

Neighborhood of Care

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& Olivia Thomsen

NEIGHBORHOODS OF CARE

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Authorship: Proposal by Nina Christine Hansen & Olivia Thomsen.

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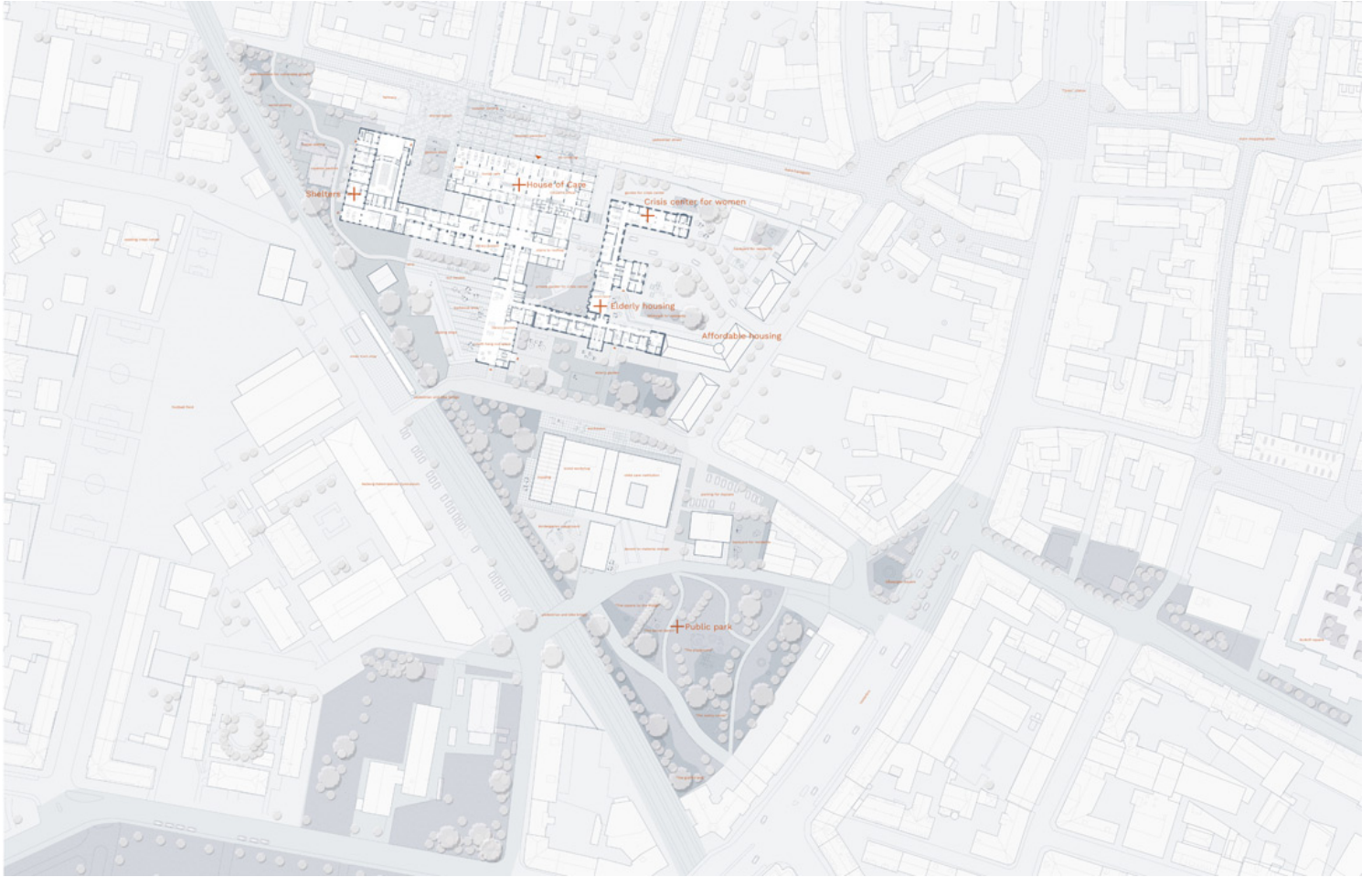
How can 'care' be used as a tool to rethink what is considered valuable in urban planning? This project explores the societal and spatial implications of reprogramming vacant hospitals into new Neighborhoods of Care. This is done with care for the climate, for the limited resources, and for the marginalized groups of society that are often left out of modern city planning.

