

THE BOOTH CENTRE SALVATION ARMY

Southampton, United Kingdom



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THIS CASE STUDY'S APPROACH AND PURPOSE

There are over 3000 facilities for persons experiencing homelessness in the United States alone and thousands more worldwide that range from modest projects housing 10 people to large multi-service centers. Designers and organizations intending to renovate or build these facilities look to existing projects for ideas that help them avoid 'reinventing the wheel' and enable them to capture the best ideas for their projects.

The goal of *Design Resources for Homelessness* case studies to share the innovations and lessons learned from a selection of previously completed high-quality projects. This collection is curated to showcase projects that respond in unique and creative architectural ways to the policies of their respective organizations. For the first time, these in-depth reports that concentrate on the lived human experience reference a multitude of perspectives and design voices.

Those readers accustomed to reviewing architectural case studies as they prepare to design new projects may find that DRH case studies are different because they maintain an orientation toward humanistic architecture— that is, understanding how environments can deeply support their users. Therefore, these case studies concentrate on those spaces that are most frequently inhabited by facility clients and staff. While there is less discussion of the construction methods and siting decisions (good information in its own right), there is more deep information both large scale and intimate on those places where people experience their lives— where they gather, share, eat, communicate, sleep and work. This is for several reasons:

- Interior spaces (as opposed to external aesthetic building features) are the most frequent settings for lived everyday activities that constitute the opportunity for a client to recover and heal from their trauma.
- This orientation acknowledges the growing realization that elements of architecture that influence users' perceptions are those that change relatively quickly (and are often ignored) such as interior finishes, furnishings, signage, and lighting that can affect one's mental and physical health in significant ways. There are lessons to be learned from where one stores their shoes, and if they can read in bed at night.

These case studies seek to capture the actual human experience of using and inhabiting buildings. For example:

- They showcase the outcomes of an architectural process, rather than the nature of the programming process itself. This offers an performative approach to excellence, examining what actually got built when all was said and done.
- These case studies' photos depict spaces as they are actually

encountered and used—not staged or even tidied up. This, too, is by design so that these case studies can document lived experience in its authentic form.

- The case studies as a collection include projects both new and not-so-new. Architecture can take a while to nestle into, and perhaps the more important lessons can be learned far after the happiness of ribbon-cutting day has faded from memory. Also, one cannot appreciate durability and fitness to function without observing a space that has been through the test of time.
- Multiple voices are referenced here. It takes a village to determine how a building is perceived, used and appreciated. Therefore, staff, experts, and residents are interviewed for these case studies where possible to gather diverse perspectives. In this way, the competing needs for a facility are laid bare: durability needs of staff are captured, as are the preferences of clients for privacy, for example.

Lastly and importantly, while DRH case studies embrace a basic orientation toward built space (discussing space planning, lighting, furnishings, finishes and the like), there is an important 'overlay' piece that is less frequently addressed within case studies—that of connection to human well-being. These psychological and physical user needs include safety, empowerment, stress management, and preservation of dignity. Doing so embraces *Design Resources for Homelessness's* commitment to expanding the discussion and application of psychologically-informed care principles, and more broadly, sees architecture as an effective tool in nurturing and evoking positive change.

AT A GLANCE

Address

57 Oxford Street
Southampton, United Kingdom SO14 3DL
023.8033.0797

Managing Organization

Salvation Army

Matthew Smith, Service Manager

Architect

Cullen Carter and Hill Architects

Clients

Adult male and female residents referred from other hostels experiencing homelessness. Many have complex needs.

Facility Type and Capacity

Transitional supportive housing with average stay of eight months. 43 apartments with en suite bathroom and shared living/dining within a cluster configuration.

Approximate Square Footage

30,000

Admission

The costs are met through the housing benefit system in the UK. There is also a small percent charge fee for residents.

Year of Construction / Renovation

2010. Total replacement of floor plates with new space plan on original site footprint.

Number of Floors

4

Site

Urban

On-site Services and Amenities

Multiple interior community spaces, shared kitchens and living rooms, cafe with interior and exterior dining, furniture upcycling retail activities, gym, case management, group meetings, offices, laundry.

This case study

Visited in May 2018 for two days totaling approximately 14 hours of onsite observations and discussions.

