INTRODUCTION

This report shortly reflects on my design process for a Rehabilitation Clinic in Rotterdam, which is a project within the studio of ‘Interiors, Buildings and Cities’. By connecting my vision during the start up of this project with the current state of my design I conclude with a reflection on the complete process.

UNDERSTANDING

The program
At the start of this design for a rehabilitation clinic in Rotterdam, I firstly had to investigate what rehabilitation actually is. With my studio-group, I started a research on the Dutch culture of care by visiting several examples of physical rehabilitation clinics in the Netherlands. These examples showed me that the configuration of functions within such a building rather effect the rehabilitation process of a patient, both positive and negative. So as a starting point for my research I investigated all possibilities for the organisation of a rehabilitation clinic; which eventually led to one clear organisational principle, a concept of configuration, my starting point for this design.

This research showed me the profits of an organisational scheme that separates the patient accommodation from the medical treatment. This aspect intrigued me, and the benefits of such a system made me decide to investigate this further. So the investigation for an organisational principle of two separate function zones became the leading challenge for this design project.

The city
The organisational principle of a building is very important; nevertheless I believe that a good functional scheme does not necessarily make a good building. Therefore I kept the organisational principle in the back of my head, while I started investigating another important aspect at the beginning of a design-process; the building site in midst of Rotterdam city. The building site is captured between two important public realms. First of all the beautiful Westersingel, a broad long street with large mansions and lots of green, and secondly the museumpark, a busy public park that functions as a connection point between several museums. The current buildings on the site cover up any possible relation between the two public realms, which is a
pity concerning such interesting public spheres. Therefore I felt the urge to design a building that creates a relationship between the Westersingel and the Museumpark, both visual and physical, but without breaking up the clear border between the two.

Studies on the building brief and mass-studies within the context showed me the possibility of configuring my idea of functional separation in a scheme with just two floor levels. This was an important moment for my design process, since it was at this state that I choose to design a low-rise building; a flat building that separates a medical treatment area on one floor and a domestic patient accommodation on the other. A horizontally spread building that on the one hand visually opens up the border between two beautiful public realms, and creates on the other hand a relationship between the two by physically creating a new entrance towards the museumpark.

**Reflection in relation to my design studio**

Apparently my focus on both the program and the building site marked the start of my design research. Not only because I find these two the most crucial parts of the start up for each architectural design assignment, but also because it suits the method of my design-studio, namely ‘interiors, buildings and cities’.

The start-up phase is an important moment of the design-process. Not only I but also my studio claims that the understanding is very important in this phase. Understanding what rehabilitation is, and also where the function is about to be situated. This investigation should lead me as an architect to a more concrete direction. Any conceptual ideas or suggestions can only be valuable after this phase of understanding.

**RESEARCH AND DESIGN**

**The need of research**

One may wonder whether research is needed in order to come up with a design. Concerning architectural-design I believe that research is inextricably linked to it. In the most practical way an investigation is needed in order to prevent collapse of any structure, and a research on spatial needs for specific functions seems quite clear as well. But perhaps the need for spatial quality research is more difficult to explain.

Architecture has always been about providing comfortable room for specific needs. Whether it is just a shelter for the storm, or an impressive space for holy experiences. Each use craves a specific recognisable architectural quality, besides its direct needs. So the research for an adequate architectural space starts with researching the existing ideas on constructing the particular need of spatial appearance.

Also in this case, a rehabilitation clinic, a research on existing precedents helped me as an architect to understand what rehabilitation is, and how it can be housed. But simply concluding from this ‘understanding-phase’ does not lead directly to a good building. Many variants need to be studied, designed and reflected in order to come to the eventual design proposal. This is an iterative process that shows me every time a new and better perspective on the design. Ideas of construction and materialisation come along with this spatial research. Every suggestion can be tested in models and drawings. Eventually this would lead the architect to the answer of the research-question, an answer that we call the design proposal.

The guidelines I have chosen in my ‘understanding’ phase are the research framework for my design proposal. The design I present during my P4-presentation is an answer to several (iterative) processes of architectural researches, in which I investigated the question how to configure a rehabilitation centre at the specific site, with an organisational principle of two separated function zones. If I would not have done all these researches, my design-proposal
would not have developed any further after the ‘understanding’ phase, which would mean my design would have been just a conceptual thought; now, because of my iterative research process acting like a trial/error test, this conceptual thought is translated into an actual building proposal.

**The results as a design proposal**

Right now I am satisfied with my research and my eventual design proposal. The researches I have done, like: analysing precedents, investigating the site, interviewing rehabilitation concerned people like doctors and nurses, making models, sketching and drawing; all helped me to come to this current phase of my design. Next week, during my P4 presentation, I will talk about this research more in detail, and refer to all my results by showing the best variant options in my design proposal for the new Rijndam Clinic; a rehabilitation building in midst of Rotterdam city.