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REMEMBERING MYTH AND RITUAL IN THE EVERYDAY TECTONICS OF HOSPITALS

TENNA DOKTOR OLSEN TVEDEBRINK

Abstract

When discussing tectonics, the book *Studies in tectonic culture* by Kenneth Frampton (2001) is often mentioned for linking the ethics of architecture with a focus on structural genius. Another reference is the paper *The tell-the-tale detail* by Marco Frascari (1984), which in addition to Frampton put emphasis on *both* the physical construction and mental construing of architecture. With this dual perspective Frascari established a discourse in tectonic thinking which brings the tectonic expression beyond structural genius into socio-cultural realms of storytelling, myth and ritual. However, in everyday architecture like hospitals this perspective of construing is often neglected. In this paper, I explore if it is possible through a re-reading of Frascari's words to inspire for a re-construction of everyday tectonics? Based on project MORE at Aalborg Hospital, I argue that the perspective of construing and the realms of storytelling, myth and ritual are *also* important ethical aims of architectural construction, because they are crucial for what we experience, feel, and remember in our everyday life. Relative hereto, I suggest that the focus on structural genius is unfolded to investigate how myths and rituals for instance in the interior staging of meal situations can foster a more human-centred perspective in everyday tectonics.

Keywords:
everyday tectonics, Marco
Frascari, storytelling, myth, ritual,
hospitals

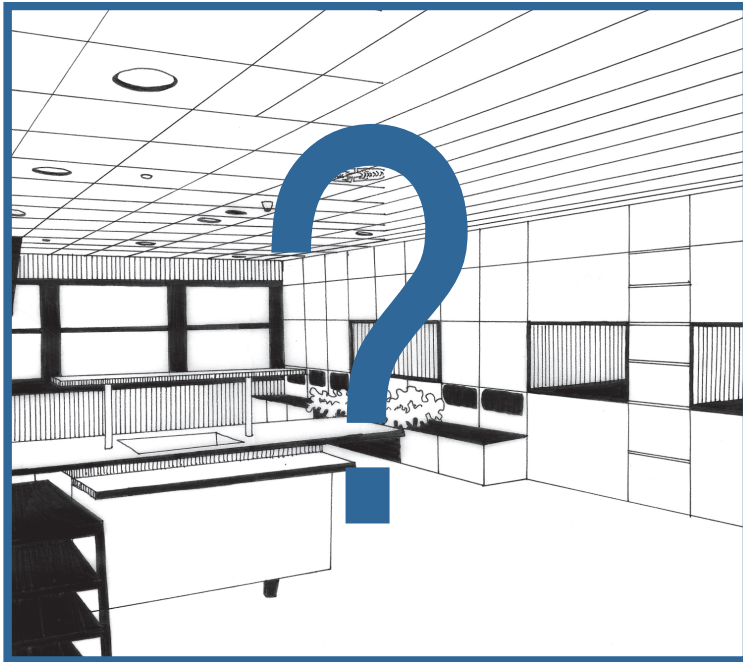


Figure 1
What is the future role of tectonics?
Drawing by author.

Tectonics in architecture

In the book *Studies in tectonic culture* Kenneth Frampton (2001) linked the ethics (role and purpose) of architecture with a sensitive understanding of materials and construction.¹ Frampton named this sensitivity the ‘poetics of construction’, and the book thus aimed at establishing a theoretical discourse on architectural quality as a synergy between ethics and technique, between visual and structural expression. His motivation was to establish a tradition balancing architecture as art and architecture as function, thereby overcoming the split apparent in the building industry between the artistic approach of the architect, the structural logic of the engineer and the material sensibility of the craftsman. A split brought upon the field, since the period of Enlightenment when architecture and engineering developed into separate academic disciplines and individual professions (Ibid.).

Frampton’s opposition grew out of the observation that modern technologies, today, increasingly have allowed a production of cost-efficient building components providing cheaper and easier solutions to how we plan and build. As a reaction against standard prefabricated solutions and reducing the role and purpose of architecture to a commodity based on economy and market forces, Frampton’s tectonic framework aimed at improving the human environment by recovering a tangible materiality of architecture and establishing a structural logic that speaks to both the body and mind. This is an understanding which, I find, has often been interpreted into an ‘honest’ approach to the construction of buildings to achieve what I call *architectural quality*. Unfortunately, as outlined with the call for the present issue, the tectonic approach has further-

1 He did this on the background of, among others, architectural theoreticians like Eduard Sekler, Vittorio Gregotti, Karl Bötticher and Gottfried Semper.

more often in practice been exemplified as unique, large-scale – almost monumental – cultural works based on exceptional high budgets and exclusive constructional means. Whereas the everyday challenges of the modern building industry, where buildings to a higher degree must be sustainable in its use of resources to address environmental and climatic problems, feature more technical installations, and most importantly meet budget limitations, less seldom engage in such a *sensitive* tectonic approach. I wonder if perhaps the potential and importance of a tectonic discourse thus reaches far beyond the theoretical framework and monumental buildings established today.

When discussing the ethics of architecture Frampton (Ibid.) referred to the paper *The tell-the-tale detail* by Marco Frascari (1984). This paper is thought-provoking, because Frascari – in addition to Frampton – emphasised that architectural quality is developed not only by constructing buildings through materiality and structure, but as much by giving significance to *myth* and *ritual* in architectural design. And relative hereto, later emphasised how important it can be for our world-making. To use Frascari's own words: «*architecture has to do with the reconciliation between the art of living well and the art of constructing well*» (Frascari, 1991, p. 4). With this perspective, Frascari established an analogy between storytelling and architecture, which in my opinion brings the tectonic expression beyond visual and structural genius into important layers of memory and imagination. But, also an analogy which, I find, is relevant not only for our 'traditional' understanding of tectonics, but perhaps becomes even more important in the everyday tectonics of public settings such as hospitals and the like. Because it brings the architectural quality beyond mere monumental or spectacular value – beyond structure, material and joint – into the socio-cultural role of fostering better health and wellbeing among its' inhabitants.

