

ABSTRACT

Title of Thesis: FROM STIGMA TO STRENGTH

Vasilea Roberts, Master of Architecture, 2023

Thesis Directed By: Professor Daniel B. Curry, Professor Brian Kelly, Professor, Joseph Williams, Department of Architecture, Planning, and Preservation

This thesis aims to help the ongoing issue of homelessness in Washington, D.C. This will be achieved by creating a wellness facility for LGBTQIA+ youth. This thesis is overall attempting to create a more healthy, lively, green city, starting with transforming the lives of its youth. The goal of the wellness facility is to welcome the homeless LGBTQIA+ youth population of the city and those less fortunate and help them transition to a life that focuses on their success and wellbeing. This involves rehabilitation, education, and transitional housing, in order to help the occupants begin a new chapter of life. There will also be physical necessities for the occupants like food, water, and shelter - the basic things that these people may struggle to find on a daily basis. The occupants can stay and be fully immersed into a life-rehabilitation program or use the facility until necessary. The multi-use facility will be part of a larger master plan for Howard University, integrating mixed-used commercial, residential, and retail space for more sustainable urban design that involves the community. Helping people get off the street and start a stable life will also increase the lives of all city dwellers and create a more livable and

healthier city. The goal of the exterior of the wellness facility is to create a space on the street for a more enjoyable pedestrian experience. The interior exterior will also introduce local art and context in order to engage the community and embrace the passions of the wellness facility's occupants. Overall, this thesis aims to create a city that is kind to its occupants and creates an environment of peace and success.

FROM STIGMA TO STRENGTH

by

Vasilea Christine Roberts

Thesis submitted to the Faculty of the Graduate School of the
University of Maryland, College Park, in partial fulfillment
of the requirements for the degree of
Master of Architecture
2023

Advisory Committee:

Professor Daniel B. Curry, Chair

Professor Brian Kelly, Committee Member

Professor Joseph Williams, Committee Member

© Copyright by
Vasilea Christine Roberts
2023

Dedication

For Lexi and Danny who have been my solid support throughout my years of studies at Maryland, encouraging me to keep going and make the best of it.

For Mom and Dad, not only my financial support, but their kind words of appreciation, love, and the ‘Proud of you’s’ that kept me going.

Acknowledgements

I want to thank my professors and classmates who have supported me, encouraged me and stood alongside during my undergraduate and graduate journey at UMD.

I also want to acknowledge Dan, my thesis chair for your insight and support of my ambitious journey.

Table of Contents

Dedication.....	ii
Acknowledgements.....	iii
Table of Contents.....	iv
List of Figures	vii
List of Illustrations.....	ix
List of Abbreviations	xi
Chapter 1: Homelessness in the United States.....	1
History of Homelessness in the U.S.	1
What “Homeless” Means in America	3
Causes of Homelessness	4
Homelessness in the U.S. Today.....	6
Chapter 2: The Beginnings of Homelessness in Washington, D.C. as a Social Problem	
.....	8
Context.....	8
History.....	9
Media Influence in the Beginning of Homelessness as a Social Problem in	
Washington, D.C.....	12
Specific Context Relating to CCNV	14
Chapter 3: Homelessness in Washington, D.C. Today	16
Concluding the Beginning of Homelessness as a Social Problem.....	16
The Decades Leading Up to Homelessness Today	17
1975-1985	17
1985-1994	20
1994-Today	22
Conclusion	24
.....	24
Chapter 4: Current Solutions of Homelessness in Washington, D.C.	25
Introduction.....	25
Current Homelessness in D.C.	25
Current Solutions	27
What Can We Do?	29

Houston, Texas.....	30
Conclusions	32
Chapter 5: Site Selection.....	33
Chapter 6: Site Analysis.....	35
U Street	36
Beginning of U Street	36
Redevelopment and Demographic Change	39
Local Art, Style, and Craft.....	40
Howard University Area	42
Establishment of Howard University	42
Howard University Master Plan.....	43
Chapter 7: Precedent's Analysis	46
Homeless Shelter: NoHo Bridge Housing Shelter	46
Rehab Facilities.....	48
Recovery Village at Cherry Hill	48
Spaulding Rehab Hospital.....	49
Career Training Facility: Madison Adult Career Center	50
Affordable Housing: 901 Fairfax Avenue	51
Campus Planning: Howard University Central Campus Master Plan	53
Therapeutic Space: Nuuk Psychiatric Clinic	55
Green Space	56
Klyde Warren Park.....	56
Central Park.....	57
Chapter 8: Thesis Transition	59
LGBTQIA+ Youth.....	59
Chapter 9: Design Approach.....	60
Site Design	60
Building Design	68
Building Diagrams	77
Chapter 10: Conclusion.....	82
Appendices.....	90
Image Credits.....	90
Bibliography	93

