



CHAPTER

5

TYOLOGY

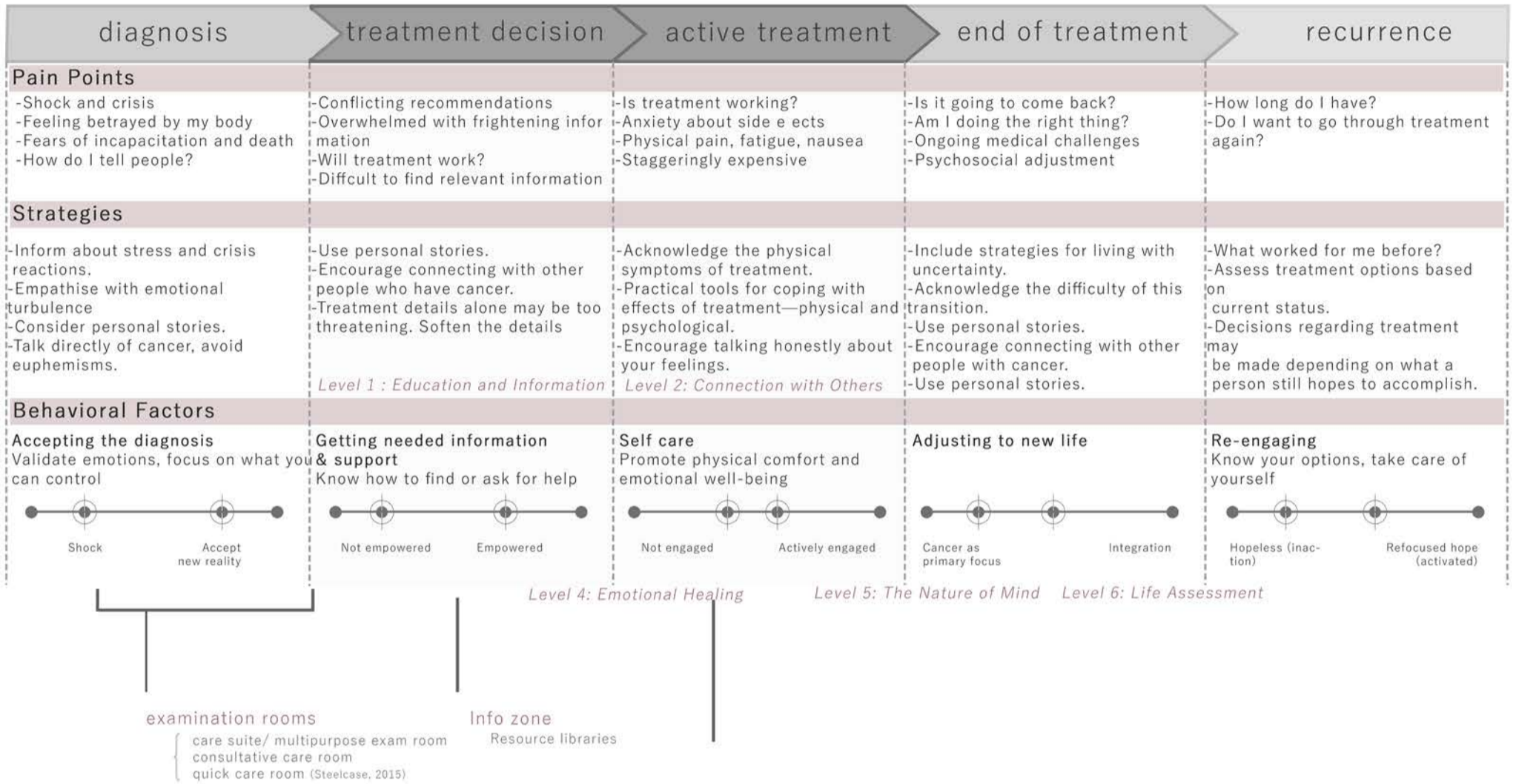
This chapter identifies the typology -a Oncology Centre - as well as the treatments and therapies that are to be provided. This is determined by considering oncology and the treatment thereof using a multi-dimensional approach. Further this chapter will study the current curative methods, wherein conventional treatments have been identified, and the process of healing introduced by Jeremy Geffen. The aim of this study is to incorporate new intervention. As a personal approach, the cancer experience map is studied. Suggestions identified within the cancer experience map are used in combination with the Seven Levels of Healing and conventional treatment methods to create an ideal oncology centre. Such an ideal oncology centre employs an integrative care approach to provide and reflect true curing to healing continuum.