On-site photo documentation and videorecording of the neighborhood, site, and the building

Review of floor plans

Consultation with Dr. Nick Maguire, Associate Professor of Psychology, University of Southampton

Interviews with the director, two staff members, the arts supervisor, a non-resident worker, and five current residents. The names of staff members and residents have been withheld to protect confidentiality.

FACILITY TOUR

Attendance to Human Needs

Use this key on the following pages of the facility tour to learn how the design of the building and its spaces contributes to the well-being of its residents and staff.



Dignity and Self Esteem



Empowerment and Personal Control



Security, Privacy and Personal Space



Stress Management



Sense of Community



Beauty and Meaning

CONTEXT

The Salvation Army Booth Centre in Southampton, United Kingdom offers transitional housing for persons who have experienced homelessness and other complex issues including substance abuse and mental difficulties. When compared to similar facilities in the United States especially, it is architecturally remarkable both for its neighborhood location and the historic provenance of its building.

As evident from its façade festooned with historic architectural ornamentation and stylized fish statuary, the building was originally the Sailor's Home, a boarding-house for those that worked on the ships that docked at Southampton's port close by, including the Titanic that moored at the White Star Dock. Some of the Titanic's sailors purportedly spent their last night on land at the Sailor's Home before departing on the ship's last journey in 1912.

When the Booth Centre was renovated nine years ago under the guidance of Cullen, Carter and Hill Architects, historic preservation requirements made necessary the conservation of the entire front façade while the back of the building was totally gutted including the floor plates, back wall and most side walls. What remains was a uniquely shaped floor plan influenced by the site and historic window forms that evoke its history and offer the 'good bones' of a building sufficiently adaptable to accommodate a new, yet similar use to the Sailor's Home.

The neighborhood is remarkable for the Booth Centre's location in that an upscale entertainment district is only a 1-minute walk away, replete with tony bars and restaurants that enliven the night atmosphere of the neighborhood. Seemingly, both the Booth Centre and this restaurant district coexist without significant incident. One staff member noted the irony of the entertainment zone's emphasis on alcohol only steps away from the Booth Centre, and their resident's contrasting desire to stay away from its influence.



The 2010 renovation of the building removed all but the historic front facade.



Exterior

The historic nature of the Booth Centre's building is evident in its front facade and prominent "Sailor's Home" medallion.



Neighborhood

Steps away from the Booth Centre is a thriving entertainment restaurant district. Two and three-story mixed use buildings populate Oxford Street, one block from the waterfront in Southampton.



Bottom left: a view of the street from the first floor windows.



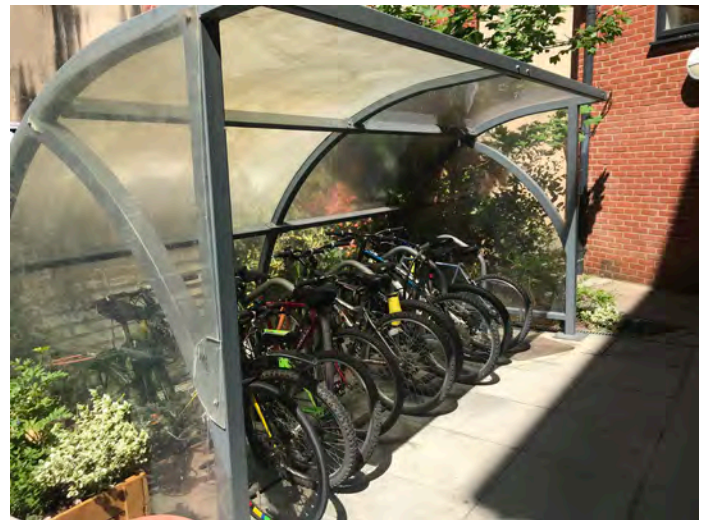
RESIDENT BIOGRAPHY

Most residential clients of the Booth Centre have recently stayed at other area hostels, which serve as an assessment mechanism. Both male and female adults are accepted, and most have not experienced a sense of security in some time. Matthew Smith, the Service Manager of the Booth Centre describes that most residents arrive with memory of these other locations' atmosphere of fast-paced efficiency and frequent chaos fresh in their mind. Residents can be fearful, anxious and insecure, and focused on needing a bed and a room. Clients present with a mix of complex support needs often linked with drug and alcohol use, and mental afflictions such as depression and anxiety. They often use a sense of avoidance as a coping mechanism.