List of Figures

- Figure 1: Causes of Homelessness in DC by Central Union Mission
- Figure 2: Washington, D.C. Homeless Population statistics by Central Union Mission
- Figure 3: CCNV's first homeless shelter built from an abandoned building
- Figure 4: CCNV's Union Station sit-in
- Figure 5: Washington Post's coverage of CCNV's efforts
- Figure 6: CCNV's leader Mitch Snyder uses his publicity to his advantage
- Figure 7: 2021 Point in Time Homelessness Fact Sheet by The Community Partnership For the Prevention of Homelessness
- Figure 8: Homeless encampments have become common in Washington, D.C.
- Figure 9: 2022 PIT Statistics of adults experiencing homelessness
- Figure 10: Outreach workers interviewing people in encampments by Christopher Lee for the New York Times
- Figure 11: U Street after the district-wide public improvement project
- Figures 12-15: U Street thriving as a black cultural center for business, music, and education
- Figure 16: Street art on U Street
- Figure 17: Famous restaurant, Ben's Chili Bowl on U Street
- Figure 18: proposed Campus master plan for Howard University, 2020
- Figure 19: NoHo Bridge Housing shelter cubby room
- Figure 20: What is Bridge Housing?
- Figure 21: open room at Recovery Village Cherry Hill

Figure 22: fitness room at Recovery Village Cherry Hill

Figure 23: Spaulding Rehab Hospital Patient Room

Figure 24: Spaulding Rehab Hospital

Figure 25: 901 Fairfax Avenue ground floor plan

Figure 26: 901 Fairfax Avenue

Figure 27: Howard University Master Plan, 2020

Figure 28-29: Nuuk Psychiatric Center and its connection to nature

Figure 30: Klyde Warren Park Map

Figure 31: Map of Central Park 1863, NY Public Domain Library

List of Illustrations

Illustration 1: Site selection between U street corridor and Howard University

Illustration 2: Site selection zoomed in

Illustration 3: Site square footage and zoning

Illustration 4: Site surrounding zoning

Illustration 5: Site Parti

Illustration 6: Site setback and vegetation buffer

Illustration 7: Site urban thoroughfare

Illustration 8: Site divided by Bryant Street and W Street

Illustration 9: Thesis site designation

Illustration 10: Howard University site designation

Illustration 11: Connection of thesis site to Howard University green space

Illustration 12: Income generating and Shaw resources site designation

Illustration 13: Site Plan

Illustration 14: Site Axonometric

Illustration 15: Building Organization

Illustration 16: Housing portion of facility

Illustration 17: Floor plans

Illustration 18: Housing outdoor space

Illustration 19: Education portion of facility

Illustration 20: Education outdoor space

Illustration 21: Rehabilitation portion of facility

Illustration 22: Rehabilitation portion Zen Garden

Illustration 23: Shelter portion of facility

Illustration 24: Plan organization diagram

Illustration 25: Courtyard access diagram

Illustration 26: Building Connectivity diagram

Illustration 27: Containing Courtyard diagram

Illustration 28: Circulation diagram

Illustration 29: Visual connection diagram

Illustration 30: Massing evolution diagram

Illustration 31: Courtyard perspective

Illustration 32: Family Room perspective

Illustration 33: Collaboration perspective

Illustration 34: Section Perspective

Illustration 35: Security concept of the facility

Illustration 36: Wellness concept of the facility

Illustration 37: Tranquility concept of the facility

Illustration 38: Community concept of the facility

Illustration 39: Individuality concept of the facility

Illustration 40: Family concept of the facility

Illustration 41: Identity concept of the facility

Illustration 42: Privacy concept of the facility

Illustration 43: Final Boards for thesis presentation

List of Abbreviations

PTSD: Post-Traumatic Stress Disorder

COVID-19: Coronavirus Disease 2019

CCNV: Community for Creative Non-Violence

DHR: Department of Human Resources

NYC: New York City

D.C.: District of Columbia

HUD: Department of Housing and Urban Development

SOME: So Others Might Eat

ICH: Interagency Council on Homelessness

HHS: Department of Health and Human Services

VA: Department of Veterans Affairs

HBCU: Historically Black College and University

Chapter 1: Homelessness in the United States

History of Homelessness in the U.S.

Many People are unaware of the lengthy history and evolution of homelessness in the United States that dates back to the eighteenth century. During the colonial era, homeless people were referred to as “wandering poor,” “sturdy beggars,” or even just as vagrants.¹ Vagrant is an impolite word, meaning “a person without a settled home or regular work who wanders from place to place and lives by begging.”² As you can see, homelessness has had a negative connotation since its very beginning.

Once industrialization and urbanization began to spread rapidly in the mid 1800s, homelessness became noticeable to the everyday person. Steadily increasing simultaneously with the economic growth of the U.S., homelessness became a national concern in the 1870s. This is when we really start to see a correlation between the mindset of working Americans and the homeless. There were a lot of forced layoffs, unemployment, economic depressions, automation, and industrial accidents that all contributed to an increasing homeless population.³ This shift in homelessness scared most workers into accepting their place in the industrial order

¹ Kenneth L. Kusmer, *Down and Out, on the Road : The Homeless in American History* (Oxford: Oxford University Press, 2002) 3.

² “Vagrant.” Oxford Languages (Oxford University Press, 2022)

³ Peter H. Rossi, *Down and Out in America: The Origins of Homelessness* (Chicago: University of Chicago Press, 1989)

because of the constant threat of being down-and-out. The reemergence of homelessness seemingly became a strictly urban problem.