The everyday tectonics in hospitals

Around the same time as I, as part of my PhD study, began reading Frascari's writings on the more socio-cultural layers of architecture, I was unexpectedly hospitalized for two weeks because my baby son – barely one day old – underwent a complicated abdomen surgery. Being hospitalized with him was a devastating and terrible time for me. I still clearly remember the long hallways, the empty white walls, the scent of cleaning detergents and methylated spirits in the ward, as well as my constant worries, fear, and grief over my son's complicated condition. It was a period of much emotional stress and I have never felt so confused, completely lost, and physically ill as when staying there – and I was not even the one being sick. To avoid thinking too much about what the future would bring, I was desperate for something to keep my mind busy or give me reconciliation. I did so by letting my eyes constantly wander around the ward while waiting, trying to find comfort in the view out of

the window, the flowers at the tableside, the picture on the wall or even sharing a meal with my husband – all in the attempt to regain strength and find hope. It was these little interior details and everyday actions otherwise foreign to the hospital environment which gave me time for thinking about something else. Retrospectively, I find that I needed the architectural scenery to help me cling to the everyday activities such as eating to resist the emotional stress. But because I, at the same time as I was hospitalized, was in the middle of doing a PhD study on how hospital eating environments influence patient health and wellbeing, I further cannot help but wonder if others use the everyday spaces at the hospital to make sense of their world and find comfort just like I did? And if they do, then why are so many hospitals dominated by white, empty walls and a minimum of interior decoration? What if the architectural scenery of the hospital could provide me comfort – and that kind of comfort could be the ethical aim of future everyday tectonics?

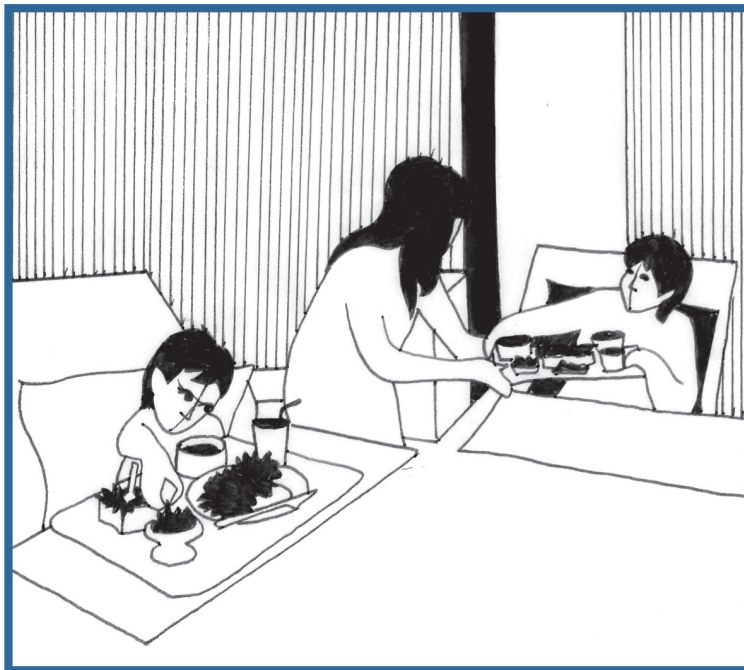


Figure 2
The everyday of hospitals framing treatment and caring. Drawing by author.

Today, my son is three years old and perfectly fit. However, during the next ten years a series of new ‘super hospitals’ are being built in Denmark. Billions are being invested in improving the overall Danish healthcare system. Consequently, the Danish building industry has a strong focus on how to improve and optimize not only future patient healthcare practices and treatment methods, but also how to improve the actual hospital designs. In Aalborg Hospital a small dedicated group of doctors, nurses, dieticians and nutrition specialists, on the initiative of the Department of Medical Gastroenterology and Centre for Nutrition and Bowel Disease, even went far as establishing a project called *MORE*². The goal of this project was to improve patients treatment outcome and re-

2 The acronym MORE stands for: *Mennesker Og Rigtig Ernæring*. Translated into English this means: ‘people and proper nutrition’.

covery process by focusing on the nutritional well-being by revising the architectural interiors framing the eating situation to better support patient needs and desires when hospitalized (Tvedebrink, 2013). The example of project MORE is not unique. In Denmark, a similar project exists in Vejle Hospital at the Department of Orthopaedic Surgical Patients where the eating setting in the ward was completely refurbished to create a more inviting and comforting environment. Research performed both in Aalborg and Vejle hospitals imply that an improvement of the interior architectural design of the patient eating environments caused greater satisfaction among the patients with the meal situation, but more importantly it also indicated a slight improvement in food intake and in the general experience of the care and caring provided during hospitalization (Tvedebrink, 2013). Hence, the interior architectural changes applied in the two hospitals showed a positive effect on the health and wellbeing of the patients. Thereby, I think, the two cases also indicated an important, but overlooked, aspect of socio-cultural value in modern healthcare procedures and in how our hospitals are designed. The problem – and relevant motivation for this paper – is that I think very few hospitals offer such a processing of grief or reconciliation in general, and even fewer is capable of using the architecture to provide a comforting socio-cultural milieu. In my point of view, there is a knowledge gap and a series of shortcomings which make the examples of Aalborg and Vejle hospitals relevant, because they point to the role and ethics of architecture in general, and border with the on-going debates about how the architectural quality of everyday tectonics influence our health and wellbeing.

