ملاذ

MALATH

MENTAL HEALTH COMMUNITY CENTER

MARYAM ALSAYED
IDES 401
SPRING '22

TABLE OF CONTENTS

CONCEPT STATEMENT

A recreational community center that is designated for those with psychological disorders where they explore healing through communicating, sharing, and partaking in different activities selected for them.

ABSTRACT

This proposal aims to address the social stigma surrounding mental disorders amongst adults in the Gulf, particularly in Qatar, as it is an overlooked topic in the Qatari society. Studies were undertaken in the Qatari society where it has been confirmed that a great number of people do not know enough about mental health, its symptoms, and the stigma associated with it.

The public stigma of mental health is when an individual gets stereotyped, rejected, and avoided with fear by the society since people often connect mental disorders with violence as the media has portrayed. The Qatari society stereotypes mentally ill people and view them as dangerous individuals—making others place social boundaries in fear of dealing with them. As a result, people with mental problems avoid visiting mental health specialists to get treated in fear of being stereotyped and neglected by society.

Stigma is influenced by an individual's beliefs and culture as it has been confirmed that there is a connection between culture and how it stigmatizes certain topics, making the stigma towards people with mental illness high in Qatar due to the cultural and religious context. These religious and cultural beliefs influence how people view mental illness in the Qatari society, generating this stigma about people with mental illness. Arab cultures and Muslim countries mostly link mental illness with lack of faith and religion. This makes society consider people with mental illness as individuals who are possessed by evil spirits. Or on the other hand, it can be seen as a test or a punishment from God for one's sins.

Along with this social stigma, people with mental illness struggle with educational, professional, and residential discrimination. The stigma surrounding people with mental illness has a main concern, which is discrimination. A study by Kehyayan has proven that people with mental illness suffer from social discrimination. For instance, relationship wise, where they face problems with having friends, intimate relationships, or even maintaining a bond with their family. Occupational wise, where they struggle with finding work. Because of this discrimination, people with mental illness hide their illness whenever they look for a job, education, or relationships.

The stigma and discrimination surrounding people with mental disorders have been a barrier between the patient and the treatment making 75% of people with mental disorders avoid seeking the help of a psychiatrist for treatment. Consequently, leaving innocent individuals to suffer from both, social stigma and the illness itself, creates the main obstacle which lies in the decision of visiting a mental health institution.

It is important for society to stand by people with mental disorders, not against. Kehyayan has proved that society's support takes a huge part in improving the quality of the life of people with mental disorders. A conducted research showed that negative social interactions towards people with mental disorders has an undesirable outcome—putting them in a depressed and stressful mood, causing them to relapse, as well as destroying their self-worth, which is formed from everyday rejections. As a result of this stigma, life gratification becomes low amongst people with mental disorders.

The nature of the Qatari culture and traditions neglects the idea of mental health clinics and judges whoever steps foot in such institutions, while it must learn how to differentiate between madness and mental disorders. Hence, to diminish the stigma surrounding mental health and encouraging therapy. Raising awareness about mental health in Qatar can help people seek help and treatment before the problem gets worse.

RATIONALE

There is a social stigma, that has been a barrier for help-seeking, surrounding people with mental disorders in Qatar. Islamic countries perceive mental disorders as a punishment from God and that people suffering from mental disorders are being controlled by demons. These stereotypes made it hard for people with mental disorders to talk about it or even get treatment in order to avoid the discrimination. Considering Qatar is a conservative Islamic country, people with mental illness find it hard to live without having to hide their mental illness. A study has shown that women in Qatar viewed people with mental disorders negatively where they believed that their disorders are linked with evil spirits. As a result, they tended to avoid dealing with people with mental disorders. Consequently, people with mental illness hid their disorders in fear of being stigmatized by their own society.

It is important to neglect the stigma surrounding mental illness due to many reasons. Not only does the stigma revolve around people with mental illness, but it can also extend to their parents or relatives as what is called Courtesy Stigma. Courtesy Stigma is a kind of stigma that is transferred to the parent or relative of the child with mental illness (Stigmatized child) because of the blood relationship between them. Unfortunately, this leads people to be ashamed and disgraced to be related to someone with mental illness. Because of the stigma, some parents avoid seeking mental health service for their children with mental illness. Moreover, another negative aspect surrounding mental health stigmatization is discrimination. An undertaken study in 27 countries demonstrated that people with mental illness undergo discrimination in various aspects of their life. These come in the form of maintaining relationships with others or finding a job. Besides, discrimination comes in a form of avoidance, where people avoid interacting, making friends, socializing, living closely, or even working with someone with mental illness. Also, discrimination is illustrated in the reluctance to help, which affects the willingness for people to participate in the economic resources that lead to the recovery of mental illness. As a result to this discrimination, some people tend to hide their mental illness. In addition, Stigma stands in the way of early recognizing the illness and treating it right away. Stigma is a huge barrier for help-seeking. Kehyayan indicated that stigma is ranked as number 4 in help-seeking barriers. Another study in 17 countries illustrated that 2/3 of the population suffer from a mental illness without getting treatment. A study proved that people with the need to get help avoid getting

it due to the stigma, which made them concerned about what people would think of them. This pushes people to rely on themselves to be better. As a result, it has been concluded that the reliance on self, lack of emotional capability, and the stigma surrounding help-seeking, stood in the way of treatment.

It is obvious that people disconnect mental illness with other health conditions, making the burden of mental disorders to be underestimated. 14% of Mental disorders have a significant contribution to the global burden of disease around the world because of the chronically disabling nature of some mental illnesses. The risk of untreated mental illnesses lies in association with risk factors for chronic diseases. For instance, smoking, reduced activity, obesity, poor diet, and hypertension. It also affects other health conditions such as cardiovascular and diabetes. At the Primary Health Care Centre in Qatar, which is a health care corporation, depression is the most prominent, causing somatic problems and anxiety disorders frequently. Mental disorders are also great contributors to injuries, whether they are intentional or not, and raise the risk of infectious and non-infectious diseases. Making the statement that "there can be no health without mental health" accurate. Ghuloum asserts that cases of depression in Qatar are especially higher than in the rest of the world. 36.6 percent of the entire population have reported having depression at one point in their lives. Other studies indicate that at least 20 percent of the population is currently suffering from mild or strong forms of depression. Despite the increase in cases of depression in the country, very few people actually seek medical care for their illness. One of the primary reasons this level of disregard for mental health is the reduced awareness within the nation and the stigma associated with mental disorders.

The absence of awareness has produced high levels of stigma linked with mental health which is causing a wrong misconception of mental disorders, where people tend to view it with disgrace. This later results in low social performance, occupation, and quality of life. All of this led to unemployment, lower levels of education, co-morbid substance use disorder, physical ill-health, and exposure to potentially traumatic events or postpartum depression are considered universal demographic and psychosocial risk factors for anxiety-depression.

APPROACH

Despite the increased awareness of mental health globally, people with mental illness are still stigmatized in Qatar. According to a study by Ghuloum, the prevalence of mental disorders in Qatar was high at 36.6%. Despite the prevalence of mental health conditions in the country, most people fail to seek medical health assistance due to the stigma surrounding mental health in the country. The purpose of this study is to examine the kinds of stigma associated with mental health issues, by evaluating the opinions of experts and comparing their responses to existing literature and precedent studies that have examined the case of mental health stigma in Qatar. Interviews are going to be a primary research objective, whereas literature review and precedent studies will be a secondary research objectives.

The first, research approach that will be adopted is interviewing experts, such as physicians, doctors, and mental health professionals like therapists who reside in Qatar. The interviews will use open-ended questions to give the respondent enough time to express their view on the main causes and solutions to overcome the stigma. The opinions of experts will be a valuable source for the qualitative data that the research will rely heavily on. Also, it is necessary to recognize the undertaken programs in the country for the sake of raising awareness in Qatar and how much public figures have talked about people suffering from mental illness.

Also, it will be prominent to compare what former researchers have written about the issue to the response of the experts in the field to further understand the findings.

The study will also focus on literature review and examining scholarly articles that covered mental illness stigma in Qatar and the reasons behind this stigma. I will be using keywords like: stigma, mental illness, Qatar, origin, neglection...etc. In addition, reading more about the causes of the stigma and how to neglect the stereotypes linked with mental disorders. The articles will be mostly from Google Scholar and libraries in Qatar, such as: Virginia Commonwealth University Library and Qatar National Library.

Finally, precedent studies of mental health institutions, spas, and social clubs or community clubs will be undertaken to reinforce the research. This will help in understanding the surrounding environment that is beneficial and comfortable for people with mental disorders and what design solutions where taken to create a healthy environment for these people. Precedent studies are fruitful in terms of new design solutions that could help. By undertaking these steps, the research will provide a solid reason for the existing stigma and propose recommendations on how the issue can be resolved.

LITERATURE REVIEW

Introduction

As mental health awareness becomes an area of interest among most scholars around the world, reviewing the different ways in which various cultures deal with mental health has become increasingly important. In the western world, most of the mental health issues are treated with compassion, care, and medical interventions. The west has been active at spreading mental health awareness, calling for compassion, and open discussion on the issue to shed more light on these problems. However, various other cultures around the world treat mental health with a bit of suspicion, criticism, or superstition. For instance, some cultures attribute seeking medical attention for mental health as weakness, while others stigmatize people who do. In the Islamic culture, mental health cases are viewed from a superstitious perspective, attributing such conditions to demon possession, thereby discouraging most of the people suffering from the condition to seek medical help.

Reasons Behind Mental Disorders Stigma

In Qatar, one of every five people have suffered from mental health issues at one point in their lives, but only 25 percent of these individuals have gotten medical assistance. The primary reason for this outcome is that mental health education and awareness is relatively low in the country, and the negative stigma attached to these conditions tend to cause people to delay or avoid seeking medical help. Another thing that makes mental health conditions in the Arab region worse is the demonization of people suffering from mental disorders. From a religious perspective, mental health conditions are viewed negatively. People in Qatar associate the mental illness with religious superstition. Considering Qatar as a highly religious Islamic country, it attributes mental health issues to Jinn (evil spirits), or Satan. Therefore, people who undergo these conditions tend to suffer in silence for variety of reasons. Most of them struggle with the fact that seeking medical assistance will lead them to being banished, avoided, and even potentially mistreated for being the victims of their conditions. Therefore, few people are willing to seek medical help. In a study by Britons mental health issues were assessed by Qatari residents as a punishment from God, or the work of Satan. Studies also indicate that the view of mental health in Qatar is extremely negative where it showed that women associated mental illnesses with evil spirit possession, and tended to avoid speaking to people suffering from mental illnesses in fear that the spirit might possess them as well. Another form of stigmatization that is prevalent in the county is the simplification of depression, asserting that it is just stress, and the person can get over it in a short while. Cases of stigmatization of mental health in Qatar are prevalent for a variety of mental health disorders, such as depression, schizophrenia, autism, and other disorders that result from scientific explanations but are perceived as religious phenomena, leading people to avoid pursuing any medical assistance when suffering from the condition.

The Downside of Mental Disorders Stigma

Stigmatization is when people are distinguished from the normal population and treating them differently by believing they are socially unwanted. The stigmatization of people suffering from depression in Qatar is overwhelming; associating mental illnesses as curses or religious burdens. Stigmatizing people with mental disorders can be extremely negative, because it contributes to the worsening of the condition by promoting higher levels of isolation of the person with mental illness, resulting in suicidal thoughts, self-medication, self-harm, and other unwanted outcomes, which can dramatically result in a worse situation instead of helping the person. This stigmatization further drives people into deeper isolation, resulting in worsening the conditions that affect these individuals. Likewise, in fear of what people might say, most people with mental disorders choose to suffer in silence and maintain their position in the society. Others are likely to use traditional ways to fight the condition, due to the misinformation that curses, evil spirits, or demonic attacks are the reason behind these mental disorders. Moreover, untreated cases of mental health conditions lead to increased risk for developing medical conditions, leading to worsening the cases. Evidence indicates that at least a third of the people suffering from a mental health condition in Qatar have developed other comorbid condition as well. Most of the common comorbid mental conditions in Qatar include depression (18.3%), anxiety disorders (17.2%), impulse control conditions (18.3%), mood disorders (16.9%), personality disorders (14.1%), and separation anxiety disorders (15.2%). Globally, depression and anxiety have received much attention, promoting their awareness and acceptance by the public as common conditions. Nevertheless, much stigma surrounds other mental health conditions such as bipolar disorder, schizophrenia, and other common personality disorders.

Prevalence of depression and anxiety is common in Qatar and the Gulf countries due

to the stigma of seeking medical help, with the rates being as high as 22.5% of all mental health conditions. Therefore, stigmatizing people suffering from any mental health condition can have unfortunate outcomes for their health in the long-term. Few people in Qatar understand the science behind the mental health problems. Referring to religious and superstitious causes as the reason behind mental disorders, makes people suffering from mental health conditions seek spiritual medications or traditional healers as opposed to seeking medical assistance to overcome their condition. Therefore, the stigma associated with mental disorders not only cause people to avoid seeking medical assistance, but can rather worsen the conditions when the patients seek alternative, traditional, and weak cures. According to Haque 66% to 75% of people diagnosed with mental illnesses do not seek mental health assistance due to the stigma associated with the condition. For instance, mentioning that one is seeking therapy becomes the main concern for people, since people who argue that they are seeking therapy are more likely to be crazy, or mentally unbalanced, which most people tend to avoid to stay away from being labeled in this way. The lack of programs about mental health treatment and the general lack of awareness of the population about mental health conditions have worsened the stigma associated with mental illnesses in the Arab world. In addition to these negative and unwanted stereotypes, people suffering from mental illnesses also suffer extreme oppression and discrimination from the rest of the population. People with mental illnesses find it hard to keep friends, maintain intimate relationships, find employment, and they even lose the support and love of their family members. Therefore, stigmatization does not only lead people to hide their mental health conditions, but also has negative effects on the individuals within the society in terms of their ability to have a normal life.

Why Is Mental Health Literacy Necessary?

Mental health awareness is needed in Qatar for a variety of reasons. As Qatar develops and becomes an economic capital in the Gulf, the need for increased attention to mental health treatment has become increasingly necessary. Traditionally, mental health care has been considered as part of secondary care. However, a new proposed plan involves integrating mental health treatment in hospitals, which can increase the access to mental health professionals, in a way to normalize and abandon the stigma and misinformation that surround mental disorders. Although some people

are aware that mental health conditions such as anxiety, depression, and ADHD are prevalent in the region, few people know that these conditions can be treated. Evidence indicates that there are many challenges associated with mental health management in Qatar. Qatar ranks as one of the lowest in terms of its mental health professionals per 100,000 people. The high prevalence of mental health issues, combined with increased stigmatization of people suffering from these conditions, requires the country to increase awareness to ensure that psychiatrists have enough patients to treat. Some argue that the low rate of psychiatrist result from fewer patients needing psychiatric help, while others believe that the low rate of mental health awareness and the great amount of stigmatization have affected the rate of people who seek mental health help. The level of awareness of untreated mental conditions is extremely low, even among some of the most educated individuals. A report by Abul Salam indicated that the rate of mental health awareness even among college graduates in Qatar was extremely low.

The Effects of Covid-19 on Mental Health

One of the things that has increased the need for mental health awareness on a global scale is the Covid-19 pandemic. During the pandemic, most people sunk into depression and experienced anxiety, increasing their tendency to handling the mental health conditions. The pandemic also proved that most of the comments about the stigma associated with mental health conditions were flawed, which therefore played a role in increasing people's willingness to seek medical assistance for a variety of mental health conditions. Nevertheless, despite the increase in willingness, the lack of resources to provide for people with mental disorders indicates that the country still has a long way overcome the challenges of mental health issues.

Neglecting the Stigma

Raising awareness can be achieved through the education and public awareness about the prevalence, causes, and treatment, of various mental health conditions. Without this, despite Qatar's efforts to create more centers where people can have their mental health conditions treated, few people will be willing to seek treatment. Another approach that can be used in promoting mental health awareness is social media. In recent years, the use of social media has increased dramatically throughout the gulf. Public health campaigns on mental health can be prominent in increasing awareness about the conditions, reducing the stigma associated with seeking

medical assistance, and eliminating the misinformation that is associated with the country's religious beliefs about mental health. Since most people often use social media, using these platforms to promote mental health can be effective in educating the public about the need to seek medical assistance, reduce the stigmatization, and promote compassion for patients suffering from these conditions. Also, introducing the concept of mental health in the classroom is potentially a possible solution that can fight the stigma associated with mental health illnesses in Qatar.

Conclusion

Qatar's current state of mental health investment is extremely low. The country falls far below the average in terms of the mental health services it offers. Neglecting the stigma is the first step that should be taken. Changing the attitudes of people is one of the most important steps towards solving the situation, reducing the stigma, and eliminating the negative effects associated with stigmatizing people with mental illness.

PRECEDENT STUDIES
AEICHI KOREAN MEDICAL CLINIC

Figure 1: Lobby

Designer: Seog Be Seog

Location: Yongin, Gyeonggi-do, Korea

Date: October, 2018

Category: Health

Area: 179 m²

Aeichi Korean Medical Clinic is a small practice clinic that offers its patients traditional Korean medical treatments.
The aim of the design was to create a space where the visitors or patients who come for treatment would get a sense of peace and comfort and will feel the ability to talk about their health problems freely. "I started designing hoping for the space to become a place where the patients who come to the medicine clinic feel peaceful and are able to talk about everything openly." Said the studio.
The building provides a nostalagic experience for the visitors. It reminds the visitors of their childhood memories and home as it conveys emotions of the old neighborhood of Korea
There were 3 main concepts that the design originated from: simplicity, communication, and familiarity.

Figure 2: Hallway

"I had a long talk when I first met with client. We continued to talk many times after deciding to work together, and client shared many stories. At that time, the nature of his job and patients were the main topics of his stories. I felt that he wanted something of his to be emphasized with another person and also himself empathize something of another person." Said the studio.

That is when the realization about the importance of the relationship with people when it comes to designing spaces emerged.

"I think that the medium that connects everything that is done in relationships is empathy." Said the studio.

Therefore, what derived the design is the human being and his needs, what makes people comfortable and at peace and able to talk freely and fearlessly.

Figure 3: Lobby (Covered Pipes)

Figure 4: Skeleton Shelving System

Figure 5: Hallway

Simplicity: The space is free of superfluous decoration (Figure 3) and kept only the functional structures. The studio avoided florid language in their design and maintained a bare structure so the clinic should be considered as simple and concise.

Devices for Communication: To create an open space that encourages communication between patients. An open plan, or open space, was adopted when planning the interior by having opened walls (Figure 4) and minimal number of doors and simplifying the structure. The open section (figure 1) created a welcoming and communicative atmosphere by allowing natural light to penetrate within the space and through the furniture.
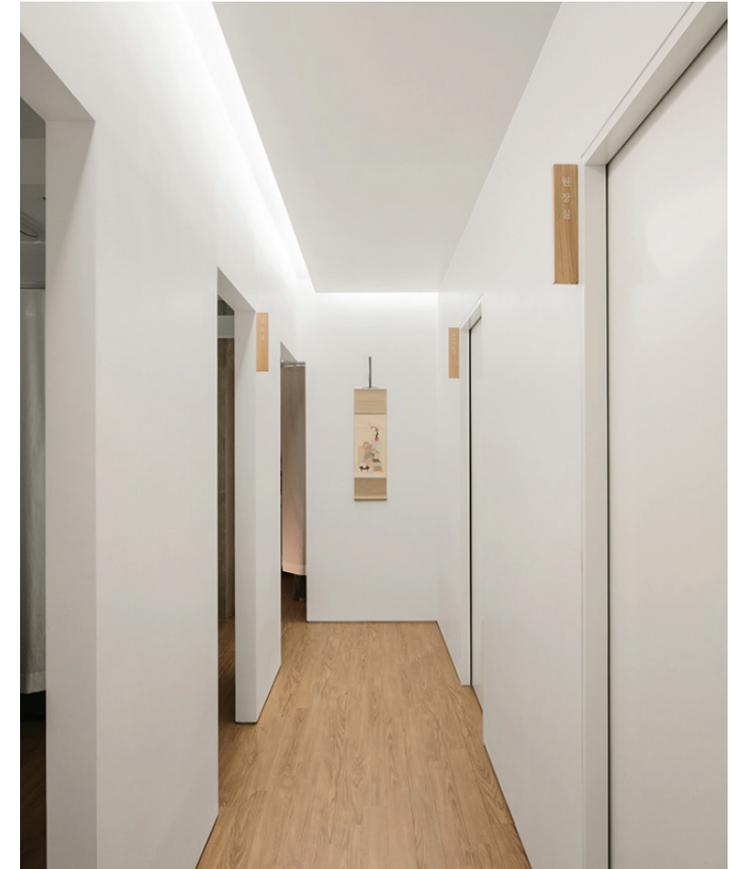
Familiar and Warm Materials: The studio avoided using new materials and stuck with the familiar, warm, and friendly materials. "New and interesting materials continue to emerge, but I thought familiar and friendly materials corresponded better with the message of the clinic," said Seog.

1 ENTRANCE

2 LOBBY

3 TOILET

4 DISPENSARY ROOM

5 TEA MAKING ROOM

6 CONSULTATION ROOM

7 RECEIVING AREA

8 PHYSICAL EXAMINATION ROOM

9 PHYSICAL THERAPY UNIT

10 STORAGE

11 DIRECTOR'S ROOM

12 DOCTOR'S OFFICE

13 SPECIAL TREATMENT UNIT

Figure 6: Floor Plan Highlighting Simplicity and Devices for Communication

Figure 7: Skeleton Shelving System

The lobby encourages patients to communicate and feel more connected to one another. This feeling of openess was maintained through the the open-plan waiting room design and the open kitchen. As well as the exposed-skeleton-shelving-system (Figure 7) that allows the natural light to travel through it and the glass wall that is used to open up the space and allow the penetration of natural light.

1 ENTRANCE

2 LOBBY

3 TOILET

4 DISPENSARY ROOM

5 TEA MAKING ROOM

6 CONSULTATION ROOM

7 RECEIVING AREA

8 PHYSICAL EXAMINATION ROOM

9 PHYSICAL THERAPY UNIT

10 STORAGE

11 DIRECTOR'S ROOM

12 DOCTOR'S OFFICE

13 SPECIAL TREATMENT UNIT
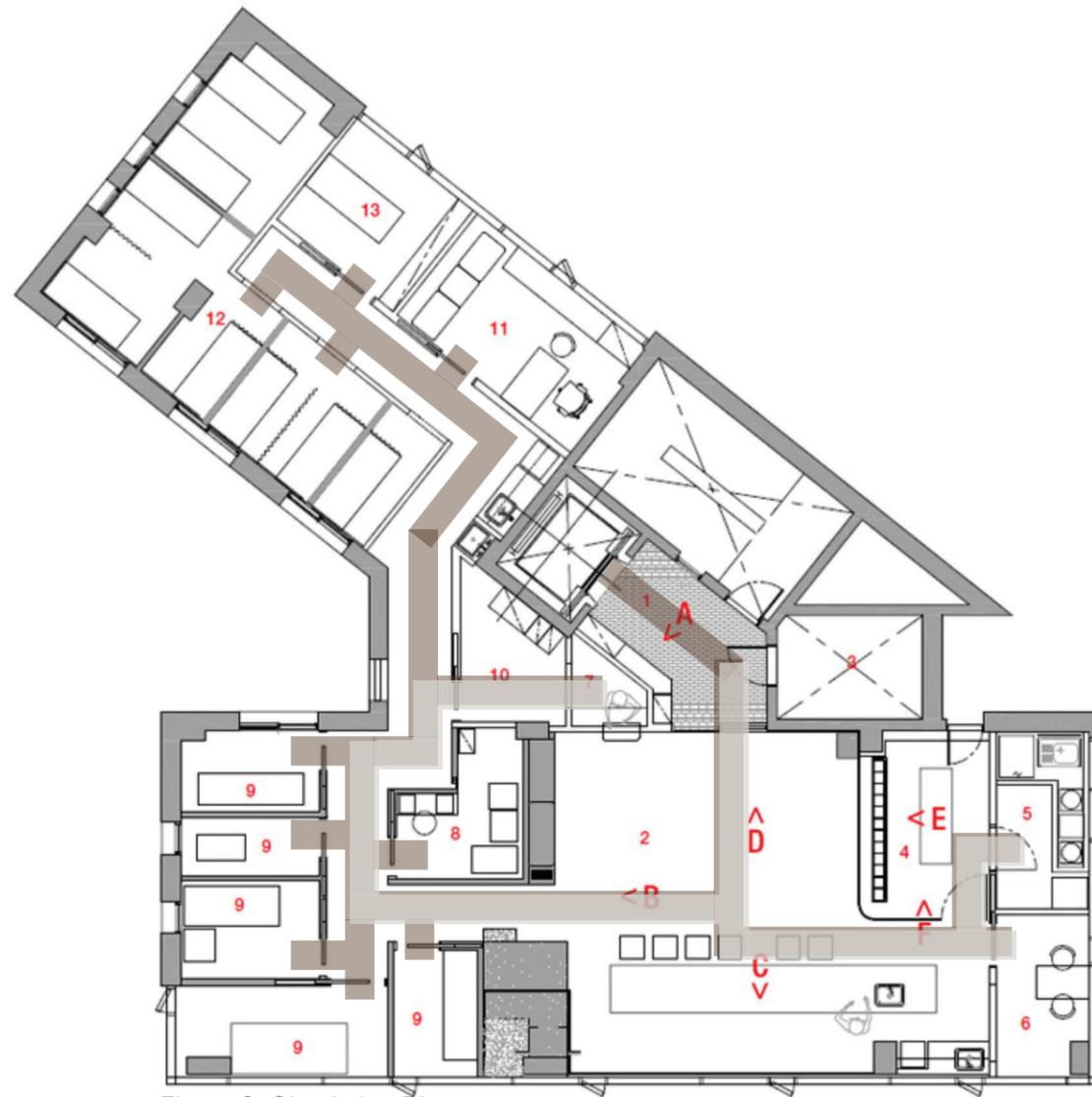
Figure 8: Circulation Plan

The general circulation is very clear as the walls and design of the space guides people around without confusing the visitors. Everyone will have to come acrooss the lobby when accessing the floor. with the general circulation.

The paths leading to Support Areas blend in with the general circulation.The Support Areas are located nearby the entrance so the staff can access it directly when entering the floor (Figure 8.)

1 ENTRANCE

2 LOBBY

3 TOILET

4 DISPENSARY ROOM

5 TEA MAKING ROOM

6 CONSULTATION ROOM

7 RECEIVING AREA

8 PHYSICAL EXAMINATION ROOM

9 PHYSICAL THERAPY UNIT

10 STORAGE

11 DIRECTOR'S ROOM

12 DOCTOR'S OFFICE

13 SPECIAL TREATMENT UNIT
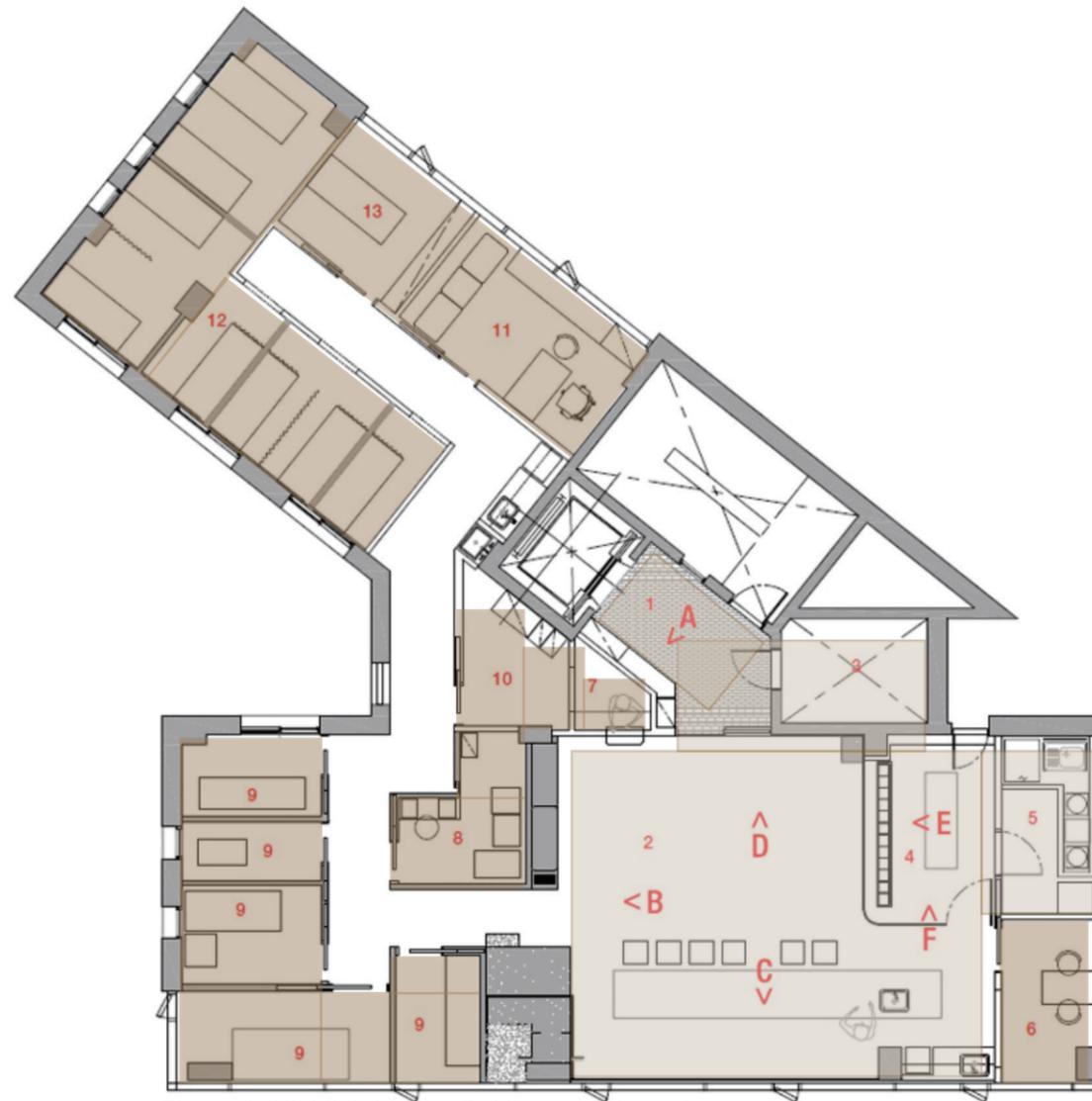
Figure 9: Highlighting the Public and Private Areas

The public spaces are placed in the middle of the floor plan. So as soon as one enter the Clinic they will come across the Lobby. On the other hand, the private spaces are branched around the public spaces. The right of the plan has all of the public room and when going when going to the left people would go through corridors that lead to the private rooms where patients get their treatment or consultation (Figure 9.)

1 ENTRANCE

2 LOBBY

3 TOILET

4 DISPENSARY ROOM

5 TEA MAKING ROOM

6 CONSULTATION ROOM

7 RECEIVING AREA

8 PHYSICAL EXAMINATION ROOM

9 PHYSICAL THERAPY UNIT

10 STORAGE

11 DIRECTOR'S ROOM

12 DOCTOR'S OFFICE

13 SPECIAL TREATMENT UNIT

Figure 10: Highlighting the Support Areas

The support areas (Figure 10) take a small part of the whole plan considering the clinic is already small in scale which means it does not need as much support areas as a large clinic or hospital. The support areas, which are the: toilet, dispensary room, tea making room, receiving area, and storage are all located in the public space.