During this post-civil war era, the homeless seemed to be grouped by those who went on the road, and those who gravitated towards cities. In these cities, the homeless were forced to stay overnight in privately run shelters or in police station rooms called “tramp rooms.”⁴ Those who traveled were typically younger and traveled to find work or adventure, typically using the rail system. These two defining groups of homeless seemed to stick until WWII when less people were riding rails due to the effect of the war and structural changes in the economy.⁵ This shift seemed to confine homeless people to particular locations, especially to “skid row” areas of cities. For those unaware, skid rows are defined as “a run-down part of a town frequented by vagrants, alcoholics, and drug addicts.”⁶ Now not only is there an extremely negative perception of the homeless, but also the places in which they occupy. This association between the homeless and alcoholics or drug addicts is one that still stands today. This turning point in homelessness seemed to decline the rates to their lowest for the next few decades until mass homelessness reemerged in the 1970s. However, the lack of concern for the homeless seemed to be at its worst during the emergence of urban renewal. The skid rows were demolished, and as the U.S. entered a recession, there was no place for these people to go. Luckily people were willing to help, and shelters were built, but the population was exponentially

⁴ Peter H. Rossi, *Down and Out in America: The Origins of Homelessness* (Chicago: University of Chicago Press, 1989)

⁵ Ibid.

⁶ “Skid Row”. Oxford Languages (Oxford University Press, 2022)

rising in the 1990s. By the end of the 20th century, it seems as though homelessness had become a permanent feature of postindustrial America.⁷

What “Homeless” Means in America

The stigma of homelessness is something that has developed alongside the emergence of homelessness in the U.S. since its very beginning. At the beginning of American society, passage of anti-vagrancy laws and the creation of workhouses for the poor created a negative perception of those without homes. Once the stereotype of a “Tramp” (a violent and aggressive homeless person) became known, people even started to become scared of the homeless. Although the term tramp almost disappeared through time, the association between the homeless and violence or criminal activity remained.

Prior to WWI, the perception then shifted to Americans seeing the majority of homeless people as foreigners who are unable to assimilate to American values. Thus, generalizing an entire population of immigrants. Although leading up to the war this may have been true, and a lot of immigrants became homeless, it was more a fault of the social and industrial structure and hierarchy within the U.S. Homelessness has also been associated with laziness since the beginning, making the homeless abhorrent to many Americans. This is because as industrialization emerged, there was a direct correlation between work done and benefits received. Therefore, if you were homeless, it was because you were not working hard enough. A society that worships upward mobility and success tends to alienate the homeless and see it as a sort of

⁷ Peter H. Rossi, *Down and Out in America: The Origins of Homelessness* (Chicago: University of Chicago Press, 1989)

failure.⁸ Thus, the attitudes towards work, laziness, inequality, and kindness will be connected to homelessness unless we change that perception.

After WWII, the homeless became invisible to most of the public, except for police. The lack of concern for homeless people led to and was ingrained by the Urban Renewal movement. Along with the lower class, the homeless were moved and their skid rows were demolished. Because these people do not look “normal” in the eyes of our hierarchical society, it is easy for people to treat them as lesser, and categorize them as potential criminals, drug addicts, or psychotic, while failing to see them as humans. It is crucial that we understand the complex causes of homelessness and acknowledge their existence so that we can empathize with them and be better equipped to help.

Causes of Homelessness

Americans often blindly read homelessness as laziness or chalk it up to substance or alcohol abuse, when in reality the causes of homelessness are often complex and unique to the individual. Multiple factors, both economic and non-economic, are typically at play to put someone in a very unfortunate situation.

Some of the economic factors may include the lack of affordable housing, unemployment, low income, etc., and a lot of Americans are on the brink of homelessness, such that one financial setback could cause them to lose their home. Such setbacks are so common in our everyday lives like car troubles, illness, divorce,

⁸ Kenneth L. Kusmer, *Down and Out, on the Road : The Homeless in American History* (Oxford: Oxford University Press, 2002) 7.

etc., that it is not extremely hard to land in a situation where you are without a home. The U.S. social and economic structures are not particularly kind to those in poverty, making the risk of homelessness unfortunately common. Things that occur in housing like renewal, redevelopment, gentrification, and rent increase puts housing out of reach for a lot of people. The decreasing amount of affordable housing is forcing people onto the streets and in shelters.



Figure 1: Causes of Homelessness in DC by Central Union Mission

Some non-economic factors may include mental or physical disabilities, medical conditions, abuse, drug or alcohol dependency, PTSD, learning disorders, etc. can all lead to homelessness. More general changes in the U.S. like the deinstitutionalization of mental hospitals and the reduction of public expenditures on welfare are often unrecognizable as something that affects the individuals, but in reality, these changes cause an increase in the homeless population.⁹ Unexpected

⁹ Deden Rukmana, *The Causes of Homelessness and the Characteristics Associated With High Risk of Homelessness: A Review of Intercity and Intracity Homelessness Data* (Taylor & Francis Online, January 14, 2020.)

things like COVID-19 impact the most vulnerable people in our country. The economic impacts of the pandemic continue to affect housing affordability, aside from its immediate effects of putting people out of work and shoving people into poverty.