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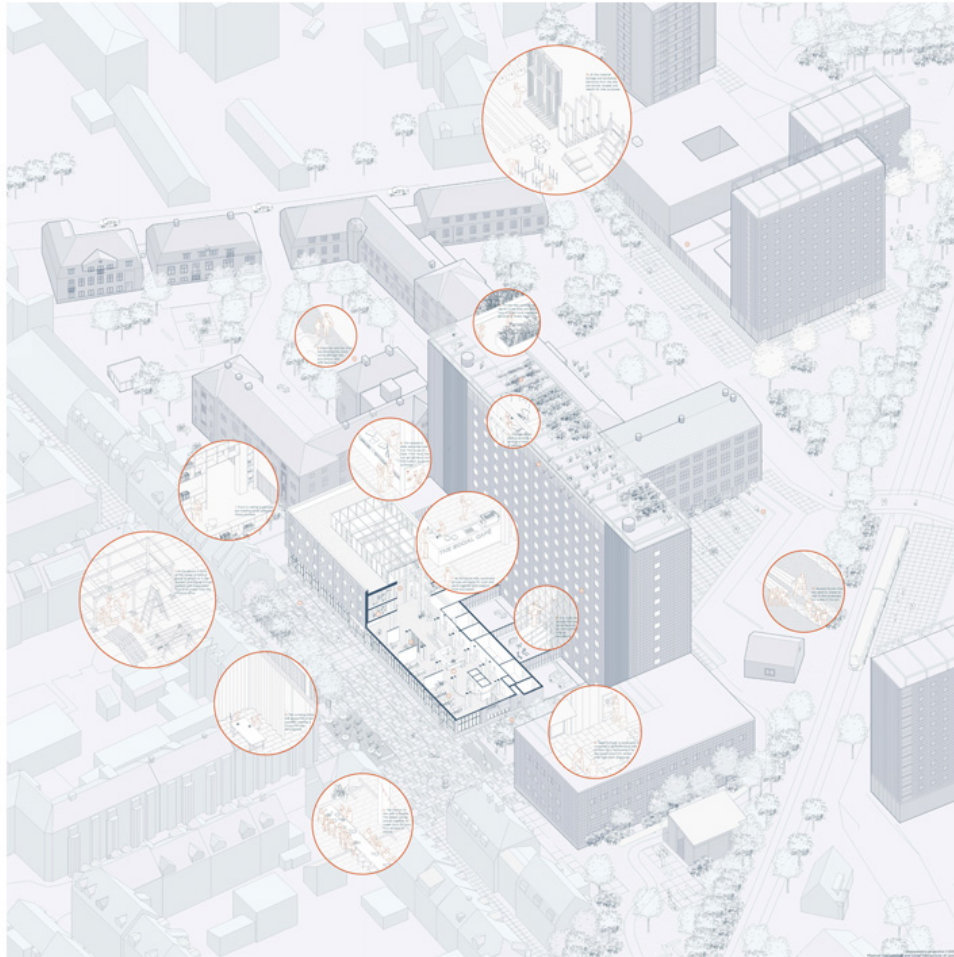
Developing with Care

The project takes its inspiration from feminist economics – a critique of how our modern society assigns value exclusively based on a monetary context – and suggests an alternative value system based on care. The project introduces six concepts of care as a toolkit for urban development: public health, preservation, and adaptive reuse in relation to physical care, and citizen involvement, inclusion of marginalized groups, and gender equality in relation to social care. This project develops a strategy for vacant and not yet demolished or transformed hospitals. Aalborg North Hospital is used as a case study to demonstrate how to establish a Neighborhood of Care with housing functions for vulnerable groups.