1 MAINTAIN EXISITING FINISH 2 FINISHING BY INDICATED COLOR PAINTING 3 PILLAR: MAINTAIN EXISTING FINISH / BUILT-IN CHAIR CUSHION : INDICATED FABRIC / BUILT-IN CHAIR : FINISHING BY OIL STAIN ON INDICATED M.D.F (KNOTLESS) 4 GRANITE STONE PLATE (RUBBING) 5 MAINTAIN EXISTING FINISH / INDIRECT LIGHT WING : FINISHING BY INDICATED COLOR PAINTING / FINISHING BY INDICATED COLOR PAINTING 6 PIPE COVERING LATHE 7 CLEAR TEMPERED GLASS 8 REINFORCED DOOR 9 S'STL (H/L) CIRCULAR PIPE 10 STORE RACK : FINSHING BY OIL STAIN ON INDICATED M.D.F 11 S'STL (H/L) FLAT STEEL FINISHING / S'STL (H/L) FINISHING 12 APPOINTED VENEER FINISH
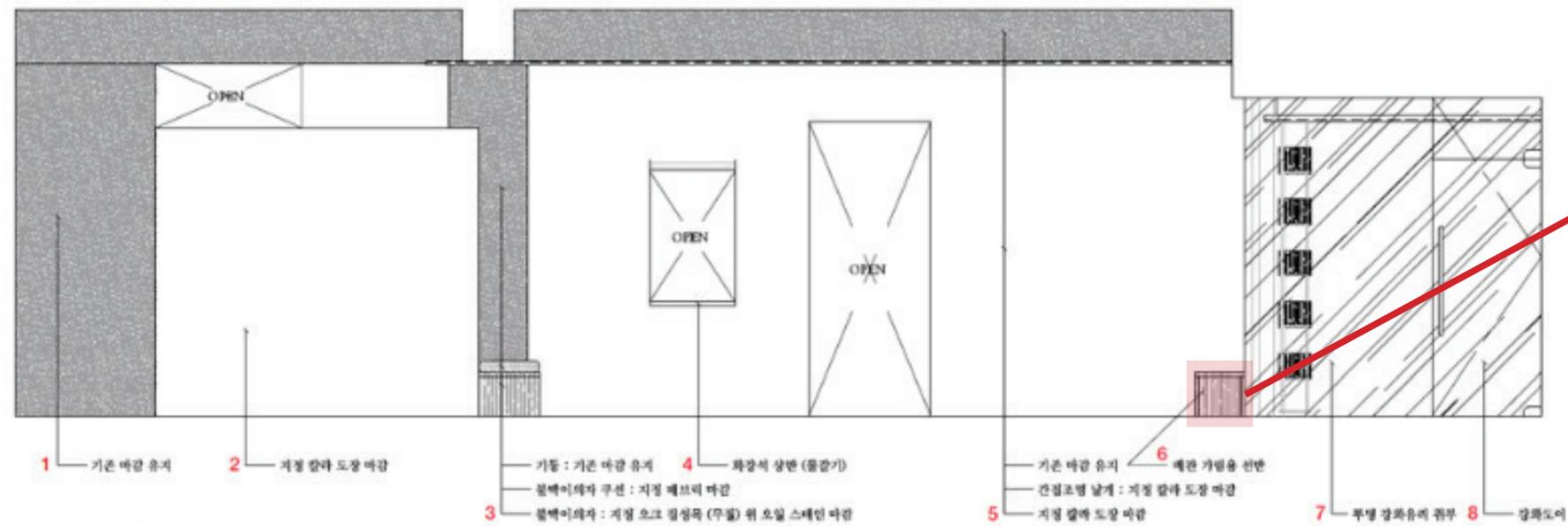
Figure 11: Lobby Elevation

Figure 3

Wood sheets (Figure 3) are used to cover the building systems (pipes) in a way to maintain the beauty of the space and avoid the exposed wires that would give an unpleasant look to the minimalistic interior. Moreover, these wooden sheets covering would serve as a built-in would serve as a built-in chairs for the waiting area. This technique is beneficial to help maintain a clean, and less-cluttered interior.

Figure 12: Lobby (Window)

Figure 13: Timber Frame Screens

The windows (Figure 12) are covered with translucent timber-frame screens (Figure 13) that filter the direct sunlight glare and allow the daylight to paneterate into the interior without causing an unwanted glare.

Figure 14: Hallway

The Aeichi Korean Medical Clinic was a successful project. It has been nominated for several awards and won some.

The design message was conveyed successfuly within the decisions that were taken, the simple open plan encouraged communication and allowed natural light to penerate through the space.

This project falls under the same umbrella of the Thesis as it focuses on human-beings and their communication. The design was derieved by the relationships between people and embraced communication between them. Overall, it was successfull in promoting communication, simplicity; by using different materials to conver the unnecessary building systems.

GROßWEIKERSDORF COMMUNITY CENTER

Figure 15: Grossweikersdorf Community Center

Designer: Smartvoll

Location: Grossweikersdorf, Austria

Date: 2020

Category: Government + Health › City Hall Community Center

Area: 3701 m²

Grossweikersdorf Community Centre is designed to pump life into Grossweikersdorf village. The building carries a town hall, clubhouse, and a medical practice all in the same building making the centre filled with lively activities. "This new heart of the village opens up as an inviting and welcoming gesture. Citizens and visitors alike will not only feel welcome, but also feel encouraged to make use of the building." simplicity, communication, and familiarity.
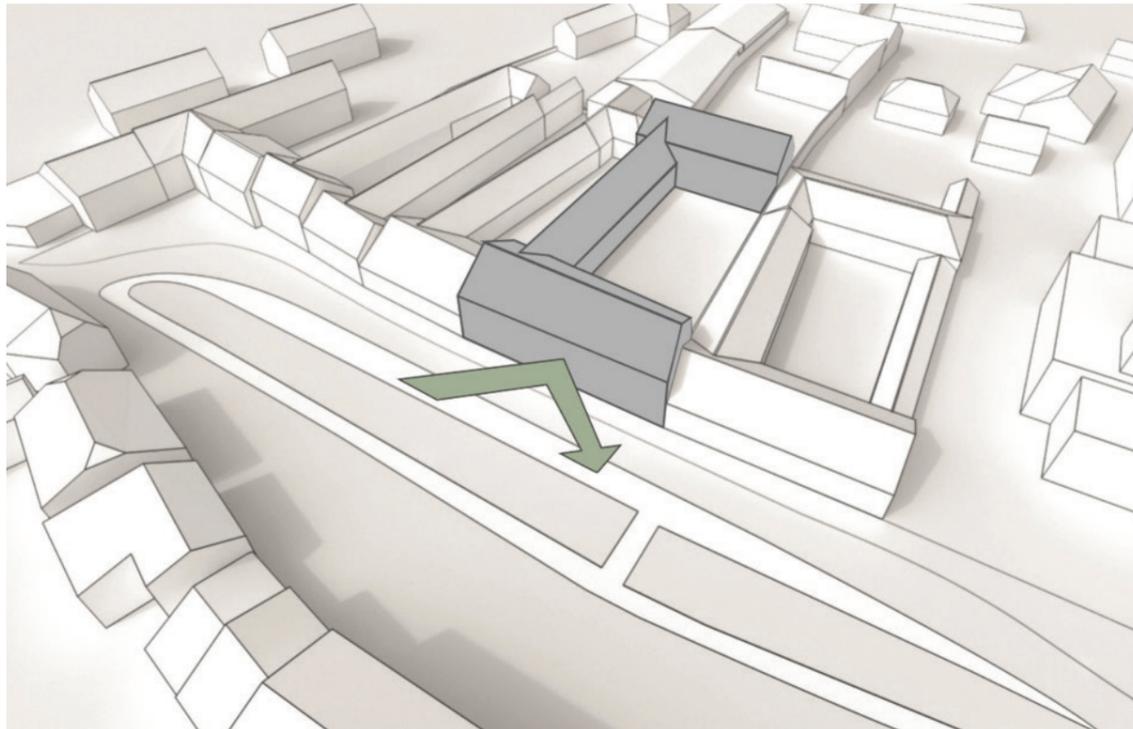
Figure 16: Plan Development Part 1

Figure 16: Plan Development Part 2

The exisitng building structure (Figure 16) was enclosed which gave an unwelcoming feeling and people would have to walk around to find the way in. Hence, it did not have much crowd.
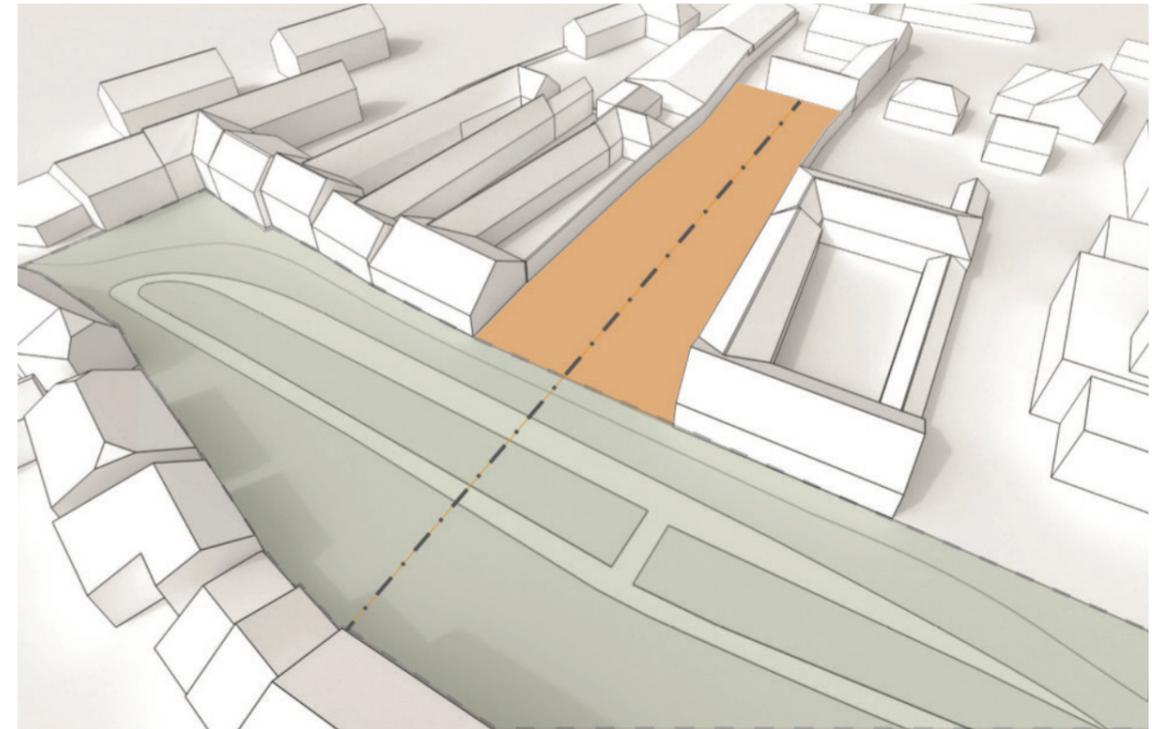
To allow people to see the building and walk to it the architect had to come up with a different orientation to the plan that is accessible.
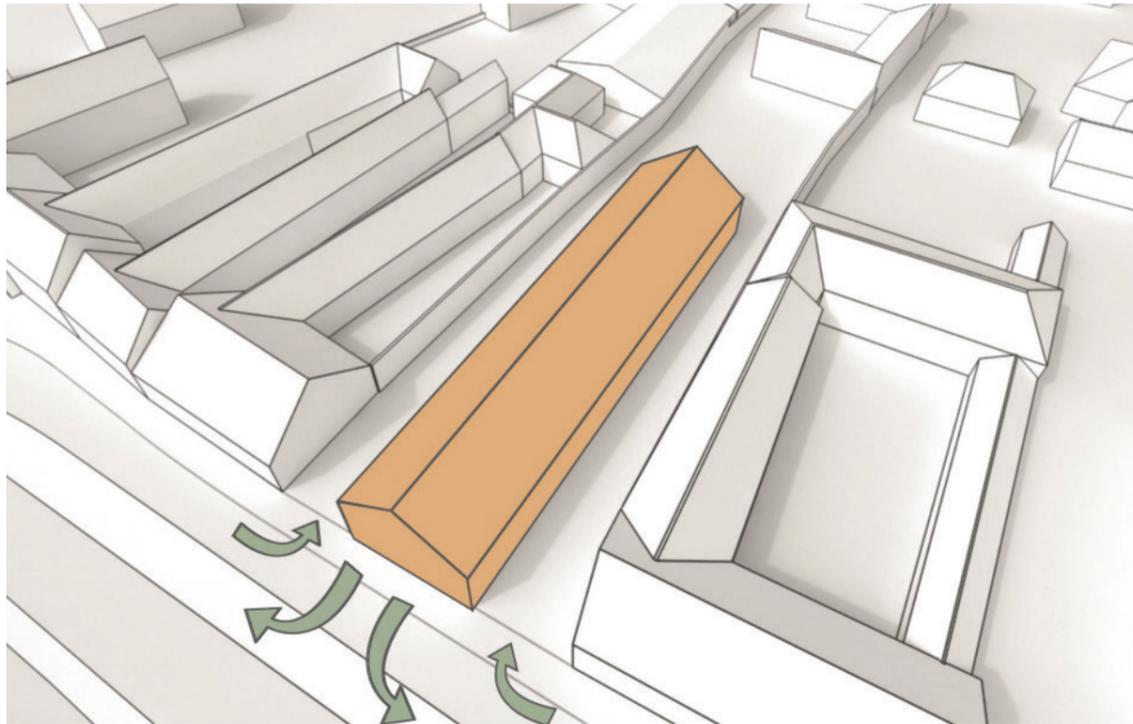
Figure 17: Plan Development Part 3

Figure 18: Plan Development Part 4 (Final)

The new orientation of the building faces the main sqaure (Figure 17) which provides a longitudinal plan for the community center. This will allow people to access it directly from the main square without having to go around.

The building was divided into blocks to allow access to each practice from outside giving the clubhouse and medical practice offset entrances. This offer is encouraged by the program's flexibility, which allows individuals to use the facility for themselves in variety of ways, including the clubhouse, outdoor areas, and public zones within the city hall.

BREAK ZONE   PLAYGROUND

MEETING POINT

CLUBHOUSE
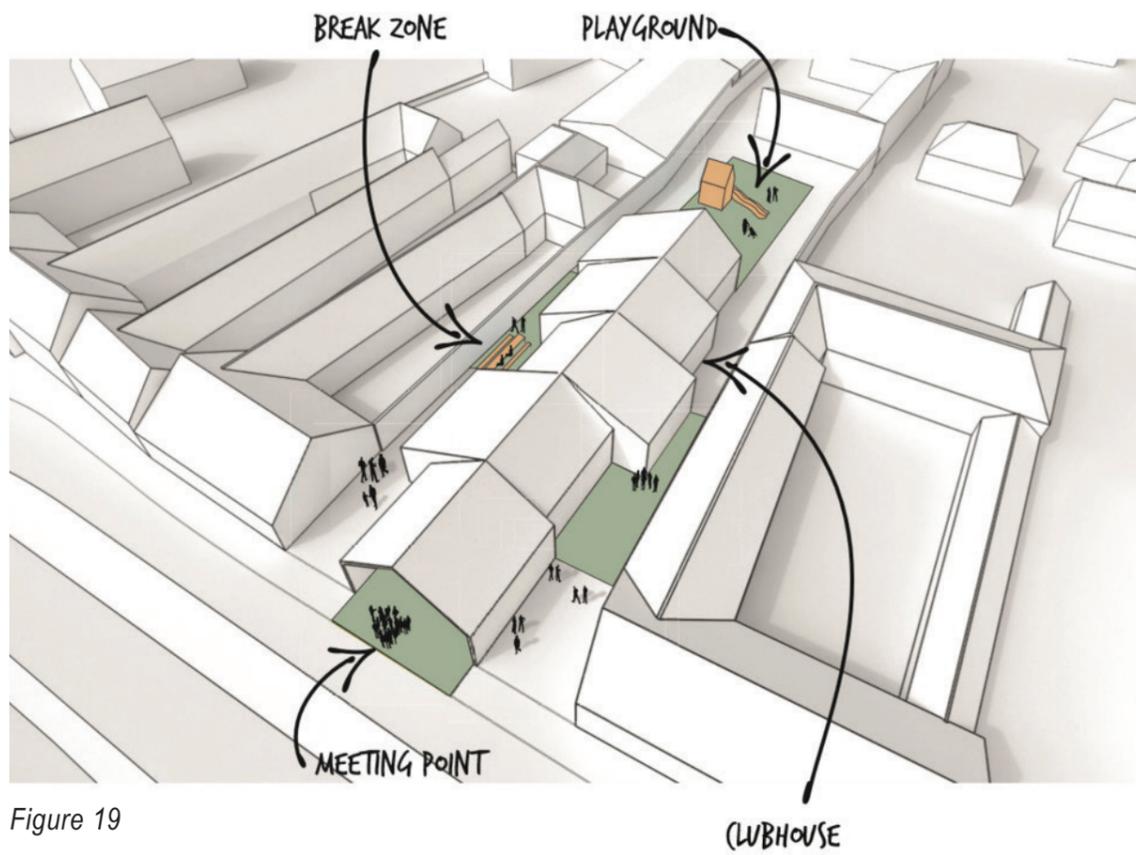
Figure 19

The way that every activity has a different entrance provide the visitors with different options when it comes to using the building
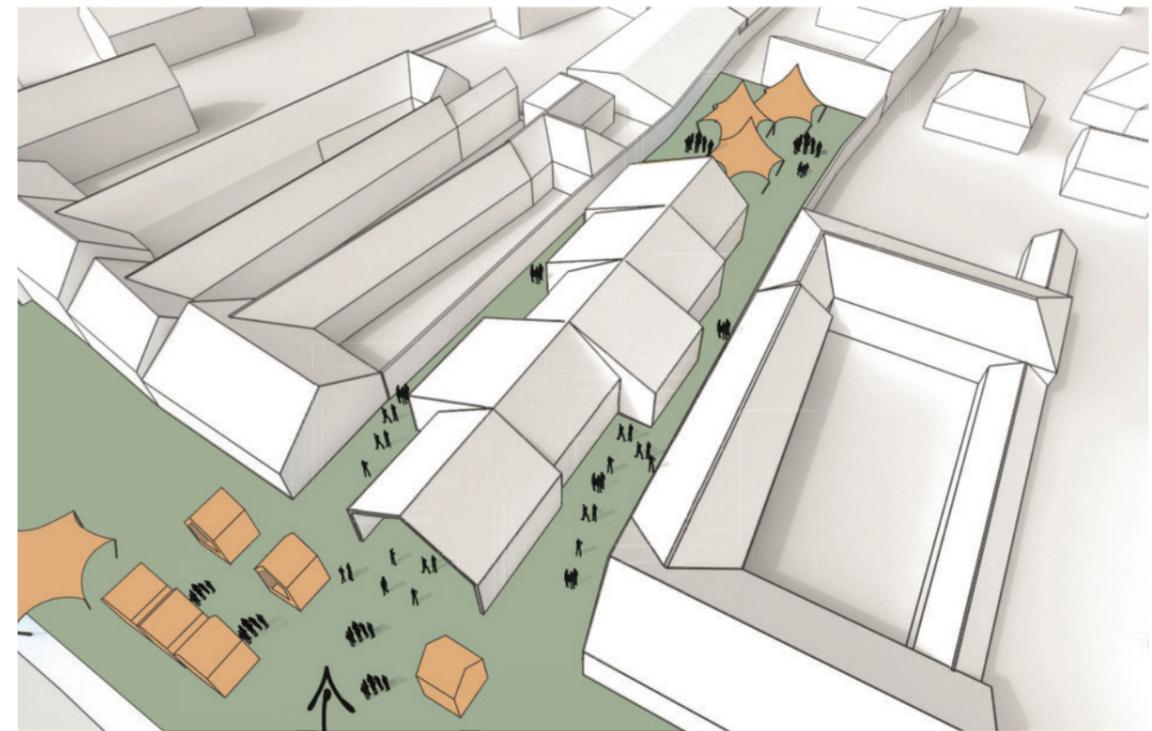
Figure 20

Not only this longitudinal building offers a welcoming atmospere but it also allows people to participate in the activities happening outisde of the building
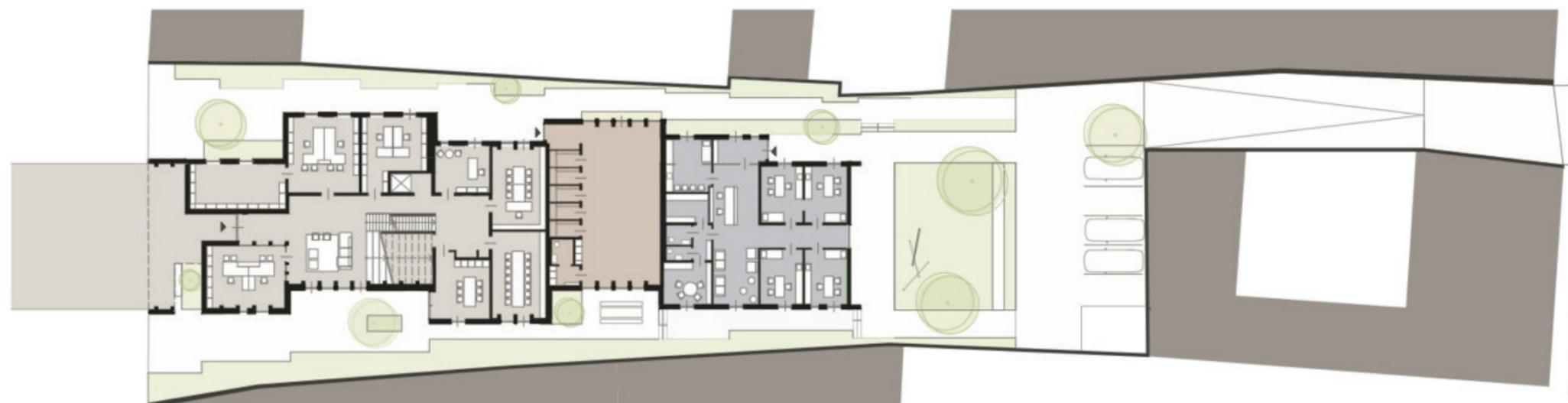
Town Hall

Clubhouse

Medical Practice

Figure 21: Ground Floor Plan

The building is devided into 3 parts for 3 different activities (Figure 21,) the town hall, which is used to discuss town-related issues, the clubhouse, which is used for conversations, activities and different traditions, and the medical practice, which provides a place for 5 operating doctors.

All 3 parts are distributed in the longituidinal plan and they are all shifted to each other but also can be accessed through seperate entrances.

Town Hall

Clubhouse

Medical Practice
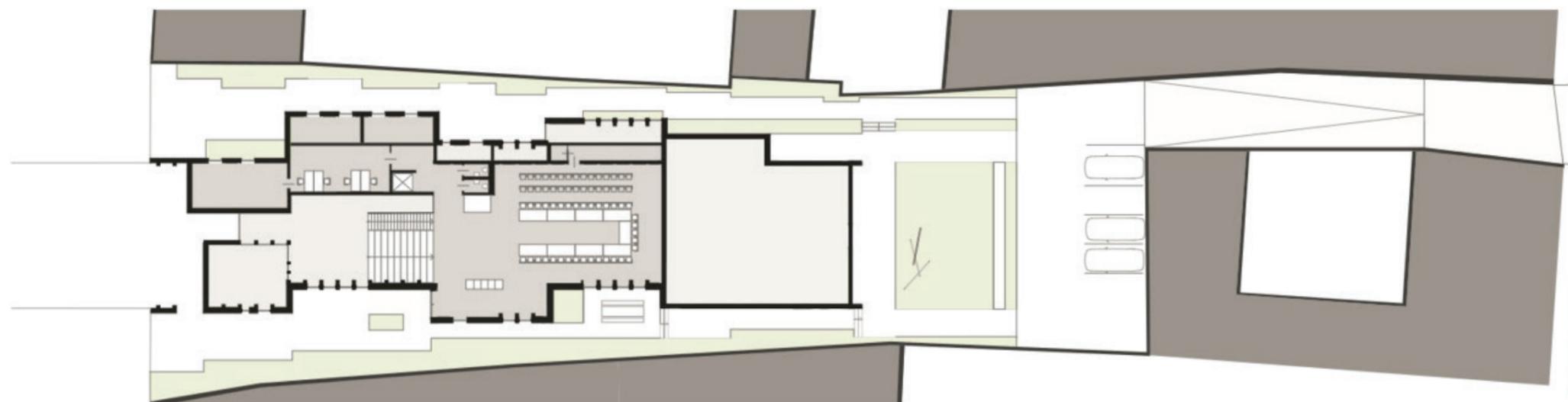
Figure 22: First Floor Plan

The Town Hall takes the whole first floor (Figure 22). However the fist floor does not take the whole ground floor area. It extends until the Clubhouse.

The community center will serve as a focal point for local activities. It is the polar opposite of a traditional administrative structure, it is viewed as a physical embodiment of a bustling and energetic village center.
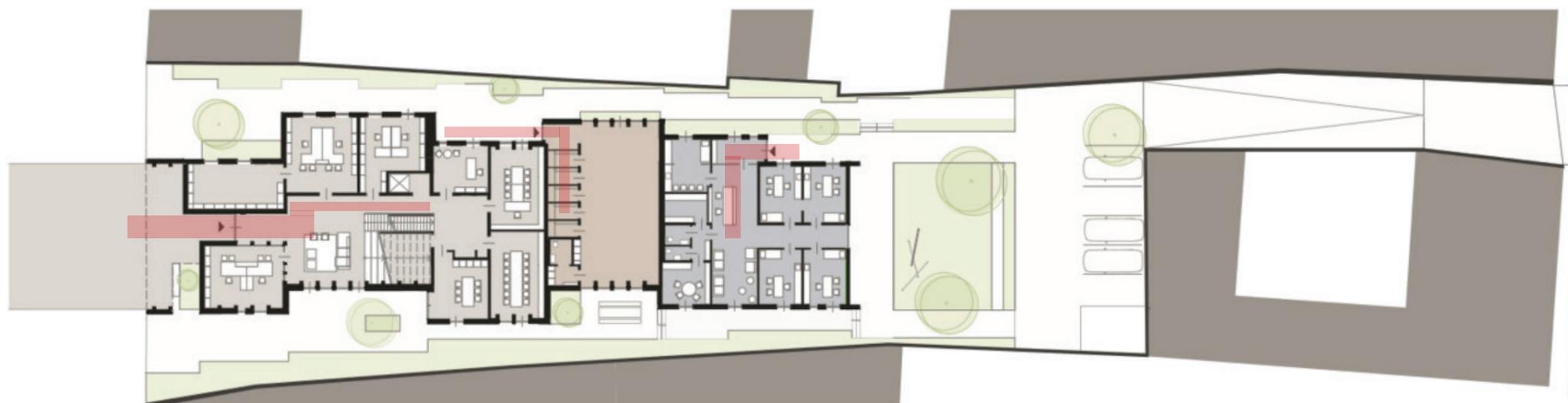
Figure 23: Highlighting the Different Accesses

The illustrated plan (Figure 23) shows the different acesses to every category in the community center. The Town Hall has has the main entrance, while the Club House has a side entrance, and the Medical Practice section's entryway is from the back of the building. This provides privacy and security for people visiting for a doctor's consultation

Figure 24: The Clubhouse

Grossweikersdorf Community Centre, an award winning project, was successful in creating and strengthening the community bond.

This project is related to the Thesis in the sense of encouraging people to visit the place and having a welcoming atmposphere.
Also, including various activities that can meet the desires of anyone in the city.
Moreover, the space planning of the community house is successful as people move from a public to a more private space. Locating the Medical Practice area at the back and providing a different access gives a sense of privacy and security the one

SITE ANALYSIS

Figure 25: Map of the Middle East

Qatar is an independent state that sets on the west coast of the Gulf. Qatar is considered a peninsula since water surrounds it from three sides. It has been inhabited since prehistoric times and was later ruled by local and foreign dynasties before being ruled by the Thani dynasty in the 19th century. Qatar got its independence in 1971 after being controlled by the United Kingdom in the 19th century. After that, the monarchy established strong ties with Western powers for its national security. Qatar is considered a huge supplier in natural gas and petroleum.

Figure 26: Map of Qatar

Official Name: Dawlat Qatar (in Arabic)

Known as: State of Qatar

Capital: Doha

Head of State: Emir Sheikh Tamim Bin Hamad Al Thani

Form of Government: Constituitional Emirate with one advisory body
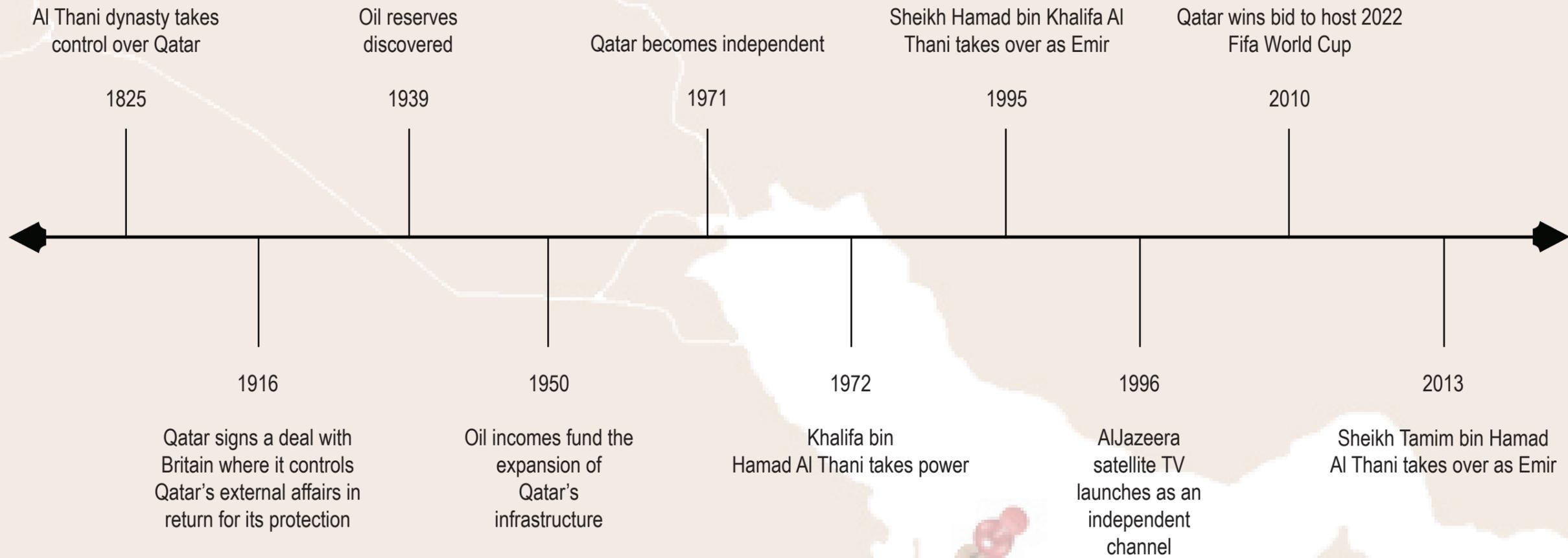
Area: 11,627 sq/km

Population: 2,505,00 (2021 est.)

