



# colonnade

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## Design and Health

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*To heal is to make whole*

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The root of the word heal comes from the Middle English noun, “hele,” or “whole.” But what does “to make whole” mean? Most of us understand health as the absence of disease, and throughout our lives we have sought health care when we were already sick. But is sickness only the absence of disease, or the absence of wholeness?

The University of Virginia’s Center for Design and Health takes a broad approach. Grounded in the work of all disciplines found in the School of Architecture, along with public health, nursing, medical humanities, and public policy, among others, our Center focuses on the important, and obtainable, goal of “making whole” through environmental design and planning. While some of the teaching and research done at the School, and shared on the pages that follow, concerns traditional healthcare settings, we expand the definition of health to include personal health, public health, and planetary health. This issue of *Colonnade* is organized in the same way, starting with health-promoting buildings and landscapes, then moving out in scale to neighborhoods and beyond, like ripples in a pond.

To make whole, I would argue, is to provide balance, or completeness. We might think of Maslow’s hierarchy of needs, beginning with basic shelter and providing for physiological needs (food, breathable air, drinkable water, restful sleep), then the need for safety and security, then love and belonging, then the psychological need for self esteem and mutual respect, and finally what Maslow described as self-actualization,

(creativity, morality, and the need to realize one’s potential). Might this describe a kind of wholeness? What role might the human environment play in supporting and shaping such wholeness?

Clearly we hope our built environment provides, at a minimum, basic shelter. A well-designed neighborhood or city might also provide fresh local foods, and should certainly provide clean air to breathe and clean water to drink. Safety, within our homes or in alternative shelters, is partially the obligation of the built environment. Security also has a significant design component, made prominent through the crime prevention through environmental design (CPTED) movement. Many but not all birth families provide a meaningful sense of belonging. Families of choice, created in community centers, churches, or recreational facilities, often supplement or replace primary family structures. Self-actualization, reaching one’s potential, can happen anywhere — playing in the woods, composing music, reflecting on the meaning of life, helping others. Each of these acts literally “takes place” in a physical setting. The built environment often provides the spatial context for these most satisfying individual experiences.

The Center for Design and Health, with its distributed focus ranging from healing in healthcare environments to the design of healthy neighborhoods, cities, and regions, sees opportunities in all these arenas. Our focus is on finding appropriate approaches, and when possible, transferring knowledge from one scale to another.

For instance, can we understand the role of calming vistas by studying a highly controlled hospital environment, and apply what we have learned to schools, or multi-family housing? Can we draw conclusions from a demographic study of food deserts in an urban environment and use this knowledge to design individual gardens? Can strategies that help us age in place also help those with life-long disabilities move through their environments? Can safe spaces ease the psyches of those with life-threatening illnesses just as such secure environments might comfort scared children? Can walking paths that provide exercise for young urbanites also provide safe routes to elementary schools? And, importantly, can we use the critical feedback of research to do more of what we have learned works well?

Our nation and our world are entering a period of particular urgency with regard to healthcare, in the traditional sense of relief from sickness. As our population ages, and the costs of healthcare increase, new approaches are essential. A built environment that promotes wholeness is a smart, cost-effective, and humane approach. And an environment that is healing for individuals is also, we believe, healthy for the planet. As you will see in the pages that follow, the School of Architecture's Center for Design and Health has much to contribute.

Image: Strolling Garden, Reuben Rainey

