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FLOURISH

EXPLORING HEALING ENVIRONMENTS IN A RESIDENTIAL TREATMENT SETTING



emily delores kalafian
VCUarts Interior Environments MFA
Spring 2022

FLOURISH

exploring healing environments in a residential treatment setting

*emily delores kalafian
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Spring 2022*

*this project is dedicated to those
who have felt alone in their struggles*

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PROJECT BACKGROUND



PROJECT STATEMENT

How can our environments promote healing and support recovery?

The following project explores this central question through the design of a residential center for eating disorder recovery. The center will serve 8-10 young women as they seek recovery from restrictive forms of eating disorders. The center will accommodate the necessary staff personnel as well as spaces for supporting activities and wraparound services. The project intends to create a place for healing that feels safe, warm, and considers patients' needs for autonomy, dignity, and a sense of control amidst disorder. This is a place to create meaningful relationships and to participate in purposeful activities centered around healing and recovery. Ultimately, this is a place to rebuild identity and to flourish.

DESIGN DECLARATION

Design is ultimately for and about people. As such, my approach prioritizes the following values:

EMPATHY

Empathy in design is a holistic consideration of the end use and users. Empathy encompasses care and sensitivity, designing spaces that instill hope and dignity into those who experience them. Recognizing that the core of our humanity is something we all share inspires thoughtful consideration of how users will feel in the space and is what empathy in design is all about.

RESPECT

Respect as a design ideal is comprised of ideas like equity, equality, and sustainability. It is about respecting others and the environment through design. Considering the impact that design choices may have on others, both users of the space as well as the surrounding spaces, naturally requires long term thinking about the impact on overall well-being. The same considerations apply when thinking about the impact of design on the environment. Respect is another call to think critically through to the outcomes of design. It is future thinking just as much as it is about creating something worthwhile in the present.

BEAUTY

To design with beauty is more than just creating a good looking outcome. It is about stewardship, leaving places better than you found them. Beauty comes through designing with intentionality and integrity—creating authentic moments while maintaining those parallel values of empathy and respect.



Montoya Coworking Studio, Barcelona, Spain
Designed by Skye Maunsell and Jordi Veciana



FUN

Creativity fuels design. The search for new solutions is what allows design work to continue evolving. Yet, it can be easy to fall back on what has worked before in the past. This is where the element of fun has a role to play. Ingenuity can occur when inhibitions are lowered and the design process is centered around exploration.

INTENTIONALITY

Intentionality lies at the core of all of the design ideals. Design is ultimately for and about people. As such, maintaining a strong understanding of functionality and rationality is important. There is a delicate balance between design for design's sake and design solely for the sake of function, but intentionality alongside the other design values can help determine that balance.



LITERATURE REVIEW

Eating Disorders and the Healing Environment

This study will explore ways in which the interior environment of a residential treatment center can best support eating disorder recovery through analyzing patient needs and evaluating specific design elements and strategies that can support those needs.

eating pathology: behaviors surrounding food and eating that may be well regulated or, in the case of disordered eating pathology, unhealthy

BACKGROUND: EATING DISORDERS + RECOVERY

Around 9% of the U.S. population will experience an eating disorder in their lifetime (Harvard Study). And while eating disorders can affect people of all ages, sizes, races, and gender identities, the scope of the following exploration will primarily consider adolescent women. Many women develop lifetime DSM-5 eating disorder diagnoses during their teen years (Smink et al., 2014). Additionally, studies have shown that the prevalence of eating disorders like Anorexia Nervosa has been steadily increasing amongst young women aged 15-19 (Smink et al., 2012). Research has highlighted that **eating pathology** may often formulate during adolescence which suggests a strong need for careful consideration of this population as well as the need for early intervention and treatment (Stice et al., 2009).

In addition to these concerns, researchers and clinicians are now considering how the rise of the global pandemic COVID-19 is impacting this already devastating reality. Across the U.S. at present, treatment facilities, counselors, and clinicians are overextended, often unable to accept new clients who are experiencing eating disorders (Damour, 2021). This is particularly concerning as

researchers Dark and Carter (2019) note that eating disorders possess “the highest mortality rates in comparison to any other psychiatric illnesses” (p. 127). Additionally, **stigma surrounding eating disorders and mental illness more generally frequently inhibits desire or ability to seek help and treatment** (McNamara & Parsons, 2016, p. 667).

Traditionally, treatment addressing eating disorders has focused on medical outcomes and weight restoration for those experiencing anorexia nervosa while focusing on restructuring “normal” eating and exercise habits in those with other eating disorder diagnoses such as bulimia, orthorexia, hypergymnasia, and binge eating disorders (Guarda & Attia, 2018). However, there is no one formula for addressing healing, as many eating disorder patients experience symptoms of co-occurring illnesses such as anxiety disorders, depression or other mood disorders, PTSD or C-PTSD, or obsessive compulsive disorder (OCD). Current research supports evidence for use of **Cognitive Behavioral Therapies (CBT)** and **Family Based Therapies (FBT)** for addressing eating disorders (Thompson-Brenner et al., 2018). Treatment can occur in inpatient clinical or residential settings as well as in outpatient settings, depending upon the severity of the disorder and the symptoms of any co-occurring disorders. Yet, no matter the route of treatment, eating disorders have relatively high relapse rates. This is why many experts in the field emphasize the significance of positive identity development for those healing from eating disorders.

When individuals are experiencing an eating disorder, they have adopted an occupational identity that is, according to Dark & Carter (2019), “dominated by ritualistic and obsessive behaviors” (p. 128). This is, in essence, **an illness identity—an internal framework that subconsciously defines the individual’s**

understanding of self and elicits their subsequent behaviors. McNamara & Parsons (2016) highlight hope in the idea that if the individual is able to develop a recovery identity to replace the illness identity, potential for healing and successful recovery becomes much greater (p. 662).

Because of the role of identity in recovery, eating disorders must be understood within the cultural and personal context of each individual who is seeking healing. Recovery cannot be isolated from the larger socio-cultural context of the individual. That is why, within the context of the U.S. in particular, Dark & Carter (2019) state that, “over-emphasis on productivity, unrealistic ideological views of body-shape and confusing societal implications concerning ‘normal’ functioning, all need to be confronted, to develop self-acceptance to reconstruct occupational identity” (p. 135). The approach to eating disorder treatment should account for such context and seek to create opportunities for alternative narratives and positive support in identity re-definition. Need satisfaction is an important element of this and of healing more generally. **If the individual is able to feel autonomous yet supported as a member of a group, positive identity begins to develop** (Verschueren et al., 2017). Seeking recovery through a group setting like group therapy or inpatient treatment can be beneficial in structuring a sense of meaningful engagement and belonging. Group involvement can help individuals in their recovery by promoting a sense of shared identity oriented towards recovery when the creation of such an identity may feel too overwhelming to approach alone otherwise (McNamara & Parsons, 2016, and Dark & Carter, 2019). With this understanding as a framework, the following study focuses primarily on residential treatment centers for eating disorder recovery, examining the relevant literature surrounding the design of such spaces. **The study seeks to explore ways in which the interior environment of a**

Cognitive Behavioral Therapy (CBT): psychotherapy grounded in recognizing and replacing negative thought patterns

Family Based Therapy (FBT): family therapy sessions centered around nutrition involving the family as agents of recovery

Inside the conservatory at Lewis Ginter Botanical Gardens, Richmond, VA



residential treatment center can best support eating disorder recovery through analyzing patient needs and evaluating specific design elements and strategies that can support those needs.

CENTRAL DESIGN ISSUE

There is very little existing literature surrounding the design of psychological and psychiatric care facilities, particularly within the realm of designing spaces for eating disorder treatment. Much of the relevant literature is centralized around designing **healing environments**, therapeutic landscapes, and humanistic architecture, among other topics. Yet these topics function as helpful frameworks through which to approach understanding designing for recovery.

For those entering residential treatment for an eating disorder, the facility becomes a home for the length of stay, typically lasting anywhere from 30-60+ days. To consider the design of the residential eating disorder recovery center is significant when it is widely acknowledged that spaces can be designed intentionally to support wellness (Ulrich, 1991). Designing the healing environment is designing to support patient needs. And while eating disorder patients have varying and complicated needs, research highlights that providing space for support and autonomy are significant (Verschueren et al., 2017). Understanding how to design residential facilities for

eating disorder recovery while designing to support need satisfaction is the central exploration of the following literature review. In particular, this exploration seeks to find solutions to questions such as: What are the conditions of a successful healing environment and how do those apply to eating disorder treatment centers? How can agency and sense of ownership over one’s space be provided within smaller scale settings, temporary or transitional spaces, and within the context of recovery?

RESEARCH FINDINGS

As aforementioned, much of the research surrounding design strategies for promoting recovery revolves around healing environments. **Healing environments are, according to Sakallaris et al. (2015) “spaces [that] evoke a sense of cohesion of mind, body, and spirit, support healing intention, and foster healing relationships”** (44). In order to create such a space, it is important to understand the eventual users and situate their needs at the heart of the design process (Mazuch and Stephen, 48). A consistent theme across the literature pertains to stress and designing for stress reduction and elimination when working to create a healing environment.

Stress in the environment is widely understood to be detrimental to healing (Sakallaris, 44). And, many of the strategies utilized to combat stress in the environment are rooted in R. S. Ulrich’s (1991) seminal

work: “Effects of interior design on wellness.” **Ulrich’s theory of supportive design** centers psychological well-being in the discussion on how to design for healing and is, essentially, a theory about how to mitigate stress in the environment in order to best promote healing. Ulrich writes that spaces “promote wellness if they are designed to foster: 1. A sense of control with respect to physical-social surroundings. 2. Access to social support. 3. Access to positive distractions in physical surroundings” (99). This work, like much of the literature that follows, names nature and access to nature as one of the best ways to reduce stress and promote recovery within healing environments. And while research that follows in the years after Ulrich’s supportive design theory builds upon practical strategies for reducing stress, most designers operating within Ulrich’s framework agree with his idea that “the effects of supportive design are complementary to the healing effects of drugs and other medical technology, and foster the process of recovery” (1991, 97). If the physical space where healing is meant to take place is just as important as the medicine one needs, research in this area should continue to evolve in the way medical knowledge is continually advancing.

Much of the literature aligns on the idea that interior environments can promote patient well-being, reduce stress, and therefore support healing processes (Schweitzer, 80), but some describe specific design strategies beyond merely providing patients with access to nature. Since stress in the environment can also be detrimental to the positive effects that social support has on healing (Sakallaris et al, 44), many specific strategies for supporting healing explore avenues to promote social interaction between and amongst patients, staff, and visitors. Much of this is intricately linked to the broader, societal shift from institutionalized methods

of healthcare to current models and understandings of patient-centered care. While patient-centered care looks different across different aspects of the healthcare sector, Vaughan et al. (2019) situate their framework in the understanding that, “the patient is transitioned from being the passive subject of health services to being an active and engaged participant in their own care and wellness regime.” This framework is significant for design, particularly as technologies continue to evolve, and helps to center specific strategies for designing healthcare interiors and healing environments.

Some such strategies, or core design motivations, pertain to permeability, empathy, therapeutic landscapes, homeliness, and place-based design. **And, as healing environments are intended to promote physical well-being, concerns of patient safety, recovery, and reintegration into “normal” life must be simultaneously considered when considering spatial design** (Vaughan et al., 2019). Many of the approaches to creating a sense of homeliness are direct reactions against more standardized, clinical, often institutional norms in healthcare design of previous decades. Contemporary research supports the understanding that institutional clinical spaces neither contribute to patient healing nor to overall well-being of both patients and staff. Mazuch and Stephen (2005) write that, “visual monotony can contribute to physiological and emotional stress” (50). This is in part why “homeliness” is becoming increasingly widespread throughout dialogues and strategies for designing healing spaces. **Homeliness encompasses ideas of scale, physical and emotional comfort, as well as forms and materials that provide or curate more of a domestic experience**, even if the healthcare facility is technically large in scale and program. In particular, Vaughan et al. (2019) state that, “Curved finishes, walls, and floor patterns, a color palette that is

theory of supportive design:
R. S. Ulrich’s seminal work surrounding how to mitigate stress in the environment and promote healing

biophilic design: a design practice rooted in promoting connection between people and nature through direct and indirect methods

deemed to be uplifting, a furniture selection that references the domestic environment rather than an institution, all contribute to a sense of homeliness which is sought after.” Ideas of what is “uplifting” tend to be tied directly to the understanding of nature’s effects on minimizing stress. **Providing and integrating natural light, views, and access to nature remain consistent throughout the literature** (Vaughan et al., 2019). Materials and furniture have a role to play in creating this sense of homeliness. Yet, they can also be intentionally utilized to promote social interaction and connectedness (Schweitzer et al., 2004), one of the important elements of healing environments initially established in Ulrich’s (1991) work.

