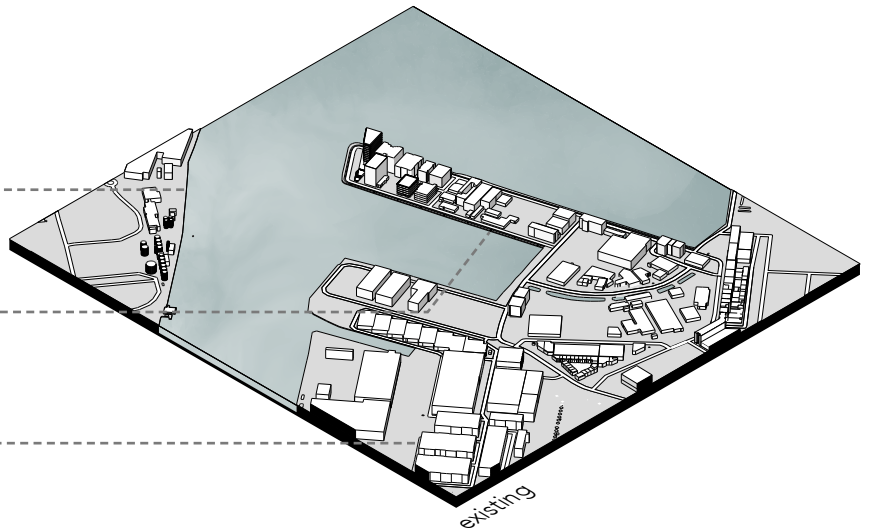
Historical elements



Quay



Harbor furniture



existing

New qualities

Identity vs. anonymity



Orientation points



Free sight with diagonal



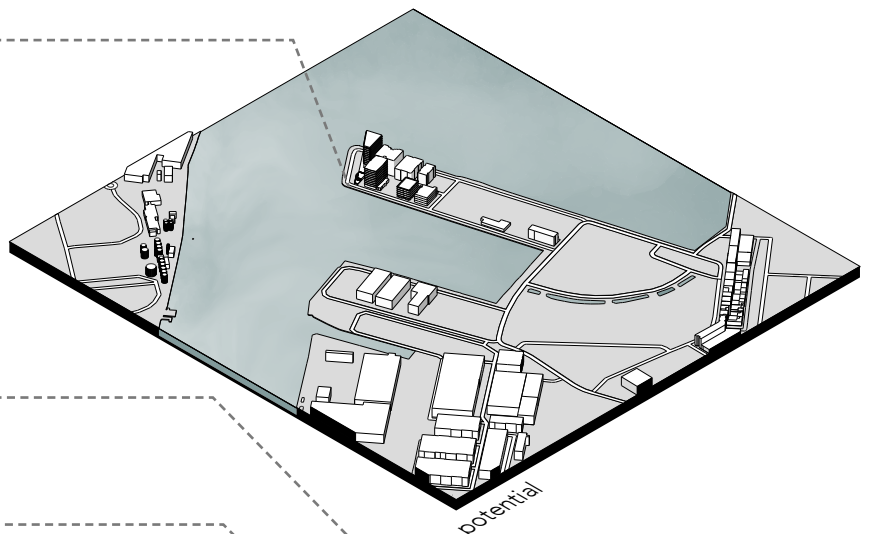
Active harbor



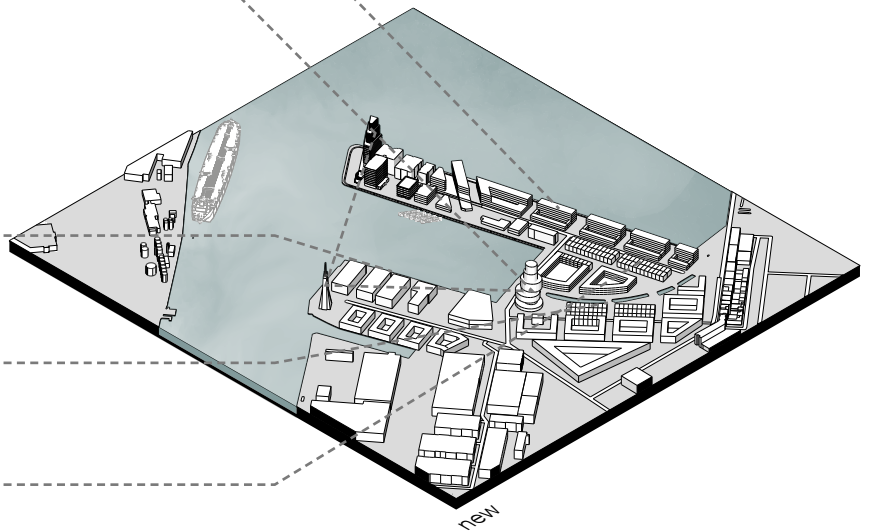
Infrastructural hierarchy



High density in urban area



potential



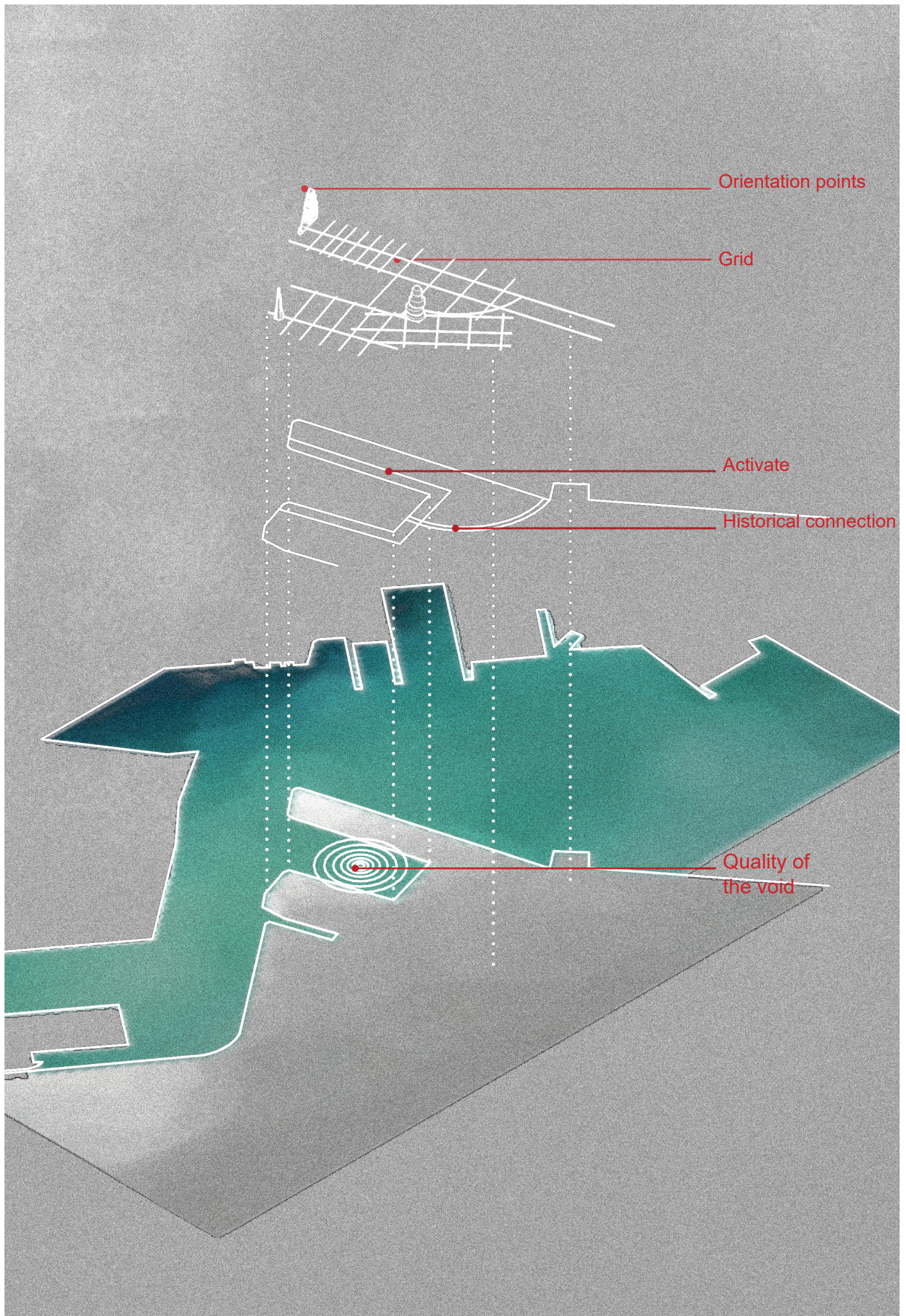
new

In comparison to the characteristics of Amsterdam, the area of Minervahaven have some qualities of great potential. Above an overview of these qualities is illustrated. The most significant characteristic of Minervahaven is the presence of water. Spatially this water creates a quality of emptiness, a visual connection over "free-space".

Specified in the illustration are existing qualities complemented with newly introduced qualities. The existing qualities pointed out, are characteristics which make Minervahaven unique in comparison to the context of Amsterdam.

It is a merely generously set up area in regard to spatiality. With its harbor-like identity, it creates a robust finish and a defined scale. The furniture, measurements, and heritage become the identity bearers of Minervahaven.

In combination with its existing qualities, new elements are introduced. These elements enforce the functional transition taking place in this area. These elements aim to make Minervahaven a pleasant place to live.

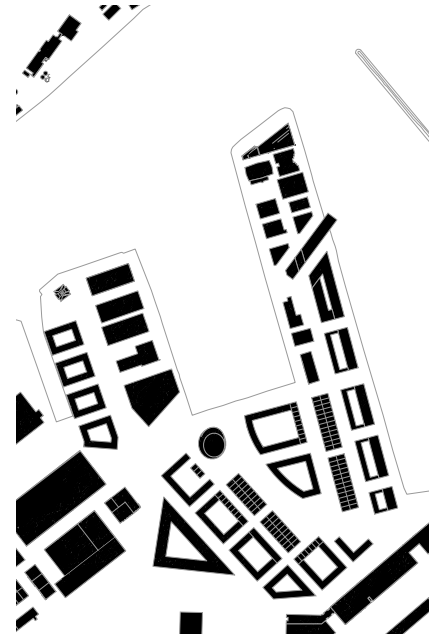


CONCEPT

MORPHOLOGY

The design integrates 100 dwelling per hectares in the harbour area. It combines the existing morphology with the newly integrated dwellings. On the pier, the existing structure is still recognisable by its form and orientation. The re-integrated Danziger bocht determines the morphology on the new developments on the south side.

