

Redefining curative environments through natural connection, place identity, and user-controlled experience.

Celia Armstrong Graduate Thesis Thesis Advisor: Rena Cumby Master of Science in Interior Architecture Drexel University Class of 2023

This book is dedicated to my mom, Gillian, who has inspired and supported me through every endeavor while giving me the confidence that I can do anything.

"...create a home people wouldn't dare build for themselves." - Thomas Heatherwick, Heatherwick Studios

7

An Introduction

Breast cancer, the two words that I never thought I would associate with someone in my family let alone my own mother, but in 2014 that changed. 2014 was the year that every day family life was altered and my mother was diagnosed with stage two breast cancer. She underwent grueling treatments of both chemotherapy and radiation while trying to grasp a sense of control and normalcy in her life. It is through this experience, I was able to first-hand understand the shortcomings of conventional medicine through the eyes of a cancer patient's daughter. My mother fought to find a sense of control in her life and opened her treatment journey up to supplemental wellness and holistic approaches to medicine.

As a result of this experience, I have explored the opportunities behind creating a patient centric and patient controlled environment that promotes holistic approaches to medicine by bridging the gap between conventional medicine and alternative therapies. This investigation aims to promote a curated journey for both the patient and their support teams while carefully considering the treatment paths that each patient experiences. It is my goal to embrace the human connection to nature and the utilization of patient-controlled experiences to create a positive journey to healing.

My thesis is about redefining curative environments through natural connection, place identity, and usercontrolled experience.



Contents

01 Topic

Literature Review + Ontology Research

O2 Design Agenda
Precedents
Case Study

Experience Probe Atmosphere Probe + Design Agenda

03 Program

Site Documentation Existing Conditions Program Program Matrix + Bubble Diagrams Program Diagrams

04 Design Development

Sketches Preliminary Planning Inspiration Images

Final Design

Site Plan Main House Floor Plans Materials Sections Perspectives Circulation Diagrams
Carriage House Floor Plans
Materials

06 Appendix
Interviews
Scale Mapping Design Probe
Materiality Design Probe

Literature Review

Introduction

Clinical healthcare settings now place an emphasis on restorative and healing environments as a desired mode to curative care (Abdelaal & Soebarto, 2019). This can be achieved through the incorporation of three foundational principles which promote healing within curative environments.

The first of these, biophilic design, is an approach to architecture that seeks to connect building occupants more closely to nature. This connection provides a more positive and restorative environment to those within a curative setting (Wijesooriya, N., & Brambilla, A. (2021), and understanding the strategies of biophilic design is integral to creating a successful healing space. The second principle which benefits healing spaces is connectedness to nature. This includes nature as part of identity through an immersion of the physical senses, emotions, attitudes, and behavior (Korpela, K.M. (1989) is the incorporation of place identity. The third and final principle is Place Identity, which is the relationship between identity and the physical environment (Korpela, K.M. (1989). This is understood through the relationship to dwelling, community, material objects, and modes of identity within the mind, body, and spirit (Korpela, K.M. (1989). Through the understanding and integration of biophilic design, connectedness to nature, and the principles of place identity, curative environments can successfully be achieved, as will be laid out in this literature review.

Expanding Biophilic Design

There is a growing movement of rediscovering the incorporation of nature in architecture, driven by a need to improve health, well-being, circularity, and resilience (Zhong et. al 2022). However, the interrelation of nature and architecture has a long-standing history dating to Roman architect Vitruvius who examined the response to climate in domestic buildings (Zhong et. al 2022). It can also be attributed to Gothic architecture through the application of natural forms and structures, for example Antoni Gaudi's Casa Battlo (Figure 1).

The term biophilia was coined by psychologist Erich Fromm in 1964 to describe the "love of life" (Zhong et. al 2022). This is a fundamental aspect of human existence. However, translating this into a design strategy did not emerge until the 1980s as a response to growing environmental movements (Zhong et. al 2022).

Stephen R. Kellert considered one of the

pioneers of biophilic design defines it as,

"a deliberate attempt to satisfy the need

physical and mental health, productivity,

of contact with natural systems and

processes in the contemporary built environment, and to improve people's

and wellbeing" (Kellert 2008, p.3).

Zhong et al. introduced a biophilic

framework that consists of three



Figure 1 Source: Google 2022

essential design approaches (Figure 2).

The framework presented by Zhong et al. is a preliminary interpretation of biophilic design with emphasis on nature incorporation, inspiration, and interaction. These three categories help to prevent disconnections with the



Figure 2 Source: Zhong et al.

ecosystem. And understanding the transition between the indoors and the outdoors (Zhong et. al, 2022) is one way that that these three categories can manifest through design. Another direct response to biophilic design includes healthy indoor environments that promote good health and well-

Interior design solutions must consider many different user groups. In hospitals, for example, the user groups range from medical workers, to patients, to patients' family members. It must be noted that gender, as well as different psychological responses to nature must also be considered (Grinde and Patil, 2009). However, the goal to consciously embed nature into interiors benefits all (Grinde and Patil, 2009). For example, in "Spending at least 120 minutes in Nature is associated with good health and wellbeing", White et al, states that spending at least 120 minutes a week in urban green spaces improves people's health and well-being (2019), while Lee et al. said that 40 seconds of viewing a green roof creates micro breaks that can restore attention spans (Lee et al., 2015). With restoration in mind, contact with nature for health and well-being have been known to create distinct effects such as reducing blood pressure, heart rate, and muscle tension. Roger Ulrich's Stress Recovery Theory proposes that contact with natural features can generate a quick and positive psychological reaction. This exposure to nature reduces negative emotions and promotes recovery (Ulrich, 1983). These four design solutions lean on the biophilic design framework discussed previously and can be a jumping off point for more integration of humans to nature.

Health and Well-Being Through a Connection to Nature

Creating holistic restorative environments through connecting humans to nature is the larger goal, not just the smaller piecemeal solutions as mentioned

above. This extends to the actual design of hospitals themselves, which must play a tangible role in the restoration of their patients. Restorative Environmental Design (RED), as stated by Stephen R. Kellert is an approach that benefits both the building user group as well as the surrounding environment. By implementing biophilic design strategies, this connectedness to nature has a therapeutic impact which alleviates distress, depression, anxiety, and pain (Mohammed, et al. 2019).

Russell et al., explains the importance of understanding ecosystems to be the foundational material building blocks for human well-being (2013). People experience ecosystems in a variety of ways, and human thinking is rooted fundamentally in direct lived experiences with the world and the surrounding environment (2013). Figure 3 diagrams the four channels of human interaction with ecosystems. Based on R. Russell's research, the knowledge of nature and the physiological health through intangible connections to ecosystems did not have a direct correlation. Perceiving, interacting, and living however, had direct connections and relationships with physical health. In summary, their studies found connections between the physical health and natural systems and that the pathway to natural environments improves self-reported health and longevity within individuals (Russell, et al. 2013). Russel et al. also explains that the nonmaterial and material connections between people and their environment are strong, cosmopolitan, and necessary for human well-being (2013).

This belief is supported by Juhani Pallasmaa in An Architecture of the Seven Senses. He makes a point to emphasize the fact that sensory experiences are important to human wellbeing, and that there is a connection to nature between the body and architecture. This was written in 1994 in response to the growing digital environment Architecture creates forms that are informative of one another. The memorable experiences create a sense of familiarity and understanding within a space. Through an examination of the physical characteristics of time, memory, and place through materiality, there is a relation to the sensory experiences that are created within architecture

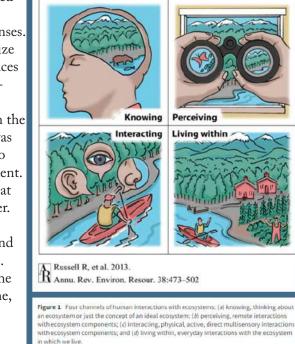


Figure 3 Source: Russell et al.

(1994).

Place Identity through Natural Elements

In addition to sensory experiences affecting how we experience architecture, so do our emotional connections. Place Attachment Theory examines our emotional connections with place and argues that people tend to stay in more familiar places (Hidalgo and Hernandez, 2001). Connecting buildings to the natural environment creates a sense of place and sense of community which promotes a sense of identity and cohesion. In "The Rural Studio," in Architectural Design: Every day and Architecture, author Samuel Mockbee emphasizes that looking beyond architecture is essential to establish what the political and environmental needs are. An awareness of social matters is also required in the field of architecture to be able to effectively serve the people in the community. His work with the Rural Studio seeks to understand and create a commonality with the way in people live within society. Allowing a "moral sense" to be achieved is the key objective for Mockbee. The understanding of being a good neighbor, community member, and advocator is something that Mockbee drives home in the essay. Anna Goodman states criticism of Rural Studio in "The Paradox of Representation and Practice in the Auburn University Rural Studio" that it is still the white colonial effort that speaks to creating new footprints in rural Alabama. Rural Studio looks at the idea of beauty for the sense of beauty and are there political ramifications that need to be created. Local community based designed projects coincides with the notion of place identity as it relates to a created sense of community and attachment (2014).

Harold Proshansky et al. in Place Identity: Physical World of Socialization of the Self looks at the strong ties to house and home, looking into the meanings behind place and their properties. Place-identity relates to one's thoughts, attitudes, and beliefs that are attached to the physical settings one has experienced. Experience of a physical setting moves from the stage of being remembered to being a core process to create an environmental past. Physical settings that humans experience during their lifetimes are responsible for the conceptual understanding of self-identity. Proshansky states that there has been little understanding of place identity and the reasons why people react and interact with certain places (2014).

Understanding place identity from Proshansky's point of view lends itself to criticism. One particular criticism is that there is no account of what processes guide action in relation to identity (Korpela, 1989). This results in no explanation of how or why places become important for the self. G.M. Breakwell's model of identity proposes that identity should be conceptualized in terms of a biological organism that moves through time. Through this model there is development of accommodation, assimilation, and evaluation of the social world. The four principles of Breakwell's model of identity include:

Distinctiveness

- Continuity
- Self-Esteem
- Self-Efficacy

Through distinctiveness, people use place identifications to distinguish themselves from others, and distinctiveness summarizes a lifestyle and defines a person as having a particular relationship with their home environment. Continuity of self is linked with development and maintenance, and this notion is used as a reference to a past action or experience. Self-esteem refers to a positive evaluation of oneself or a group that one identifies with, and there is a concern for a positive self-image and a desire for a positive conception of oneself. Self-efficacy is defined as an individual's belief in their capabilities to meet situational demands, and there is a sense of personal agency surrounding this concept and it is important for psychological well-being with respect to the environment (Twigger Ross & Uzzell,

Overall, Breakwell's identity process theory was designed to examine threats to identity. Through Twigger Ross and Uzzell's research, there was an implied disruption of identity due to the disruption of place. There is still question under what conditions of change to the environment do people feel a threat to their identity (Twigger Ross & Uzzell, 1996).

Owain Jones and Paul Cloke seek to understand how dwelling relates to a deeper connection to a place. In "Orchard" from Tree Cultures: The Place of Trees and Trees in their Place, they argue that the orchard and the fruits of its labor are agents that allow for the creation of a place. The authors also argue that the idea of dwelling is a fluid notion. Using trees to define a broader notion of dwelling, Jones explains that every tree has a unique pattern of branches. These branches develop as a sense of intimacy through interconnections: non-human entities are able to reach an understanding of dwelling. Removing elements of the dwelling or relocating them creates authenticity where there is no longer a harmonious authentic sense

of dwelling. The authors understand

that there is an intersection achieved

through a sense of authenticity with a

connectedness to nature. The ways in

which a dwelling is constituted comes

from the people and materials that co-

Future Directions and Conclusion

place identity is integral to creating

to nature through biophilic design and

successful curative spaces to supplement

constitute and co-construct these places

Understanding the connection



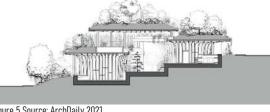
clinical facilities. Maggie's Centre in Leeds by Heatherwick Studio (2020) is a 4,973-sf successful example of a curative environment that incorporates each

(2002).

this literature review, which are biophilic design, connectedness to nature, and place identity. Inspired by a rooftop garden, the project was funded by the Maggie's Centre charity that provides free practical and emotional support for people with cancer. The cluster of three large-scale planters influence the notion that great design can help heal. Interaction with the site is encouraged and natural and tactile materials with soft lighting promotes a sense of healing and encourages a social setting where the visitors are encouraged to fill the space with objects that create a sense of home. Each planter encloses a counseling Figure 5 Source: ArchDaily 2021

of the elements described in





room that surrounds the heart of the center which is the kitchen. The space aims to create a sense of hope and perseverance while immersing the user in social interaction and quiet contemplation. Architect, Thomas Heatherwick emphasizes that the goal was to "...create a home that people wouldn't dare build for themselves" (Pintos 2021).

While Maggie's Centre in Leeds is a successful example of a curative and healing space, I would like to further influence and promote health and wellness through biophilic considerations, connectedness to nature, and an understanding of place identity, using Russell's four channels of human interactions, and Zhong et al. biophilic framework. To successfully create curative and healing environments that help supplement conventional approaches to medicine, healing, and human wellbeing, is the direction I would like to explore in my Interior Design thesis.

References

Ackerknecht, E. H. (1946). Natural Diseases and Rational Treatment in Primitive Medicine. Bulletin of the History of Medicine, 19(5).

Benyus, Janine M. 1997. "Parable of the Prairie" Excerpt from Biomimicry: Innovation Inspired by Nature

Breakwell, G.M. (1986). Coping with Threatened Identity. London: Methuen. Breakwell, G.M. (1992). Processes of self-evaluation: efficacy and estrangement. In G.M. Breakwell Ed., Social Psychology of Identity, and the Self-concept.