Breaking with previous policies, the Booth Centre permits residents to enter if they are intoxicated and may have alcohol in their rooms, but require residents to sign these in so staff are aware of their presence. In general, the Booth Centre is viewed as a desirable 'step up' from the other hostel locations, and a place of enhanced calm and trust, which the staff at the Booth Centre are invested in maintaining. This sense of openness coupled with a policy permitting influential substances presents both an opportunity for personal change but also a challenge

due to behaviors these products' presence can cause. In the words of one staff member, "it's a fine line between being too harsh and too lax".

The Booth Centre achieved a planned move-on rate of 86% in 2017. These efforts are at times hindered by the lack of next-step housing availability. Occasionally, a client's past experiences and complex needs means they are not yet ready for accommodation that the Booth Centre offers. The lack of coping skills necessary to live semi-autonomously leads these clients to move out, and some may return to street living.



The cafe's exterior seating shares space with secure bicycle storage

MISSION AND GOALS

Promoting a sense of home

The Salvation Army's stated mission is to "save souls, grow saints and serve suffering humanity". The opportunity to entirely gut the existing building gave the Booth Centre's administrators the chance for the interior architecture to emphasize a sense of welcome and promote dignity, autonomy and self-esteem amongst residents in an atmosphere and safety and trust. Service Manager Matthew Smith describes that he and staff "want to see [residents] seeing themselves as important, being worthwhile and having something to contribute". In service to this goal, Matthew and his staff colleagues undertake initiatives and activities that engage residents with the physical building and its atmosphere, such as expressive art projects and the Centre's Furniture Upcycling project, further described below. A variety of therapeutic programs are offered including Bible studies, Narcotics Anonymous and Alcoholics Anonymous meetings as well as dinners, quiz nights and counseling facilitated by the on-site chaplain. These programs are optional, because to require attendance would be to negate the main underlying goal of having residents proactively develop life skills, necessary so that they can successfully exit the Booth Centre to live on their own. While not a requirement, residents are encouraged to work four hours at the Booth Centre per week as a café server, painter, cleaner or in another function to contribute to the sense of community and simultaneously

learn skills.

Explains Matthew, "a lot of what we try to do around the activities is to build up [residents'] self-confidence so that they understand that they are worth something, and they do have something to give to the world-- they have gifts and they just need a little bit of encouragement to find out what that gift is to pass it on to others." These intentions can be seen in ways both large and small within the Booth Centre. Staff seek to place residents at ease as quickly as possible and maintain a calm environment that promotes a calm state of mind. One gesture stands out in contrast to the sometimes brusque ways that American supportive housing react to their residents: Booth Centre staff greet first-time resident visitors at the reception desk, but then leave the desk barrier and bring them a cup of hot tea in the lobby, sitting down with them collegially to learn their story. The first-time visit experience is important, according to staff. Notes one staff member, "most people have a positive subconscious level of feeling about the place." Most first-time visitors have an 'oh wow' reaction, especially as they compare it to the other hostels from which they may have come. One resident noted that the presence of cues in the reception area sent clear signals of respect for residents, such as an aquarium and the presence of carpet. For this resident, the well-kept nature of finishes and furnishings sent a message of civility that elevates the Booth Centre above his experience at nearby hostels.

THE PSYCHOLOGICALLY-INFORMED ENVIRONMENTS PHILOSOPHY OF CARE

Observations on the Booth Centre's expression of PIE

The psychologically-informed environments (PIE) philosophy represents a fundamental shift underway within care organizations in the United Kingdom*. These ideas move away from former approaches notable for their authoritative, top-down choice-making, and move toward a clinical approach that prioritizes client empowerment, personal control, choice-making, and building confidence and autonomy. This personalized approach is viewed as more effective for complex needs clients and a way to counteract learned helplessness that can stymie independent living and securing employment.

Dr. Nick Maguire, Associate Professor at the University of Southampton observes that the experience of the Booth Centre by residents offers the opportunity for the development of life skills, which embodies the tenets of PIE and its emphasis on empowerment and autonomy. Delving more deeply into the built environment's potential contribution to building life skills brings forth both tensions and opportunities. For example, the Booth Centre can both provide a sense of home where one can be oneself, but also must at times guide behavior for its residents' future success. Activating these ideas means creating both a nuanced environment that is 'not in people's faces' and also a setting for positive change. Walking this tightrope calls for interior designers and

architects to deeply understand mission and procedures while bringing to the environment features and spatial choices that enhance human experience.