Official Language: Arabic

Religion: Islam
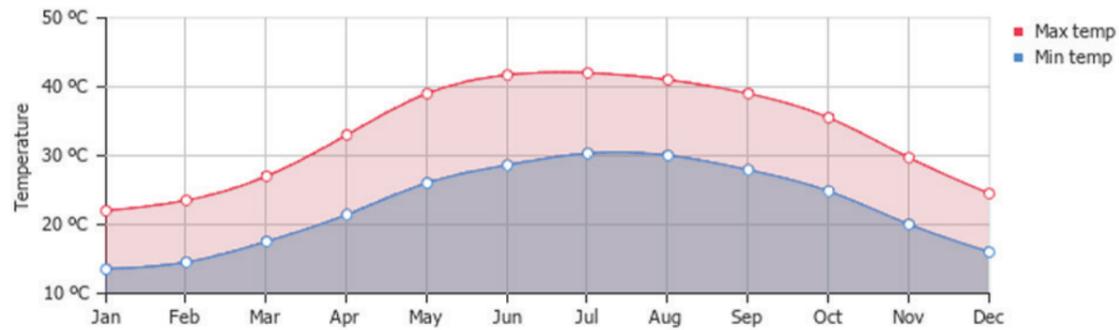
Money Unit: Qatari Riyal (QR)

TIMELINE

Al Thani dynasty takes control over Qatar

1825

Oil reserves discovered

1939

Qatar becomes independent

1971

Sheikh Hamad bin Khalifa Al Thani takes over as Emir

1995

Qatar wins bid to host 2022 Fifa World Cup

2010

1916

Qatar signs a deal with Britain where it controls Qatar's external affairs in return for its protection

1950

Oil incomes fund the expansion of Qatar's infrastructure

1972

Khalifa bin Hamad Al Thani takes power

1996

AlJazeera satellite TV launches as an independent channel

2013

Sheikh Tamim bin Hamad Al Thani takes over as Emir

Figure 27: Average Temperature

Figure 28: Average Sunshine

As shown in the graph, from January to December the weather is mild with a nice average temperature. While in April, May, June, July, August, September, and October the weather is hot as these months fall under the summer season in Qatar. The hottest month in Qatar is July whereas January is the coolest month

As illustrated, Qatar is typically sunny during the year. June is the sunniest month with 343 hours of sunshine, while
February has the lowest amount of sunshine within 224 hours.
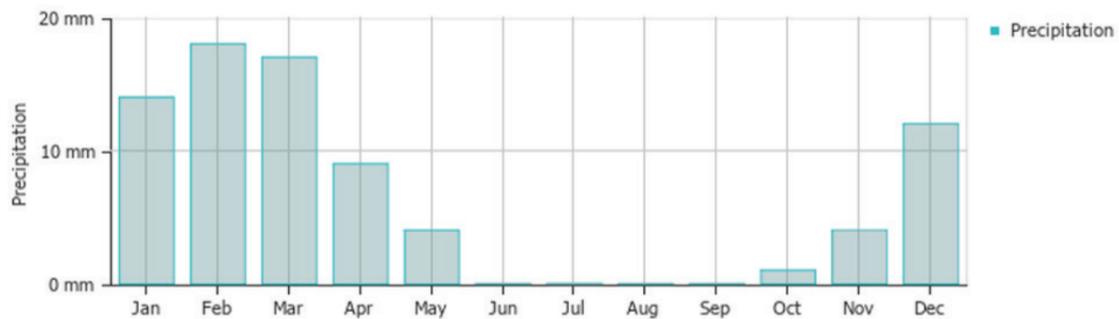
Figure 29: Average Precipitation

Figure 30: Average Rain

Qatar is mostly dry during the whole year. However, February is considered the wettest month with a precipitation of 18mm. On the other hand, August is the driest month with 0.0mm of precipitation
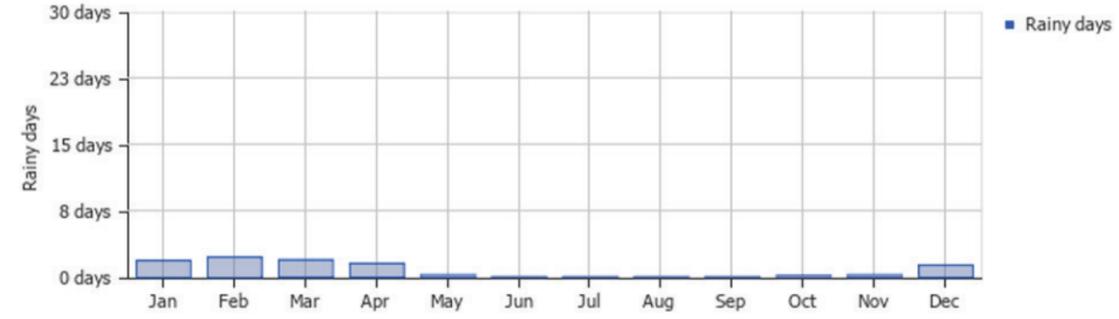
Rain in Qatar has been rare recently, as it is mostly dry during the year as mentioned. Though, February is the rainiest month of the year with 2 days of rain. In contrary, August is the driest month with 0 rainy days. Calculating the annual rainy days in Qatar it might reach to 9 days

Figure 31: Average Humidity

Considering Qatar is a hot country and mostly dry with a small percentage of precipitation and rain, the average annual percentage of humidity is 59% with December as the most humid month and June as the least humid month.
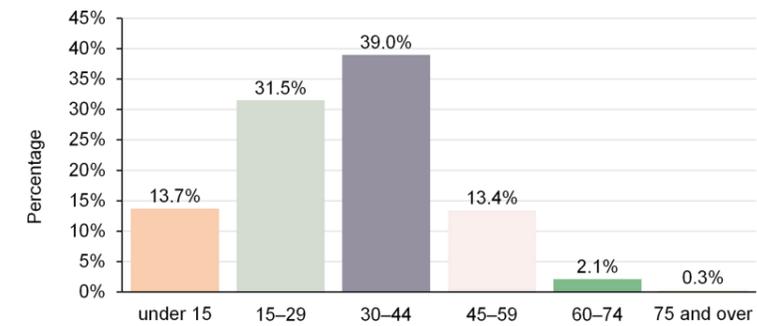

Figure 32: Age Breakdown

The population in Qatar has been growing progressively with a low death as well as low birth rate. Also, the migration number in Qatar is higher than any other country in the Gulf region. Furthermore, Males outnumber females.
Because of the great migration ratio, the population of the working age is relatively high.
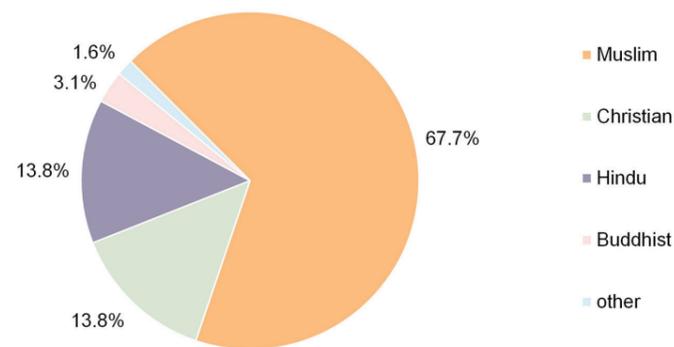

Figure 33: Religioius Affiliation

The official religion in Qatar is Islam. Yet, there is a religious diversity coming from the non-Qatari population which
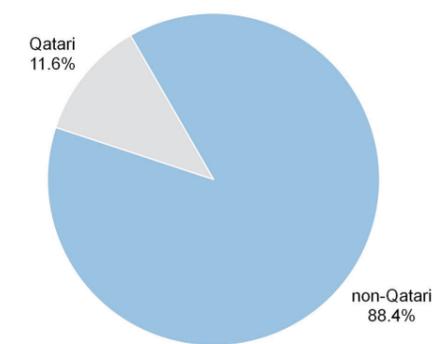includes Muslims, Christians, and Hindus

Figure 34: Ethnic Composition

In the past Qatar was settled by Bedouin nomads from the Arabian Peninsula. However, the economic growth in the 1970s depended on foreign workers, who outnumber the nationals now.
The official language is Arabic and most Qataris speak dialect. Arabic and English are the two most common spoken languages. Persian and Urdu are also often spoken among the large expatriate population
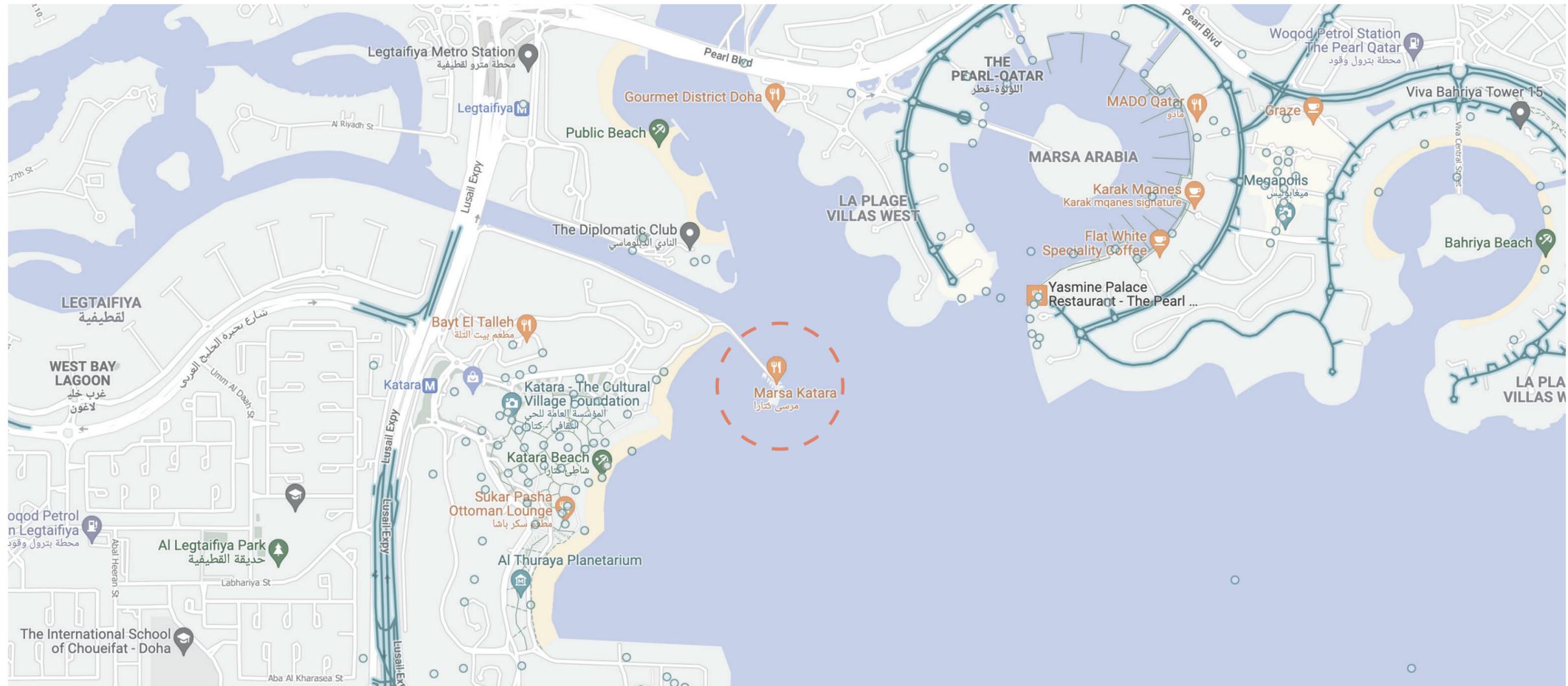
WHERE?

Figure 35: Map of West Bay, Doha, Qatar: Showing the Location of Marsa Katara

Marsa Katara is an International Mediterranean restaurant that is located in the West Bay in Qatar particulary in Katara Cultural Village (Figure 35)

Marsa Katara is located in the middle of the sea with a bridge connecting it with the rest of Katara Cultural Village.
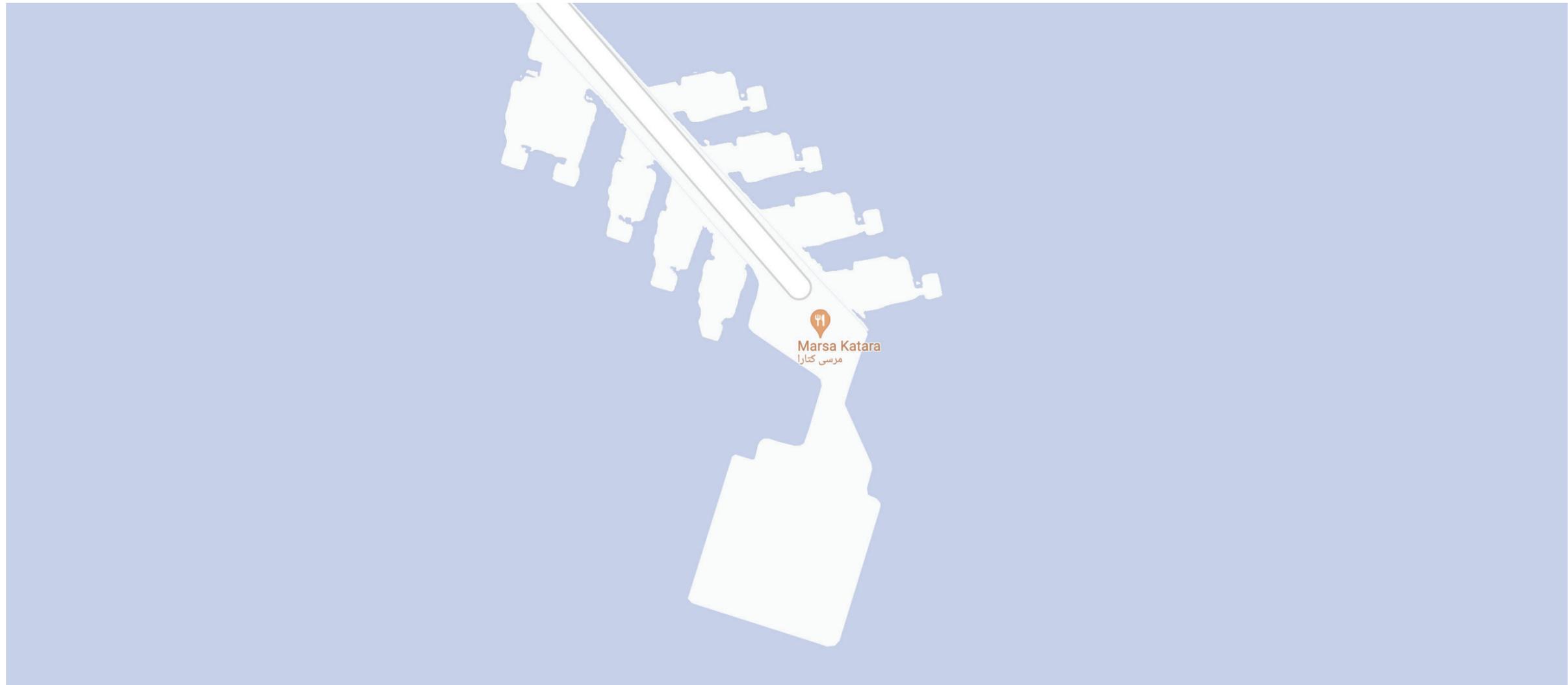
WHY?

Figure 36: Map of Marsa Katara

Since Marsa Katara is located in a place that is usually crowded and has a huge crowd of the citizens. Establishing it as a place to embrace people with mental disorders will help in addressing the stigma since it is not built in a deserted location. Even though it is located in a high-crowd place Marsa has it is own privacy since it is built in the middle of the sea.

Marsa Katara acts as an island where water surrounds it from 4 sides. This will help provide a calming and soothing atmosphere for the visitors who are going to be visitng this recreational center to communicate, share their experiences and explore different activities.
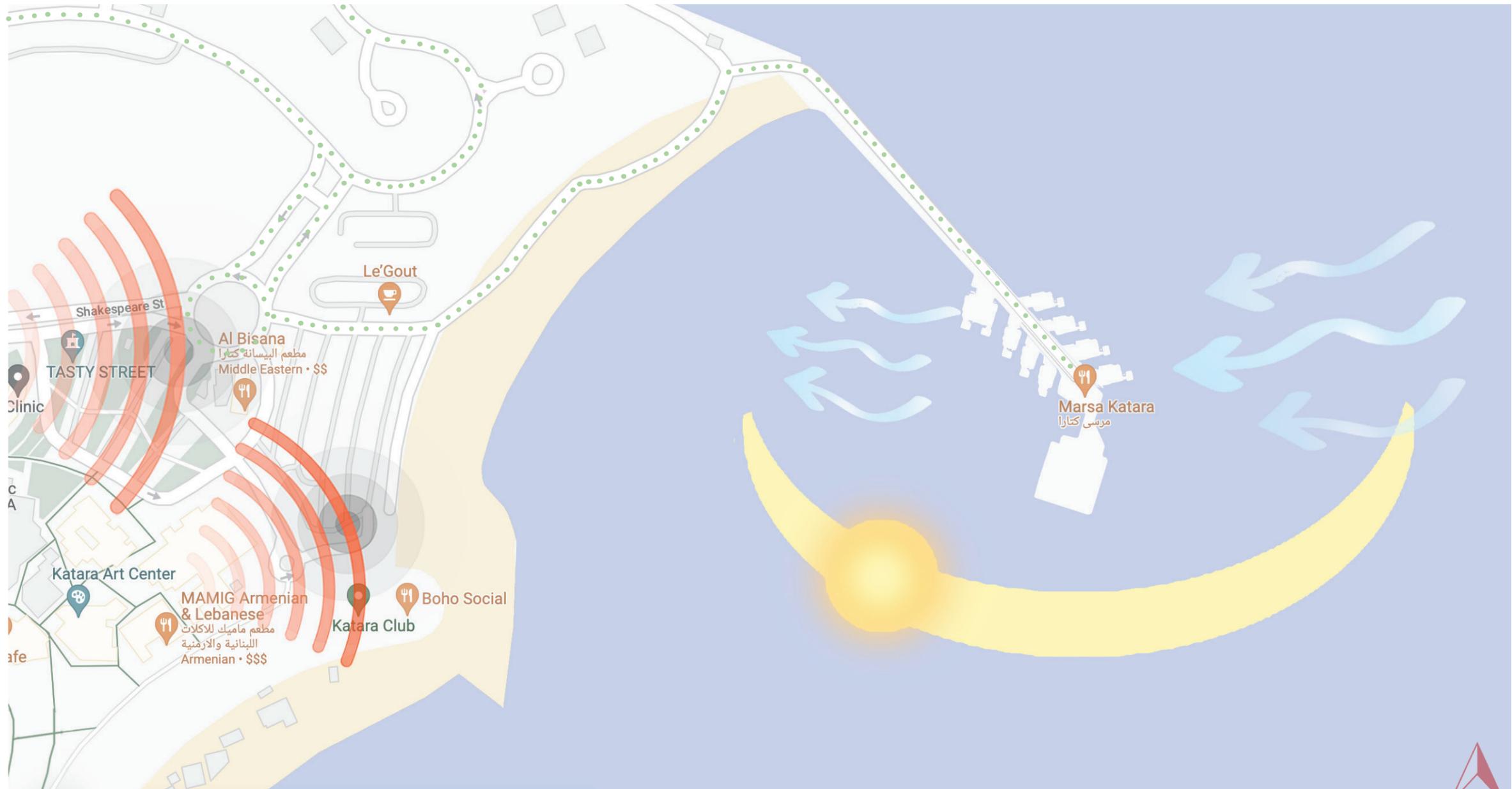
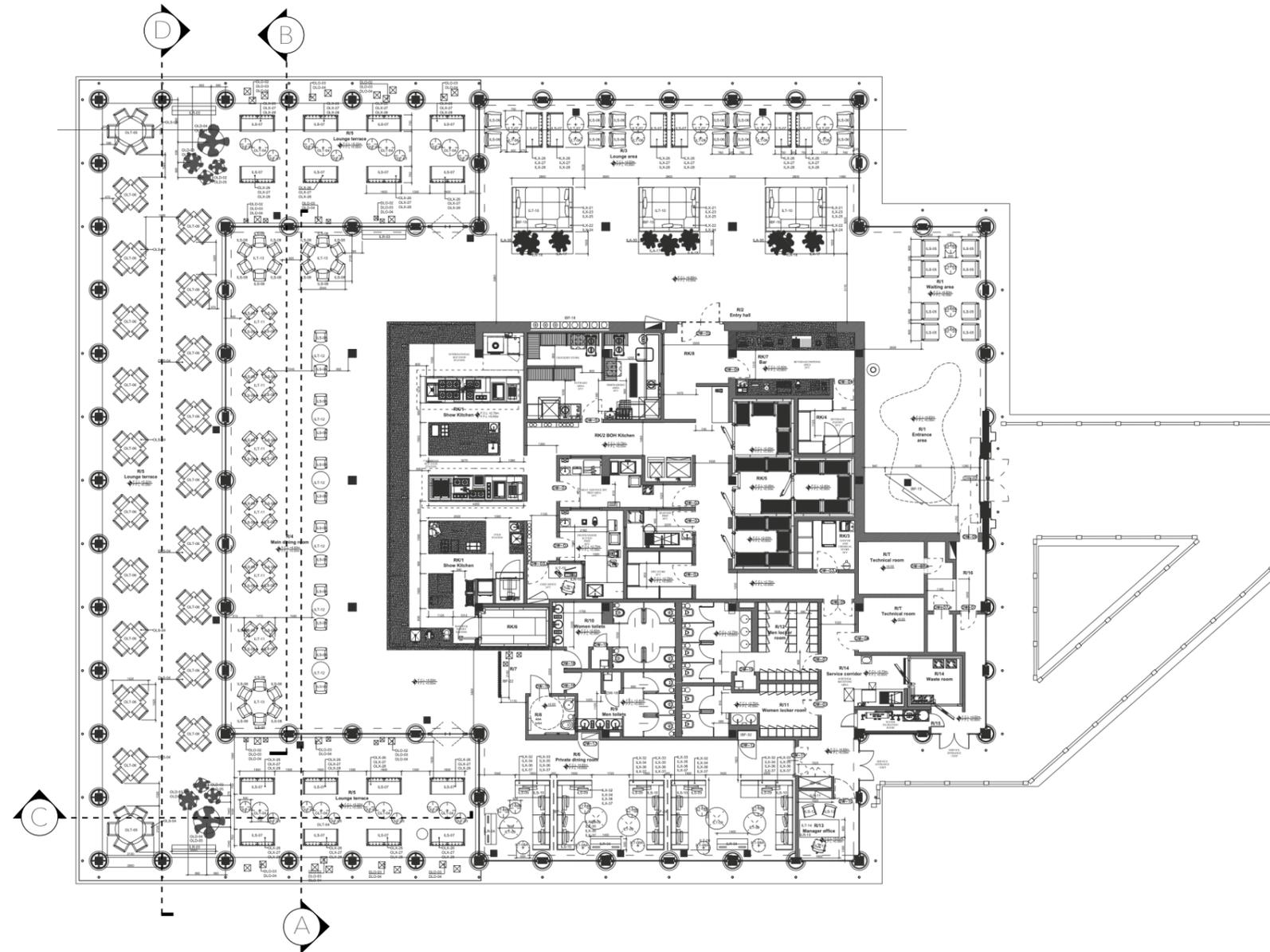*Figure 37: Site Analysis of Marsa Katara*

Figure 38: Marsa Katara Floor Plan

The large scale of this building considering the different activities that will be held in the recreational center. It will also provide a space to breath and walk around freely.

Avoiding narrow and small areas, especially for people who might suffer from a mental disorder is necessary
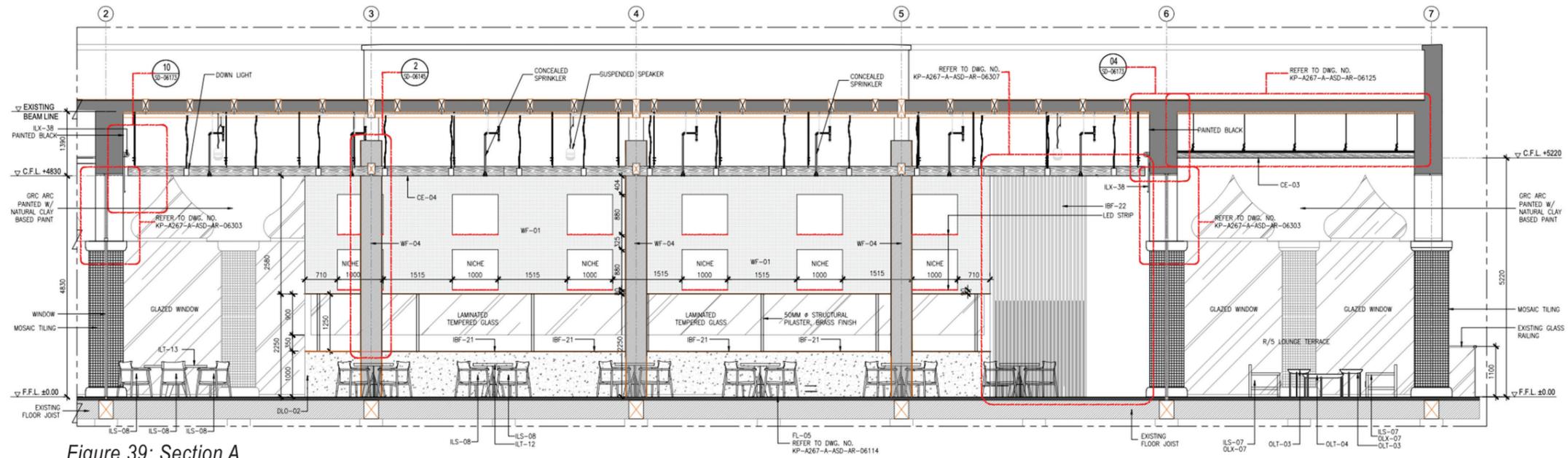
Figure 39: Section A

Figure 40: Section B

38
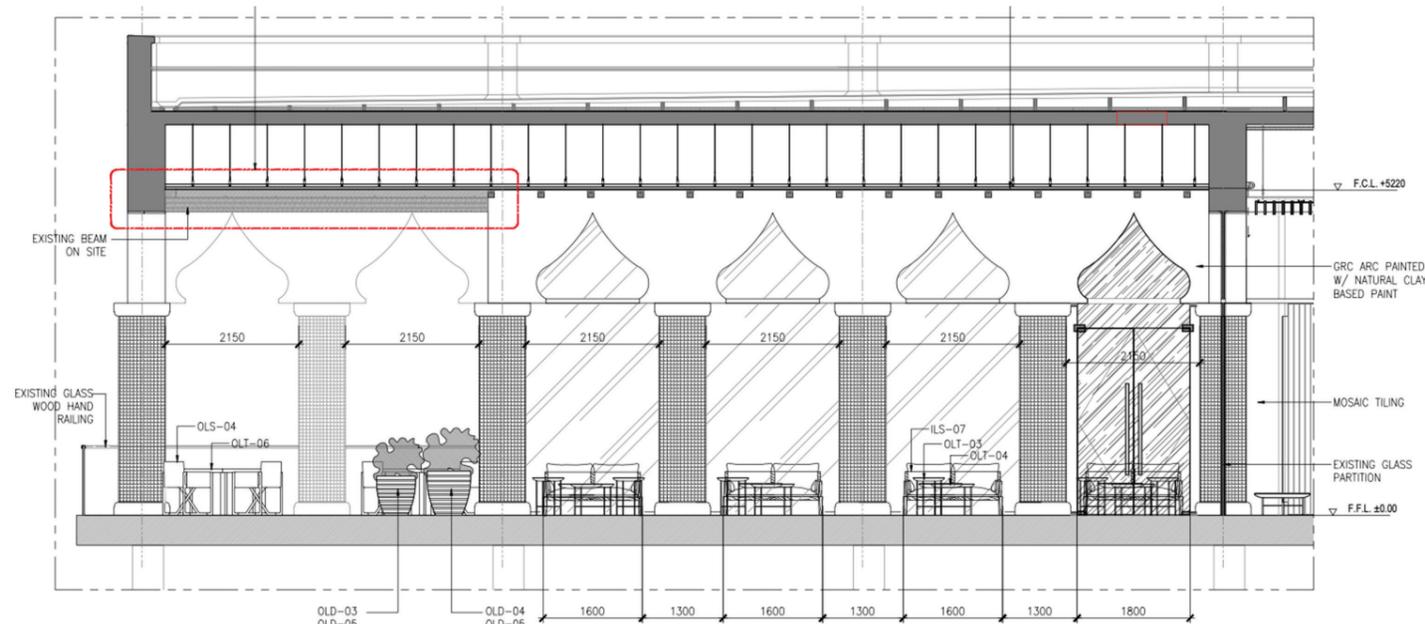
Figure 41: Section C
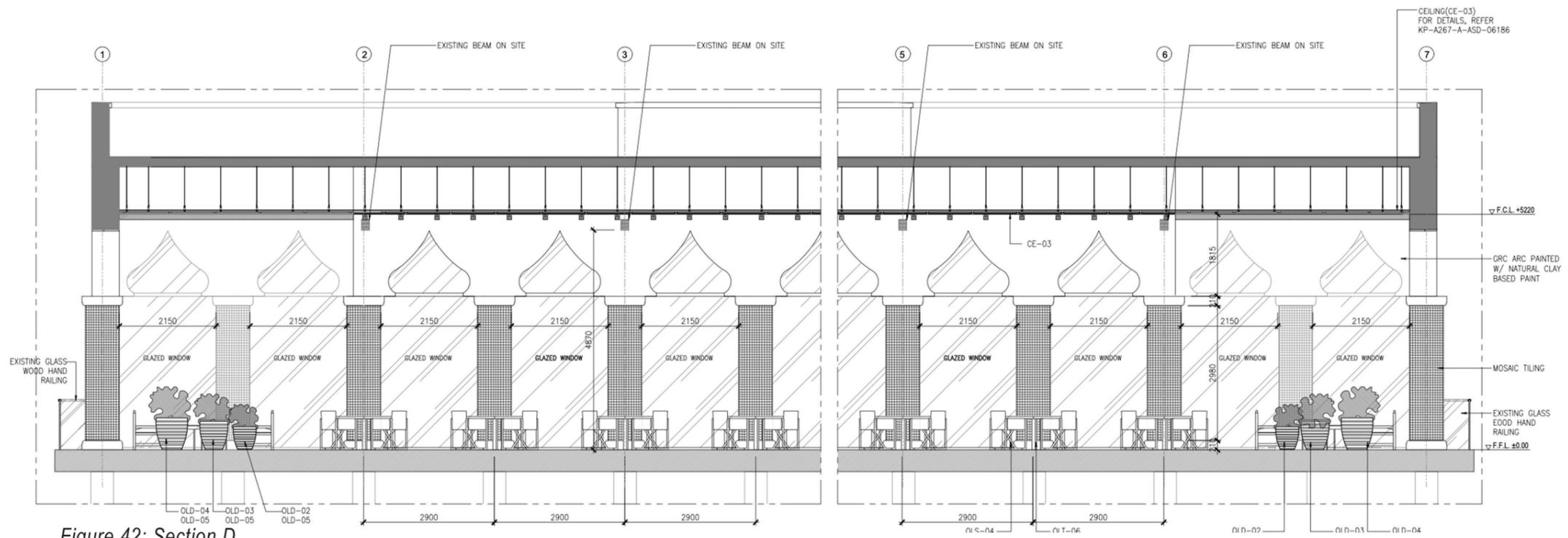
Figure 42: Section D

Figure 43: Space Planning of Marsa Katara

Reception
Waiting Area
Public Indoor Dining
Private Indoor Dining
Public Outdoor Dining
Public Toilets
Kitchen
Manager's Office
Staff Toilets
Service Rooms

Marsa Katara is divided into many sections but there is a boarder maintained between the staff spaces and the customers spaces.
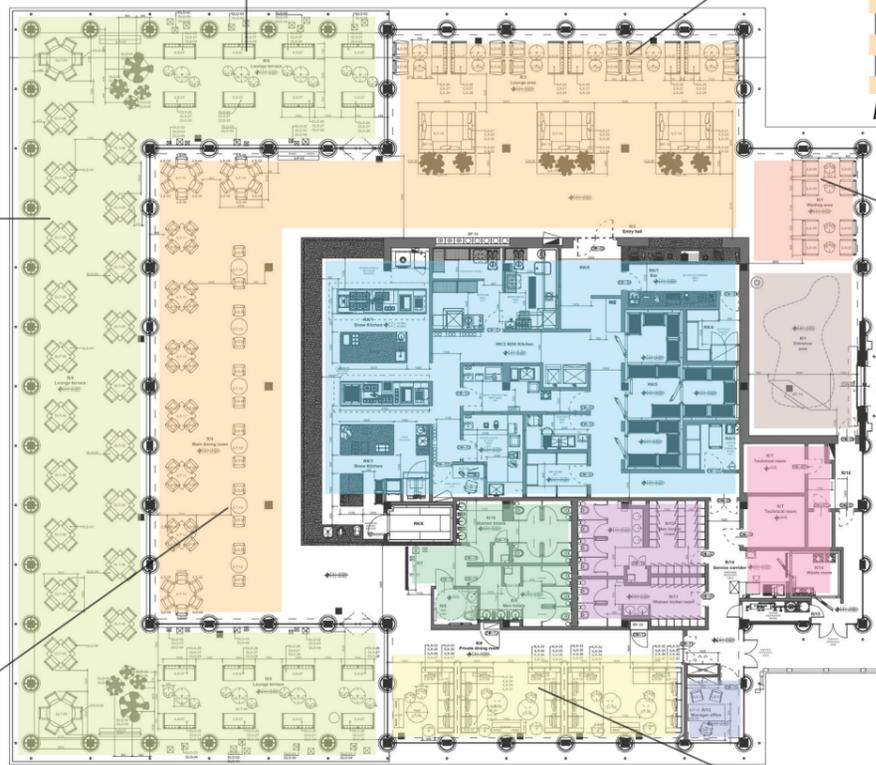
Figure 44: Outdoor Dining