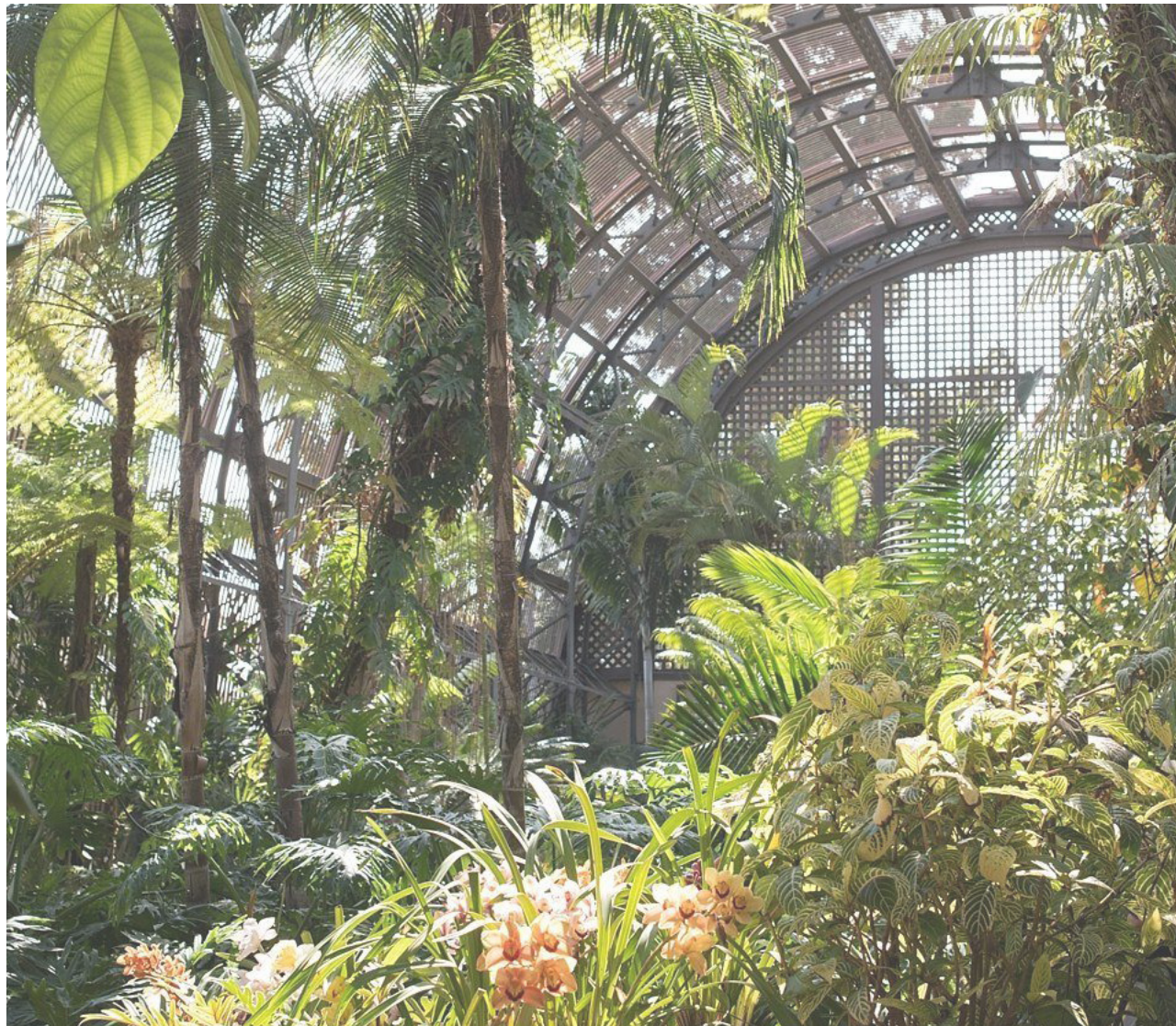
Another related design strategy important for healing environments has to do with designing holistically for the senses. This is what Mazuch and Stephen (2005) denote as “sense sensitive design.” Though designing with all of the senses in mind is significant for overall well-being, Mazuch and Stephen (2005) describe how, “touch,” in particular, “plays an important part in the recovery of a patient with mental health problems, helping them re-engage with the materiality of the world surrounding [them]” (50). **Careful selection of materials with variability of textures across surfaces can add a great deal to the healing environment, particularly when comfort is considered.** One specific example laid out in the work of Schweitzer et al. (2004) showcases how “family and friends made longer visits to rehabilitation patients in carpeted patient rooms, as opposed to patient rooms with hard surface flooring” (73). This suggests that all end users, including staff and visitors, benefit from thoughtful material choices, consideration of the full range of human senses, and a promotion of homeliness in the environment. And, as patient recovery is often aided by the support of staff, family, and friends, creating spaces where such

support can occur is highly significant.

Of course, the most widely adopted, understood, and promoted strategy for designing healing environments is one already mentioned several times throughout this review—designing with intentional exposure to, or inclusion of, nature and natural elements. Broadly understood as a means of mitigating stress in the environment, this strategy is known as **biophilic design**. There is a host of supporting research showcasing how attention to nature through design supports psychological well-being. Within designing for the healing environment in particular, Vaughan et al. (2019), describe several specific strategies related to biophilic design. These include careful consideration of color, often selecting colors deemed culturally to be more soothing rather than aggressive or stimulating, as well as incorporating natural elements like views or plants in the interior when possible. Creating a strong sense of connection to place and locality is significant for mental ease and can be curated through the incorporation of biophilic design when plants or views facilitate connection to the surrounding geographical environment. Incorporating pattern and scent when possible through natural elements can be an additional related strategy (Vaughan et al., 2019). Overall, biophilic design can become one way to help healing environments function as spaces of transition, providing connection to the surrounding world and local environment.

Ultimately, it is important that the patient is able to transition from the healing environment back to “normal” life. **Each of these strategies work to help curate an environment where proper and adequate support can occur so that in due time, patients can reintegrate into their communities.**

APPLICATIONS FOR THE RESIDENTIAL



Inside the botanical gardens at Balboa Park, San Diego, CA

TREATMENT CENTER

When considering how to approach designing a residential treatment center for eating disorder recovery, two related questions help drive the synthesis of the research exploration to this point. These questions are: What is needed for patient recovery from an eating disorder? And, how can the design of the interior environment accommodate for these needs? This thesis project seeks to explore answers to these questions within the scope of designing a residential treatment center for adolescent and teen women aged 14-19 who are primarily experiencing restrictive forms of eating disorders.

As previously noted, **there is no one size fits all solution for eating disorder recovery just as there is no one perfect set of design strategies for creating healing environments.** Because of the individualized nature of each patient's history of eating disorder, the severity of their symptoms, and any cooccurring disorders, individual treatment plans and support are essential. This is an important consideration when determining how many patients a residential center can accommodate. While the square footage constraints of the building may determine how many people can be served, it is critical to consider staffing needs, ensuring that each patient will have access to adequate support.

Psychotherapy, both group and individual, is an important aspect of eating disorder treatment that requires spatial and design considerations within the residential treatment setting. Therapy is where much of the critical work surrounding overcoming illness identities and processing traumas occurs. As aforementioned, group therapy is a proven, effective element of eating disorder recovery (McNamara & Parsons, 2016), one that can occur very naturally

within a residential setting where patients spend much of their time together. Additionally, family based therapy, in which the patients and their family process together with the aid of a therapist, is a widely recognized, empirically grounded method for treating eating disorders (Guarda, 2018). And although this is a strategy primarily utilized in outpatient settings, it poses an interesting question as it relates to a residential treatment setting. The residential center is to house patients with the intent of helping them transition back into "normal" life. When the life patients had before the onset of the eating disorder involved family, as is the case with most young women, it can be significant to involve family in the transition back to life outside of treatment. To navigate how much family interaction and accommodation will occur within the treatment center is an important consideration.

Other program activities to consider revolve around alternative forms of therapy such as art, music, and movement therapies. These types of therapies are proven effective means of bettering mental health (Bucharova et al., 2020) and are frequently incorporated into daily activities for patients undergoing residential treatment. Horticultural therapy is another alternative therapy proven to have positive affect on mental health (Cipriani et al., 2017). With the myriad of research surrounding the importance of incorporating nature into design solutions as a way to mitigate stress in the environment, horticultural therapy represents an added layer of benefit to patients. To include a patient therapy garden within a residential treatment program is, while not heavily explored in the research literature, a natural way to tie existing research together for the benefit of patients and the creation of a healing environment.

Eating disorder patients, as with any

patient population, have delicate needs that in turn require special environmental considerations. It may be particularly critical to note that those experiencing an eating disorder, especially a restrictive form of eating disorder, are, according to researchers Brewerton and Dennis (2016), “particularly sensitive to stress and adversity” as they “have significantly higher rates of traumatic experiences and subsequent PTSD or partial PTSD” (39). When designing spaces for such populations, research on healing environments and implementing strategies to mitigate stress in the environment are significant.

In addition to stress, individuals with eating disorders frequently struggle with issues of perfectionism, with executive functioning, and with cognitive rigidity more broadly. This is described by Brewerton and Dennis (2016) as the “inability to see the forest for the trees” and the “inability to shift effortlessly from task to task or to a new life routine, i.e., difficulty adapting to change” (34). This raises very critical questions about residential treatment more generally. **The benefit to residential treatment is that it allows patients to leave the rigidity of the current routines of their everyday lives in order to build new routines centered around healing.** Yet, the potential for increased stress and increased distrust becomes greater upon entering treatment. The experience of doing anything for the first time is one everyone can understand the discomfort of. Yet, for patients who are already struggling with matters of control, perfectionism, and a degree of cognitive rigidity, this discomfort becomes increasingly more difficult. As such, the design of the treatment center can play a role in mitigating negative affect by helping to provide a sense of safety for patients. This is an idea heavily stressed in conversation with therapist Gwen Seiler, RN. Gwen was the former director of a residential treatment center for eating

disorder patients and described how critical the role of trust is for successful treatment outcomes. **Trust between patients and staff and across patient to patient is a highly integral aspect of successful therapy and successful recovery.** For Gwen, ensuring that patients felt safe in the environment of the treatment center was crucial (G. Seiler, personal communication, November 4, 2021). Design has an important role to play in this regard.

Designing in opportunities for patient personalization and choice can be a beneficial strategy for promoting a sense of autonomy that benefits patients and encourages ownership of their healing process. As discussed previously, positive identity formation is a critical component of eating disorder recovery. Verschueren et al. (2017) state that, for the eating disorder patient, “feeling autonomous, competent and part of a larger social network may promote agents’ identity formation” (33). This is a primary need that must be satisfied through the program and design of a residential center. According to Verschueren (2017), this revolves heavily around access to support (32). Once again, support extends beyond staff support of patients to patient support of each other and design has a role to play. If the space promotes a sense of safety and mitigates stress and negative affect, patients have increased access to the support of staff and each other. If the design allows patients a sense of autonomy and control over their environment, this can help to satisfy central needs. And, as Verschueren states, “need satisfaction stimulates the ability to proactively explore choice alternatives and make important life decisions” (33). **When patient needs are met, healing can begin.**

*When patient needs are met,
healing can begin.*

PROGRAM CONSIDERATIONS AND DEVELOPMENT

Gross Area: 16,070 SF
 Program Net Area: 9,642 SF

OCCUPANCY CLASSIFICATION

R-4

MAXIMUM OCCUPANCY

80

<p>WELCOME LOBBY</p>	<p>Space to enter the building, be greeted by staff, prepare for intake.</p> <p>Spatial Considerations: 500 SF</p>	<p>PRIVATE THERAPY</p>	<p>Two offices for clinical staff, psychologist and dietician or RN, MD staff. Space for therapy and private communication with patients.</p> <p>Spatial Considerations: 250 SF</p>	<p>GROUP SPACE</p>	<p>Space for entire group to engage with each other, reflect, participate in group therapy and activities.</p> <p>Spatial Considerations: 1000 SF</p>
<p>LIBRARY</p>	<p>Space with shelving for books and other storage. Furniture to support reading and reflection.</p> <p>Spatial Considerations: 450 SF</p>	<p>KITCHEN + DINING</p>	<p>Space to prepare and consume meals. Ample counter space and storage for food and prep. Space to share meals together as a group.</p> <p>Spatial Considerations: 600 SF</p>	<p>BEDROOMS</p>	<p>Bedrooms to be shared between 2 patients. Five bedrooms to accommodate up to 10 patients. Needs storage for personal belongings.</p> <p>Spatial Considerations: 180 SF</p>
<p>PRIVATE OFFICE</p>	<p>Private office space for head of staff, director.</p> <p>Spatial Considerations: 200 SF</p>	<p>MOVEMENT STUDIO</p>	<p>Space for yoga, mindfulness, gentle movement to participate in therapeutic aspects of mind-body connection. Needs ample room for group participation and some storage.</p> <p>Spatial Considerations: 850 SF</p>	<p>REST ROOMS</p>	<p>According to code, at least 2 water closets, 2 lavatories, and 2-3 showers are required in the building. Overall, at least 5 accessible restrooms, 3 with showers, will be designed into the project.</p> <p>Spatial Considerations: 80 SF EACH</p>
<p>ADMIN SUITE</p>	<p>Space for 2-3 staff to work comfortably, store files, print and prepare paperwork.</p> <p>Spatial Considerations: 500 SF</p>				

SITE SELECTION

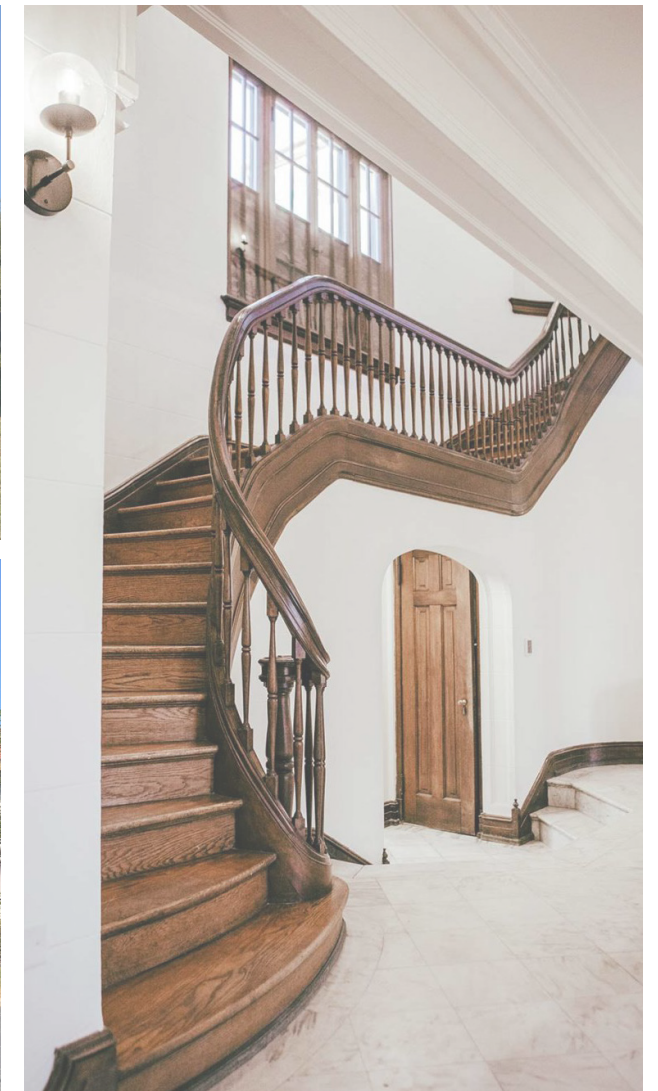
1000 Westover Rd
Richmond, VA 23220



Site map showcasing selected building's immediate surroundings and sun path



Above Top: facade of original 1918 home
Above: an addition built onto back of home adds square footage and the primary entrance into the office spaces used today



Above: staircase original to 1918 home



VICINITY MAP

- SITE
- ADJACENT GREEN SPACE
- RESIDENTIAL NEIGHBORHOOD
- WATER



SITE INFORMATION

Byrd Park

The site was selected due to the location in the quiet Byrd Park neighborhood. Research surrounding healing environments showcased the importance of access to nature and green space.

