

Recreating Community in Cancer Support Centers, Foster Homes and Developing Colonias Through the Hands-On Participation of a Design/Build Teaching Model

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INTRODUCTION

Scholars have suggested that future professionals, and by inference landscape architects, must think beyond the “box” to address the complexity of issues in the future, and that education must adapt to provide the critical skills needed (Boyer 1990). Design/build challenges students to think and work creatively in the tight frameworks of a ten-week quarter. Many design studio teaching models have linked design and community participation, but few have connected design, community participation and construction as cohesively as the design/build studio model (Winterbottom, 1999, 2002, 2003). Students interact with differing communities, diverse in age, ethnic background, income and needs. They accept multiple, overlapping roles, and are taught skills including community outreach, facilitation, design, cross cultural communication and information gathering, and project management. Students are encouraged to consider the ethical, functional, cultural and technical design implications as they deepen their awareness of whose needs are being overtly addressed, find appropriate solutions and build creative, responsive projects.

THE MODEL

Developed in 1995, the design/build studio at the University of Washington is offered as a ten week BLA (Bachelor of Landscape Architecture) capstone studio with an average class size of sixteen students. The students conduct material/systems research and site analysis in week one. Weeks two through four are devoted to participatory community design/construction documentation, and the remaining six weeks allotted to construction. A revolving student team manages the project and most decisions are made by majority vote. Twelve projects have been completed to date, all of which employed a participatory community design process to promote exchange, understanding and clarity. Eight projects focus on sustainable

design, and four center on the healing and therapeutic value of gardens. Partnerships have been developed with the Seattle Public Schools, neighborhood councils, community centers, a cancer support facility, a major urban hospital, a foster home for children with AIDS and a state facility for the severely disabled. Funding has come from public grants, targeted funds from a college endowment, public levies and fundraising drives. Projects are chosen for their content and for the client’s willingness to engage in community participation. Relationships grow across racial, class and economic barriers, challenging prejudices and assumptions. The skills of listening, empathizing, and mediating are practiced, common ground established, and the building process evolves with a deeper purpose and sense of partnership.

Exchanges abroad offer multiple facets of challenge and reward. Student perceptions are expanded through visits to the local residences, participation in traditional ceremonies and the daily exploration of the indigenous architecture, food, music, markets and festivals. The built component is the most tangible result of the design/build model, but clearly the educational outreach, cultural exchange, community understanding and shared endeavor are of equal importance.

CASE STUDIES

Lavandaria Santa Ursula, Comunidad Santa Ursula, Mexico, 1998 is a small colonia of recent immigrants who have come from impoverished towns throughout Mexico. With no municipal utilities, the women routinely hike four-miles to wash clothes. The physical hardships and frigid water compromise their health, and the barranca (ravine) an important ecological corridor linking federal parks and ethno botanical reserves, is degraded by pollutants. We partnered with a non-profit advocacy group and the community to create a public lavanderia utilizing harvested rainwater. The primary goals were to engage the students and the community in cross-cultural learning, to use sustainable solutions, and develop replicable sustainable models.

The Process

This project grew from explorations with sustainable design and community process begun in Seattle, WA that were adapted for this unique culture and environment. Several assumptions were challenged and the design process evolved. For example, because foreign males were discouraged to engage in discussions with the women of the village, the female students took sole responsibility for soliciting their input, often using sign language (Eubanks Owens, Winter 2000). To curb resentment among the men who didn’t perceive any direct benefit from the project, three local maestros (builders) were employed to share their knowledge of traditional building. To promote understanding of the project, a community forum was used

to describe and discuss the value and fragility of the riparian corridor, the value of ecological design and the benefits of relocating the clothes washing activities.

We initially met with the women at the stream, discussed the project and observed the important social interactions occurring there. We visited traditional lavandarias studying their forms and spatial relationships. Once designs were developed, community reviews were held and the designers responded to comments. Community solicitation continued throughout the project and often during construction. Because the village has different groups of indigenous people with unique symbolic beliefs, we drew perspectives of the built project, asked the participants to color the drawings and discussed them until consensus was achieved. Other elements include a stone cooking stove built for traditional festivities and an adventure play area to engage the children as their mothers work. A plaza, the traditional community space, was integrated into the design, expanding its use as civic space for all.