Surrey: Surrey University Press.

Breakwell, G.M. (1993). Integrating paradigms: methodological implications. In G.M. Breakwell & D.V. Canter, Eds., Empirical Approaches to Social

- Representations. Oxford: Clarendon Press.
- Browning, W., Ryan C., Clancy, J., (2014) 14 Patterns of Biophilic Design: Improving Health & Well-Being in the Built Environment. Terrapin Bright Green, LLC., New York.
- Brown, G., & Raymond, C. (2007). The relationship between place attachment and landscape values: Toward mapping place attachment. Applied Geography, 27(2), 89–111. https://doi.org/10.1016/j.apgeog.2006.11.002
- Gillis, K., & Gatersleben, B. (2015). A review of psychological literature on the health and wellbeing benefits of biophilic design. Buildings, 5(3), 948–963. https://doi.org/10.3390/buildings5030948
- Goodman, A. G. (2014). The Paradox of Representation and Practice in the Auburn University Rural Studio. Traditional Dwellings and Settlements Review, 25(2), 39–52. http://www.jstor.org/stable/24347716
- Grinde, B., Patil, G.G., (2009). Biophilia: does visual contact with nature impact on health and well-being? Int. J. Environ. Res. Publ. Health, 6. 2332-2343.
- Hills P, Argyle M. The Oxford Happiness Questionnaire: a compact scale for the measurement of psychological well-being. Personal Individ Differ. 2002;33(7):1073–82.
- Kellert, S.R. (2008). Dimensions, elements, and attributes of biophilic design. Biophilic Design: The Theory, Science and Practice of Bringing Buildings to Life, 3-19.
- Korpela, K.M. (1989). Place identity as a product of environmental self-regulation. Journal of Environment Psychology, 9, 241-256.
- Lee, K.E. et al., (2015). 40-second green roof views sustain attention: the role of micro-breaks in attention restoration. J. Environ. Psychol. 4, 182-189.
- McArthur, J. J., & Powell, C. (2020). Health and wellness in commercial buildings: Systematic review of sustainable building rating systems and alignment with Contemporary Research. Building and Environment, 171, 106635. https://doi.org/10.1016/j.buildenv.2019.106635
- Mockbee, Samuel. 1998. "The Rural Studio," in Architectural Design: Every day and Architecture.
- Mohamed S. Abdelaal & Veronica Soebarto (2019) Biophilia and Salutogenesis as restorative design approaches in healthcare architecture, Architectural Science Review, 62:3, 195-205, DOI:10.1080/00038628.2019.1604313
- Ng, Z., Ong, M., Jegadeesan, T., Deng, S., & Yap, C. (2017). Breast cancer: Exploring the facts and holistic needs during and beyond treatment. MDPI: Healthcare, 5(2), 26. https://doi.org/10.3390/healthcare5020026
- Owain Jones and Paul Cloke, "Orchard" from Tree Cultures: The Place of Trees and Trees in their Place (2002), In the Cultural Geography Reader. pp. 123–142
- Pallasmaa, Juhani. 1994. "An Architecture of the Seven Senses." Reprinted in Toward a New Interior, Weinthal, ed. pp. 40-49
- Park, M. Y., Chai, C.-G., Lee, H.-K., Moon, H., & Noh, J. S. (2018). The effects of natural daylight on length of hospital stay. Environmental Health Insights, 12, 117863021881281. https://doi.org/10.1177/1178630218812817

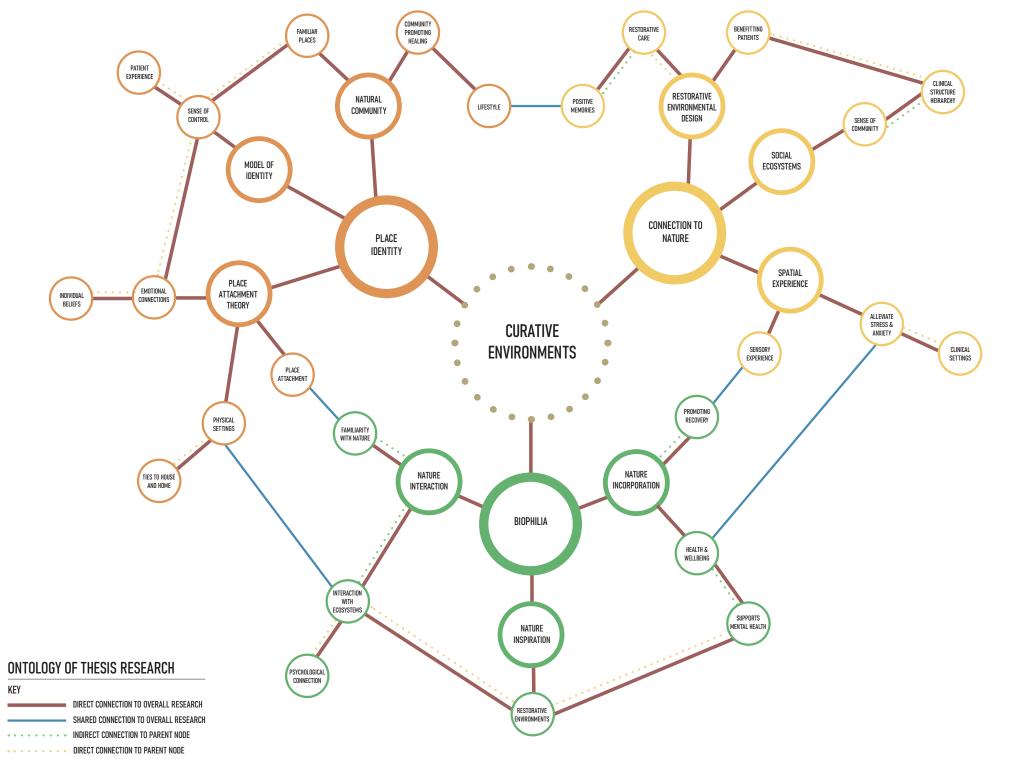
- Patel, M. S. (1987). Evaluation of holistic medicine. Social Science & Medicine, 24(2), 169–175. https://doi.org/10.1016/0277-9536(87)90249-8
- Pintos, P. (2021, July 24). Maggie's Leeds Centre / Heatherwick Studio. ArchDaily. Retrieved November 7, 2022, from https://www.archdaily.com/941540/maggies-leeds-centre-heatherwick-studio
- Proshansky, H. M., Fabian, A. K., & Kaminoff, R. (2014). Place-identity. 77.
- Ramzy, N.S. (2015). Biophilic Qualities of Historical Architecture: In Quest of the Timeless Teerminologies of "Life: in Architectural Expression. Sustain. Cities Soc., 15, 42-56.
- Russell, R., Guerry, A. D., Balvanera, P., Gould, R. K., Basurto, X., Chan, K. M. A., Klain, S., Levine, J., & Tam, J. (2013). Humans and nature: How knowing and experiencing nature affect well-being. Annual Review of Environment and Resources, 38(1), 473–502. https://doi.org/10.1146/annurev-environ-012312-110838
- Salmon, J. W. (2022). Holistic Health Center in the United States. In Alternative medicines: Popular and policy perspectives (pp. 22–45). essay, Routledge.
- Sinclair, B. R. (2019). Salutogenesis + design: pursuing an architecture of wellness in an age of illness.
- Stevens, D., Camic, P. M., & Solway, R. (2019). Maintaining the self: Meanings of material objects after a residential transition later in life. Educational Gerontology, 45(3), 214–226. https://doi.org/10.1080/03601277.2019.1601 832
- Stone, Sally. 2004. "Re-Readings: Interior Architecture and the Design Principles of Remodelling Existing Buildings." Excerpted in From Organisation to Decoration
- Twigger-Ross, Clare & Uzzell, David. (1996). Place identity and place attachment. Journal of Environmental Psychology. 16. 205-220.
- Ulrich, R.S. (1983). Aesthetic and Affective Response to Natural Environment. Hum. Behav. Environ., 6, 85-125.
- Valizadeh, L., Jasemi, M., Zamanzadeh, V., & Keogh, B. (2017). A concept analysis of holistic care by hybrid model. Indian Journal of Palliative Care, 23(1), 71. https://doi.org/10.4103/0973-1075.197960
- Zhong, W., Schröder, T., & Bekkering, J. (2022). Biophilic Design in architecture and its contributions to health, well-being, and sustainability: A critical review. Frontiers of Architectural Research, 11(1), 114–141. https://doi.org/10.1016/j.foar.2021.07.006
- White, M.P., et al., (2019). Spending at least 120 minutes in Nature is associated with good health and wellbeing. Sci. Rep., 9, 1-11.
- Wijesooriya, N., & Brambilla, A. (2021). Bridging biophilic design and Environmentally Sustainable Design: A critical review. Journal of Cleaner Production, 283, 124591. https://doi.org/10.1016/j.jclepro.2020.124591

Ontology of Research

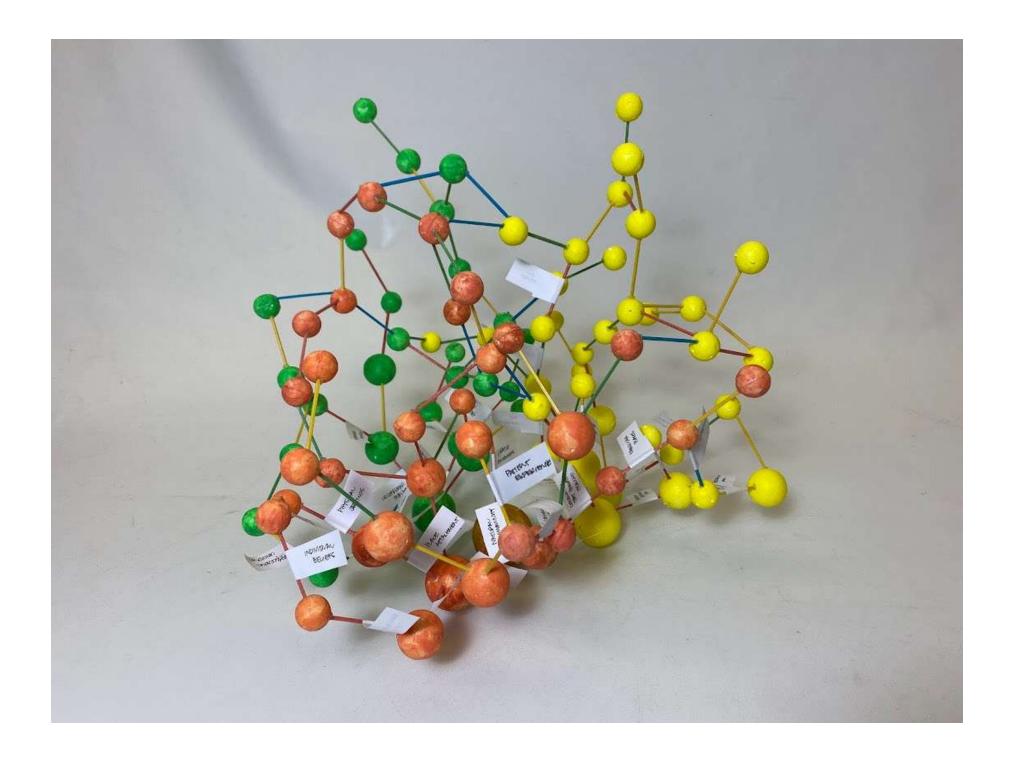
Ontology of Thesis Research

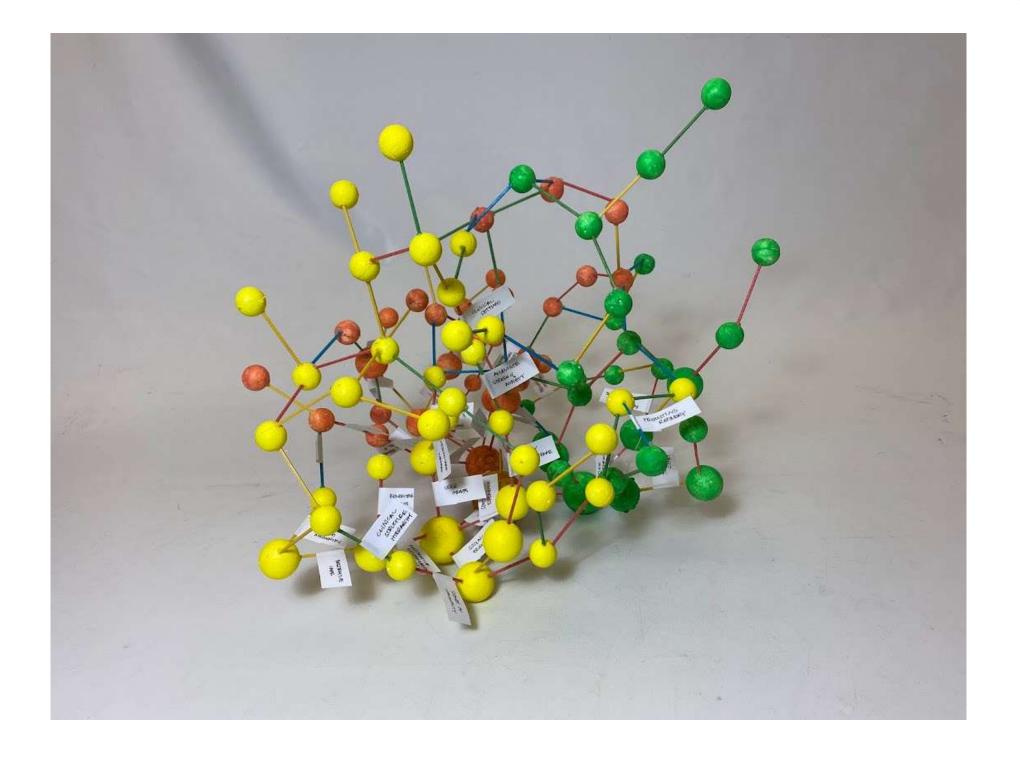
This 2D web is a condensed graphic that illustrates the relationship between different thesis research nodes and their relationship to the overarching element of curative environments.