A negative example shows how the built environment can in fact exacerbate learned helplessness: Some Booth Centre residents has requested that the existing Closed Caption Television (CCTV) service now present in key public areas be additionally installed in the small community kitchens for the purpose of determining who, specifically, is not cleaning up after themselves in these shared areas. Put another way, the residents sought external, authoritative staff help to solve what is essentially a human relationship dilemma best worked out through discussion. Were CCTV installed in the kitchens, this would redirect the authority to this external source, thus missing an opportunity for residents to practice negotiation with others necessary in daily life. This may reinforce learned helplessness—and also needlessly burden staff with a new policing function they do not have time for.

*The trauma-informed care movement in the United States has some parallels to the PIE movement in the United Kingdom. The Homeless Link organization in the United Kingdom offers a useful comparison of the two at <https://www.homeless.org.uk/connect/blogs/2016/feb/11/webinar-replay-understanding-psychologically-and-trauma-informed-practice>

THE PSYCHOLOGICALLY-INFORMED ENVIRONMENTS PHILOSOPHY OF CARE, CONT.

Through conversation with Dr. Maguire and Service Manager Matthew Smith, a series of ideas emerged that explore how the application of PIE principles are either already in play at the Booth Centre or might be used to improve the experience of living there:

- It is helpful to residents to encourage a positive, regular daily routine. Therefore, the ambient lighting in the reception area should permit dimming so that evening hours offer a subtle message of slower pace and preparation for sleep.
- Including plants can send a subliminal message of care--- a place that cares for plants would likely care for its human beings too.
- Providing a built environment with choices that are self-evident and encouraging can potentially prompt independent action. For example, offering a self-serve tea service in the reception area (coupled with a resident program for its maintenance) can both encourage community and prompt residents to engage in choice and care.
- The environment can facilitate self-problem solving by providing a group lounge setting for residents near a regularly occupied staff area, letting residents discuss matters while also permitting a staff member to lend suggestions and a sense of support.
- Dr. Maguire observes that the current reception area's desk is overly deep, reinforcing a subtle, unspoken idea that it is difficult to get a message through to staff. This psychological barrier to staff's engagement might be reduced by narrowing the reception desk and possibly changing its configuration.
- Excessive messaging through multiple bulletin boards and papers taped to many walls may reinforce a rules-dominant environment, even if that is not the intent. Consolidating or eliminating some messages, or moving them to a video screen can serve to simplify the environment. Visual disorder can be an unwanted metaphor to a disordered life; conversely, a calm, ordered environment can potentially promote civility and a sense of progress.



The current reception desk's counter is significantly deep, creating a metaphorical barrier between residents and staff.

Floor Plan: Ground Floor



Plans courtesy of the Booth Centre



FEATURES

Art program

A significant and positive feature at the Booth Centre is the presence of art in a variety of locations. These expressions range from quirky (a half of a chair mounted to a wall in the cafe) to sentimental (a wall collage of music personalities within the activity room). Art located in the stairwell landings likely aids wayfinding for new residents who may be confused by the visual similarities of the upper three floors (as confirmed by a staff member) and posters that use historic photos and text celebrate the Booth Centre's connection to the Titanic that launched from the city's near-by port. Common lumber is used creatively to create plant containers in the external café dining patio. The collective impression of this art lends a sense of a place that is lively, fresh, and continuously evolving.



Art created by residents populates the stairwell landings, providing orientation cues.