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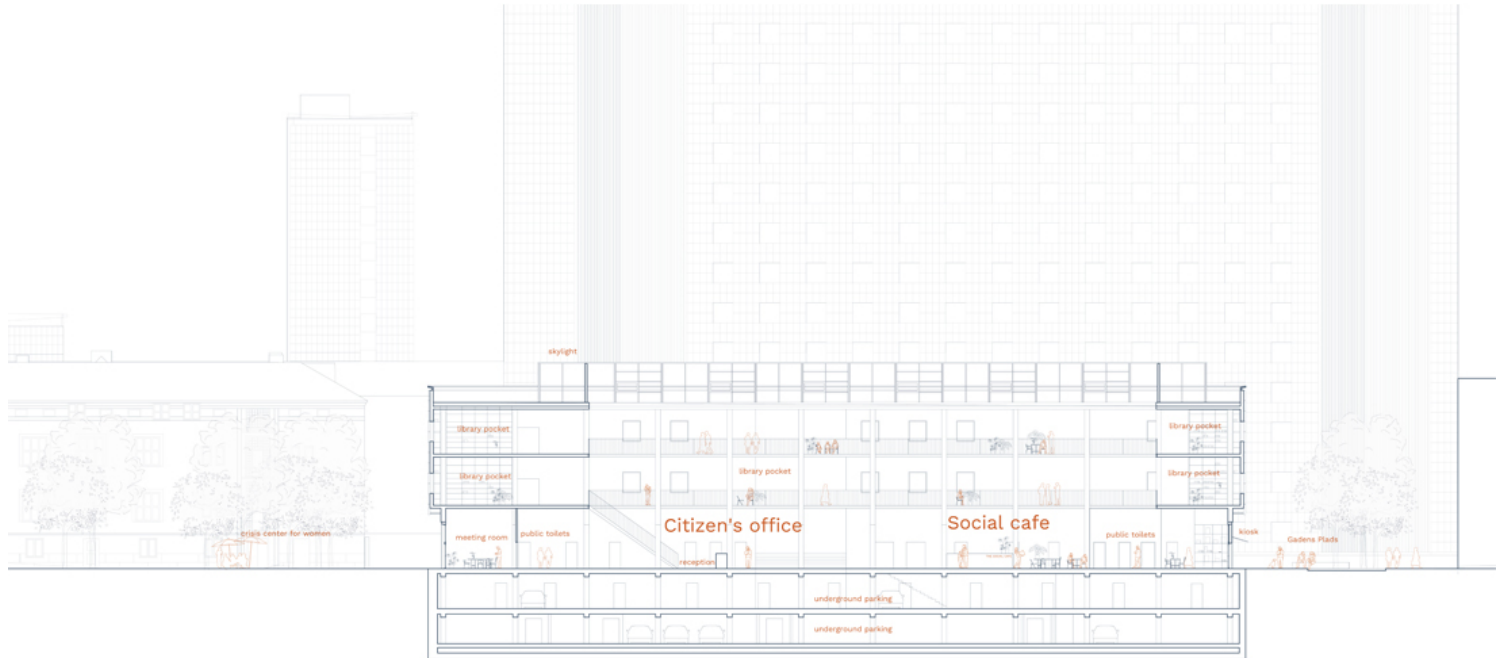
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House of Care

The House of Care is a community house with a focus on the difficult meeting point between different social groups and the public facilities in Aalborg. The transformation of the existing building is developed with care for our physical environment, with public health, preservation, and adaptive reuse as guidelines. On the ground floor, the Citizen's Office and the Social Café share the main entry space. From there, hallways lead to the assisted housing functions: the shelter, the senior housing, and the crisis center.

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Six concepts of care Reconsidering values in society

PHYSICAL CARE

1. PUBLIC HEALTH

Attention to public health can be seen as a way of caring, by building and redeveloping with the people's wellbeing in mind.



CASE EXAMPLE THE BLACK SQUARE

Nørrebro, Copenhagen, 1970s
Copenhagen municipality



2. PRESERVATION

Maintaining and preserving is caring for the physical environment and our cultural history, that contributes to our common identity.