A 3D Model was created to further visualize the more in depth connections each research node had to one another.



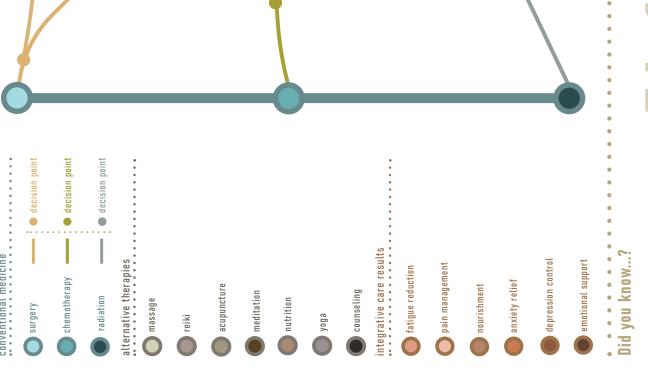
19





Holistic Integration Infographic

JOURNEY TO HEALING CANCER PATIENTS
The relationship between conventional medicine and alternative therapies to acheive positive integrative care results



of adults with can **malnourished**

- better tolerance of treatment controlled treatment path is achieved for atients

Maggie's Centre, Leeds

St. James's University Hospital, UK

ARCHITECT: Heatherwick Studio
AREA: 4,973 SF
YEAR: 2020
MANUFACTURERS: Blumer Lehmann
CITY: Harehills
COUNTRY: United Kingdom

MATERIALITY:

- Prefabricated, sustainably-sourced spruce timber system
- Porous materials including lime plaster maintain internal humidity and naturally ventilates the building.

INSPIRATION

- The rooftop garden was designed by landscape designer Balston Aguis
- Yorkshire woodlands and native English species of plants.

• • • • • • • • • • • • • • • • • • • •

- Maggie Keswick Jencks' love of gardening

This project was funded by **Maggie's Centre** which is a charity that provides free practical and emotional support for people with cancer. Heatherwick Studio designed this facility on the campus of St. James' University Hospital in Leeds. Maggie's Centre has 26 center locations throughout the United Kingdom.

The center is designed as a cluster of three large-scale planters. Heatherwick Studio drew influence for the design of the center through the philosophy of Maggie's and the notion that **great design can help to heal**.

Interaction with the site is encouraged through caring for the 23,000 bulbs and 17,000 plants that are on site.

Natural and tactile materials with soft lighting promotes a sense of healing and encourages a social setting where it is intended that visitors fill the windows and sills with there own objects to create a sense of **home**.

Each of the planters enclose a counseling room which surround the **heart of the center** which is the kitchen that promotes social interaction. Two tables built from cork were designed by the studio to represent the timber fins of the building.

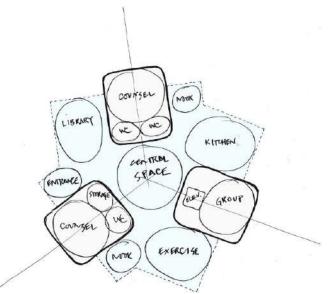
The space aims to create a sense of **hope and perseverance** while immersing the user into social interaction and quiet contemplation.



...create a home that people wouldn't dare build for themselves.

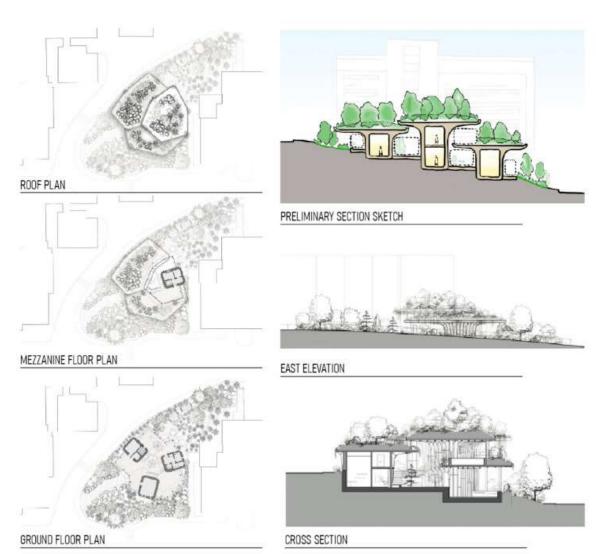
- Thomas Heatherwick, Heatherwick Studio





Maggie's Centre, Leeds

Drawings & Sketches







USER-GROUP DIAGRAM

Maggie's Centre Leeds

Maggie's Centre in Leeds by Heatherwick Studio is a 4,973 SF successful example of a curative environment that incorporates each of the elements described above. Inspired by a rooftop garden the project was funded by the Maggie's Centre which is a charity that provides free practical and emotional support for people with cancer.

Maggie's Centre successfully integrates biophilic forms through the use of curvilinear structures that are representative of large garden planters. Through these forms programmatic elements such as incorporating a sense of home and "the heart of the home" is created.

Along with the notion of the heart of the home, Maggie's Centre utilizes material objects to create a sense of place identity, which is evident throughout the space with different niche areas for the objects to be placed. Along with this sense of place identity, a sense of connectedness to nature is achieved through the incorporation and user interaction with plants and views to nature.









32

33

Fallingwater

1491 Mill Run Rd, Mill Run, PA

ARCHITECT: Frank Lloyd Wright

YEAR: 1938

MANUFACTURERS: Kuraray

CITY: Mill Run

COUNTRY: United States

MATERIALITY:

- -"Defined masonry form" out of reinforced concrete structure.
- Had the flexbility to be cast into any shape and had extraordinary tensile strength

INSPIRATION:

- Waterfall at Kaufmann family retreat
- Wright integrated the deisgn of the house with the waterfall itself, placing it right on top of the waterfall to make it a part of the Kaufmanns' lives.
- Japenese Architecture was also an inspiration

This project was designed for the Kaufmann family and their love of the waterfall at the Bear Run Nature Reserve. Fallingwater redefined the relationship between man, architecture, and nature. By **integrating the waterfall into the home** he was able to do so.

The house was meant to **compliment the drama of the falls**. The power of the falls is felt through sound as the falls can be heard throughout the house.

Wright revoloved the design of the house around the fireplace, the **hearth of the home**, a gathering place for the family. The original house includes a compact kitchen on the first floor and three small bedrooms on the second floor.

All of the rooms **relate towards the natural surroundings** and the living room has steps that lead directly to the water below.

The circulation of the house consists of dark, narrow passageways that create a feeling of compression and then expand to the outdoors. Low ceilings allow for the sightlines to be directed horizontally to the outdoors.

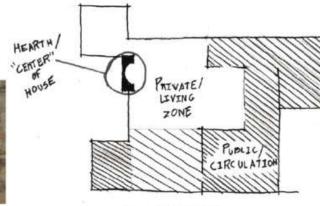
Cantilevers create an interesting **interaction** with the falls, and enforces a strong horizontal pattern with bricks and long terraces.



Fallingwater is the physical and spiritual occurence of man and architecture in harmony with nature.

- Frank Lloyd Wright





FALLINGWATER PUBLIC/ RIVATE PIAGRAM



West Chester Wellness Center | Case Study

828 Paoli Pike, West Chester, PA 19380

Interviewee Julie Senko, MS, LOM
Date of Interview 01.20.2023

Licensed Practitioner of Oriental Medicine & Founder of the West Chester Wellness

1) What is the main goal/purpose of your facility? (Are there annual reports, pamphlets, etc. available?) Wellness facility with practitioners. Provide services for holistic healing.

2) How would you describe your organizational culture?

There is no true organizational culture. The practitioners rent space from Julie to carry out their own services.

- 3) What is the square footage of your facility and how many occupants does that accommodate? 2,250 SF total including the basement. It accommodates 15 occupants
- 4) Is that size/ratio ideal?

Yes, the size of the building is what she wanted, parking is an issue but it accommodates her needs.

- 5) How does the design of your facility differ from other similar facilities? How is it the same? Integrated different practitioners, and utilized a 1920s home which brings a sense of home. It is the same in the sense that there is a bit of a clinical approach.
- 6) Who are the types of people that come to this facility? Age 40 and up, middle class, primarily white demographic
- 7) What is the average age/ability range of the occupants? 40 years old, with high abilities.
- 8) Are occupants seeking these treatments out themselves or is it prescribed? Seeking treatments out themselves.
- 9) Do occupants have preexisting conditions that they seek therapies for. Yes some clients do have preexisting conditions, but others are just interested from a health standpoint.
- 10) What are the different departments within your facility? What do they do? (Make list) No department structure. Services include acupuncture, counseling, physical therapy, massage therapy, tai chi, and tribal belly dancing
- 11) Number of staff? How many at facility at a time?

There are 9 practitioners, each have different hours, there is an average of 6 or 7 per day in the office with clients.

12) How do departments interact? Are there any special adjacencies?

No special adjacencies. Each practitioner has their own clients and does not cross mingle.

13) Do you have an organizational chart? No, there is no organizational chart

14) What type of workspaces does the staff require?

Each practitioner requires an office or room to conduct their services in. There is a shared studio downstairs as well as a communal kitchen.

15) What are the public areas in the space? Who uses them?

The public areas include the studio spaces and communal kitchen in the basement. The lobby and reception area as well as the restrooms and corridors with small waiting chairs.

- 16) What activities take place in the public areas? What works? What doesn't? Some small events take place in the communal basement area, but the public space is minimal and there is a closed office approach per each practitioner. The only issue with the basement is that it has ADA access but it can be difficult to navigate.
- 17) What are the circulation paths of public, staff, patients, deliveries?

The main entrance with the ramp and the first floor are the main circulation paths. There is a second floor with a main stair, but that is not ADA accessible, neither is the third floor. There is a back office area off of the sun room which is private. Each of the practitioner spaces are both public and private to accommodate the client needs.

18) Explain the process of coming in and going out and the spaces needed for this. There is a ramp that leads to the reception waiting area where clients are taken back to each respected room. The space is not conducive to wandering and has minimal views to nature unless you are in one of the rooms itself. There is a waiting area needed as well as private offices. The restrooms are not private, which may make it uncomfortable if someone needs to change for a massage. That also may be done in the room.

19) Are there any special equipment, plumbing, lighting, technology, or ventilation requirements? No special equipment or plumbing is required. Each practitioner brings their own materials like a massage table and things of that nature to be able to properly conduct their services. A washer and dryer is desired to change bed sheets.

20) What are the main safety issues?

There are no main safety issues other than ADA and proper egress from the building. The only major concern is creating a safe and comforting environment for all clients.

21) Are there any special safety or security issues?

No special safety or security issues, Julie wants to make it a safe and secure environment.

Design Specific Questions

1) Are there special workplace issues that will affect program and space planning? No, the practitioners have their own respected spaces.

2) Are there special finishes or furniture?

Yes, there are massage tables, calming colors, paintings, soft furniture, oriental rugs. All things to make a space feel comforting and like home.

3) Is there any necessary equipment?

Sound machines, washer and dryer to clean towels

4) Is there any special attention to acoustics?

No, there is no special attention to acoustics. The doors are solid wood to create privacy but the space was not designed around acoustics.

5) Should the environment be like (another type of facility)?

The environment should be calming and less clinical feeling with a very structured reception space, although the program seems to work well.

6) Does the space support the number of services provided? Yes the space adequately supports the number of services provided.

Thesis Specific Questions

1) If money were no object, what would this facility be like?

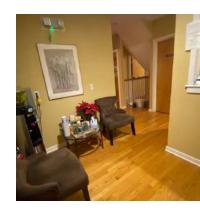
Julie believes that if money were no object the space would be updated finish wise and would have more windows and views to nature, but she would not change the location or the history behind the building she is in. Functional, manageable and a homelike feel.

2) What are the spaces required to efficiently run this facility?

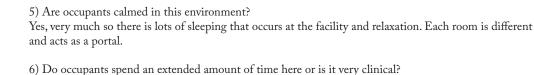
Reception space, different rooms for practitioners, public restrooms, kitchen area and a space for movement.

3) How does this facility compare to other similar facilities (in a specific aspect)?

This facility creates a more quaint approach and a more manageable approach to holistic care. There is not a clinical feel, and the space feels like a home when you walk into it. It is familiar and warm. The scope is smaller making it not overwhelming either.







This facility is appointment only, there is not extended stay, nor is there a desire for extended stay.

All staff spaces are supportive or the needs. The practitioners only really need one room for their clients.

4) Are staff spaces supportive of all staffing needs? Should there be more space?