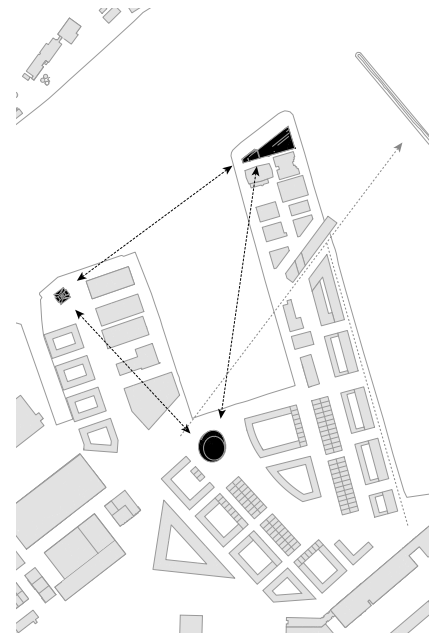
The design has four types of building blocks to offer a diverse spectrum of dwellings for different target groups. Combined with a diverse program of public amenities it creates a vivid experience to live in.



SIGHTLINES & LANDMARKS

The design uses landmarks and sightlines as orientation points in the urban design. The Landmarks are three hybrid buildings with leisure, commercial and residential purposes. These landmarks can be distinguished by their shapes and heights.

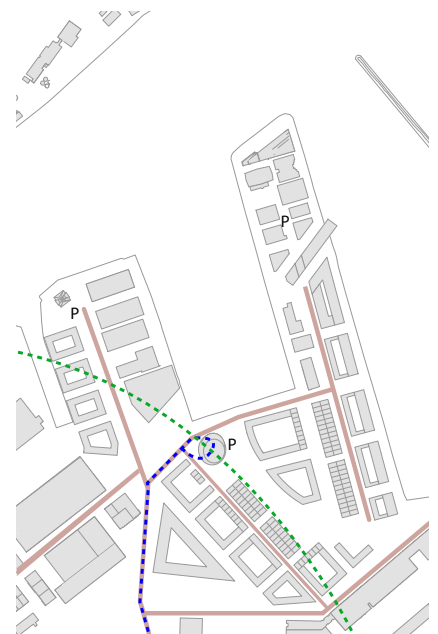
The most common access point of the plot is the road that connects the harbor to the Houthavens, on the south-west side. By entering the plot a diagonal building frames the view towards the open water. The theatre and transit-hub are designed to guide the view towards this diagonal.

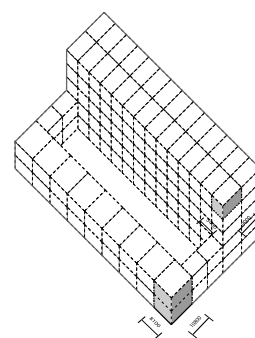
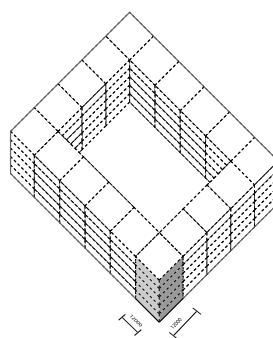
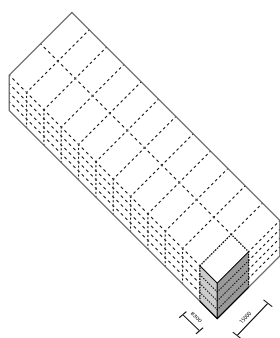
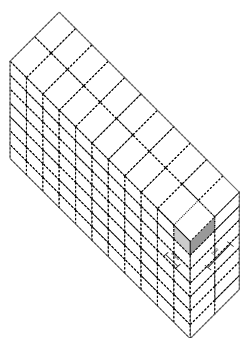


INFRASTRUCTURE

The area is characterized by its many car-free zones while all the buildings are easily accessible from the car parking. By strategically placing three parking in the harbor it provides enough parking space for the residents and visitors and ensures its connectivity.

One of the landmarks is the transit-hub. This transit hub has parking space, a bus stop and a metro station. This hub forms the connection to the other districts of Amsterdam. In the future this sub hub may connect to a bigger hub at station Sloterdijk.





● Apartmentblock
8,3 x 7,5 m*

● Townhouses
8,3 x 15 m*

● Perimeterblock
12 x 12 m*

● Combined
8,1 x 10,8 m* & 5,4 x 9 m*

* measurements per dwelling



MASTERPLAN

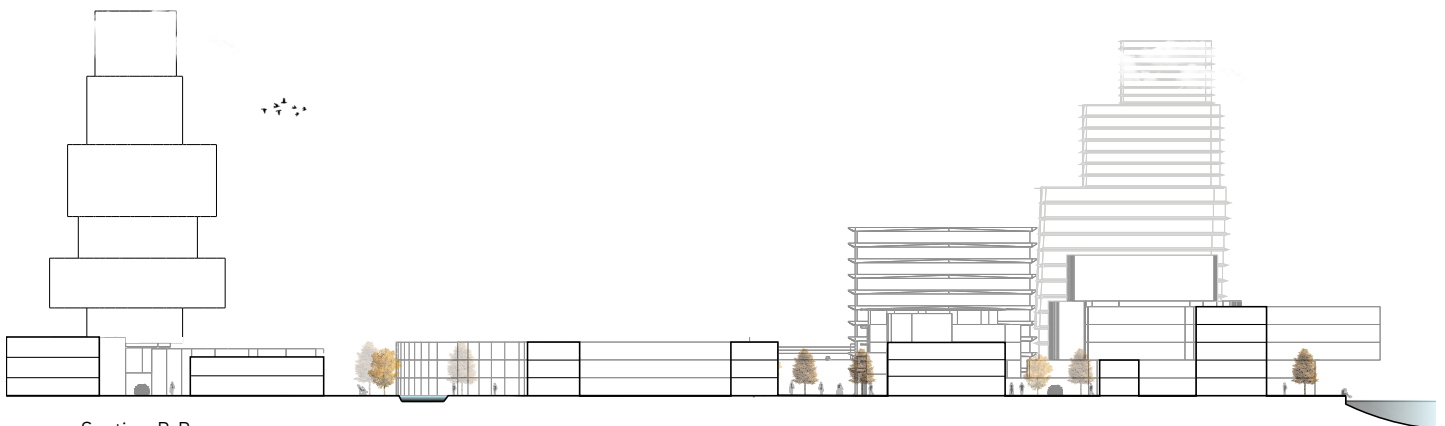
Minervahaven shows that the area is characterized by a continuous transformation. Depending on the need for space and the wishes of the users of the area, quays have been constructed, the land has been won, port facilities have been laid out and sometimes again filled up and road and rail infrastructure has been realized. Even now, the Minervahaven is being transformed into a residential and work area.

In front of you lies the new Master Plan. The former activity on the south side of the master plan is giving way to the new developments. Some of the existing historic and office buildings on the north side are retained. The identity of the area is created by the height accents, the cultural activities, the sight lines and a variety of special forms of living. The central Hub forms a connection point with the city. The

former waterway that connects the Minervahaven with the Nieuwe Houthaven is being transformed into a park for the new residents. The connection with the Houthavens forms the area into a whole. The buildings vary greatly in terms of experiential value as diversity. The two sides of the master plan are characterized by a large scale, the warehouse size. Towards the Minervahaven, the buildings are becoming smaller and more intimate.



Section A-A



Section B-B

IMPRESSIONS

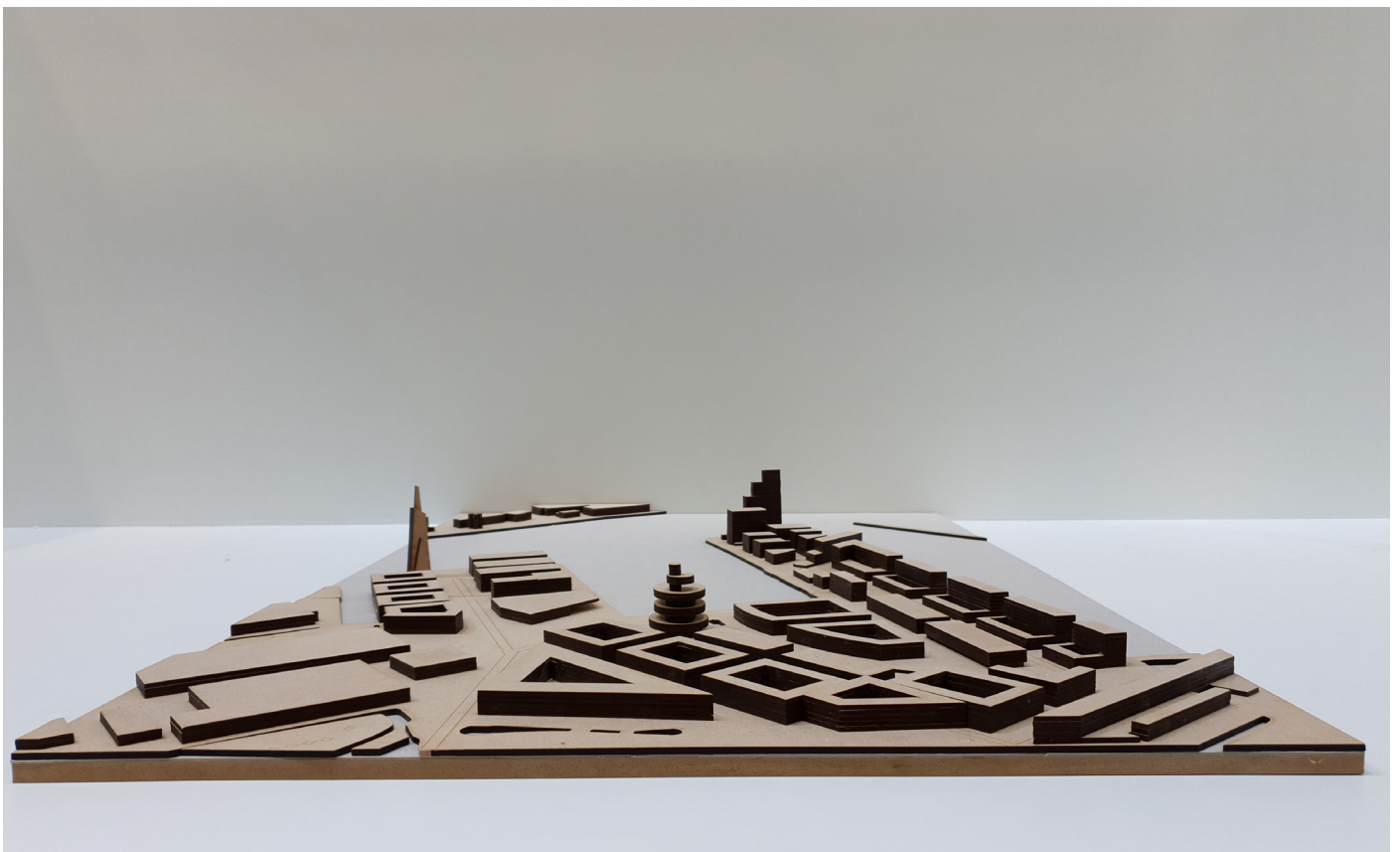
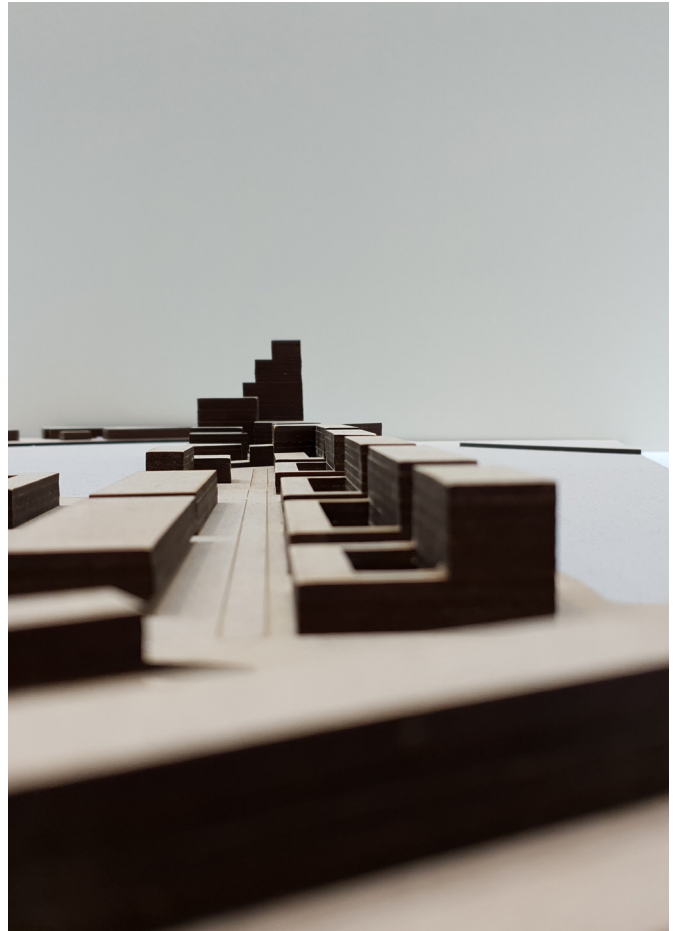