Meeting Marco Frascari

Two years ago, I went to participate in a new PhD program established by Marco Frascari at Azrieli School of Architecture and Urbanism at Carleton University in Ottawa, Canada. The purpose of my visit was to see Frascari and to discuss this socio-cultural dimension focusing on myth, ritual and storytelling in architecture, when addressing everyday tectonics in hospitals. Unfortunately, before I arrived in Ottawa, Marco was hit by a major stroke. Still, despite his severe illness, he agreed to meet with me in his room at the hospital. It became a magic journey into his thoughts and writings, but also some touching moments talking to him about how contemporary everyday architecture, like hospitals, seemingly lack the aesthetic significance of storytelling, myth and ritual. A few days after my visit at the hospital Marco suffered another major stroke. Sadly, this time he was paralyzed and lost his ability to speak as well as to use the right arm and hand. As Marco's PhD student Adriana Ross writes: «*For a man like Marco, a professor, a storyteller, a writer and an artist... this must have felt devastating*» (Frascari and Ross, 2012, p. 1). Even so, after a couple of weeks Marco suddenly began drawing lines with his left hand. Soon these lines evolved into small sketches illustrating self-portraits,

a series of human bodies, red roses, as well as references to architectural-historical myths like the Babel-tower and De Bono's architectural hats³. It came as a great surprise to me and others that Marco suddenly had begun repeating some of his key polemical drawings presented to students and scholars throughout the last years in his lectures, writings and public talks. Today, these sketches still stand to me as a kind of flashback of known architectural forms and symbols – a journey into his mind and memory. But I think those drawings also became Marco's way of communicating with his visitors, friends and relatives. Yet, most of all, Marco's recovery seemed like an impossible scenario and was an extraordinary event, which for me provoked a reconsideration of the tectonic discourse and what I for so many years had been taught was the quality in architecture. With this paper, I therefore explore if it is possible through a *re-reading* and *remembering* of Frascari's words and writings to offer an alternative perspective to the structural understanding of tectonics, which can inspire to new methods for everyday architectural design like hospitals?

- 3 De Bono's six thinking hats refers to how the thinker enters into one of six modes at a time instead of trying to conceptualise everything at once. In the attempt to explain this, De Bono used a colour printing analogy where each coloured 'hat' corresponds to a different thinking mode. According to Adriana Ross, Marco had drawn a red hat which stands for the emotions, feelings and intuition (Frascari and Ross, 2012).

Approach and method

Writing about another person's work is always risky. Therefore, I would like to emphasise that this paper is based on *my* interpretations and personal fascination with his stories and work. The methodological challenge with such a personal perspective is the traditional request for research-based knowledge within the academic world. Often this request implicitly refers to scientific evidence established with quantitative or qualitative research tactics. However, as noted with Tvedebrink (2013, p. 43), the examples of Aalborg and Vejle hospitals indicate that complex personal and socio-cultural values govern eating experiences and influence food intake, health and wellbeing. In order to develop a more nuanced perspective on the everyday tectonics of hospitals, it is therefore my claim that we need to focus more on hermeneutic-interpretative research strategies, methods and tactics used within the discipline of architecture for centuries – as also argued for by Frascari (2011). In the attempt to do exactly that, I will in the following, first employ an interpretative strategy to present Frascari's theoretical framework, and then I will use this framework to discuss my impressions of the challenges of the everyday architecture of the specific case of project MORE at Aalborg Hospital. Consequently, the methodology behind this paper is theoretical and conceptually based.

Re-reading Marco Frascari

When I first met Marco Frascari (1945–2013) he was director at the Azrieli School of Architecture & Urbanism, Carleton University in Ottawa, Canada. Here he had recently established a PhD programme in Architecture and related design fields. Through the courses *Colloquium*, *Vitruvi-*

an Exercises and *Daedalic Exercises*⁴ we were encouraged to rediscover the metaphysical substance of architecture and core of architectural imagination, for instance by engaging in the reading of architectural treatises from Ancient to Modern times. Preferably we would do so not only by reading the English translations, but also by studying the original texts in their mother tongue. The aim of studying the ‘historiography’ of architecture was to provide an intellectual and reflective force in the understanding of the underlying theory, history and criticism of the architectural discipline. Altogether, these attempts was to re-awaken a lost imagination in architecture, but also to establish a broad foundation of the architectural discipline by inviting us to experiment with the labyrinthine culture of architectural practice – thinking, talking, reading, writing, drawing and making ourselves.⁵ What is clear from these courses is that Frascari had a delight in our legacy. But, he also always emphasised architectural knowledge rather than turning to other disciplines and used this lens in his teachings, texts and lectures to comment on the current state and role of the discipline of architecture. Frascari himself called it a *melancholic approach* which like the two-headed God ‘Janus’ looked simultaneously into the past and the future, and thereby became a symbol of simultaneously moving forward, while looking backwards remembering what you built on top of (Frascari, 1991, p. 2). The point is, to Frascari the discipline of architecture always encompassed theory, practice and research altogether. In his opinion architecture is crafted, it grows out of both head and hand, work and labour, theory and practice. Therefore, the architect must be both scholar and practitioner. His interest in the education of architects were therefore also very much concerned with closing the ‘gap’ between scholars and practitioners (ibid., p. xi). Throughout the years, out of all his considerations, grew the introduction to a ‘new’ procedure for making architecture – a tool for «*activating the imagination and applying the meanings and reasons that are necessary in architectural production*» (Frascari, 1991, p. 7). I find this procedure important for the current debate about the role of everyday tectonics, because it moves the ethics of architecture beyond concrete structural genius into an architecture of collective cultural ideas and personal values as well.

