Reflection - Living with dementia

The Architecture of the Interior - Care for Cure

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The relation between the theme of the graduation lab and subject

The theme of the graduation lab is healthcare. The assignment lies within the design of a healthcare environment where the user-group is the leading aspect. The designing of an healthcare environment with the focus on the needs and requirements by its specific user-group. It starts with accommodating the user-group and ends with adding value to the experience of living for this certain group.

Interesting is the fact where the building should not only fulfils the needs of the specific user-group, but should also function with other user-groups. This seems almost paradoxically. The building has to be designed in a way where it is not ‘just’ an elderly home. In the end, it has be a properly designed building, unregarded its present or future user-groups.

A secondary theme is the densification of the site. The chosen program of an elderly-home is normally placed within a sub-urban setting. The subject is placed in a location that requires an answer to its urban context.

The relationship between the methodical line of approach of the graduation studio and the method chosen

A user centred research will be legitimating my design proposal. This social research consists of out of interviews and observations. This relation is rather evident. One cannot simply interview a dementia sufferer or visit an elderly-home in order to retrieve useful information. By interviewing the staff and elderly with a mild form of dementia, an insight can be given to what these dementia suffers experience everyday.

By looking to existing elderly-homes, we can determine which used elements are effective and which elements should be avoided within the actual design.

The relationship between the project and the wider social context

Currently, elderly that cannot stay at home by themselves anymore are placed in a home for elderly. Up to the present day these homes are generally traditional nursing homes. These environments have an defined structure and this the reason of their institutionalised appearance. This structure is supposed to be efficient, by means of a centralised set-up and a straightforward organisation. Because of the high amount of patients, the use of double-loaded corridors is inevitable. The human action and the human conduct are provided by only the necessary requirements that result in a on-personal atmosphere. Also the sequence of spaces is not comparable with the sequence of experience of a home; Communal areas tend to fail their function as living rooms, hallways are long and monotonous and outdoor space along with the entry towards these spaces are rare.

Furthermore, residents of such an elderly home are often isolated from society. Especially elderly that are suffering from dementia. Although an elderly home is often located in a neighbourhood and surrounded by different types of building, dwelling and commercial buildings, it is not a part of the daily life of its surroundings. This can be remedied by emphasising the importance of social integration.

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