Impression on the quay adjacent to 'het ij'

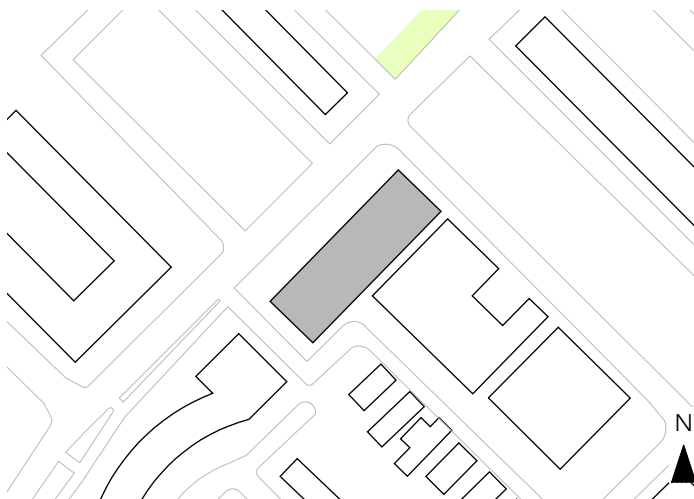


Impression on the active harbor

MODEL



HOUSING ASSOCIATION PARANA- UTRECHT



Scale 1:2500

Parana is a residential live-work complex for up to 44 ex homeless people, and 24 regular residents.

There is a kiosk on the ground floor where all residents occasionally can run a service. On the first three floors both 'vulnerable' and 'regular' residents live together (ratio 1:1). On the fourth floor there is a Parana Short Stay facility runned by the Tussenvoorziening. The Tussenvoorziening has an office on the second floor. On the roof there is a large roof terrace for all residents. Furthermore, there are two communal living spaces with kitchen and balcony in the

building. From the regular residents, a minimum time effort of an average of 3-4 hours per week is required, an active attitude in participation in formal activities and entering into 1 on 1 contact.

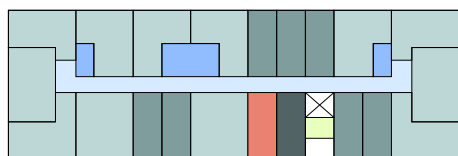
Location: Paranadreef, Utrecht

Architect: Dick van Gameren, Mecanoo Architects

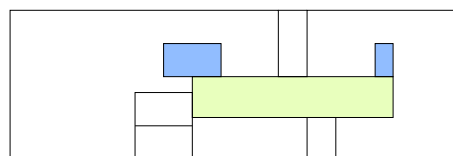
Apartments: 30 2-room apartments, 16 1-room apartments.

Facilities: Night care, neighborhood restaurant, kiosk, office space

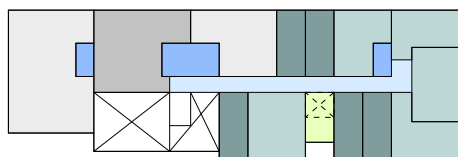
Functions



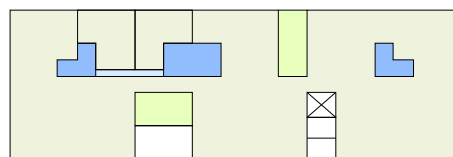
Second floor



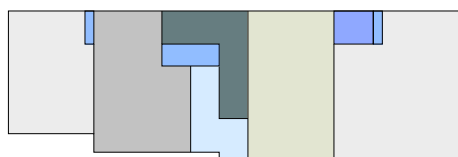
Roof terrace



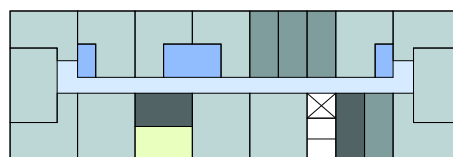
First floor



Fourth Floor

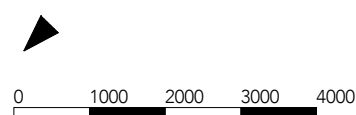


Ground floor

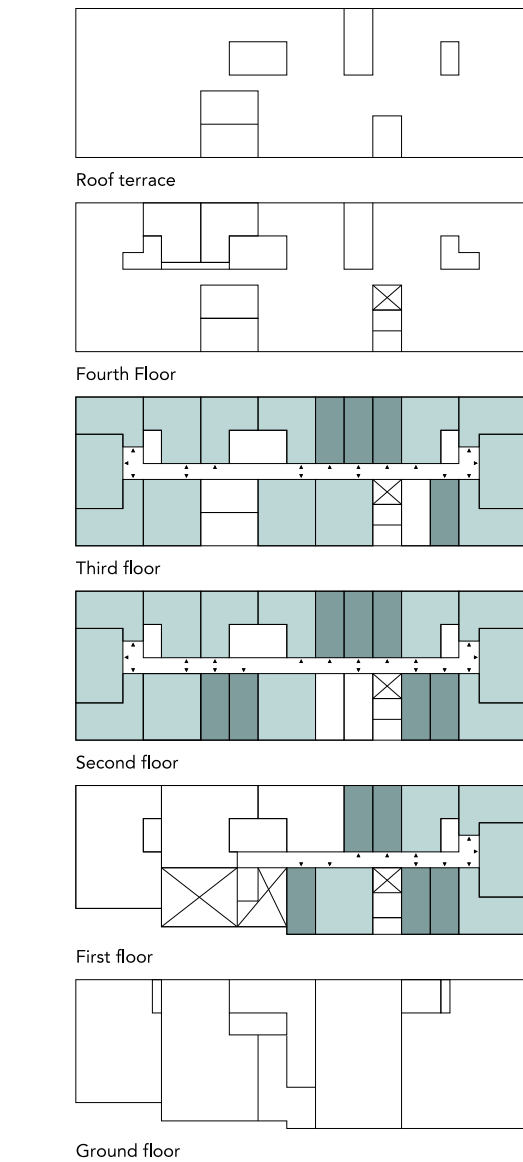


Third floor

- Communal space
- 1-room apartments
- Kiosk
- Commercial area
- Care office
- 2-room apartments
- Bicycle storage
- Restaurant
- Short stay accommodation
- Communal outdoor space
- Technical space
- Corridor
- Staircase



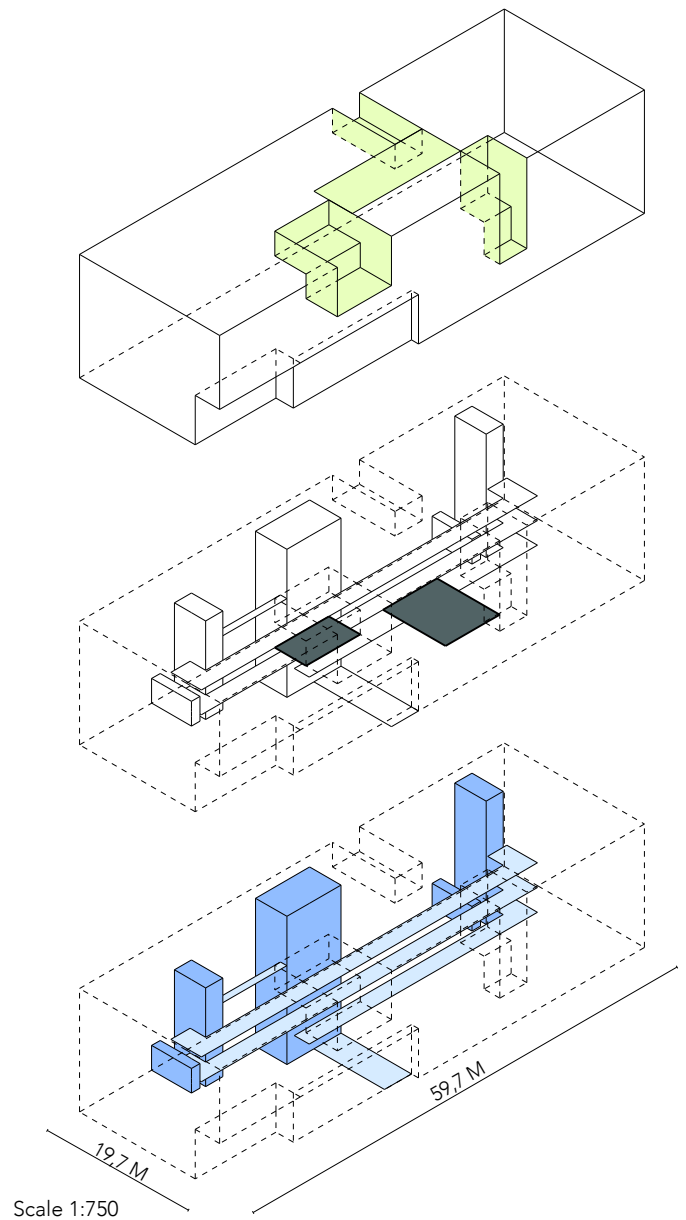
Clustering



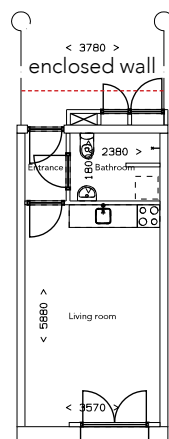
Scale 1:1000

- 1-room apartments
- 2-room apartments
- Staircase
- Corridor
- Communal space
- Communal outdoor space