CASE EXAMPLE KOLDINGHUS CASTLE

Kolding, transformed in 1970
Architects Inger and Johannes Exner



3. ADAPTIVE REUSE

Adaptive reuse is building and transforming with the possibility of future societal change in mind. Recycling buildings for new purposes saves the entire environmental impact of manufacturing materials.



CASE EXAMPLE CITÉ DU GRAND PARC

Bordeaux, transformed in 2017
Architects Lacaton & Vassal



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SOCIAL CARE

4. CITIZEN INVOLVEMENT

Citizen involvement creates a sense of ownership and identity, which often leads to a will from the people to take care of the projects they have been a part of creating.



CASE EXAMPLE DANNERHUSET

Copenhagen, transformed in 1979
The Women's Movement



5. INCLUSION OF MARGINALIZED GROUPS

Public space is often a complex mixture of different people coexisting. Often marginalized people are not a part of citizen involvement projects, but by co-creation it is possible to achieve a more inclusive city.



CASE EXAMPLE ENGHAVE MINIPARK

Vesterbro, Copenhagen, 2017
Artist Kenneth Balfelt and team



6. GENDER EQUALITY

Designing with a care for all genders. Studies have shown that when the needs of women are taken into consideration in planning, the needs of children, elderly, and other vulnerable groups are often met as well.



CASE EXAMPLE BUENS TORV

Nørrebro, Copenhagen, 2021
Urban 13 and COurban



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Site strategy
Designing with the six concepts of care

PHYSICAL CARE

STRATEGY
Redevelop into a level of livability by investigating conditions harmful to health

STRATEGY
Keep the historical/physical identity

STRATEGY
Transform with the possibility of future societal change in mind

SPATIAL INTERVENTIONS

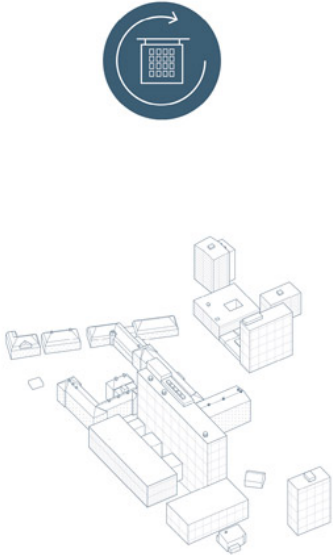
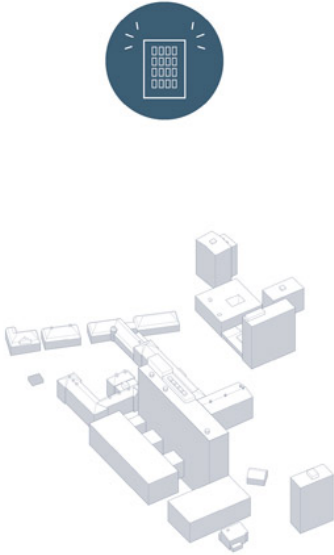
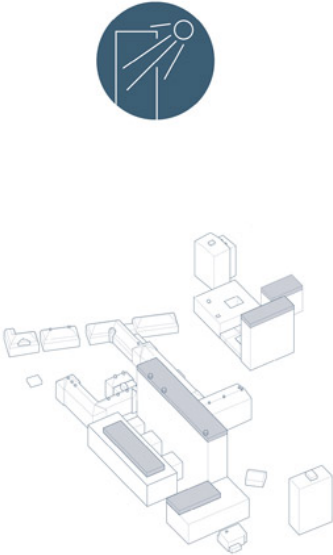
- + Demolish buildings that are harmful to health
- + Create green recreational areas
- + Gouge light wells into buildings with great depth

SPATIAL INTERVENTIONS

- + Preserve as much as possible when redeveloping
- + Take advantage of former hospital facilities
- + Preserve architectural identity markers

SPATIAL INTERVENTIONS

- + Preferably keep the load bearing structure
- + Use reversible building design
- + Reuse materials on site