There must be a system in place to catch our people when they fall, even at the most unexpected times. Although each unfortunate situation is unique and different, it remains extremely difficult for any individual to escape homelessness without the help of others. If escaping homelessness was easy, it would not be such an ongoing issue.

Homelessness in the U.S. Today

Today, over half a million people are experiencing homelessness. Not only does this mean some men, women, families, and children are living without the basic necessity of shelter, but these people are also being exposed to crime, violence, and extreme weather. The mental toll that homelessness takes on individuals is one that is hard to surpass, but citizens often fail to empathize with the individual. We commonly see an abundance of homeless people in a city as something that needs to be stopped or pushed somewhere else. There must be an appropriate solution that removes these people from their current situation but placing them in a new one with an opportunity for a better life. Without appropriate access to affordable housing because of new housing policies that have limited the number of available homes, there is no hope for there to be enough supply for the current demand. As much effort

as people have put into creating shelters and transitional housing, the unsheltered population continues to rise as of late.

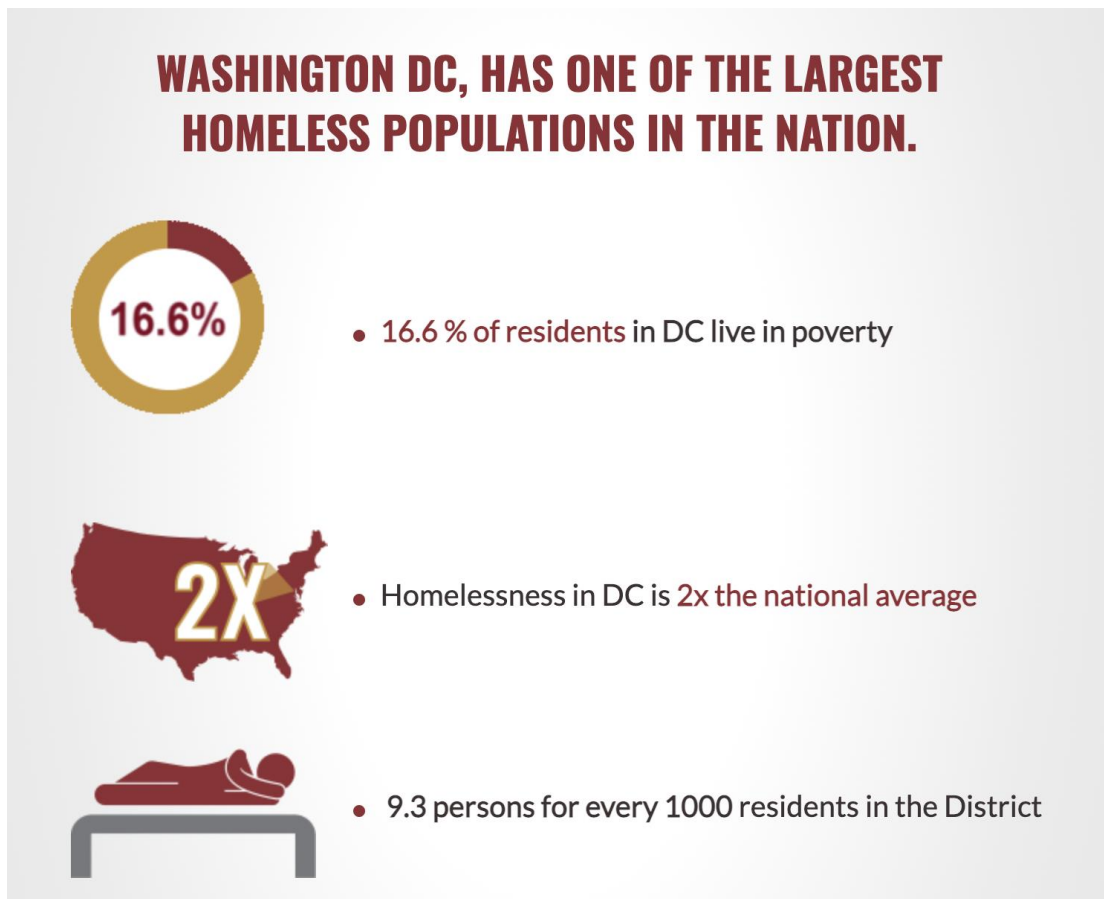


Figure 2: Washington, D.C. Homeless Population statistics by Central Union Mission

Chapter 2: The Beginnings of Homelessness in Washington, D.C. as a Social Problem

Context

As Washington, D.C. became the capital city in 1790, it also became a national center of politics and public information. Along with its rise as a well-known city, came a flood of homelessness that became a recognized social problem in the 1970s. Washington, D.C. is known as a center for national print information, along with having a dominant paper, the *Washington Post*, that has been associated with democratic and liberal politics. Because Washington is a stateless district, its city government actually has little influence on the federal government, but because the city is the seat of the federal government, it has a very stable economic government. Although Washington, D.C. has a stable economic environment, the city does not provide sufficient jobs for its less educated citizens. During the 1970s, Washington, D.C. was defined as a medium sized city that had few resources and no need to be economically remodeled. At the time, the city also had an abundance of abandoned housing with little interest from developers and few resources to upgrade them. All of these factors would influence those who confronted homelessness as a social problem and how the public and city perceived them.