HISTORICAL OVERVIEW

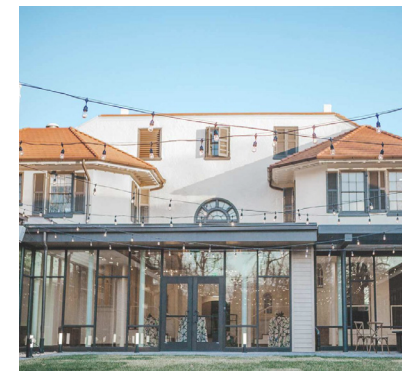
The Byrd Park neighborhood has a lengthy history tied to the Dooley Family and Maymont, as well as Richmond infrastructure more broadly. The area was initially developed by city engineer Wilfred Cutshaw in the late 1800's to provide Richmond with increased access to clean water. It was known as New Reservoir Park and contained a pump house that brought water from the James River to the new reservoir. By 1907, the park was officially known as Byrd Park, named for Richmond's founder William Byrd II. Over time, additional lakes and land were added to the park, evolving it into the Byrd Park of today.

BUILDING INFORMATION

1000 Westover Rd
Richmond, VA 23220

BUILDING HISTORY

The original 6,000 SF home was built in 1918. This Mediterranean Revival style house has a long history which encompasses periods of mixed use, office use, and use as a single family home. More recently, the Maymont Foundation purchased the building in order to use it for office and event space. A new addition completed in 2020 by Richmond based firm Quinn Evans added an additional 10,000 SF to the building. This addition incorporates elements of the Mediterranean Revival style language of the original house with a juxtaposing of modern, industrial elements and features. It expands behind the original house, creating a courtyard for outdoor event space.



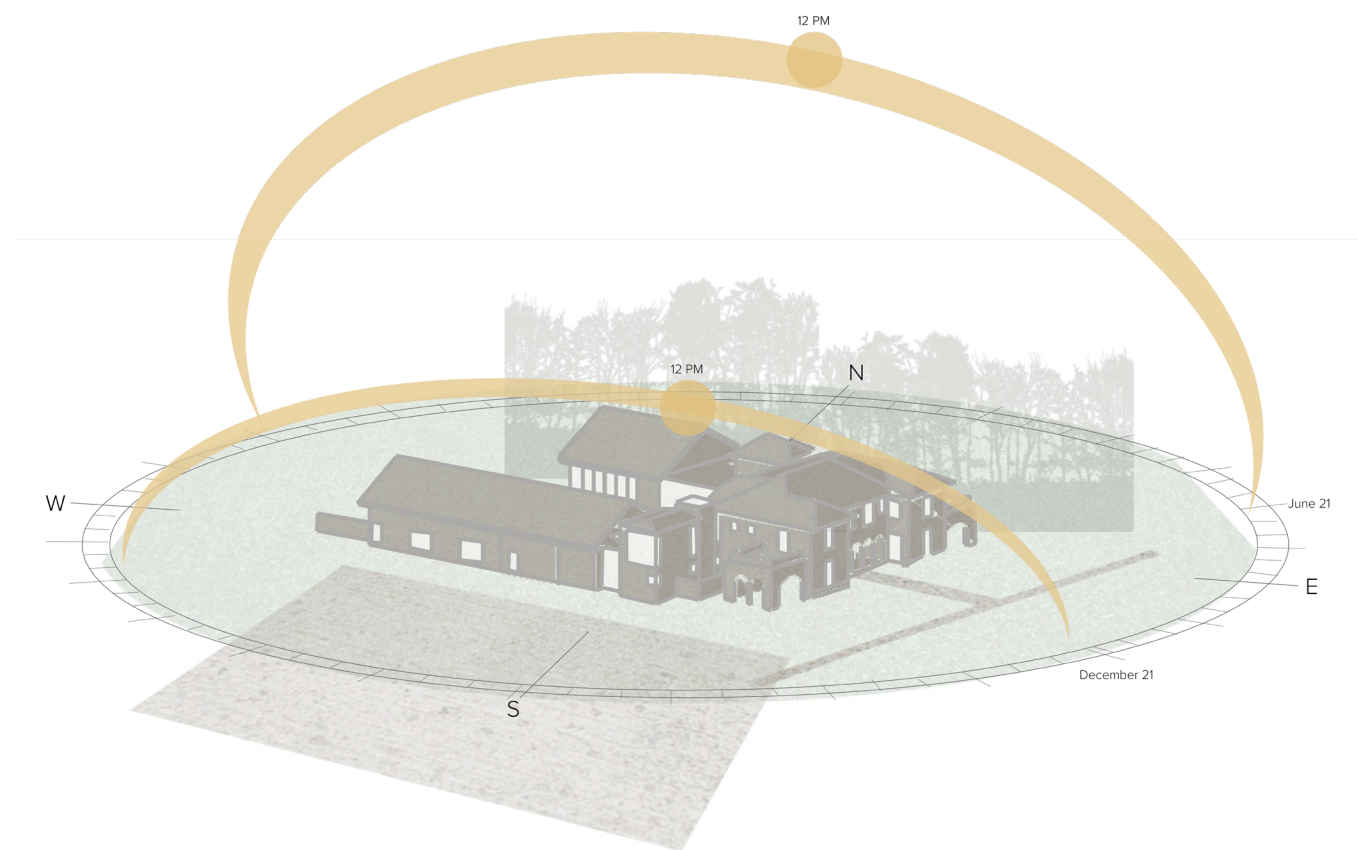
Photographs of the existing building showcase the exterior and interior.



PRE DESIGN

SITE STUDY

Understanding the Existing Building

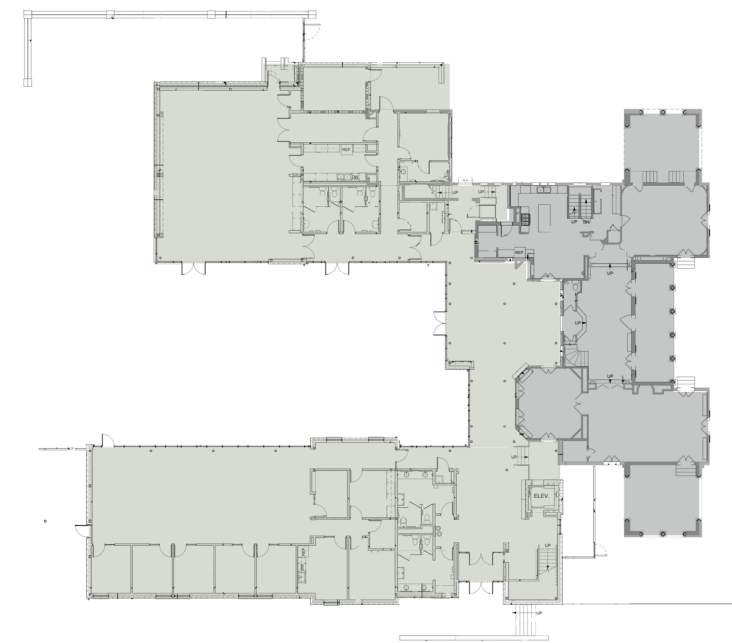
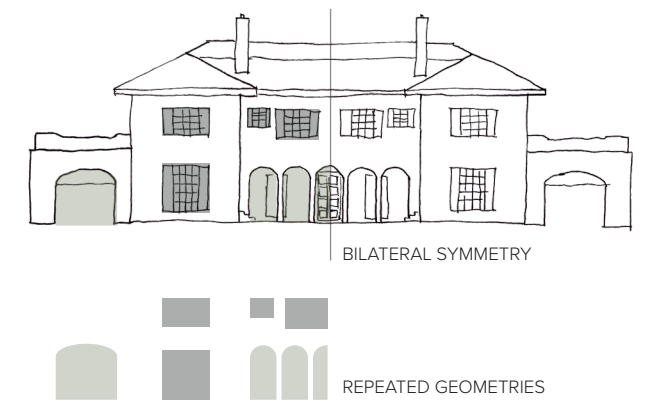


SUN PATH DIAGRAM

Site studies trace the path of the sun at both the Summer and Winter Solstices. The building has great access to natural light as it remains unobstructed by other buildings. It also features many large windows and curtain walls that allow natural light into the interior.

RIGHT: FACADE STUDY

Mediterranean Revival style architecture was popular in the early 1900s alongside a more general fascination with wealth, leisure, and vacation lifestyles. This style is intended to promote connection to nature via porches, balconies, and large windows and doors.



EXISTING BUILDING PLAN
NOT TO SCALE

- ORIGINAL HOME
- NEW ADDITION

LEFT: EXISTING BUILDING CONDITIONS

The building presented some unique circumstances due to the nature of its history. Understanding how the new addition interacts with the existing building was an important aspect of pre-design work.



PROGRAMMATIC PRECEDENT
The Meadows Ranch, AZ

PROGRAMMATIC APPROACH

The Meadows Ranch, located near Phoenix, AZ, offers tailored care to those seeking eating disorder recovery through both inpatient, residential and outpatient treatment. Their holistic mind-body approach presented a useful lens through which to explore program development for this project.

The Meadows Ranch offers both research grounded therapies and experiential, activity based therapies like equine therapy, music and movement, and expressive arts. Nutrition education and hands-on meal preparation is an additional key element to the approach offered at the Meadows Ranch.

KEY HIGHLIGHTS + TAKEAWAYS

Exploring this precedent allowed for increased understanding of what a typical day in treatment may look like and helped further develop the program to design for. Exploring photographs of the center offered further understanding of how program spaces are organized. There is clear functionality prioritized in the way each room is presented. Some key takeaways for design decisions include the case for shared bedrooms, the need for comfortable furnishings, and the need for ample kitchen prep space and equipment.

Photographs of some of the group spaces, kitchen, and shared bedrooms offer insight into the ways spaces are utilized to meet programmatic needs.

DESIGN ETHOS PRECEDENT

The Anna Freud Centre, London

DESIGN APPROACH: “DEINSTITUTIONALIZING THE INSTITUTION”

Architects Penoyre & Prasad worked closely with interior design firm Studio Ilse in order to complete the Kantor Centre of Excellence for the Anna Freud Centre in London in 2019. The Centre is a space for child mental health treatment, research, and training. It is also home to the Pears Family School, which services children aged 4 to 15 who are experiencing behavioral issues due to mental health concerns. As such, the space was designed carefully with these sensitive populations and needs in mind.

A strong sense of how space affects the psychological experience of end users was maintained throughout the design process and is responsible for the final material selections, color palettes, layout, and lighting strategies. Studio Ilse has been vocal about their primary design goal of “deinstitutionalizing the institution” and how they prioritized a sense of invitation, safety, and well-being through the design decisions. The project had a tight budget, yet Studio Ilse prioritized using materials that create a sense of warmth and health, such as natural woods, corks, and non-toxic carpets. The overall intent of bringing warmth to an otherwise impersonal place is evident through the use of furniture and built in elements, all that maintain an appropriate scale for the younger users of the spaces.



LIGHTING STRATEGIES CONTRIBUTE TO AN AMBIANCE THAT ALLOWS THE SPACE TO FEEL WARM AND INVITING



OPPORTUNITIES FOR PATIENT PERSONALIZATION OF THE SPACE

MATERIAL CHOICES REFLECT CONSISTENT, NATURAL, CLEAN PALETTE

SCALE CONSIDERS CHILD USERS AND CONNECTS WITH A SENSE OF DOMESTICITY

STUDIO ILSE

CONCEPT DEVELOPMENT

Conceptual Drivers

Ultimately, the design should uphold the following as they relate to the building, program, users, and designer:

BUILDING

- PRIORITY OF NATURAL LIGHT
- PRIORITY OF THOUGHTFUL CIRCULATION
- PROMOTE WELLBEING HOLISTICALLY THROUGH DESIGN AND MATERIALS
- PROVIDE SENSE OF SAFETY AND COMFORT
- THOUGHTFUL APPROACH TO OLD VS. NEW

PROGRAM

- NEEDS TO SUPPORT HEALING
- NEEDS TO SUPPORT USER AGENCY
- NEEDS THOUGHTFUL APPROACH TO PUBLIC VS. PRIVATE
- REQUIRES CARE AND UNDERSTANDING
- NEEDS TO ACCOMODATE MOMENTS OF EXPLORATION

USERS

- NEED TO FEEL CARED FOR IN AND BY THE ENVIRONMENT
- NEED TO CONNECT WITH NATURE
- NEED TO CONNECT WITH THEMSELVES
- NEED TO CONNECT WITH EACH OTHER
- PATIENT USERS NEED TO FEEL SAFE TO LEAN INTO HEALING

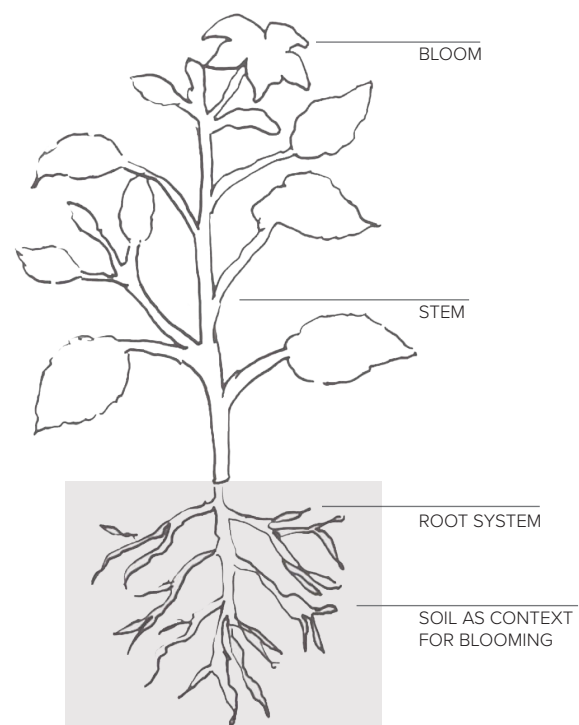
DESIGNER

- NEEDS TO MAINTAIN INTENTIONALITY
- NEEDS TO MAINTAIN FOCUS OF OVERALL BIGGER PICTURE
- NEEDS TO STAY CONNECTED TO THE WHY
- NEEDS TO REFLECT ON THE ENVIRONMENT BEING CREATED
- NEEDS TO HAVE MOMENTS OF JOY ALONG THE PROCESS

CONCEPT DEVELOPMENT

Flourish

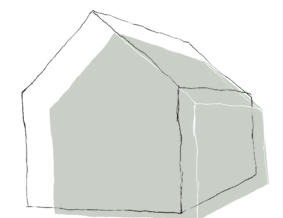
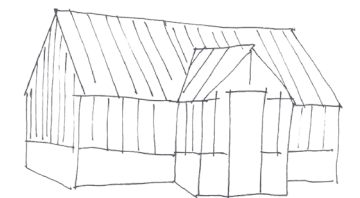
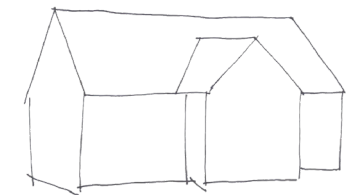
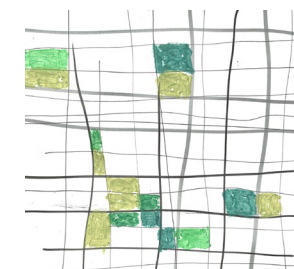
The delicate balance of healing from an eating disorder necessitates care, growth, and nourishment.