The Outcomes

One significant result was the empowerment of the women of Santa Ursula, who had a major role in the process, and were most impacted by the project. The new plaza is the main social center for the growing village and the men, feeling their needs be considered, became more engaged as it took shape. By building and testing non-traditional technologies such as the roof configuration and the use of ferro-concrete, the community has accepted these new forms and methods. This is critical for future replication in other communities where there may be resistance to unfamiliar technologies. The outreach and open discussions enabled community members to better understand the connection between their local situation and global issues of resource use/abuse and environmental impact, laying a stewardship for their environment as they expand the community.

Incarnation Children's Center, New York City, N.Y., 2000 is a foster home for children infected with HIV/AIDS. Incarnation houses approximately twenty-four children whose parents/care providers are deceased or unable to provide safe home environments. Many residents suffer from physical and psychological disabilities including autism, depression, loss of motor coordination and mobility. Once diagnosed with AIDS, the patient's identity is reconfigured and defined by the debilitating effects of the illness. The children receive both medical and therapeutic care, counseling and education. The design/build studio was invited to collaborate with the incarnation community to create a 6000 SF. healing garden.

The Process

Restricted by a five-week time frame and the difficulty of communicating with the children, due to their cognitive

disabilities, age and availability, a method was developed to solicit the residents, staff and administrators input. A volunteer coordinator was trained via phone in methods for surveying and participatory brainstorming/programming, and this component was administered prior to our arrival. The survey was circulated to staff and administrators to assess their needs, ideas and concerns and what aspects and programmatic elements they felt were important. The children expressed their dreams, needs and concerns during brainstorming sessions and these were notated. Upon arrival the studio team joined the Incarnation staff to discuss the effects of AIDS and resident's needs and to review the survey/discussion results. In a second session, initial concepts were developed with the staff and administrators. Five schematic designs were created, then reviewed by staff and volunteers and synthesized into a final preferred plan. Residents met with students to review the design, and modifications were made to incorporate their responses.

The Outcomes

In this project, the preliminary data collection and survey results and ensuing discussions and interactions laid the foundation for responsive design. The experience of working with this community was a new one for members of the design team. While the lack of our initial participation delayed bonding with the residents, it did stimulate project focus within the community prior to our arrival.

Relationships between students and residents and staff developed, most powerfully, during construction. As the design was transformed into built form, the children started using the components and even the most skeptical were galvanized. Spontaneous interchanges and specifically a discussion on grief and dying led by the executive director helped the design students overcome their identification of primary differences and gain a deeper understanding of life with AIDS. Many of the elements including a karaoke stage, wheelchair water feature, resident flower boxes, porch swing, and the grass rolling mound responded directly to the needs of residents and staff. In post occupancy visits, residents' engagement continues to be very high.

A primary benefit of the design/build model is the ability to reflect, reconsider and change the design as the project is being built. As a laboratory, elements can be placed and tested, reviewed with the community and changed where appropriate. For example, shortly after a wheel chair accessible sand box was set in place, the physical therapist brought out a wheel chair to test the height, illustrating that lowering the box a few inches would be ideal, and the legs were modified in situ.

Our intention in this project was to create an outdoor "home" for the residents, many of whom suffered from feelings of

isolation and alienation. The stigma of the disease restricted opportunities to play in the public parks and many expressed a need for play activities within the building site. Residents wanted to invite friends and engage in “normal” activities. As a counterpoint to the building with its small, often crowded spaces, the gardens provide residents with a place to wander, find solitude or participate in interactive activities depending on their mood and abilities.

Participation in the construction had an unexpected benefit as the resulting physical exercise improved muscle development. The crossing of racial, class and cultural boundaries, was for many of the participating students the most profound learning experience.

Cancer Lifeline, Seattle, WA. 2000, a nationally recognized support facility offers those affected by cancer a range of services including nutrition, physical therapy and healing art classes, counseling services and research library. Programs are designed to decrease stress and the sense of isolation that come with a cancer diagnosis. Over 8000 participants are served annually.

