

Opinion /

Designing Wellness: What Influence Does Architecture Have on Health?

BY THOMAS MCMULLAN

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A new show at London's Wellcome Collection charts the influence manmade structures have had on health and wellbeing

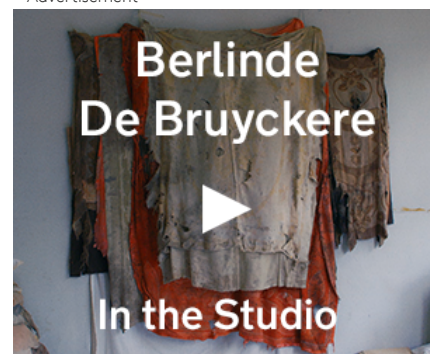


Close your eyes and you can picture it: The pale-green linoleum floor. Bright lights portioned along the panelled ceiling. A gurney to one side, a row of blue plastic chairs on the other. It's clinical.

'I was talking to an architect who showed me a standard hospital corridor,' says Emily Sargent, curator of a new exhibition at the Wellcome Collection in London, '[Living with Buildings](https://wellcomecollection.org/exhibitions/Wk4sPSQAACcANwrX) <https://wellcomecollection.org/exhibitions/Wk4sPSQAACcANwrX>' which opens on Thursday. The show charts the influence manmade structures have over health. 'He said this doesn't break any rules, it adheres to all the recommendations that we have for hospital design, but it doesn't make anyone feel good; neither for the people who work there nor for the patients.'

This hospital corridor is home to medical equipment and private examinations, where patients can be moved and bodily fluids swept clean. What concessions there are to comfort and natural light are subservient to the building's need to efficiently, and sanitarily, enable the works of screening, testing and scanning. Is there another way? In the opening decades of the 20th century, there were a number of building projects that took a different approach, envisioning architecture not only as a clinical site but as an important contributor to mental and physical wellness in its own right.

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Paimio Sanatorium. Courtesy: Wellcome Collection; photograph: Ben Gilbert


The Paimio Sanatorium in Finland, for example, designed by the architect Alvar Aalto, was created with the specific intention of treating tuberculosis, all in the years before antibiotics. Natural light was maximized. The furniture and fittings were tailored to reduce noise and encourage rest. As Sargent says: 'You have the idea that the building can be co-opted as a medical instrument in itself.'


'Its purpose was embedded in the design decisions, from the shape of the building right through to the shape of the furniture, to the shape of the door handles, to the design of three different kinds of spittoon. These are incredibly detailed design decisions for a specific need.'

This way of thinking about medical architecture had echoes in the UK. At the same time as the Paimio Sanatorium was being built, the British Colour Council (BCC) was being set up by the designer Robert Francis Wilson. The BCC sought to standardize and index colour for use by a range of different industries, with a belief that control over a room's brightness and hue could increase productivity, improve morale, relieve eye-strain, muscular fatigue and nervous tension.

For the Wellcome exhibition, the artist Giles Round has pulled on this approach to create a colour scheme, as well as a number of artworks that look at how these ideas have resurfaced in the screens of our phones and laptops. '[Wilson] talks about how colour and light itself can be used to improve health, stimulate morale and increase productivity,' Round says. 'When we talk about technology like smartphones, we're still thinking about these things, and how we're affected by different colours of light itself.'


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Paimio Sanatorium.
Courtesy: Wellcome
Collection; photograph:
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Another interwar, pre-NHS project that's featured in 'Living with Buildings' is the Pioneer Health Centre. This was based around a purpose-built building in Peckham, designed by the architect Owen Williams in 1935. It was part of a social experiment, set up by doctors George Scott Williamson and Innes Hope Pearse, to observe families that had paid a small fee to use the facilities. Like Paimio, there was attention on architecture details, from glazed glass ceilings and quiet wall colours, to rooms designed not to impede movement. In this case, the target wasn't anything as specific as tuberculosis, but rather the broader idea of a community's health.