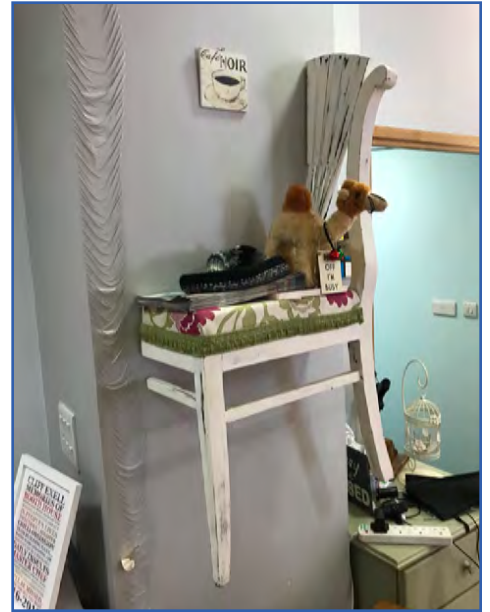
Cafe and dining room

Underwritten by the Salvation Army, this café serves the public as well as residents and serves not only as an inexpensive outlet for a hot meal, but also a showcase for the Centre's Furniture Upcycling industry that occurs there. It is staffed in part by residents who benefit from the job's people engagement functions. The space generally is a visual feast of refinished furniture, paper sculptures, ceramic art and unexpected touches such as ceramic plates and cups that serve as homes for fish in an aquarium. The outside adjoining patio offers a well-sized retreat for conversations, bike storage, and a further showcase for resident art in a setting of well-cared for plants and historic brick facades. It is here, however, that the historic building works against its current use-- the historic entrance is significantly recessed, which reduces the café's presence for the public at the street.

Interviews suggest that a larger variety of seating options (for 1, 2 or 6 people) and also seating with a protected back location in the room would offer a better sense of options and security for patrons. One resident remarked that the tables here have helped him build a sense of community, noting "it's a small step when you bump into people, but it's good".

Arts program

Art is a prominent feature throughout the Booth Centre's public spaces on the first floor. This injects an important sense of color and visual interest to the rooms, reinforcing a sense of evolution and re-creation supportive of the Centre's mission.





Cafe

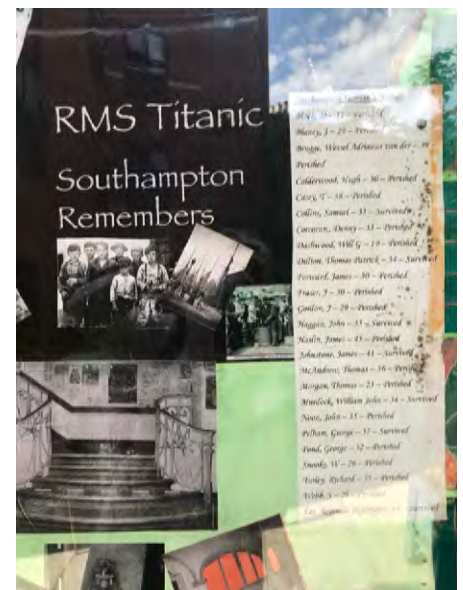
Open to the public as well as residents, the cafe provides an opportunity for life skills practice, potentially reducing a sense of isolation. Mixed chairs and a variety of table sizes provides diners options for the level of interaction they would like on any given day.





Cafe patio

The patio is framed by the site's bricked boundaries and provides a sturdy and stable backdrop for abundant plants. Nearby surfaces showcase resident art projects that explore the Centre's history. Furnishings in a variety of similar-saturation colors injects interest while lending harmony to the space.





Social industry: Furniture Upcycling

Residents can engage in furniture renovation projects which are then marketed and sold to the public. The location for this showroom was in the process of being moved during the visit.



Gathering room, training room and gym

A first floor small lounge gives residents the chance to engage each other outside of their apartment areas. Several residents and staff members remarked that this area might be larger, and that intentional activities that draw people to use the area such as a pool table or television would be a positive change. One resident expressed a desire for a space to simply 'sit and chill' in the presence of others at the Centre.

The training room with audio-visual capability hosts planned programs, Bible studies and offers a kitchen for food-enhanced events. Here a bay window admits natural light and injects a sense of the building's history. A gym highly popular with residents provides an elliptical machine, stationary bicycle and free weights.