5.2 LEVELS OF HEALING

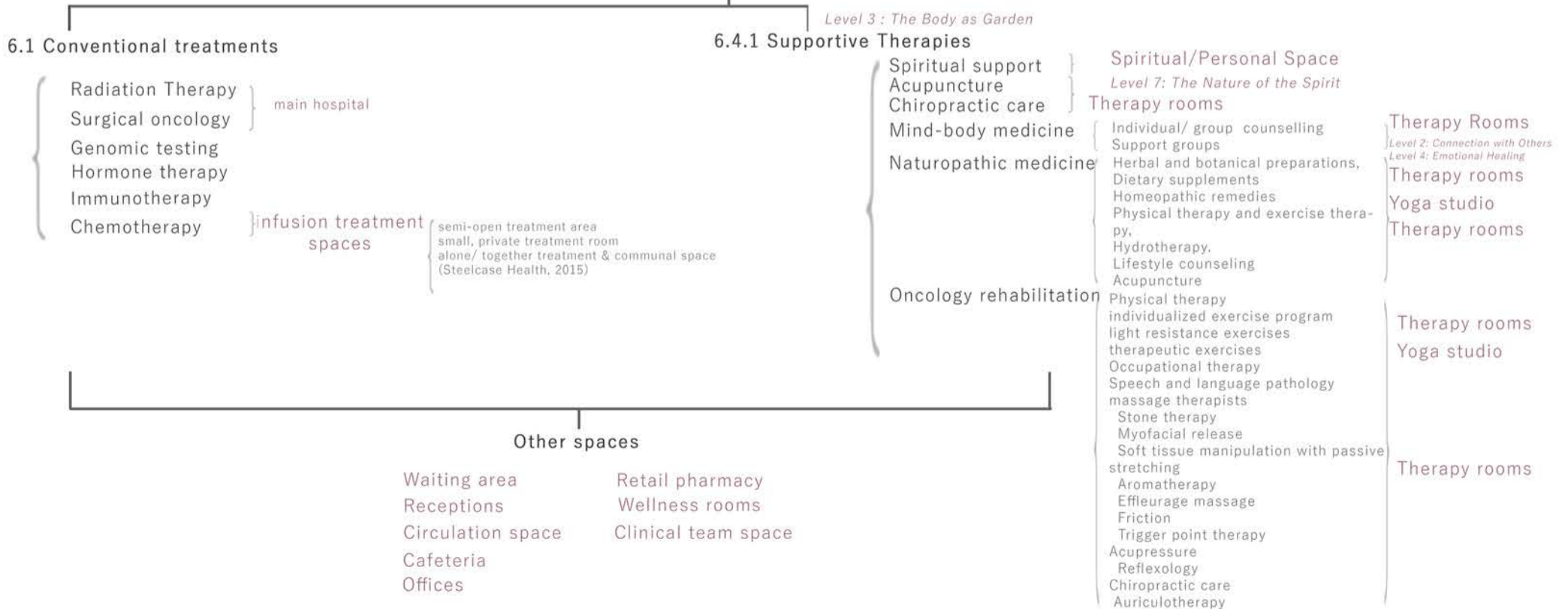
The Seven Levels of Healing is a comprehensive integrative medical programme designed to stimulate deep and long-lasting healing and transformation (Geffen, 2004, p.94).

Level 1 Education and Information Level 2 Connection with Others Level 3 The Body as Garden Level 4 Emotional Healing Level 5 The Nature of Mind Level 6 Life assessment Level 7 The Nature of the Spirit

PERSONAL APPROACH 5.3 CANCER EXPERIENCE MAP from the Journal of Medical Internet Research (Hall et al., 2015)



5.4.1 INTEGRATIVE CARE from Cancer Treatment Centers of America



Oncology as a multidimensional approach

The ARLINGTON, VaStudies (cited in Cancer Network, 1999) found that an estimated 50% of all cancer patients are currently making use of complementary and alternative therapies. This serves as motivation for oncologists to discuss such therapies with patients and, in consultation with their patients, incorporate them in treatment (Cancer Network, 1999). It highlights and reinforces the theme of introducing a curing to healing continuum within healthcare environments. The application of a curing to healing continuum will support and improve current medical procedures as well as patient well-being. In order to develop and identify an appropriate selection of treatments and therapies for a Oncology Centre, various cancer treatments need to be investigated.