Figure 45: Indoor Dining

Figure 46: Hallway

Figure 47: Waiting Area

Figure 48: Private Indoor Dining
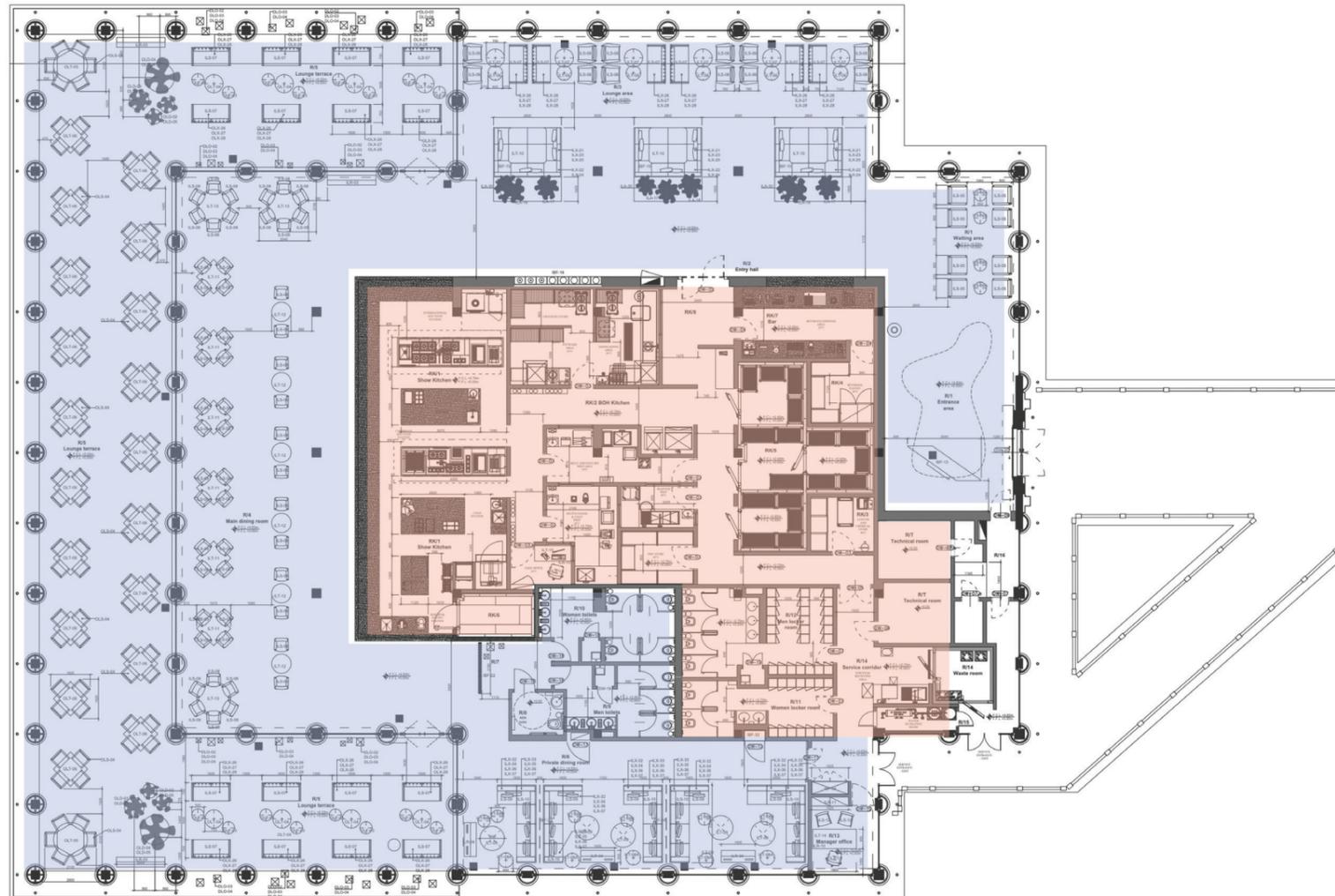
Figure 50: Public and Private Areas Plan

The shown plan (Figure 50) clearly shows that the staff area is located in the middle of the space and the public area surrounds it
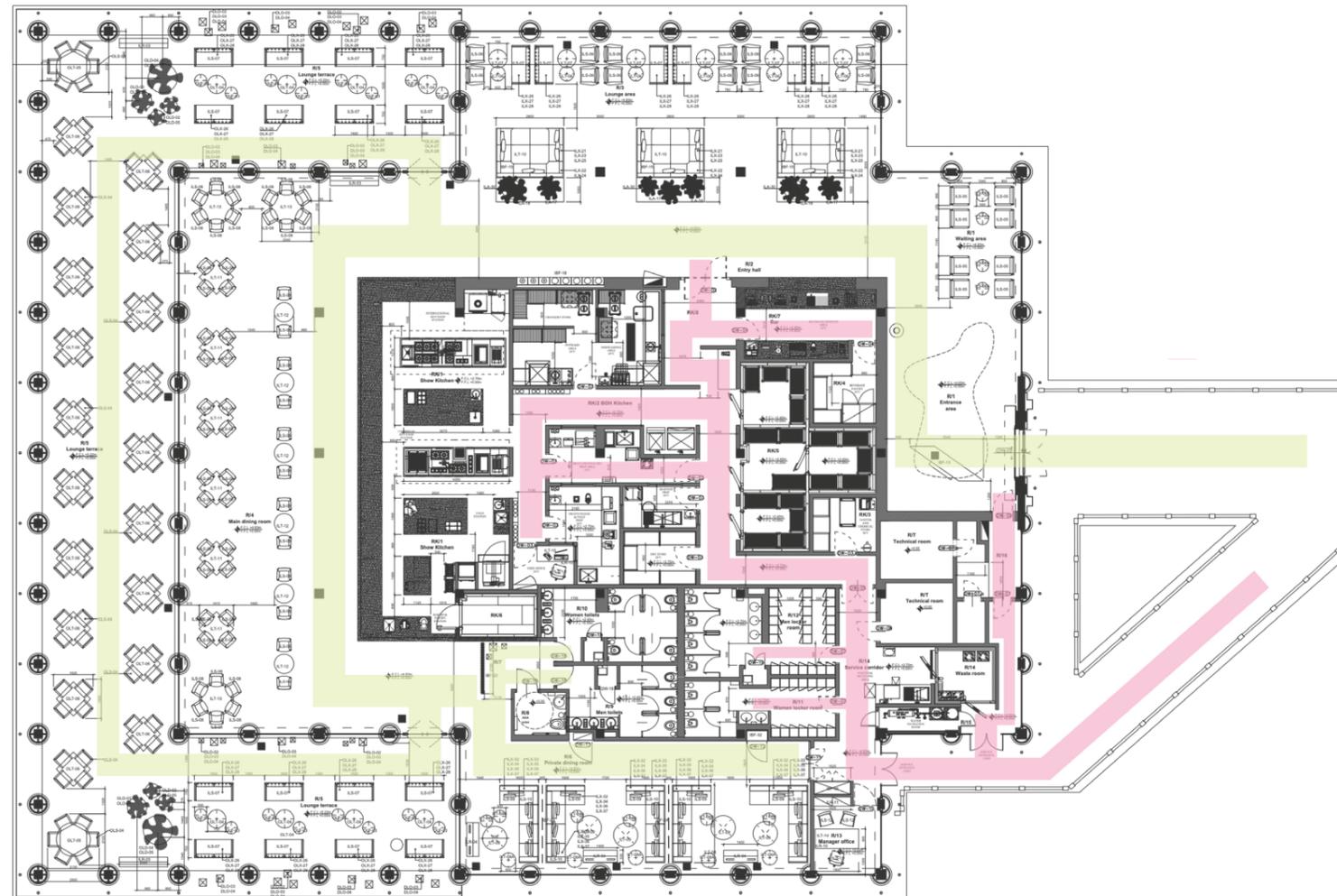
Figure 51: Circulation Plan

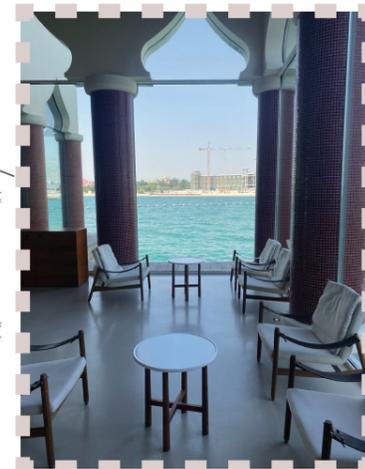The interior circulation is clear and easy to navigate through due to the openness of the inside as there are no partitions or walls blocking except for the private area as it contains partitions for the sake of the customers privacy in there

There are 2 different entrances for the restaurant, one for the customers and the other one is for the staff. This is a useful way to maintain privacy.

Figure 52: Front View of Marsa Katara

When walking towards Marsa, there is a welcoming gesture embodied in the way the wooden fences are put guiding one towards the entry door, and the use of windows all around the space allowing people to see what is going on inside.

The place is surrounded with glazed windows which means it takes the most of the natural light in and provides the best view for the customers. The windows are arched to embrace the Islamic architecture.

Figure 47: Waiting Area

The waiting area (Figure 47) is the first thing to see when entering the restaurant. It has separate individual chairs for the customers to wait for their table to be ready.
The waiting area sits between the huge columns and windows receiving the most of the natural light and the view making the time people spend in the waiting area quiet and calming.

Figure 46: Hallway

The circulation is clear in the restaurant due to the pathway and furniture arrangement that populate on the sides next to the windows. The floor is made of cement, which gives a sense of wight to the interior.

Figure 53: Outdoor Ceiling

Figure 54: Indoor Ceiling

Both, the outdoor ceiling (Figure 53,) and the indoor ceiling (Figure 54,) are made of solid wood and traditional palm leaves with round wooden beams
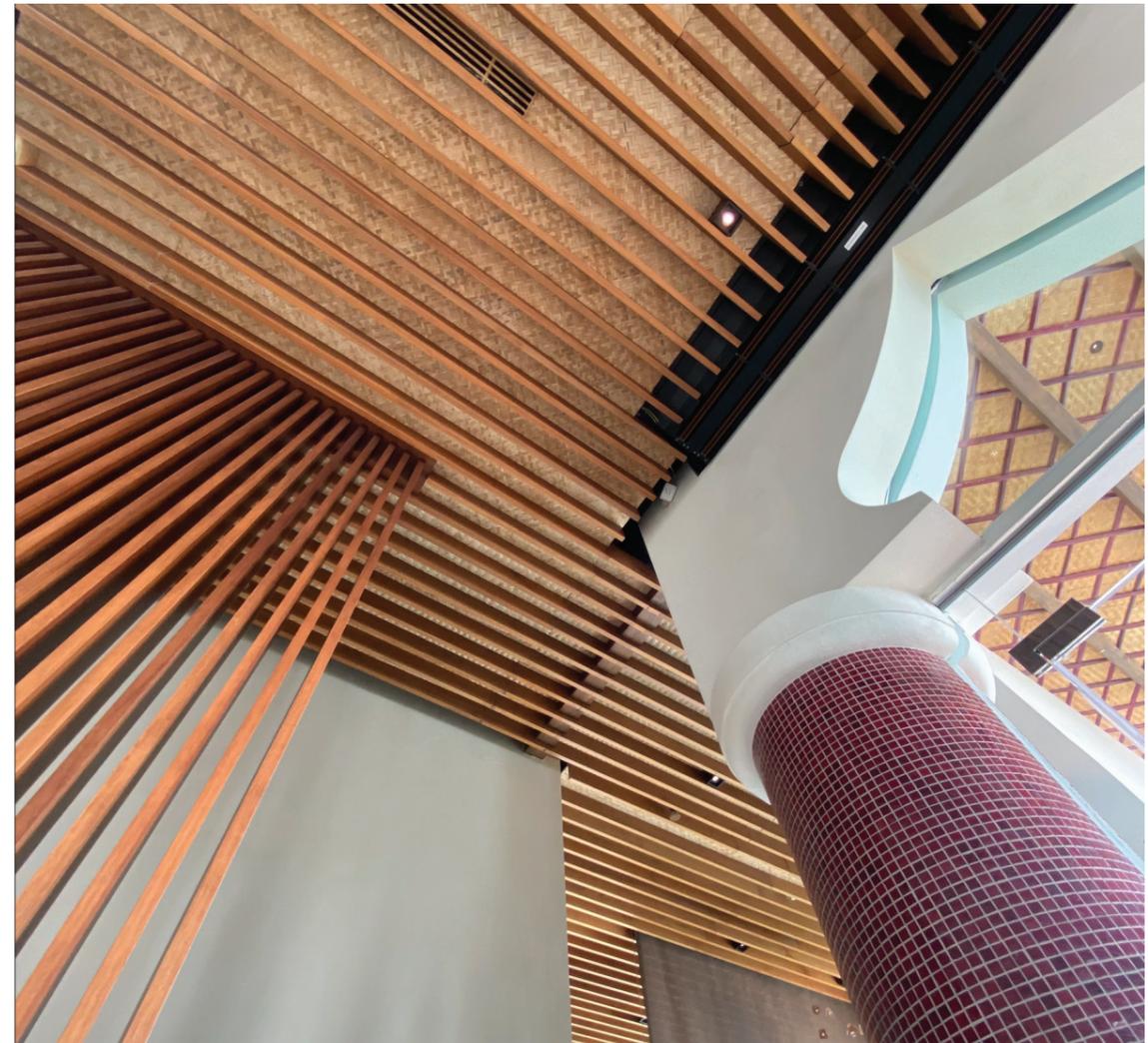
the columns however are covered with mosaic tiles, which gives a fancy and trendy look

Figure 44: Outdoor Dining

The outdoor dining area (Figure 44) overlooks the beautiful sea view and Doha's skyline aswell.

Figure 48: Indoor Private Dining

The Indoor Dining Area overlooks the sea view and Doha's skyline too.

INTERVIEWS

Interview 1

Interviewee: Aysha Almotawaa, a Qatari Psychologist at Naufer
Wellness and Recovery Center in Doha, Qatar.
Aysha is a Qatar Univeristy Alumna with Bachelors in Psychology

Can you tell me about yourself and your role?
I am a clinical psychologist, I work in a clinic called Naufer. My role is doing psychotherapy to maintain the patient's mental health. We try to reach a point where the patient becomes stable enough to continue his therapy from all aspects because we focus on multiple aspects. I focus on the mental health of the patient and try to solve the mental problems that the patient is suffering from. Some patients have different psychological issues, such as: depression, anxiety, anger issues, personality disorders, mood swings, paranoia, delusions and hallucinations, trying to reduce the burden of these issues to the point where the patient can continue his therapy from other aspects.

How would you describe working in Naufer?
Naufer is an addiction treatment clinic
As I mentioned, we try to stabilize the patient so he/she can continue therapy from different aspects. In additional to psychology we focus on improving the occupational, social, physical aspects...etc.
In the clinic we have different approaches. For instance, we are multiple psychologists but each one follows their own approach. We also use various therapeutic method. There is something called psychodynamic, cognitive behavioral therapy, motivational interviewing, and anger management program...etc., depending on the need of the patient we build a plan with the multidisciplinary team and we all agree on one option. The patient himself sets his goals, he determines the points of strength and weakness, then we put a deadline.
What do you mean by improving the patient from the occupational aspect?
Occupational means taking care of the patient's daily schedule, what he does in his day, what does he have to do. If he does not have a job we try to find a job for him except that he has to rely on himself. He has to achieve things that would get him a job or a degree. Even his hobbies, we work on how to improve these hobbies into something bigger. Moreover, we observe how he spends his free time.

Do you think there is a stigma related to mental disorders in Qatar?
Yes, so much, in a huge way you cannot imagine. However, the country is trying to raise awareness. Sometimes while I am flipping through the channels and I come across Qatar TV, I see shows where they interview people in a way to raise awareness about mental health and that psychotherapy is not a disgrace or forbidden.
There are a lot of misconceptions about how that therapy can destroy your life. People would think of you in a wrong way where they would think that the person who goes for therapy is crazy. While it is constructive of the person to go for therapy when they sense a problem so their kids won't inherit the disorder.
Unfortunately, I see that we do not have a Psychologists Association here in Qatar which is a negative thing. However, we see countries surrounding us have it and they have a wider and more comprehensive view for psychotherapy while here we are still uncivilized. So, the stigma is huge and common and from the things that I educate my patients about is the stigma. I tell them that it is a misconception and that the society inherited it in a wrong way. The soul is connected with the body, if the soul got sick, the body will too, and if the body got sick the soul will. Therefore, we should cure ourselves so that our bodies do not get sick. A lot of diseases are psychosomatic, and their origin is psychological. Most of the diagnoses of psychosomatic diseases cannot find the reason behind the disease because its origin is psychological which developed to biological or physical.

What is the stigma surrounding mental disorders in the Gulf and Qatar in particular?
People worry about what others will say or think. People worry about their reputation and what is said about them. These people will immediately label anyone who goes for psychotherapy as "Crazy," this is the first and most common word. While psychotherapy brings back balance to the human. It organizes their thoughts, feelings, let them explore themselves and know how to deal with pressure making the person become more balanced. So yeah, people fear what others have to say about them. A part of the essence of this stigma is religious were people tend to

believe that everything is going to be solved with Quran and that all of that are just thoughts from the demon. So, they would recommend for people with mental disorders to go pray or read Quran, they take him back to his relationship with God. Another part of the stigma is social, where some people worry about their future. For example, some people would think that they will not be able to find someone to marry because they went for therapy. Others worry that having a file in a psychiatry might affect them getting a job. Another example is if a woman has a file in a psychiatry proving that she was undergoing any type of mental disorders. If a divorce happened her husband can use this file against her and the judge would judge for the guy because he will see that the mother is unqualified or unstable so she cannot nurse her children.

What is the prevalence of mental disorders in Qatar?
Yes, it is so big but some people describe it as a personality trait. They justify mental disorders in a different way to disassociate it with disorders. Maybe that is because of unawareness, because we were not educated about these things in school. That is why I believe we all should have been established from the psychological aspects. It should have been a subject taught since we were young and school counselors should have provided family education on how to deal with their child because the problems probably start from school. Trauma in the air, meaning, if the trauma did not come from the smaller society, which is the child's home, it will come from the slightly bigger society, which is the school, and if it did not come from the school, it will come from the society in general, which is where the child live in, and if it did not come from the society, it will come from the world like wars or huge social issues. Therefore, we say that human beings all went through a psychological experiment that affected them for life, some of them recognized it and others did not. Human beings are exposed to mental disorders, hence, there should be more awareness about taking care of the psychological aspect from a really small age.

How is the stigma standing in the way of getting treatment?
Yes, some people instead of getting treated in Qatar, they do it online where they find a therapist and do an online course with that therapist so they would not have to open a file here in Qatar and they would not be seen around mental health institutions.

Why do you think mental health is misunderstood in the culture we live in?
In general, in Qatar, we received Psychology as an education major so late. The Arabic countries around us studied Psychology a long time ago. While in Qatar they just paid attention to this aspect. A proof is Qatar University where Psychology was not really a major until recently.

Can people with mental disorders give away medications and only get treated by psychotherapy?
Yes, talking is actually more effective than medications. What medications do is make the patient better in the first few days as it would make him feel better, it is like a gateway from facing their emotions. So, it is better to start off the treatment by talking. A lot of people prefer depending on medications instead of facing their emotions which is wrong because it will make them suffer more. But in severe cases we use medications first to stabilize the patient then we can talk with the patient after. After that, we start reducing the amount of medications until we stop them for good.

What can promote people's openness to talk about mental disorders?
Raise of awareness.
Does talking about the disorder help the patient in treatment?
We all know that letting things out brings us comfort, which is true, but this is a short-term thing but thinking of it long-term this person will not be comfortable still. That is why therapy shows that the way the therapist connects with the patient is very important as it lets the patient grow psychologically. I can see a huge difference in the way of thinking of my patients, difference in lifestyle, difference in dealing with emotions, this is psychological growth. So, talking with others has a temporary effect, while therapy has a long-term effect. It helps people adjust, adapt, and accept anything that happens to them. They should not reach a point where they struggle in their daily life as if his life stops at the slightest inconvenience. Some people go through a problem which makes them stay at home not doing anything and feel physical pain, while others might go through the same problem but are capable of coping and achieving. The first type had a mental readiness for the illness, something in them stimulated for them to stumble. A lot of patients described this feeling saying "It is like we are in a hole, trying to get out but we cannot." While

the second type of people had a psychological base that made them ready to face this problem, they are strong psychologically.

How do you make a patient who does not want to open up talk?

First of all, nothing is obligatory. If the patient is forced to get treatment, he will not benefit from the treatment so it is a waste of time for the patient and the psychologist. Therefore, if someone is coming for psychotherapy it should be from the patients themselves. This is the best and most effective.

What are some elements in the space needed in aiding to improve their mental health?

The place should be designed for the patient to feel comfortable. The place is organized in a way that serves all aspects.

Naufer is an addiction treatment clinic. The place is organized to fit addicts to be specific. We have multiple units that are important besides the structure of the clinics or hospitals. We have an outpatient department, a detox unit, rehab...etc. the patient goes through phases in the treatment which is different from many health organizations. There is also a spa, gym, swimming pool, and other entertaining stuff. These things are important to help in the treatment of addicts as it helps them psychologically. Colors of the walls and furniture are important as well as the type of furniture. For example, the chairs used in the group therapy rooms are not very comfortable where the patient has to sit straight in the chair so they would be more engaging in the group while in private therapy rooms the chairs are more comfortable so the patient would feel relaxed.

Do you get visits where the patient come behind their family back to get treatment?

Yes, a lot, but we have something called a treatment plan where we have to involve the patient's family in the treatment plan in case anything happens. But there are a lot of patients who come behind their family backs and prefer for their treatment to remain private. If the person is an adult we do not need the family consent to get treated but if he/she were under 18 we have to get the family consent by law so we cannot change anything about it.

Do you feel that there is more awareness nowadays about mental disorders?

Kind of yes. Females more than males as males do not really give this topic as much attention as girls do and this is mostly because of society as they are stereotypical about how guys should feel and express their emotions because being a guy means you should not show any emotions and remain tough. Some patients tell me that if we were not hit we would not have been men which is a very wrong and odd conception

Do you think it is a good idea to build an environment where people from the society and people with mental disorders talk about their problems?

No, we have something called confidentiality and privacy. What happens between the psychologist and the patient stays between them. We cannot interfere with the patient's privacy in any way. As therapists we sign contracts that guarantee privacy and security when we apply for the job and we always introduce this to the patients in the first session to assure them that what they say will not be out unless the patient does something to hurt themselves or others, here we have to go for someone who will help us as therapists protect the patient or the person who might get hurt.

It is wrong to put people from the society in therapy sessions with people with mental disorders because these people might judge people with mental disorders and try to minimize their problems. Because the people from society's conceptions are all wrong because they go back to religion and traditions. This might cause a conflict in the treatment so it is better to avoid mixing them in the same environment. There is a saying that says "A person cannot heal in the environment that made him sick," so I feel that bringing in the society is going to disrupt the treatment of people with mental disorders. Things other than raising awareness will not be as effective to reduce the stigma as anything else. Some things might help but it would take years and years. Other than that, people with mental disorders are so sensitive and have trust issues which affects the treatment in a huge way so putting someone from society is not going to help as the person with mental illness will think that he is being judged by these people.

Interview 2

Interviewee: Muna Almohamadi, a Qatari Psychologist at
Hamad Medical Corporation (HMC) in Qatar.
Muna is A Qatar University Alumna with Bache

Can you tell me about yourself and your role?
I am Muna Almohamadi and I am a Psychologist at Hamad Medical Corporation. My role is to provide help for people with mental disorders such as depression, anxiety, PTSD, OCD...etc., and to perform psychological testing such as personality tests, neuropsychological tests, and IQ tests.
How would you describe working in Hamad Medical Corporation?
Working in HMC has been the best thing that has happened to me so far. I have always wanted to be a psychologist and here I am living my dream.
Do you think there is a stigma related to mental disorders in Qatar?
Unfortunately, yes, mental health stigma is very common among people living in Qatar. Even though it is not as much as the past few years, there is still stigma related to people with mental disorders. Some people still do not accept the fact that they need to be treated.

What is the stigma surrounding mental disorders in the Gulf and Qatar in particular?
People in the Middle East either believe that mental disorders are caused by a lack of religion or being crazy, which makes it harder for a person with mental disorders to seek help. In HMC, most of the cases are of non-Qatari patients.
How is the stigma standing in the way of getting treatment?
The fear of being labeled as crazy or being stigmatized by society stops a lot of people from getting treatment.
Why do you think mental health is misunderstood in the culture we live in?
The lack of knowledge and awareness. Mental health disorders need more attention and should be taught in schools as a mandatory subject.
What can promote people's openness to talk about mental disorders?
If they felt valid, safe, understood, and free of judgments.

Do you think there is any connection between the evil eye, spirits...etc. and mental illness?
There is no connection. Mental disorders can be caused by genetic factors, biological factors, or life experiences.

Does talking about the disorder help the patient in treatment?
Yes, we usually use psychoeducation with patients. It is basically about providing the patient with information about the disorder for a better understanding of his/her situation and to help him/her cope better with their illness.

What are some elements in the space or design solutions that can help people with mental illness?
Using bright colors in the space, limiting the number of furniture around, and generally having a simple design.
What is the difference between consultant, physiatrist and psychologist?
The consultant is someone who is responsible for one department in the hospital where she follows up with the in-patient, diagnoses and describes their prescriptions, and is responsible for patients' discharge when they are done with their treatment. Whereas the psychiatrist is someone who studied medicine. Psychiatrists come under the consultant but they still can diagnose and describe perceptions. What they cannot do is discharge the patient as the consultant is the only one who has the authority to. When the consultant is absent the Psychiatrist fills in for them. The Consultant and Psychiatrist both diagnose the patient and treat them with medicines. On the other hand, the Psychologist does not treat with medicine but only uses Psychotherapy for treatment. Psychologists cannot diagnose the patients. Meaning, when a patient comes they go to the Consultant or Psychiatrist for diagnosis and from them the patient is transferred to a Psychologist to get Psychotherapy.

Do you get visits where the patient comes behind their family back to get treatment?
Yes, it happens a lot. Some families do not support their children to get treatment to avoid being stigmatized, so some patients prefer to keep it private.

Is there any advice you can give to people who deal with mental disorders?
You are not alone. You do not have to struggle in silence. Do not let the fear of being stigmatized stop you from living the life you deserve.
Do you feel that there is more awareness nowadays about mental disorders?
There is so much more awareness about mental health nowadays. I think it is amazing how progressive our generation has been in helping dismiss the mental health stigma.
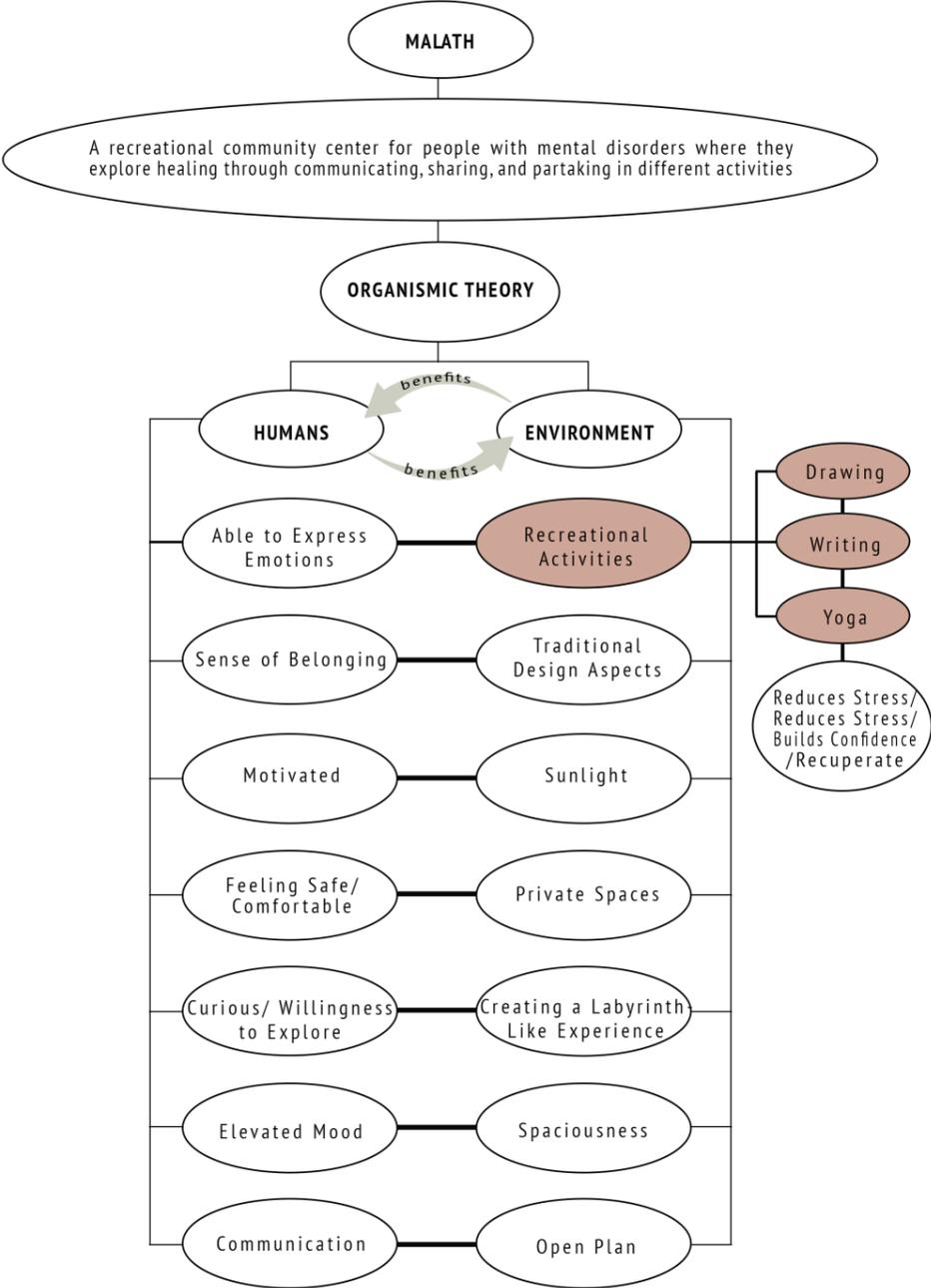
CONCEPTUAL FRAMEWORK

Mental disorders continue to affect an immeasurable portion of the Qatari population, which requires remedial measures. Malath focuses on creating a recreational community center designated for those with mental disorders. The center intends to create an environment in which they can explore healing through communicating, sharing, and partaking in different activities selected specially to aid those with psychological disorders. The center aims to promote mental health and normalises the issue within the Qatari community by allowing people to visit the center, observe, and partake in the recreational activities. In this way, people will be able to understand that those with psychological disorders are just as normal as anyone else. Besides, they will be able to have conversations with other visitors of the center which will help them sympathise and understand how people with mental disorders actually are. The focus will not just be on recreation, but also to ease or alleviate the burden that people with mental disorders carry. The center will have activity-based interventions based on mental and psychological needs of individuals as well as providing consultation and group therapy rooms if someone needed to talk with a professional. The goal is to create an enabling environment that considers the psychological and physical health, and well-being of the visitors. Recreational therapy is necessary to reduce anxiety, depression, and stress through tailored community activities. Through all of this, it is possible to improve the mental health of those with mental orders.

A relevant theory in Environmental Psychology that is going to be adopted for the project is the Organismic Theory. The theory mainly considers the human-environment relationship and explores the relationship of individual and social characteristics in a setting. It introduces a mutual relationship, in which both the recreational community center and people with mental disorders benefit from each other. Some of the factors that the theory considers related to mental disorders include current health, experiences on a given day, mood, state of mind, and character of others. Such factors will affect the way that the patients communicate, share, and participate in different activities. This can be achieved through the open plan and the spaciousness of the interior, which will encourage communication and elevate one's mood. Also, it has been proven that sunlight has positive effects on human psychology and considering that the open plan will allow most of the sunlight to penetrate into space, this will motivate people to be more engaging and happy.

