Composing Wellbeing

Dr. Sara Adhitya – Prof. Nick Tyler
Universal Composition Laboratory
University College London
ucl-squared@ucl.ac.uk
What is ‘Wellbeing’?

- Wellbeing: “The achievement of individual aspirations while supporting society as a whole” (definition used in accessibility research)
- Mental Wellbeing: "Mental health is a state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community", WHO 2014
- Wellbeing is physical, sensorial and mental
Wellbeing is perceived

- Depends on our perception i.e. our senses
- Perception varies between individuals depending on their senses
- How can we enhance the wellbeing of both individual and society in the design of places?
Place, Accessibility & Wellbeing

- Place, accessibility and wellbeing are closely related.
- For the achievement of wellbeing, a place should be made accessible.
- Accessibility is traditionally thought of as a physical problem, but is also a mental issue.
- We need a more holistic approach to place-making.
‘Universal Composition’

• We propose ‘Universal Composition’ : “the multisensorial design of the urban environment in space and time”

• Aims to compose an environment which is accessible, understandable and meaningful to as many people as possible

• The more senses we design for, the more people we include
Case study: Dementia

• What is Dementia? : “a wide range of symptoms associated with a decline in memory or other thinking skill severe enough to reduce a person’s ability to perform everyday activities.” ¹

• Why Dementia? : An example of a condition which renders accessibility not only a physical concern, but a mental one

¹ Alzheimher’s Association, Chicago, USA
Case study: Dementia

- 35.6 million people worldwide (2010) *
- Expected to triple by 2050 to 115.4 million
- Dementia is an example of both a health condition and a cognitive social phenomenon
- Large and increasing impact on a country’s health care system, economy and society

*The Dementia Project: Innovation Driven by Social Challenges, Fujitsu Japan 2013
The Dementia Project

- The Dementia project – a social innovation initiative of Fujitsu, Japan – realises that dementia cannot be supported by the public or healthcare sectors alone.

- ‘What is clearly needed is broad-based social innovation involving participation of both public and private sectors, something that goes beyond the conventional framework.’*

*The Dementia Project: Innovation Driven by Social Challenges, Fujitsu Japan 2013
Fujinomiya group home

- 1 day centre, 1 live-in communal home
- 1 manager, 3 carers, 9 live-in dementia patients
- Patients are free to come and go as they please
- Interact with each other and participate in normal household activities including cooking, gardening etc.
- Encouraged to care for self with supervision of a carer
- Preventative physical activities
- Integration in community through public events
Inside the group home
Making lunch 1
Making lunch 2
Making lunch 3
Making lunch 4
Dexterity with origami
Outside the group home

- The surrounding community has been educated about how to aid people with dementia
- The community is able to help these people in their everyday urban activities, allowing them to enjoy their urban environment and retain their sense of place
Run-tomorrow project

- Patients encouraged to participate in marathons with their community
- Retain sense of place and create sense of pride
- Form connection with private and public sectors/stakeholders

Fujitsu, Japan
Run-tomorrow Project

Photo: Makoto Okada
Run-tomorrow Project

Photo: Makoto Okada
Run-tomorrow Project

Photo: Makoto Okada
Group sharing projects

- Through organised group sharing projects they are given opportunities to pass on their wisdom and memories to the younger generation – e.g. photo sharing project

School students learn from people with dementia about how they might see their local main street
Group-sharing project

Photo: Makoto Okada
Group-sharing project

Photo: Makoto Okada
Group-sharing project

Photo: Makoto Okada
Group-sharing project

Photo: Makoto Okada
Group home outcomes

- Maintain accessibility to home and city
- Improve quality of life and wellbeing
- Prolong independence
- Reduce ‘healthcare’ costs
- Continue to exchange with the community
- Contribute to the development of a society’s sense of place
The Institutes of Neurology and Ophthalmology at UCL are investigating how people with dementia see.

We are studying how they navigate their environments ...

... and what this means for the design of our cities?

How can ‘Seeing what they see’ help us with the achievement of wellbeing in the city?
‘Seeing what they see’

- So what does a person with dementia see?
- Not always easy to find out because it can be difficult to ask them to tell us...
‘Seeing what they see’

- Posterior Cortical Atrophy (PCA) is a form of dementia where the vision is one of the first capabilities to be affected.
- Speech is still relatively unaffected, so we can ask them what they can see...
- We can do this in a safe environment where we can represent different indoor and outdoor spaces under controlled conditions.
‘Seeing what they see’

• Very early stages but, so far, experiments show that:
  • They can see moving objects even though they cannot see static objects
  • They find it difficult to follow more than two requests at a time
  • Some follow a random course between two points if there is no limiting environmental factor (such as a corridor)
‘Seeing what they see’

“Please walk through the open door”
Informing place-making

- So we can start to use this information to inform how we design urban spaces and make them more accessible to people with dementia as well as others.

  - e.g.
    - Dynamic route guides
    - Management of shadows

- But what about other stimuli?
What about other senses?

- Memory and place-making are multisensorial
- What about hearing, smell etc?
- Which senses contribute to and can trigger memory?
Could music be a key?

http://www.youtube.com/watch?v=NKDXuCE7LeQ
What about design?

• We could use these results to design spaces in a more multisensorial way (universal composition)

• We can compose more understandable and accessible environments for dementia patients and others

• We can extend their living space from the home to the urban realm
Conclusions

- Memory and place-making are multisensorial
- People with dementia can be encouraged to interact with appropriate stimuli
- We can design places which better stimulate their senses
- This can contribute to a greater level of accessibility, sense of place and wellbeing
Future steps

• Further research of how people with dementia sense their environments – see, hear, smell...

• The role of these senses in the retrieval of memory and place making

• The composition of more accessible environments
Composing Wellbeing

Tesekkur ederim!

Please contact us at ucl-squared@ucl.ac.uk