FLOURISH as a concept is rooted in the idea of a greenhouse - a place for plants to thrive, an incubator for nourishment in the most organic of ways. **Light-filled spaces, access to nature, and comfortable materials** inspired by the site and supported by research, are all central components of the design.

Overall layout and circulation are intended to promote community building and to prioritize access to staff support. **The building itself necessitates a delicate balance between old and new, a starting point and a place of growth.** The design seeks to explore ways to cultivate that balance while simultaneously exploring openness and privacy, vibrancy and groundedness, and how our environments can support healing.

The greenhouse concept idea evolved out of explorations of the building and existing conditions, research into healing environments and biophilic design, as well as through examining look and feel imagery. Greenhouses protect delicate plants from conditions that the plants are not yet ready to withstand by creating an ideal environment for flourishing.

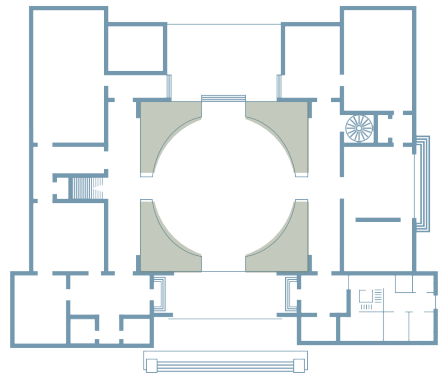


Early concept studies explore simple forms, overlaps, balance.



CONCEPTUAL + BUILDING PRECEDENT

Vizcaya, Miami, FL



EXPLORING CONCEPT + BUILDING HISTORY THROUGH PRECEDENT

Vizcaya, a historic mansion and modern day museum, was built in the early 1900's around the time of the selected thesis site. Built in the Mediterranean Revival architectural style, the front facade is symmetrical like that of the selected site. At the center of the building is a courtyard which has since been enclosed into a greenhouse space. Examining the relationship between the home, the courtyard, and the surrounding gardens and landscape suggests strong ties between the indoors and outdoors. Finding that balance for the thesis site was significant.

CONCEPTUAL + DESIGN PRECEDENT

The Hoxton, Paris



STUDYING SCALE, FURNITURE GROUPINGS, INDOOR OUTDOOR SPACES

The Hoxton Hotel in Paris offered a lens through which to examine design choices that organically promote comfort, warmth, and elegance. Built in a carefully preserved 18th century residence, the public spaces integrate natural light and materials that connect the inside to the surrounding streets. Furniture groupings create smaller moments within the larger spaces and bring textural depth. Lighting strategies bring warm light directly to the user level via wall sconces and dropped pendants.



SCHEMATIC DESIGN

ADJACENCY STUDIES

Initial Adjacency Matrix

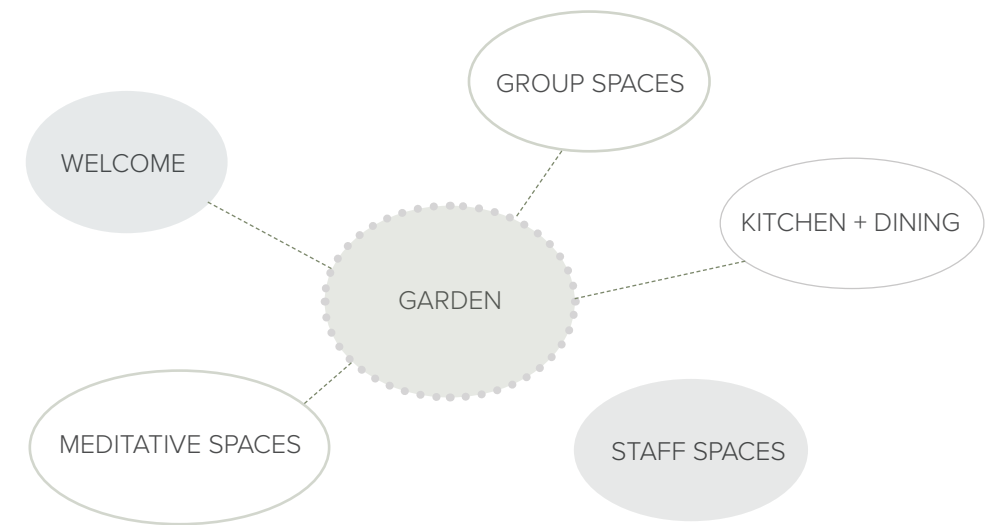
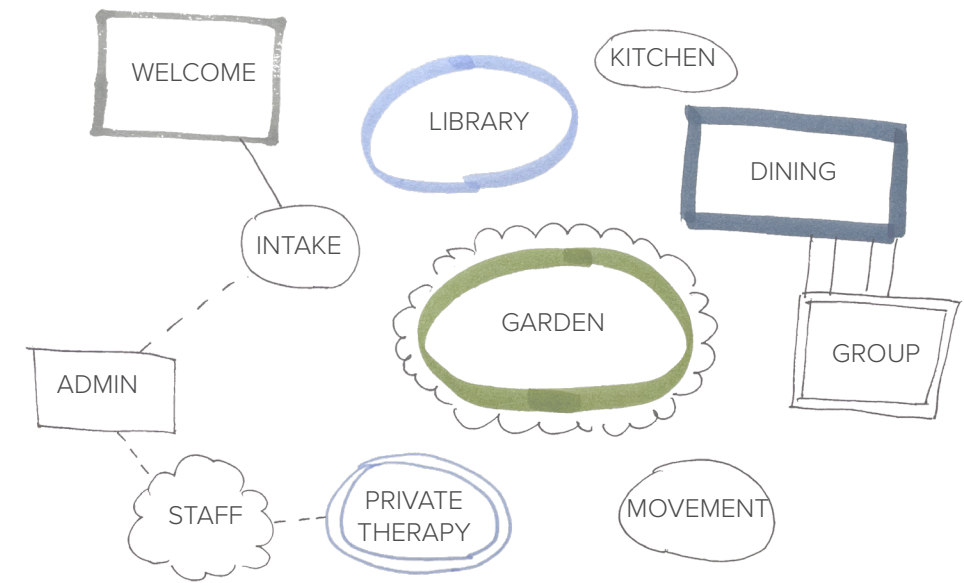
	AREA SF	QUANTITY	DAYLIGHTING	PRIVACY	PLUMBING	SPECIAL EQUIPMENT	FF+E SPECIFICS
WELCOME LOBBY	500	1	Y	L	N	Y	LOBBY FIT OUT, DOOR LOCKS
SMALL MEETING	300	1	Y	H	N	N	TABLE + CHAIRS, SHELVING
PRIVATE COUNSELING	250	2	Y	H	N	N	LOUNGE FURNITURE, SHELVING
GROUP ACTIVITY	1000	1	Y	M	Y	Y	TABLES + CHAIRS, STORAGE, INTEGRATED TECH
MOVEMENT STUDIO	850	1	Y	M	N	Y	EXERCISE MATS, STORAGE, AUDIO TECH
LIBRARY	450	1	Y	M	N	N	SHELVING, SEATING
GARDEN	NA	1	Y	H	Y	Y	GARDEN BOXES, OUTDOOR LIGHTING, STORAGE
BEDROOMS	180	10	Y	H	N	N	BEDS, STORAGE, SEATING
DINING	800	1	Y	M	N	N	TABLES + CHAIRS
KITCHEN	300	1	N	M	Y	Y	FULL KITCHEN FIT OUT
TRAINING KITCHEN	300	1	N	M	Y	Y	FULL KITCHEN FIT OUT
STAFF OFFICES	120	4	Y	H	N	Y	DESKS, CHAIRS, STORAGE
ADMIN SUITE	500	1	Y	H	Y	Y	DESKS, CHAIRS, STORAGE, COPY, LOUNGE
RESTROOMS	75	5	N	H	Y	Y	PLUMBING
HOUSEKEEPING	50	2	N	L	Y	Y	MOP SINK, STORAGE, LAUNDRY
STORAGE	50	5	N	L	N	N	SHELVING

ADJACENCY MATRIX KEY

	IMPORTANT
	CONVENIENT
	NOT IMPORTANT
Y	YES
N	NO
H	HIGH
M	MEDIUM
L	LOW

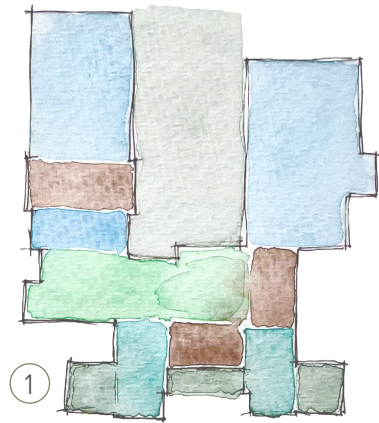
ADJACENCY STUDIES

Adjacency Diagrams

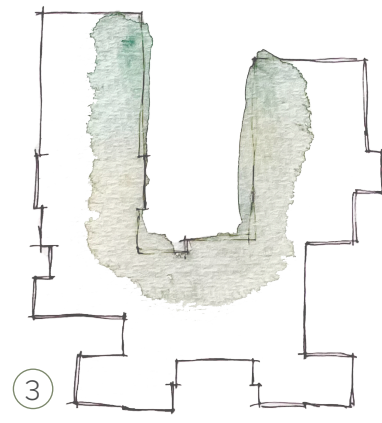


PARTI DIAGRAMS

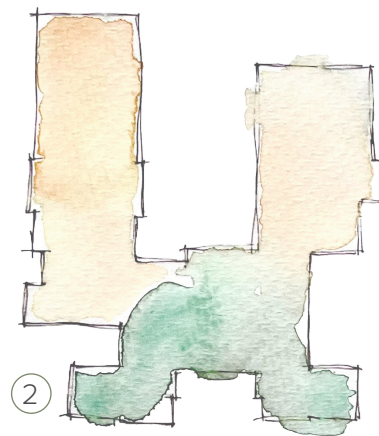
Plan + Concept Diagrams



①



③



②



④

PLAN PARTI DIAGRAMS EXPLORING:

- 1. building condition zones
- 2. original building and new building

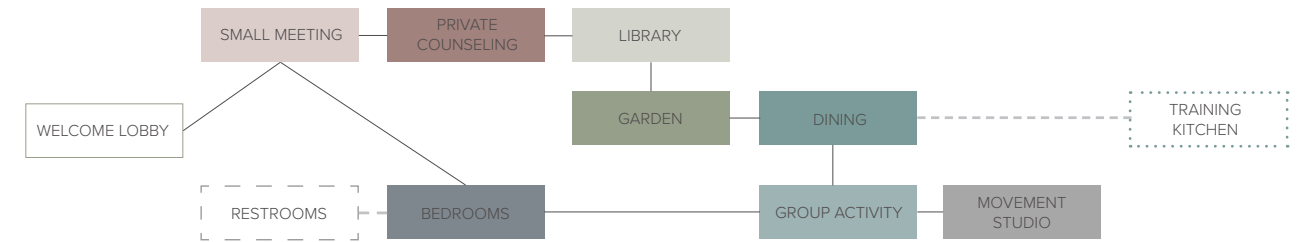
CONCEPTUAL PARTI DIAGRAMS EXPLORING:

- 3. courtyard circulation
- 4. entire building as garden

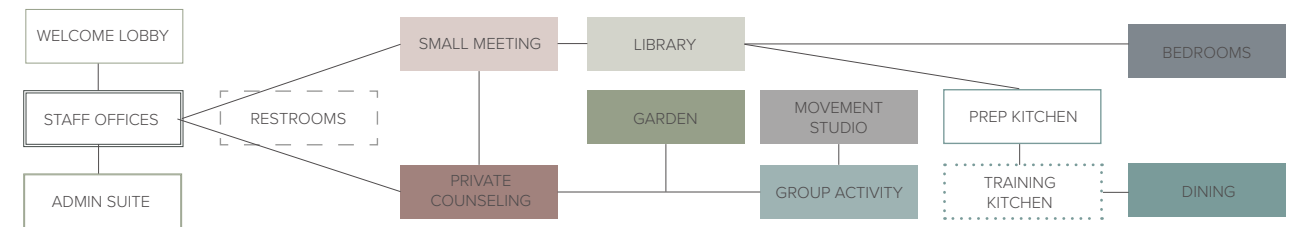
DIAGRAMS

Circulation Path Explorations

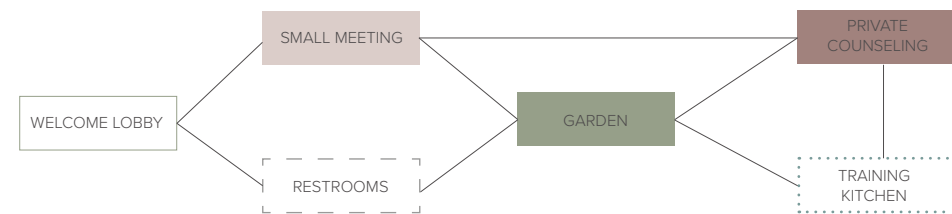
PATIENT CIRCULATION



STAFF CIRCULATION

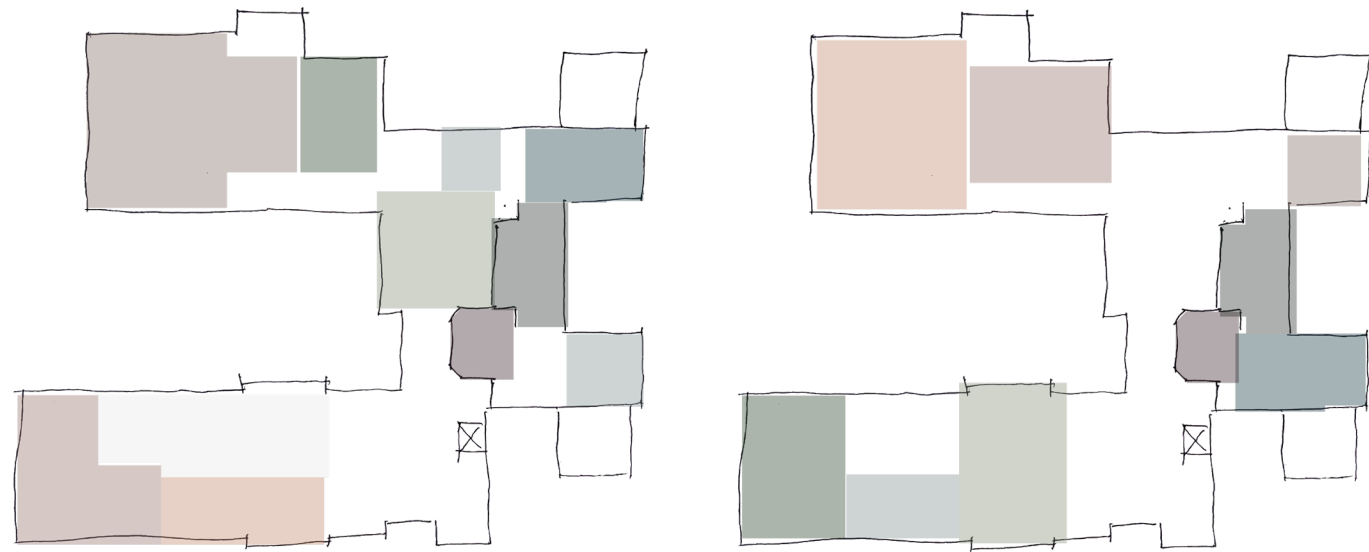


VISITOR CIRCULATION (patient family/guardian)