5 . 1 CONVENTIONAL TREATMENTS (CURATIVE)

Conventional treatments are used and accepted by most healthcare professionals. There are a number of divergent cancer treatments. The choice of treatment depends on the type of cancer and its state of advancement. Some patients may only receive a single treatment but most are likely to receive a combination of different treatments. Conventional treatments may include surgery, chemotherapy, radiation therapy, immunotherapy, targeted therapy and hormone therapy (National Cancer Institute, 2015).

The proposed cancer centre will provide chemotherapy, immunotherapy and hormone therapy. Surgery procedures will be performed in the main hospital, which will also provide an ICU and emergency facilities for cancer patients.

5 . 2 LEVELS OF HEALING (HEALING)

The Seven Levels of Healing is a comprehensive integrative medical programme designed to stimulate deep and long-lasting healing and transformation (Geffen, 2004, p.94). These levels reveal the human body's natural tendency to seek healing and wholeness when faced with an illness of crisis proportions. The Seven Levels of Healing are summarised below.

Level 1: Education and Information

A cancer diagnosis causes questions to arise - which require informed answers. Without this information the patient will suffer unnecessary pain, stress and anxiety. Modern cancer treatment centres acknowledge this and provide such information and education through specialised professionals (Geffen, 2004, p.95).

Level 2: Connection with Others

During serious illness it is vitally important that the patient be in the company of others. This is attested by a growing body of documented evidence on the

need for psycho-social support interventions. In Germany, support groups form part of palliative and supportive care that empowers patients (Weis, 2003 cited in Geffen, 2004, p.95). Support groups allow patients to extend their identity beyond themselves. Meaningful support may include religious groups, clubs and, most importantly, family and friends (Geffen, 2004, p.95).

Level 3: The Body as Garden

Western science regards the body as a machine; doctors as the mechanics; and disease as a flaw in the machinery. However, in Eastern medical philosophy the body is seen as a garden where doctors act as gardeners who seek to discover and heal the root of the disease (Geffen, 2004, p.95). Complementary and Alternative Medicine (CAM) becomes relevant on this level. This range of therapies does not specifically target cancer patients but are utilised to supplement conventional care (Geffen, 2004, p.95).

Level 4: Emotional Healing

This level redirects the "external" world of science, medicine and integrative therapies to the "internal" world of feelings and emotion. Most cancer patients find this emotional transition challenging. It is, however, essential to work through and release emotions, as this is a key component of multidimensional care. An experienced professional can assist in this process through the use of personal dialogue and one-on-one counselling (Geffen, 2004, p.95).

Level 5: The Nature of Mind

Patients develop an understanding of how both their beliefs and their conscious- and sub-conscious thoughts impact their experience. This understanding, combined with treatment and care from medical staff, significantly affects patient response to the care offered (Geffen, 2004, p.95). An optimal healing environment assists patients in uncovering their individual thought patterns and beliefs (Skott, 2002).

Level 6: Life Assessment

Patients, as well as family members, are requested to identify 20 future goals and their purpose in life, which enables them to recognise a deeper meaning of their importance. A clearer reason to live assists the healing process (Geffen, 2004, p.95).

Level 7: The Nature of the Spirit

Mankind is spiritually driven. It is from spirituality that awareness and creativity flow. Healing ultimately radiates from spirituality. It forms the essence of the intimate self-discovery that often takes place in nature, silence, meditation and prayer; or in communion with friends, family and loved ones; or from being among patients who share similar experiences. Optimal healing environments (OHEs) assist patients in discovering that, regardless of their physical condition, there is a measure of them that remains timeless, eternal and completely untouched by their circumstance. Once the patient accepts

this they become less anxious and distressed. The potential for healing is enriched - the deepest healing can take place and the ultimate purpose of medicine be achieved (Geffen, 2004, p.96). An interior environment that is purposely oriented towards healing can facilitate this process.

The proposed interior design takes all of these levels into consideration by providing spaces for and incorporating appropriate programs for the practice of the seven levels. The design considerations are reflected in Poster 5.

5 . 3 CANCER EXPERIENCE MAP

The conventional cancer treatment process and the emotional journey meet a more personal approach in the cancer experience map. (Poster 5)

It is a proposed intervention based on a concept known as the "patient voice". This cancer experience map is designed to achieve a deeper understanding of how cancer affects a person. It includes physical, emotional, psycho-social and spiritual aspects (Hall et al., 2015, p.1).