Axonometric projection

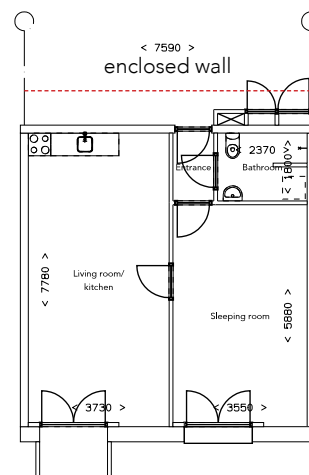


Dwelling layout



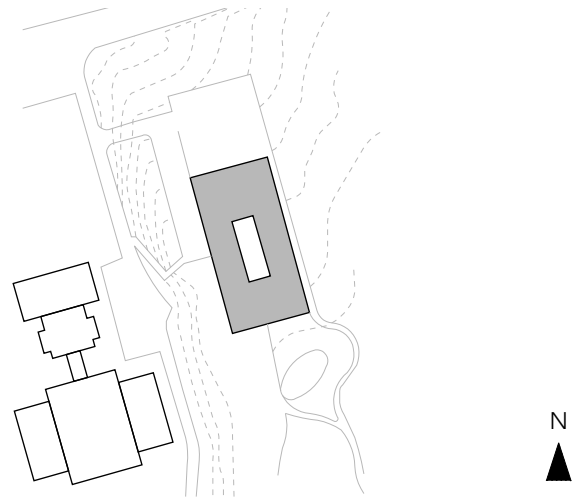
1-room apartment 28 m²

Scale 1:200



2-room apartment 57 m²

CENTRE FOR SENIORS- STEINFELD



Scale 1:2500

To the west of the small district of Steinfeld in Carinthia, Austria a new nursing home has been constructed adjacent to the local school and park. The east-west orientation is a direct response to the surroundings; the service facilities provide a buffer zone to the north where a national roadway bypasses the site, while the dwellings and recreational facilities are located on the more peaceful, pastoral side. Externally the compact built form appears simple and monolithic; on the inside the visual orientation is reinforced by internal views and straightforward routes within the building. In addition to technical and adminis-

trative services, the ground floor of the complex is given over to the dining and event hall, a library and a chapel. These rooms are available to the residents and the public.

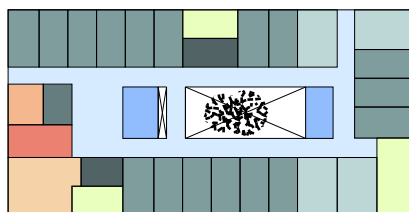
Location: Carinthia, Austria

Architect: Dietger Wissounig, Graz

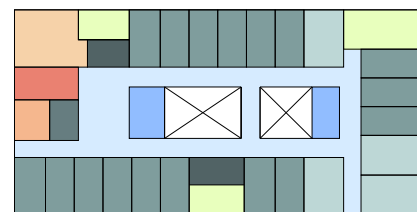
Apartments: 8 2-room apartments, 34 1-room apartments.

Facilities: Library, chapel, nursing home

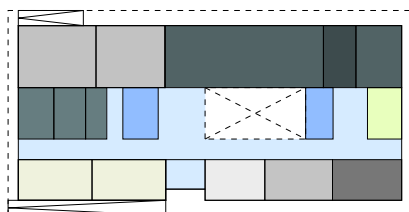
Functions



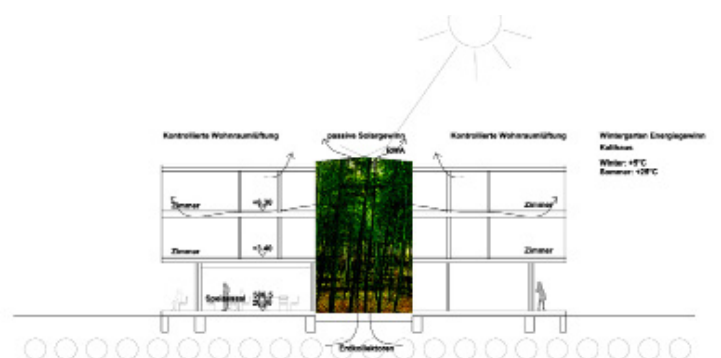
First floor



Second floor

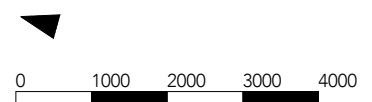


Ground floor

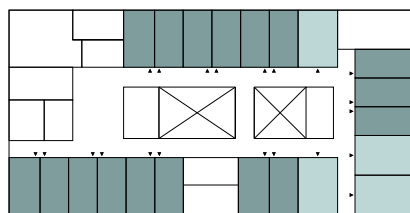


Wintergarten

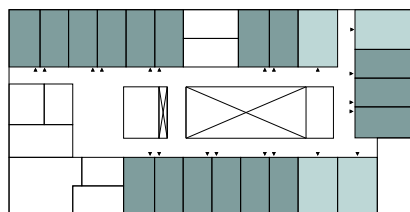
- | | | |
|----------------------|---------------------|--------------------------|
| ● Nursing point | ● Nursing office | ● Station bathroom |
| ● 1-room apartments | ● 2-room apartments | ● Communal outdoor space |
| ● Kitchen/Restaurant | ● Communal space | ● Communal restroom |
| ● Corridor | ● Staircase | ● Storage |
| ● Care apartments | ● Office | ● Library |
| | | ● Chapel |



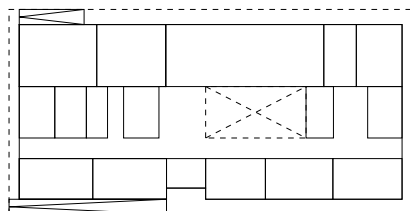
Clustering



Second floor



First floor

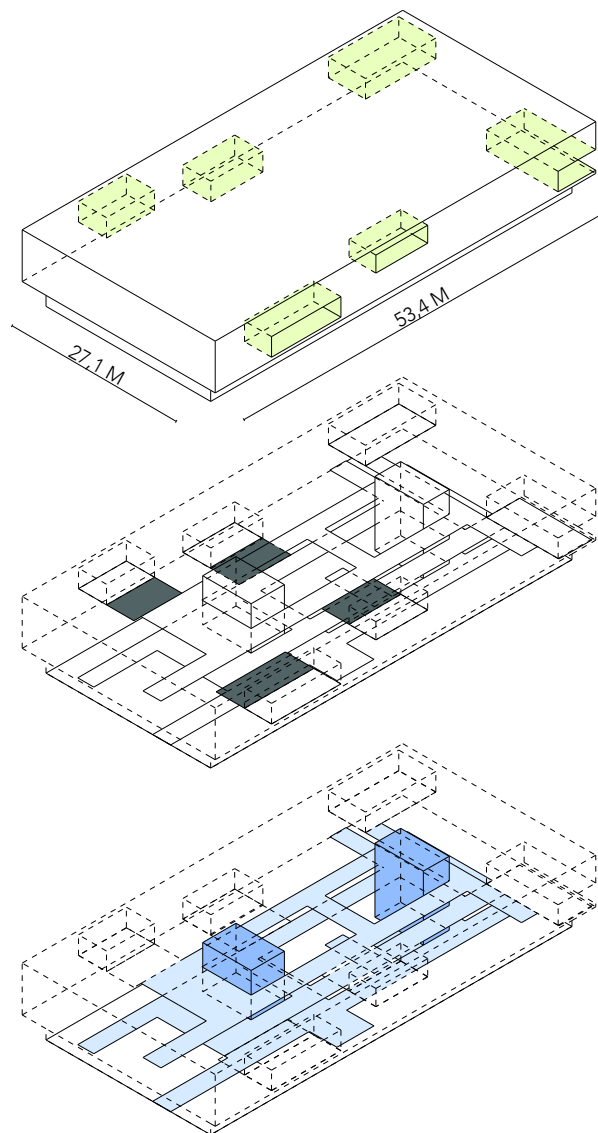


Ground floor

Scale 1:1000

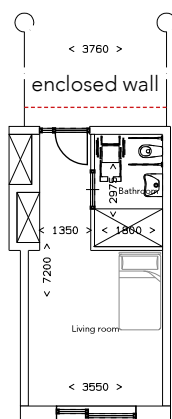
- 1-room apartments
- 2-room apartments
- Staircase
- Corridor
- Communal space
- Communal outdoor space

Axonometric projection



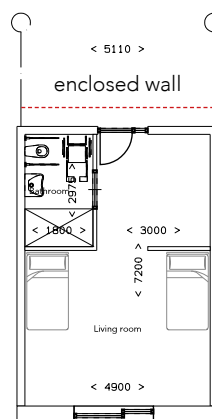
Scale 1:750

Dwelling layout



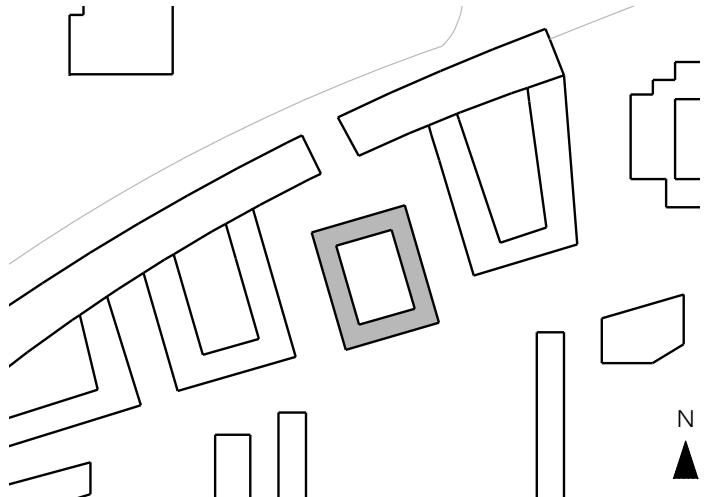
1-person apartment 25,6 m²
(m² including the bathroom)

Scale 1:200



2-person apartment 35,3 m²

MULTI-GENERATIONAL HOUSING- VIENNA



Scale 1:5000

Dual office constructions facing the busy thoroughfare shelter the residential constructions behind. The five storey multi-generational building is set back from the street, creating a public open plaza which indicates the commencement of the urban district. Various businesses front onto the plaza providing residents with their daily needs, while the café enhances and animates the square. A semi-private courtyard is encompassed by the development. Open stairwells punctuate the corners of the development, creating views and providing through drafts. The residential alternatives; single storey apartments, maisonettes, assisted living for the elderly and short-term mini-lofts, all face the lively internal courtyard space and are accessed by open walkways.

ted living for the elderly and short-term mini-lofts, all face the lively internal courtyard space and are accessed by open walkways.

