



EXAMINING GENERATIVE SPACE DESIGN

Women's College Hospital, Toronto. Recipient of the 2016 Generative Space Award. See aplacetoflourish.net for detailed project information. Photo Credit: Ben Rahn / A-Frame

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Some clients want “six-star design” but most really just want designers to help make things better for them. This “better” will vary for different clients but nevertheless, there are certain commonalities that re-appear. In my own quest to become a more effective design leader, there is one question that has driven my work: Is there a better, more rigorous way to design environments to transform desired outcomes?

The commonalities that clients and users often express in desired outcomes include:

1. Improving employee performance, which includes their effectiveness, health, and well-being, safety, discretionary productivity, creativity, loyalty, joy in their job, revenue generation, retention, the recruitment of

optimal candidates, etc.

2. Bettering organizational performance—a more effective delivery of the vision, mission, and purpose; financial outcomes; customer and community engagement
3. Boosting overall community health and well-being

So, what if all of these results could be achieved with little or no capital expense?

THE DEVELOPMENT OF GENERATIVE DESIGN

The new design method to help transform desired outcomes, “generative space design,” was first developed as a research and development (R+D) initiative of The CARITAS Project in 2003. The CARITAS Project is a US-based not-for-profit organization working globally that I founded in 1999. The purpose of The CARITAS Project is to conduct research and provide education about how design can improve lives, particularly through creating more caring or more generative places (see [thecaritasproject.info](http://www.thecaritasproject.info/) (<http://www.thecaritasproject.info/>)).

The original concept that has become the generative space design method was discovered as a result of a UK-government grant I was awarded to conduct a research pilot study during from 2000 to 2003 to investigate “how to design environments to improve healthcare delivery.” As a result of this original pilot study, completed in 2003, I developed and defined the concept of “generative space” for healthcare design.



Macmillan Quality Environment Mark (MQEM). Photo Credit: Google: Macmillan Quality Environment Mark

Generative space is a place—both physical and social—where the experience of the participants is one that both fulfills the functional requirements of that place and also materially improves the health, healthcare, and/or quality of life for those participating in that experience in a manner that they can each articulate in their own terms. Additionally, and by its very nature, a “generative space” is a place that progressively and tangibly improves over time.

The purpose of cultivating generative design is to improve performance effectiveness. Depending upon the interests of the particular individual, the organization, or the community, the measurements of effectiveness will vary. However, in all cases, whatever these measures are, they will be used to encourage, support, and reinforce

increasing performance effectiveness in health, healthcare, and/or quality of life.

The goal of understanding how to cultivate 'generative space' is to be able to produce it consistently, reliably, and predictably across the full range of life's contextual situations including our personal lives, our professional and organizational work, and throughout the vast spectrum of our community engagements.

In 2003, under the auspices of The CARITAS Project, I initiated a large-scale R+D project to test the validity and reliability of this new generative space design method with individuals and their respective organizations around the globe. "Leading by Design" and its group of multi-disciplinary participants pay an annual fee to participate in this initiative to learn how to apply generative space design to make desired improvements in their own unique contexts.

THE JOURNEY OF LEADING BY DESIGN

The original purpose of the Leading by Design initiative was to focus its improvements in the healthcare design sector with the goal of creating a new, mainstream best practice with organizational effectiveness through patient outcomes, staff performance, and community health. In the UK, a Leading by Design participant achieved this original purpose for the design of cancer care environments.



Humanscale Denver office, Recipient of the 2015 Generative Space Award. See apacetoflourish.net (<http://apacetoflourish.net>) for detailed project information. Photo Credit: Rob Hawthorne, Rob Hawthorne Photography

A diverse collection of transformational improvements has been documented as creative individuals have applied generative space design to their own unique challenges. Many of these improvements fit the type of applications that were originally anticipated, such as major healthcare facilities projects. However, the creative applications of generative space design appear to be unlimited. The methodology has been used to:

- design a new environment to improve the effectiveness of a large commercial office and inform the next generation of new and remodeled offices
- create a UK-wide improvement framework for cancer care environments that has been adopted into the larger-scale national regulatory and inspection mandate
- help achieve a significant reduction in company health insurance premiums for a carpet manufacturer in Dalton, Ga., thanks to a daily walking program for its employees. (During a three-year period, local residents joined the program and in the third year walked a total of five million miles while reducing obesity, the incidence of diabetes and cardiac conditions, and a reliance on certain medications.)

THE EVOLUTION OF GENERATIVE SPACE DESIGN

By placing generative space design in a broader design context, its development, applications, and current status can be better understood. This new generative space design method is a continuation of my personal ongoing quest to discover how design of the environment can more rigorously and consistently improve lives. This quest began in 1971 when I started my interior design career and then became an architect. My focus began with improving lives via the design of the built environment through actual projects.

In the mid-1980s, I had the idea to create a community of like-minded healthcare and design stakeholders and founded the annual Healthcare Facilities Symposium (HFSE). Today, the HFSE is in its 31st year of operations and the like-minded group has transformed healthcare around the globe. In 1993, I founded The Center for Health Design (CHD) to be the global clearinghouse for research about the impact of the physical environment on improving health and healthcare. Today, the CHD continues to achieve its founding purpose and is well established as a mainstream design resource.

Today, millions of lives are positively impacted every day by the transformed experiences and outcomes that the generative space design method has enabled through the creative, rigorous application of this method by Leading by Design participants around the globe. To increase the impact of these transformed outcomes, The CARITAS Project offers numerous ways for individuals to learn about and apply generative space design in addition to the ongoing Leading by Design R+D initiative.

Dr. Wayne Ruga FAIA, FIIDA, Hon. FASID is the founder and president of The CARITAS Project. He is a registered architect in California and has been the recipient of numerous awards, honors, and distinctions, including the ASID's most prestigious awards: The Design for Humanity and the National Innovation Award; EDRA's Service Award; and the IIDA's Presidential Citation.