This chapter is dedicated to the study of spaces that encapsulate and reflect Optimal Healing Environment design principles. Focus is placed on The Cancer Counselling Centre Proposal and The Asahicho Clinic, where analysis of the different spaces was done. Maggie’s Centre charity and their motives were researched as it has a strong overlap in what this study is ultimately trying to achieve, with a list of Cancer centres associated with this legacy. This chapter will serve as inspiration for the design of this study.
It is a cluster of seven small houses around two green outdoor spaces. Each house has its own specific function & together they form a coherent sequence of different spaces and functions.

**Figure 6.1 Location of different programs (Furuto, 2012)**

**Figure 6.2 Plan (Furuto, 2012)**

**Figure 6.3 Window seat (Furuto, 2012)**

**Figure 6.4 Garden courtyard (Furuto, 2012)**

**Figure 6.5 Yoga light (Furuto, 2012)**

**Figure 6.6 Library space (Furuto, 2012)**

**Figure 6.7 Section emphasis on courtyards (Furuto, 2012)**

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**CONCEPT**

The principles of healing architecture have been fundamental in the design of the project. The concept represents the vision that architecture affects human well-being, and that the architecture can therefore help to strengthen or promote the healing process in individuals.

The basic idea is not that architecture alone can heal, but that the architectural design in terms of daylight quality, the room's mood, color, sound and the ability to be private and secure to support the healing that takes place both physically and psychologically.

**Important points**

- **Constant visual connection with nature**
  
  The centre is designed around 2 gardens (Fig. 7.4 & 7.7) allowing each space to either live out into the garden (Fig. 7.6) or be in constant visual of its shades, smells and sounds (Fig. 7.2).

- **Strong concept, energy that supports healing through design**
  
  That architecture alone can not heal but that the design of the architecture in terms of daylight, a room's mood, colour, sound etc greatly supports healing both physically and psychologically.

- **Feeling that the spaces provide**
  
  The design not only talks of different qualities that create a certain feeling, it can be felt and see in the building the different qualities of light creates different moods seen in figure 5.6 & 5.7.

- **Different spaces provided**
  
  The centre implements and encourages supportive therapies such as a library, gym and social spaces highlighting its important role in healthcare, this is also implement in this study.
A sequence of house-shaped volumes make up the form of this medical centre. The concrete arches increase in scale towards the centre of the L-shaped building, but taper off towards the back of the site.

"The roof gets gradually higher, this transition produces spaces with right proportions, from a cozy entrance to a double-height space for waiting, which reduce the feeling of pressure for the surrounding environment," said the architect (cited in Shinkenchiku-sha, 2015).

- Infiltration of natural light
  The use of slivers of glass set between the irregularly shaped arches allow light to penetrate the building while restricting views through to the interior (fig. 7.9 & 7.10).

- Strong relation between external natural environments & interior spaces
  Recessed spaces integrated along the facade create opportunities for the placement of trees to allow internal space to have views of nature however privacy is not compromised (fig. 7.8 & 7.12).

- Framed views of nature
  These recessed spaces create framed views of nature ‘flooded by natural light’ (fig. 7.11 & 7.12).

- Creation of vertical space
  In figure 7.11 the envelop of the building allows for spaces to grow over two floors creating a sense of openness.

- Interior palette
  Pale wooden furnishings and planting help to offset the harshness of the building’s concrete core and floors (fig. 7.13).

- Creation of “nooks”
  Nooks created by the shape of the structure provide more secluded seating areas within the spacious waiting room.
Maggie’s Centres are the legacy of Margaret Keswick Jencks, a woman with cancer, who had the notion that cancer treatment environments and their results could be drastically improved through good design. Her vision was realized and continues to be realized today by numerous architects, including Frank Gehry, Zaha Hadid, and Snøhetta - just to name a few.

Back in 1993, Margaret Keswick Jencks found herself in a windowless corridor of a small hospital, the waiting and waiting rooms were draining. Over the next two years until her death, she found herself in such neglected, thoughtless spaces, she wrote, patients like herself were left to “wilt” under the glare of fluorescent lights. Could these space not be private light-filled spaces, if architecture could demoralize patients—could “contribute to extreme and mental enervation,” as Keswick Jencks observed—could it not also prove restorative? (Mairs, 2015)

This is the central idea behind the experiment Keswick Jencks, or “Maggie,” started with her husband, architectural historian and theorist Charles Jencks, more than two decades ago. Their mission was to provide free, global care for cancer patients through great architecture. This has since expanded to a total of 17 building projects (“Maggie’s Centres”), many of them by celebrated architects like Richard Rogers and Rem Koolhaas. All beautiful and different. “We have not had a bad building yet,” says Charles Jencks. Their success, he adds, can be attributed to the “architectural placebo effect”—a building, while not wholly capable of curing illness, can act as “a secondary therapy, a feedback therapy.” (Mairs, 2015)

Each of the centres incorporates airy sitting rooms with access to gardens and other landscape features, and bountiful views. There are also private rooms for one-on-one consultations; here, in well-lit, humanizing spaces, caregivers can advise patients on securing health-care loans and even dietary planning.

Despite these comforts, Jencks insists that the architecture is “risk taking” because it engages with a very real existential crisis. “To live is a great risk. Cancer patients go through this cycle of desperate fear, of deciding to die,” he says. “But those like Maggie risked to live. That’s the architecture in a way and what architects need to get into their building. And I think they have.” (Medina, 2014)
Maggie’s Centre
by Steven Holl Architects in London
(Rosenfield, 2015)
A “vessel within a vessel within a vessel” made up of coloured glass fragments that symbolise “neume notation” of Medieval music. “The word neume originates from the Greek pneuma, which means ‘vital force.’ It suggests a ‘breath of life’ that fills oneself with inspiration like a stream of air, the blowing of the wind.” describes SHA (cited in Rosenfield, 2015) The facade of the building in a sense receives a extra sensory layer that is meant to inspire patients.

Timber-framed Maggie’s Centre
by Norman Foster in Manchester
(Frearson, 2016)
The delicate timber frame, seems to fade away in its surrounding greenery, this structure will further be partially planted with vines ultimately blurring the threshold between the interior and surrounding greenery.

Plant-covered Maggie’s Centre
by Thomas Heatherwich in Yorkshire
(Frearson, 2015)
This centre took on a more direct translation that “Instead of taking away the open space, we wanted to make a whole building out of a garden,” said Heatherwick.

Maggie’s Lanarkshire
by Reiach and Hall Architects in Lanarkshire (Archdaily, 2015)
This Maggie centre is a tale of enclosed gardens, defined as a civilised and cultivated place. “The literal meaning of paradise is a “walled enclosure” from pairi- “around” and -diz “to create a wall”. ” (Reiach cited in Archdaily, 2015) The wall is designed to offer a degree of separation but through its pierced nature.