History

With the rising of a new social problem of homelessness in Washington, D.C. came the rising of a new radical activist group called Community for Creative Non-Violence (CCNV). This group classified themselves as “Christian Anarchists” whose goal was to promote social justice and peace through prayer, service, and protest.”¹⁰

The group initially began to protest the Vietnam war, and then began a feeding program in 1972, then opened their homes as a homeless shelter in the winter for neighbors. Their work continued to help the homeless until that became their main focus. By 1977, they opened a free food store, started an open land trust, and found an abandoned building that they would begin negotiating with the city to renovate.

(FIGURE 3) They were mostly funded through private donations and hosted special events to spread the awareness of homelessness. The CCNV’s strategy to find short- and long-term housing solutions for the homeless was to press the city’s government and religious community. The group did whatever they could to receive funding for their mission.



Figure 3: CCNV's first homeless shelter built from an abandoned building

¹⁰ Cynthia J. Bogard, *Claimsmakers and Contexts in Early Construction of Homelessness: A Comparison of New York City and Washington, D.C.*” (Symbolic Interaction 24, no. 4, 2001)

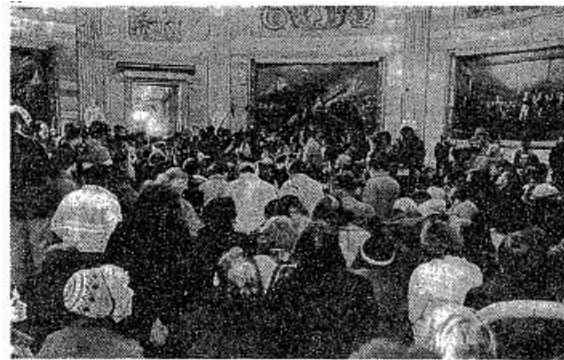
CCNV privately committed to “night hospitality” where they would drive to homeless encampments and convince the people to get driven to one of their hospitality houses, or one of the religious organization’s shelters. Thus, the short-term vision of the CCNV was to provide emergency, short-term housing for homeless individuals. The long-term goal of the group, however, was to raise enough money to renovate the abandoned building that the group had found now that the government had turned over the building to them as an urban land trust.

The group had begun calling out the government to take responsibility for the homeless, and by 1978 they started meeting with the director of the Department of Human Resources (DHR), Albert Russo. CCNV asked for a government funded emergency shelter due to the fact that their existing shelters with the religious community were always filled above capacity. The abundance of homeless people in need of shelter combined with the freezing temperatures of winter that had caused the death of a few homeless people led to the opening of a city-funded emergency shelter. Later that winter CCNV also successfully pressed the city for more beds by publicizing a planned “death watch” in front of the district building.¹¹ CCNV was able to get a lot of publicity for their cause and the city even opened another shelter, double the capacity. The group also pressured Holy Trinity church to reallocate a

¹¹ Cynthia J. Bogard, *Claimsmakers and Contexts in Early Construction of Homelessness: A Comparison of New York City and Washington, D.C.*” (Symbolic Interaction 24, no. 4, 2001)

portion of their \$350,000 building renovation fund to use in service of the homeless poor.¹² This effort of protests and fast was unsuccessful for CCNV.

As the next winter of 1978-79 approached, CCNV recognized that a lot of the people were not willing to submit to the regulations of the city shelters or the conversion attempts of the religious shelters. The people entering the shelters felt very uncomfortable and unmotivated to stay because of the hassle and control they were experiencing. Some of the homeless people then took it into their own hands and decided to set up a makeshift



Floor of the Capitol Rotunda is filled with protesters staging a sit-in for jobs, shelter.

162 Arrested in the Capitol In Protest for Food, Shelter

By Alfred E. Lewis
Washington Post Staff Writer

A total of 162 persons who were demonstrating on behalf of the nation's homeless and unemployed were arrested yesterday after they refused to leave the Capitol Rotunda.

William McDermott, general counsel of the U.S. Capitol Police, said 158 adults and four juveniles were charged with unlawful assembly and were being processed last night at Washington police stations. Rich Miller, of the Community for Creative Non-Violence (CCNV), said most of those arrested posted \$10 collateral bonds.

Among those arrested were Mitch Snyder, chief spokesman for the CCNV; the Rev. Fred Shuttlesworth of Cincinnati, a former aide to the Rev. Martin Luther King Jr., and the Rev. Philip Berrigan.

The CCNV had sponsored what it termed "The People's State of the

Union" protest, which began at about noon on the west lawn of the Capitol and attracted about 300 people, according to McDermott.

About 2 p.m., most of the demonstrators laid down their placards and bullhorns and went into the Capitol Rotunda, McDermott said.

There, the group sat down and "announced their intention not to leave until Congress declares a national state of emergency [concerning the homeless] and Congress takes some steps to address that reality," according to Miller.

