

B-well

A Community Link Project for Weskoppies Psychiatric Hospital



Mental health is described by WHO as:

“... a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community“ (WHO 2001a, p.1).



Figure 2.7. Sketch of existing building on Westopple's campus.

FROM LUNATIC ASYLUM TO COMMUNITY CARE:
THE CHALLENGE OF INCLUSIVE BUILT ENVIRONMENTS FOR THE MENTALLY ILL

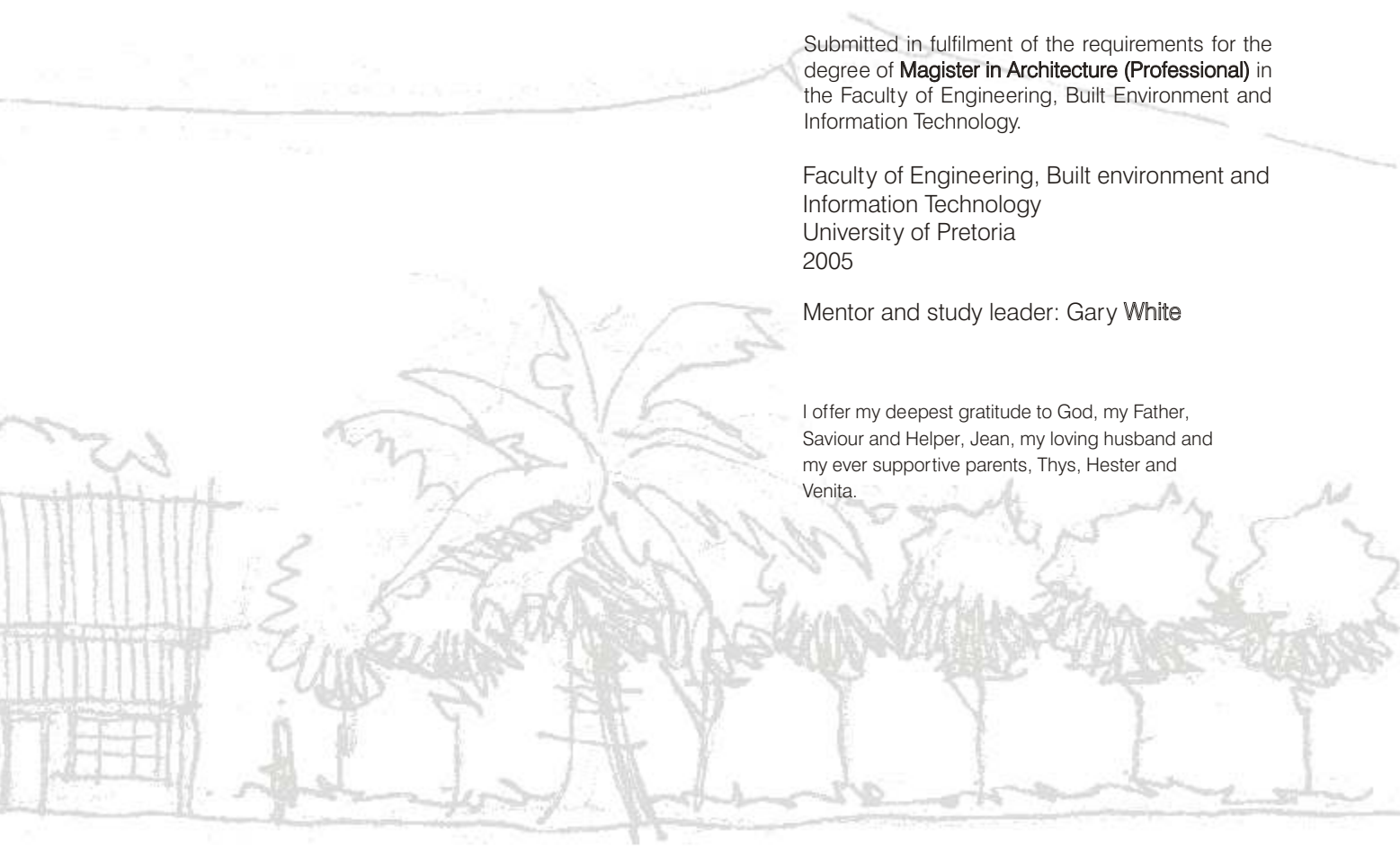
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I offer my deepest gratitude to God, my Father, Saviour and Helper, Jean, my loving husband and my ever supportive parents, Thys, Hester and Venita.