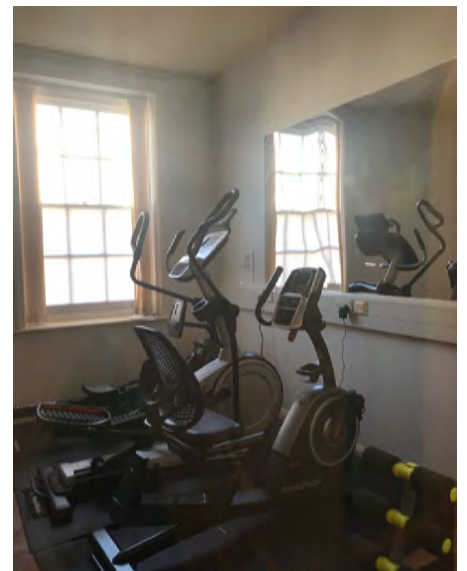
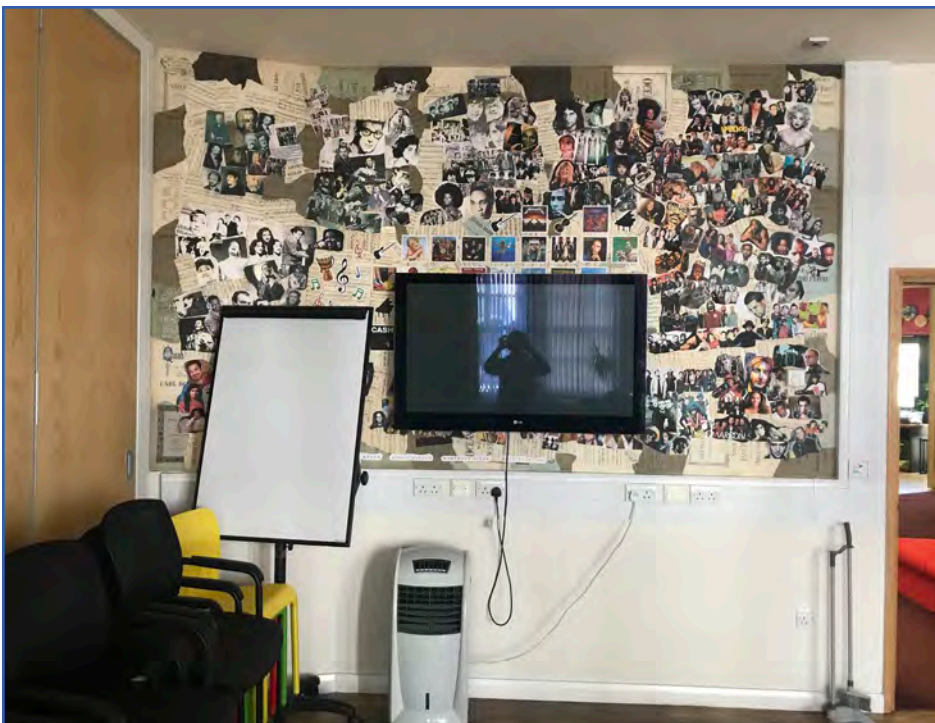
The gathering space just outside the cafe provides an activity zone for residents with reading materials that lend purpose to being there. The position outside the cafe may support chance encounters to build relationships.