Miller said that Capitol Police had been alerted to the group's sit-in plans. When the police and other security officials began to close off the entire Capitol in preparation for President Reagan's State of the Union address, about half of the demonstrators refused to leave, Miller said.

Those who did not post bond will be arraigned today, police said.

Figure 4: CCNV's Union Station sit-in

shelter in an unused portion of Union Station and occupy it until the city met their demands for more adequate and less regulated shelters. They made their intention and needs clear to the secretary of the building, but after nine days, the people were all forced out by government officials and police officers. The sit-in received a lot of publicity, and the CCNV used it as fuel to demand less shelter restrictions from

¹² Ibid.

Russo. The group presented evidence of shelter population decline and claimed this was a direct result of excessive regulation within the shelters and the invasive and belittling treatment of their occupants. The group ultimately wanted less restrictive housing because housing is a basic human right that people deserve without being questioned. Eventually, the DHR gave CCNV a shelter to run themselves and the group seemed to engage in less direct action during the following years.

CCNV had little “competition” in their focus on homelessness at the time, and any other parties that were helping with this social problem were typically reacting to the demands and actions of the group, or quietly provided service without attempting to influence the public. Thus, the group portrayed the homeless in their own way without influence- as unaccommodated people who although unsavory, deserved care. During this period of time, the CCNV portrayed the homeless as service-resistant and characterized them as alcoholics, or mentally or emotionally impaired, but also rational human beings capable of making decisions with their best interests in mind.

Media Influence in the Beginning of Homelessness as a Social Problem in Washington, D.C.

The *Washington Post* was the biggest media influence in D.C. in the 1970s, but they didn’t cover stories on the homeless until the latter part of the decade, which indicated it wasn’t a publicly known problem until then. The Post reported a little on the CCNV and their larger vision, but mostly focused on the night hospitality that the group provided. The beginning of the press coverage was the Post’s focus on the church sponsored shelters, in which the CCNV leader commented on his frustration

with the regulations and religious conversion attempts. The leader also touches on CCNV's message of treating the homeless with dignity and respect and the Post represented their message more as a demand for less regulated emergency shelters. The *Washington Post*, six local TV and press outlets, as well as four Catholic publications and the New York Time covered the Union Station sit-in, giving it the publicity, it needed to send a message.¹³ The Post even played a role in influencing the CCNV to use it as leverage for less restrictive housing from the DHR.



Figure 5: *Washington Post's* coverage of CCNV's efforts

While the *Washington Post* often displayed the homeless as alcoholics, lunatics, and service-resistant, they also portrayed them as individuals who have their own stories and reasoning for being in the situations that they are. For example, they told the story of one man who was harmless and while he did drink a bit of alcohol, had the right to be left alone. Another story covered a homeless man who was an alcoholic but befriended the fire department who donated clothes to him. A reporter

¹³ Cynthia J. Bogard, *Claimsmakers and Contexts in Early Construction of Homelessness: A Comparison of New York City and Washington, D.C.* " (Symbolic Interaction 24, no. 4, 2001)

even went undercover as a homeless man for two months and learned that most homeless people were down on their luck, wanted to maintain their dignity and independence, were highly resourceful and innovative, and tended to drink. Either way, the Post portrayed the homeless as social deviants that did not want help and suggested that they chose their lifestyle or were too stubborn to get help. Clearly, the Washington Post took a mixed position on homeless people, as they did on the CCNV. As the city had little to gain from challenging the problem of homelessness, its media also had little motivation to challenge the social problem.

Specific Context Relating to CCNV

The CCNV posed homelessness as a complex moral problem that the city should do more to help, but as a problem in which the public must take responsibility for. There was no political blame, and no one else to question the CCNV's proposal because of few economic resources to devote to this problem and few political interests to protect. Thus, CCNV remained the biggest and only claims maker for homelessness in Washington, D.C. for quite some time. Washington during the 1970s was also quite impoverished with no redevelopment intentions to influence others to act. As the CCNV also posed the homeless population as service resistant, a lot of people were discouraged and hesitant to help. After this classification, Mayor Berry even rescinded his earlier promise to aid the homeless as the city moved into the recession of the early 80s. At this point, the only intervention was sporadic acts by the city government. By the time CCNV had a culprit to blame because of the Reagan administration's tax cuts, NYC's version of homelessness gained the upper hand in the national understanding of the problem.

Chapter 3: Homelessness in Washington, D.C. Today

Concluding the Beginning of Homelessness as a Social Problem

As we begin to understand how Washington D.C. handles the homeless population today, we must first understand how they handled it from the time homelessness became a social problem in the 1970s to today. The 1970s were crucial in defining how the population perceived the homeless and how they chose to help. It set the stage for homelessness activists and shelters for the decades to come.