The cancer experience map was produced by a team consisting of a medical writer, an oncology content specialist and two user-experience researchers. Together these professionals combined: research done by the oncology content specialist; patient quotes; the revision of open-ended interviews; and additional literature reviews. They identified evidence of strong parallels across all cancer types and included these experiences in their study. The map summarises those common experiences (Hall et al., 2015, p.1).

Cancer patients share their stories - the intention is for this information to be used by interior designers. The resulting design will thus benefit the cancer patient through a meaningful upgrade of treatment facilities, which will include interventions based on said information. The research showed the complexity of the cancer journey and identified common points of experience.

Based on direct quotes from cancer patients, the cancer experience map provides design guidelines and identifies a behavioural factor for each stage. The combination of design guidelines and behavioural factors provide an effective user-centred design strategy. The map is a tangible representation of the cancer patient's voice. It becomes a solid and trustworthy resource for interior designers who are tasked with creating supportive care conditions that are suitable for cancer patients. The voice of the patient can easily lose prominence; the objective of the cancer experience map is to prevent this from happening (Hall et al., 2015).

Based on the cancer experience map the patient diagnoses, decisions regarding appropriate- and active treatment were identified as the main focus of the proposed oncology centre. The incorporation of the "patient voice" and the identification of emotional needs will allow design to create a bridge

between patient needs and future design intentions.

5.4 COMPLEMENTARY AND ALTERNATIVE MEDICINE

Complementary medicines are defined as treatments used in conjunction with standard medical treatments but that are not considered to be standard treatments. An example of this is the use of acupuncture to assist in reducing some of the side effects of cancer treatment. Another example is where a special diet is used to treat cancer instead of anticancer drugs prescribed by an oncologist. Alternative medicine can therefore be used instead of the current form of standard medicine (National Cancer Institute, 2015).

5.4.1 INTEGRATIVE CARE

The primary focus of current cancer treatment is the physical dimension of the disease with the objectives being to eradicate tumours, normalise blood tests, alleviate pain and prolong life to the greatest extent possible. However, these objectives do not address the mental, emotional and spiritual dimensions of the human existence that profoundly influence our ability to heal (Geffen, 2004, p.94).

The increasing prevalence of cancer and the changing outlook regarding optimum healthcare has led to interest being generated in and a rise in the demand

for complementary and alternative medicine (CAM) (Richardson et al., 2000). At the centre of this change is the growing understanding that medicine presents but one means of healing the physical body. Medicine goes hand-in-hand with the opportunity to nurture and heal the mental and emotional dimensions of the patient and to help the patient experience the deepest aspects of their spiritual nature (Geffen, 2004, p.94).

The use of CAM therapies by cancer patients is becoming very common. Studies show that up to 80% of cancer patients are using some form of CAM therapy (Bernstein and Grasso, 2001). An increase in patient demand for true healing and their frustration with the limited ability of conventional medicine to cure cancer and promote healing, reflects the need for a new medical paradigm (Geffen, 2004, p.93). It has also cast light onto the need to design for optimal healing environments (OHE). These OHEs promote awareness of healing and encourage transformation at the deepest levels of the body, mind and spirit. Interior designers face a unique challenge - to develop spaces that support not only conventional treatments but also complementary and alternative medicine. The resulting design is known as integrative care. Integrative care aims to help patients reduce treatment delays or interruptions, whilst trying to get the most out of life.

Integrative care thus works on two layers:

- Conventional treatment addresses the removal and termination of the cancer
- Evidence-based therapies help fight cancer-related symptoms.

Both strategies are delivered by a collaborative team of clinicians (Cancer Treatment Centers of America, 2016).

5.5 SPACE PROGRAMMING

In the integrative care approach, distinct types of treatment and therapies have been identified; ranging from conventional to complementary and alternative. These were considered carefully and are incorporated in the design proposal. Poster 5 identifies services and the proposed spaces to be incorporated with these interventions (coloured in pink).

The proposed cancer centre will provide for outpatient and inpatient care – treatment and therapies are to be obtainable within the building. Treating cancer patients as outpatients will significantly decrease oncology admissions to hospital (Williamson, 2008). Consequently, only a limited amount of single-patient rooms need to be provided at the proposed cancer centre.