Although the open plan is considered a positive attribute, it can increase anxiety and stress levels because of how noisey the place could get, but that can be solved with acoustical implementations to avoid creating a loud, uncomfortable environment. The Organismic Theory is quite applicable for the recreational community center because it seeks to understand both the visitors and their relationship to society and the environment. Naturally, every environment has both positive and negative attributes, which are often dependent on physical and human factors. Understanding this relationship is necessary to provide an enabling environment in which every stakeholder enjoys the benefits of the recreational center. Moreover, providing activities that encourage emotional regulation where visitors might show interest in partaking in activities that grant them the opportunity to express themselves through writing and drawing. Consequently, they will be conveying their emotions which is a fruitful way to promote well-being. Also, they could express their emotions through arts engagement, such as: making art, or contributing in a number of creative events or activities. Participation in arts has been shown in clinical studies to help patients recuperate, relax, and reduce stress, anxiety, and depression. It has been proved that people with psychological disorders who participated in arts programs had high levels of motivation, improved confidence, self-esteem, and self-understanding, as well as being linked to feelings of happiness. An excellent way in the organismic theory to provide the visitor with the curiosity to explore the environment of the center is by promoting independence, competence, and relatedness. This will cause individuals to gain the ability to investigate and master their environment, as well as finding meaning and connection, which improves their overall well-being. The pursuit of these basic musts will give the individual a feeling of worthiness and high self-esteem. In addition to that, it is necessary to create a sense of belonging so that people would feel like they are at home. This can be done through the implementation of Qatari design elements, as well as making the place accessible for all kinds of people. Not to mention, that some people might be sensitive and require maximum privacy, therefore private booths shall be installed in case someone wishes to be alone.

To create positive mental health outcomes, it is necessary to create a perfect connection between mental health care and the environment. For instance, while there should be privacy, the environment should also allow social interactions

between people. Striking a balance between the two elements is essential for the success of the facility. The Organismic Theory offers a great opportunity to understand the impact of variables such as character and mood, which ultimately affect the design of the facility.

MALATH

A recreational community center for people with mental disorders where they explore healing through communicating, sharing, and partaking in different activities

ORGANISMIC THEORY

benefits

HUMANS   ENVIRONMENT

benefits

Able to Express Emotions   Recreational Activities

Drawing

Writing

Yoga

Sense of Belonging   Traditional Design Aspects

Reduces Stress/ Reduces Stress/ Builds Confidence /Recuperate

Motivated   Sunlight

Feeling Safe/ Comfortable   Private Spaces

Curious/ Willingness to Explore   Creating a Labyrinth Like Experience

Elevated Mood   Spaciousness

Communication   Open Plan

ACOUSTICS

Designing a sensitive space that welcomes people with psychological disorders requires considering different aspects, and one of them is acoustics. Acoustics are key aspects to interior design and should be taken into account to guarantee the comfort and security of the visitors, and to create a pleasurable experience for them. Sounds can affect us in a variety of ways, including physically, mentally, cognitively, and behaviourally. It can lower motivation or provide us with a more engaging environment. Therefore, it is important to pay close attention to comfort in the built environment. Incident sound is going to be controlled depending on the different activities of different spaces. The space is divided into two main zones, public and private (fig.48). The public zone will contain a café and a majlis, recreational activities, the private zone will consist of consultation rooms, group therapy, and yoga studio.

Public Zone
Private Zone
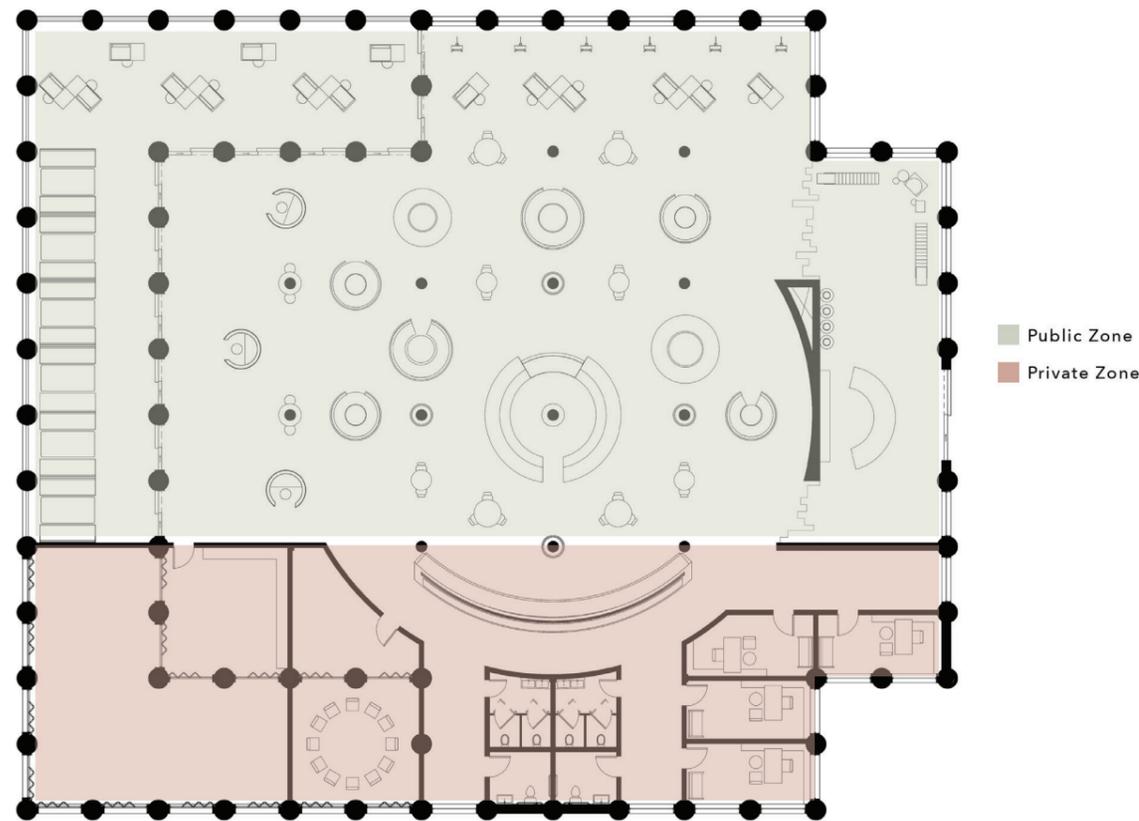
Figure 48: Malath Floor Plan Illustrating the Private and Public Zones
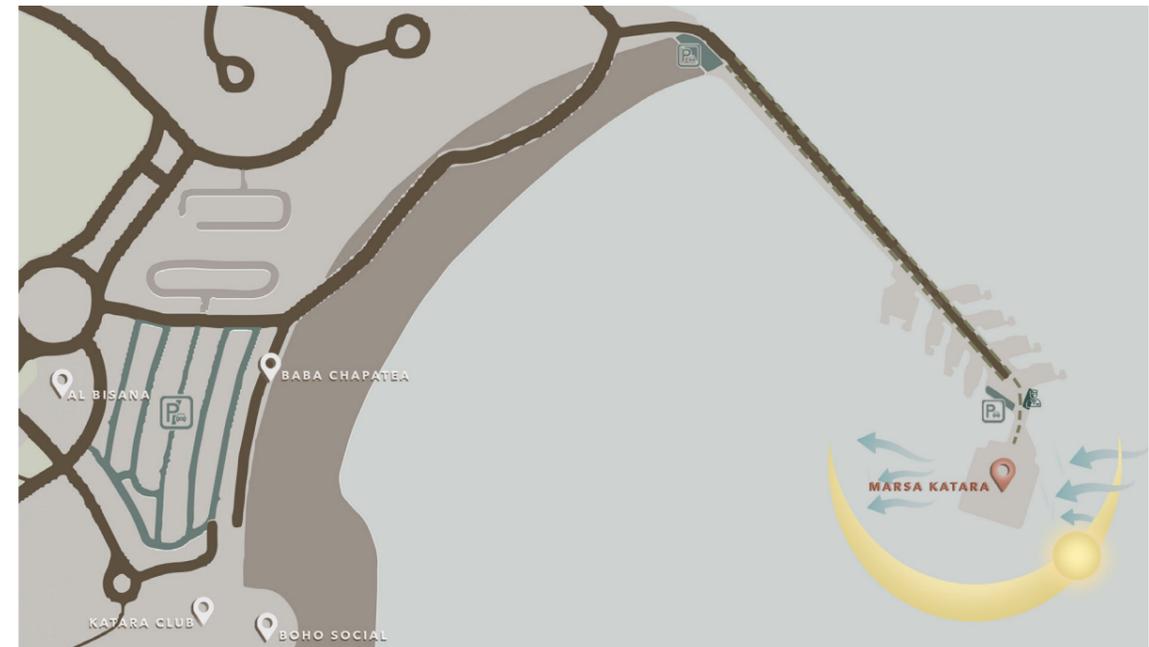
Figure 49: Site Plan

Since the location of the selected site is not very noisy, as it is in the middle of the sea (fig.49) soundproof exterior walls will not be used as there will not be any exterior noise. Though, the front façade can be treated with soundproofing material to block the noise that will be caused from the drop-off vehicles (fig.50) Also, the front window will be insulated using the double-pane technique, which reduces outside noise. This is a window system with two glass panes separated by a gas (fig.51)
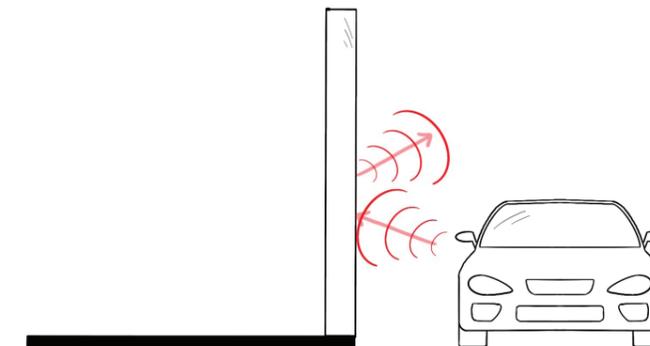

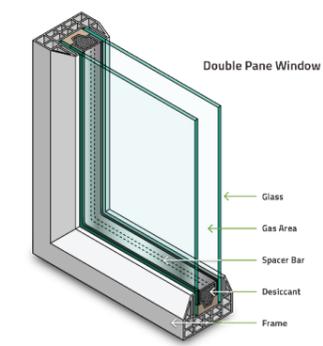*Figure 50: Noise Reflection from Exterior*

Figure 51: Double-Pane Window

To begin with, when it comes to designing acoustics, the plan layout should be taken into consideration. Public spaces, like the café and majlis, should not be adjacent to the consultation rooms so patients would not be overwhelmed by the public noise. However, the recreational activity spaces can be in between the public zone and close to the private zone since some activities would require a livelier atmosphere while others would maintain some privacy (fig.52)
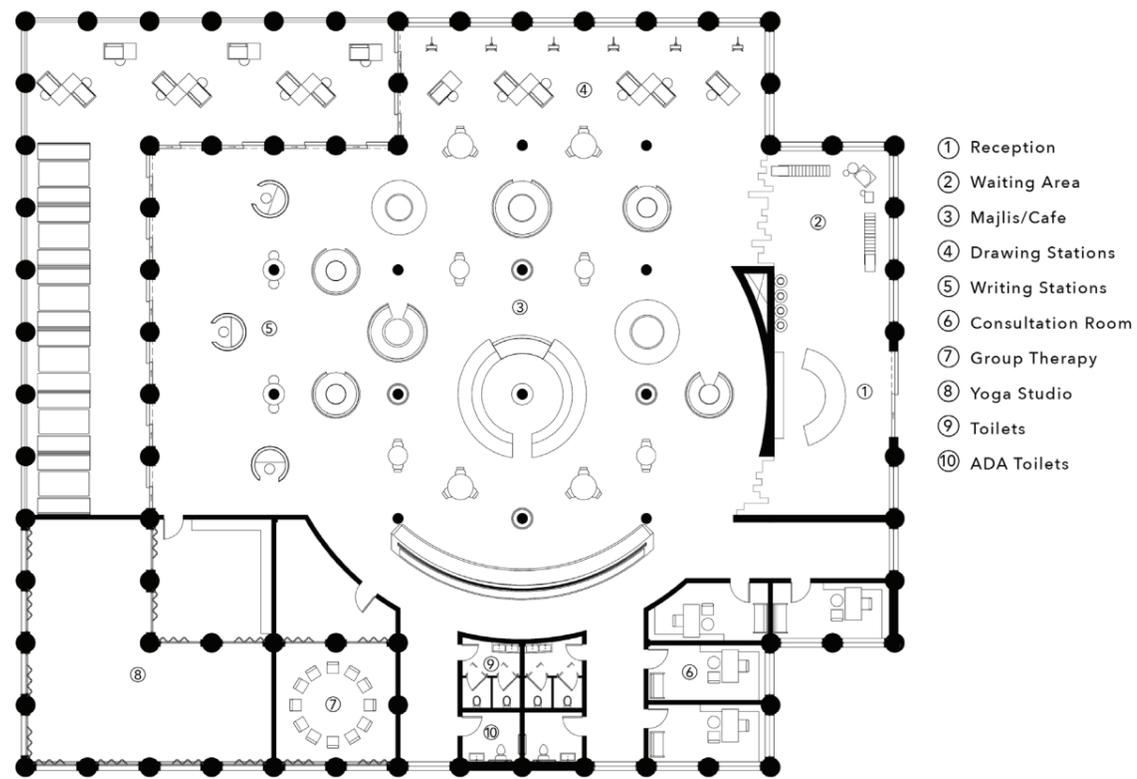

1. Reception
2. Waiting Area
3. Majlis/Cafe
4. Drawing Stations
5. Writing Stations
6. Consultation Room
7. Group Therapy
8. Yoga Studio
9. Toilets
10. ADA Toilets

Figure 52: Malath Floor Plan

Public Zone

Although the site provides a sense of publicity and openness due to the high ceiling (fig.53), there should be sound treatments that enhance the sound quality within the environment. The ceiling will typically be of gypsum, so acoustical absorption can be achieved with perforated gypsum panel systems with textured spray finishes, such as the CGC Ensemble, or recycled PET felt panels. The public zone should

Figure 53: Reception Section Showcasing Ceiling Height

provide the user with a pleasant experience where they feel like they are in a social environment yet they are not overwhelmed by the noise. The sound should travel smoothly where each party can hear and understand the other. This can be achieved through sound absorbing panels and diffusers (fig.54) to prevent reflecting unnecessary noise while maintaining the ability to comprehend conversations going on between individuals. Moreover, acoustical elements like cushions in the majlis and café chairs are going to be used to absorb more of the unwanted sound.
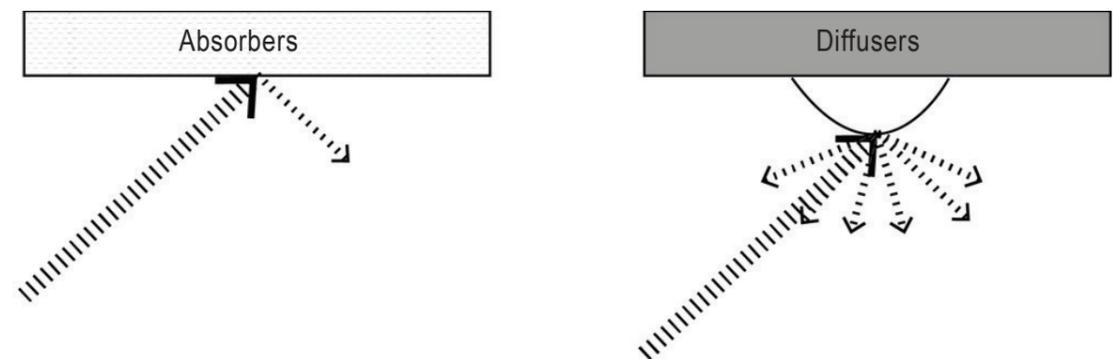

Figure 54: Sound Absorbing and Diffusing Panels

Moreover, in order to prevent any noise traveling from the public zone to the private zone, high-performance insulations are going to be used to avoid undesirable sound transmission. Not to mention that water features will be used to mask sounds and

control the background noise levels. As it has been proven that high noise levels can cause stressful reactions, confusion, increased heart rate, and fatigue. On the other hand, the sound of nature, such as water sounds can be a beneficial stimulation. Nature pictures and sounds have been shown to have positive psychological and stress/physiological effects.

Recreational Zone

The recreational zone consists of the writing, arts, and yoga spaces. These recreational activities encourage participation, therefore it is important to implement reverberation control using both ceiling and wall treatments to improve speech intelligibility. The spaces require a satisfactory amount of acoustic control as they are in the territory of the public zone. To avoid the noise coming from the café and majlis, partitions with acoustical boards are going to be used to minimize the unwanted sounds. The recommended performance level for partitions is 45 STC. In addition, the recreational activities require communicating with one another. Hence, acoustical panels (fig.55) will be spread within the spaces to allow clear communication between individuals.
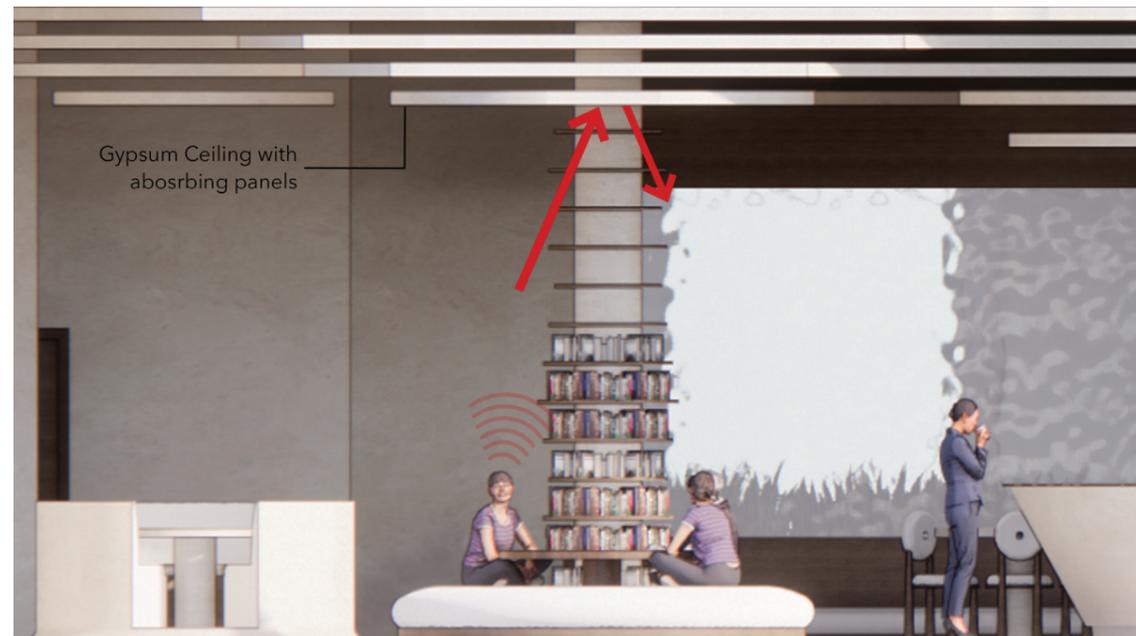

Gypsum Ceiling with abosrbing panels

Figure 55: Section of the Majlis and Cafe Showcasing the Ceiling Acoustical Panels

Private Zone

The private zone which consists of the consultation rooms and toilets requires more privacy, since there will be private discussions with the patients. Speech intelligibility should be enriched, it should reach 95% considering that the conversations are confidential, Therefore, it is necessary to use sound blocking by installing solid walls for each room. These walls should go all the way to the deck on the roof (fg.56)
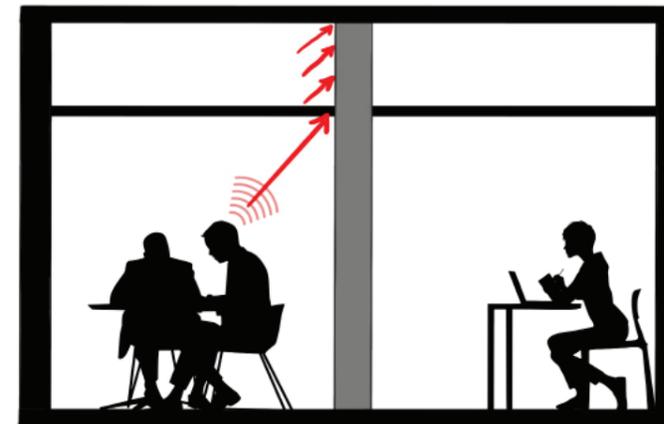

Figure 56: Section Showing All-the-Way-to-the-Deck-Walls

to avoid the sound leakage from the ceiling to the neighboring areas. Furthermore, installing acoustic ceiling tiles made from washable mineral fibers has a noise-reduction coefficient of 0.70. Furthermore, diffusers can be installed to improve the sound in the space. Diffusion scatters reflected sound energy over a space, reducing the negative impacts of reverberation and echo. Toilets, on the other hand, can act as buffer zones that lie between the public zone and the consultation rooms to prevent the noise of the public zone from getting into the private zone.

Acoustic design plays an important role in interior design. Using it in the right way aids in maximizing communication and the level of comfort in the space, and avoids creating a noisy uncomfortable environment that could increase anxiety and stress levels. Users are affected by sound in a variety of ways. Poorly constructed environments with high noise levels have a harmful impact on people's health and can result in unacceptable violations of confidentiality. Since a weakly built environment can result in the leakage of some private conversations. At the same time, a bad acoustical environment makes it difficult to communicate effectively.

INDOOR AIR QUALITY

The way buildings are built and operated has changed dramatically during the last few decades. Building design changes have been influenced by the requirement for better energy efficiency. However, it also resulted in creating an atmosphere in which airborne pollutants are easily produced and can accumulate to much higher amounts than are generally found outside. Given that the majority of the urban population spends more than 80% of their time indoors, the various pollutants present in indoor environments may be harmful to human health, making indoor pollution a major public health issue. Literature reviews have proved that indoor air quality is thought to play a role on mental health and since Malath fosters people with different psychological disorders it is important to take IAQ into consideration. Poor indoor air quality in buildings has been proven beyond a reasonable doubt to reduce productivity as well as cause visitor's unhappiness. Besides, such poor air quality can develop Sick Building Syndrome (SBS), which is a building-related sickness. SBS and pollutants all have an impact on the inhabitants' total productivity. Plus, studies have linked mental health and disorders, that are not apparent in the short term but might cause substantial issues in the long run, to the indoor environment quality.

Figure 57: Site Plan

Since the recreational center is located in the middle of the sea (fig.57) it is exposed to high levels of humidity, especially that Qatar is a hot country and mostly dry with an average annual percentage of humidity of 59% (fig.58). Temperature and humidity have a substantial impact on interior air quality perception; from pollution level, perceived air quality declines as air temperature and humidity rise (fig.59).
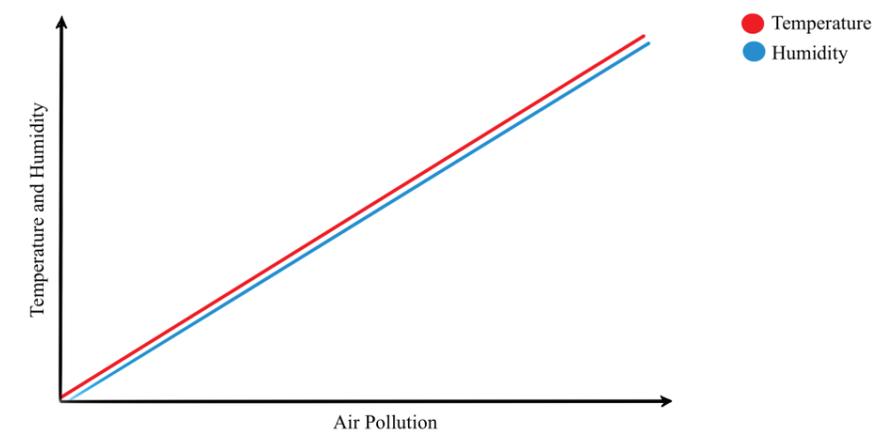

Figure 58: Average Humidity in Doha, Qatar

Figure 59: Relationship between humidity, temperature, and air pollutin

The rate of dangerous or toxic substances in the air increases by high humidity. Also, typically there will be polluted outdoor air that will be coming from vehicles. Additionally, considering that there will be a café, there is going to be a food prep area (fig.60) which is a potential air pollution source because of the boilers, stove, and heaters that will contribute to emitting some harmful gasses such as Carbon Monoxide.
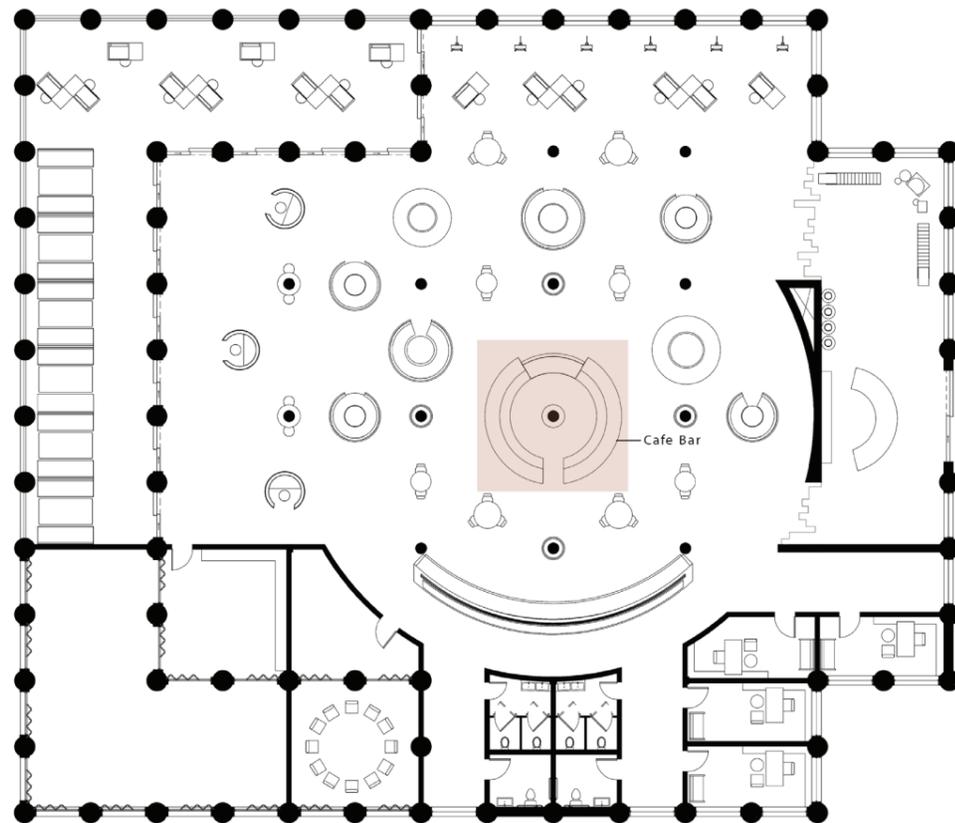
Figure 60: Malath Floor Plan

Moreover, to compliment the atmosphere of the space, some walls are going to be painted. Paints can lower indoor air quality and increase health risks considering they can contain toxins such as VOCs and SVOCS (volatile and semi-volatile organic compounds), as well as tiny particle substances that irritate the eyes and throat. Preliminary findings pointed to potential contaminants that could have an impact on mental health, such as common volatile organic compounds (VOCs), which could have a direct influence on mental health as a result of exposure. In addition to that, paint, markers, and pens—that are obviously going to be used in the recreational activities of arts and writing, contain odors and VOCs. Furthermore, vinyl flooring is going to be installed in the interior. However, resilient flooring is also proven to be a source of VOCs emission. Generally, individuals are going to be exposed to

a multitude of pollutants from a variety of sources at the same time. For instance, Asbestos and Formaldehyde from insulations, Micro-organisms from conditioning systems, and organic substances from paints and solvents.

To help improve the indoor air quality some measures and strategies should be taken into consideration. First of all, using specific kinds of paints that are low in VOCs or with no VOCs at all such as water-based acrylic latex paints, which minimizes health risks and hazardous waste. In addition, maintaining a steady supply of fresh air and choosing materials that are free of pollutants, which are damaging to human health, is an important step to having a hygienic environment. Thus, it is important to make sure that the interior is well ventilated with fresh air and air filters. Not to mention, using plants that are good VOCs absorbers. Researchers in public health and health economics have demonstrated the function of natural contact and the environment as a general health promoter, including mental health, in recent decades. as they showed that nature experiences are associated with mental health benefits in several ways. Hence, enhancing natural ventilation can help to improve interior air quality by lowering contaminants. This can be achieved through opening doors and windows to allow natural air to travel within the interior space through the cross-ventilation system (fig.61), considering the center's strategic location in the
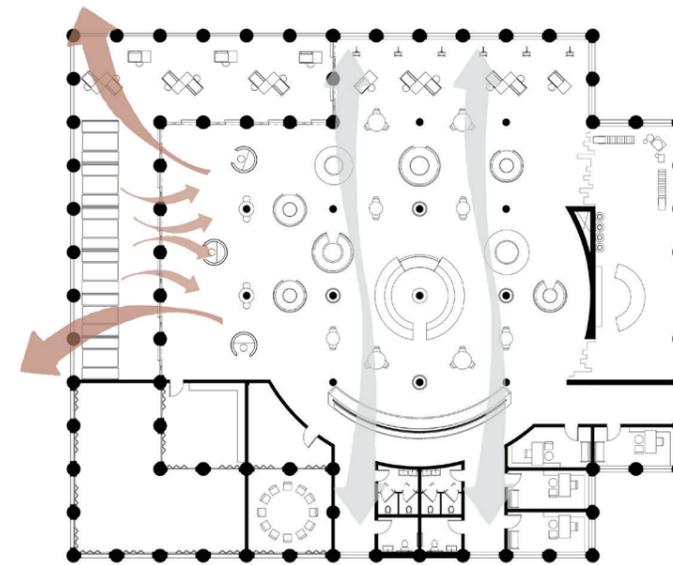

Figure 61: Malath Floor Plan Showcasing the Cross-Ventelation System

middle of the sea. It will maintain a steady supply of fresh air, through allowing wind to travel within the interior, as a sustainable approach that reduces the dependence on air conditioners. To add to that, using non-biological-pollutant dehumidifiers to control the humidity level within the space. As well as, using air filters (fig.62) which support the air quality by lowering contaminants.
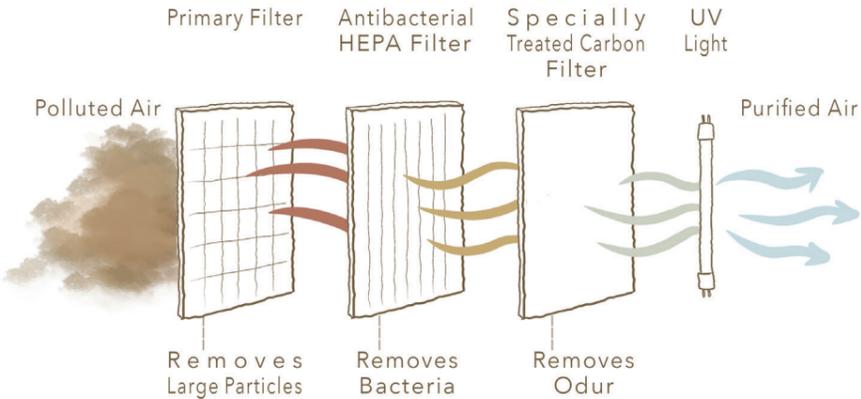
Primary Filter   Antibacterial   Specially   UV
                 HEPA Filter   Treated Carbon   Light
                                 Filter

Polluted Air   Purified Air

Removes   Removes   Removes
Large Particles Bacteria   Odur

Figure 62: Air Filter

It has been recognized that poor IAQ has a direct impact on the inhabitants' comfort, health, and productivity. When it comes to identifying the overall comfort of the environment, human health must come first. The recreational community center's aim is to provide the visitors with a therapeutic experience. Therefore, it is necessary to focus on the wellbeing of the center's visitors by providing the finest indoor air quality. Connecting the visitors with nature is a prominent step for their mental well-being and the indoor air quality.

ERGONOMICS

Designing a recreational center that targets people with mental disorders should foster an environment that fits the visitors' psychological and cognitive needs. That is why it is important to consider ergonomics, in order to increase individuals' productivity within the center, encourage them to explore, communicate, and heal, to achieve the goal of creating a therapeutic and calming environment for the visitors, especially those with psychological disorders.

When creating a recreational center, one must make several key considerations. Mainly, the goal of the recreation center is to welcome people suffering from all types of mental disabilities and members of the general population. The design of the place must encourage socialization of people with mental disabilities while simultaneously including factors that would make the recreation center appealing to the general population. Ergonomics is a field that focuses on improving fit between people and objects that they interact with.