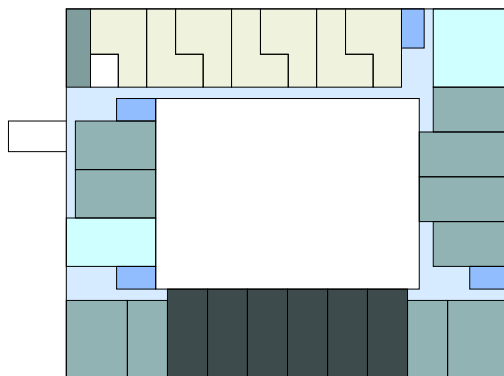
Location: Vienna

Architect: Franziska Ullmann and Peter Ebner

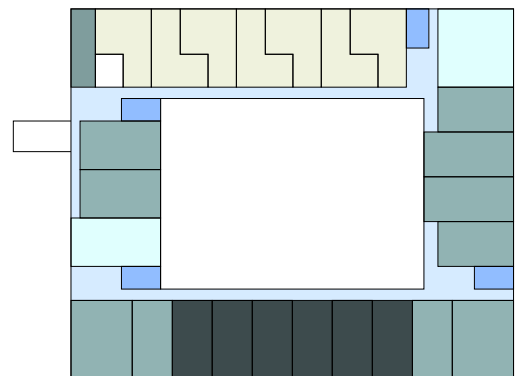
Apartments: 30 assisted living apartments, 12 mini-lofts, 6 maisonettes, 26 2-room apartments, 13 3-room apartments

Facilities: Shops, café, offices, medical practices, apartments

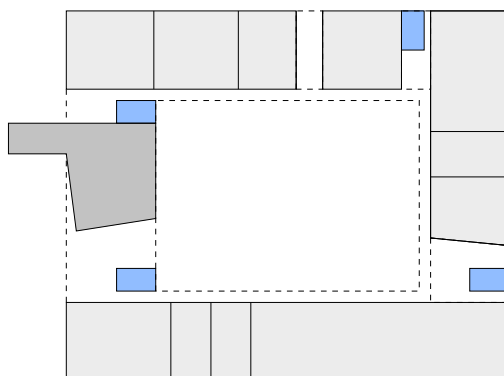
Functions



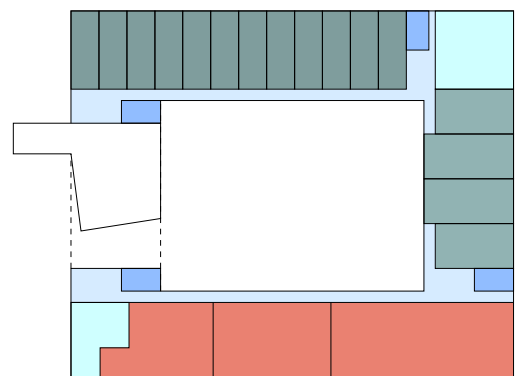
Second floor



Third floor



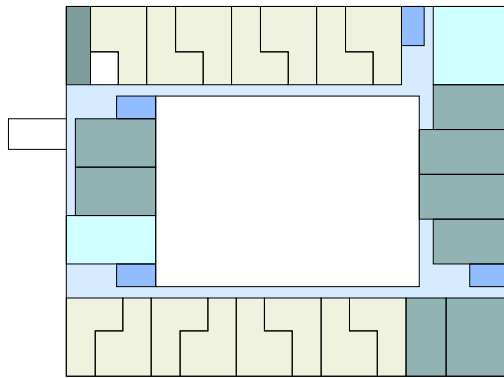
Ground floor



First floor

0 1000 2000 3000 4000

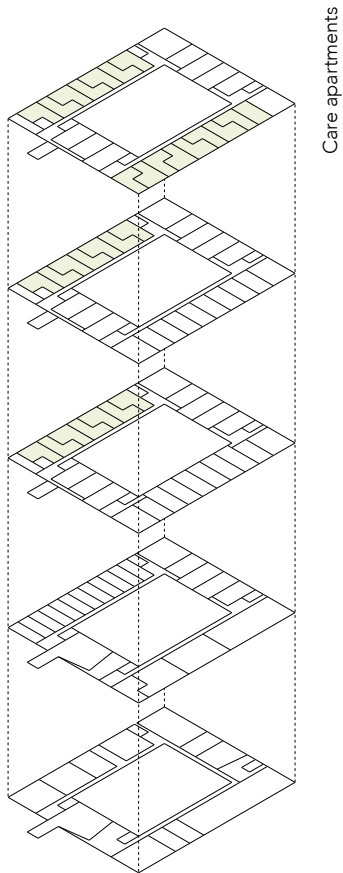
Functions



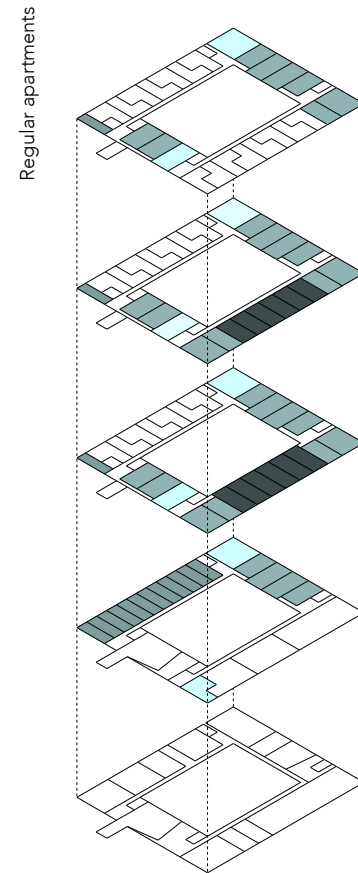
Fourth Floor

- Maisonnette
- Studio
- 3-room apartment
- Care apartments
- 4-room apartment
- Red cross
- Gallery
- Commercial
- Restaurant
- Staircase