In the attempt to pin-point the essentials of this procedure when reading through Frascari’s writings, three key conceptual notions catch my attention: 1) *Cosmopoiesis*, 2) *Constructing & Construing*, and 3) *Storytelling*. The first conceptual notion: *Cosmopoiesis*, is a term Frascari (2012a) described as ‘world-making’. The notion takes its point of departure in how the amazing breakthroughs in cognitive and neurological science today provide elaborate insights into the wonders of the human brain and a more profound understanding of how we experience, perceive, act, move, think, learn and remember. What this type of research suggests is that our brain is *embodied* and continuously learns through memories and emotions. This is interesting because all our knowledge – the experi-

4 See further descriptions on <http://is-suu.com/azrielischoolofarchitecture/docs/2012-2014graduateprospectus>

5 Today, that approach is still evident in the *Frascari Symposia I and II* held in Canada and the US in 2013 and 2014. Here those who have studied and worked with Marco Frascari over the span of his career – such as Donald Kunze, Alberto Perez Gomez, David Leatherbarrow and Kenneth Frampton – carry on the legacy of his thinking.

ence and perception of different settings and our relationship/response to architecture – relate to what we remember and which feelings link to that past (Fascari, 2012a, p. 28; Fascari, 2012b, p. 86). Thereby, Fascari's 'world-making' does not only refer to the physical built world – the structure, material and joint as a self-referential system – experienced with the senses of our body, but *also* the entire mental world generated through perception, memory and imagination. Hence, Fascari's point is that architects create a 'sense-making' through their architecture, and this 'sense-making' has a *double* meaning. This line of thinking is based on the premise of how neuroscientists increasingly argue that emotions have a pejorative effect on our health and how our interaction with the built environments – or response to the architectural quality – most likely impact on our sense of wellbeing. This causes Fascari to argue that elements in the built (and natural) environment have a significant influence on the function of the brain and nervous system, encouraging us to engage *emotionally* with the built environment through architectural forms, details and surfaces. As Fascari (2012b, p. 86) writes: «*the influence might be positive (beneficial to our health) but it can also be negative over an extended time*».

With this double meaning of the sensory and emotional values rooted in the architecture, Fascari introduces the notion of *construction & construing*. This second conceptual notion draws on the etymological chiasm *logos of techne and techne of logos* (Fascari, 1991, p. 4). Here *logos of techne* refers to the *construction* of architecture as a play of materials, textures, structures, and spatial experiences in the traditional physical sense, whereas *techne of logos* – or *construing* – refers to the buildings' 'image' and overall atmosphere created through perception. Fascari's use of the term *construing* grows out of the idea that when a mind perceives something it discerns the parts and interprets them, afterwards using the *interpretation* of these parts to generate what is then understood as the surrounding environment. It is really a technique of reflection, where our mental work uses imagination and remembrance to move from a confused 'image' to a clear – but rebuild – 'image'. Or as Fascari (1991, p. 12) writes: «*...a construction occurs through a construing*». Thereby, *construing* becomes an architectural procedure which «*through selection and manipulation of elements of the real, produces in the future users/readers a reconstruction of evident and non-evident connections with the physical and cultural context of the everyday environment*». Fascari's point is that this *construing* is a kind of hermeneutical process which liberates the symbolic images embodied in the physical forms and materials of architecture. This means that we never experience the 'naked' physical structure, just as it is, but always adds a personal layer and levels of interpretation. Thereby notions such as 'imagination' and 'memory' become important guiding principles of how to achieve architectural quality in general, as in everyday tectonics in particular.

Remembering the value of myth and ritual

So, based on the perspective of Frascari, when engaging with architecture we search for physical sensory information but also well-crafted meanings and a mental-emotional connection to the world. However, as emphasised by Frascari (2012b, p. 84), this labyrinthine quality and amazing duality of embodiment is not necessarily achieved through a total control of form, scale and decoration. The architect is not to be dictatorial – creating built environments full of symbolic meaning. The architect is not to design everything from the door handles to the lighting fixtures, carpets and the inhabitants' clothes or slippers⁶. It is not to be 'information architecture' or a building creating a linear sequence where knowledge is marked with allegorical images. Instead, Frascari (2012b, pp. 84–85, 89) strongly emphasise that the architect need to provide a little elbow room for *thinking* and for culture to develop. The arguments put forth by Frascari to support this line of thinking is that: «*A place for thinking generates motions of thought... a place for thinking generates an intensive co-sensing, in emotionally dynamic terms, and it inaugurates the creative process because something in the surrounding built environment is compelling us to think; a development that is a coming across rather than being based on recognition*» (Frascari, 2012b, p. 87). Because the work of architecture is this important place for emotions, sensorial perception and thought, the role of the architect – and the aim of the architecture (as well as of an everyday tectonics) – is also to fulfil a universal need for joy and happiness by creating spaces fostering thinking and engaging us emotionally (Frascari, 2012b, p. 85; Frascari, 2012, p. 91).