People with mental disorders face a great amount of discrimination, avoidance, and neglection within the society. People tend to avoid interacting, making friends, and socializing with someone who has a mental disorder. It has been proven that negative social interactions towards people with mental disorders has an undesirable outcome on them; putting them in a depressed and stressful mood, causing them to relapse, and demolishing their self-worth. Here, the physical and cognitive ergonomics come in handy, as they help with reducing stress, and enhancing communication and motivation.

Physical Ergonomics

The first consideration concerning physical ergonomics for the recreation center is the layout. Each of the facilities within the center needs to be easily accessible to fully-abled people and those with physical disabilities. In some cases, physical disabilities and mental disabilities often tend to be co-occurring disorders. Therefore, the recreation center will be ADA (American with Disabilities Act) friendly, by making sure the wheelchair radius is applied in most spaces (fig.16), tables are designed with wheelchair access allowance, corridors minimum width is 1500mm (fig.17), door opening width is 900mm minimum...etc.

Secondly, there will be fewer walls separating the activities within the center, as it is going to be an open plan, where most of the activities are open on each other (fig.64), to make it easier for people with mental disabilities to access various
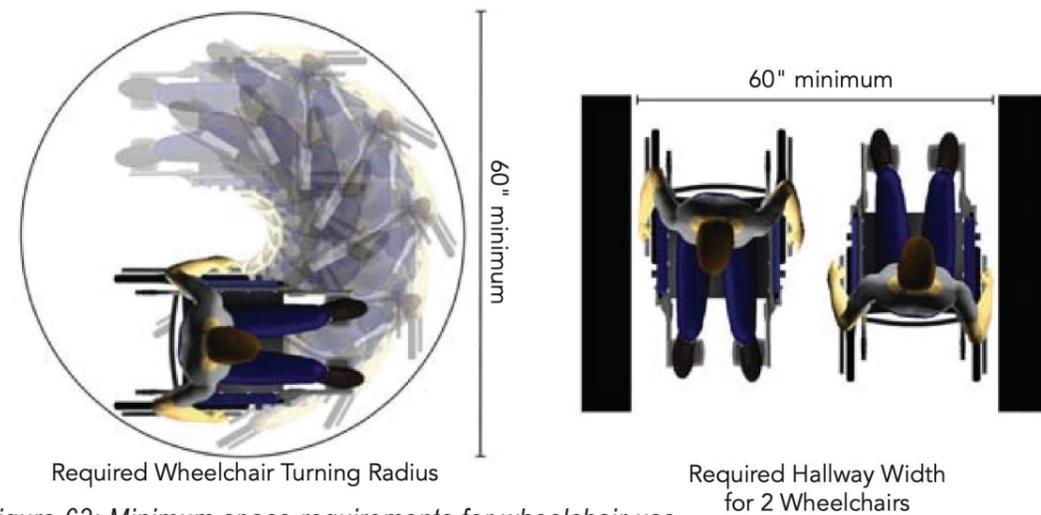

Figure 63: Minimum space requirements for wheelchair use.

① Reception
② Waiting Area
③ Majlis/Cafe
④ Drawing Stations
⑤ Writing Stations
⑥ Consultation Room
⑦ Group Therapy
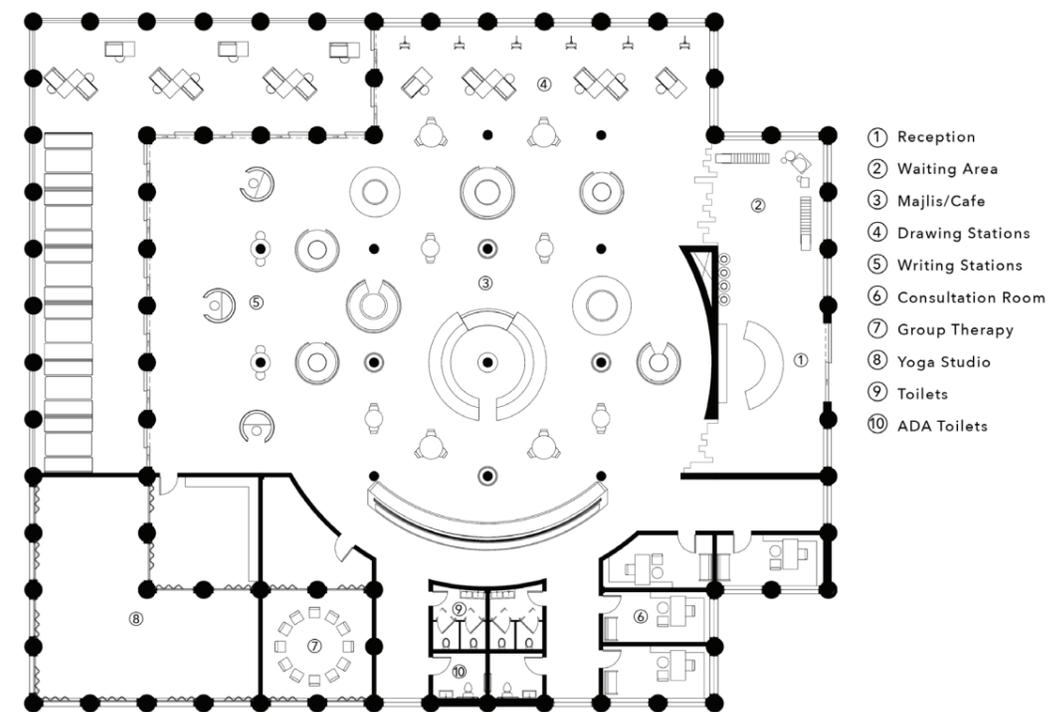⑧ Yoga Studio
⑨ Toilets
⑩ ADA Toilets

Figure 64: Malath Floor Plan

facilities, including the café, the majlis, the waiting area, and the crafts area. Instead of dividing each of these facilities using conventional walls. The most appropriate approach will include using glass partitions, which will allow the visitors to quickly look through various walls to know which section they need to go to. Also, it is also important to use physical directions to direct them to facilities such as the toilet and exit doors (fig.65). The majlis and café will be centrally located by the entrance as they are the focal point of the building. All other areas of the recreational center will be on the center's perimeter (Fig.65).

Figure 66: Render of the Waiting Area

Figure 65: Exit and Bathroom Sinage

Cognitive Ergonomics

The most important consideration is comprehending that the target demographic is mentally disabled. Therefore, the first approach will make the ambiance interactive, yet calming. Aesthetics are most likely to convince the visitors to revisit the center regularly. The interior design cannot be intimidating in any way. A color scheme of earthy tones and of less saturated hues is going to be adopted to provide calmness and give off a sophisticated vibe (Fig.66). Moreover, excellent lighting, especially natural light, will be necessary to make the place both aesthetically appealing and help those who have mental conditions such as depression, anxiety, or even suicidal thoughts to have more improved moods. Moreover, the goal is to create or use products that are simple, straightforward, and simple to use, resulting in a better overall user experience (fig.67).

Figure 67: Functional Drawing Table

There is a lot of evidence that there's a correlation between well-being and thoughtful design. Good design of the built environment leads to better health results and reduced stress. Hence, ergonomics is critical for improving a product's or environment's safety, comfort, and performance which will facilitate the usage of the space and recreational activities that would provide the visitors with a curative, positive, and pleasurable experience avoiding any discomfort, fatigue, and pain that could occur if ergonomics were to be ignored.

LIGHTING CONSIDERATIONS

When it comes to designing interiors, lighting considerations play an important role. Lighting gives the space a new dimension and helps to bring an interior design concept to life. Lighting highlights the most outstanding features of the design, adds depth, and creates cozy or motivational spots. Appropriate lighting does not only affect people mentally, but can also reduce eye fatigue and headaches. Light has an impact on human health and performance through facilitating visual tasks, regulating the body's circadian clock, and influencing mood and perception.

Malath aims to create a comfortable and welcoming atmosphere for its visitors, where they can feel the coziness of being at home, as well as offering a motivational ambiance to encourage visitors to partake in the different activities and socialize. It has been proven that light has an influence on physical and mental health as it has been confirmed people prefer natural instead of artificial light, windows and natural views. Hence, these preferences are connected to mental health. According to data from a WHO survey, inadequate daylighting or poor window view raised the likelihood of depression by 60% and 40%, respectively. Lighting that is well-designed is linked to better physical, physiological, and psychological health benefits both directly and indirectly. Therefore, the site was selected carefully to cater the needs of those with psychological disorders as it overlooks the calming sea of Doha (fig.68).

Figure 68: Photo of Marsa Katara

Also, there will be a huge dependence on natural light throughout the day through the windows and openings. This will also allow access to the natural view of the sea.

Consultation Rooms

Since consultation rooms will be occupied by people with psychological disorders coming in for consultation, it is necessary to provide sunlight since it enhances people's well-being. Capturing enough sunshine in the building can offer healthier conditions for people while also lowering energy use. Consultation rooms will have windows that overlook the sea view, taking advantage of the view and getting the most sunlight (fig.69). Cool colors more closely resemble natural lighting. Therefore, cool LED light bulbs are going to be used in the consultation rooms to raise productivity and serotonin levels, allowing the conversations to run more efficiently.

Figure 69: Section Showcasing the Consultation Rooms

Café/ Majlis Area

Considering that the café and majlis are in the heart and social hub of the center it should provide a comfortable, cheering, and encouraging atmosphere. This is going to be achieved by having huge windows that would allow most of the natural

Figure 70: Cafe/ Majlis Windows in Malath

light to penetrate into the space (fig.70). Moreover, warm LED lighting is going to be used, as warm lighting is considered to be comfortable and often encourages people to eat more, making it useful for the purpose of the cafe. Additionally, every majlis seating within the café is going to have a drop ceiling with a drop pendant light to provide a more personal experience for every majlis seating area (fig.72).

Figure 72: Section Illustrating the Majlis' Seatings and Drop Ceiling

Besides the café bar has a drop ceiling too (fig.73) with cool LED lights to provide the staff with more lighting when preparing the orders and boost the productivity of the staff.

Figure 73: Section Illustrating the Café Bar and Drop Ceiling

Writing Area
The greatest effect of light on humans is that it allows them to see and accomplish visual tasks. The level of performance attained is determined by the nature of the task and the dispersion of light. As light levels rise, so does performance on visual tasks. According to a study, most ordinary visual tasks, such as reading and writing, can be completed as well under artificial light sources as they can under daylight settings if the amount and distribution of light is controlled. Some writing tasks can be in booths while others are in the open plan (fig.74). Hence, to make the booth more lit a task light is going to be provided in each booth to avoid the gloom of the enclosed space. Furthermore, a drop ceiling with LED light is going to cover the top of the booth (fig.75) to provide more lighting in the booths.

The reason Malath maximizes sunlight within the interior is for a variety of reasons. Inhabitants prefer daylight to electric lighting because of psychological comfort, look and pleasantness, general health, visual health, color appearance of people
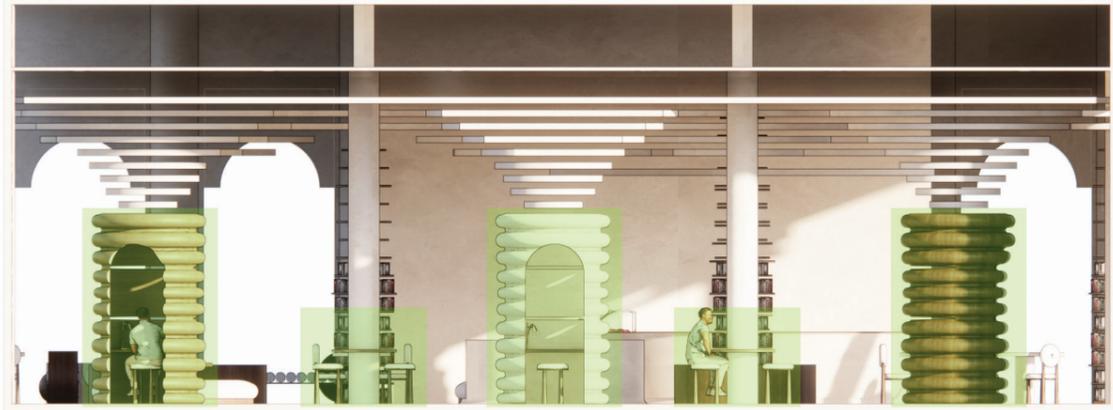
Figure 74: Section of the Writing Spaces

Figure 75: Section of the Writing Spaces and Drop Ceiling

serves biological demands and improves people's circadian cycles. It is important to combine artificial lighting controls with daylighting schemes as it can save from 7% to 60% of energy.
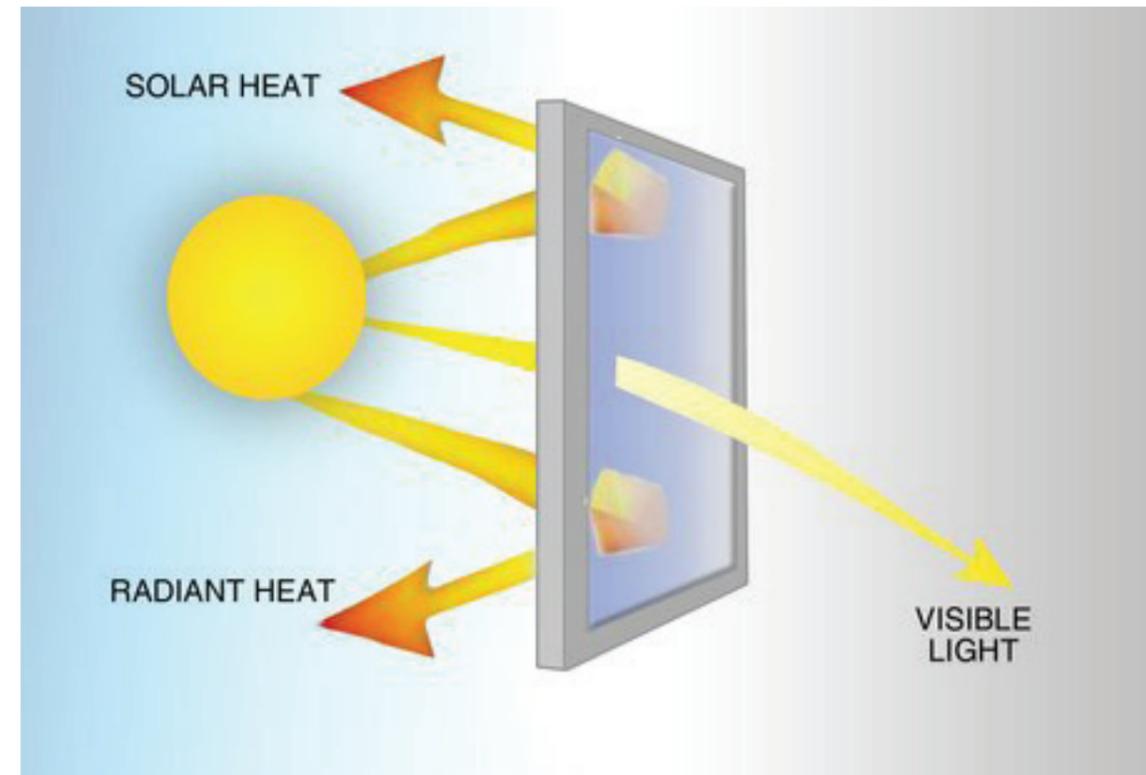

Figure 76: Mechanism of the High Performance Thermal Insulated Glazing

and furnishings, performance, and so on. To prevent excessive heat gain, high performance thermal insulated glazing is going to be used for the windows, as it controls the solar gain by reflecting the heat and not allowing it to escape through the window (fig.76).

 Using daylight in the building design can meet people's demands for well-being and reduce energy usage. Considering the fact that it has been proven that daylight has a good impact on people's task performance, comfort, and well-being. Daylight

BUILDING CODDES

The International Building Code (IBC) is a significant instrument for ensuring public health, welfare, and safety in the built environment by protecting people from any risks that may occur. Considering IBC while designing provides efficient designs and an inhabitable environment. The IBC will greatly inform on the success of the project which entails creating a recreational community center that is designated for individuals with psychological disorders. By observing the IBC, the recreational community center will be a holistic facility for people with psychological disorders that will effectively help to eradicate the problem of mental health stigma in Qatar.

Occupancy Classification and Load

Malath is a recreational community center that fosters different types of activities within it. Hence, there are different classifications that fall under the center:

Entrance, Waiting Area, Yoga Studio, and Reading Space: Assembly Group A-3.

Café and Majlis: Assembly Group A-2.

Art and Drawing Space: Assembly Group A-1.

Consultation Rooms: Business Group B

Finding the occupancy load for each space is important for space planning and recognizing the number of users for each room and activity. Moreover, it is considered an essential data for the safety of the visitors to avoid crowding within the interior, especially when the aim is to create a calm atmosphere. The table below illustrates each room, its sqm, and the occupancy load:

Room	Area	Occupancy Load
Reception/ Waiting Area	80 sqm	15
Café/ Majlis	465 sqm	70
Arts Area	170 sqm	11
Writing Area	112 sqm	8
Yoga Studio	121 sqm	14
Consultation Room	10 sqm	4
Group Therapy	40 sqm	12

Figure 77: Malath Occupancy Load Table

Means of Egress

Means of Egress is a fundamental IBC consideration which should be considered during the planning and design stages of construction. It simply refers to clear paths for leaving certain spaces, structures, and buildings. They include exit discharge, exits, and exit access within a particular site. The building will have 2 main exits which is in accordance with the IBC which requires at least 2 exits from all buildings and buildings (Fig.78). The table above (fig.77) shows the room areas that fall under the IBC that states that every habitable space should be equal to or bigger than 11.2 sqm. Malath ceiling is 4600 mm above the ceiling floor (fig.79) as it is mentioned in the IBC 1003.2 that the ceiling height should not be less than 2286 mm above the finish floor.
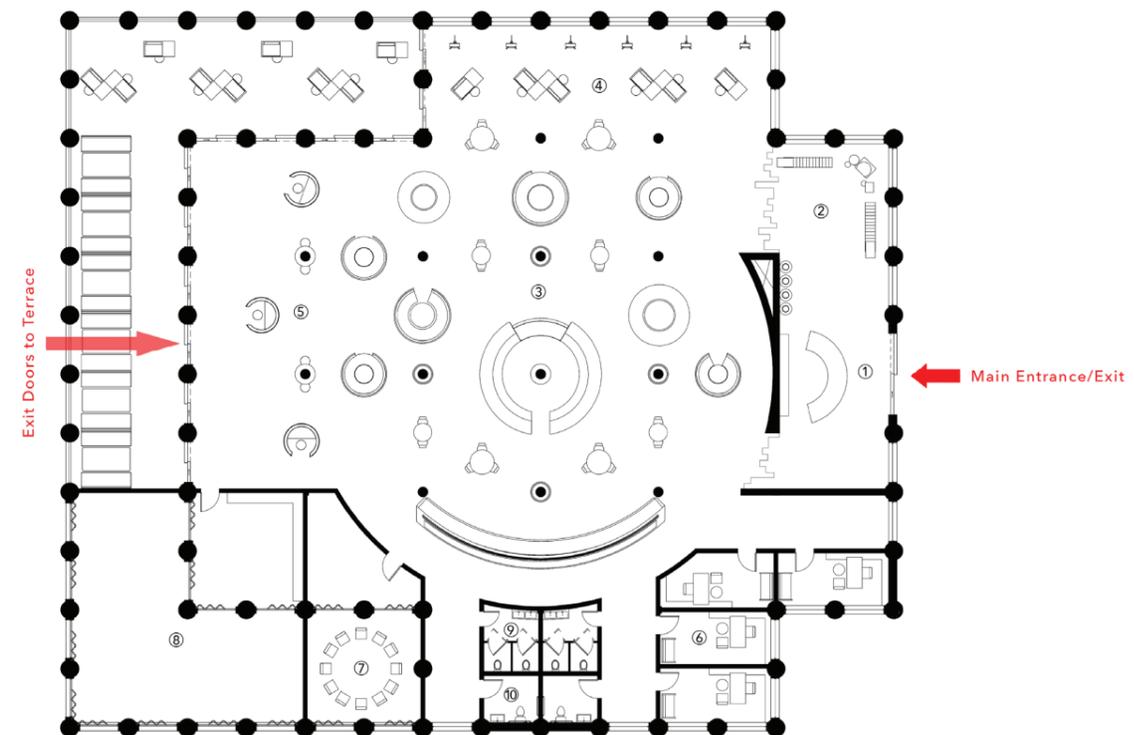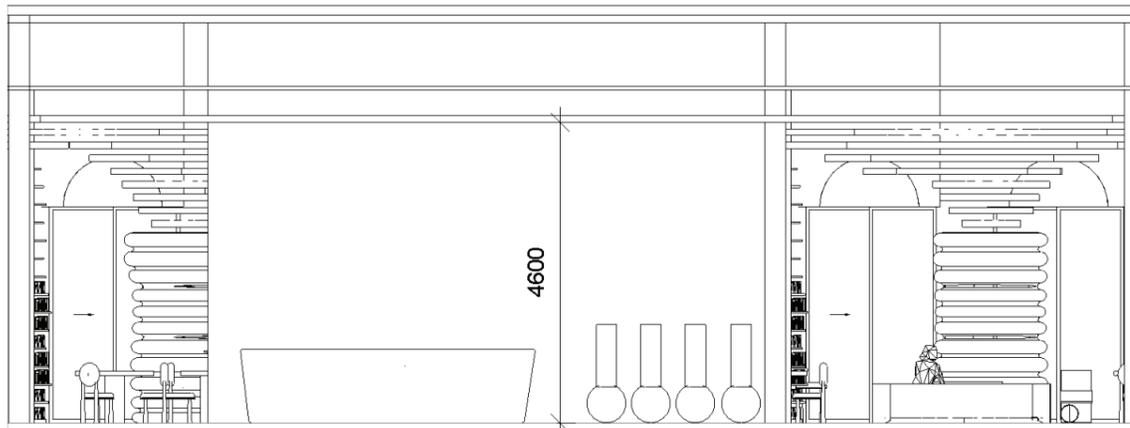

Figure 78: Malath Floor Plan Illustrating Exits

Figure 79: Reception Section Illustrating the height between the ceiling and finish floor

Ventilation

Code 1202.1 states that natural ventilation should be provided in all buildings. Natural ventilation is achieved through doors and windows or other openings. In Malath the two sources of natural ventilation are the windows that surround 99% of the building and the doors, this will help get the most of the natural ventilation. Furthermore, to maintain a steady supply of fresh air, the cross-ventilation system is adopted in Malath as shown in the diagram below (fig.80). Cross ventilation also referred to as wind effect ventilation is one of the natural methods of cooling in buildings. The cross-ventilation system utilizes the openings of the buildings to naturally cool the internal space of the building by allowing the cool exterior air inside while forcing the warm interior air outside. Thus, cross ventilation is an instrumental system for making the building helpful especially during hot days.

Lighting

Natural light must be provided to every space intended for human habitation through exterior glass openings as code 1204.1 states. Therefore, an open floor plan is adopted to contribute to lighting efficiency as it helps to distribute natural light to most parts of the interior (fig.81). The design ensures proper lighting in nearly all parts of the building. Curtains will be used in specific rooms to give a gradient light ideal for people with different mental health disorders.
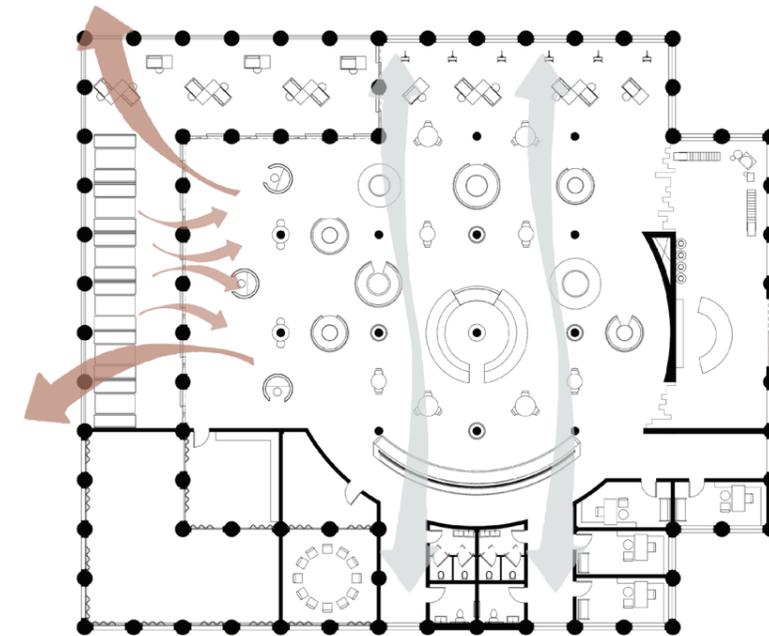

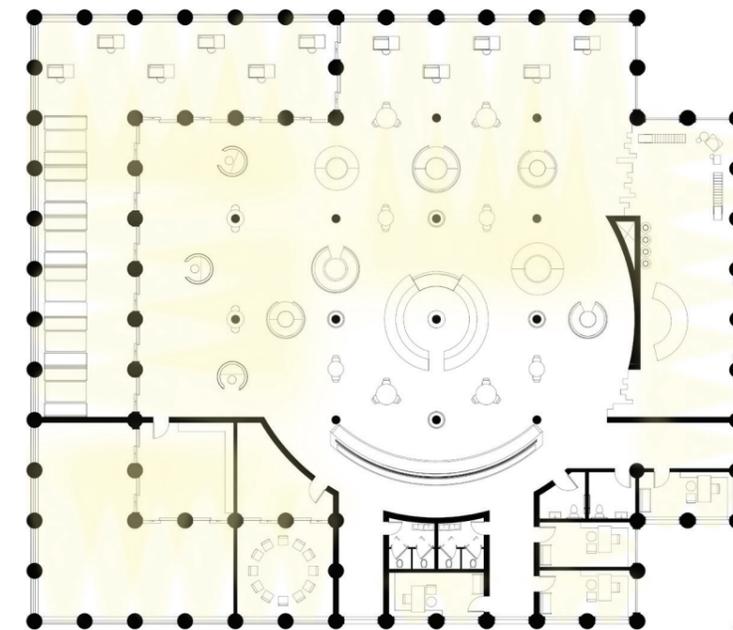*Figure 80: Cross-Ventilation System in Malath*

Figure 81: Natural Light Access in Malath

Accessibility

Everything is mandatory to be accessible for everyone as code 1103.1 clearly declares. Considering Malath is a community center that welcomes everyone, people with disabilities should as well feel included and celebrated in the center by reflecting basic applicability requirements in the interior. For instance, the plan below (fig.82) shows the wheelchair radius and its applicability within the interior. The design gives room for suitable space in which people with disabilities can effectively move around in their wheelchairs within the facility. The wheelchair turn radius considered is important in ensuring that it enables the wheelchair to make a 360-degrees or 180-degrees turn within the building. The open plan allows easy access around the space for wheelchair users. Moreover, ADA toilets provide users with an area of sqm and grab bars (fig.83).
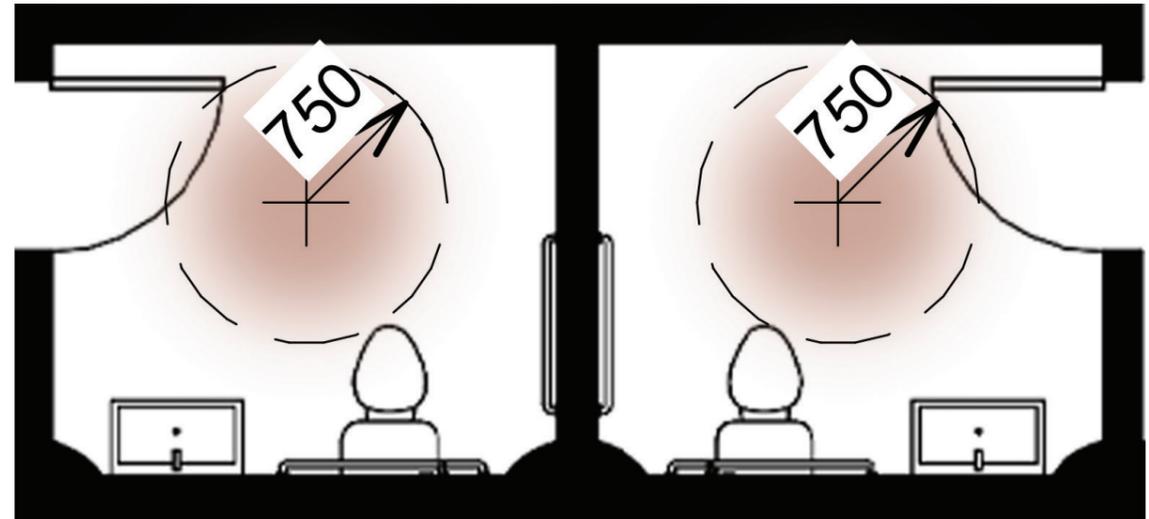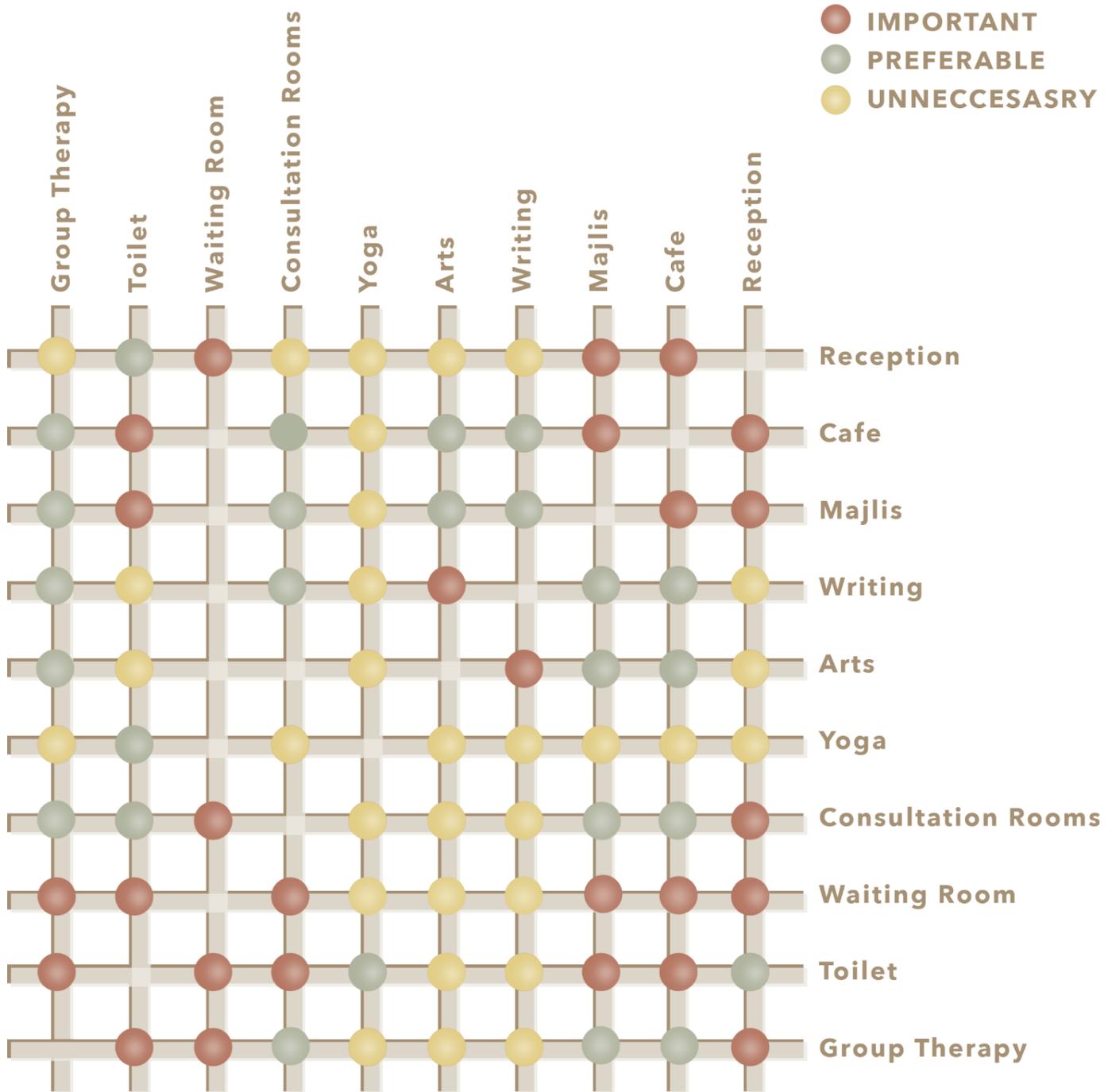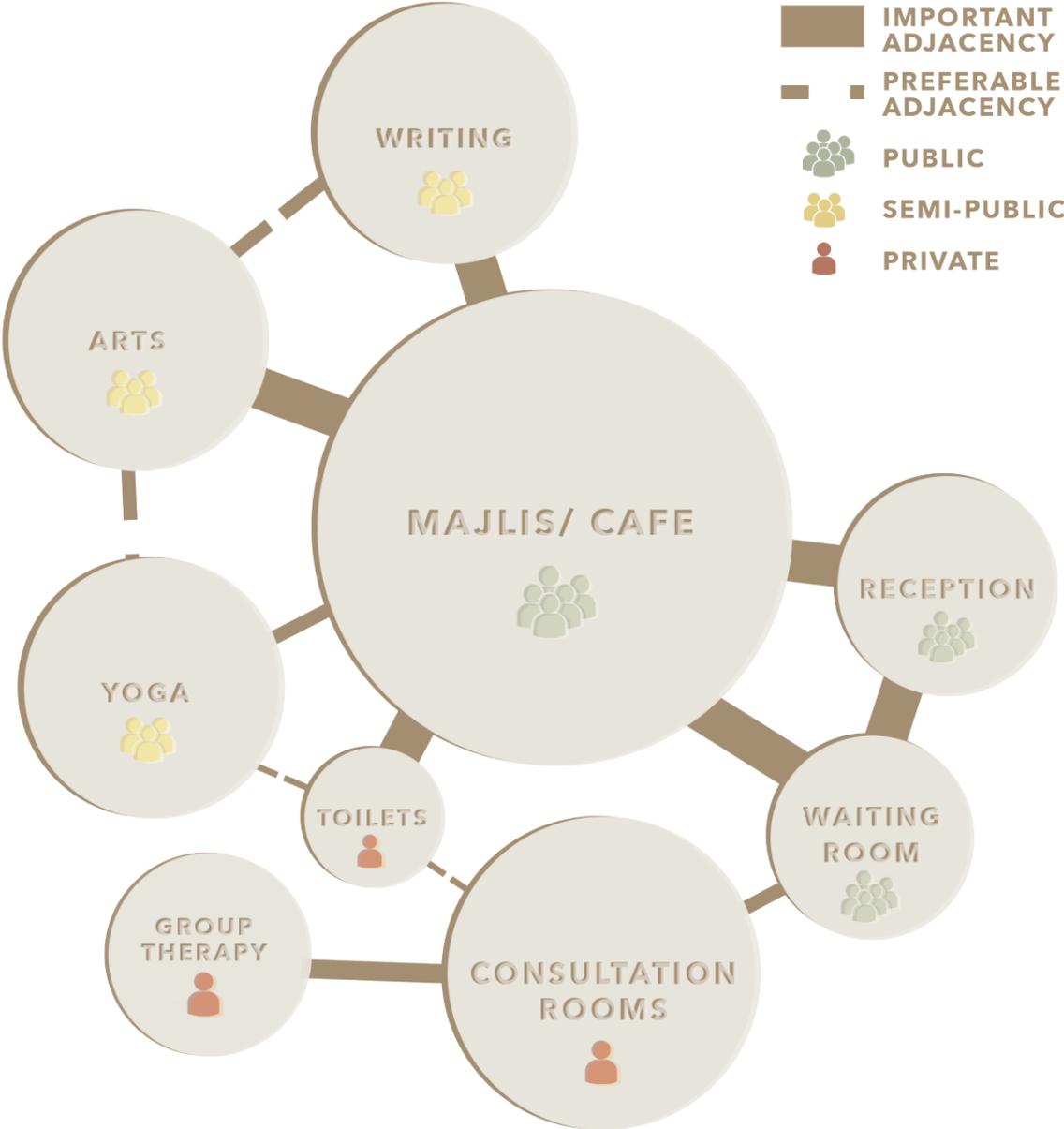