During the emergence of homelessness in the 1970s, there was a religious motivation behind framing homelessness as a civil rights and justice issue. The radical Catholic population of Washington, D.C. committed to fighting for peace and civil rights for their neighbors in need. Although the commitment of these people, and specifically the CCNV was to better the homeless, the religious aspect only seemed to harm their strength. The homeless shelters that pushed religion were far less successful, and the group couldn't even gain the support of the local Holy Trinity Church when asking them to use some of their church renovation funds for homeless shelters. The activists found much more success in excluding religion and simply advocating for rights and justice, and even convinced the city to fund and open several shelters between 1970 and 1980. This framing also led to the city relaxing its shelter regulations due to immoral search and seizures that homeless people were experiencing. Although there were reasons for viewing the homeless as different from "normal people," activists at the time felt that they still deserve equal treatment under

the law.¹⁴ Using this mindset, the CCNV in no way denied the personal issues and causes of homelessness, rather they embraced the frame that differences in the people does not mean a denial in basic rights. The only way that the activists could really make a difference would be from the support of the public and changing their perception of the homeless.

The Decades Leading Up to Homelessness Today

1975-1985

After John F. Kennedy became president, in 1963 his administration signed a bill that was meant to free those who are mentally ill and meant to spend their lives in mental institutions and mainstream them into society. The goal was to improve the welfare of these people by providing community-based care instead. Unfortunately, the bill caused a lot of these patients more harm than good because they were largely unsupervised and became homeless or imprisoned, accounting for a large portion of the homeless population in D.C. over the next decade. Once Lyndon B. Johnson became president, he indirectly aided the homeless by multiple anti-poverty enactments such as, employment and training programs, expanding housing subsidies, and food stamps. After the Vietnam war, the number of homeless men increased exponentially because of the returned veterans struggling with trauma and drug addiction. This era also marks the first supreme court involvement when they criminalized vagrancy and required a year of residency before a person could receive welfare.

¹⁴ Cynthia J. Bogard, *Claimsmakers and Contexts in Early Construction of Homelessness: A Comparison of New York City and Washington, D.C.* " (Symbolic Interaction 24, no. 4, 2001)

As a deep economic recession began alongside the growing presence of crack and heroin, the homeless population was increasing rapidly in the 1980s. The decrease in government spending for the poor and a decline in affordable housing pushed many people on the poverty line over the edge. As the late 1980s approached, federal support for subsidized housing dropped by around \$25 billion-, and lower-income housing fell victim to it. Gentrification started to consume parts of Washington, D.C., replacing the affordable housing with expensive condos and co-ops.¹⁵ Now, the amount of single room occupancy units which are key to helping decrease homelessness have decreased drastically. Demographically, many more women and families are falling victim to homelessness during this time period.

From the mid to late 1980s was a period of conflict between the government and advocates for homeless people. In 1984, advocates tried to determine the number of homeless people to influence the appropriation of funds, and HUD challenged the estimated 3 million people and rebutted it with a much lower estimate of 250,000 people. This discrepancy shone a spotlight on the increasing problem of homelessness and lack of funds. The year of 1984 also marked Washington, D.C as the first legislative body to grant voting rights to the homeless. This year was also monumental for the main advocacy group, CCNV, as they occupied an abandoned federal building as a shelter, becoming the largest shelter in the United States with over 1,300 beds. The CCNV were undoubtedly the most active in tackling homelessness, getting Ronald Reagan to provide funds for their new shelter, and

¹⁵ laI-Majken Grinderslev, *The History of Homelessness in Washington, DC: Part I, 1975-1985* (Street Sense Media. February 15, 2005)

initiating a push in legislation that gives homeless people the right to shelter on demand, called initiative 17. The CCNV was able to use their “celebrity” leader, Mitch Snyder, to make money on his publicity campaign for the organization’s goals. While the most publicized, CCNV was not the only organization advocating for the homeless in Washington, D.C. Other organizations like the Olive Branch Community, So Others Might Eat (SOME), and the National Coalition for the Homeless were also working hard to advocate for the poor and homeless.

Reagan Agrees to Refurbish Homeless Shelter

Snyder Ends Hunger Strike

By Sandra G. Boodman
Washington Post Staff Writer

The Reagan administration yesterday agreed to renovate the squalid 800-bed shelter for the homeless in downtown Washington run by the Community for Creative Non-Violence, ending a 51-day hunger strike by Mitch Snyder, the group's leader.

Snyder, who had threatened to starve himself to death unless the administration agreed to spend \$5 million to repair the shelter, lost more than 60 pounds during his fast.

He was rushed by ambulance to Howard University Hospital at 3 p.m., shortly after a bedside visit by the chairman of a federal task force on the homeless and a telephone call from Health and Human Services Secretary Margaret M. Heckler informing him that President Reagan had personally approved the agreement hours earlier while en route to a campaign stop aboard Air Force One.

According to a statement by Heckler, the administration pledges to turn the decaying, vermin-infested facility into a “model physical shelter.”

See SNYDER, A17, Col. 1



A supporter grasps hand of Mitch Snyder after receiving word that administration would repair shelter.