Frascari is not alone with this viewpoint. The telling of a story is at the origin of all human communications and since the mid-eighteenth century, architects have assumed that architectural environments have the ability to seduce us emotionally and move us beyond place and time (Tvedebrink, Fisker and Kirkegaard, 2013). Hartoonian (1994, p. xv) on the background of the thinking of Semper (1863) has called it a «*programmatic articulation of built form bordering on the theatrical... a deliberate unfinished event*». The history of architecture, shows a series of such 'anthropocentric' examples like the theatre in the Ancient Greece, the Forum in Caesars Rome, the Cathedral in medieval times, the palace banquets in the sixteenth century, and the traditional coffeehouses during the period of Enlightenment, where the architecture was constructed to establish a social-cultural milieu linking moral, spiritual and material aspects of a place (Frascari, 2012b, pp. 87–88). The important point is that in these historical and sacral spaces the building design heavily drew on the collective memory of various cultural myths and related rituals to frame 'the good life'. This is evident in how, during certain occasions – like the festival, religious ceremony or banquet – the belief structures (the myths) and their supporting rituals (the actions) materialised for instance in the pace of walking through a space, the gestural and the

6 Frascari refers to the aphorism made by Adolf Loos, which in *The story of the poor little rich man* comments on the dilemma of total design/Gesamtkunstwerk. Here Loos describes a dictatorial architect designing everything for a house; from the building itself to the interior, furniture, decoration and even the clothes and slippers of the man paying for the house. The point is, despite the very skilful work of the architect, the man became increasingly dissatisfied with his home because it was not his to decide what to wear and he could not add anything. The man had been suspended from future processes of living and striving, becoming and wishing (Frascari, 2012b, p. 84).

symbolic communicated through interior decorations and placement of furniture (Emmons, Hendrix and Lomholt, 2012, p. xxii; Tvedebrink, Fisker and Kirkegaard, 2013). The socio-cultural milieu provides the framework for a shared experience, simultaneously as it is a reoccurring event that stages a particular history and cultural tradition (rituals and myths). These ceremonial events and their decorous become material embellishments of the past, thereby illustrating architectures capacity to situate and shape our lives, as well as the value and power of myths and rituals to orient our lives (Emmons, Hendrix and Lomholt, 2012, p. xxiii). Or as Frascari (2012b, p. 90) writes: «*Storytelling as a procedure both to edify and to build, meaning that humans tell stories to build buildings and the building tells non-verbal stories to edify us*». And to conclude on this, Frascari writes that «to make a real place for thinking ... architects should rediscover the lost art of architectural storytelling» (Ibid., p. 90). So, with these statements, Frascari touch on the third conceptual notion: *storytelling*.

To Frascari storytelling is an ancient form of 'world-making' and a fundamental aspect in how the architect mediates the emotional, physical and cultural realities of our world. Frascari's argument is that architecture incorporating places for 'thinking' and 'storytelling' provides wonder and curiosity and therefore happiness can take place (Frascari, 2012a, p. 28). You could also say that his point is, that we make architecture through the telling of stories, and therefore the architect must be a kind of storyteller – using storytelling not as information, facts and figures, but as a mean to trigger imagination and spark thinking. Again, I think, the aim is not to rationalize explanations of the past or to provide unchangeable representations. Instead what Frascari (2012a) calls *architectural storytelling* must be a plurality of understandings created through stories that give place to thoughts, emotions, and fantasy. It must be a collection of stories which changes in form, which respond to diverse stimuli and which is found within varying contexts. It is a core of knowledge that is at once continuously available but also infinitely obscure. It can be based on hindsight, but it always projects a world of the future. It is understandings which explain nothing and implicate both what is present and what is absent. It is also, no matter how many times the story is told, always a source for thought and individual thinking. Thereby, the process of construing architecture entails both renewing what is already there by recalling and reinterpreting traditions and customs – or what we could also call *myths* and *rituals* – and also, at the same time, establishing new relationships and creating new horizons.

Re-constructing the understanding of tectonics

In the attempt to explain how the architect becomes a storyteller, Frascari emphasise that the exercise of construing strongly relate to the *construction* of what he calls 'details'. According to Frascari (1984;

1991) architectural elements like walls, floors, ceilings and constructional joints can be seen as the more revealing components in architecture because they are the physical 'evidence'; they are the 'knots' of the fabrication – the 'details' of the storytelling and thereby the process by which architectural quality is realizable (the invisible becomes visible) (Frasconi, 1991, pp. 10–11). Hence, the construing of 'details' is the storytelling in architecture. However, I find that it is extremely important that the notion of the 'detail' is not to be taken too literal. It is not to be reduced to a physical construction detail. It is not only a physical joint articulated by use of structural genius or play in materiality. It is not necessarily telling the 'true' and 'honest' story of the construction of the building. Instead, I find based on my readings of Frascari's work, that the concept of storytelling and 'detailing' holds a much more profound and socio-cultural layer which because of its roots in the imaginary human thought deliberately goes beyond structural 'honesty' into actions of cladding, masking or 'dressing' using modern interpretations of ornamentation and decoration to constantly *conceal* and *reveal* myths and rituals triggering our process of thinking (remembering and imagining). Consequently, one of Frascari's main points is that it is the fundamental role of the architect to «*make visible what is invisible*», to add a labyrinthine quality and work with a *mythic* framework (ibid., pp. 2, 4). Thereby architecture gets its own class of reflective objects, which are the result of an internal knowledge concerning human nature and our way of organizing time, space and artifacts in certain places (ibid., p. 5). The key point is that architectural production develops from myths and their related rituals.

