

### **Draft Research Question:**

How might taking the design theories of Hygge and Biophilic, leveraging their calming materiality and atmospheric practices, provide a safe and therapeutic healthcare experience for local communities through the articulation of a spatial design artifact (consultation space)?

### **Field of Inquiry:**

My proposed research study is developing a consultant space for the district health board; this space will be located within public locations of communities that neglect their healthcare.

"What is a safe hospital experience? What does that feel like? How can I emit these experiences exterior of a hospital environment?"

This research explores the spatial implementation of a safe and supportive medical experience through materiality and form for users. Explicitly exploring how qualities of the design theories *Hygge* and *Biophilic* can provide support and serenity within a medical environment.

Due to the traumatising nature of medical environments, I want to explore how I can provide further support and care through my practice to create a therapeutic healthcare experience for local communities.

### **Keywords:**

- Manaakitanga
- Well-being
- Container
- Communal
- Aid
- Repose

### **Aims:**

#### **AIM 1:**

Understanding the experience and configuration of a medical environment; learning the community's needs and constrictions for the space that fabricates this stress-inducing affair through a designer perspective?

Through this aim, I want to comprehend the physical design elements of the space; colour, shape, and lighting that are triggering the poor experience. Learning how I can solve these design issues related to the communities' needs for the space and reveal their atmospheric triggers of past negative experiences and traumas.

Then adapting these findings to a spatial and well-being practice of integrating these elements to create a safe experience and atmosphere. Making an impact within healthcare space, deciphering new designs and qualities of space to aid and ease the trauma and emotions surrounding these spaces.

- Good aim, establishing the conditions and problems of the research. Clearly understand the context.
- Through practice

### **AIM 2:**

Another aim within a well-being and co-design context is creating a comforting and reposed medical environment (consultation space) through my spatial and user design practice, that communities perceive as safe, changing their perspectives and experiences of healthcare.

Impacting communities by providing a local enclosed, safe and supportive "healing environment" (*N Permatasari et al. 2021*), for individuals who neglect healthcare for various reasons. Through my design practice of spatial design and users' design thinking, as a response to exploring the solution to the communities' attitudes and behaviours towards medical environments. Displays the impactful effects design spatially holds within altering emotions and memories of a space, controlling and altering atmospheres, and changing communities' behaviour and nature.

This purpose will create massive impacts within communities; if successful in the initial placement, it can be developed within neighbouring communities to effect healthcare positively.

- Missing- for clarity, specifically, identify the design practice I am engaged with to respond to the aim.
- The aim of the project is to apply within a well-being context, this particular design practice as a means of creating a comforting and reposed medical environment, that the community will perceive as safe.
- Establishing a paradigm of my discipline- have been clear about what my approach is going to be. Then from this clarity comes from teasing out of the methods:
- Participatory design
- Design thinking tools
- Design social impact
- Spatial Design + Communication design, tool kit that can be built into methods.
- The first method is understanding the landscape, a key part of the project- related to the well-being and codesign thinking parameters/methods that I set up.
- Then part two is the methodological design approach, what do I do? How do I respond to the problem through my design practice?
- **Frame this up the aim better**
- Say design practice

### **AIM 3:**

Understanding the connection and relationship between biophilic design practice/theory and healthcare environments to deliver a stress-free and developed experience for users in a medical environment, through exploration and testing.

As the placement of biophilic design creates the perfect atmosphere to depict the humanisation of the beauty and recovery of humans and nature in urban spaces (*Totafiori, S.2018*). These natural elements can be challenging to place within a medical space; due to hygiene reasoning. I want to learn about the different ways of accessing and integrating nature into the built environment. Through my practice of exploring and discovering various accesses to nature, with emulating sensory and textural designs of naturalistic forms to discover and enhance the psychological and physical well-being of potential users of the consultation space. Revealing the impact and effects biophilia has on users, creating an approachable and relaxing space that transforms how medical spaces are experienced and interacted with.

- In the second aim, say design practice, don't get specific. In the third aim having specificity, clarify the third aim, and let them know that this is a practice-oriented project, with a design lens on it.

#### **AIM 4:**

Exploring, analysing and critiquing the potential hygge design practice/theory can deliver a safe experience for users in a medical environment setting.

Through this aim, I hope to learn how to alter and apply the elements of Hygge to create and push the boundaries of care and support (relaxer) within a medical design. Uncovering which elements of hygge correlate in creating a safe and relaxing atmosphere.

Revealing, "What does a safe and supportive medical space feel and look like"- what elements of design are needed within a medical space to provide care and support; colours, materials, surface textures, sounds, space. This creates a space and experience that transforms how medical care is perceived and reacted to.

- Exploring and analysing. The golden rule with and pick 3 or 1.- having 2 weakens the sentence.
- Exploring, analysing and critiquing the potential of Hygge design practice.
- "Not how but the potential". How closes it down- creating a binary for this or that.- don't use binary narratives.

#### **Images:**

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