Clustering



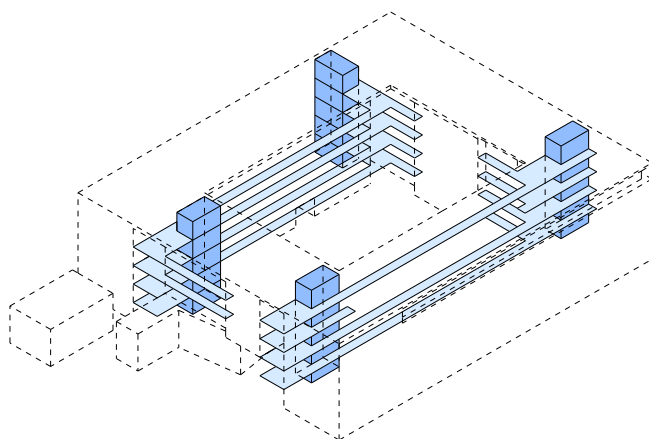
Care apartments



Regular apartments

Scale 1:2000

Axonometric projection

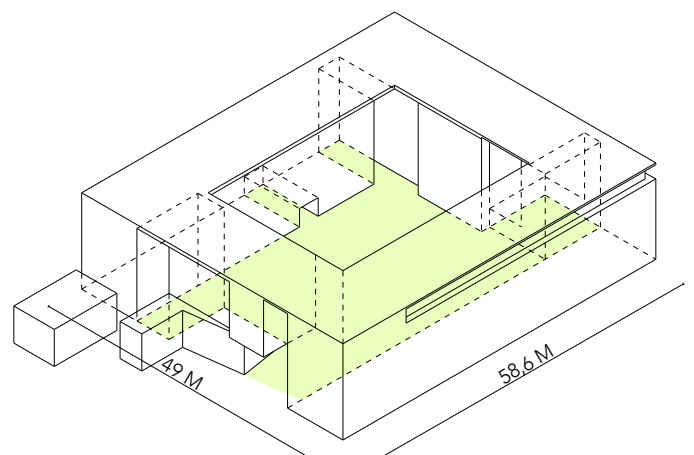


● Staircase

● Gallery

● Communal outdoor space

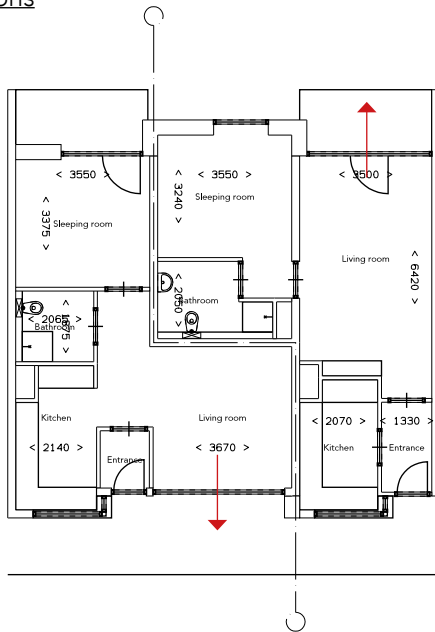
Scale 1:1000



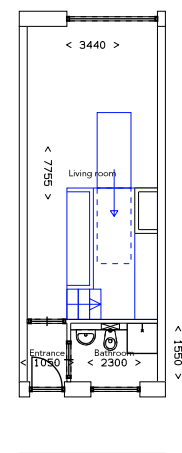
Dwelling layout



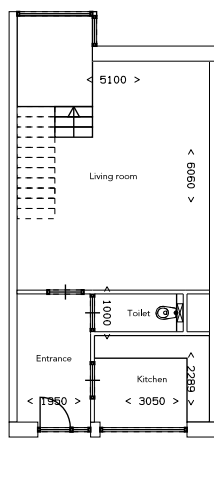
Fixed furniture (blue) Functions



● Care apartments 52,3 m²

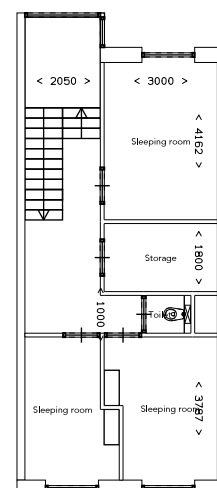


● Studio apartment 32,5 m²



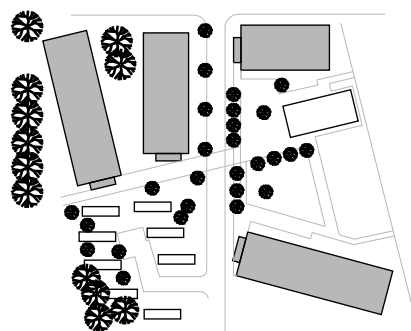
Ground floor

● Maisonette 110 m²



First floor

Scale 1:200



Scale 1:2500

Place2BU consists of four residential buildings with 490 (temporary, 11 years) independent studios and a number of common areas. About half of the studios are for young people aged 23 to 27 years. The other studios are for status holders and for people who come from social relief. Each corridor contains 18 to 30 studios and a common room. Two of the gang residents are 'pacemakers', who make extra efforts to create a real residential community. The strength of the housing project is that young people, permit holders and people from the social shelter come to live side by side and bring each other further. A launde-

rette is located in the center building. The different target groups live mixed through the building

Location: Utrecht

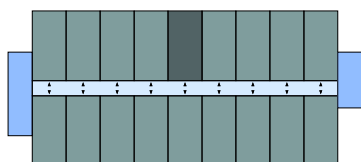
Corporations: Mitros and Portaal

Vulnerable target groups: Lister, Leger Des Heils, Tussenvoorziening and Vluchtelingenwerk

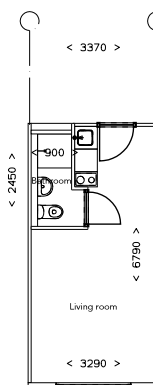
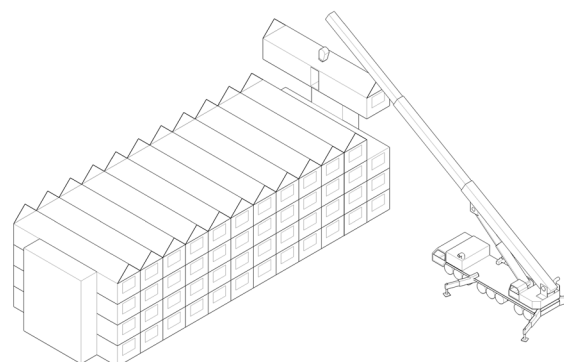
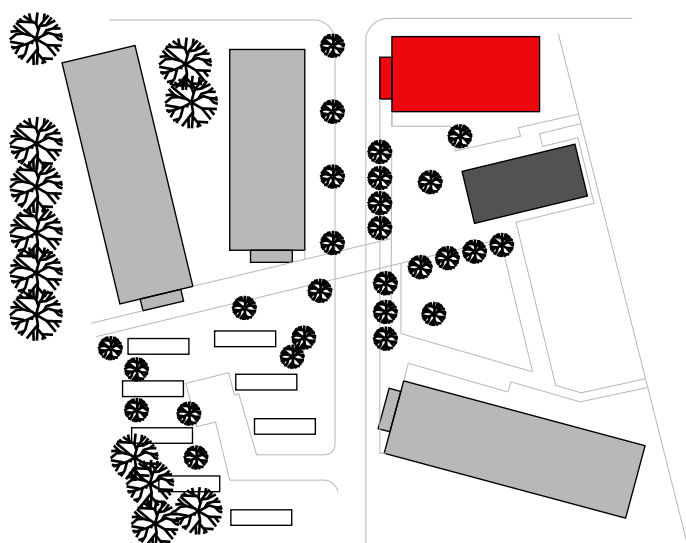
Apartments: 490 studio's 21 m²

Accommodations: community space, community building-restaurant, laundry, community space

Functions



Masterplan



● Community building

● Staircase

● Gallery

● Communal space

● Container apartment 22 m²

Scale 1:500

Scale 1:200

CONCLUSIONS

In this chapter analysis of four different reference projects has been carried out. The projects vary in size and composition of the apartments/ target groups. The reference projects have in common that (also) housing is offered to vulnerable target groups. Care and community services are also available in all projects. The reference projects were analyzed on the following aspects:

Apartments and clustering

The housing plans of the studied reference projects differ. However, it can be concluded that the apartments for vulnerable target groups do not exceed 57 m² and contain no more than one bedroom. The one-room apartment sizes range from 22 m² to 32.5 m². Also in the small apartments, there is a possibility to place a kitchen. In case vulnerable target groups live in combination with regular tenants, the target groups are mixed. The foregoing remains from a literature review (this concerns the residential community Parana and Place2BU). This is also visible in Multi-generational housing in Viena. The care apartments are connected but positioned at various levels on the building level.

Meeting

Three of the four reference projects studied have different communal spaces. The Center for Seniors-Steinfeld and Place2BU have one or more communal spaces per floor. The residential community of Parana consists one communal space per two floors. However, it can be concluded that there are one or more communal spaces per 23 apartments. The communal spaces are positioned centrally in the building or in the vicinity of architectural interventions and outdoor spaces.

Accompaniment

Care facilities are available in all studied reference projects. The facilities range from a nursing home in the Center for Seniors-Steinfeld (a nursing point per floor) to a caring office in the building, such as in the Parana residential community. The care office is, in this case, positioned centrally in the building. There is a central point of contact at Place2BU. The Multigenerational housing in Viena contains a cluster of the red cross association.

Spatial qualities

The spatial qualities of the Parana residential community and the Center for Seniors-Steinfeld are particularly interesting. In the residential community of Parana, light is caught in the corridors through openings in the façades. The center for Seniors-Steinfeld uses an atrium, creating views through the building.

BRIEF OF OWN CONCEPT

Research shows that inclusion is achieved by being able to develop interpersonal relationships and participation in society.

It will be a building where vulnerable residents and regular tenants live under one roof ...

Research shows that a collective housing with a mix of vulnerable residents and regular residents contributes to a good living environment for people with problems. The vulnerable inhabitants feel 'seen, accepted, and allowed to be there', experience positive social control, and also benefit from the mutual contacts. The regular inhabitants, on the other hand, cherish the contacts and activities. The regular residents are mostly young people and students (households of 1 or 2 people). An apartment of up to 50 m² is suitable for this target group. The vulnerable target groups are mostly singles. An apartment of up to 30 m² is suitable for this target group.

Where people can realize themselves...

Continuous education, training, volunteering, and paid work are crucial for the self-realization of people. In the building, space is made for a learning room, workshop and catering, which also the other residents of the neighborhood can use. The facilities contribute to the inclusion of residents and, thanks to its facilities, add quality to the neighborhood.

And where people can meet and support each other ...

It emerges that formal guidance remains necessary for the target group from protected housing and social relief, but that residents can support each other and that vulnerable citizens can also use their qualities for the other residents. Informal support is facilitated and encouraged by using reciprocity as a condition. A care office is present in the building. A common room is realized per floor. The architecture of the building, the routing, and positioning of the facilities have to make meeting possible and attractive.

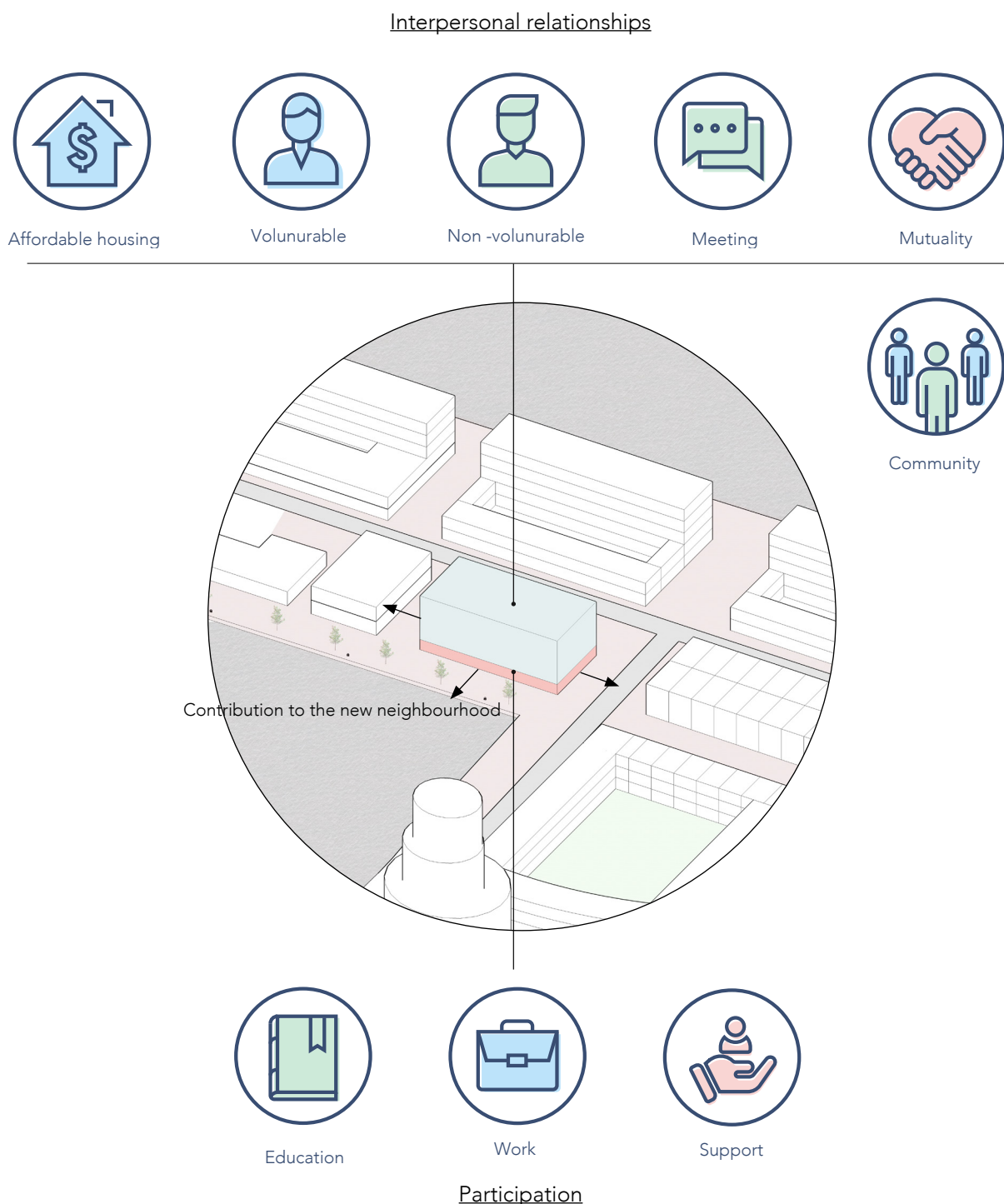
- Plinth catering, learning room, workshop (concept activation: learning, working, doing, help)
- Small apartments for vulnerable target groups and starters in the housing market, 30 and 50 m² and apartments of 22 m² for assisted living.
- Office caretaker/space for ambulant guidance, early warning (possibility to express concern about relapse).
- Community room per floor. Residents can meet each other here, read, watch TV, cook and play sports.
- Meeting space/ places through the building