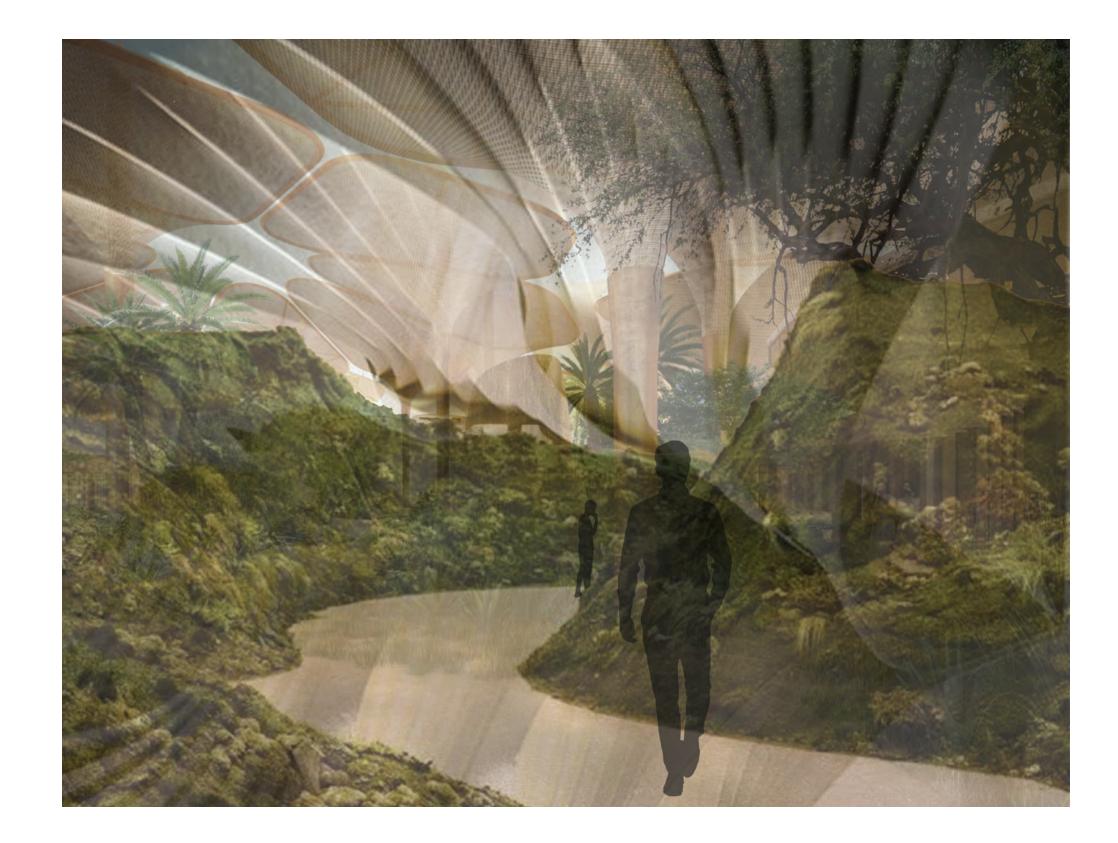


02 Design Agenda

Atmospheric Collage

In addition to sensory experiences affecting how we experience architecture, so do our emotional connections. This atmospheric collage seeks to examine the emotional connections with place and connectedness to nature. The collage looks beyond physical architectural forms and employs a sense of familiarity to the natural world. With influences from the Maggie's Centre in Leeds, this collage embodies the atmospheric qualities of my proposed thesis.

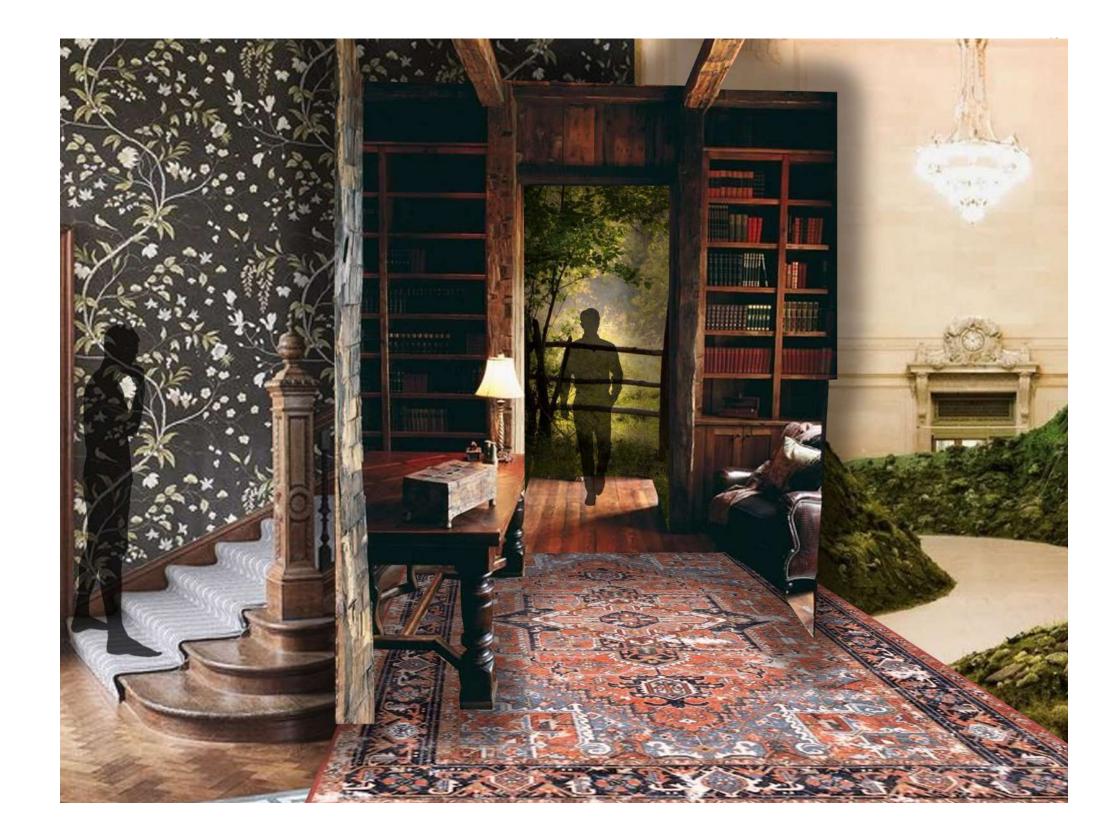
Interaction within this atmosphere is encouraged. Natural and tactile materials with a natural sense of light and shadow will be considered to help promote a sense of healing and to encourage a social setting where users are asked to fill the space with objects that create a sense of home.



Experience Collage

This experience collage is inspired by an interview that was done with my mother. There is a focus on place identity and familiarity with space. Through this interview, I was able to understand the memories that my mother had that brought fond memories and a sense of comfort to her.

I created this collage to embody the sense of "home" that she emphasized was an integral part of her treatment journey and path to healing.



Achieving a Connectedness to Nature

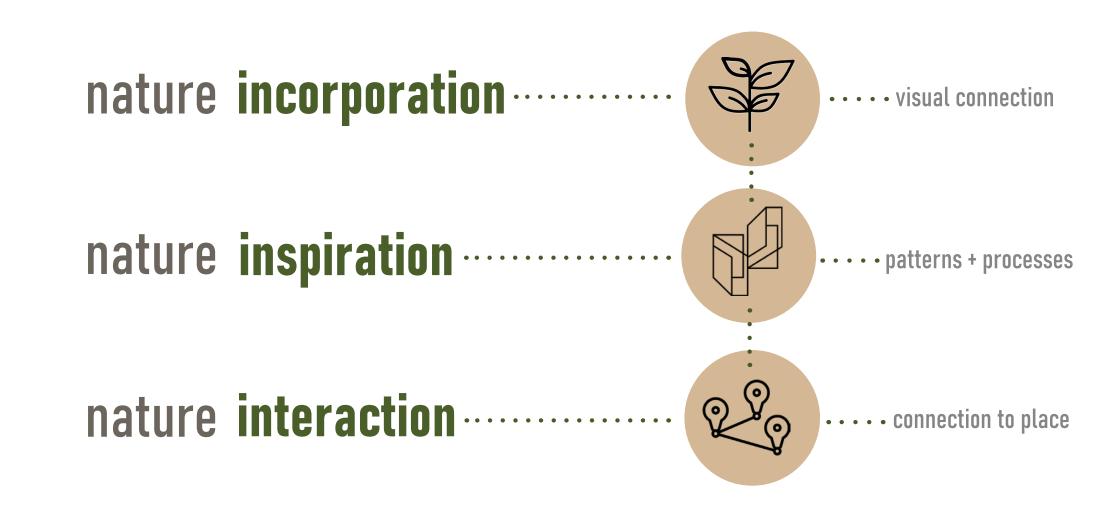
Creating holistic restorative environments through connecting humans to nature is the larger goal of this thesis. Through my research three biophilic frameworks emerged as important elements of biophilic design pertaining to my area of study.

The three frameworks are nature incorporation, nature inspiration and nature interaction.

Nature Incorporation includes creating natural elements, phenomena, and processes that are emphasized through multi-sensory experiences. The experience that I plan on incorporating into this framework is the use of plants.

Nature Inspiration is the imitation of nature, also known as biomimicry to evoke a sense of nature through the delicate placement of natural features. Within this framework I intend to employ natural forms and shapes.

Nature interaction is the arrangement of spaces based on evolved human nature relationships to experience nature-like environments and establish connections with the natural system. Through this framework I will utilize connection to place with influences from natural systems.



03 Program

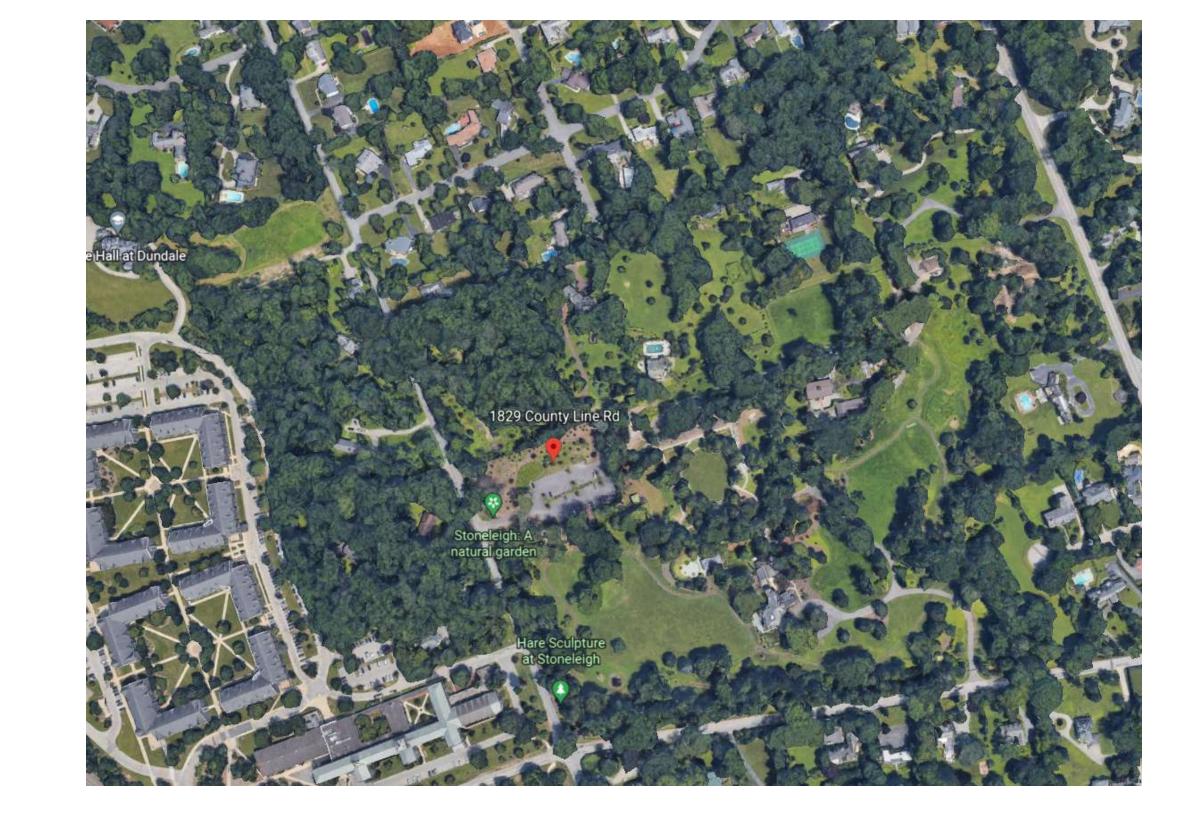


Stoneleigh 1829 County Line Rd, Villanova, PA

The mansion was originally built in 1877 by Edmund Smith an executive with the Pennsylvania Railroad Company. To shape the grounds, Smith hired landscape gardener, Charles H. Miller who served as the chief gardener for Fairmount Park. Samuel Bodine, head of United Gas Improvement Company acquired the land and built the Tudor Revival style home in 1900. Bodine hired the Olmsted Brothers of Massachusetts to guide a gradual transformation of the place. In 1932 Otto Haas, co-founder of Rohm and Haas Company, purchased the house and launched a more than 80-year tenure of stewardship by the Haas family. In 1996 the house was placed under a conservation easement with Natural Lands ensuring the place would be preserved.

