Beyond the Counselling Workspace: Spaces of Significance in Treatment of Self Harm

Research Question(s):

Outside of the counselling workspace, what environments are significant in the treatment of self harm? Why are these significant and what are the

implications for clinical practice/architectural design? Key Words: Design, mental health, self harm

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Background

There is a considerable body of literature affirming links between mental wellbeing and good design practice.

• Good design leads to better clinical outcomes and less stress for users: patients and staff (1-7) Design can affect therapeutic delivery (8,9)

Techniques used in psychiatry have spatial implications (8,10-12)

The counselling environment is regarded within clinical literature as having an effect on a consumer's sense of wellbeing (7,13,14):

• Consumers experience of such spaces can have a highly emotional dimension (9,15,16) • Individuals have differing abilities to censor or suppress their environments (17)

 A stressed patient has reduced capacity to exclude environmental distractions (17,18) · Research exists linking design of counselling workspaces to communication and patient self-disclosure

Through fieldwork undertaken by the author with consumers in treatment for self harm, three further environments in addition to the counselling workspace were found to be significant. These spaces include a de-escalation space post counselling, an urge room in inpatient care, and a natural mind-space, adjacent to the counselling workspace and accessed only visually, such as through a window to an outside courtyard. The transition of spaces and planning of the spatial journey around a counselling session was also found to be significant. With reference to clinical literature, these are presented, as they were mentioned by interview participants.

De-Escalation Space

After the intensity of a counselling session, for individuals who self harm the transition to the outside world afterward was found to be very difficult: "The therapy sessions are often really intense, I don't know about other people but my sessions might go for two hours, and I'd be totally numb afterwards and have to go straight out into the world, when I feel so vulnerable and it was so frightening, sometimes I'd just get so anxious about it, I'd be self harming in my car on the way home." (19)

A practicing therapist also reflects and supports the idea of a de-escalation space for consumers after a counselling session: "Emerging straight into the world is confronting; I would liken it to getting up in the morning, and you have been in another state like sleep, and you need to adjust and bring yourself back to the world outside and bringing yourself back to whatever that might need to be. So, I think you are at a different rate, whether it be consciousness, or reengaging back into where you were previously, I think that can take time, and it can also take an awareness of how you can bring yourself back to that space." (19)

It seems the suggestion of a de-escalation space post counselling is strongly related to dissociation: • Self-injury is synonymous with stronger dissociative traits (20-22)

• Dissociation means the experience is not remembered, which is confronting (23)

Urge Room

The notion of an urge room in inpatient care was brought up in interviews with individuals who self harm. This is essentially a space where they might go when confronted with the urge to self harm, and this space would help to quell these desires through its design. This is described thus: "Bright coloured pods, a confined space, where I could go would help - I blast the senses to occupy myself, to bring me back to the present. A sensory stimulus pod! That can rock! To soothe yourself. I mean, that's why I watch a movie really loud [when I have the urge to self harm], or play my music real loud, to bring me back and stop distress. Rocking - it's relaxing, and it's disabling, it's rhythmic and brings you back to your body."(19)

High sensory stimulation is paramount in this room to quell dissociative traits and enable the individual to remain present:

• Individuals who self harm are commonly afflicted by symptoms known as 'high sensation seeking' (24,25)

• There is a close relationship between self harm and the sensations of the body (23,26) Harming procedures serve to elicit sensory response, reconnect with body and its environment (27)

• High need for sensation attributed to maintaining high arousal states (23,28)

• High sensation seeking individuals have particular perceptions to and needs from their environments (29-34) and require very strong stimuli to support appropriate mental functioning (35)

Natural Mind-Space

A view through a window to a natural landscape adjacent to the counselling workspaces was found to be very significant for individuals who self harm, in fieldwork undertaken by the author.

"Having that view out to a landscape, it's been important through my whole stages of treatment, yeah the whole way, but I didn't realise until I didn't have that safe view from a window, and I think that is probably part of the reason I didn't continue in some ways, because as I said it was so confrontational, I had nowhere to look, I felt totally judged and I just didn't feel safe."(19)

It seems that this landscape is not important to occupy physically, and that visual access provides the sense of escapism or mental respite which is

"I would look out the window and even in the counselling I would need a window to feel safe, to "Oh, there's a world out there!" You know? There's a world out there and I might not feel safe in the physical area I am in, but it's OK. It gives me a psychological connection to a bigger space, to a world outside what I am dealing with."(19)

However, it seems that a large expansive view to an unframed landscape, with no boundaries, is not preferable: "I think if it's too big, yeah I don't think I'd feel safe, I don't know why. No, if it's too big I don't think I'd feel safe."(19)

The notion of a framed landscape as providing greater sense of freedom and comfort simultaneously is echoed by several consumers, who discuss how connection to nature in a contained way allows them to maintain a sense of protection and control through the borders or framing of the natural

Self harm is also associated with notions of control, which may explain why an unbounded landscape is threatening: • Clinical literature describes how self injury is often a means by which an individual aims to reassert a sense of control (23,27,36-40)

Self harm performs the function of regaining lost control and asserting oneself (41)

Research explains how nature containing elements and content will reduce stress (42,43)

Nature contributes to positive emotional, psychological and physiological changes (46-48)

Spatial Journey

The notion of a linear spatial journey was also raised as being significant by individuals in treatment for self harm. As one explains: "It's kind of yucky to walk out the same way you came in if you are distressed. There should be a distressed door [an exit to use when feeling distressed after a counselling session], where you can't be seen, and can leave that's different to the entry. Yeah a linear journey, I like that idea."(19) It seems there is a metaphor of progress made spatially, and to back track and repeat earlier steps is not conducive to or representative of therapeutic development, and reminds the consumers of how they felt prior to the session, which to the consumers feels as though they are not making positive progress.

A practicing therapist reflects on the metaphorical journey of a counselling session: "Perhaps they [the consumers] are somewhat mentally preparing for a session and what to mention to their counsellors and it might be the space that triggers a lot of that thinking, and perhaps then having a space that you could then leave through would associate more with letting go of the session, and creating that mental boundary or that mental break between what just happened in the session and resuming your day to day daily life."(49)

The importance of metaphors, such as the physical journey around counselling, may be of particular significance to individuals who self harm: Individuals who self harm often rely on metaphor to communicate (50)

Design Initiatives

Jrge Room:

Rich material palate promoting sensory stimulation Ability to play music – user controlled

Bright colour in interior furnishings and wall colouring Small interior dimensions – the space needs to feel tight in order to quell anxiety (do not use high ceilings, spacious interior)

Tactile wall treatments beneficial

Natural Mind-Space: View to nature is privileged – natural space must be directly adjacent to the counselling workspace

Nature area is framed or bordered (such as an enclosed courtyard, an open area with a surrounding hedge, tree-lined (evergreen) to block further sight, consider clear spatial boundaries)

Nature area cannot be accessed (the area must be enclosed an private to allow it to be occupied by the mind – ensure entry points are not seen

rom the counselling workspace)

Large windows to allow access to this nature area from the interior of the counselling workspace

Counselling workspace is on the ground floor or lower levels of the building Visual access to ground and sky is permitted at all times (consider lines of sight and window positioning) Interior area of counselling workspace may be smaller if nature area is larger

Linear circulation from entry, though counselling workspace, to exit

Spatial Journey:

Consider use of spaces before and after the counselling workspace, such as reception/entry and de-escalation space Consider use of a 'distress door' or exit which separate to the entry

Consider privacy around the exit from the counselling workspace (lines of sight from reception/entry, audial privacy) Consider circulation which keeps consumers entering and consumers leaving from interacting and maintains privacy