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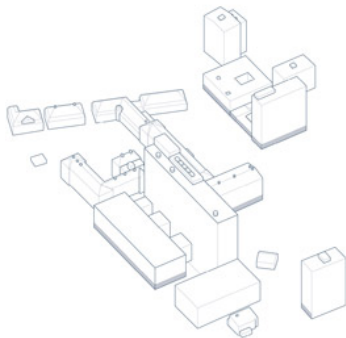
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SOCIAL CARE

STRATEGY
Establish a process where the local citizens are involved through the process

SPATIAL INTERVENTIONS

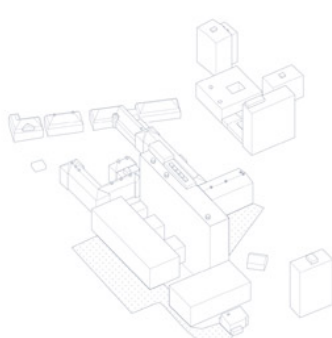
- + Facilitate a transparent process
- + Include citizens through town hall meetings, steering committees etc.
- + Establish a development office on site



STRATEGY
Investigate local stakeholders including marginalized groups and listen to their needs

SPATIAL INTERVENTIONS

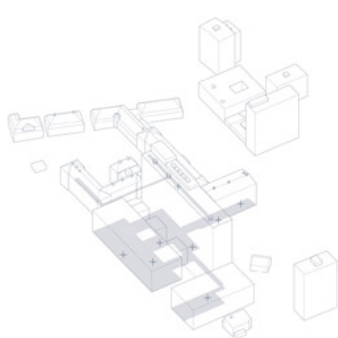
- + Facilitate a co-creating process to create ownership
- + Develop in dialog on site
- + Create welcoming spaces designated for significant user groups



STRATEGY
Take different user groups in mind when planning/designing

SPATIAL INTERVENTIONS

- + Establish supportive community functions
- + Focus on accessibility and safety
- + Create spaces with special identities



Spatial Interventions of Care

The spatial interventions are created with the existing functions and structures in mind. Working with the aim of preservation and with respect for the local historical identity associated with the hospital, the overall expression of the modernist welfare architecture is preserved. Elements and materials found on site are used, with care for detail, to develop new spaces and interiors. The connective hallways of the existing hospital are enhanced and transformed into The House of Care, which runs through the different buildings, generating smaller pockets to make space for more intimate situations. The ground floor is opened up to invite the public to take part in social activities, while the public spaces are designed with a focus on different identities, making them suitable for specific user groups and for different types of occupation.

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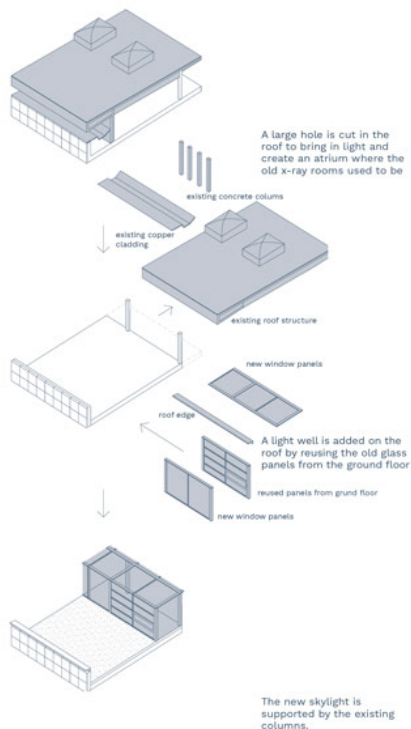
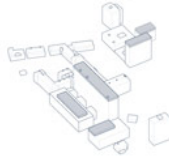
1. PUBLIC HEALTH

Redevelop into a level of livability by investigating conditions harmful to health



Being a former hospital, the buildings consist of large technical rooms for hospital facilities and dark spaces for x-ray, etc.

Specific walls containing materials harmful to health are removed and new roofscapes are added to bring light to the rather dark building and create new spaces with views over the city.