- Historic Tudor Revival style building
- Built in 1900, originally 65 acres
- 19,057 SF
- 42 acre property maintained by Natural Lands



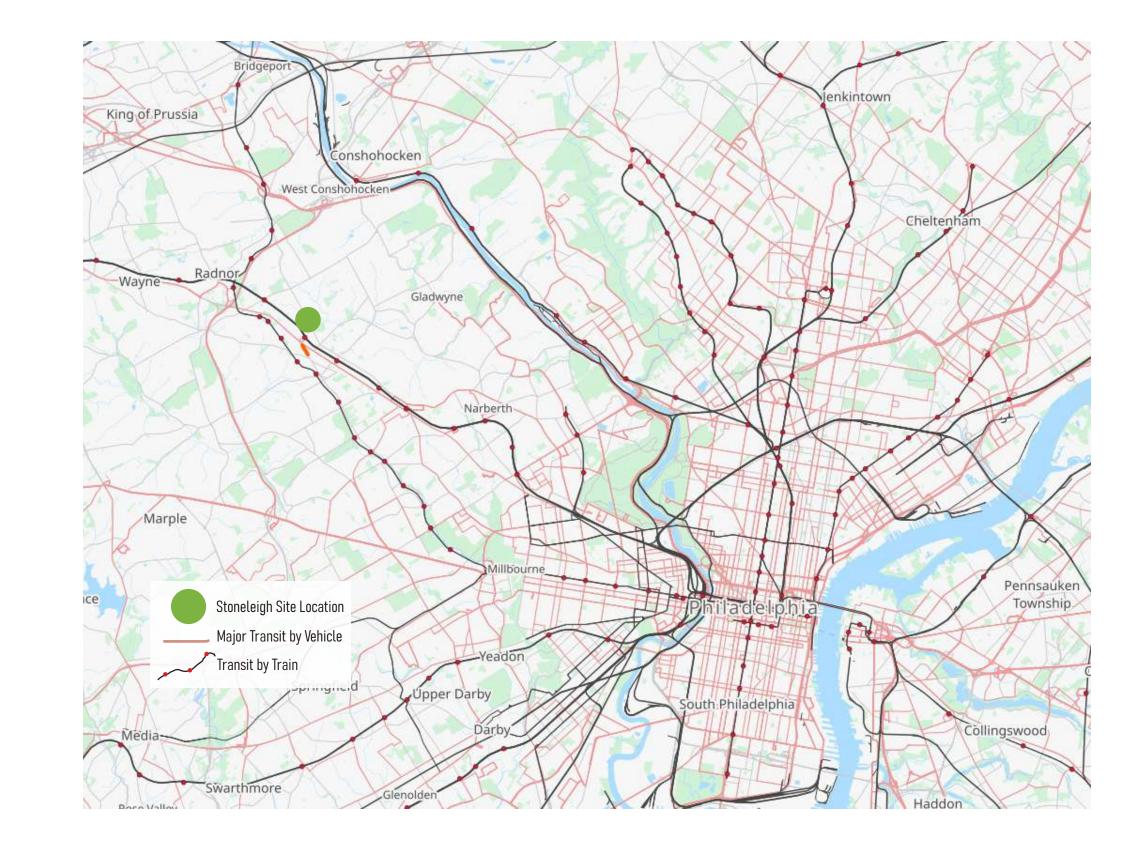




PUBLIC MAIN HIUSE ENTRANCE = ACCES ROUTES

Map of Utilized Structures & Trails

Accessibility & Transportation









Bryn Mawr Hospital Site Map Courtesy of Main Line Health

Hospital Accessibility



MAIN HOUSE EXISTING FIRST FLOOR PLAN NOT TO SCALE







MAIN HOUSE EXISTING EAST SECTION
NOT TO SCALE



MAIN HOUSE EXISTING WEST SECTION NOT TO SCALE



MAIN HOUSE EXISTING SOUTH ELEVATION NOT TO SCALE





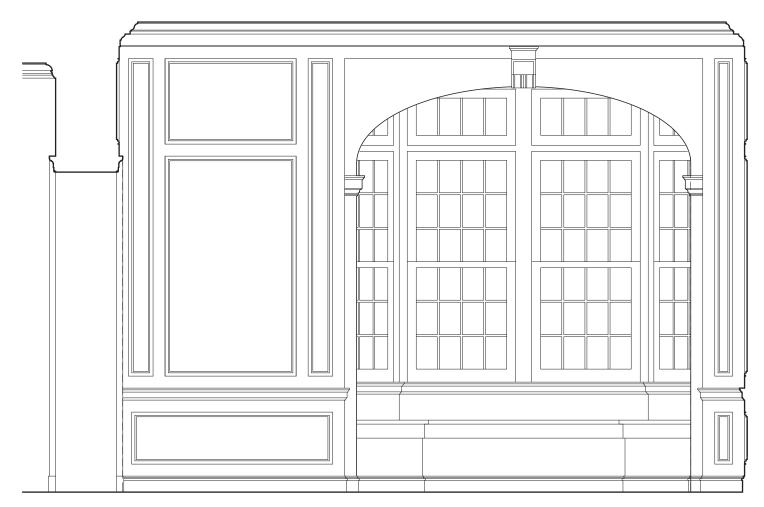
EXISTING MUSIC ROOM



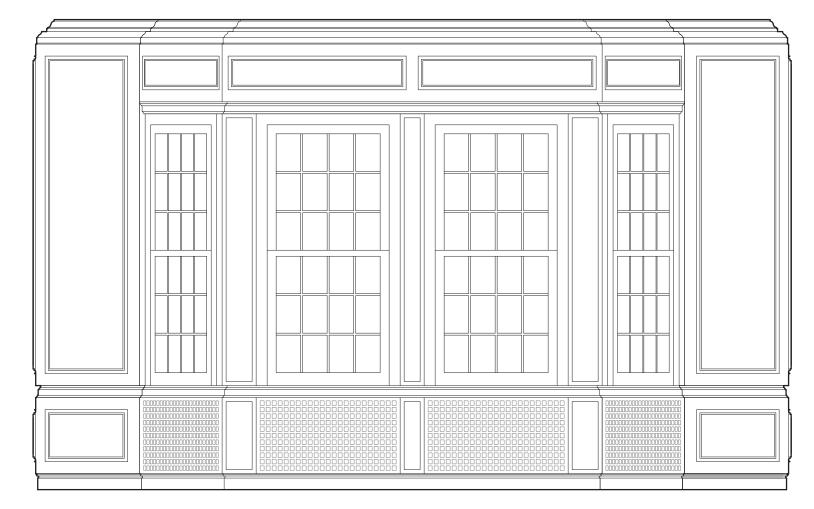
EXISTING DINING ROOM



EXISTING MAIN STAIRWELL

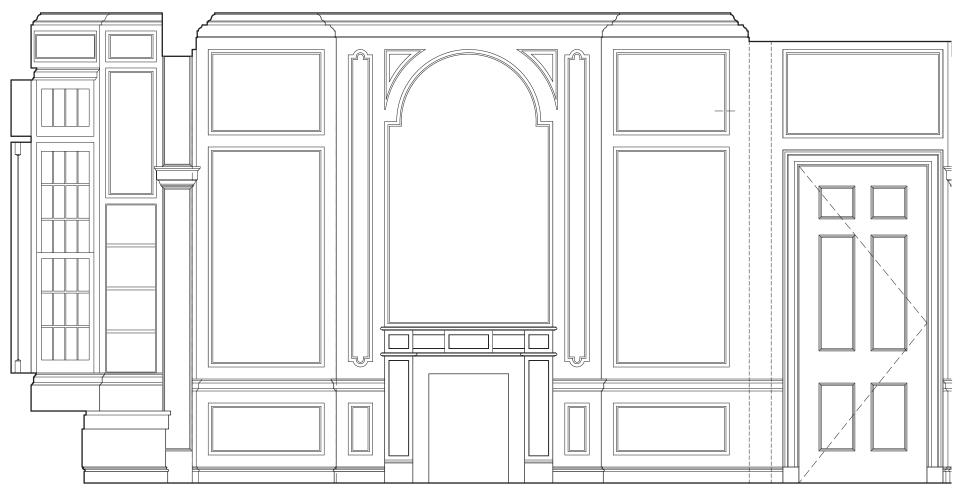


DOCTOR CONSULT MILLWORK ELEVATION SCALE: 1/2" = 1'-0"



ACUPUNCTURE ROOM MILLWORK ELEVATION

SCALE: 1/2" = 1'-0"



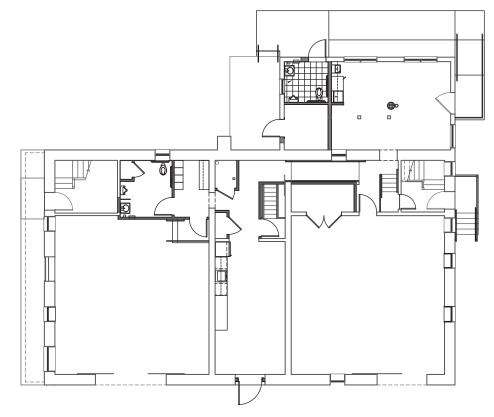
DOCTOR CONSULT MILLWORK ELEVATION

SCALE: 1/2" = 1'-0"

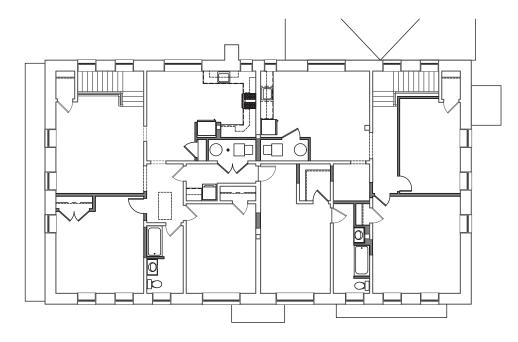
CARRIAGE HOUSE EXISTING SOUTH ELEVATION NOT TO SCALE







CARRIAGE HOUSE EXISTING FIRST FLOOR PLAN
NOT TO SCALE



CARRIAGE HOUSE EXISTING SECOND FLOOR PLAN
NOT TO SCALE







CARRIAGE HOUSE EXISTING EXTERIOR



CARRIAGE HOUSE EXISTING GARAGE



EXISTING EAST CARRIAGE BAY



EXISTING WEST CARRIAGE BAY

Healing Sanctuary

Sanctuary: A place of refuge or safety

Program Information & User Group

- 1. Creating a cancer wellness and healing facility
- 2. Create a sense of connection to nature
- 3. Passport to healing; holding a patient's hand throughout the entire journey
- 4. Provide wellness therapies along with treatment options
- 5. Consider familial impact and provide services to support
- 6. Bridge the gap between a sterile environment and wellness therapies
- 7. Allow a sense of control to be achieved by allowing patients to curate their own journey
- 8. This facility is for cancer patients and their support systems seeking a non-sterile and self-motivated path to healing

Preserving Historical Architecture

- 1. Efforts to maintain and respect character of existing building
- 2. Sensitive and careful schematic planning to be mindful of exterior facade
- 3. Utilize the rich history to offer a sense of choice and control within a patient's treatment journey

Wayfinding Through Nature

Security & Familiarity

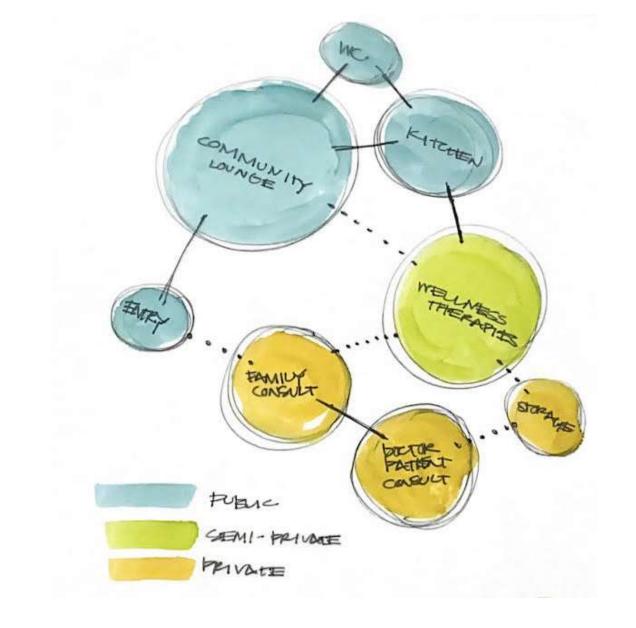
Principles

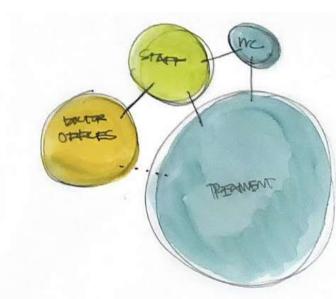
- 1. As we move through space, our knowledge undergoes continuous formulation
- 2. Wayfinding is not knowing before we go, but it is know as we go
- 3. Wayfinding through nature is not a way to "traverse a landscape," it is also a matter of safety (M.R. O'Connor, 2019)
- 4. Biophilia influences the moment-to-moment physical and sensory elements found within interiors
- 5. A sense of wandering, a peaceful and enlightening discovery
- 6. Trail markers, distinctive landmarks, and unique patterns trigger memory and familiarity
- 7. Cognitive mapping and coherent mental images

Element of Choice

- 1. Wayfinding is one of the most common elements of decision making
- 2. Consider a familiar environment versus an unfamiliar environment
- 3. Create a guided experience through imageability

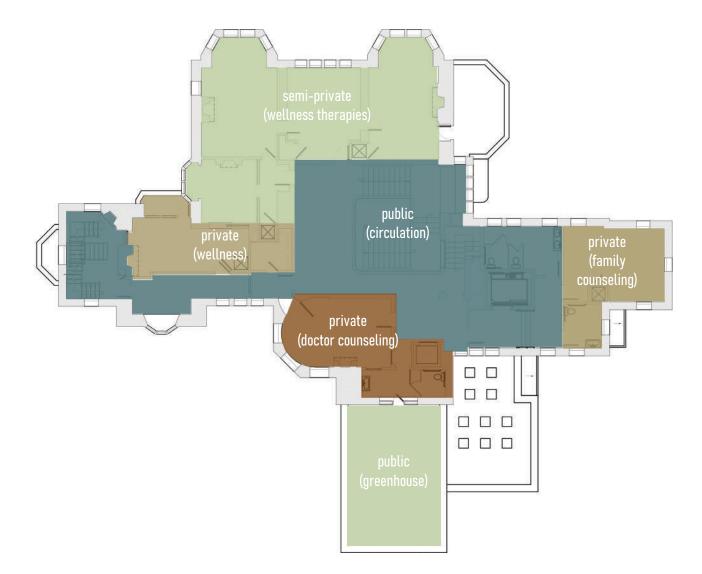
program	square footage	
stoneleigh main house		
patient/doctor consult	2,000	sf
family consult spaces	1,000	sf
wellness therapies	3,000	sf
community ammenity	2,000	sf
community kitchen	1,200	sf
entry	500	sf
public restrooms	900	sf
storage	500	sf
building support	1,400	sf
subtotal	12,500	sf
circulation @ 20% +/-	2,500	sf
total	15,000	sf
carriage house		
treatment therapies	3,072	sf
staff area	1,408	sf
doctor offices	1,408	sf
total	5,888	sf
pool house	1,158	sf
site subtotal	24,114	sf



