Reflection report: Architecture

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Studio:

Studio: Interiors, buildings and cities - Urban Culture and New Openness
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Title: Rehabilitation center Rotterdam: Between the house and the institution

I) The relationship between the research and the design

The theme of the graduation studio Interiors, buildings and cities - Urban Culture and New Openness is to create a new design of an extensive rehabilitation centre in the city centre of Rotterdam, replacing an existing building of Rijndam rehabilitation centre situated close to both the Erasmus Medical Centre and Museumpark.

The given theme raised directly a question: What is a rehabilitation center? A rehabilitation center is, without doubt, in many terms an institution full of contradictions. The objective of the rehabilitation is to return patients as much as possible back to the society. On the other hand, contemporary rehabilitation centers are conceived as highly protected healthcare fortresses which tend to seclude patient from the life outside the clinic. The building itself has to not only operate as a hospital, to be efficient and rational as one single entity, but also it should be, at a first place, a place for healing. To speak of “healing in healthcare” may seem like a tautology. But contemporary western healthcare focuses mainly on “curing”, “fixing” or restoring person to the status quo of how life was before, it is not that concerned with the question of healing. Therefore we can ask: Could architecture of the clinic become an antidote against the social exclusion of the patients? Can architecture have positive influence on the process of healing?

In general, there exists a little research on how patients feel in rehabilitation centers. Little is known also about the ideal arrangement of the rehabilitation process. While there exist a vast amount of health care literature focusing on the typology of a hospital, little research and comparison has been made with the
typology of rehabilitation center. We can find very little both about architecture of these buildings and spatial organization in relation to the rehabilitation process, the process of healing.

The graduation design offers a renewed interpretation of this medical institution and its relation within the city.

II) The relationship between the theme of the studio and the subject/case study chosen by the student within this framework (location/object)

As already mentioned above the theme of the studio was to design a medical rehabilitation center situated in the city center of Rotterdam. The goal of the studio was to not only examine new trends and possibilities in healthcare facility design, but also investigate the opportunity of decentralization and integration of these institutions into the given context and public life of the city - blur the borders between the clinic and the city.

The object of research by design of the studio might be described by the term 'public interior'. ‘Public interior’ incorporates the totality of spaces in which civil society operates, including environments, both inside and outside buildings, which are used for by the public, either individually or collectively, for entertainment, culture, education, leisure, commerce or care. With this in mind the theme of the studio explores whether a rehabilitation centre could operate as a public interior?

Rehabilitation centre contains a number of more or less public facilities, that are not exclusively for the patients, but are often used by visitors from the neighbourhood as well. The pool, the gym, the auditorium, the restaurant or the cafe are among these. Second, the fact that the rehabilitation centre is located, not only in the very heart of the city but actually facing one of the most important urban parks, creates a number of opportunities to reinforce its public character.

My graduation design can be in general read as a small city, a small urban block with a semi-public plaza, the tower, 'the house' etc. The main plaza serves as an organizing element around which all the more public functions are organized. The spatial organization of this ‘plateau’ reinforces the ‘publicness’ of the clinic while not endangering the privacy of the patients.

III) The relationship between the methodical line of approach of the studio and the method chosen by the student in this framework

As indicated by the name, the graduation studio generally works on several levels: the city, the building and the interior. The studio operates not through a process of remote theoretical reflection, but by proposing buildings and ensembles that recognize and build on the existing conditions, seeking to make
culturally charged spaces inside, outside and between buildings. The studio seeks for ‘public interior’.

In case of the rehabilitation center, a public interior has to be accomplished without endangering the privacy and protection of the patients. Both understanding and designing the various degrees of both privacy and publicness and the way they relate to each other, is one of the key elements in the design of a public interior.

The graduation studio consisted of three parts: Firstly, as a group we investigated and analysed the architecture of three existing medical rehabilitation centres from various parts of the world. The three examples not only showed a variety in architectural interpretation of rehabilitation, but also illustrated the cultural variety in ideas and opinions regarding care and treatment. Second, we investigated the experiences of the various users of the Rijndam building and some other rehabilitation centres in the Netherlands, mainly by interviews and observations. And finally I conducted research by design: investigating both the urban conditions of the site and the architectural potential of the building program.

The research by design was performed with use of different working tools, especially physical models.

IV) The relationship between the project and the wider social context

The goal of the project was to design a renewed interpretation of the rehabilitation center and its relation within the city. Much of the debate regarding the healthcare buildings is limited to the typology of the hospital. Not much is known about the architecture and ‘ideal’ organization of the rehabilitation center in terms of space and program.

The relevance of the result of my project could lie in helping to define this relatively new typology and contribute to the discussion how can this healthcare institution become integrated part of the city at all levels: spatial, economical, political and social.