Figure 83: ADA Toilets in Malath

The safety, well-being, and comfort of the people is what matters the most. Thus, applying the International Building Codes in Malath promotes a harmless and accessible space for all kinds of people. Making sure a building follows these codes helps in fulfilling the occupants' basic needs which improves the experience for them and encourages them to come back.
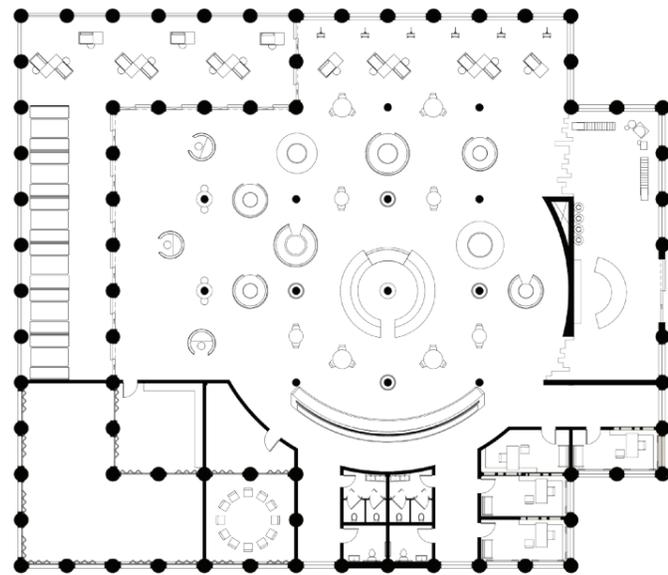

Figure 82: Plan illustrating the Wheelchair Radius

CONCEPTUAL AND SCHEMATIC PHASE

ADJACENCY MATRIX

Legend:
- IMPORTANT
- PREFERABLE
- UNNECCESASRY

Columns: Group Therapy, Toilet, Waiting Room, Consultation Rooms, Yoga, Arts, Writing, Majlis, Cafe, Reception

Rows: Reception, Cafe, Majlis, Writing, Arts, Yoga, Consultation Rooms, Waiting Room, Toilet, Group Therapy

BUBBLE DIAGRAM

Legend:
- IMPORTANT ADJACENCY
- PREFERABLE ADJACENCY
- PUBLIC
- SEMI-PUBLIC
- PRIVATE

WRITING

ARTS

MAJLIS/ CAFE

RECEPTION

YOGA

TOILETS

WAITING ROOM

GROUP THERAPY

CONSULTATION ROOMS

DESIGN APPROACH

Open Plan

An open plan is adopted to create a space that encourages communication between patients. The open plan creates a welcoming and communicative atmosphere. Also, it allows natural light to penetrate within the space and through the furniture.
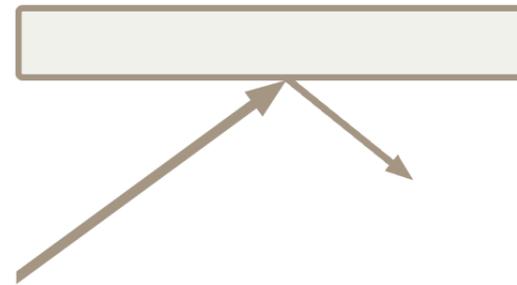
Acoustics

Since an open plan is adopted, it is necessary to control noise within the space through having sound absorbing panels within the gypsum drop ceilings. Also, acoustical elements like cushions are going to be used to absorb unwanted noise.
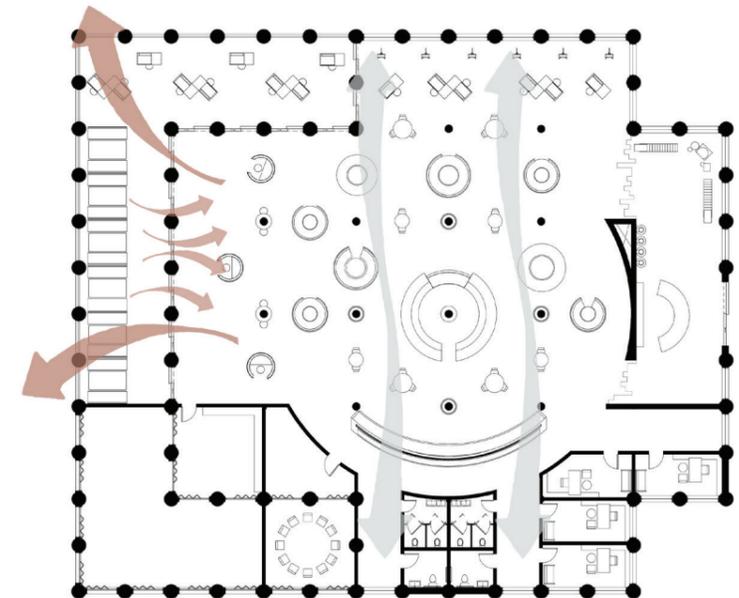
Indoor Air Quality

It is necessary to take advantage of the cross-ventilation system, considering the center's strategic location in the middle of the sea, by maintaining a steady supply of fresh air through allowing wind to travel within the interior, as a sustainable approach that reduces the dependence on air conditioners.
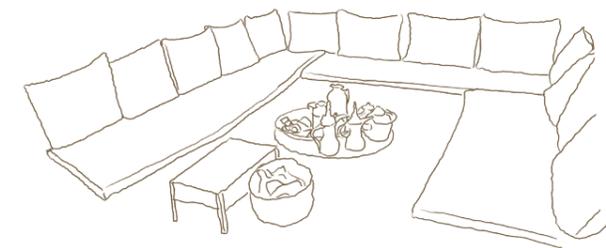
Implementing **Qatari design elements** to provide the visitors a nostalagic experience and a sense of home and to emphasize the idea of mental health in Qatar.
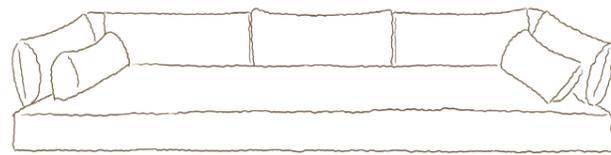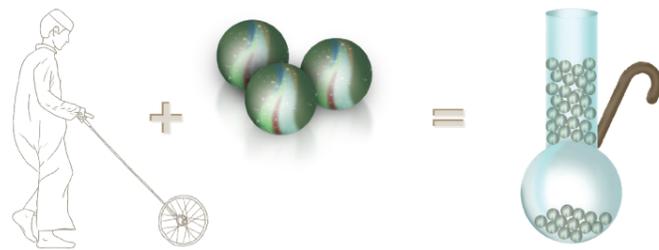
Low-Rise Seating
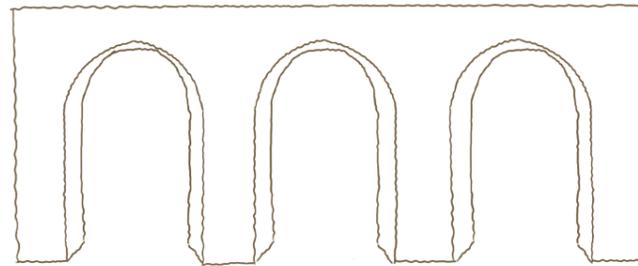
Arches

Concept of Majlis

Interactive installations inspired by traditional Qatari games will be used around the space to encourage the visitors in conveying their emotions, offering them a different and unique experience.

"How are you Feeling Today" installation asks the visitors about their feeling that day by releasing a Teela a small marble ball, into a glass socket
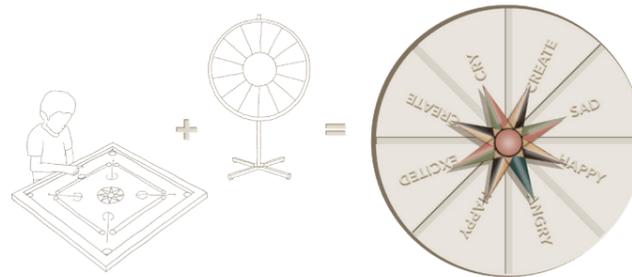
"What Made you" installtion will focus on communicating and sharing with others. Someone will have to spin the wheel and when it lands on an emotion the other party has to say "What made them, depending on the emotion the wheel lands on, feel that day.
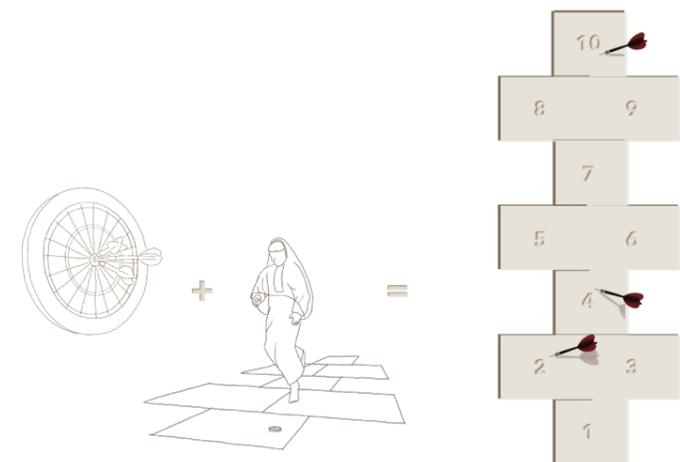
"How Happy are you" installation will be placed by the door before people leave. They will be asked about their happiness level after their visit to the center as they will have to throw a dart arrow on their answer.

Ideation Collage of Cafe/ Majlis

MALATH

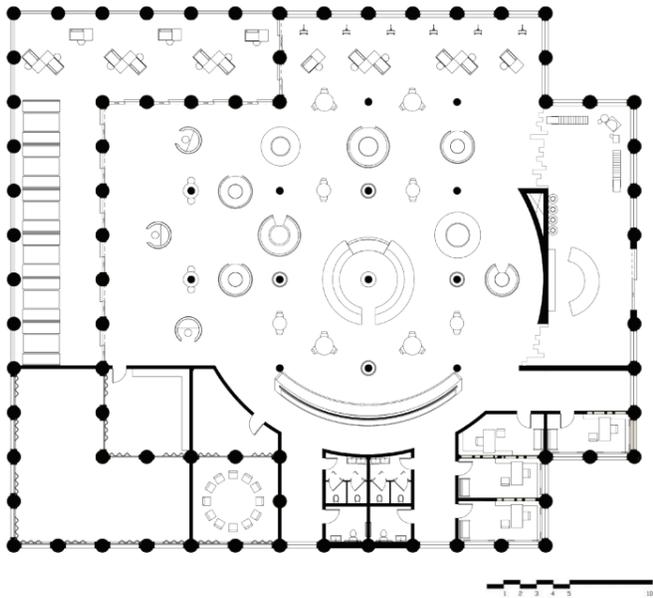Ideation Collage of the Reception

Ideation Collage of the Waiting Area

PRELIMINARY PHASE

PLANS

Floor Plan
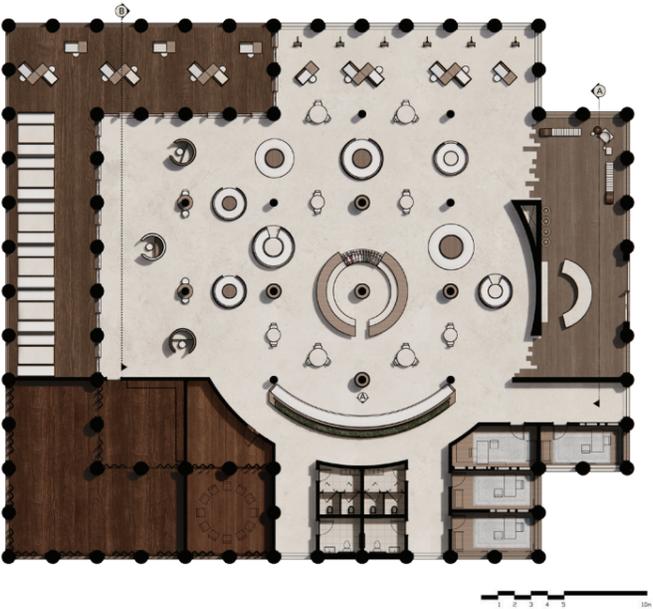
Rendered Floor Plan
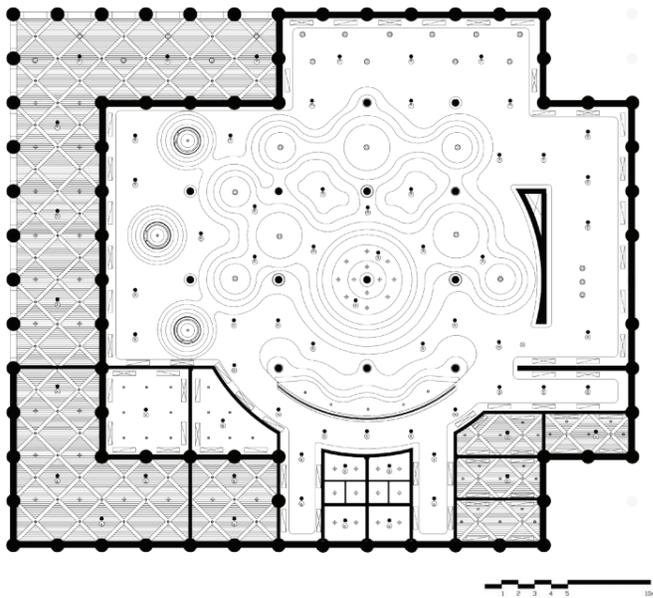
RCP

SECTIONS AND ELEVATIONS

Section A
Not to Scale

Elevation A
Not to Scale

Section B
Not to Scale

RENDERS

غرفة الاستشارة
CONSULTATION ROOM

منطقة الانتظار
WAITING AREA

الشرقة
TERRACE

CONSTRUCTION DOCUMENTS AND SCHEDULES

1. Reception
2. Waiting Area
3. Majlis/ Cafe
4. Drawing Stations
5. Writing Stations
6. Consultation Rooms
7. Group Therapy
8. Yoga Studio
9. Toilets
10. ADA Toilets
11. Terrace

Main Entrance

Outdoor Dining

Cafe Bar

Bookshelves

Seating Area with Water Partition

Storage for Yoga Essentials

Floor Plan

1 2 3 4 5   10m

N

Dimensions Plan

N

Finish Plan

1 2 3 4 5   10m
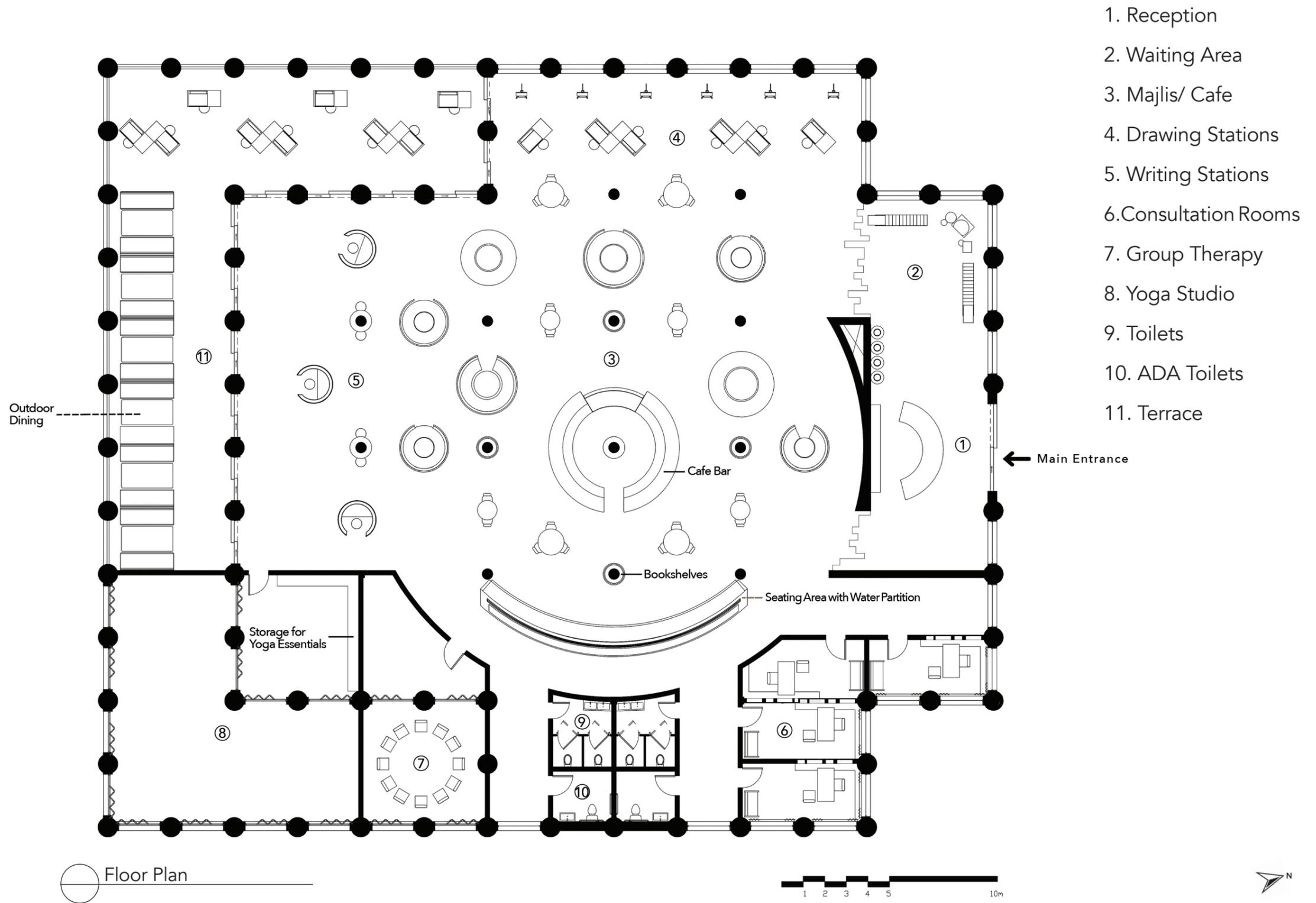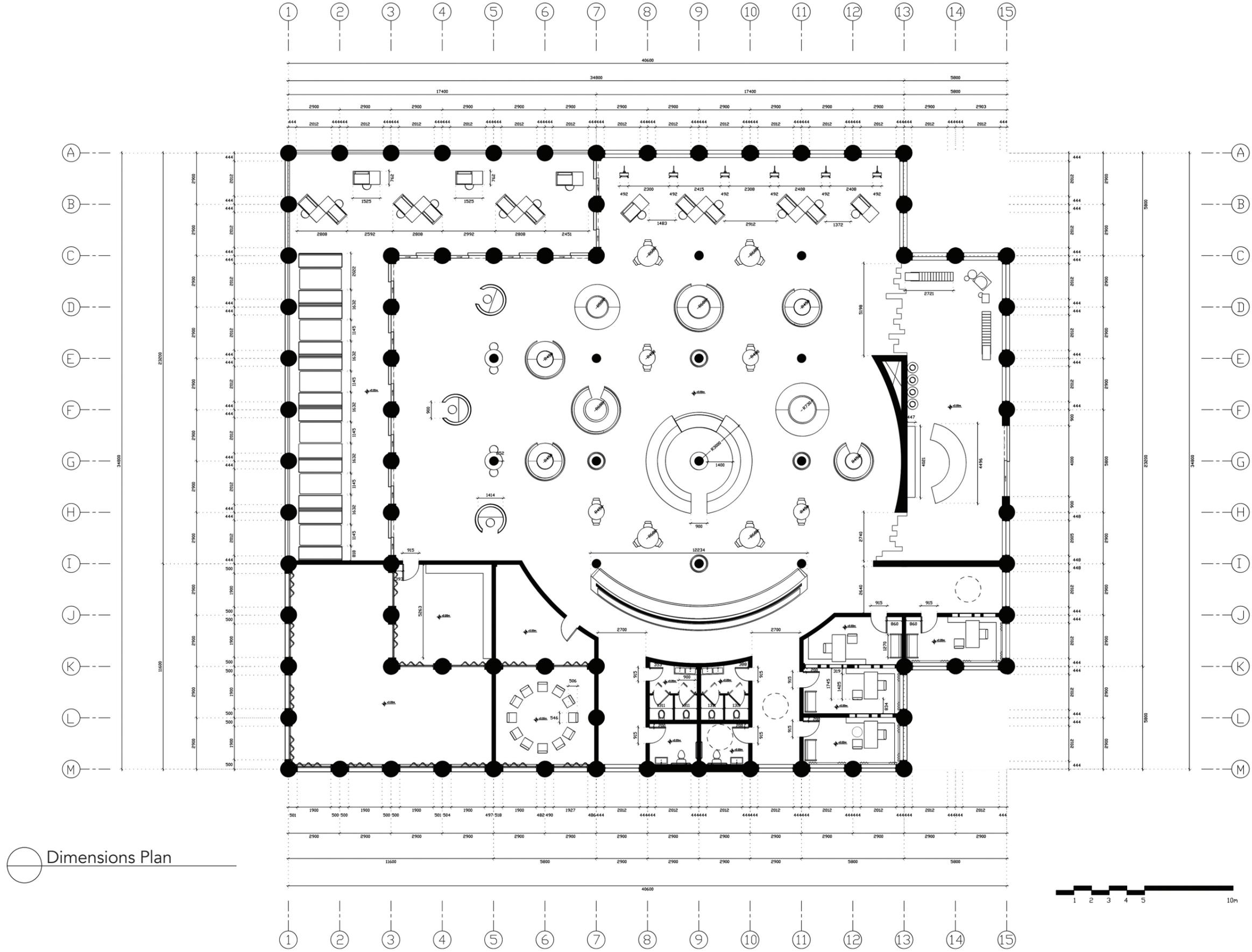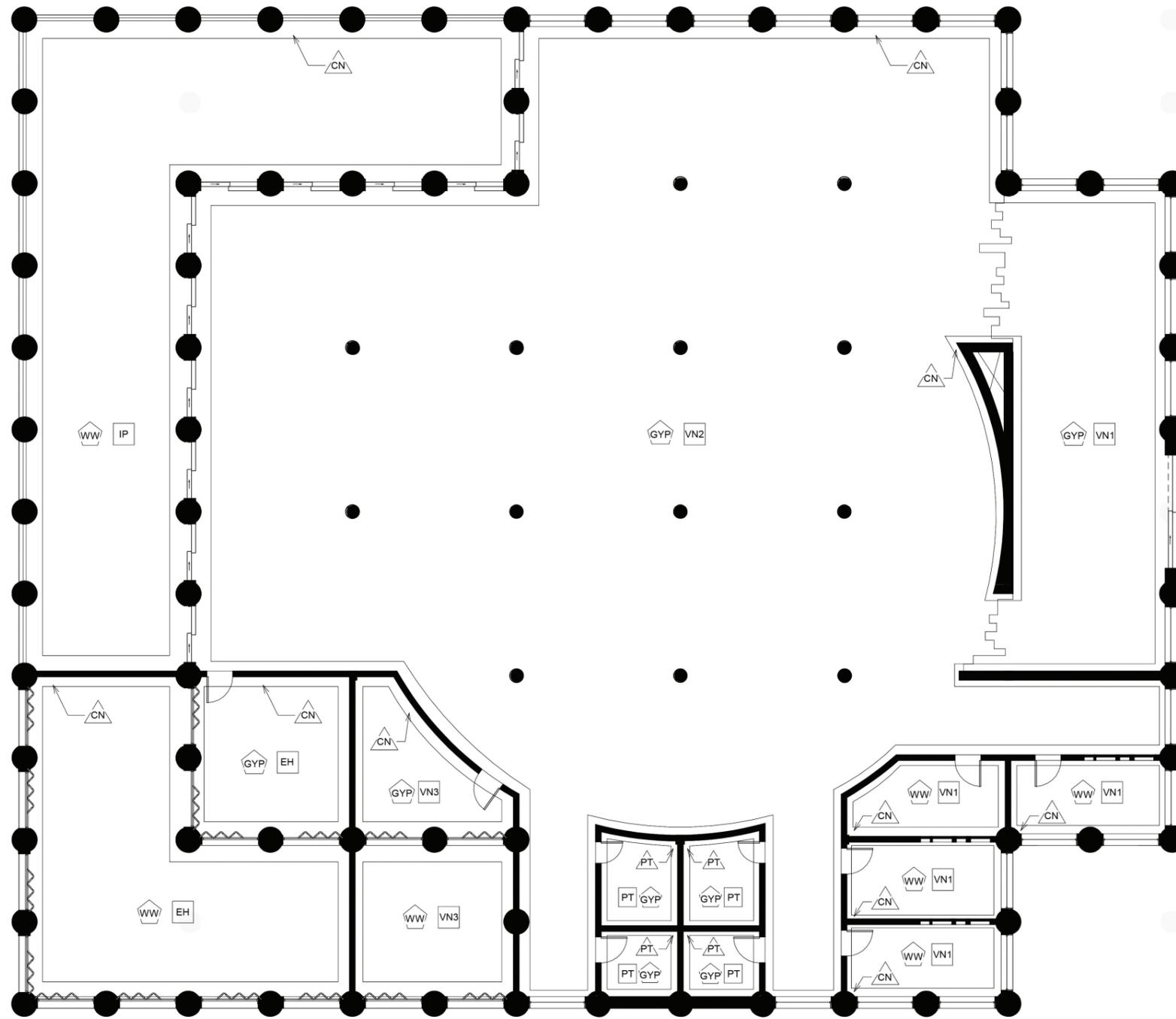
N

FINISH SCHEDULE

	FINISH CODE	DESCREPTION	COLOR	STYLE/TYPE	LOCATION
△ WALL	CN	Concrete	Biege	Smooth	Reception, Waiting Area, Majlis, Cafe, Group Therapy, Yoga Studio, Consultation Rooms
	PT	Porcelain Tiles	White	Smooth	Toilets
☐ FLOOR	VN1	Vinyl	Ash Brown	Wood-Texture	Reception, Waiting Area, Consultation Rooms
	VN2	Vinyl	Biege	Concrete-Texture	Cafe, Majlis
	IP	IPE Wood	Dark Brown	Smooth	Terrace
	EH	Engineered Hardwood	Dark Brown	Smooth	Yoga Studio
	VN3	Vinyl	Dark Brown	Smooth	Group Therapy
	PT	Porcelain Tiles	White	Smooth	Toilets
⬠ CEILING	GYP	Gypsum	Biege	Plain	Reception, Waiting Area Cafe, Majlis, Toilets
	WW	Walnut Wood	Dark Brown	Beams	Terrace, Yoga Studio, Group Therapy, Consultatio Rooms
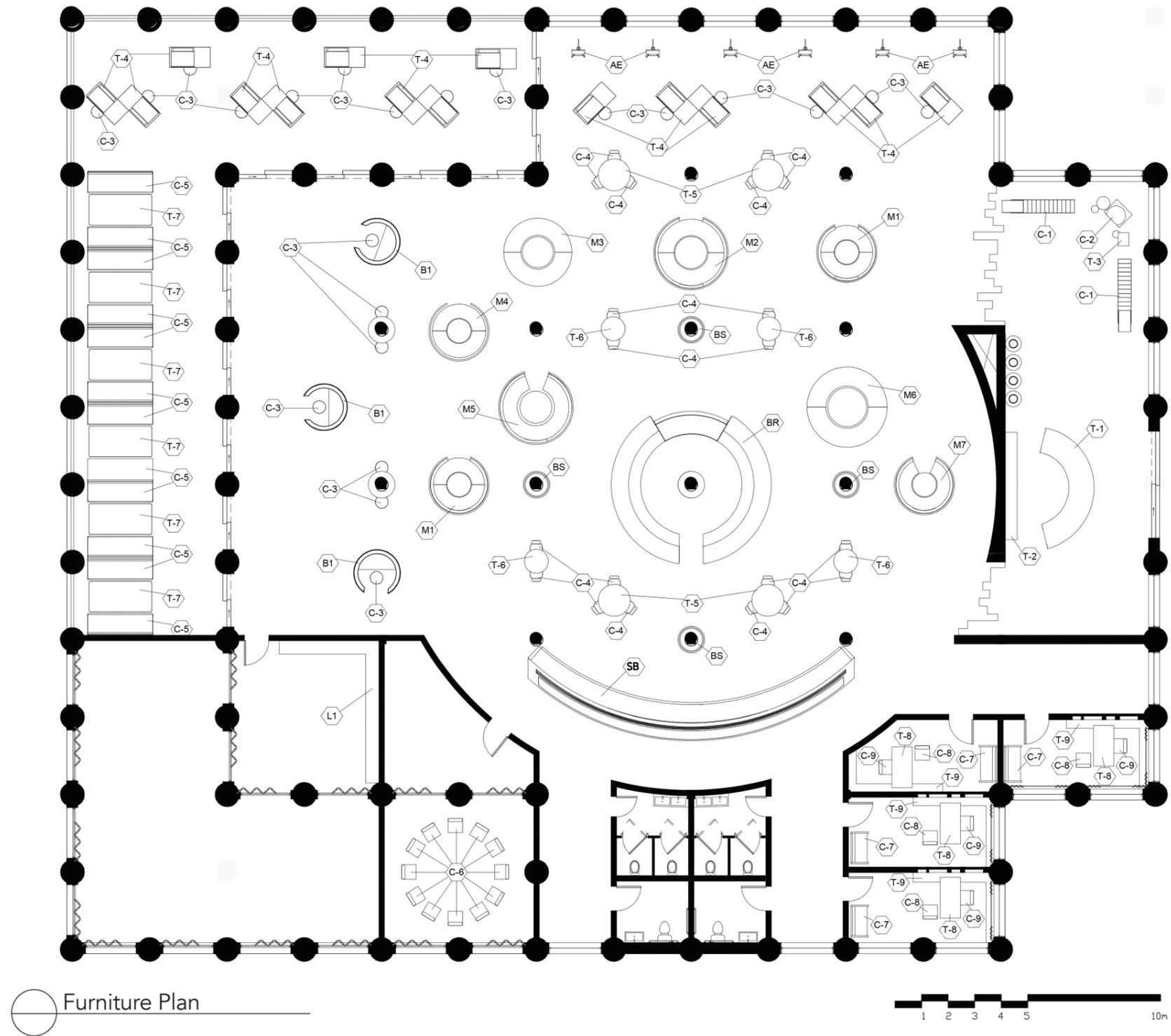
Furniture Plan