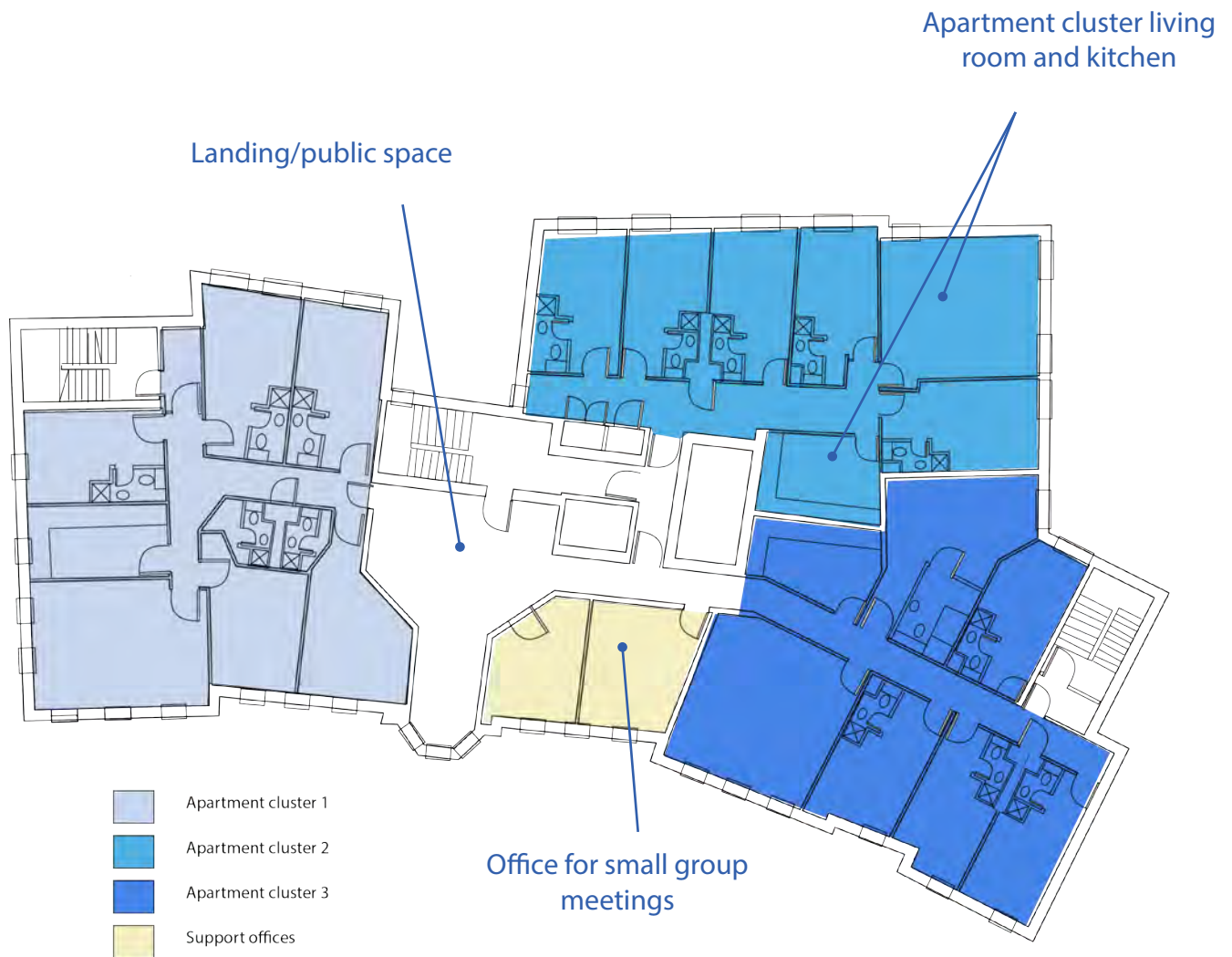


Training room and gym

With the aid of the front facade's historic bay window, the training room provides a flexible space for dining, therapy groups, Bible studies and similar gatherings.



Floor Plan: First through Third Floors



Plans courtesy of the Booth Centre

The apartment cluster design

A unique feature of the Booth Centre are the spatial layouts of the 40 single occupancy and three double occupancy apartments that exist on its three upper floors. Five apartments are grouped around a shared kitchen and activity/dining room and three of these 'clusters' are located on each floor. The arrangement creates a 'cognitively graspable' situation, reducing one's nearby floor neighbors from 15 to five, according to Matthew Smith, the Service Manager. Programmed key fob entry means that only residents can access the cluster where they live, and residents on other clusters can enter only at the invitation of a cluster resident. Male and female residents are present within clusters, in an effort to mimic the realities of living in a flat (apartment) in the near future.

Each cluster of five apartments is accessed by a key fob issued by staff. Other residents may be invited in only at the invitation of those that live there.



This layout springs from the Booth Centre's priority of actual and perceived security of its residents, many of which have experienced abuse in the past. Multiple resident interviews confirmed a pervasive client desire for the security that is maintained at the Booth Centre through its access policies and presence of a CCTV system. The further intent of the clusters is to build a sense of manageable community, encouraging residents to create relationships with others nearby who have been specially selected and placed within a cluster by Booth Centre staff. Notes one resident, "It's good to have acquaintances and friends you can trust. It's starting to help me open up because I'm shy and step out of my comfort zone". Discussions with residents suggest that the system effectively keeps out strong personalities who might intimidate and bully others and lends residents a sense of enhanced personal control. One resident discussed the satisfaction of being able to get a good night's sleep because of the access policies. Another mentioned the satisfaction of having access to a kitchen, not present at his previous hostel, that made him feel more autonomous. He observed that "even the act of having a refrigerator and freezer... I can make a batch of soup and freeze it." A side benefit of the clusters is that it interrupts long corridors, which other nearby hostels have seen can prompt some residents to run through them, knocking on apartment doors.

The Booth Centre structures its resident housing agreement so that a resident can be moved to another cluster with 24 hours' notice if necessary. In the case



of residents who are disruptive that visit other clusters, staff can put in place a temporary 'cluster ban' which withdraws visiting privileges until the behavioral situation improves. One interviewed resident objected to the controlled access to others' apartments, describing that this made developing relationships somewhat frustrating, noting "you shouldn't have to phone people in the same building". Another suggested the idea of having a floor dedicated to residents who are alcohol-free.

