



Places and Technologies 2015

KEEPING UP WITH TECHNOLOGIES TO MAKE HEALTHY PLACES

Nova Gorica, Slovenia, 18.–19.6.2015

PT2015

BOOK OF CONFERENCE PROCEEDINGS

*A healthy city is one that is continually creating and improving those physical and social environments and expanding those community resources which enable people to mutually support each other in performing all the functions of life and developing to their maximum potential.
Health Promotion Glossary (1998)*

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Faculty of Architecture, Serbia

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Faculty of Architecture, Slovenia

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**KEEPING UP WITH
TECHNOLOGIES TO MAKE HEALTHY PLACES**

BOOK OF CONFERENCE PROCEEDINGS

Editors:

Alenka Fikfak, Eva Vaništa Lazarević,
Nataša Fikfak, Milena Vukmirović, Peter Gabrijelčič

Nova Gorica, Slovenia



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TOWARDS A NEW UNDERSTANDING OF HEALTHY PLACE

Saja Kosanović¹

PhD Architect, Assistant Professor, Faculty of Technical Sciences, Kneza Miloša 7,
38220 Kosovska Mitrovica, Serbia, saja.kosanovic@pr.ac.rs

Eva Vaništa Lazarević

PhD Architect, Full Professor, Faculty of Architecture, Bulevar Kralja Aleksandra 73,
11000 Belgrade, Serbia, eva.vanistalazarevic@gmail.com

Sladjan Timotijević

PhD, Primarius Doctor of Medicine, Clinical Hospital Centre "Bežanijska kosa",
Bežanijska kosa, bb, 11080 Belgrade, Serbia, sladjant@open.telekom.rs

ABSTRACT

By adopting and applying medical approach to health and unhealth conditions, medical definitions and terminology, as well as the research methodology based on logical argumentation, comparative analyses, scientific description and comprehensive literature review, this paper investigates the impact of a place on individual user. In order to achieve the main research aim that is to propose a new understanding of healthy place, several specific objectives were set and fulfilled, such as the identification of determinants of place in regard to health and the identification of types of impact of a place on health potential. It was concluded that a healthy place, in order to be named as such, should at least prevent the occurrence of sickness, while health-promotive and healing places are characterised by additional, upgraded qualities.

Keywords: health, unhealth, healthy, health-promotive and curative places.

INTRODUCTION

Different authors today indicate the necessity to reformulate the rooted definition of health, established for the occasion of constitution of the World Health Organisation (WHO, 1946). Bircher (2005), for example, considers health as a "dynamic state of wellbeing characterised by a physical, mental and social potential, which satisfies the demands of a life commensurate with age, culture and personal responsibility". The definitions of conditions which are contrary to health are also elaborated in the literature. Marinker (1975) described three possible manifestations of the "unhealth": disease, illness and sickness. The disease is pathological process, most often physical, sometimes undetermined in origin, but

¹ Corresponding author



always identified by some deviation from biological norm. The illness is a feeling, unique experience of unhealth condition with its physical, psychological, social and cultural aspects (Marinker, 1975; Helman, 1981; Green et al., 2002); it often accompanies disease, although the disease may be undeclared. In some cases, the illness exists where no disease can be found, which leads to the difficulties in treatment (Eisenberg, 1977). Illness-based approach allows physicians to refocus on the patient-centred experience of illness (Green et al., 2002). "The third mode of unhealth is sickness. If illness is interior and personal mode for the patient, sickness is the external and public mode of unhealth. Sickness is a social role, a status, a negotiated position in the world, a bargain struck between the person henceforward called "sick" and a society which is prepared to recognize and sustain him" (Marinker, 1975). The sickness is also understood as a concept which combines the biomedical model (disease) with the socio-cultural context of the patient (illness) (National Center for Cultural Competence, no date). The health is, therefore, also what individuals create with their families, schools, communities and workplaces, in the parks and playgrounds; it is the air people breath, water they drink and choices they make (Alberta Government, 2014).

PLACE AND HEALTH - DETERMINANTS AND IMPACT

Terminological determination of the spatial-time concept which people create, use and in which they maintain, improve or degrade physical, social and mental health status vary in different sources, so that there exist various descriptions of the relationship between: built environment and health, built space and health, or place and health. According to Tuan (1979), buildings and cities are places because they can organise space into centres of meaning. As the "meaning" is crucial for understanding of certain aspects of health and wellbeing, such as emotional or spiritual, the term "place" seems to be the most appropriate for studying the effect of complex multidimensional frame on individuals.

The determinants of place in regard to health, as elaborated in this paper, are those characteristics of a place that are significant for studying the effects on the health of individual user. Based on logical argumentation, analyses and comprehensive literature review, a series of determinants of place in regard to health were defined. Parallel, three basic types of impact on health potential were set, according to Bircher's definition: physical, mental and social. It was noted that identified characteristics of place rarely impact just one aspect of health and that not all types of responses occur at the same time, because of which the difference between predicted first and the secondary - postponed or indirect reaction(s) was made, as presented in Table 1. Nonetheless, the individual sensitivity or resilience may influence the occurrence of variations among different users of a same place, i.e. of presented order of occurred effects. Cultural differences between the places account for the additional factor which may stimulate alterations (especially in domain of social aspect of health). Presented list and order, therefore, may be



viewed as general, based on commonly recognized interrelations between the conditions of place and health manifestations.

Table 1: Determinants of place and impact on health.

