

Playscapes: Pure Ludens

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Introduction

Intuitively, we play. Cultural theorists Johan Huizinga and Brian Sutton-Smith (1997) discuss the ambiguous nature of play and its relation to space. Play is more than just a frivolous activity or playgrounds and theme parks; it is how we—and especially children—can discover and engage with our environment. Spaces cannot force play, one of Huizinga's (1955) conditions for play is that it must be a free choice, but spaces might inspire someone to want to play.

But what happens when play is situated in the very ordered structure of a hospital? This practice-led research asks how can an enquiry into play activate therapeutic hospital environments through empathy, imagination, and re-enchantment? To consider this, we explore the tension between the highly regimented hospital environment and the unregulated nature of children's play through play theory, drawing methodologies and colour. This paper describes findings and research to date and how these might be folded into a design proposition

Site and Existing Environments

This research is a collaboration between Starship Children's Health¹ and the Design for Health and Wellbeing (DHW) Lab. The DHW Lab is a collaboration between Auckland University of Technology (AUT) and Auckland District Health Board, located at Auckland City Hospital to design to improve healthcare experiences with patients, their families and staff (Reay et al. 2016).

This project is situated in three connected public spaces of Starship Children's Health—the atrium, a small garden, and a mezzanine with a café. The atrium is a multipurpose environment available to people in various situations or emotional states at all times of

¹ National children's hospital in Auckland, New Zealand

the day and night. Access to outdoor spaces such as the garden suggest that these holistic wellbeing intentions were in the original Starship design but not maintained. Familiar food outlets (mezzanine) were also intended to make the hospital feel less isolated from civic activities (Kearns and Barnett 2000). They were intended to cater for families, however, staff interviews found that these spaces are underused, cold, dull and uninviting for patients and their families.

Theoretical Frameworks

To address these ideas at Starship, this research first looks at complexities in healthcare spaces. Hospital design is moving in a direction that mediates hierarchies between doctors and the medical machine, and patients (Wagenaar 2006, 41). One such way to empower patients is applying a holistic notion of wellbeing and acknowledging the effects that environmental factors have on healing. Geographer and health space critic Wilbert Gesler (1993) considers the influence of health care spaces and “therapeutic landscapes” for patients receiving treatment. These spaces may include landscaping and appeal to our biophilic tendencies, space for spiritual connections, spaces for family, and opportunities of personalisation.

The rigidity of institutionalised medicine is also juxtaposed with the nature of free, unregulated play. Play and play therapy can be a medium to communicate with children in a way that they are familiar with in an often intimidating setting. Children in hospitals have many things decided for them or procedures done to them, whereas play is something they can control and is used as a form of escape or distraction from the clinical aspects of a hospital. How might a notion of play in the design improve patient experience?

Methods

These themes are explored through drawing methodologies and colour. Qualitative data collected by way of interviews and a design workshop supports the need for inclusive processes to incorporate perspectives of the space’s primary users (child patients, families, and staff).

Extending the site analysis beyond the confines of the hospital to the neighbouring Auckland domain reveals the histories of the site and its streams and springs, adding a geographical connection to the hospital (Figure 1). Along with research on cultural contexts, this research shows how holistic wellbeing should be considered as an intrinsic part of the design process.



Figure 1. Extended site mapping-history and geology

Playfulness through colour



Figure 2. Existing Atrium interior walls

The Starship atrium is lined with five pastel colours that carry significant meanings: pink= health and wellbeing, blue=sky, aqua=sea, orange=land, and yellow=sun (Figure 2). The original design intent was to make each level themed to one of these colours and the ground floor would be an amalgamation of all them. Currently, the de-saturated pastel tones from its opening in 1991 make the space appear outdated and dull. Precedents of

children's hospitals constructed in the last ten years still use multiple colours but in brighter tones, and it is balanced with more white/neutral colours so it is not overpowering or over-stimulating. Colour theory estimates how colours are experienced while acknowledging that each person's perception of colours may differ.

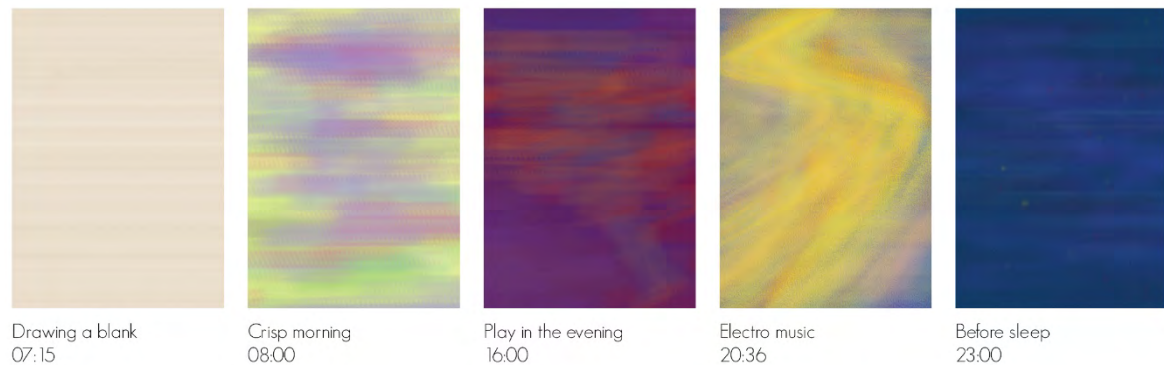


Figure 3. Synesthetic colours at different times of day

Initial exploration of assumptions around colour resulted in playful cross-sensory visual colour cards (Figure 3). These are further tested through a co-design workshop with children at Starship to gain insight into how they view their experiences and ask what kinds of play are meaningful to them. Colour, material and lighting are also considered by how it may affect our body's circadian rhythms, and possible cross-sensory links to mood, colour, and time.

Conclusion

These findings examine the value of play in a children's hospital design. It is also specific to cultural and geographical contexts of New Zealand. User-experience and input are at the core of the design process, emphasising how an understanding for the site and people can lead to an empathetic design proposal response.

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