Final Reflection Graduation project
The Architecture of the Interior • The Healthy Environment

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0. Introduction

Within the chair of 'The Architecture of the Interior', the studio of the healthy environment focussed this year primarily on the design of a dementia care institute in the northern district of Rotterdam, actually Rubroek and Crooswijk. Therefore, this report will be a reflection on my own approach within this subject and location by discussing different aspects concerning the relationship between the subject and the wider social context, the relationship between the theme and my own chosen direction within that theme, the relationship between research and design and at last the relationship between the methodical line of approach of Interiors and the methods I’ve chosen within this framework.

1. The relationship between the project and the wider social context

As is already quite well known among most people, dementia is a mental disease that is primarily characterised by memory loss and dysfunction in general and its chance of occurrence increases with age. Because of the ageing of our society and consequently the growing of the demented population, it becomes more and more important to design proper living environments for this target group that are able to respond to their specific needs. However, while researches show the positive influences of nature and social interaction, most dementia homes are in the current situation hospital-like buildings that do not offer good connections with the physical outdoor space and the social outdoor world, leading to the isolation of the Alzheimer patients and the deterioration of their mental and physical state.

Therefore, in my opinion the studio’s relevance lies in the rethinking of the concept of the dementia care institute within the city and the finding of new ways to connect the dementia patients with the physical and social outdoor world, offering them on the one hand the possibility to continue their daily lives in a recognisable environment (the city, the place where they’ve lived their whole lives) while living in a safe environment that will protect them from getting lost, and on the other hand a stimulating and triggering environment with a positive influence on their physical and mental state to increase their quality of life.

2. The relationship between the theme of the graduation lab and the subject/case study chosen by the student within this framework (location/object)

So as I’ve already mentioned above, the main ambition of my project was to create an environment as normal as possible which has led to the design of a large scale care centre in an urban setting in Rotterdam to be able to offer both a rich environment in which the people with dementia can actually live a ‘normal’ life and in which the surrounding neighbourhood contributes to the feasibility of the ambition to connect the dementia world with the non-dementia world.

As a reference, I used the Hogeweyk in Weesp which is a dementia centre that can be seen as a city within a city rather than a hospitalised institute. Instead of a multiple storey building with little rooms and long corridors, it consists of several courtyards enclosed by
individual housing volumes. Since all courtyards are connected with each other by a central route and because they all have their own character, the dementia people are not only able to wander freely around in a bigger environment than just their homes, but also to orientate themselves and find their way back home. However, this centre is still quite isolated from the outdoor world since the project only consists of housing for patients and because the public functions of the Hogeweyk are not easily accessible or logical to use for non-dementia people.

To tackle this problem of the absence of interaction between the dementia and the non-dementia world, my project focusses on the integration of the Hogeweyk concept in a neighbourhood with normal housing, by inserting individual housing volumes for living groups inside the courtyard of an existing building block with normal housing and by adding ‘public’ or collective functions that can be used by both target groups. By doing this, interaction can take place in the shared area and in the collective gardens that lie between the two worlds.

The site I’ve chosen to work with is the Rottekwartier, on the one hand because of its valuable location with the Noordplein, the Noordsingel and the Rotte nearby, and on the other hand because the large garden inside the mega-block is in the current situation more an abandoned space blocked from people’s private spaces by high fences, than a collective ground where the inhabitants can meet and make use of. By choosing this, the dementia people will be housed between other target groups and several different urban scenes, making their stay more varied and triggering, while the space and in particular the inner garden will be improved for the current inhabitants’ by creating a more protected inner world for the dementia centre. To connect the care facility with the urban scenes and the outdoor world, the collective and public functions are located around the new ‘woonhof’ that is created as an extension of the Noordsingel, connecting the Noordsingel and the Rotte.

3. The relationship between research and design

My personal choice to focus on the integration of dementia people in normal life to make interaction with non-dementia people possible, eventually led to my research topic. While reading some literature about dementia I learned on the one hand that social interaction not only has a positive influence on the mental decay processes of people with dementia and that a lack of social interaction increases the risk of its occurrence, but on the other hand that it is nature and outdoor space that is a fruitful place to facilitate this social interaction. Therefore, I decided together with Leeke Reinders, anthropologist and my research tutor, to do research on several collective gardens in the northern part of Rotterdam to investigate how they’re designed and how people use them. The research question I wanted to answer was: What influence do design elements have on the level of interaction in collective gardens?