Impact	Determinants of place in regard to health
Variable	Conditions at location in which a place is "set"
Variable	Resilience of place/Preparedness for disaster
MS	Residential density
MS	Built space typologies and distribution of physical structures
PM, S	Land use and spatial organisation
PM, S	Incorporation of nature contact (Frumkin, 2003) into built tissue
P, M	Air, water and soil quality
P, M	Allergens and other biological contaminants
M, S	Municipal noise
P, M	Accessibility to other places/facilities, especially to health care services
P, S	Transportation
PM	Walkability and bicycle use
P	Infrastructure
M, S	Open space design and dimensioning
S, M	Common space design
S, M	Social life and common activities
PM	Green space design and dimensioning
PM, S	Sports/recreation and other spaces for physical activity enhancement
M, SF	"Intended" spaces (e.g., healing corners, educative spaces or child care community places)
M, S	Spatial equipment
P, M	Safety in relation to injury/accident occurrence
PM	Ease of moving
Variable	Safety in relation to crime, violence and social disorders
M	Flexibility and adaptability of the design
S, M	Social structure, justice and inclusion
S, M	"Third places" (Manuel and Thompson, no date) introduction
PM	Actions and programmes for health promotion (healthy lifestyle, nutrition, obesity, physical activity, substance abuse, targeted or future predicted (e.g. Davies, 2015) sickness prevention, etc.)
S, M	Promotion of positive social values and relations
M, S	Image of the place: aesthetics/attractiveness/identity/diversity
M, S	Perception of the place (pleasant, attaching, hoping, supportive, healthy, happiness enhancing, etc., vs. depressive, dark, cold, strange, etc.)
M	Scent of place as memory trigger
M	Capacity of place for support in emotional crisis and the stress absorption
M	Spiritual dimension of the place
PM, S	Hygiene
PM	Indoor environmental quality (including comfort aspects)
P	Chemical content of construction materials
PM	Quality of construction
Abbreviations: P- physical health; M - mental health; S - social health.	



DEFINITION AND CATEGORISATION OF HEALTHY PLACES

The medicine is commonly described as the science and practice which deals with sickness prevention, diagnosis and treatment. Especially in recent time, the health sector also pays a lot of attention to the health promotion - usually through various actions and programmes achieved in cooperation with other, non-medical bodies and institutions. Accordingly, the preventive, promotive, and curative potential of a place represent specific research subjects of this paper. However, the power of a place to cause the appearance of "unhealth" of its users should neither be underestimated; it is, therefore, also needed to investigate how can a place contribute to the appearance of sickness. In conclusion, the healthy place, in order to be named as such, should own one of the three identified qualities: basic – preventive, promotive, or enhanced - curative.

Every human activity has a recurrent effect. People create and use places; in return, the places impact people and influence their physical, social or mental health and wellbeing. There are many worldwide examples and references (for example, Smyth, 2005) which, from a wide range of reasons, indicate that not all places are healthy. The unhealth of individual user comes as the result of weak quality of one or more of determinants of place. Tangible aspects of a place, such as its physical (material) quality, or ecological parameters with the set indicators, allow for easier identification of relation between the cause and the sickness, although the issue hasn't been sufficiently explored to-date. On the other hand, in those cases in which a place provokes illness without straightforward connection with the classified disease, the detection of a cause appears as more complex task. A wide range of qualitative, intangible, social and psychological factors which influence in worse the health of individuals are still waiting to be scientifically explained. Additional aggravating circumstance is represented by subjective experience and individual sensitivity, resistance or weakness.

Healthy place prevents the occurrence of sickness of its users and is, as such, characterised by the absence of the main recognized health risks. In order to avoid confusion, misuse of the terms, production of unstable concepts and theories, and easy assignment of the label "healthy" to a place which doesn't own sufficient quality, it is necessary to develop the evaluation system and to set the conditions - criteria, including the lower threshold of a healthy place, by taking into consideration present cultural context.

Health-promotive place promotes good health for all people, quality of life, healthy personal development and healthy behaviours for all social groups. In more particular terms, health-promotive place contributes to the achievement of longevity, well-being, satisfaction and happiness. Clearly, health-promotive place has embodied the well-defined social programme, while at the same time it owns



adequate physical qualities inspiring enough to provoke positive life-style (changes). It is a place of users who are educated and have developed skills to improve and maintain their good health and well-being.

Gesler (1992) elaborated the concept of therapeutic landscapes - the geographic metaphor for aiding in the understanding of how the healing process works itself out in places. Indeed, the built component of a place, with its physical and chemical properties cannot (yet) be curative. Except for the brownfields and other devastated landscapes, the empty space cannot be less healthier than the built one. But the content of a place, its social, symbolic and psychological component, or natural benefits, may have the healing power. The question raised by Manuel and Thompson (no date): "Who makes places, really?", actually points at some healing potential of a place.

CONCLUSIONS

The proposed approach to healthy place understanding allows for better elaboration of the complexity of issue as well as for further work on the formation of criteria and indicators based on which the evaluation of places in regard to their impact on individual health may be conducted. Nonetheless, it should be noted that the cultural component of specific spatial sample could cause shift in given order of health responses, especially in domain of social health, which is why it is necessary to study healthy places on regional or even local scale. According to the given list of determinants of place in regard to health, it may be concluded that the right scale of a healthy place actually is the neighbourhood. Besides including socio-cultural dimension as a variable in healthy place equation, the time factor, i.e. the time relations between the design, implementation and change of overall conditions represent another important issue for consideration. Transformative nature of a place in time, therefore, needs to be taken into account while designing new or reshaping for improvement the existing places. Individual architectural-urban interventions and their joint composition possibly produce negative impact on every type of health potential - physical, mental or social; on the other side, when it comes to the improvement of health conditions, the meaning of a healthy place from the perspective of spatial designers is rather understood as intangible concept.

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