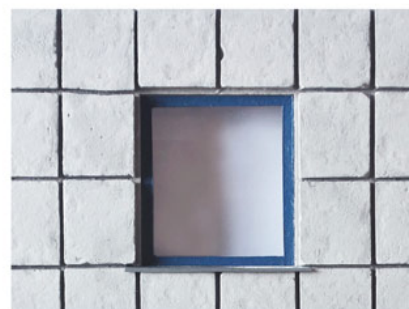
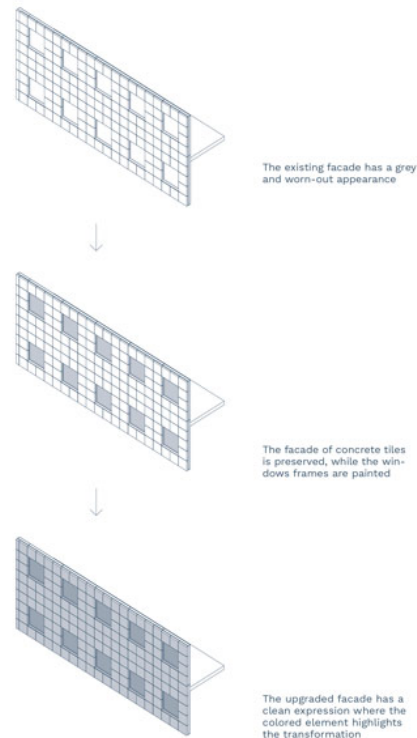
2. PRESERVATION

Keep the historical and physical identity



With respect for the local historical identity that the hospital carries, the overall expression of the modernist welfare architecture is preserved.

The concrete tiles are cleaned and restored where needed and in specific places elements are changed or painted a different color to add a new overall expression.



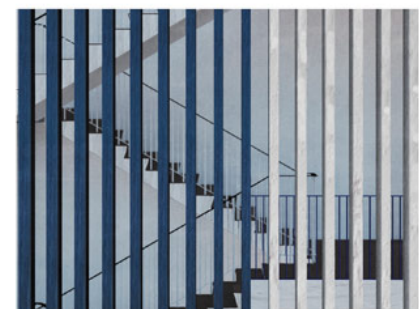
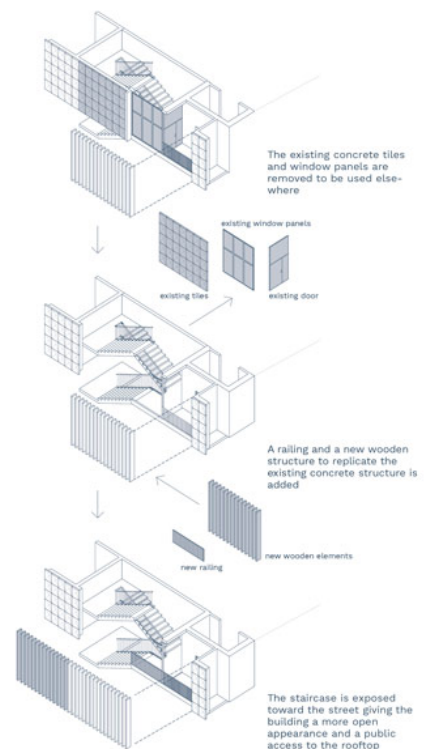
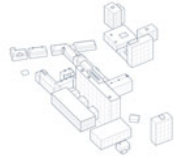
3. ADAPTIVE REUSE

Transform with the possibility of future societal change in mind



With care for detail, elements and materials found on site are used to develop new spaces and interiors. In this way, the site becomes a material storage, where different elements can be reused elsewhere.