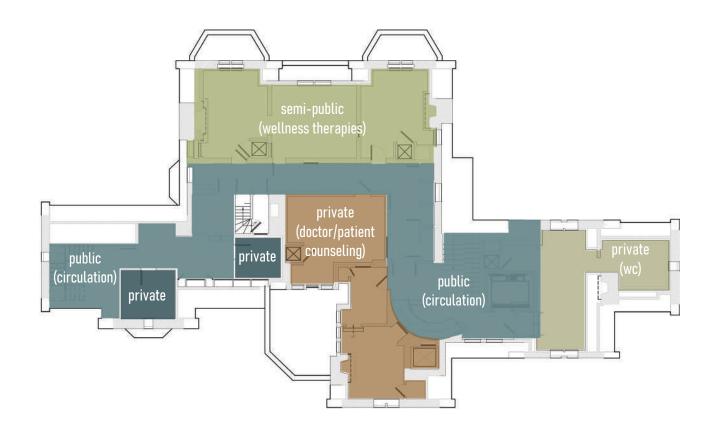


Main & Carriage House Bubble Diagrams

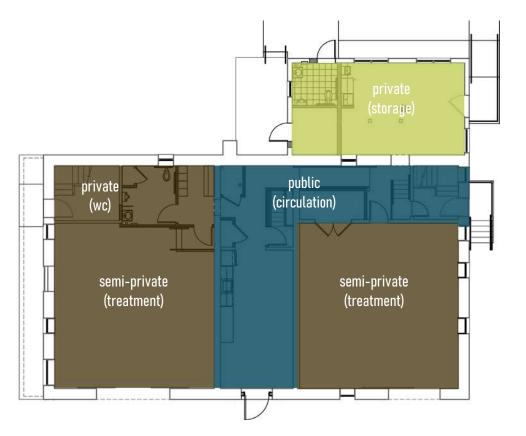
Main House Programming



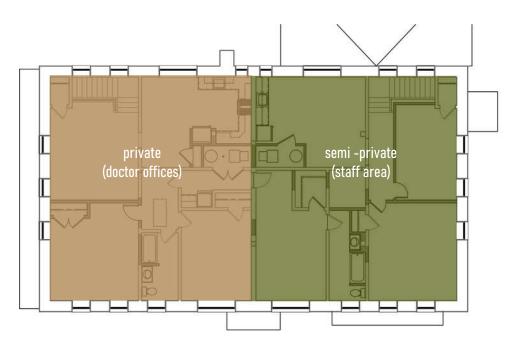
SECOND FLOOR PLAN NOT TO SCALE



THIRD FLOOR PLAN NOT TO SCALE



FIRST FLOOR PLAN
NOT TO SCALE



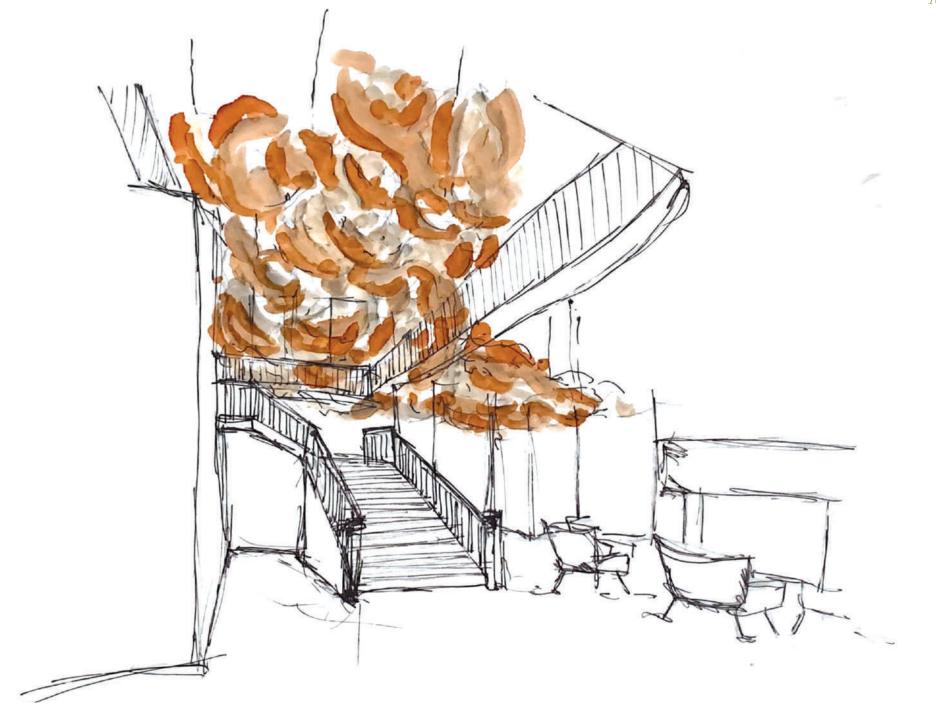
SECOND FLOOR PLAN
NOT TO SCALE

Carriage House Programming

04 Design Development



CARRIAGE HOUSE INSTALLATION SKETCH



MAIN HOUSE INSTALLATION SKETCH



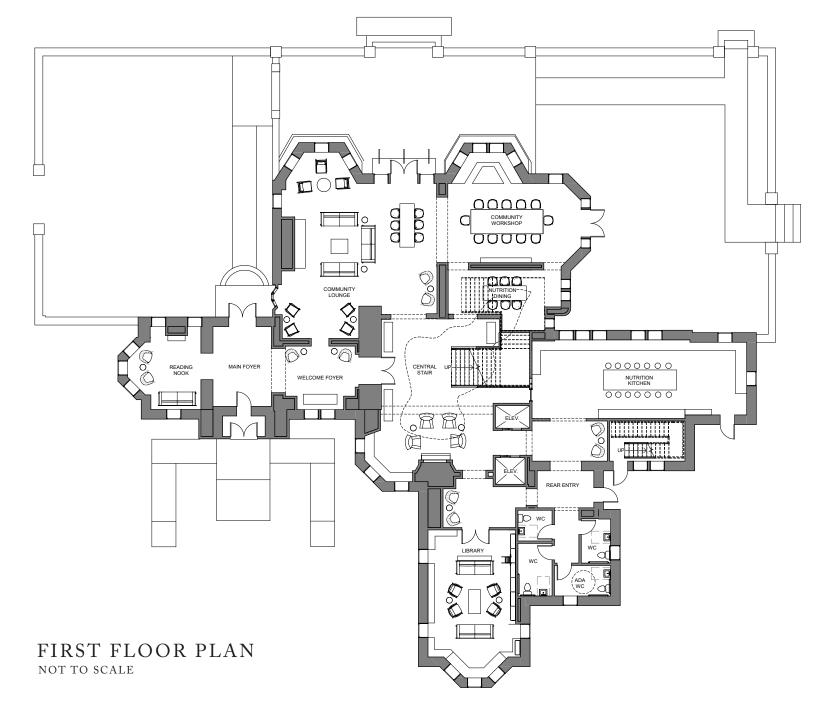


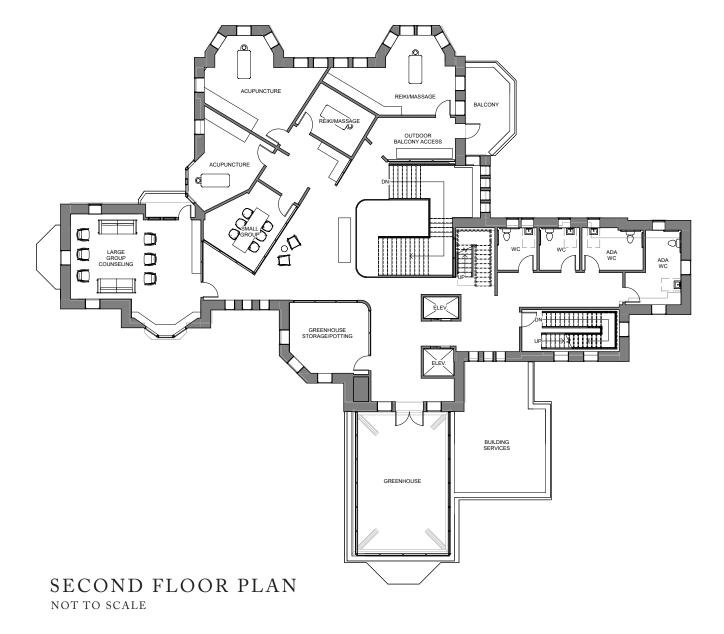


Installation Inspiration



Greenhouse Inspiration



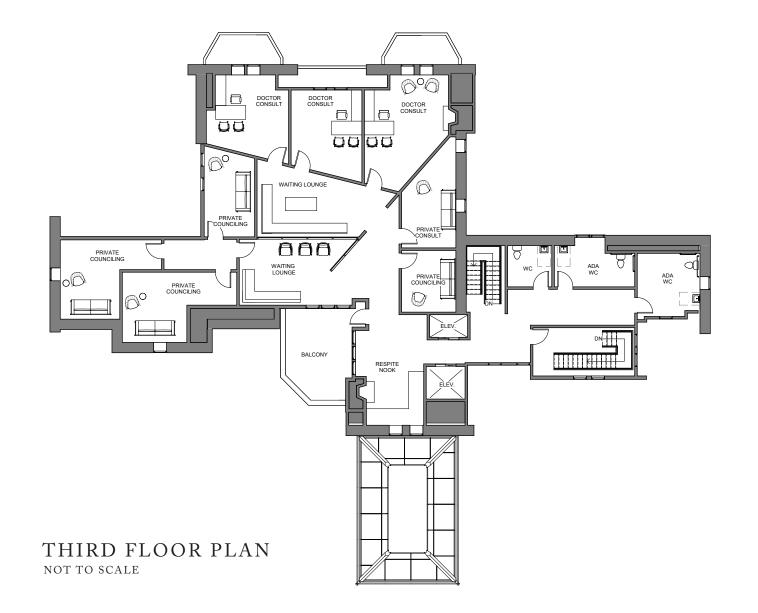


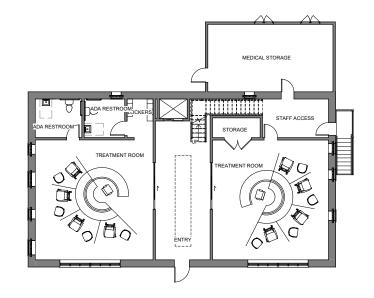


Main House

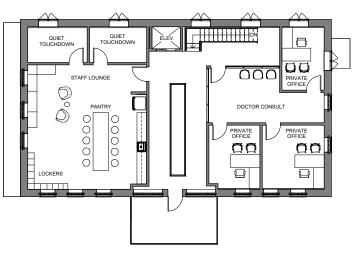








FIRST FLOOR PLAN



SECOND FLOOR PLAN
NOT TO SCALE





SECTION A-A
NOT TO SCALE



SECTION B-B





05 Final Design



111

A Brief Introduction

I have explored the opportunities behind creating a patient centric environment that promotes healing through bridging the gap between conventional medicine and alternative therapies. This investigation aims to promote a curated journey for both the patient and their support teams while carefully considering the treatment paths that each patient experiences.

Utilizing the surrounding grounds as a direct connection to nature, The Main House and Carriage House at Stoneleigh serve as the main treatment buildings. With the surrounding environment open for both public and private patient use, Stoneleigh aims to create a curated community to help cancer patients regain confidence and control. Partnered with a larger network of physicians, Stoneleigh serves cancer patients alongside a rotation of employed nurses, and doctors.

Within miles of access to state-of-the-art medical care at Bryn Mawr Hospital, Lankenau Medical Center, and Paoli Hospital, Stoneleigh serves as a satellite care facility to serve all cancer patients.

The program is broken up into two main structured elements for cancer patient care: alternative care and conventional treatment. These out-patient buildings are private for patients and their support teams only, while other areas of the acreage remain open to the public. Through my research, restorative ideals for cancer patients include connection to nature, the integration of conventional treatment and wellness therapies, familial support, a sense of control, a safe and protected environment and cultivated shared memories and experiences through community.