SPACE PLANNING STUDIES

Block Plans



SPACE PLANNING

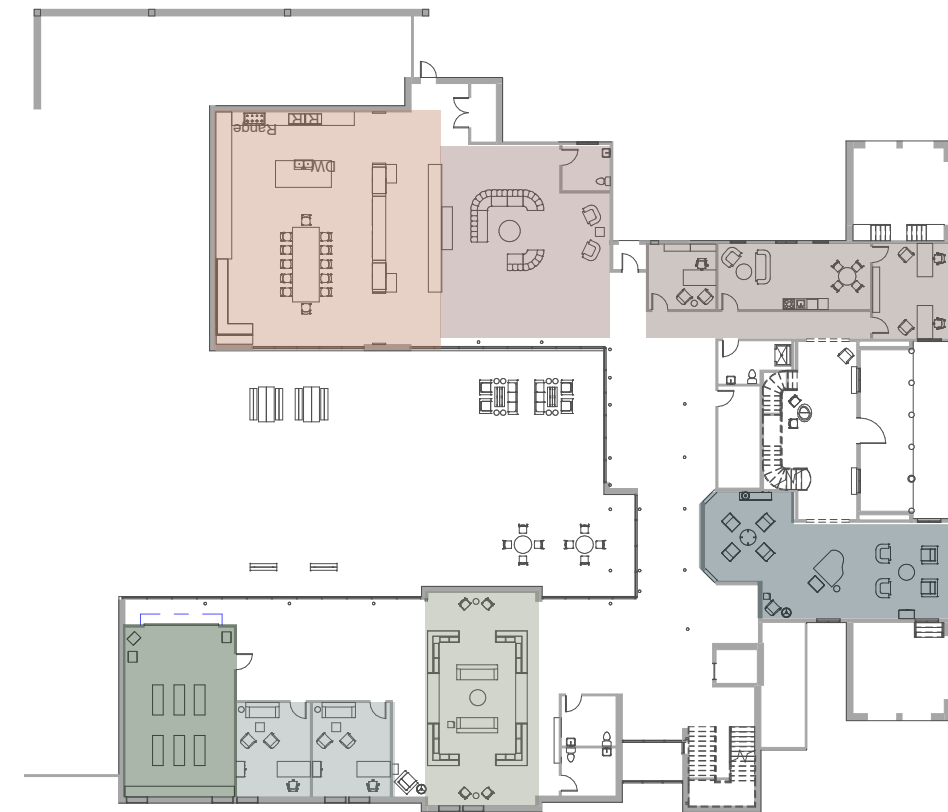
[Dark Grey]	PRIMARY PATIENT/VISITOR ENTRY
[Light Green]	LIBRARY
[Dark Blue-Gray]	VISITOR LOUNGE
[Dark Brown]	SMALL MEETING/INTAKE
[Light Blue-Gray]	PRIVATE THERAPY
[Orange]	KITCHEN/DINING
[Light Grey]	GROUP ZONE
[Brown]	GROUP THERAPY/MULTI SPACE
[Dark Green]	MOVEMENT STUDIO
[Medium Brown]	STAFF CORE
[Teal]	BEDROOMS
[Light Teal]	OVERNIGHT STAFF LOUNGE

Above: Level one studies
Right: Level two residences



SPACE PLANNING

Plan Development + Progression

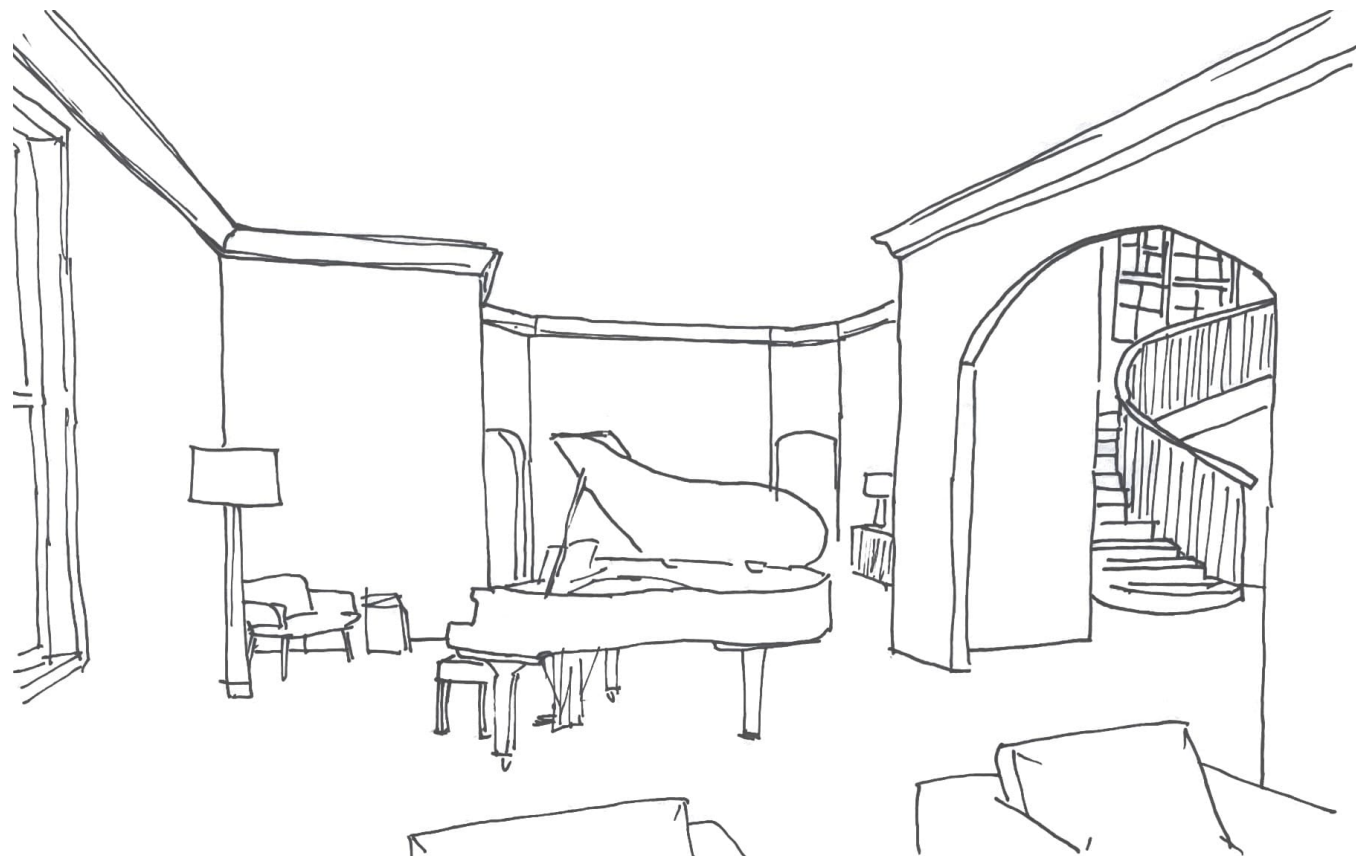


LEVEL ONE PLAN DEVELOPMENT
NOT TO SCALE

The plan began to take shape with continued refinement of the program, exploration of the existing building, and conceptual studies. Shown above: an early plan building upon block plan studies. Placeholder furnishings help with understanding scale as walls are added and details begin to develop. The final plan showcased in this project builds off of this iteration in response to feedback and continued progress.

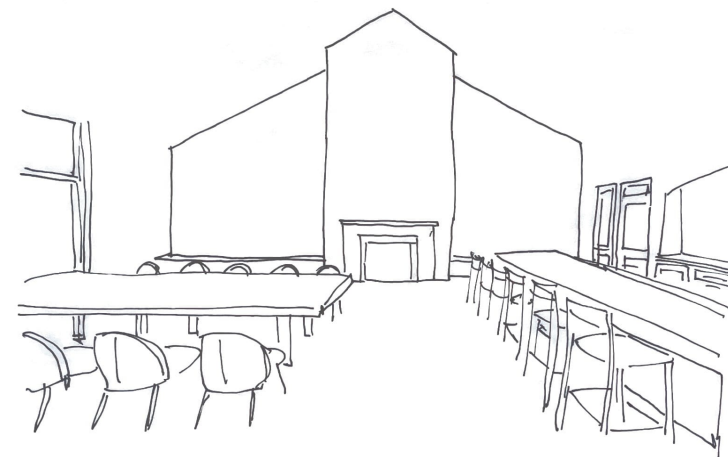
SCHEMATIC DEVELOPMENT

Space + Program Development



VISITOR LOUNGE DEVELOPMENT

Program areas begin to take shape with placeholder furniture and minimal detailing.



KITCHEN + DINING DEVELOPMENT



MATERIAL PALETTE DEVELOPMENT

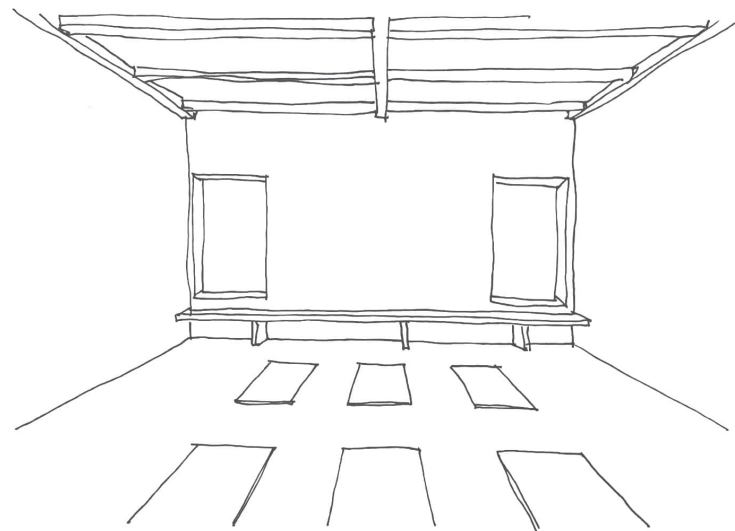
Initial material explorations revolve around the kitchen + dining spaces. After material research, soapstone centered the palette for the space. A natural material native to Virginia, soapstone presents a natural countertop option and brings balance to the softness of the rest of the nature-inspired materials.



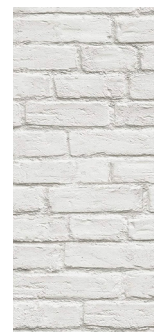
LIVING ROOM DEVELOPMENT

SCHEMATIC DEVELOPMENT

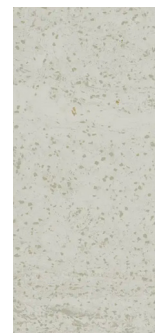
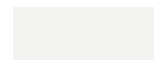
Space + Program Development



MOVEMENT STUDIO DEVELOPMENT



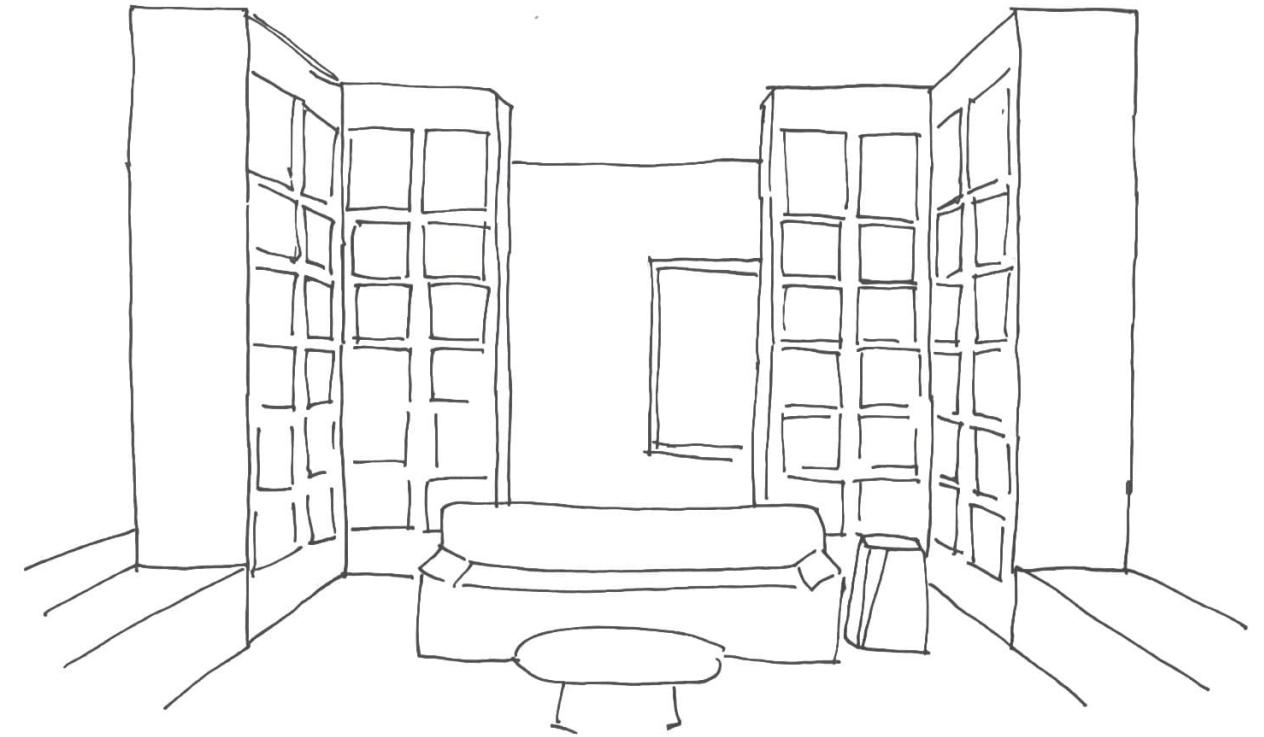
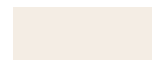
BRICK