5.5.1 SHARED PROGRAMMING WITH MAIN HOSPITAL

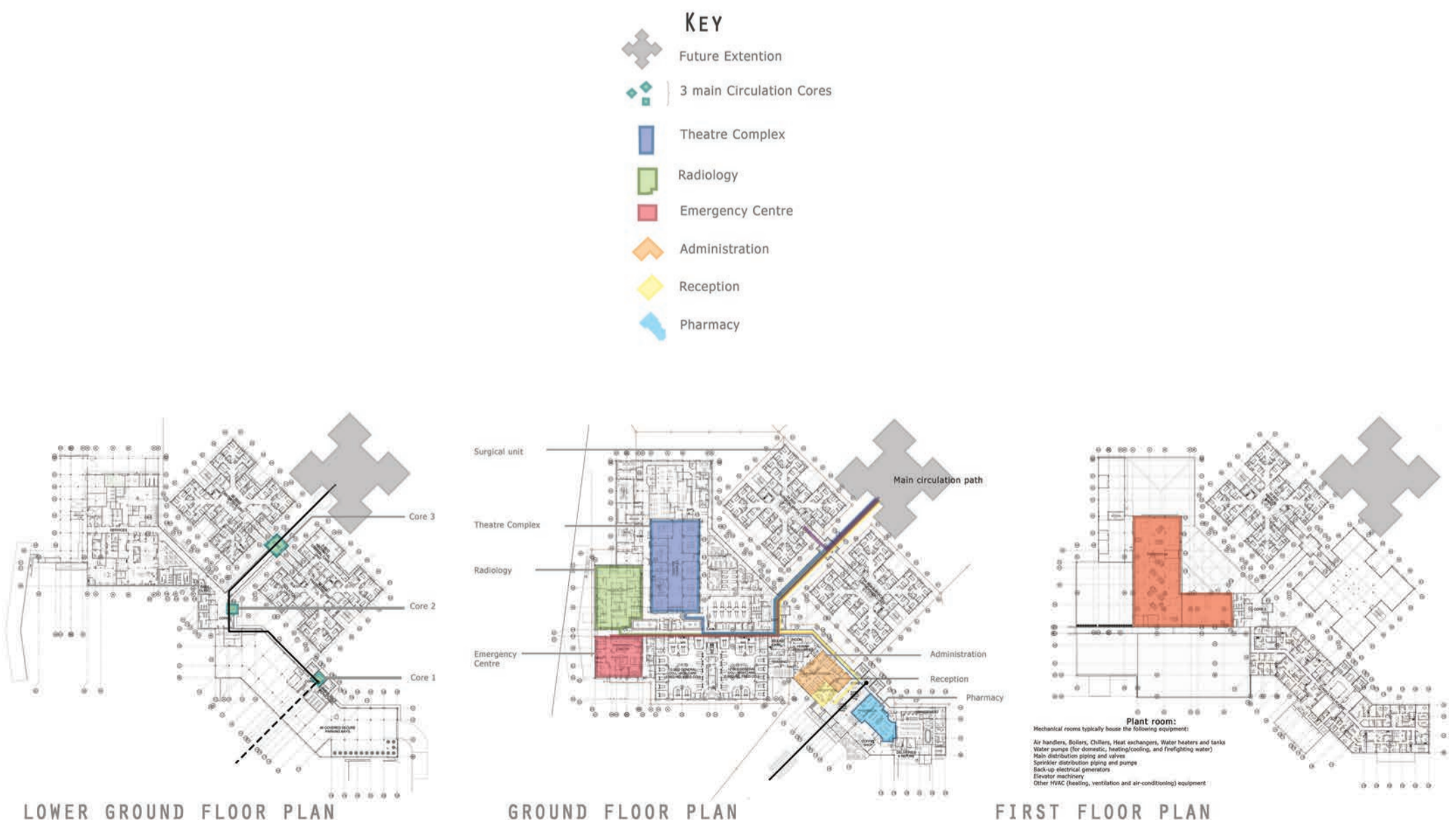


Diagram 5.1 Connection to main hospital (Author, 2016)



CONCLUSION

The proposed oncology centre implements an integrated care approach, for both outpatients and a limited number of inpatients. The aim is to create an optimal healing environment that is designed with the “patient voice” in mind. The proposed oncology centre will connect to the adjacent main hospital; ensuring the provision of required services as and when the need arises.