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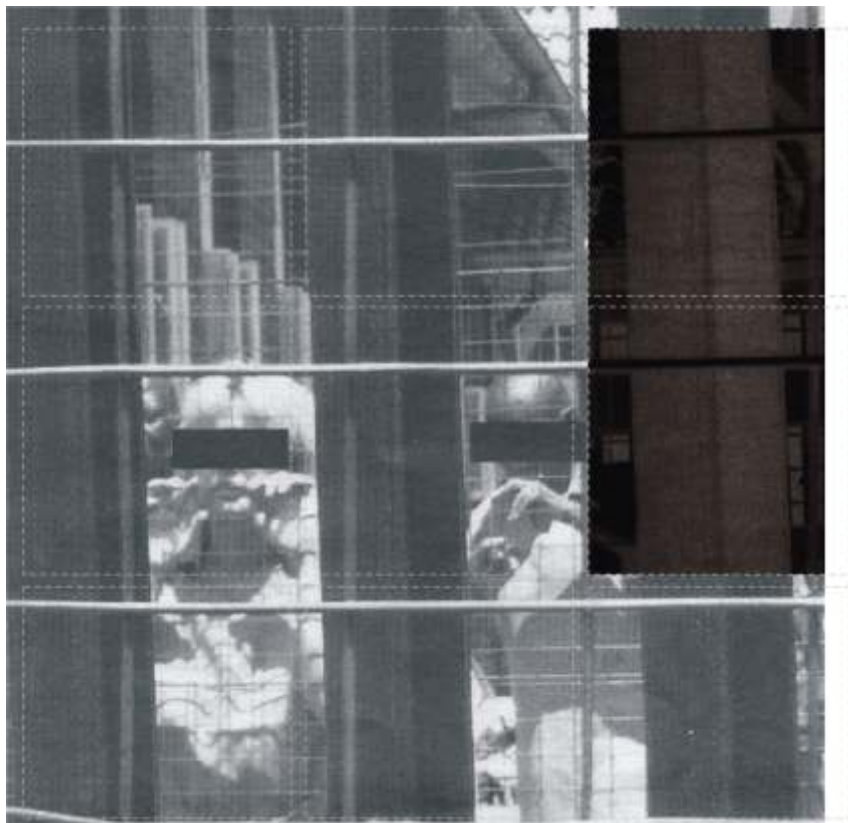


Figure 1.2: A photo published in *The Sowetan* on 28 February 2005 depicting Weskoppies patients as "caged" and "kept docile through a variety of drugs".

*"It is not by confining one's neighbour
that one is convinced of one's own sanity."*

Dostoyevsky

This thesis deals with the architecture of the inclusive built environment.

The hypothesis argues that social barriers can be challenged through the physical formation of the city, its buildings and spaces.

The platform used to explore this premise is Weskoppies Hospital situated in Pretoria West. The stigmatization and institutionalisation of the mentally ill has been a hotly debated issue for a long time. Recently the topic has received a lot of attention in the media, parliament and medical circles.

The issues underpinning the hypothesis deals with the “power of architecture to address social, economic, political and cultural forces by way of form- and place-making.” (Yudell 1997:134)

On the one hand, millions of dollars are committed to alleviating ill-health through individual intervention. Meanwhile we ignore what our everyday experience tells us, i.e. the way we organize our society, the extent to which we encourage interaction among the citizenry and the degree to which we trust and associate with each other in caring communities is probably the most important determinant of our health (Lomas 1998 p. 1181).

N O R M A T I V E A P P R O A C H Our cities, buildings and public spaces are manifestations of our beliefs and aspirations as a society. In our cities our social, economic, political and cultural aspirations take form in concrete, brick and mortar. One could say that our built environment is the mirror image of our goals and perceptions.

It is a pity, though, that the power to shape these environments lies in the hands of an elect few. Often the weak among us, those existing on the fringes of society, have no say in the spaces that they are forced to exist in. Often they are not considered, they remain neglected, forgotten.