In 2000 we were invited to collaborate with Cancer Lifeline participants to create three healing gardens on the roof of their new facility. Their mission statement asserted that “The gardens will restore a sense of order, safety, and privacy for those dealing with the chaos induced by this illness. The act of gardening produces a peaceful, effortless concentration that increases our capacity to rest. It creates more outward perceptions rather than inward self-consciousness, a valuable balance to the uneasiness of illness.”

The Process

Prior to our involvement Cancer Lifeline convened a focus group to forward the following goals for the gardens.

- Create spaces that invite cancer patients to be, rather than do.
- A haven that expresses the power and order of nature and encourages introspection, self-expression and creativity.
- A place of tranquility, energy and meditation.
- Stimulation of the senses, exudes a caring touch, attracts animals.
- Incorporation of color therapy, herbalism, and aromatherapy.
- A place for relaxation and visualization.

Building upon the focus group’s effort and prior to the studio’s involvement, Professor Anne Kearny, an environmental psychologist, administered a survey and mapping exercise.

The survey, with open ended and scaled responses, was distributed to the 26 participants. The first set of questions addressed participants’ perceptions and desires for the gardens, and included questions such as: How do you imagine using the spaces? What role should the gardens play in the center? What benefits will be provided? The second set, using a scaled index, asked what types of activities would one do when mentally fatigued? The final section asked if there are other things you do or places you go when you feel a need to restore, heal or refresh yourself. This data offered a psychological and emotional baseline to be used in the post occupancy study and also provided data of desired uses, role of the gardens and preferences for types of places.

In the cognitive mapping exercise, the participants were asked to:

- Write the characteristics most important to you personally. Take from the list by the focus group or add others.
- Once comfortable with your collection, organize them into groups or categories based on how you think they fit together.
- Label each category with a word or phrase that describes why you grouped these characteristics together.

These groups were then compared to each other and sorted to discern which characteristics were most frequently mentioned. Some of the most important characteristics include:

- Places to sit (91%)
- Scent/smells/aromatic plants (70%)
- Peaceful (65%)
- Water features (65%)
- Places to socialize in small groups (57%)

To conceptualize the gardens, the groups created by the participants were then combined into similar associations, resulting in four groups that formed the basis for the three designs.

- General Characteristics
- Social/Activity Garden
- Sensory Garden
- Meditation Garden

A general discussion with staff, administrators, participants (users of the services) and students was held on the first day of the studio and the effects of cancer were described, the results of the cognitive mapping were presented, and discussed, and visions for the gardens were explored. The attendees were divided into teams, each gathering in one of the three garden

spaces where they developed conceptual plans. The students then further developed the concepts and produced three schematic designs for each space. Three were presented to the design advisory committee, and their comments informed the final designs.

The Outcomes

The cognitive mapping/participatory design process directly informed the three distinct gardens, each reflecting the desires and needs of the participants. The gardens have become a focal point at Cancer Lifeline. Through shared stewardship they enhance bonds among participants and function as retreats for solitude and intimate exchanges. The gardens define Cancer Lifeline as a place of regeneration and spirituality. It is a safe homelike environment that nurtures those searching for self-identity, hope and connection and those adapting into the culture of cancer. One participant, who resides in public housing, spends most of her days in the gardens, which for her have become a home away from home.

In contrast to Incarnation and Santa Ursula, few of these participants because of their physical condition, were engaged in the construction. Instead, they observed the process, giving input throughout the project.

CONCLUSIONS

As designers, working with a diverse range of communities, it has become clear that the term multi-culturalism must be used in its broadest context and that culture must be seen as not only an ethnic or racial definition, as important as those are, but also culture can be defined by a change of circumstance such as an illness leading to dramatic changes in self identity and perception, from both within and without. As these case studies illustrate, productive community participation requires flexibility and when used in design/build projects, many parameters including time frame, language, cognitive disabilities and health of the participants influence what type of participation might be most productive.

The design/build model presented in this paper, has, through outreach, inclusion, and engagement, empowered those displaced by poverty or confronting a terminal illnesses and enabled them to reestablish a deeper sense of community.

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