DESIGN PROPOSAL (CONCEPT)

- Plinth catering, learning room, workshop (concept activation: learning, working, doing, help)
- Small apartments for vulnerable target groups and starters in the housing market, 30 and 50 m² and apartments of 22 m² for assisted living.
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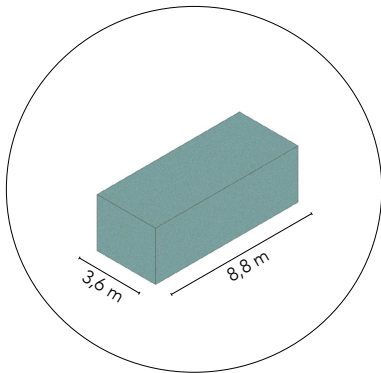
INCLUSIVE BUILDING

What is Needed for inclusion?

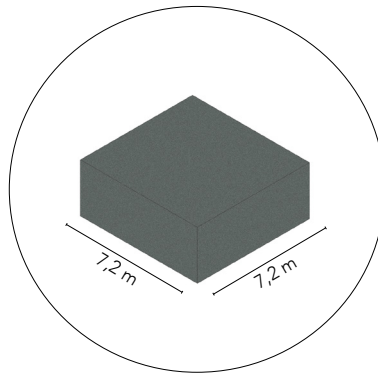


Interpretation

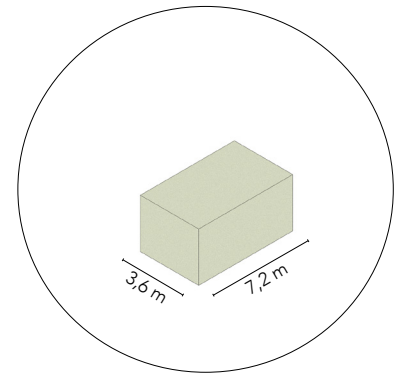
Dwelling types



Studio 30 m²

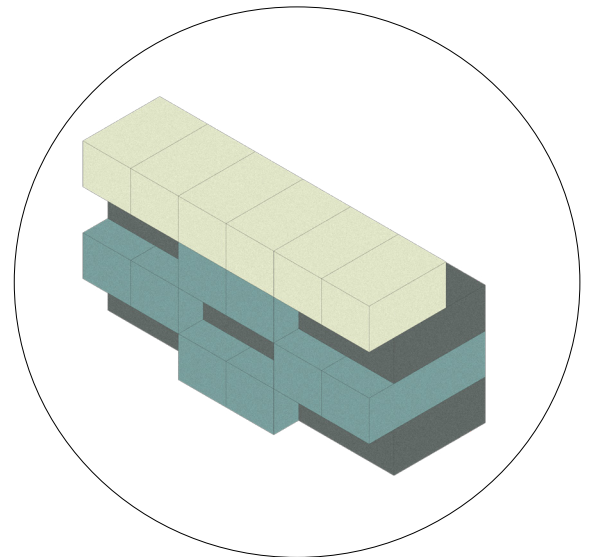
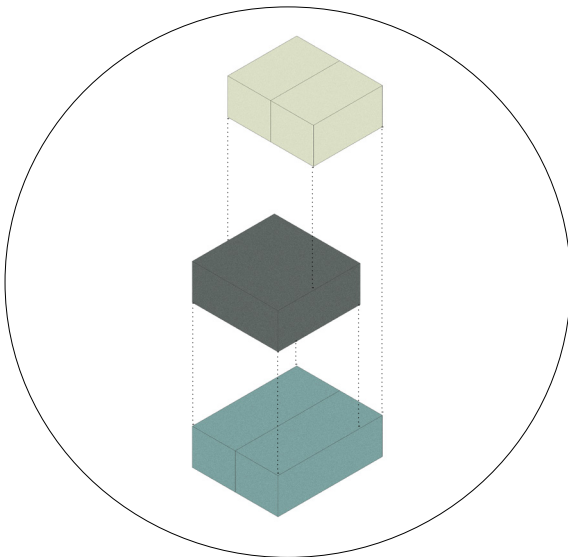


2 room apartment 50 m²

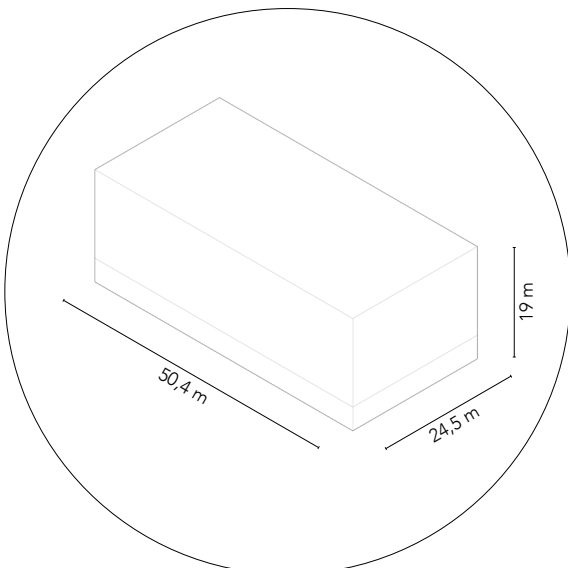


Studio 24 m²

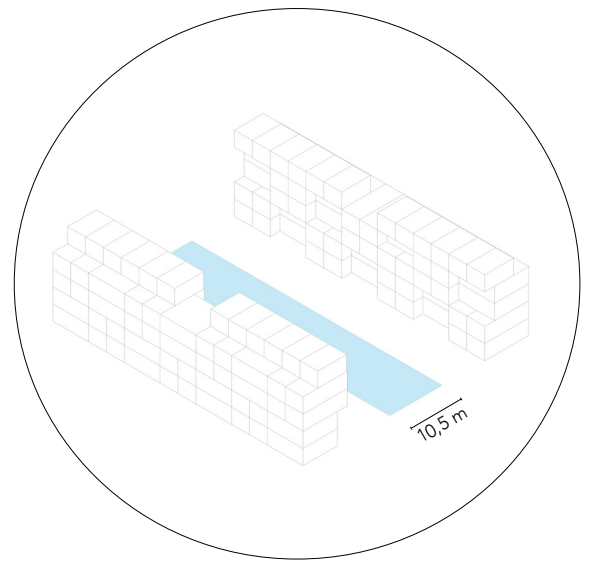
Spatial configuration



Carre typologie



Volume

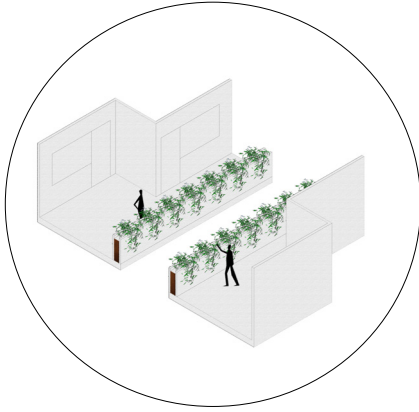


Typologie

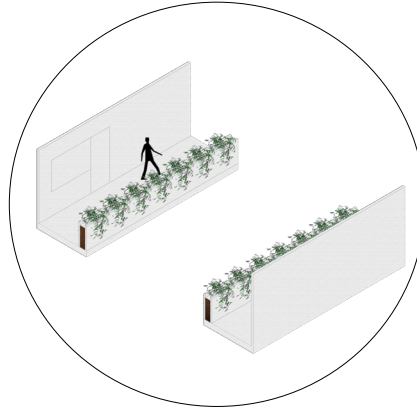
Interpretation

Space through its organization can have an attracting effect and bring or hold people together like a kind of electromagnetic field, by creating the conditions that best focus their attention on each other and keep it there. (Hertzberger 1999, p.156)

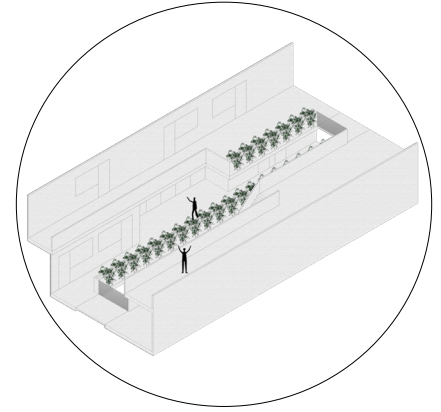
Spacial instruments



Talking distance



Visible distance



Spatial experience

Creating spatial experience configuration- localization communal functions, meeting routings