110

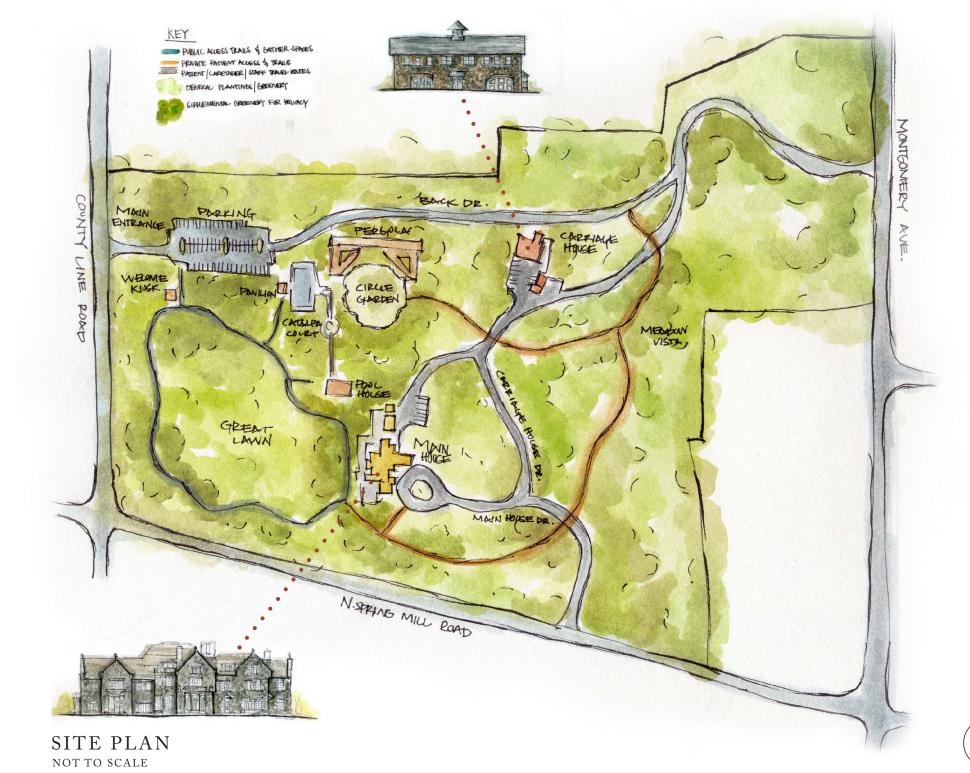
The Site

The Main House provides wellness therapies and alternative treatments to support conventional cancer treatment and diagnosis. Through elements of Community, Education, Empowerment, Inclusion, Trust, and Partnership, Stoneleigh provides comprehensive education and nutrition services, counseling opportunities, and wellness therapies including acupuncture, massage, reiki, and yoga.

The Carriage House surrounded by existing curated landscape architecture, provides access to conventional medicine to fulfill cancer diagnoses. Chemotherapy treatment is available along with doctor consultation and support services.

Additional out buildings on the acreage are utilized for public use. These areas include the welcome kiosk, public shelter and catalpa court, and the pool house, utilized for open air workshops and classes such as yoga and meditation. A few existing gardens such as the rose garden and catalpa court will be converted into a monitored children's play garden to incorporate childcare needs during treatment.

The trails, as seen on the site plan, are guided by carefully placed landscape elements to create public and private patient moments. All the trails throughout the property are ADA accessible and are paved with gravel and recycled rubber to create a cushioned pad for walking. Accessible parking at both the Main House and Carriage House is available, along with parking in the public lot that allows for a more curious path of travel to both buildings.



N

The Main House

The Stoneleigh Main House has been redesigned with careful consideration. Historical preservation of the exterior building envelope brings out the rich character that Stoneleigh possesses. Millwork detailing on the first floor has been preserved while the second and third floors are refreshed with contemporary touches and complimented with traditional elements.



Entrance

The first floor existing conditions were preserved and maintained to be true to the period of the home. The Tiger Wood paneling in the main stairwell has been stripped and stained a lighter finish to create a brighter atmosphere within this integral central area. The existing elevator within the home has been updated to meet ADA requirements as well.

When entering Stoneleigh, the atmosphere is calm, but captivating. The stone masonry walls and arches narrate the rich history that this residential home possesses. Understanding the history and sense of familiarity that people have towards classical architecture was integral to the design of Stoneleigh. Respecting the character and stories that Stoneleigh collects transformed this space to be more than a just a house, it is a home for all who travel through.

The front entrance has been redesigned and includes a ramp that provides ADA accessible access to enter. The main foyer acts as the transporting threshold that brings cancer patients towards a positive and restorative journey.



First Floor

With a small reading nook to the left, visitors can use this as a place for respite and reflection. Without a proper receptionist, the welcome foyer is the initial information point to learn about the services that Stoneleigh provides.

Inspired by the winding trails and niche gardens on the property, the circulation through the Main House takes a similar approach. A centralized linen art installation by Diana Orving transforms the central stair and blossoms to the second and third floor of the building. This installation serves as the memory piece within the building creating a landmark anchor point of directionality and familiarity from floor to floor. Through this concept, the art of circulation is created. Patients are encouraged to wander through the space and discover different modes of alternative care that will allow them to curate their own path to healing.

The first floor is the most public space, serving as a lounge and community space to explore the benefits of nutrition and provide extensive educational opportunities and workshops to further a patient's knowledge about restorative care. Large community tables are contrasted with quaint furniture configurations to create a curated sense of public and private areas throughout this floor. The materials on the first floor are inspired by traditional colors but bring a contemporary feel through the patterns and ergonomic furniture selections as well.

Inspiration for custom area rugs that will be used throughout the first floor are hand tufted artisan rugs, these rugs will be inset into the hardwood floor to allow for accessibility and reduce the risk of tripping.





First Floor Materials





Installation

The art installation by Swedish artist, Diana Orving, is suspended from the ceiling and from itself as well with clear cabling. With wire and transparent linen, the installation allows for light and subtle visibility.

Orving explains her process by stating:

"I understand form through my hands and look forward to the intersection where feeling and thought meet. I use form and movement to both express and understand states of mind, the dynamics of relationships, mental and physical processes. For me art is a spiritual tool and a language that sometimes communicates on a deeper and more instinctive level than words alone"

This statement by the artist emulates the same atmospheric qualities of both the installation and the design of Stoneleigh itself. The large installation emulates movement and fluidity that expresses a form of exploration and transformation pulling users up vertically throughout the space.



FIRST FLOOR INSTALLATION PERSPECTIVE

Second Floor

The second floor serves as a semi-private space for patients to receive holistic care including acupuncture, massage, and reiki. The art installation continues to the second floor creating a sense of memory and place identity from the first to second floors. The interior walls of the second and third floor have been transformed and redefined, leaving only the existing building shell to remain.

Rotating the existing building grid was integral to creating a unique and redesigned circulation path to access the wellness rooms. Rotating the grid while maintaining the perimeter building envelope allows for central circulation around the art installation while allowing patients to feel a sense of privacy while receiving care. The pods create directional paths to promote discovery of the services provided while simultaneously creating areas of high and low visibility.

Understanding the sense of uncertainty that is associated with different diagnoses and treatment paths was considered within this design. Allowing for a more open path to circulation opens the sprawling branches of the existing building. Incorporating an indoor/outdoor element by attaching a greenhouse onto the existing balcony and building façade brings a sense of nature inside. Through this biophilic element, patients are encouraged to contribute to the community garden situated inside of the greenhouse. Incorporating clerestory glass into the interior therapy rooms allows for a sense of natural light to penetrate these rooms to create a tranquil environment.

The materials on the second floor are subtle and create contemporary take on the traditional elements designed on the first floor. The existing hardwood floor has been matched with new to create a seamless transition from first to second floor. The palette pulls from the natural elements that surround the existing Main House while incorporating barrier free furniture and inset custom area rugs throughout.





Main House Second Floor Materials





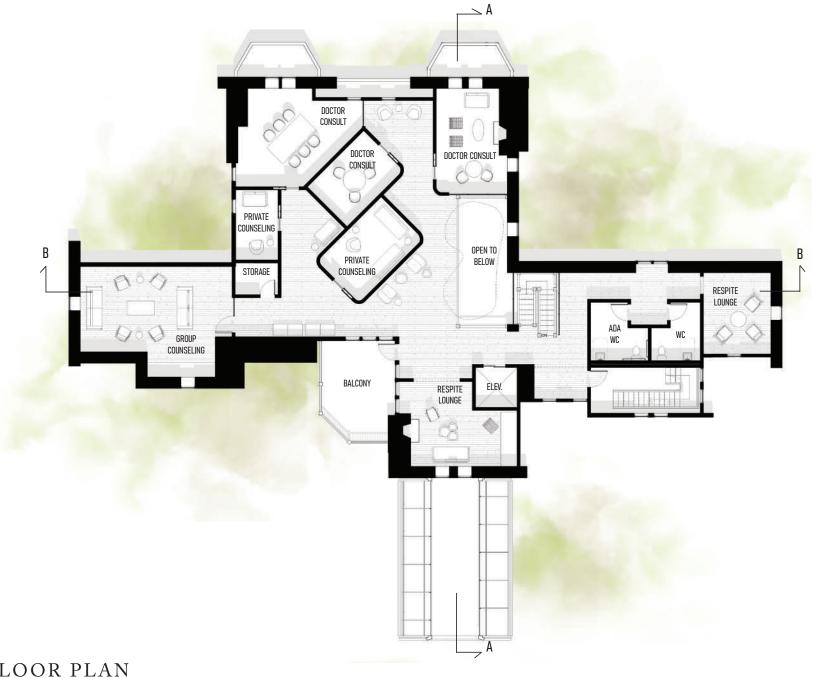
THIRD FLOOR INSTALLATION PERSPECTIVE

Third Floor

The third floor is the most private for patients and their support systems to be able to access doctor consultation and group or private counseling. The art installation travels to the third floor to continue the sense of memory centralized to the circulation of the space.

The rotated grid also continues to the third floor to create a sense of interior familiarity from the second to third floor. With niche areas for respite, patients are encouraged to reflect and find peace throughout their journey. With a variety of consultation and counseling room sizes and configurations, there are diverse options for different consultation needs.

The materials are reflective of the second floor, continuing the subtle and tranquil palette that has a natural approach with pops of color to contrast the neutral elements. The gradation from the first to the third floor becomes less saturated as the palette becomes more muted but incorporates rich pattern and texture.







Third Floor Materials

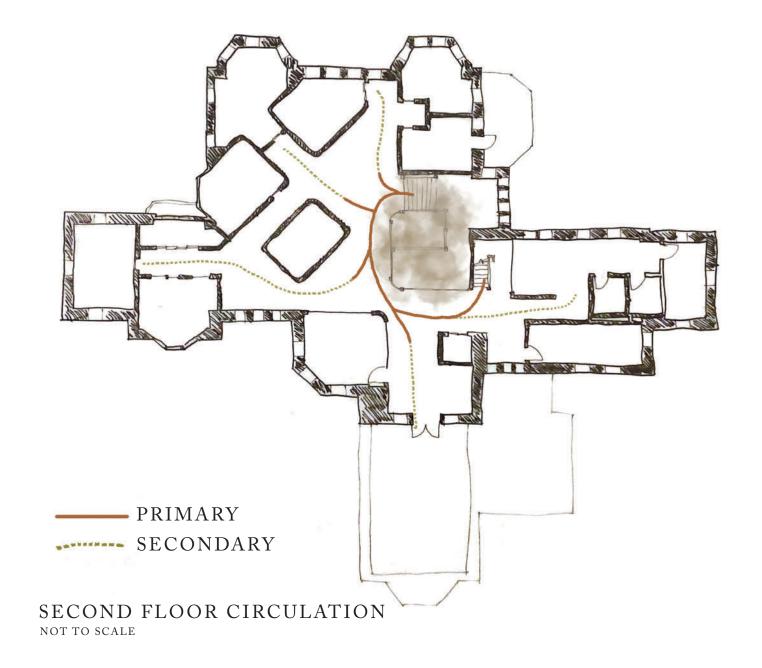


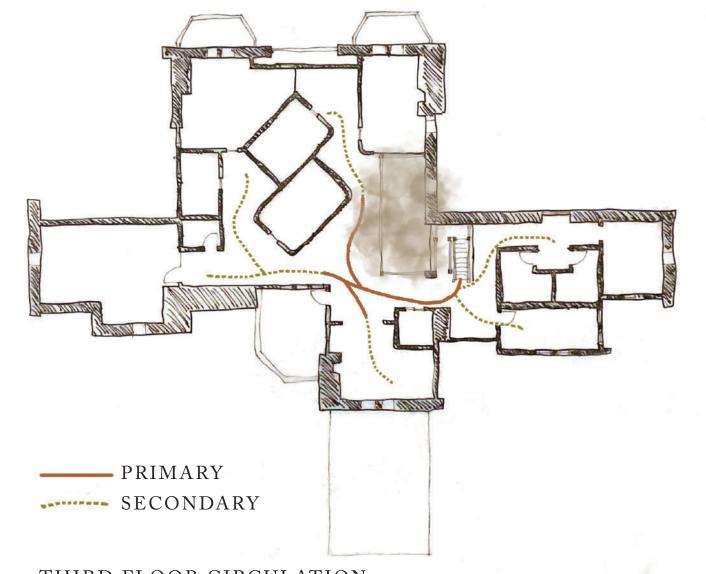


PRIMARY SECONDARY FIRST FLOOR CIRCULATION NOT TO SCALE

Installation Circulation Diagrams







THIRD FLOOR CIRCULATION
NOT TO SCALE



The Carriage House

The Carriage House situated northeast of the Main House is the oldest structure on the property dating back to before the construction of the Main House. The exterior construction of the Carriage House has been maintained with minor adjustments to meet the programmatic needs of the treatment facility.

The Carriage House includes areas for treatment, consult, and medical supply storage, while the adjacent garage will be converted into a sterile and controlled storage space for chemotherapy drugs.