In continuation hereof, Frascari writes: «*in architecture, the use of myth cannot be founded upon an essential or metaphysical definition of the myth itself*» (Frascari, 1991, p. 7). Herein, Frascari distinguish between three types of myths: 1) *archaism*, which refers to the study of primitive myths like Laugier's 'hut' – an approach returning to the origin of things; 2) *cultural relativism*, which refers to the study of the mythological dimension of mass cultures like Robert Venturi's 'Learning from Las Vegas'; and 3) *limited rationality*, which refers to the etymological roots of storytelling. Here, as emphasised by Frascari (1991, p. 8) «*myths are approached as anecdotes that are perceived as more efficient forms of thought than abstract notions*». We could perhaps call it a way to regain the 'things' of architecture the lost power of mystery of appearance relating both to thing and thought. Traditionally, the notion secularization refers to a process of transformation, a shift or a decline in levels of religiosity/spiritual towards modernization and rationalization, thereby loosing social significance. However, with reference to Vattimo (1985, p. 34), Frascari argues how this process of secularization recognizes its own mythical past, so that myth itself recovers its own legitimacy, rediscovering the truth in the mytho-poetic – preserving the universality of dreaming/myth. An important point is that «*a secularized architecture has not left the contents of its traditions behind. Rather it is an archi-*

tecture that incorporates them as traces and paradigms, that are hidden perhaps, or deformed, but nonetheless profoundly present, embodying in itself the narration of the sequence of the symbolic and practical uses of its parts.» (Fascari, 1991, p. 9). So, instead of interpreting myth in terms of what it was originally, or before, I think Fascari suggested that the interpretation should occur as the point of departure (Ibid., 1991, p. 9). Hence, what Fascari called the ‘kernel of knowledge’ is constantly enveloped by myth and the myth is ceaselessly generated with the ‘theatre of representation’ (Ibid., p. 9). Which mean, that architecture – when it is at its best – is perceived as a kind of ‘mask’ adding layers of mystery and magic which triggers the memory and imagination of our mind.

The crucial point is, as Fascari (2012a, p. 27) writes, that *«Architecture can get individuals together and make them talk or look to each other in meaningful silence... Architecture can shape culture by encouraging folks to take on new habits or to preserve traditional ways. Architecture can modify bodies and minds compel them to wellness or diseases»*. In the book: *Monsters of architecture*, Fascari (1991, p. 11) even provides an example for a health care facility. Here he states that *«the ‘hospital’ would be the subject of the architectural construction, but its contents/ purposes would be the subject of architectural construing»*. To try to sum up: What I think we can learn from this, when we look at the theme of everyday tectonics, is that the complex tension between the constructing and construing of a building of architectural quality is solved in the architectural ‘details’ revealing the storytelling and relation to our myths and rituals. And, as mentioned in the introduction, I find, that it is few everyday spaces where the architectural design is dedicated to what Fascari calls ‘thinking’ and ‘storytelling’. Hence, everyday architecture like hospitals framing a complex network of activities such as cooking, eating, sleeping, working, socializing, caring and healing rarely relate to what makes a ‘good life’ in the mental level.

With the conceptual theoretical framework developed on the background of my interpretation of Fascari’s writings, I will move on to the example of project MORE, and do so with the attempt of exploring if Fascari’s conceptual notion on storytelling and the significance of myth and ritual can be used to define what I think is ‘missing’ in contemporary everyday architecture like hospitals, and thereby potentially also offer a perspective moving beyond structural genius when debating the role and ethics of everyday tectonics.

An everyday example: The case of Aalborg hospital

As mentioned above, the goal of project MORE was to improve patients’ treatment and recovery by – among other things – incorporating considerations on how the architectural interiors framing patient eating

experiences could be improved to better support individual needs and desires when hospitalized. As described in Tvedebrink, Fisker and Kirkegaard (2013), the Department of Infectious Diseases at Aalborg Hospital shares centralized kitchen facilities and a larger common dining area together with the department of hematology. Yet, each of the two departments have their own small living area in the ward, encompassing a small dinner table, some armchairs and a bulk trolley for the service of patients during meal times, as well as for drinks or lighter snacks during the day.



Figure 3
Common area and patient eating setting. Photos by author.

All meals are prepared in a large decentralized kitchen located in a separate building in the hospital area. As seen from the photos (see figure 3), the patient's rooms are aligned at one side of the ward, separated from staff and service functions like elevators, staircases, washrooms, nurse-offices, and the nurse-station by a long hallway. During the day the bulk trolley is used to store all relevant kinds of tableware and china. Patients are not allowed to touch this food and drink themselves due to contagion risks. During mealtime an additional bulk trolley with hot food is brought in and placed in the small living area. At such times patients align in front of the bulk trolley and food is served from large steel containers. Each patient can then choose to sit in the living area in the ward, in the patient rooms or in the common eating facilities of the overall department. Often there is only room for about 4–5 patients

in the small living area in the ward, the rest have to return to their patient rooms or go to the common area. Thereby the spatial configuration and overall interior architectural scheme of the hospital often ‘force’ patients to eat in manners contradictory with our cultural heritage/food culture and fundamental understanding of sharing a meal as part of a community. Apart from the obvious lack of space for seating during meal times, the existing meal scenery is clearly dominated by the small living room being squeezed in-between other ward activities. I assume that the underlying architectural intention of the hospital design has been to create an optimization of space, ordered to facilitate the rhythm and demands of the treatment procedures and the staff. I think this can be seen from the distribution of space in the hallway allowing for clear passage, as well as quick and efficient transport of patient’s beds or the hasty movements of medical personal in cases of emergency. But furthermore, in how the interior of the ward – presumably for hygiene reasons, like rest of the hospital – is stripped down to the minimal requirements of interior decorations and furniture arrangements. Despite the staff’s effort to create a more ‘homely’ or ‘restaurant-like’ atmosphere by use of white table cloths, napkins, candles, flowers and small decorative artefacts, the overall meal scenery is still dominated by the white surfaces, as well as the standardized hospital furniture (Tvedebrink, 2013). It seems like there is no careful detailing or deliberate storytelling, as argued for by Frascari, incorporated in the interior architecture framing that patient meal. I am staring at an empty white wall. There is no place for me to let my mind wander off to find comfort because the interior architecture is left ‘naked’.