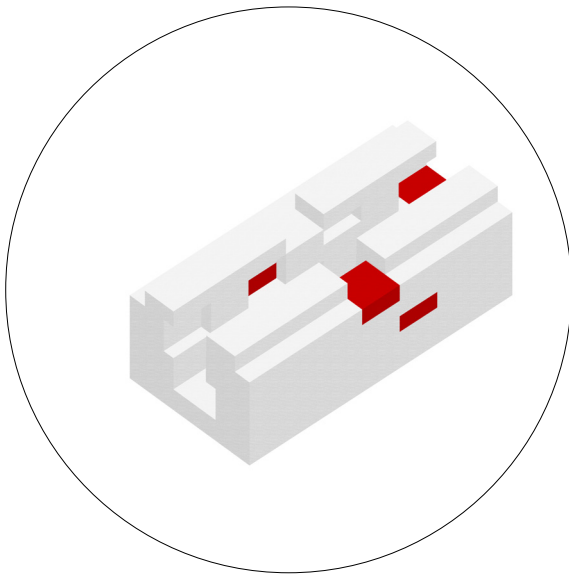
Community



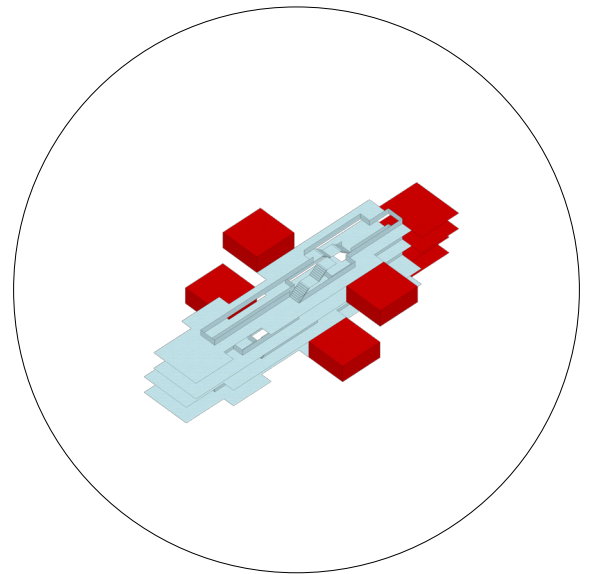
Mutuality



Meeting

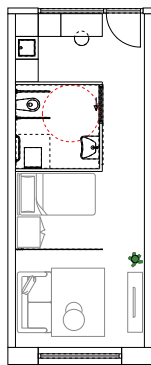


Communal spaces/activities

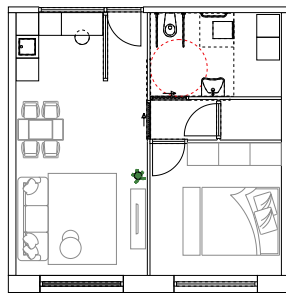


Interconnections

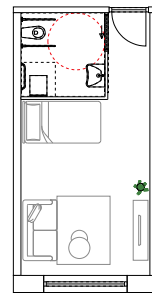
Study dwelling layout



30m²



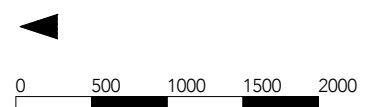
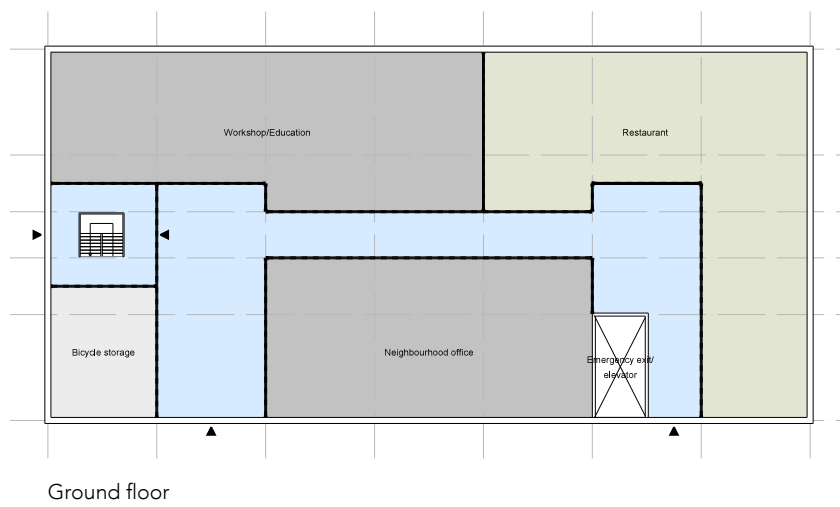
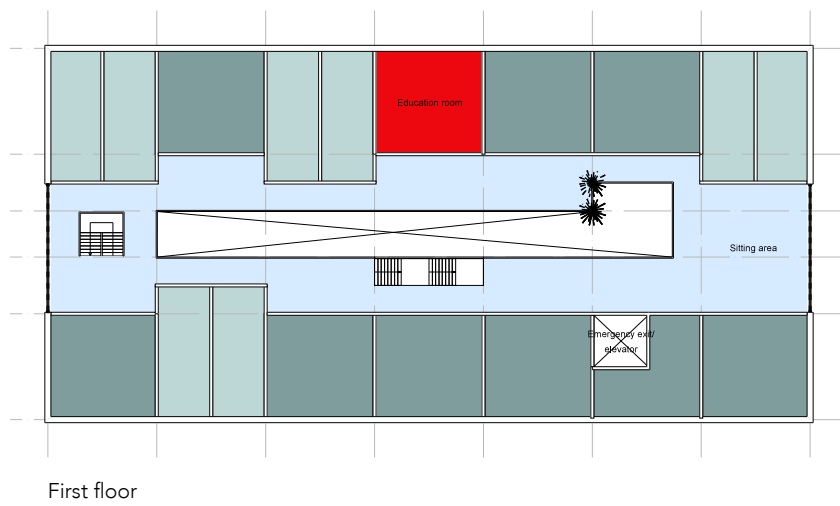
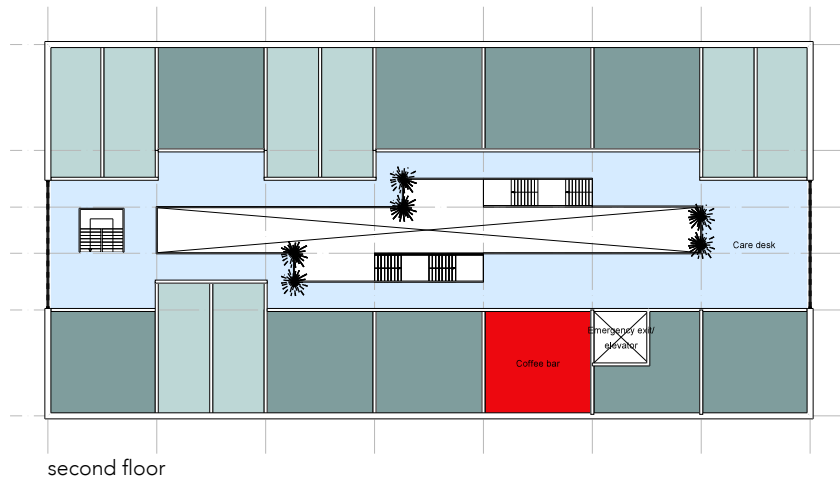
50m²

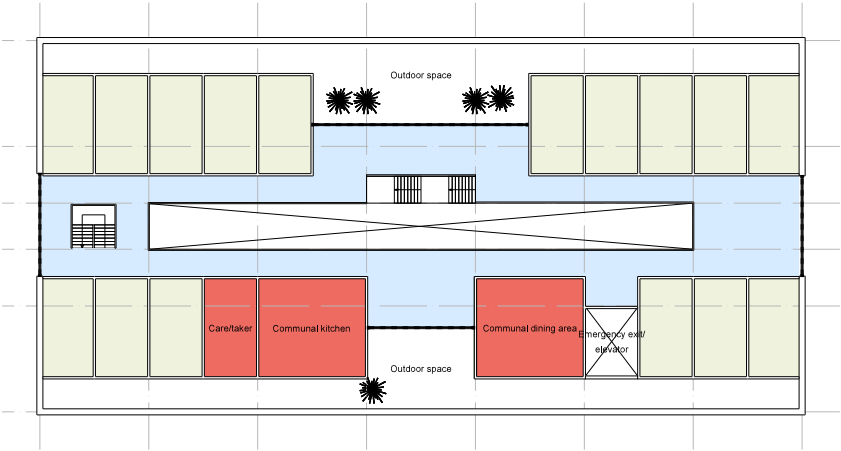


24m²

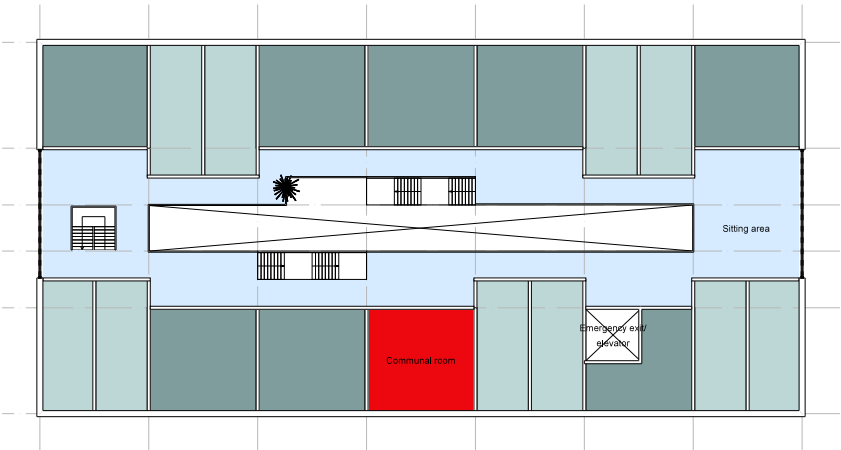
1:200

Study layout

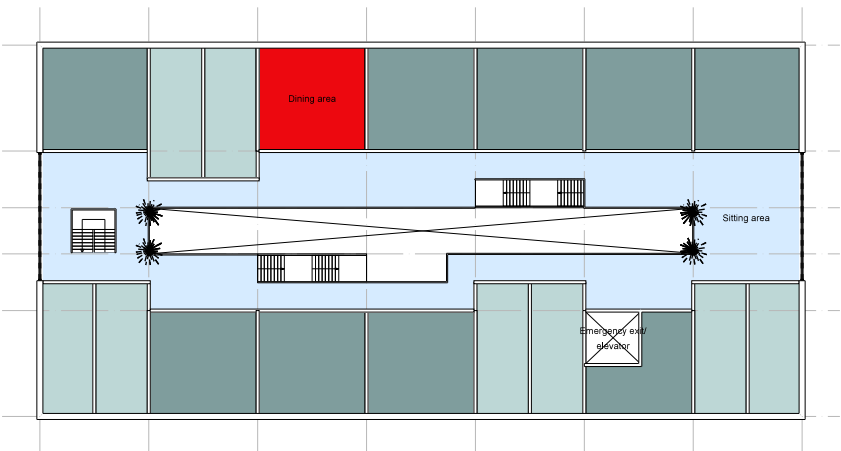




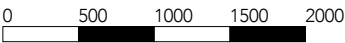
Sixth floor



Fifth floor



Fourth floor



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