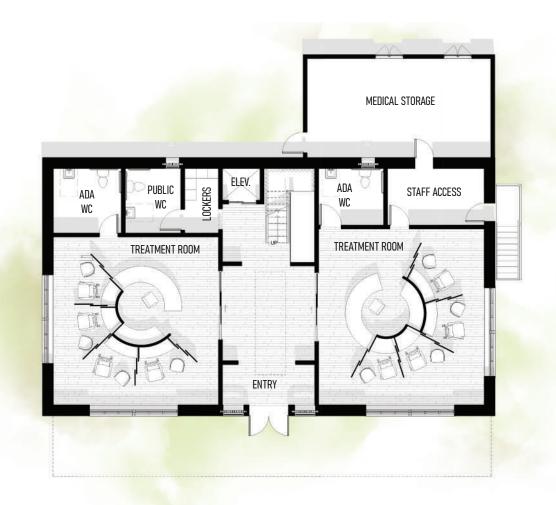
The Carriage House is a place of empowerment, calmness, and trust to create a positive experience for cancer patients and their support systems while receiving care. Modifications to the existing building envelope include the demolition of the existing carriage bay doors. While keeping the integrity of the shape of the carriage bay doors, large arched windows have been installed to allow for views and connection to nature within the treatment rooms.



First Floor

Upon entering, patients and staff are greeted with a light installation that takes on a similar approach to the art installation in the main house. This creates continuity and familiarity between both treatment spaces.

The radial treatment chair configurations allow for views to the exterior landscape from each seat in the room. With moveable acrylic partitions, the treatment rooms can become either more public to create a sense of community or more private. The materials used in this space include luxury vinyl tile flooring and vinyl wall base to match the existing hardwood in the main house, as well as vinyl fabric for the treatment chairs to allow for cleaning to be conducted throughout the space.



FIRST FLOOR PLAN







TREATMENT ROOM PERSPECTIVE





ENTRY PERSPECTIVE

Second Floor

The second floor of the Carriage House includes staff space as well as doctor consultation offices. This area is to be used as support for patients as well as visiting doctors from within the network of partnered physicians. Materials used for the Carriage House emulate a residential feel allowing for patients to feel comfortable and familiar with their environment.

A balcony has been added off the Carriage House second floor façade to allow for a place of refuge and respite. While the balcony not only connects patients to nature, it also encourages the celebration of treatment completion by ringing the bell. To help mark this milestone and close a difficult chapter, the balcony becomes a grand stage for patients among nature, connecting them to a sense of relief and regeneration.



SECOND FLOOR PLAN





156

Closing Remarks

It is has been my goal to embrace the human connection to nature, the utilization of patient-controlled experiences, and the curated sense of home to create positive a journey to healing. The vision for Stoneleigh has been one of peace and serenity to guide patient-curated experiences.

To close, I would like to acknowledge a few words the late owners of Stoneleigh, John and Chara Haas, have said:

We hope that you enjoy your visit here, and when you depart, may a bit of the peacefulness and beduty, which is so much a part of Stoneleigh, be with you.

John & Chan Haas

Acknowledgments

First, I would like to thank my family and friends, who have always seen the vision in everything I do and who have supported me unconditionally along the way.

Next, I would like to thank Rena, my thesis advisor, for her endless support and collaborative input throughout my entire thesis. Her confidence in my abilities helped push me forward throughout my thesis journey. I could not have asked for a better thesis advisor. Thank you, Rena.

Lastly, I would like to thank the Interior Design Department at Drexel University. The unwavering passion and care for each and every student sets this program apart. I was fortunate enough to be the beneficiary of the unwavering support and encouragement that unites this program. I have cherished the time I have spent with each faculty member, and would like to thank you all for everything that you have taught me.

62

Interviews

Interview with Gillian Armstrong. Stage 2 Breast Cancer Survivor Interview by Celia Armstrong

Interview Date: 12/28/22

C: What is your definition of wellness generally?

G: I define it as wellness as a holistic caring of the mind, body, and spirit.

C: When you were receiving treatment what were the environments you interacted with the most and what was most memorable?

G: Conventional medicine interacted with the most hospitals and that was for acute treatment. Environments - emotionally associate with stress and sadness

Acupuncture - Calm and calm and relaxation - office building environment that was created was soothing - relaxing music, private rooms that included artwork and shelves of books, a sense of warmth. It was not sterile. Architecture did not match the services that were provided.

Plants, warm woods

There was not a sense of it being a doctors office - transforming the environment at hand and it was not at a high level. A level that makes a patient feel relaxed and comfortable

C: Do you think having a close relationship with your surgeon and those within the field of medicine was helpful towards your treatment?

G: The people that were interacted with created a sense of healing. Because there was a complete trust in them and interestingly Dr. Fox is a warm caring person and does not exude a doctor persona.

Very comforting and revolved around staying with doctors that she was comfortable with.

C: What made you drawn to wellness therapies?

G: At the height of treatment was when it was the beginning of chemotherapy and she was experiencing really painful side effects, so I was looking for something that was holistic - because there were so many drugs going through my body and i read a lot about acupuncture and its helpfulness with cancer side effects and i was so desperate for relief because I wanted relief and acupuncture was the best for me.

C: What type of wellness therapies did you experience?

G: Acupuncture

Reiki - she said it was interesting

Massage

Yoga

Nutrition

C: What was most effective?

G: Acupuncture was most effective. It relieved significant side effects, extreme bone pain, nausea, fatigue, just general pain.

C: Did you have doubts?

G: No doubts

C: How did wellness therapies guide your healing?

G: Very positive experience and was supplemental, and UFH and complimentary

C: Did you find success in holistic medicine supplementing conventional medicine?
G: Yes

C: Did you find the facilities in which these therapies were administered to be calming and supportive of these therapies? Or did it feel very rigid?

G: Acupuncture was very calming

Some were experienced at home

Regular massage was not calming

Was not happening all in one facility and some were effective and some were not because of this

Physical temperature - being warm enough and did not have to be freezing. Had a freezing massage

C: Do you have a fond remembrance of these places? Or is there a negative connotation related to them?

G: Holistic - positive connotation

Conventional - chemotherapy - wore the same clothes to every infusion and then threw all of those clothes away when it was over

Because there was a negative connotation surrounded around it

No positive purpose - she had to go

C: When at acupuncture was there something that you wished it was?

Aunt Maureen - stayed at her house and I was in a guest bedroom, on a cot or something and it was warm toned woods and bookshelves and photographs of traveling and all stuff from AM's travels.

One of the rooms at Dr. Burgoon's office brought back that same sense in AM's guest bedroom

Sense of a life - AM's and room and doesn't remember anything

Poppy seeds on the butter noodles

Does not remember details - brush strokes of color and stuff

Represented her interesting life

Dr. Burgoon's bookshelves are full of books and stuff and it was representative Gave a sense of I'm going to feel better

C: Do you wish you had an environment to retreat to to separate conventional medicine from holistic healing?

G: Dr. Burgoon acupuncture office was considered a sense of retreat

C: What is one place that brings the most sense of peace?

G: Hunting Camp - Algerines

Block Island

C: Do you feel like a place can bring a sense of calm? And can promote healing? G: Yes

C: What is it about this environment that feels healing to you?

G: Remoteness and nature

Algerines - been there all her life since she was a child

Block Island - newer in experiences - connection to nature and ease and unpretentiousness

The Fox's cottage - if there was a different place the stay in experience would be different - quaint and connected to history

Did you have past experiences in your childhood that drew you to this place? Is there a sense of comfort?

Yes - algerines

C: What brought you comfort during your treatment? Was it the people that you interacted with that brought that sense of healing, or was it the space specifically?

G: People brought a sense of healing and comfort

C: Does nature have an affect on the way that you feel?

G: Yes - feel relaxed, sense of familiarity, no judgment

C: What does spirit of place mean to you?

G: Spirit of home - house is a sense of stress, with the death that surrounds it and the work that needs to be maintained. The house feels overwhelming and is not a place of rest.

Place of peace - Block Island - she does not have a responsibility there and away from all responsibility and it is so remote, completely immersed in nature

C: Would you consider yourself to be a spiritual person, or do you define your spirituality through nature? Or natural occurrences?

G: Spiritual through nature, superstition, natural occurrences

C: Do you believe a space can create a feeling and sense of spirit?

G: Yes architecture can

C: Do you wish that nature was more incorporated?

G: Yes

C: Favorite Space at the house?

G: Outside shower is the one place that she feels calm

Derived Block Island - sense of feeling that you felt there

Procession to the outdoor shower

Away from the house and responsibilities

It is a retreat at my own house

C: Reiki Experience?

G: Interesting, it is all about the physical energy

Completely relaxed and turn your mind over to the reiki experience As soon as you let your mind wander then you lose that energy that has been

created
A sense and a feeling - UFH wellness day

The woman when she did it, the energy im feeling is that there is someone who is not with you but is watching over you, wellness class on 1/11 and was the anniversary when grandpop died

Interview with Dr. Timothy Fox, General Surgeon Interview by Celia Armstrong Interview Date: 02/04/23

C: Do you believe bringing conventional medicine and wellness therapies will create a holistic unified approach to medicine?

T: Yes, bridging the gap between wellness therapies and conventional medicine could be very helpful in cancer patients.

C: Do you have a specialized emotional connection with your patients, and do you wish that you were able to interact with them at a more personal level?

T: Yes, I have an emotional connection with my patients, but as a surgeon, I am not interacting with these patients everyday and there is less of a personal connection between me and my patients as opposed to someone who is an oncology doctor.

C: Does the idea of bringing chemotherapy to this site seen like an opportunity that I should pursue?

T: Yes, being able to create a positive environment with capabilities of memories to be made in a positive way is very beneficial. This will eliminate the feelings of a sterile environment and promote a positive attitude towards chemotherapy treatment.

C: Will this facility need to be entirely sterile for chemotherapy specifically?

T: No, the place where chemotherapy will be administered does not need to be entirely sterile. The most sterile and controlled environment will need to be the storage of chemotherapy drugs.

C: Will cancer patients be able to walk the trails on site after chemotherapy treatment?

T: Most cancer patients start their treatment at a hospital to be able to understand their tolerance for chemotherapy. Then they are able to move to a satelite campus for treatment if that is the path that they are interested in going down. With that being said, treatment typically effects patients one to two days after the day of treatment, which means that they could very well walk the trails with a loved one post treatment.

C: Will this environment be beneficial for medical staff?

T: Yes, this will definitely be beneficial for medical staff and it will give them the

opportunity to move from a sterile environment to a more natural and peaceful environment.

C: What is the difference between private and employed physicians?

T: Employed physicians are those who are part of a larger network like Main Line Health. This would be a good network to partner with specifically to be able have a network of doctors and nurses. Private physicians will be harder to bring into this site due to the fact that their established practices bring in money privately and they may not want to share the treatments that they are able to perform in their offices with another facility.

C: What do you think is most beneficial about this concept?

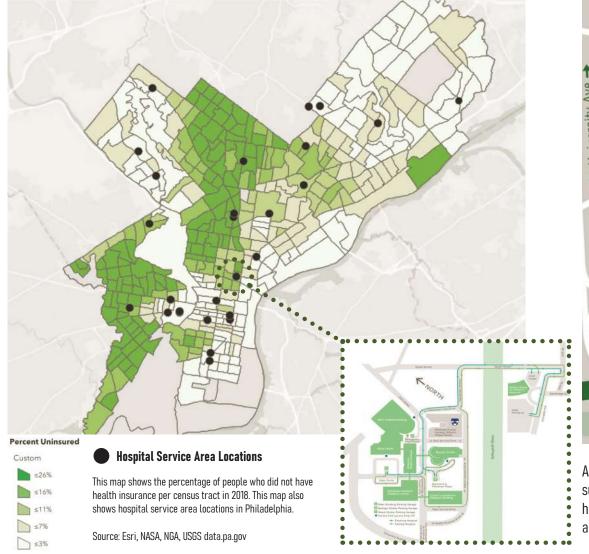
T: The most beneficial aspect of this concept is to bring a sense of positivity and refuge for those going through a very life changing and traumatic journey. Creating a community that also acknowledges a sense of normalcy is a desired experience for many cancer patients.

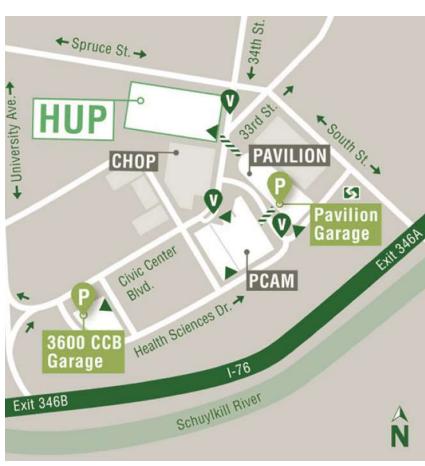
C: Will there need to be public versus private considerations on the public land?

T: Yes, there will need to be public versus private considerations since many cancer patients do not want to be seen or exposed to the public.

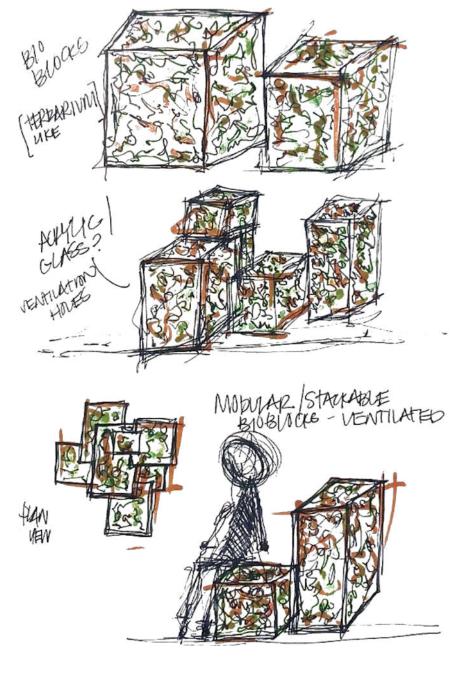
Design Probes

165





Accessibility to these facilities is readily available via SEPTA and other modes such as car and bicycle. Creating a connection to nature and supplemental healing environments allow for the potential to promote curative spaces within an area with access to many medical resources.







to encapsulate



to collect