Re-construing the role of tectonics in hospitals

Today, we surround ourselves with white walls, not just in hospitals, but everywhere. But what is the role of the white wall in the hospital, if it is not to bring me comfort? As argued for by Wigley (2001, p. xvi), the white, surgically clean surface of our modern buildings in general symbolize a refusal of ‘fashion’ and of ‘style’ in favour of function. It refers to the old architectural-theoretical debate on ‘honesty’ of construction, touching on the use of decoration and ornamentation, but also very much relating to the discourse of tectonics. The point put forth by Wigley (2001) is that these white walls – even in hospitals – are not ‘honest’ or neutral. They are, just like any other type of surface treatment, decoration or ornamentation, a layer added to the construction of the building, which have an important moral meaning like removing cultural and religious symbols so not to interfere with personal identities and beliefs systems, or divide people into social groups and encourage power relationships. If we remove the layer of white paint, we expose the material and structure – concrete, metal, gypsum and so on – underneath. The important point in this observation made by Wigley (2001) relative to the thinking of Frascari, but also to the overall debate about the everyday tectonics,

is from my point of view that perhaps it makes no sense to cling on to neither the white wall as a 'neutral' element, nor the idea of a structural honesty as both are perhaps as much a modern kind of ornamentation and decoration?

However, following the conceptual notions developed by Frascari, it makes no sense to try and reintroduce facts, pictorial symbols and direct information on food myths and rituals to begin fostering thinking and storytelling establishing a better dining room architecture either. Instead, if we accept the neuroscientific foundation and cognitive understanding of architecture Frascari leans on in much of his work, I think it is possible to imagine that an inseparable socio-cultural bond exists linking the interior architectural scenery of a hospital and the patient meal situation. Based on my experiences with the projects at Aalborg and Vejle hospitals as well as the above theoretical framework, I would like to argue that the interior architecture framing a meal situation is ideally ordered and shaped by the underlying traditions (myths and rituals) governing our food culture. Together, the articulation – or the storytelling – of these myths and rituals create an entire meal scenery, from the smallest architectural scale of laying the table with plates, bowls and glasses, into the spatial arrangement of table and chairs, to the enclosing dimensions of wall, floor and roof and their decoration stages the meal situation and influence the meal experience. Together they create an atmosphere. Consequently, I find that the lesson to be learned from Frascari's work in the search for an everyday tectonic expression, must be that architectural quality lies not in the specific choice of a style or scientific evidence established, but could be found in the more mystical and poetic knowledge of the past, as well as the ability of the architecture to spark our curiosity and wonder. Hence, that architectural quality is constructed in the balancing the doubleness of both structure and art simultaneously.

So, what about the question of how Frascari's theoretical framework relates to the theme of everyday tectonics, as well as how it can be brought into applicable principles? My answer is that the theoretical writings and thinking developed by Frascari combine the basic idea that the social and cultural values – the mythic and ritual dimensions – embodied in the built environment are important for how we experience and perceive architectural quality; that our actions, the everyday rituals we perform, and how the architecture in almost theatrical manners *stage* these actions are crucial for what we experience, feel and remember – and how that kind of tectonic expression is an important *ethical aim* of architectural construction as well. Thus the significance of Frascari's theory for the understanding of everyday tectonics is in my opinion how it potentially links the order and shape of interior architecture with hospitality in the cultural and anthropological understanding of a communal forum, like for instance the situation of a meal. In that way, I find that

Frascari's theory provides central clues on architectural perception and creation which elaborates on some of the tacit and symbolic dimensions of how the everyday scenery of a given built environment is both a phenomena and a representational image supporting our collective cultural memory. My point is, as argued for in Tvedebrink, Fisker and Kirkegaard (2013), that the scene of the dinner table has the potential of becoming a significant interior element in the staging of a communal forum during mealtime. In many cultures the dining table or meal situation is at the centre of our development and growth. Here we learn about our culture through different rituals, traditions and habits all relating to certain myths. But, the scene of the dinner table is also a unique possibility at a hospital for gathering patients around and fostering a situation of relaxation and a sense of community. During mealtime the patients have time to talk and interact without necessarily having to think about or being reminded about the downsides of being hospitalized. Thereby, the eating environment becomes a spiritual escape creating a sense of meaning in a very chaotic and emotionally stressed life-world. With these everyday ritual acts we create our own place in the world and situate ourselves as members of a community and larger society. But we can only do so if the framing architecture allows us to; if the interior through its physical construction supports our everyday actions and invites for a mental constructing. Therefore the role of the everyday tectonics is highly relevant in staging that scene of the meal to create the double sense of 'freedom' and 'belonging'. With Frascari's conceptual notion of *storytelling*, built environments both carry material evidence of our cultural history, but also communicate valuable moral and ethical knowledge which informs and enriches our everyday experience; which again allure our minds and compel us to think.