RUBBER



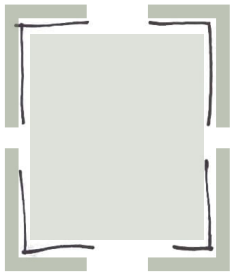
WOOD



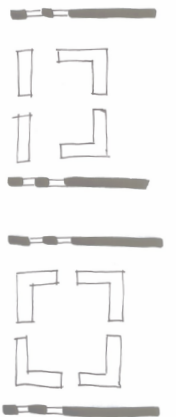
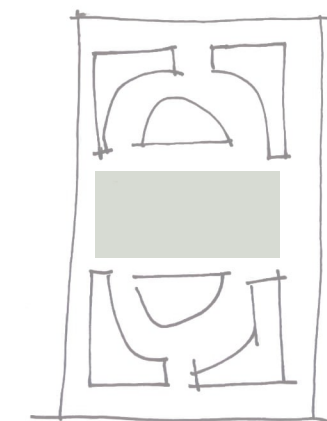
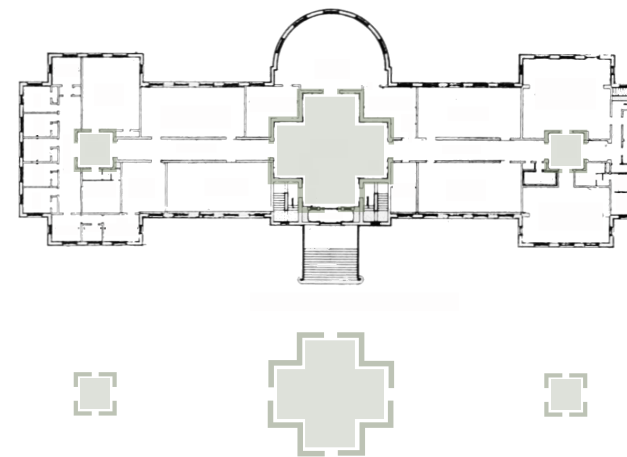
LIBRARY DEVELOPMENT

A SPACE WITHIN A SPACE

The library design evolved as a reaction to the existing building conditions and was informed by conceptual precedents. Concept explorations included research into botanical gardens as a large scale manifestation of the green house. Diagrams showcase studies of frequently occurring forms and unique moments of symmetry that connected organically to the rest of the project development.



BROOKLYN BOTANIC GARDEN PLAN STUDY



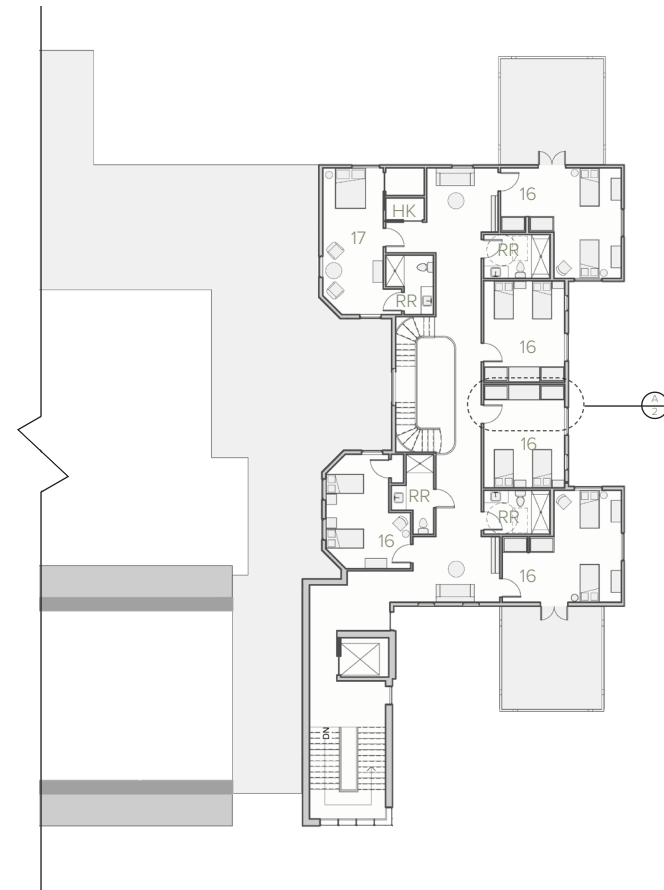


DESIGN DEVELOPMENT

FLOOR PLANS



LEVEL ONE PLAN
NOT TO SCALE



LEVEL TWO PLAN
NOT TO SCALE

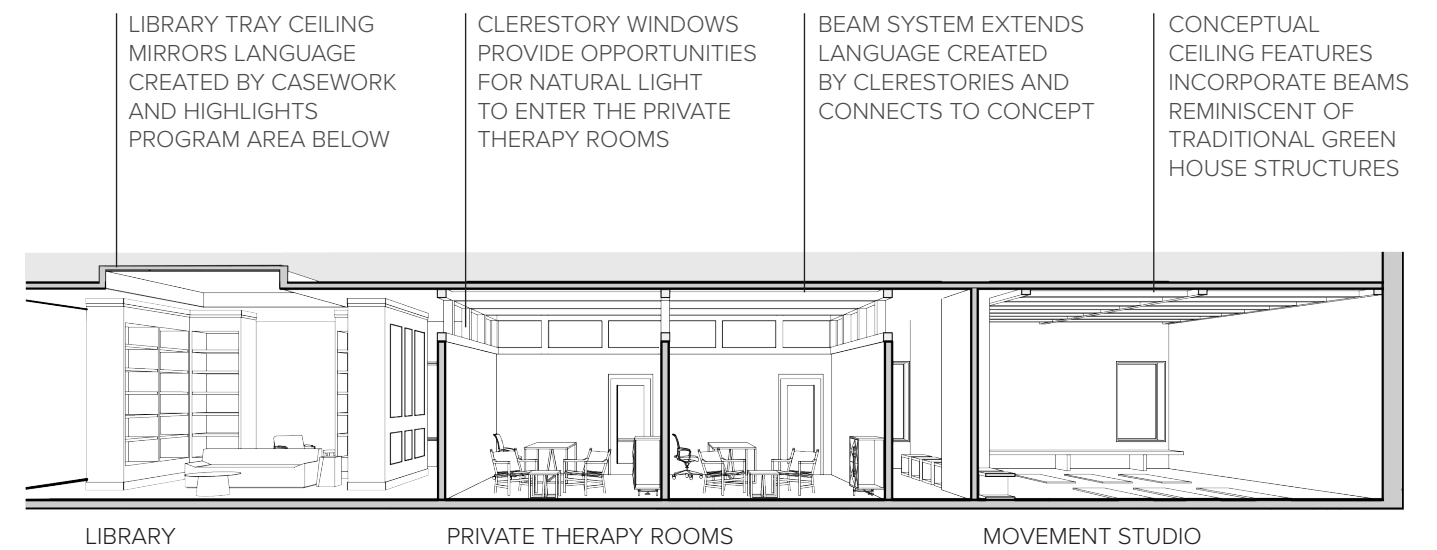
- PLAN KEY
- 1 WELCOME
 - 2 VISITOR LOUNGE
 - 3 VISITOR PORCH
 - 4 CONSERVATORY
 - 5 LIBRARY
 - 6 PRIVATE THERAPY
 - 7 MOVEMENT STUDIO
 - 8 GARDEN
 - 9 KITCHEN + DINING
 - 10 PANTRY
 - 11 LIVING ROOM
 - 12 PRIVATE OFFICE
 - 13 ADMIN SUITE
 - 14 STAFF LOUNGE
 - 15 STAFF PORCH
 - 16 BEDROOM
 - 17 STAFF OVERNIGHT
 - MECH MECHANICAL
 - HK HOUSEKEEPING
 - RR RESTROOM
 - ⊙ ELEVATION MARKER
 - ┌ SECTION CUT



A-1 SECTION: RELATIONSHIP BETWEEN PROGRAM AREA WINGS
NOT TO SCALE

SECTION PERSPECTIVE Meditative Spaces

CEILING DETAILS



LIBRARY

The library space borders the private therapy rooms and serves as a quiet pause before entry into the meditative zone of the building. The library is a space within a space comprised of custom shelving units designed in conversation with the building conditions in this area of the floor plan.

PRIVATE THERAPY ROOMS

Private therapy is a critical element of treatment. Prioritizing privacy and quiet for these spaces was an important concern. Entry away from the primary circulation path offers one solution to matters of privacy. Additionally, clerestory windows protect sightlines while offering natural light. These spaces function as offices for counselors and living rooms for patients in therapy.

MOVEMENT STUDIO

Programmatic precedents incorporate movement into eating disorder recovery as a therapeutic activity. Reconnecting with the body in gentle ways can have significant outcomes on well-being. The movement studio is meant to connect to the garden and can be used for a variety of activities beyond movement as needed.



DESIGN DETAILS

Welcome

MATERIALS + FINISHES



INITIAL ENTRY

The experience of entering treatment is guided by entering the original home. Guests and patients are anticipated and greeted by staff due to the nature of care. A visitor lounge off the initial entry provides space to settle, spend time with loved ones, and access the rest of the building.

SELECTIONS RATIONAL

Natural light is prioritized throughout the entirety of the design as it is an integral element to well-being and to the centrality of the concept. Selected materials are meant to bridge the indoors and outdoors, to offer warmth and softness, and to minimize negative affect and mitigate feelings of discomfort.

See included spec book for further details on selected products and finishes.



DESIGN DETAILS

Conservatory

AN INTERMEDIARY SPACE

The conservatory serves as an extension of the garden within the walls of the building. It is the space that connects both wings of the plan. As an intermediary zone, it serves as a place for reflection, transition, and a space to connect with the healing aspects of nature.

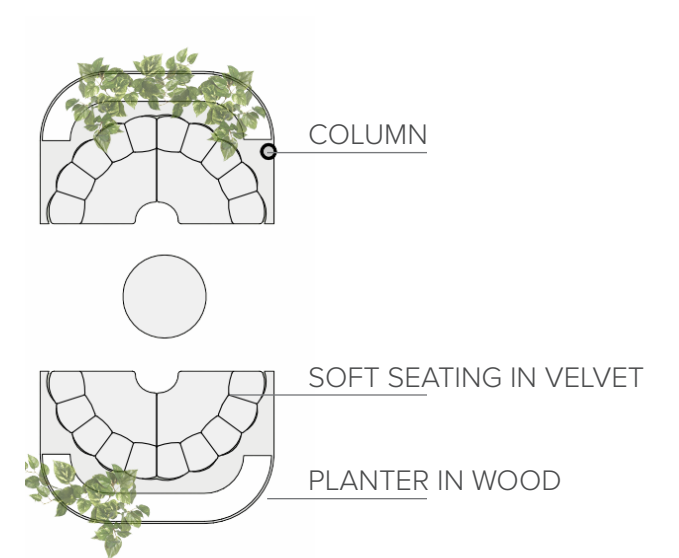
MATERIALS



WOOL RUGS: area rugs are utilized throughout design to define space and offer warmth

BUILT-IN PLANTERS

The conservatory space occurs where the original home meets the new addition of the building. As such columns help support the roof of the new addition throughout this space in order to minimize damage to the footprint of the original home. Custom seating banquettes with built-in planters were added to the conservatory and interact with the columns in order to help better define circulatory space.





DESIGN DETAILS

Library

LEFT: A SPACE FOR REFLECTION

Thick shelving walls work to create a sense of stability for a room that exists as a space within a space.



DESIGN DETAILS

Living Room

ABOVE: A SPACE FOR SHARING

The living room is located between the conservatory and the dining area. It is a space for group activity and shared reflection. Connection to the garden is an important aspect of this space as are comfortable furnishings that can be rearranged to accommodate programmatic shifts.



DESIGN DETAILS
Kitchen + Dining

KITCHEN + DINING

The kitchen and dining space comprises a critical program area. Nourishment is essential to eating disorder recovery in both the physical and metaphysical sense. Important considerations for these spaces include ease of access and comfortability as well as the minimization of negative affect through the introduction of positive distraction.

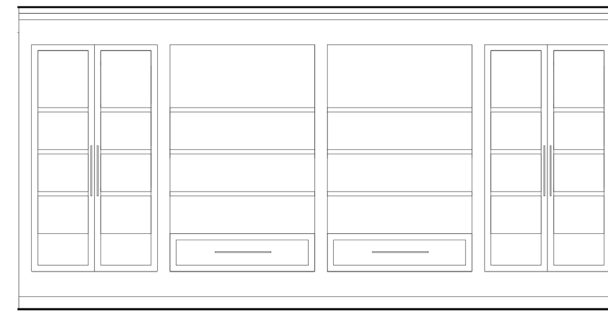
The kitchen and dining space is open concept to promote genuine connection between cooking and eating - the production of meals as an act of self care. The design of the space incorporates skylights and a beam system inspired by conceptual explorations surrounding traditional greenhouses. Natural materials are utilized to connect to concept and to the rest of the spaces in the building.