Shared spaces within the apartment clusters

Five residents share the use of a living room and a nearby kitchen. While the cluster layout appears to provide residents with a sense of manageable community and some clusters are working effectively with group cooking and dining, both staff and residents describe that some aspects of

the layout are problematic. Discussions with residents, staff and the Service Manager suggest the idea of gathering space for small numbers of residents has merit, but that the living rooms in their current form are seldom used. Kitchens are currently near, but visually separate from the living rooms. This separation of the kitchens may suppress the process of cooking and then dining together. Some residents report they prefer to cook, then eat by themselves in their room. The presence of small refrigerators and microwaves in the apartments, according to one staff member, may also suppress residents' desire to cook communally.

Visits to the cluster living rooms show them to be somewhat oversized and underfurnished for their function. Third, a review of the spatial floor plan as a whole shows that some living rooms are deep in the

spatial configuration and very compartmentalized with single door entry, suppressing their visibility, and hence, possibly reducing their use.

Three clusters are placed on each floor around the core spaces of the elevator, a medium-sized shared landing and a support office. While the office is used on occasion for meetings or for a quiet space, the landings themselves are visually in flux, with some sparsely furnished. Interviews suggest that previous communal use of these areas was disruptive for residents whose apartments abutted this area; hence, the shared use of these areas was discontinued.

Interviews with staff and the director revealed that a key goal is to prompt residents to engage with each other more to grow their sense of ability to interact with others. There is concern that residents are staying isolated by remaining in their rooms for excessive periods. Said one staff member, “it’s a continual process of coaxing them out of their apartments”. Several aspects of the current architecture and situation, then, appear to be standing in the way of this:

- The presence of refrigerators and microwaves in the individual apartments
- The ubiquity of technology and social media (most residents have a device) suppress face-to-face engagement
- Inability to secure personal food from theft in the shared kitchens
- The presence of televisions (or via a smart

device) within apartments

- The lack of an acoustically workable communal gathering space available at all hours of the day for all residents (outside of the cluster areas) with engaging activities

In summation, the cluster configuration of apartments appears to be fulfilling its purpose of instilling a sense of security while enabling staff to provide residents with the support they need through well-matched neighbors. Some areas within the clusters such as the living rooms and kitchens require reconfiguration and resizing to optimize their usefulness.

The apartments

The single-occupancy apartments each have an en suite bathroom with shower and a private safe. In general, these rooms are serviceable for residents, and many have brought in further elements to ease their livability such as portable lighting fixtures.



Each single occupancy apartment has both shelf and hanging storage.



Apartment

The apartments are modestly sized and have an en suite bathroom. Mild variation in the size and configurations of the apartments may be influenced by the unusual historic building footprint.



Due in part to the historic floor plan, the rooms vary somewhat in size, which can create some resentment among residents. Staff observe that the rooms are too small for obese residents, who must use the accessible rooms instead. In particular, multiple residents remarked on the inadequate size of the showers. Staff have also identified that the lack of an accessible room on the ground floor creates a problem when the elevator is out of service.

Staff also identify the need to add more emergency shelter sleeping space on the ground floor during times of cold weather. While bathrooms are present on this floor, there are no showers, which would be very helpful in these circumstances, as well as extra places to store temporary cots.

Summary

Buildings, like people, experience cycles of change, sometimes actively evolving and at other times existing in a state of rest. It is difficult to maintain a forward momentum through the passage of time. As gathered through on-site observations and confirmed by interviews of staff, residents and others, however, the Booth Centre at nine years into its building's use has both reached a sense of maturation in its programmatic fit to its physical building, but yet continues to stretch and progress its self expression. While consensus identifies that some elements like the apartment cluster space planning present hurdles to the Booth Centre's experiential goals, other features such as a lively and vibrant art program are a visual manifestation of its

optimistic spirit. Collectively, the Booth Centre presents a positive setting for recuperative growth necessary for helping its residents to be their best selves.

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Salvation Army Booth Centre, Southampton, United Kingdom

Matthew Smith, Service Manager

The many staff members of the Booth Centre that provided their insights

Residents of the Booth Centre for the gift of their interviews and suggestions

Dr. Nick Maguire, Associate Professor, Department of Psychology, University of Southampton





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Design Resources for Homelessness

A non-profit initiative dedicated to the positive potential of the built environment for healing and exiting homelessness.

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