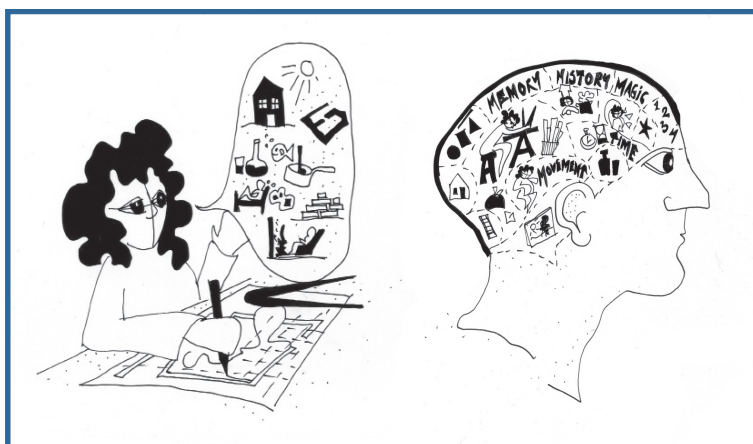


Figure 4
The architect as storyteller sparking our memory and imagination. Drawing by author, adopted from Frascari (2011, pp. 37, 65).

As demonstrated with the case of Aalborg Hospital, there is a huge risk that contemporary architectural practice involved in the everyday tectonics of hospitals are about to forget – or perhaps overlook – the cultural importance and spiritual effect of remembering myths and rituals when constructing and construing architecture. But I think the proper answer on the role of everyday tectonics concerns *more* than material studies, joints between building elements and their composition, more than the organisation and disposition of technical features in the building. The applicable principles are not necessarily physical such as stone or wood, technical or structural as geometry and constructions, not digital imaging, nor historical such as symbols and decoration. Instead, as I have argued for in the above, the conceptual notion of storytelling suggests that the ‘principles’ of everyday tectonics must also incorporate carefully woven cultural, social and spiritual intentions. Everyday tectonics, in my opinion, is as such not only a tectonics of construction, but also a tectonics of construing. Nonetheless, as the history of monuments, museums and memorials show us, the value of myth and ritual communicated directly tend to fade away or lose their significance over time, as people forget. Following the thinking of Frascari we need to broaden the meaning of *how to tell stories* – of how to deal with myth and ritual in everyday architecture. The applicable principles of everyday tectonics manifest themselves in a *choreographic* architecture and how we use *interpretations*, *abstractions* and *narrations*, such as organising time, space and artefacts. To exemplify this choreographic architecture, Frascari – and I agree – points to how important architects such as Tadao Ando, Peter Zumthor, and Carlo Scarpa in their own ways are not afraid of moving beyond principles of ‘honesty’ and optimised structure into layers of spirituality, myth and ritual. They deliberately use dynamic and temporal gestures to create a specific atmosphere and invite for certain human actions, social interactions and deep thinking. In the hospital, I think, we should perhaps not be so afraid of melting cultural memories together and letting personal stories blend or cross each other in the attempt to invite for more profound everyday actions and socio-cultural experiences. So, even though Frascari’s writing and thinking was not specifically aimed at the everyday tectonics of patient eating environments, and he did not provide the answer for how we in practice use the element of construing, his notion of storytelling offers an interesting perspective to contemporary developments in hospitals, as well as tectonic studies in general. With Frascari’s conceptual notion on storytelling and construing ‘details’, it becomes evident how memory and imagination, together with myths and rituals are important layers in constructing architectural quality – also in everyday architecture such as hospitals.

Conclusion

The history of architectural theory and practice shows that there are many ways of *constructing* architecture. The discourse on tectonic

design is just one of them. In a Canadian hospital more than 2 years ago, Marco Frascari reminded me of that and more importantly about the significant role and ethical aim of the architect in *construing* a happy everyday life. Through a series of very personal talks and many hours of reading his texts in his little library together with the other PhD students, he gave me the chance to recall that significant role. In line with this thinking, the purpose of this paper is to offer an alternative perspective to the ethics of everyday tectonics related architectural environments such as hospitals, and move beyond what I have called visual and structural genius. I chose to do so, based on a re-reading and *remembering* of the theoretical work of Marco Frascari as well as the specific case of Aalborg Hospital. My motivation behind this remembering was to question the contemporary way of handling the interior and architecture at hospitals as static 'form' and 'style', as well as 'honest', self-referential structure. And my hypothesis was that the work of Frascari might prevent important knowledge on *storytelling*, and the significance of *myth* and *ritual* in architectural design, from being forgotten in future discussions about the role and ethics of everyday tectonics.

Looking back at my re-reading of the thinking and writing of Frascari, I think the most important perspective in his conceptual notion of storytelling is the key point that architectural environments often have more than one layer – that the ethical aim of architecture is both *constructed* and *construed*. With the case of Aalborg Hospital and the challenge of improving patient eating environments, I have in this paper examined the options and possibilities that lay in the mix of physical construction and mental construing. With these examinations and the knowledge gained from the above explorations, I would therefore like to suggest that Frascari's conceptual notion on storytelling can be used to investigate new possibilities where the remembrance of myth and ritual foster an *imaginative* approach *inviting* for social and collective everyday actions, rather than trivial architecture in a static, self-referential and mere physical way. In my point of view, Frascari's work and thinking thus offers some important points not only for the present architects of the 21st century, but for the future of the architectural discipline and for how we define architectural quality. So, today, when we discuss the discourse of tectonics and how it can be applied, the everyday challenges of hospitals, schools and the like I think that 'Marconic perspective' is the most important thing to remember.

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