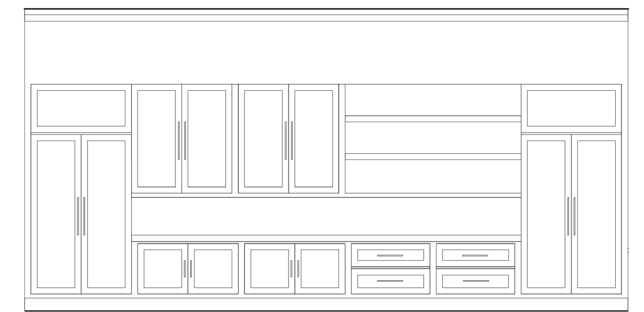


DESIGN DETAILS

Pantry Development



① PANTRY ELEVATION: KITCHEN FACING
NOT TO SCALE



② PANTRY ELEVATION: LIVING ROOM FACING
NOT TO SCALE



PANELED REFRIDGERATORS
BLEND INTO CASEWORK

GLASS DOOR CABINETS
ARE ACCESSIBLE FROM
BOTH THE PANTRY AND
DINING ROOM TO CREATE
INCREASED CONNECTION
BETWEEN THE SPACES

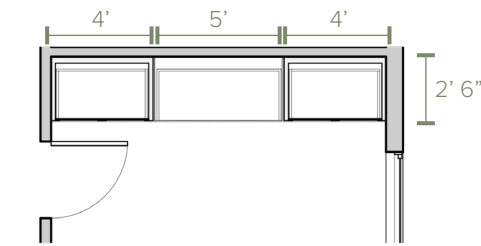
PANTRY DEVELOPMENT

The pantry offers storage for food staples and refrigerated goods as well as dishes and cookware. A holistic and healing dining experience encompasses nutrition knowledge and tangible connection to nourishment. The pantry is a space to help instill excitement around the meal time experience.



DESIGN DETAILS

Bedroom Details



A-2 DETAIL PLAN: WARDROBES
NOT TO SCALE

BUILT-IN WARDROBES

Length of treatment may range from 30 days to several months. As such, storage for clothing and personal belongings presents an opportunity for a design feature that connects with language created through casework on level one. Here, each resident has access to their own wardrobe as well as a shared seating and storage bench.

DESIGN DETAILS

Restrooms



QUARTZ

BRASS

WALLPAPER: WILLIAM MORRIS

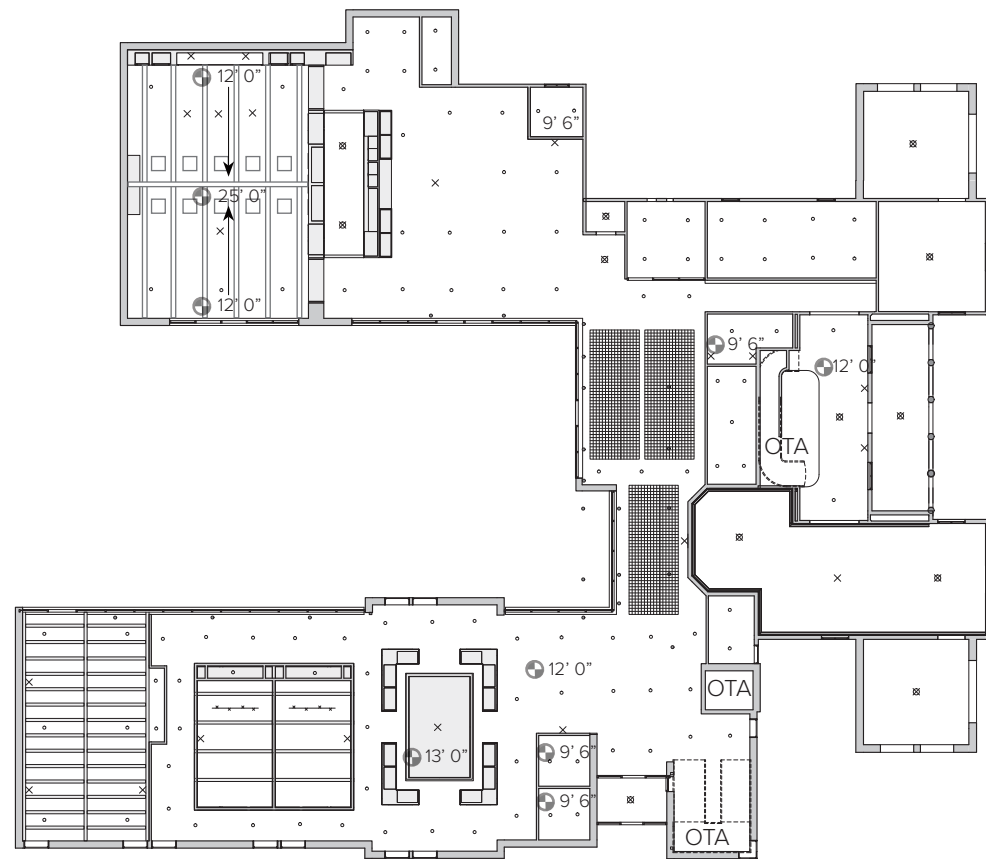
CERAMIC TILE

PORCELAIN TILE

RESTROOM CONSIDERATIONS

Precedent research highlights restrooms as areas for careful consideration in the recovery setting. Privacy and agency are prioritized even as restrooms are accessed under staff supervision. Upstairs on level two, restrooms are shared by residents and accessed from the central corridor. Selected materials are meant to elevate the experience of using the restrooms and connect to the overall concept of flourish.

REFLECTED CEILING PLAN

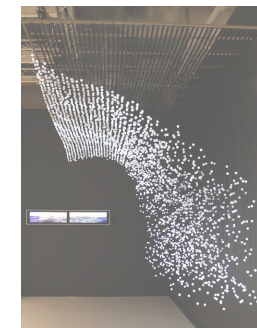


REFLECTED CEILING PLAN: LEVEL ONE
NOT TO SCALE

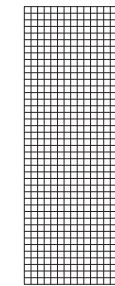


LIGHTING DETAILS

Lighting Strategies



Jim Campbell



Much of the lighting strategy revolves around ease of access - floor and table lamps, wall mounted fixtures, and low level lighting to prioritize warmth and user control. One of the areas where lighting is more of a design feature is in the conservatory. The intended light outcome is a soft, delicate sparkle reminiscent of stars and garden string lights. The effect is inspired by the work of light artist Jim Campbell. Dropped mini bulb lights hang from a metal grid system that can be integrated into the ceiling.

RCP KEY

- RECESSED DOWNLIGHT
- ⊗ SURFACE MOUNT LIGHT
- × DROPPED PENDANT LIGHT
- ⌵ WALL MOUNT LIGHT
- ⋈ TRACK LIGHT SYSTEM
- ⌌ COVE LIGHTING
- ⊕ CEILING HEIGHT MARKER
- OTA OPEN TO ABOVE
- SKYLIGHTS

PRODUCT SPECIFICATIONS

74

MATERIALS

Walls

74

Floors

75

Surfaces

77

78

FURNITURE

Seating

78

Tables + Storage

82

84

LIGHTING

Fixtures

84



PRODUCT: Paint
 MANUFACTURER: Farrow + Ball
 COLOR: Vert de Terre
 FINISHES: Estate Emulsion
 LOCATION: Bedrooms, Accent Paint
 DETAILS: Color selected for connection to concept



PRODUCT: Wallpaper
 MANUFACTURER: Morris + Co.
 PATTERN: Strawberry Thief
 COLORWAY: Indigo/Mineral
 LOCATION: Restrooms
 DETAILS: Pattern developed by William Morris in 1883



PRODUCT: Zellige Tile
 MANUFACTURER: Cle Tile
 FINISHES: Charred Cedar, Matte
 DIMENSIONS: 2" x 6" x 3/4"
 LOCATION: Kitchen Backsplash
 DETAILS: Traditional Moroccan tile, handmade



PRODUCT: Ceramic Tile
 MANUFACTURER: Fireclay Tile
 FINISHES: Rosemary
 DIMENSIONS: 3" x 9"
 LOCATION: Restrooms
 DETAILS: Handmade in the U.S.

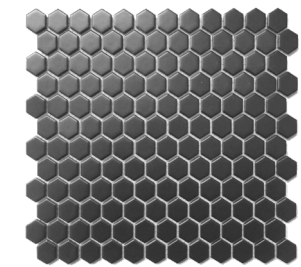
PRODUCT: Parquet White Oak
 MANUFACTURER: Divine Flooring
 FINISHES: Champagne
 DIMENSIONS: 31 1/2" x 31 1/2"
 LOCATION: Welcome + Visitor Lounge
 DETAILS: Clean Air Gold Certification



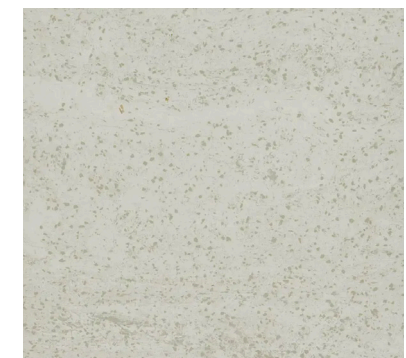
PRODUCT: Plank White Oak
 MANUFACTURER: Divine Flooring
 FINISHES: Champagne
 DIMENSIONS: 74 3/4" x 7 1/2"
 LOCATION: Throughout Project
 DETAILS: Clean Air Gold Certification, Chevron install in living + dining, plank install Level 2



PRODUCT: Porcelain Tile
 MANUFACTURER: Roca Tile
 FINISHES: Black Matte
 DIMENSIONS: 12" x 12"
 LOCATION: Restrooms
 DETAILS: Hexagon Mosaic, Environmental and Sustainable certifications for LEED scores

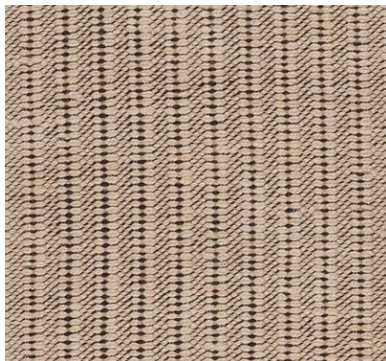


PRODUCT: Teles Rubber Flooring
 MANUFACTURER: Mannington Commercial
 FINISHES: Beach Stone
 DIMENSIONS: 35" x 35"
 LOCATION: Movement Studio
 DETAILS: Mindful Materials approved, FloorScore certified, EPD verified





PRODUCT: Terra Cotta Tile
 MANUFACTURER: Architessa
 FINISHES: Cotto, Matte
 DIMENSIONS: 6" x 6"
 LOCATION: Conservatory, Library
 DETAILS: Made with recycled content



PRODUCT: Sandro Rug
 MANUFACTURER: Lulu + Georgia
 MATERIALS: Wool
 DIMENSIONS: 8' x 10'
 LOCATION: Conservatory
 DETAILS: Natural materials and color to add warmth to the space



PRODUCT: Menderes Rug
 MANUFACTURER: Lulu + Georgia
 MATERIALS: Wool
 DIMENSIONS: 9' x 12'
 LOCATION: Living Room
 DETAILS: Area rugs to delineate space



PRODUCT: Celestin Rug
 MANUFACTURER: Lulu + Georgia
 MATERIALS: Wool
 DIMENSIONS: 5' x 8'
 LOCATION: Visitor Lounge
 DETAILS: Area rugs to delineate space

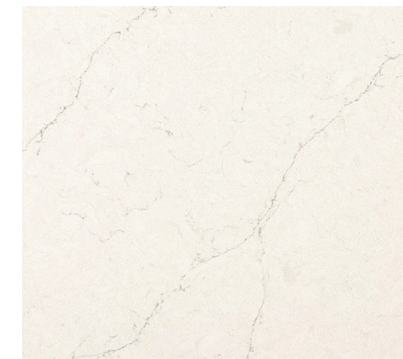
PRODUCT: VA Soapstone
 MANUFACTURER: Polycor
 FINISHES: Antique
 LOCATION: Kitchen Counters
 DETAILS: Quarried in Schuyler, VA



PRODUCT: Calacatta Marble
 MANUFACTURER: Artistic Tile
 FINISHES: Polished
 LOCATION: Living Room hearth, Pantry
 DETAILS: Italian Marble



PRODUCT: One Quartz
 MANUFACTURER: Daltile
 FINISHES: Valor White
 LOCATION: Restroom Countertops
 DETAILS: Made from recycled materials, contributes to LEED score



PRODUCT: Hardware Finish
 FINISHES: Brushed Satin Brass
 LOCATION: Throughout project





PRODUCT: Wyatt Sofa
 MANUFACTURER: Soho Home
 FINISHES: Mohair Sage
 DIMENSIONS: 35"H x 102"W x 43"D
 LOCATION: Private Therapy Rooms
 DETAILS: Arm height: 26"
 Seat depth: 27"
 Seat width: 66"
 Seat height: 21"



PRODUCT: Caldwell
 MANUFACTURER: Made Goods
 FINISHES: Dark Gray Wood
 DIMENSIONS: 32"H x 98"W x 53"D
 LOCATION: Visitor Lounge
 DETAILS: Arm height: 21"



PRODUCT: Zaha Sofa
 MANUFACTURER: Lulu and Georgia
 FINISHES: Ivory Boucle
 DIMENSIONS: 29"H x 84"W x 34"D
 LOCATION: Living Room
 DETAILS: Seat height: 18"
 Seat depth: 23"
 Arm height: 29"



PRODUCT: Nomad Velvet Sofa
 MANUFACTURER: Burrow
 FINISHES: Jade and Oak
 DIMENSIONS: 33"H x 85"W x 35"D
 LOCATION: Living Room
 DETAILS: Seat height: 17"
 Seat depth: 22"
 Arm height: 24"
 Sustainable wood

PRODUCT: Fleetwood
 MANUFACTURER: Made Goods
 FINISHES: Aras Moss Mohair
 DIMENSIONS: 27"H x 54"W x 26"D
 LOCATION: Level 2 Hall Seating
 DETAILS: Seat depth: 23"
 Seat height: 16"
 Mahogany and Natural Cane



PRODUCT: Rupert Sofa
 MANUFACTURER: Lulu and Georgia
 FINISHES: Cognac Velvet
 DIMENSIONS: 38"H x 102"W x 41"D
 LOCATION: Library
 DETAILS: Seat height: 15"
 Seat depth: 27"
 Solid Maple, Solid Ash
 Made in North Carolina



PRODUCT: Lofted Boucle Dining Chair
 MANUFACTURER: West Elm
 FINISHES: Fayette Cloud
 DIMENSIONS: 33"H x 26"W x 24"D
 LOCATION: Dining Room
 DETAILS: Seat height: 20"
 Seat depth: 19"
 Arm height: 25"



PRODUCT: Syd Bar Stool
 MANUFACTURER: All Modern
 FINISHES: Black
 DIMENSIONS: 15.75"W x 19.09"D x 41.34"H
 LOCATION: Dining Room
 DETAILS: Seat depth: 14.17"
 Seat height: 29.5"





PRODUCT: Jeanne Armchair
 MANUFACTURER: Soho Home
 FINISHES: Moleskin Velvet Pumpkin
 DIMENSIONS: 30.5"H x 26.3"W x 29.8"D
 LOCATION: Living Room
 DETAILS: Arm height: 25"
 Seat depth: 20"
 Seat width: 20.1"
 Seat height: 18"