The methods I used to frame the research were on the one hand the observation of the spatial and activity related elements of each garden and on the other hand interviews with people living around the space. Especially the interviews with the inhabitants were useful to get an understanding of the places and gave insight in why a garden did or didn’t work. However, because Leeke advised me not to prepare questions but just to let the people guide me through the gardens while listening to their stories, the people primarily used me to blow off steam and to criticise the government, not always resulting in the most comprehensive end results. Nevertheless, results on the availability of activity related elements and the accessibility of the
gardens were useful to make design decisions for the collective gardens that I’ve integrated in my own project. It appeared that especially the presence of vegetable gardens and playgrounds in an enclosed garden which could be closed off from the public contributed to the successfulness of the gardens. In my design this resulted in designing five collective gardens within the existing building block that are always accessible for the inhabitants and only accessible for the visitors of the restaurant during opening hours.

As a second part of the research I wanted to investigate how people with dementia use gardens and its eventual overlap with the outcome of the first part of the research to draw conclusions on how to combine dementia and non-dementia in one collective garden. But due to the fact the research on collective gardens took quite some time and was in Leeke’s opinion already quite extensive, this didn’t happen. Therefore, you can only make assumptions on how to arrange this combination in such a way that both target groups can interact while still keeping their privacy, since the idea of an ideal world in which dementia and non-dementia can live side by side without any borders is not realistic. However, since the most important aspect in making borders between these two target groups is, as mentioned above, offering even more privacy than in normal situations, I looked during the project into several examples of collective gardens, focussing on how different zones and privacy were arranged and established. This resulted in a small height difference between the private zones of the normal housing and the collective gardens (also a result of connecting the floors of the existing and the new) and garden designs that subtly keep the dementia away from these private spaces.

Beside the research with Leeke, also the visits of Hofjes and care projects in Belgium was part of our research, since these strongly relate to our project because they deal with the creation of collective safe enclosed environments for vulnerable target groups. As a group we visited many Hofjes in Haarlem where it became clear how these spaces work. It was interesting to see the transition zones from private spaces to the collective green lawn in the middle, how every inhabitant marked their own private outdoor space and to notice how we all behaved as guests in their collective garden. From this I learned that the small scale, the one side orientation (orientation only towards the garden) and the enclosed atmosphere all contributed to the feeling of social control and ownership. This one side orientation and enclosure has therefore also become one of the main ingredients of my design.

4. The relationship between the methodical line of approach of the graduation lab and the method chosen by the student in this framework

In the first three weeks of the project we got the assignment to make a 1:20 model of an interior space for one of the MSc4 students’ projects. We had to think about all facets of architecture, from its position or function in the whole design to the materialisation of the space and its objects and components. This introduction in modelling, which is an important part of the Interior studios, was meant to ‘teach’ us that using models to test our ideas and design on a human scale was important in all phases of the project. However, when looking back on my own process I didn’t use 1:20 models until the second half of the second semester, which can be explained by the struggles I had with the mass studies and the developing of a conceptual scheme with global floorplans, which was the main focus in the first semester and had to be presented at the P2, and by the fine-tuning of those floorplans and the developing of facades.
after the P2. And in retrospect, that’s quite a pity because it could’ve helped by making decisions for the bigger picture (the mass/floorplans and the facades), especially since I assumed that my struggle in the beginning had everything to do with the masses itself, instead of with developing them further into floorplans, resulting in looking for answers in a facet or part of the design discipline (the mass placing) where I wouldn’t find them.

Beside the mass studies and floorplans, the specific research for Leeke was part of the first semester. We were the first group that had to do research on the location of the project, instead of researching the target group itself (the dementia people). I think it was meant to get more grip on and a better understanding of the location to come to a suitable approach and even though I have the feeling that that was the case, I used the research only roughly in the beginning for a starting point, but primarily in the time between my first and second P4, since I only globally designed the gardens for the first P4.

What I’ve learned in general about my own process is that I work from the bigger to the smaller scale instead of the other way around or more in a cross-like way where working on a big and small scale alter each other. I think it could have been fruitful for me to work in a more cross-like way, because sometimes working on the smaller scale gives answers that pop up when working on the bigger scale. Besides, probably also due to the length of the project, the method of working was quite different from all other projects I’ve done during my master and bachelor. This meant that I was quite fast in making decisions, sometimes without being critical and vigorous enough so that it often felt that I was overtaken by events and lag behind.

!! However, since I had three months delay I was able to get a grip on my own design process again and began to work like I normally did, which worked quite well. I think the biggest problem was that I tried to please my mentors by literally making products they said they were expecting, without thinking about the whole preceding process that I had to go through to come to that product. When I let that go and started to do what I assumed was necessary for my process and eventual design, everything went quite well again.