Yet, we as a society cannot call ourselves civilized, if we do not create for all and seek to uplift all to co-exist in equality. "Umuntu ngumuntu ngabantu. Motho ke motho ka batho". These are, respectively, the Zulu and Sotho versions of a traditional African aphorism, often translated as: "a person is a person through other persons" (Ramose, 1999:49f; Shutte, 1993:46). At the heart is the concept of 'Ubuntu', which means "humanity", "humanness", or even "humaneness".

The South African Governmental White Paper on Social Welfare officially recognises Ubuntu as:

The principle of caring for each other's well-being....and a spirit of mutual support..... Each individual's humanity is ideally expressed through his or her relationship with others and theirs in turn through a recognition of the individual's humanity. Ubuntu means that people are people through other people. It also acknowledges both the rights and the responsibilities of every citizen in promoting individual and societal well-being.

(<<http://www.gov.za/whitepaper/index.html>>).

Thus, we as architects, creators of cities, community buildings and spaces, can ask ourselves, what is our role in promoting individual and societal well-being?

I believe, as Constance Perin, architect and designer, that the best use of the foresight of designers and planners is to maximize the possibilities of others. He states:

"It is no contradiction to design for spontaneity and for self-determination. We must learn how to define our design problems so that we can let their solutions become a collaborative enterprise. To arrive at these definitions, we must bring into the design process an explicitness about its humane consequences - another way of saying that the development of theory in environmental design is essential. We must also extend outward from our drawing boards to more actively shape the values not always explicit in public policy."

(Lang, Burnette, Moleski and Vachon 1974:43)

It is imperative that we, as designers, develop our understanding of the social structures and human behaviour of our communities. Our successes in creating positive environments depend on our ability to understand and predict these concepts. We have this responsibility towards our communities, which implies that we cannot design frivolously.

“Community is a fragile and precious phenomenon. It forms the foundation for our sense of identity and well-being; indeed, its is critical to the survival of our societies. Too often, architects feel powerless in creating places for community. At times we abdicate entirely, ignoring our potential to affect the people who dwell in our buildings. Perhaps we have been conditioned to feel that social, economic, political and cultural forces are too powerful or complex to address by way of form- and place-making. But such an attitude undermines the power of architecture and the potency of architects as builders of community and society.”
(Yudell 1997:134)

The mentally ill makes up a part of our communities. This should be acknowledged in order for them to experience a sense of identity and well being. If we exclude their environment by way of form giving, we refuse them their survival in society.

Buildings communicate messages to their inhabitants and, in fact, all those who are exposed to them. They have “the power to shape behavioural patterns”. (Spivack 1984:97)

The built environment can either be used to form the bridges designed to cross boundaries of race, inequality, discrimination and exclusiveness (as our country dream of), or it can be the very force that creates the divide.

These concepts are nowhere more strongly felt than in the institutional environment. It is behind the walls of institutions that

the sting of exclusion and stigmatization is most strongly felt. The message conveyed through a language in a silent conversation between civilization and the institutionalized. The medium of this language; the built form. Here, our perceptions are built on remote locations. Behind gates and thick walls we retain our opinions of the “unacceptable, the abnormal and the non-functional”.

In South Africa mental healthcare has long been known as the stepchild of healthcare. This is glaringly obvious when one looks at the state of our mental healthcare facilities: prisons. They tell the Cinderella story of an unwanted child taken in unwillingly, looked upon in scorn, hidden away in shame....

Policies surrounding mental healthcare have changed, as our Government has come to the realization that this is a form of healthcare needed by all members of our society. Neglecting this aspect of health within our communities will have a far reaching negative effect on our country.

The current challenge is the implementation and physical manifestation of these policies. The ideal would be to line-up the perceptions of our communities, the policies of the new Mental Health Care Act and the realities of our mental healthcare facilities. Alternatives to improve, destigmatise and de-institutionalize the mental asylum must be sought and implemented.

The role of the designer in this process is to mediate the abstract concepts of equality and humanity, in the institution, with the use of physical form. To create a built environment for the mentally ill, without the walls of exclusion, with the foundations of equality and the inclusion of all within our communities, allowing mental healthcare to be accessible in a dignified, honorable and acceptable environment.

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