## Social Areas as Heart of Therapy

Mental health centers which emphasize private treatment instead of human relationships will fail.

The main purpose of therapy is to rehabilitate and resocialize patients, to encourage and allow them to participate, according to their growing capacities, in social activity.

Therefore, it is essential that the program areas be arranged so that patients on the way from one thing to another have maximum possible contact with activities, though always in such a way that they can ignore them if they wish. This requires that paths between programs run tangent to a "heart" social area.

There are also social areas which do belong to a particular group of patients. For inpatients and day care patients, their respective living rooms are their homes and they certainly don't want anyone wandering in at will. These areas, however, are the most likely areas from which patients venture out

to the more open social spaces; therefore, these "owned" areas are tangent to the heart social area. Context

Any mental health center.

Central areas include:

Occupational therapy Recreational therapy

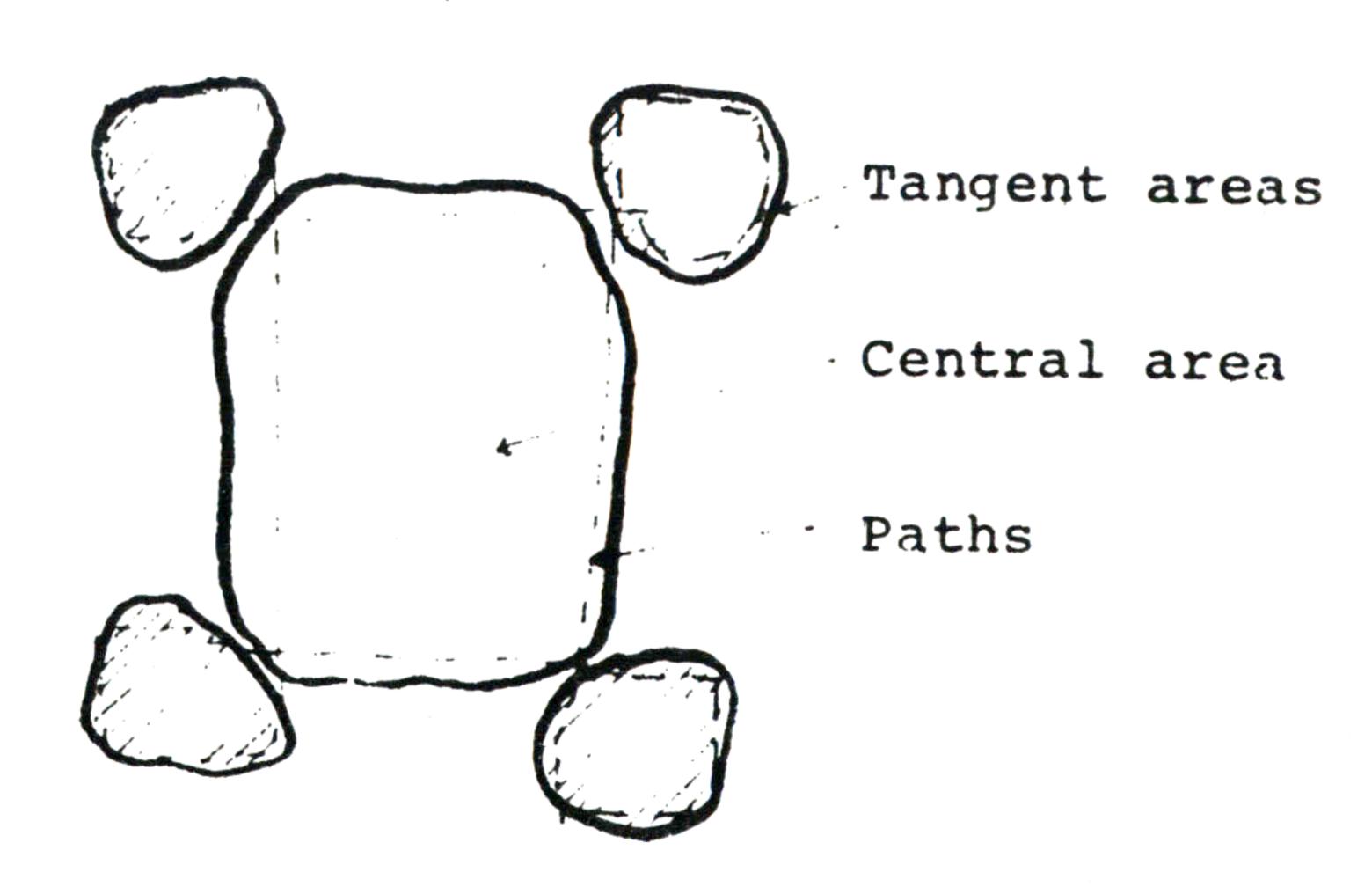
Main reception, coffee, fireplace, etc. (off main entrance)

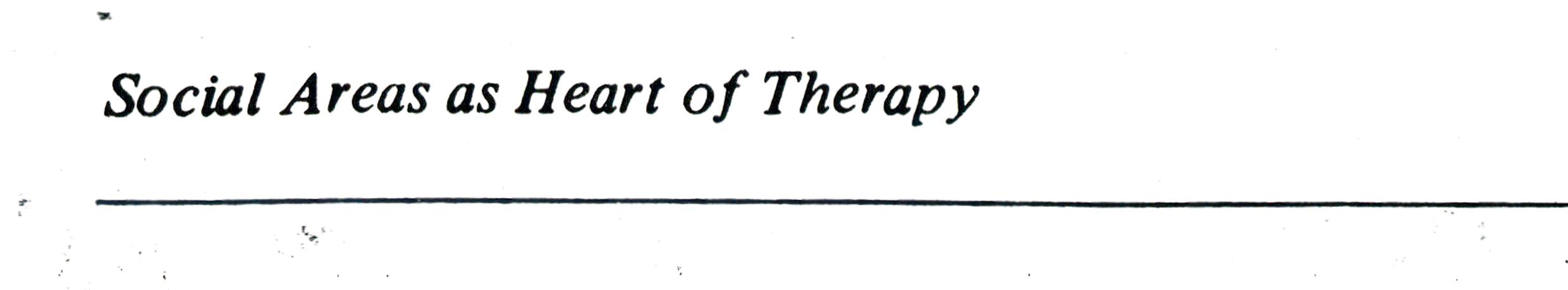
Any additional social facilities provided (garden, terrace, piano, pool, games, etc.)

Tangent areas include:

Main living area of an inpatient unit Eating areas Home base of the day care program

Therefore: Divide the social areas into two classes; central areas (all social areas which are open to everyone) and tangent areas (areas which "belong" to a smaller group). Make the central areas highly visible and place them on any path taken by a patient between two points. Place the tangent areas so they are sensed from outside the area so people can visit them, go into them, if they want to, but such that they are not freely available to everyone.





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