FURNITURE SCHEDULE

Code	Description	Finish	Quantity	Manufacturer	
T-1	Smooth Stone Reception Desk	Capri Stone	1	To be Constucted by a Contracter	
T-2	Counter Tablev	Capri Stone	1	To be Constucted by a Contracter	
T-3	Smooth Clay Side Table	Clay	1	To be Constucted by a Contracter	
T-4	Functional Drawing Desk	Solid Walnut Wood and Oak Frame	11	To be Constucted by a Contracter	
T-5	Round Dining Table	Natural Stone	4	To be Constucted by a Contracter	
T-6	Round Dining Table	Natural Stone	4	To be Constucted by a Contracter	

Code	Description	Finish	Quantity	Manufacturer	
T-7	Low-Rise Rectangular Dining Table	Walnut Wood and Stone Top	6	To be Constucted by a Contracter	
T-8/T9	Desk with L-Shaped Cabinets	Walnut Wood	4	To be Constucted by a Contracter	
C-1	Cylindrical shapes and symmetrical look composed of curved lines, which are connected by a discreet rectangular wood frame.	Solid Walnut Wood and Velvet Fabric	2	Mezzo Collection	
C-2	Geometric Armchair	Clay	1	To be Constucted by a Contracter	
C-3	Stool	Oak Wood and Linen Fabric	22	To be Constucted by a Contracter	
C-4	The Baba, a raw yet sophisticated and also imbued with a feeling of timeless elegance.	Solid Brushed Oak Fabric in Karakorum	20	Studio Twenty Seven	

Code	Description	Finish	Quantity	Manufacturer	
C-5	Low-Rise Seat	Walnut Wood and Linen Fabric	12	To be Constucted by a Contracter	
C-6	Neace Velvet chair built to exude comfort and elegance	Metal legs with a brushed aged gold finish. Comfortable, curved wood seat frame with cushion and velvet upholstery	12	Wayfair	
C-7	Rivera Daybed Sofa	Industrial steel, leather, fabric, walnut, Brich frame, and Poly Finish	4	Croft House	
C-8	Anthropologie Caillen Accent Chair	Kiln-dried hardwood frame; oak wood legs. Viscose, linen, polyester, cotton upholstery. Top-grain leather accents	4	Anthropologie	
C-9	Ava Upholstered Office Chair	rubberwood frame with distressed gray finish. Polyester upholstery and metal casters with antique-brass finish	4	World Market	
AE	Artist French Easel	Beechwood	4	Creative Mark	

Code	Description	Finish	Quantity	Manufacturer	
BR	Bar	Natural Stone	1	To be Constucted by a Contracter	
BS	Custom Book Shelf with Different Shelving Widths	Oak Wood	4	To be Constucted by a Contracter	
B1	Booth with Built-in Table	Wood (comes in 3 different colors)	3	To be Constucted by a Contracter	
L1	Storage Lockers	Metal	1	To be Constucted by a Contracter	
M1	Round Lounge with Table	Cast-in Concrete and Linen Fabric	2	To be Constucted by a Contracter	
M2	Round Lounge with Table	Walnut Wood	1	To be Constucted by a Contracter	

| Code	Description	Finish	Quantity	Manufacturer	
M3	Round Lounge with Table	Walnut Wood and Linen Fabric	1	To be Constucted by a Contracter	
M4	Round Lounge with Table	Walnut Wood and Linen Fabric	1	To be Constucted by a Contracter	
M5	Round Lounge with Table	Cast-in Concrete and Linen Fabric	1	To be Constucted by a Contracter	
M6	Round Lounge with Table	Walnut Wood and Linen Fabric	1	To be Constucted by a Contracter	
M7	Round Lounge with Table	Cast-in Concrete and Linen Fabric	1	To be Constucted by a Contracter	
SB	Informal Low-Rise Bench Seating	Oak Wood, Glass Partition, and Linen Fabric	1	To be Constucted by a Contracter	

RCP and Electrical Plan
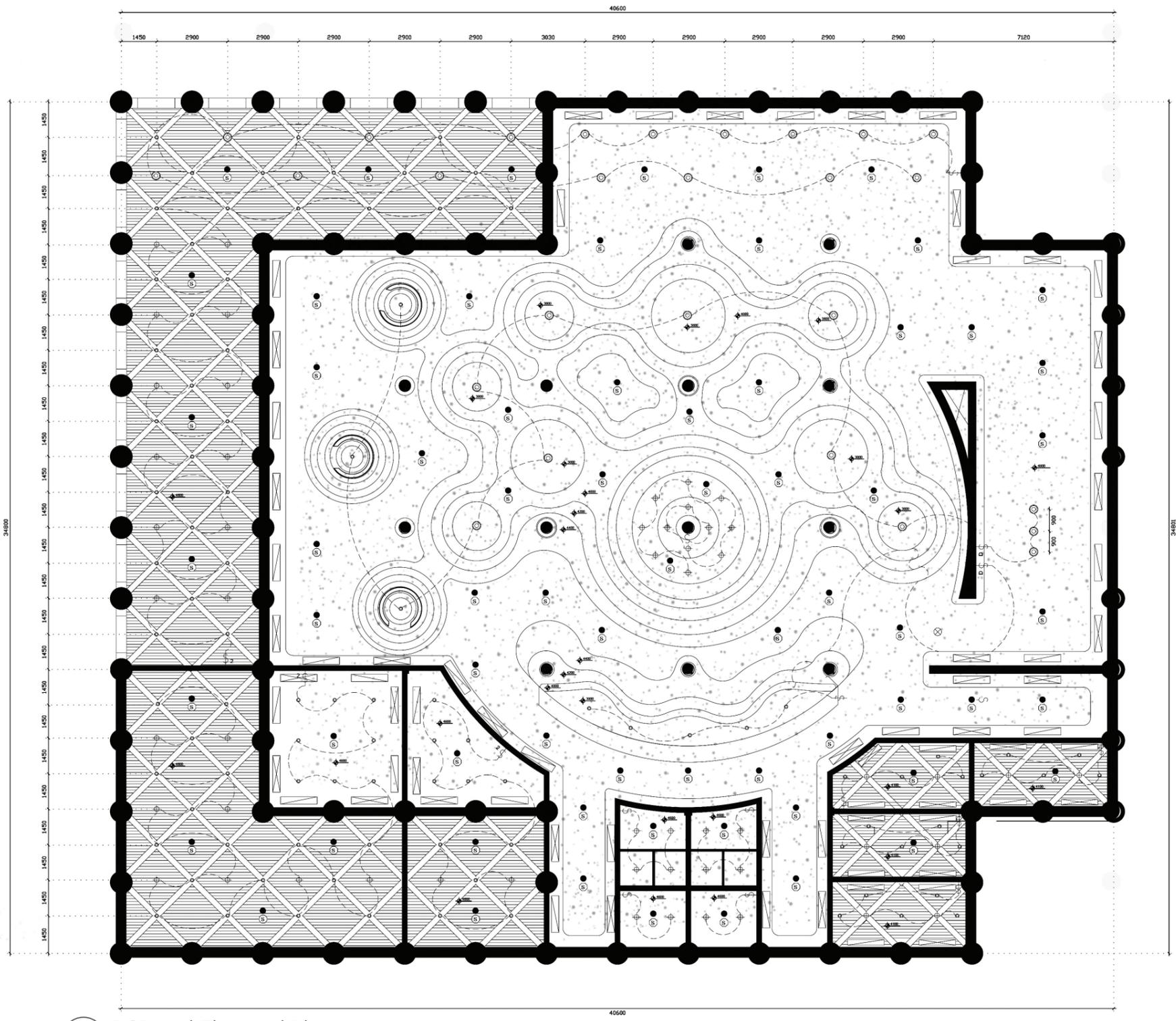
LEGEND

—— Cove Lighting

○ Spot Light

⊕ Recessed Downlight

◎ Drop Pendant

Ⓢ Smoke Detector

● Sprinklers

⧆ Air Supply

⧄ Air Return

100

LIGHTING SCHEDULE

Symbol	Type	Finish	Quantity	Manufacturer	
——	LED Strip Cove Lighting	PVC	7	Philips	
o	Spot Light	Metal	90	Philips	
⊕	Recessed Downlight	Metal	42	Philips	
◎	Drop Pendant	Aluminum & textile cord	3	Norman Copenhagen	
◎	Drop Pendant	Concrete and Rubber Wood	17	S&W Home	

4600

Elevation A

1 2 3 4 5   10m
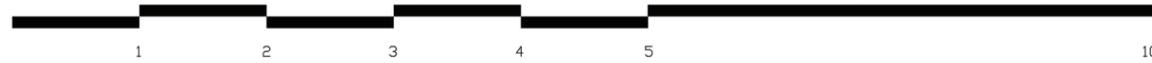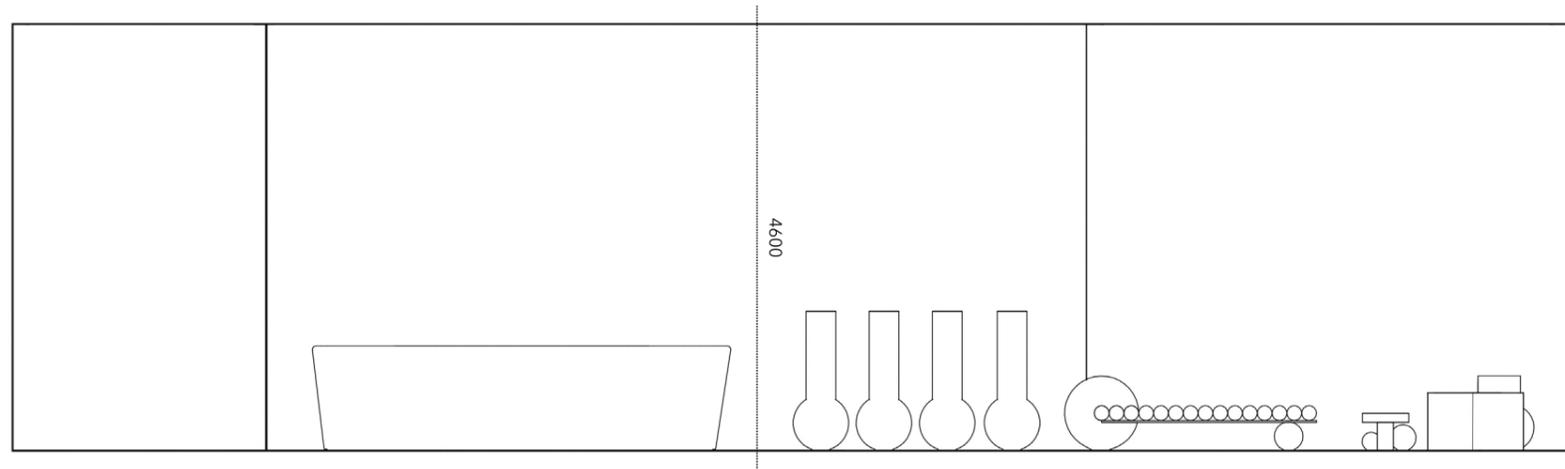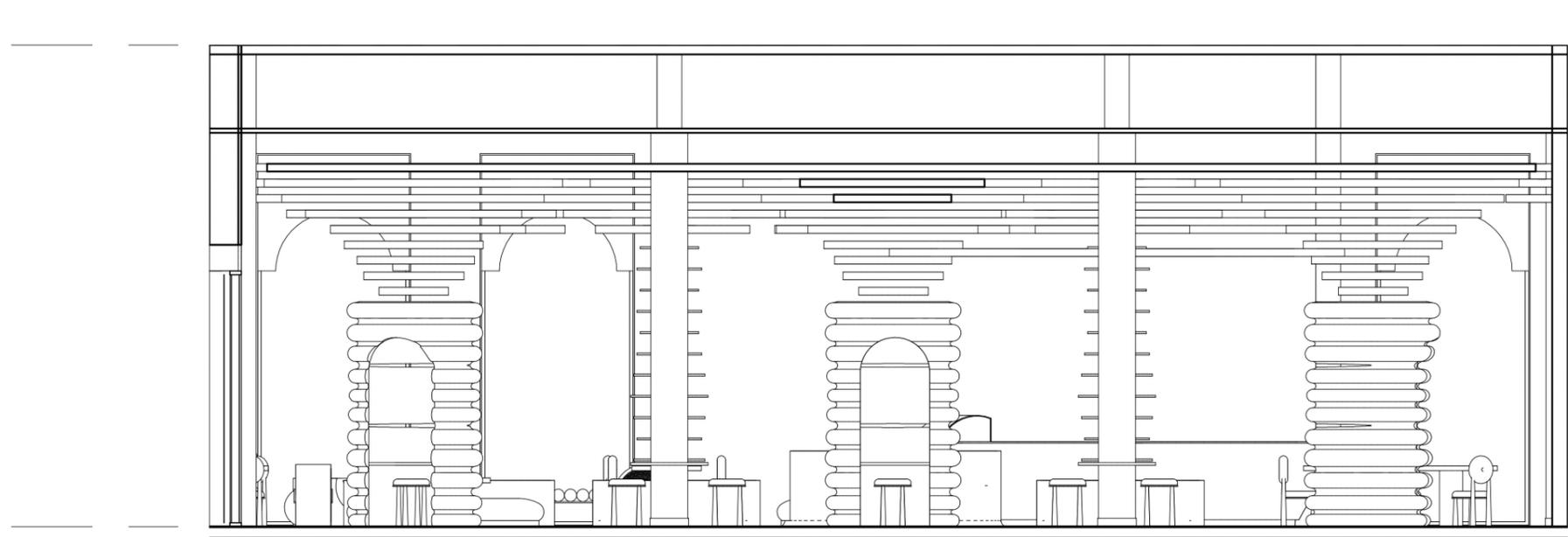
Level 2
6235

Level 1
0

Section A

1 2 3 4 5   10m

BIBLIOGRAPHY

"Acoustics in Healthcare Environments - CISCA." InformeDesign® Research Desk, October 2010. http://cisca.org/files/public/Acoustics%20in%20 Healthcare%20Environments_CISCA.pdf.

"Aeichi Korean Meidcal Clinic." BY SEOG BE SEOG. Accessed November 8, 2021. https://www.byseog.com/aeichi-korean-medical-clinic.

"Aeichi Korean Medical Clinic, Yongin." FRAME. Accessed November 8, 2021. https://www.frameweb.com/project/aeichi-korean-medical-clinic-yongin.

Ali Morris | 15 October 2019 "South Korean Clinic Designed to Promote 'Bond of Sympathy' Between Patients." Dezeen, October 14, 2019. https://www.dezeen.com/2019/10/15/aeichi-korean-medical-clinic-by-by-seog-be-seog/.

Anjali, Joseph, and Ulrich Roger. "Sound Control for Improved Outcomes in Healthcare Settings," January 1, 2007. https://www.researchgate.net/publication/241355103_Sound_Control_for_Improved_Outcomes_in_Healthcare_Settings.

Amani Sami, "الوصمة الاجتماعية تلاحق المرضى النفسيين," جريدة الشرق, January 26, 2019, https://al-sharq.com/article/26/01/2019/الوصمة-الاجتماعية-تلاحق-المرضى-النفسيين/.

Appold, Karen. "Design Strategies for Noise Reduction." Health Facilities Management, May 3, 2018. https://www.hfmmagazine.com/articles/3349-design-strategies-for-noise-reduction.

Arif, Mohammed, Martha Katafygiotou, Ahmed Mazroei, Amit Kaushik, and Esam Elsarrag.

"Impact of indoor environmental quality on occupant well-being and comfort: A review of the literature." International Journal of Sustainable Built Environment 5, no. 1 (2016): 1-11.

Bener, Abdulbari, Mohammed T. Abou-Saleh, Elnour E. Dafeeah, and Dinesh Bhugra. "The prevalence and burden of psychiatric disorders in primary health care visits in Qatar: Too little time?." Journal of family medicine and primary care 4, no. 1 (2015): 89.

Bener, A. "Does consanguinity increase the risk of mental illnesses? A population based study." European Psychiatry 41, no. S1 (2017): S512-S512.

Britannica, T. Information Architects of Encyclopaedia. "Qatar." Encyclopedia Britannica, November 20, 2021. https://www.britannica.com/facts/Qatar.

Berger, Todd. "Speech Privacy Sound Masking - BICSI." Bisci, 2019. https://www.bicsi.org/uploadedfiles/PDFs/conference/2019/canada/TS_WED_2.pdf.

"Climate and Average Monthly Weather in Doha, Qatar." World Weather & Climate Information. Accessed November 20, 2021. https://weather-and-climate.com/average-month ly-Rainfall-Temperature-Sunshine,doha,Qatar.

Corrigan, Patrick, Fred E. Markowitz, Amy Watson, David Rowan, and Mary Ann Kubiak. "An attribution model of public discrimination towards persons with mental illness." Journal of health and Social Behavior (2003): 162-179.

"Controlling Pollutants and Sources: Indoor Air Quality Design Tools for Schools." EPA. Environmental Protection Agency. Accessed January 28, 2022. https://www.epa.gov/iaq-schools/controlling-pollutants-and-sources-indoor-air-quality-design-tools-schools.

"Community Center Großweikersdorf, Lower Austria." smartvoll Architekten, October 20, 2021. https://www.smartvoll.com/projekte/grossweikersdorf/.

Davies, Christina, Matthew Knuiman, and Michael Rosenberg. "The art of being mentally healthy: a study to quantify the relationship between recreational arts engagement and mental well-being in the general population." BMC public health 16, no. 1 (2015): 1-10.

Eaton, Kim, Jeneva L. Ohan, Werner GK Stritzke, and Patrick W. Corrigan. "Failing to meet the good parent ideal: Self-stigma in parents of children with mental health disorders." Journal of Child and Family Studies 25, no. 10 (2016): 3109-3123.

Fadlelmula, Fatma Kayan. "Undergraduate Student Research on Contemporary Civic Issues in Qatar" GlobeEdit, 2020.

Fang, Lei, Geo Clausen, and Povl Ole Fanger. "Impact of temperature and humidity on the perception of indoor air quality." Indoor air 8, no. 2 (1998): 80-90.

Ghuloum, Suhaila, Abdulbari Bener, and Mohammed Tamim Abou-Saleh. "Prevalence of mental disorders in adult population attending primary health care setting in Qatari population." JPMA-Journal of the Pakistan Medical Association 61, no. 3 (2011): 216.

Ghuloum, Suhaila, Abdulbari Bener, Elnour E. Dafeeah, Tariq Al-Yazidi, A. Mustapha, and A. Zakareia. "Lifetime prevalence of common mental disorders in Qatar using WHO Composite International Diagnostic Interview (WHO-CIDI)." International Journal of Clinical Psychiatry and Mental Health 2, no. 1 (2014): 38-46.

Guha, Martin, and Ben Channon. "Mental health in the built environment." Journal of Mental Health 29, no. 6 (2020): 611-613.

Guidelines." ArchDaily. ArchDaily, June 6, 2017. Taylor, William L. "The connection between indoor air quality and mental health outcomes." (2020).

Gulliver, Amelia, Kathleen M. Griffiths, and Helen Christensen. "Perceived barriers and facilitators to mental health help-seeking in young people: a systematic review." BMC psychiatry 10, no. 1 (2010): 1-9.

Haque, Amber, Livia L. Gilstrap, and Suhaila Ghuloum. Mental Health in Qatar: Challenges and Prospects. Newcastle-upon-Tyne : Cambridge Scholars Publisher, 2020.

He, Haoyu, Qiuxia Wu, Yuzhu Hao, Shubao Chen, Tieqiao Liu, and Yanhui Liao. "Stigmatizing Attitudes Toward Depression Among Male and Female, Medical and Non-medical Major College Students." Frontiers in psychology 12 (2021).

Hoisington, Andrew J., Kelly A. Stearns-Yoder, Steven J. Schuldt, Cody J. Beemer, Juan P.

Maestre, Kerry A. Kinney, Teodor T. Postolache, Christopher A. Lowry, and Lisa A. Brenner. "Ten questions concerning the built environment and mental health." Building and environment 155 (2019): 58-69.

(ICC), International Code Council. "2021 International Building Code (IBC): ICC Digital Codes." 2021 INTERNATIONAL BUILDING CODE (IBC) | ICC DIGITAL CODES, October 2020. https://codes.iccsafe.org/content/IBC2021P1.

"Improving Indoor Air Quality." EPA. Environmental Protection Agency. Accessed January 28, 2022. https://www.epa.gov/indoor-air-quality-iaq/improving-indoor-air-quality#:~:text=Natural%20ventilation%20can%20also%20improve,such%20as%20closing%20the%20blinds.

Javed, Afzal et al. "Reducing the stigma of mental health disorders with a focus on low- and middle-income countries." Asian journal of psychiatry vol. 58 (2021): 102601. doi:10.1016/j.ajp.2021.102601

Jones, Andy P. "Indoor air quality and health." Atmospheric environment 33, no. 28 (1999): 4535-4564.

Joseph, Anjali. "Impact of Light on Outcomes in Healthcare Settings." The Center for Health Design. The Center for Health Design, October 16, 2012. https://www.healthdesign.org/chd/research/impact-light-outcomes-healthcare-settings.

Kehyayan, Vahe, Ziyad Mahfoud, Suhaila Ghuloum, Tamara Marji, and Hassen Al-Amin. "Internalized Stigma in Persons With Mental Illness in Qatar: A Cross-Sectional Study." Frontiers in Public Health 9 (2021).

Kong, Zhe, D. Michael Utzinger, Kara Freihoefer, and Troy Steege. "The impact of interior design on visual discomfort reduction: A field study integrating lighting environments with POE survey." Building and Environment 138 (2018): 135-148.

Kopec, Dak. Environmental Psychology for Design. Bloomsbury Academic, 8 Feb 201

Liddicoat, Stephanie, Paul Badcock, and Eoin Killackey. "Principles for designing the built environment of mental health services." The Lancet Psychiatry 7, no. 10 (2020): 915-920.

"Lighting Design Considerations & Concepts." SitelogIQ, September 20, 2021. https://www.sitelogiq.com/blog/lighting-design-considerations/.

Luco, Andreas. "Großweikersdorf Community Center – Everything under One Roof / Smartvoll." ArchDaily. ArchDaily, September 17, 2021. https://www.archdaily.com/968638/grossweikersdorf-community-center-nil-everything-under-one-roof-smartvoll?ad_source=search&ad_medium=projects_tab.

Marks, Paul. 2019. "Acoustical Considerations for Design-Build Mental and Behavioural Healthcare Facilities". Canadian Acoustics 47 (3):46-47. https://jcaa.caa-aca.ca/index.php/jcaa/article/view/3346.

Martino, Giovana. "Sound Treatment in Interior Design: Different Types and Solutions." ArchDaily. ArchDaily, June 30, 2021. https://www.archdaily.com/963542/sound-treatment-in-interior-design-different-types-and-solutions.

Mazza, Mario Gennaro, Rebecca De Lorenzo, Caterina Conte, Sara Poletti, Benedetta Vai, Irene Bollettini, Elisa Maria Teresa Melloni et al. "Anxiety and depression in COVID-19 survivors: Role of inflammatory and clinical predictors." Brain, behavior, and immunity 89 (2020): 594-600.

Merhej, Rita. "Stigma on mental illness in the Arab world: beyond the socio-cultural barriers." International Journal of Human Rights in Healthcare (2019).

Moss, Simon. "Organismic integration theory." (2012).

Pabiou, Hervé, Julien Salort, Christophe Ménézo, and Francesca Chillà. "Natural Cross ventilation of Buildings, An Experimental Study." Energy Procedia 78 (2015), 2911-2916. doi:10.1016/j.egypro.2015.11.666.

Paparella, Scott. "How Interior Design Impacts Your Mental Health." Heritage Design Interiors, September 17, 2020. https://heritagedesigninteriors.com/how-interior-design-impacts-your-mental-health

Pawluk, Shane Ashley, and Monica Zolezzi. "Healthcare professionals' perspectives on a mental health educational campaign for the public." Health Education Journal 76, no. 4 (2017): 479-491.

Prince, Martin, Vikram Patel, Shekhar Saxena, Mario Maj, Joanna Maselko, Michael R. Phillips, and Atif Rahman. "No health without mental health." The lancet 370, no. 9590 (2007): 859-877.

"Qatar Profile - Timeline." BBC News. BBC, December 3, 2018. https://www.bbc.com/news/world-middle-east-14702609.

Righi, Elena, Gabriella Aggazzotti, Guglielmina Fantuzzi, V. Ciccarese, and Guerrino

Predieri. "Air quality and well-being perception in subjects attending university libraries in Modena (Italy)." Science of the total environment 286, no. 1-3 (2002): 41-50.

Sagredo, Rayen. "Aeichi Korean Medical Clinic / by Seog Be Seog." ArchDaily. ArchDaily, November 16, 2018. https://www.archdaily.com/905294/aeichi-korean-medical-cliic-by-seog-be-seog?ad_source=search&ad_medium=projects_tab.

Sartorius, N. (2006). Lessons from a 10-year global programme against stigma and discrimination because of an illness. Psychology, Health & Medicine, 11(3), 383-388.

Schires, Megan. "A Simple Guide to Using the ADA Standards for Accessible Design https://www.archdaily.com/872710/a-simple-guide-to-using-the-ada-standards-for-accessible-design-guidelines.

Scott, Kate M., Michael Von Korff, Jordi Alonso, Matthias C. Angermeyer, Evelyn Bromet, John Fayyad, Giovanni De Girolamo et al. "Mental–physical co-morbidity and its relationship with disability: results from the World Mental Health Surveys." Psychological medicine 39, no. 1 (2009): 33-43.

Sharkey, Terence. "Mental health strategy and impact evaluation in Qatar." BJPsych international 14, no. 1 (2017): 18-21.

Souza, Eduardo. "Keys to Improve Architectural Acoustics: Sound Absorption and Diffusion." ArchDaily. ArchDaily, May 7, 2021. https://www.archdaily.com/912806/understanding-sound-absorption-and-diffusion-in-architectural-projects.

Tham, Kwok Wai. "Indoor air quality and its effects on humans—A review of challenges and developments in the last 30 years." Energy and Buildings 130 (2016): 637-650.

"The Advantages of Ergonomics - Oregon." Accessed February 13, 2022. https://osha.oregon.gov/OSHAPubs/ergo/ergoadvantages.pdf.

"The International Building Code." ICC, February 19, 2019. https://www.iccsafe.org/products-and-services/i-codes/2018-i-codes/ibc/.

"Thermal Insulation Glazing." Saint. Accessed March 27, 2022.https://uk.saint-gobain-building-glass.com/en-gb/thermal-insulation-glazing#:~:text=Thermally%20insulating%20glass%20(also%20known,to%20escape%20through%20the%20windows.

Thornicroft, Graham, Elaine Brohan, Diana Rose, Norman Sartorius, Morven Leese, and INDIGO Study Group. "Global pattern of experienced and anticipated discrimination against people with schizophrenia: a cross-sectional survey." The Lancet 373, no. 9661 (2009): 408-415.

Wadoo, Ovais, Mohamed Ali Siddig Ahmed, Shuja Reagu, Samya Ahmad Al Abdulla, and Majid Ali YA Al Abdulla. "Primary care mental health services in Qatar." BJPsych International 18, no. 1 (2021): 15-18.

"What Are the Main Ways to Control Moisture in Your Home?" EPA. Environmental Protection Agency. Accessed January 28, 2022. https://www.epa.gov/mold/what-are-main-ways-control-moisture-your-home.

Williams, Stacey L., and Jodi Polaha. "Rural parents' perceived stigma of seeking mental health services for their children: Development and evaluation of a new instrument." Psychological Assessment 26, no. 3 (2014): 763.

Wyon, David P. "The effects of indoor air quality on performance and productivity." Indoor air 14 (2004): 92-101.

White, Catherine M. "Ergonomics: What Is It?," n.d. https://www.tbp.org/pubs/Features/Su08White.pdf.

Yanos, Philip T., Sarah Rosenfield, and Allan V. Horwitz. "Negative and supportive social interactions and quality of life among persons diagnosed with severe mental illness." Community Mental Health Journal 37, no. 5 (2001): 405-419.

Zolezzi, Monica, Sara Abdulrhim, Nour Isleem, Farah Zahrah, and Yassin Eltorki. "Medical comorbidities in patients with serious mental illness: a retrospective study of mental health patients attending an outpatient clinic in Qatar." Neuropsychiatric disease and treatment 13 (2017): 2411.

Zolezzi, Monica, Sara Elshami, and Warda Obaidi. "An Exploratory Analysis of the Portrayal of Mental Illness in Qatar's Newspapers." Psychology Research and Behavior Management 13 (2020): 1323.

IMAGES CITATION

Figure 51: "What are insulated glass windows?," December 7, 2018.https://
brennancorp.com/blog/what-are-insulated-glass-windows/.

Figure 54: Souza, Eduardo. "Keys to Improve Architectural Acoustics: Sound
Absorption and Diffusion." ArchDaily. ArchDaily, May 7, 2021. https://www.
archdaily.com/912806/understanding-sound-absorption-and-diffusion-in-
architectural-projects.

Figure 58: "Climate and Average Monthly Weather in Doha, Qatar." World Weather
& Climate Information. Accessed November 20, 2021. https://weather-and-
climate.com/average-month ly-Rainfall-Temperature-Sunshine,doha,Qatar.

Figure 63: Openshaw, Scott, and Erin Taylor. "Ergonomics and design a reference
guide."
Allsteel Inc., Muscatine, Iowa (2006).

Figure 65: Middlesworth, Matt. "Cognitive Ergonomics 101: Definition,
Applications, and Disciplines." ErgoPlus, March 15, 2019. https://ergo-plus.com/
cognitive-ergonomics/.
"Modular Safety & Exit Sign Luminaire - Style Led CG-S - Eaton." Accessed March
24, 2022. https://www.eaton.com/ae/en-gb/catalog/emergency-lighting/central-
battery-system-style-led-cg-s.html.

Figure 68: "Marsakatara, Doha - Menu, Prices & Restaurant Reviews."
Tripadvisor. Accessed March 26, 2022. https://www.tripadvisor.com/
Restaurant_Review-g294009-d17373951-Reviews-Marsakatara-Doha.
html#photos;aggregationId=&albumid=101&filter=7&ff=463778896.

Figure 76: "Heat Insulation Glass Coating Service." indiamart.com. Accessed
March 26, 2022. https://www.indiamart.com/proddetail/heat-insulation-glass-
coating-service-21708645773.html.