Correspondence O (2017), a video piece by the artist Ilona Sagar that's on display at the Wellcome, explores the history of the Pioneer Health Centre, as well as its subsequent conversion into a gated community. She explains that, over the years, the centre in Peckham has been adopted as a model by a whole gamut of different political and social movements:

'There are obvious parallels with the cybernetic movement of the 1960s to 1970s. Beyond this, it has been seen as an anti-statist anarchist ideal, as a proxy for eugenics, as well as an example of the big society and neoliberal localism.

'It has been argued for by some that it should be brought back to save the NHS. It is both libertarian left, centrist and conservative, all of these things and none of them.'

What is perhaps most significant about the Pioneer Health Centre, as well as the Paimio Sanatorium and the work by Robert Francis Wilson, is the underlying connection between a built environment, an aspiration for social cohesion and an entitlement to wellness. This approach, of health as a holistic concept, fell somewhat out of favour as the 20th century progressed and new technologies developed. The benefits of CT scans and MRIs are more tangible, after all, than the play of natural light, or the even vaguer notion of unimpeded flow through space.

But as 'wellness' becomes a fashionable word once more, value is again being placed on the power buildings have over physical and mental health. Ivan Harbour, senior partner at the architecture practice Rogers Stirk Harbour + Partners, characterizes a shift towards architecture that not only serves a clinical purpose, but is also designed to make people 'feel' well:

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Alvar Aalto, Paimio Chair, 1932 Courtesy: Alvar Aalto Foundation

'It's very easy to say I want the minimum cost. Why do I need all these extras? What people are now realizing is that if you go into a hospital and you feel unwell because of the nature of the hospital, those extras are not extras at all. They are fundamental.

'Light and air are actually a lot more important than people imagined,' he adds. 'If you are only thinking about the science of treatment, and you forget the art of care, you aren't going to make anyone well.'

Harbour led work on the Maggie's West London Centre, situated in Charing Cross Hospital. Like other Maggie's Centres, it is a free drop-in centre for those affected by cancer. The art of care is at the heart of what this charity does; its buildings designed as instruments for support, in contrast to the clinical instruments of the oncology ward. Natural light, views of greenery and calming colours are all leveraged to uplift those that pass through its doors. Could this philosophy bleed into the corridors of a general hospital?

It's certainly trickling elsewhere. For the 'Living with Buildings' exhibition, Rogers Stirk Harbour + Partners worked with humanitarian organization Doctors of the World to design and build a new kind of mobile clinic for emergency situations. The resulting plywood structure is basic, but attention has been paid to a plethora of small details. There's a canopied area with plug sockets, to function as a communal hub as well as a waiting area. There's a back exit in addition to a front entrance, so patients can exit unseen. Crucially, the building is designed with gaps in the walls, which can be filled with sound-proof insulation.

'People from different backgrounds will talk about their issues, their trauma, and try to do that with some dignity,' says Ellen Waters, director of development at Doctors of the World. 'It's hard to do that with a load of people sat on the other side of the fabric.'



Model of a hospital promoting the King Edward's Hospital Fund for London, England, 1932. Courtesy: Science Museum, London

Waters explains that details such as these aren't frivolous, but rather necessary for the types of crises Doctors of the World now faces. Tents might work for short-term operations, but these kinds of responses are waning against the longer-term needs of refugee camps: 'We're seeing very different crises since 2015,' she notes. 'The temporariness of what we might have seen before with a famine is no longer there. There are camps in Greece, Italy, Croatia, Hungary, Turkey that we've been in since the beginning. Having temporary buildings isn't suitable.'

The architecture of an emergency camp is different to that of a hospital corridor, but both have a responsibility to the health of the communities that inhabit them. Perhaps the lesson to be learnt

from new emergency clinics, Maggie’s Centres and pre-NHS experiments like The Pioneer Health Centre is that wellness is a nebulous thing, and it doesn’t only take root in scanning rooms or operating theatres; not only in architecture’s ability to contain contagion but in a building’s ability to empower and uplift.

That way of thinking has mutated around new technology, both in the clinic and in our pockets, but the signs are that it is being recognized once more. Bodies and buildings, after all, are forever entangled.

‘Living with Buildings’ <<https://frieze.com/event/living-buildings>> , runs at the Wellcome Collection, London, from 4 October until 3 March 2019.

Main image: Paimio Sanatorium. Courtesy: Wellcome Collection; photograph: Ben Gilbert

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