PRODUCT: Augustine Swivel Chair
 MANUFACTURER: BD Studio
 FINISHES: Hudson Lager
 DIMENSIONS: 32"W x 34"D x 26.5"H
 LOCATION: Living Room
 DETAILS: Seat depth: 23"
 Seat height: 17"



PRODUCT: Compass Armchair
 MANUFACTURER: Industry West
 FINISHES: Teak Wood Natural Rattan
 DIMENSIONS: 31.6"H x 21.8"W x 22"D
 LOCATION: Visitor Lounge
 DETAILS: Arm height: 26.4"
 Seat height: 17.3"

PRODUCT: Orion Chair
 MANUFACTURER: BD Studio
 FINISHES: Chaps Sadle
 DIMENSIONS: 39"H x 27"W x 34.5"D
 LOCATION: Visitor Lounge
 DETAILS: Seat depth: 20"
 Seat height: 19"
 Arm height: 23"



PRODUCT: Knitting Chair
 MANUFACTURER: Ib Kofod-Larsen
 FINISHES: Natural Oak + Moonlight
 DIMENSIONS: 35.7"H x 28.1"W x 26.3"D
 LOCATION: Library
 DETAILS: Seat height: 11.8"

PRODUCT: Lyssa Accent Chair
 MANUFACTURER: Lulu and Georgia
 FINISHES: Olive Green
 DIMENSIONS: 27.5"H x 25.5"W x 29.5"D
 LOCATION: Visitor Lounge
 DETAILS: Seat height: 18"
 Ash Wood



PRODUCT: Garret Chair
 MANUFACTURER: Soho Home
 FINISHES: Boucle
 DIMENSIONS: 38"H x 35.8"W x 28.3"D
 LOCATION: Conservatory
 DETAILS: Swivel chair

PRODUCT: Truss Chair
 MANUFACTURER: Burke Decor
 FINISHES: Himalaya Cloud
 DIMENSIONS: 30"H x 26.5"W x 31"D
 LOCATION: Private Therapy
 DETAILS: Seat height: 17"
 Natural Ash Frame





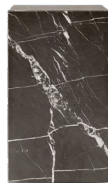
PRODUCT: Tromso Coffee Table
 MANUFACTURER: Taracea
 FINISHES: Ochre Guanacaste
 DIMENSIONS: 80"W x 38"D x 16"H
 LOCATION: Living Room
 DETAILS: Taracea utilizes reclaimed and recovered wood and actively contributes to reforestation efforts



PRODUCT: Strata Coffee Table
 MANUFACTURER: Industry West
 FINISHES: Marble
 DIMENSIONS: 13.2"H x 37.4"D
 LOCATION: Library
 DETAILS: Potential for marble treatment



PRODUCT: Arturo Side Table
 MANUFACTURER: Lulu + Georgia
 FINISHES: Reclaimed Wood
 DIMENSIONS: 18"H x 14"W x 14"D
 LOCATION: Living Room
 DETAILS: Made from reclaimed wood



PRODUCT: Marble Plinth Side Table
 MANUFACTURER: Norm Architects
 FINISHES: Grey Kendzo
 DIMENSIONS: 20.1"H x 11.8"W x 11.8"L
 LOCATION: Visitor Lounge
 DETAILS: Sealed marble

PRODUCT: Noir Alameda
 MANUFACTURER: Alchemy
 FINISHES: Walnut
 DIMENSIONS: 81.5"W x 23"D x 30.5"H
 LOCATION: Visitor Lounge
 DETAILS: Handmade



PRODUCT: Briarwood Chest
 MANUFACTURER: Vanguard
 FINISHES: Coventry
 DIMENSIONS: 34"H x 42"W x 21.5"D
 LOCATION: Visitor Lounge
 DETAILS: Company green initiatives and participation in Sustainable Furnishings Council



PRODUCT: Hannah Dresser
 MANUFACTURER: Lulu and Georgia
 FINISHES: Mango Wood + Cane
 DIMENSIONS: 31.5"H x 58"W x 17"D
 LOCATION: Bedroom
 DETAILS: 6 drawers



PRODUCT: Lexi Nightstand
 MANUFACTURER: Made Goods
 FINISHES: Bone + Gray
 DIMENSIONS: 28"H x 18"W x 18"L
 LOCATION: Bedroom
 DETAILS: Handcrafted, with one drawer

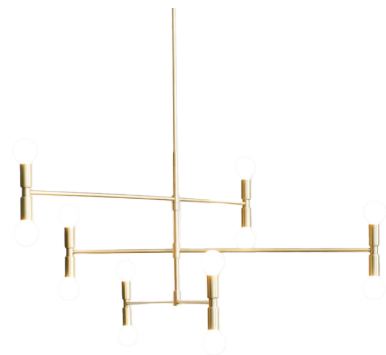




PRODUCT: Glass Up Down
 MANUFACTURER: In Common With
 FINISHES: Polished Brass
 LOCATION: Entry
 DETAILS: Surface Mount



PRODUCT: Blown Glass Disc
 MANUFACTURER: In Common With
 FINISHES: Opaline
 LOCATION: Conservatory
 DETAILS: Surface Mount



PRODUCT: Dot 01 Atomium
 MANUFACTURER: Lambert + Fils
 FINISHES: Polished Brass
 LOCATION: Library
 DETAILS: Pendant



PRODUCT: Laurent 04
 MANUFACTURER: Lambert + Fils
 FINISHES: Polished Brass
 LOCATION: Dining
 DETAILS: Pendant

PRODUCT: Emme
 MANUFACTURER: Soho Home
 FINISHES: Brass + Glass
 LOCATION: Living Room
 DETAILS: Pendant



PRODUCT: Rhodes
 MANUFACTURER: Danny Kaplan
 FINISHES: Satin Black
 LOCATION: Welcome
 DETAILS: Table Lamp



PRODUCT: Domo
 MANUFACTURER: Industry West
 FINISHES: Brown Alabaster
 LOCATION: Visitor Lounge
 DETAILS: Table Lamp



PRODUCT: Renato
 MANUFACTURER: Soho Home
 FINISHES: Antique Brass
 LOCATION: Living Room
 DETAILS: Floor Lamp





FINAL DELIVERABLES

EXHIBITION BOARDS

FLOURISH

EXPLORING HEALING ENVIRONMENTS IN A RESIDENTIAL TREATMENT SETTING

PROJECT STATEMENT
How can our environment promote healing and support recovery?
This board explores the design journey through the design of a residential center for early-stage recovery. The center will provide a safe and supportive environment for individuals in early recovery, offering a mix of residential and therapeutic spaces. The project focuses on creating a healing environment that supports recovery through a mix of natural and built elements. This is a pilot project for a larger residential and therapeutic center in the future.

SITE SELECTION
WOODMONT, VA
RICHMOND, VA 23120

PHOTO MAP: STYD BANK
The site is located in a residential neighborhood in Woodmont, VA. The site is a former parking lot and is surrounded by residential buildings. The site is a prime location for a residential treatment center due to its proximity to public transportation and its location in a quiet neighborhood.

PHOTO MAP: ROCK WESTOVER RD
The site is located on Rock Westover Rd in Woodmont, VA. The site is a former parking lot and is surrounded by residential buildings. The site is a prime location for a residential treatment center due to its proximity to public transportation and its location in a quiet neighborhood.

LISTING BUILDING PHOTOS

WELCOME
The experience of entering treatment is guided by the programmatic, spatial and material choices. The programmatic choices are the most important, as they define the purpose and function of the building. The spatial choices are the next most important, as they define the layout and flow of the building. The material choices are the final choice, as they define the look and feel of the building.

SELECTIONS NATIONAL
Materiality is a powerful tool for defining the identity of the building. It is a way of communicating the building's purpose and function. The material choices are the final choice, as they define the look and feel of the building.

PROGRAMMATIC + SPINAL DEVELOPMENT | MEDICINE ZONE
CILING DETAILS

LIBRARY
The library is a quiet space for reading and reflection. It is a place where individuals can find solace and support. The library is a key element of the healing environment, as it provides a space for individuals to learn and grow.

PRIVATE THERAPY ROOM
The private therapy room is a space for individuals to receive individualized care. It is a place where individuals can work with a therapist to address their needs and challenges. The private therapy room is a key element of the healing environment, as it provides a space for individuals to receive the support they need.

MOVEMENT STUDIO
The movement studio is a space for individuals to engage in physical activity. It is a place where individuals can improve their physical health and mental well-being. The movement studio is a key element of the healing environment, as it provides a space for individuals to engage in the activities they need.

MATERIALS + FURNISHINGS

CEILING DETAILS

SPACE PLAN
The space plan shows the layout of the building, including the location of the library, private therapy room, and movement studio. The space plan is a key element of the healing environment, as it defines the layout and flow of the building.

PLAN KEY

RESTROOM CONSIDERATIONS
The restrooms are designed to be clean, safe, and comfortable. They are a key element of the healing environment, as they provide a space for individuals to maintain their hygiene and health.

STEP SIZES
The step sizes are designed to be safe and comfortable. They are a key element of the healing environment, as they provide a way for individuals to move between different levels of the building.

BEFORE
The existing building was a simple, functional structure. It provided a basic level of care, but it lacked the healing environment that was needed.

AFTER
The new building is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

BEFORE
The existing building was a simple, functional structure. It provided a basic level of care, but it lacked the healing environment that was needed.

AFTER
The new building is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

LEVEL TWO HALLWAY FURNISHINGS
BEFORE
AFTER

BEFORE
The existing hallway was a simple, functional space. It provided a way for individuals to move between different rooms, but it lacked the healing environment that was needed.

AFTER
The new hallway is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

BEFORE
The existing bedroom was a simple, functional space. It provided a place for individuals to sleep, but it lacked the healing environment that was needed.

AFTER
The new bedroom is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

BEFORE
The existing bathroom was a simple, functional space. It provided a place for individuals to maintain their hygiene and health, but it lacked the healing environment that was needed.

AFTER
The new bathroom is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

BEFORE
The existing living area was a simple, functional space. It provided a place for individuals to relax and socialize, but it lacked the healing environment that was needed.

AFTER
The new living area is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

BEFORE
The existing kitchen was a simple, functional space. It provided a place for individuals to prepare food and eat, but it lacked the healing environment that was needed.

AFTER
The new kitchen is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

UNDERSTANDING THE EXISTING BUILDING
The existing building was a simple, functional structure. It provided a basic level of care, but it lacked the healing environment that was needed.

CONCEPT DEVELOPMENT
The concept development phase involved exploring different design options and selecting the best one for the project. This phase was a key element of the healing environment, as it provided a way for individuals to learn and grow.

LIBRARY
The library is a quiet space for reading and reflection. It is a place where individuals can find solace and support. The library is a key element of the healing environment, as it provides a space for individuals to learn and grow.

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MATERIALS + FURNISHINGS

CEILING DETAILS

SLATS IN PLANTERS
The slats in the planters are designed to be safe and comfortable. They are a key element of the healing environment, as they provide a way for individuals to move between different levels of the building.

CONSIDERATIONS
The considerations for the design include the need for a healing environment, the need for a safe and comfortable space, and the need for a space that supports recovery.

FURNISHINGS

LIVING ROOM
The living room is a space for individuals to relax and socialize. It is a key element of the healing environment, as it provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

KITCHEN + DINING
The kitchen and dining area are a space for individuals to prepare food and eat. They are a key element of the healing environment, as they provide a space for individuals to receive the care they need, and they provide a space for individuals to learn and grow.

HALLWAY DEVELOPMENT
The hallway development phase involved exploring different design options and selecting the best one for the project. This phase was a key element of the healing environment, as it provided a way for individuals to learn and grow.

BEFORE
The existing hallway was a simple, functional space. It provided a way for individuals to move between different rooms, but it lacked the healing environment that was needed.

AFTER
The new hallway is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

BEFORE
The existing living area was a simple, functional space. It provided a place for individuals to relax and socialize, but it lacked the healing environment that was needed.

AFTER
The new living area is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

BEFORE
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AFTER
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BEFORE
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AFTER
The new kitchen is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

BEFORE
The existing living area was a simple, functional space. It provided a place for individuals to relax and socialize, but it lacked the healing environment that was needed.

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The new kitchen is a healing environment. It provides a space for individuals to receive the care they need, and it provides a space for individuals to learn and grow.

THESIS REFLECTION

On the front end of this thesis process I struggled with concept. I knew how I wanted the space to feel based on research I had done and conversations I had experienced with people who had undergone this type of treatment before. When I stumbled upon the idea of flourish as a concept it brought everything together for me. To be able to heal holistically, to move from places of despair to those of joy, to reconnect with and nurture the self, was the kind of healing I hoped the design would support. To balance that with strong ties to nature and the healing environment as its own regulator for flourishing felt like the perfect fit. When I shared this concept and some of the preliminary design work with a friend, she told me that her favorite affirmation from time spent in treatment was “you are blooming into a new and improved version of yourself.” This was an encouragement to me amidst all of the struggles and late nights attempting to bring this project together, a gentle reminder to stay rooted, to hold hope in the passing of time.

The work of design is never fully over, but I do know for certain I have grown through this thesis process. I am grateful for the support, feedback, and assistance I have received over the past two years in this program and into the final presentation and defense. To be able to share this work stirs up a lot in me. To recognize where I started two years ago and to see where I am now is an acknowledgment of the process of growing and of blooming. To know that this process is ongoing is comforting.

To continued growth,
to flourishing here and beyond—



APPENDIX

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IMAGES

MONTOYA COWORKING STUDIO: <https://www.designboom.com/architecture/montoya-coworking-maunsell-veciana-barcelona-11-04-18/>

LEWIS GINTER CONSERVATORY: <https://www.lewisginter.org/>

BALBOA PARK BOTANICAL GARDEN: <https://sometimeshome.com/afternoon-prado-balboa-park-san-diego/>

1000 WESTOVER MAYMONT: <https://maymont.org/rentals/venues/1000-westover/>

THE MEADOWS RANCH: <https://www.meadowsranch.com/>

ANNA FREUD CENTRE: <https://www.studioilse.com/projects/anna-freud-centre/>

VIZCAYA: <https://vizcaya.org/>

THE HOXTON PARIS: <https://thehoxton.com/paris/>

JIM CAMPBELL LIGHT ART: <https://www.jimcampbell.tv/>

ACKNOWLEDGMENTS

my sincerest thank you to...

my family

my friends and studiomates

my professors

my employers

to everyone who has helped me with this project
and supported me throughout this program

your grace, patience, and encouragement has meant the
world. i am grateful for you.