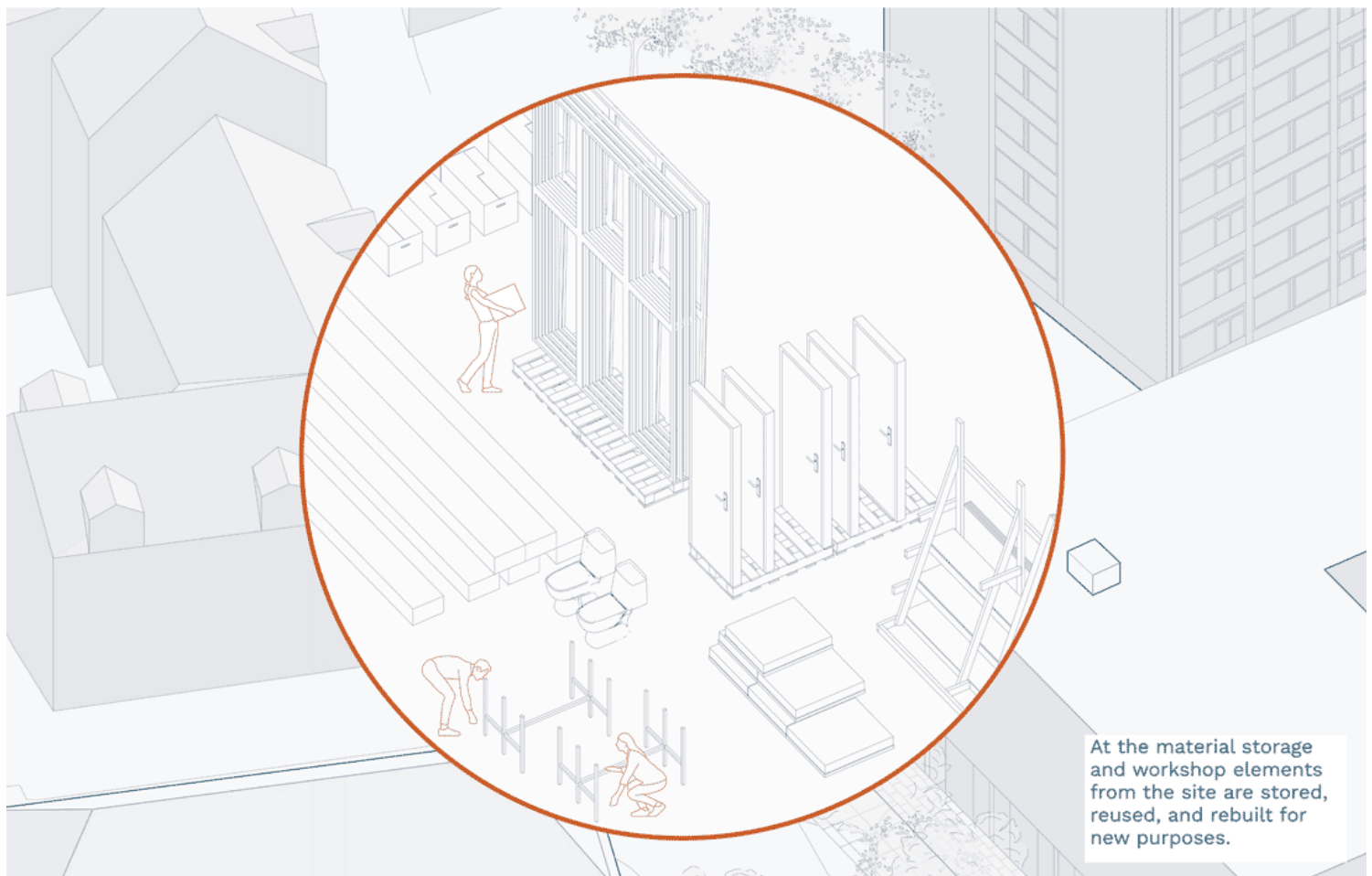
The staircases in the highrise building leading to the public cafeteria on the top floor and the new roofscape are exposed to the street. The concrete tiles, the window panels, and the metal doors are removed and used elsewhere.



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Social Interactions of Care

Through models, the project investigates how we as architects can implement not only physical care but also social care in order to sustain and improve existing networks in the development of our urban future. The model façades show the elements of physical care and transformation, while a viewing box in front shows the social care and interactions. Contrary to the regular way of viewing an architectural model in bird's-eye view, the viewer is invited into a more intimate situation, seeing the use of the architecture at eye level.



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