Figure 6: CCNV's leader Mitch Snyder uses his publicity to his advantage

The heart of homelessness advocacy lies in the 1970s and 1980s, noted as one of the only things to make a lot of progress during the Reagan administration.¹⁶ This decade was crucial in framing the mindset of advocating for the homeless, and how the public perceived them. As time went on, people became so used to homeless people, and in Washington, D.C., it became part of their everyday lives, so it no longer had a spotlight for advocates. Just because something becomes “normal,” does

¹⁶ Chantal-Majken Grinderslev, *The History of Homelessness in Washington, DC: Part I, 1975-1985* (Street Sense Media. February 15, 2005)

not mean that we shouldn't care about it, so we must look at this period of time from 1975-1985 as a model of how we can get things done and support our homeless population to the best of our ability.

1985-1994

The period of time between 1985 and 1994 was marked by advocates holding the government accountable for the legislation they passed to help the homeless. As people felt the government's intervention in the issue was sporadic and tardy, they took the district to court to prove it. The issue of homelessness began to be recognized nationally, while other disappointments and tragedy in its advocacy followed.

More publicity was brought to the homeless in the District of Columbia in 1989 with the Housing Now! march and rally that gathered about 200,000 people, multiple celebrities, and about 25,000 homeless people to support the cause. With this peak, came the legislation, Initiative 17 that was passed in 1984, repealed 6 years later and rarely enforced, leading to advocacy lawsuits against the district government to comply with the law. The heavy focus on the quality of shelter was heavily supported by advocates and a handful of lawyers were even doing pro bono work for homeless people who have experienced government negligence of their own legislation. One specific case, *Atchison v. Barry*, the court claimed that the district-run shelters were "virtual hell-holes," and extremely unsanitary, causing lice, mites, and other parasites.¹⁷ The failure of the district to comply with the decree in this case

¹⁷ Daniel Horner, *The History of Homelessness in Washington, DC: Part II, 1985-1994* (Street Sense Media. March 15, 2005)

led to a \$4 million fine. Other cases led the district to withdraw from the emergency shelter program so that they could no longer be sued for failing to meet federal requirements. Shortly after, the founder of the CCNV, Mitch Snyder, was found dead by suicide in one of his organization's shelters. Not only was Snyder a frontier of homelessness advocacy in the District of Columbia, but he also was a known advocate nationally.

The D.C. government was now getting a negative reputation as neglectful in administering social services. However, homelessness was starting to be recognized as a national crisis, and both parties worked to back Stewart B. McKinney Homeless Assistance Act in 1987. The purpose of this act is to “establish an Interagency Council on the Homeless, use public resources in a more coordinated manner to meet the needs of the homeless; and provide program funds for the homeless, with special emphasis on elderly persons, handicapped persons, families with children, Native Americans, and veterans”.¹⁸ The act essentially “authorized federal funding for homeless people's health care, education, transitional housing, and other needs”.¹⁹ Although the act is funded and remains as the only major federal legislation addressing homelessness, it seems to lack focus on long term strategies that secure and maintain the housing created for the homeless.²⁰ There must be additional legislation or funding to focus on homelessness long term.

This period of time was undoubtedly one of frustration for advocates, but you can start to see a shift towards more non-traditional approaches that we saw in the

¹⁸ *H.R.558 - Stewart B. McKinney Homeless Assistance Act*. (Congress.gov. February 15, 2005.)

¹⁹ Daniel Horner, *The History of Homelessness in Washington, DC: Part II, 1985-1994* (Street Sense Media. March 15, 2005)

²⁰ *Ibid.*

1970s. Advocates of the homeless population must not be discouraged by the district's government, instead they must hold the government accountable and take matters into their own hands as the late Mitch Snyder exemplified.

1994-Today

The issue of homelessness from its emergence as a social problem until the 1990s has largely been seen as simply a housing issue. Throughout the 1990s, Washington, D.C. mainly focused on emergency shelters that provided shelter only throughout the night. The lack of long-term services and full-time facilities represents the false perception of homelessness as a housing issue and brings out the need for a holistic approach that helps homeless people long term.

Finally, in the mid 1990s, under the Clinton administration, HUD made homelessness a priority on a national level and in Washington, D.C. specifically. One particular holistic approach is a "continuum of care" that provides services for the individual's well-being beyond shelter. In order to test this system before applying it on a federal level, the Clinton administration awarded six areas, including Washington, D.C., a Cooperative Homeless Initiative Grant in order to implement it. The district started to change their perception of homelessness after the D.C. Initiative that pledged \$20 million to a more integrated system of long-term care that connects shelters, medical resources, and other support services.²¹ This new approach is essentially a continuum of care that focuses more on the aspects of homelessness that go beyond being without a home, by providing services such as job training, drug

²¹ *The History of Homelessness in Washington, DC: Part III, 1994-Present* (Street Sense Media. April 15, 2005)

treatment, mental health services and domestic violence counseling.²² Although the system that was implemented with the D.C. initiative was successful in its organization as a continuum of care, it did not address the housing crisis and did little to create increased service facilities.²³ Also, some statistics even suggested that this initiative did not cause a decrease in homelessness at the time.

The Bush administration continued the effort to prioritize homeless programs. Bush issued an executive order that allocates \$4 billion to faith-based and other community service organizations. This means religious groups are able to use federal funds towards public service programs. In 2002, the HUD organization Interagency Council on Homelessness (ICH) developed programs that delivered housing to homeless families. Shortly after, the ICH created a partnership with the Department of Veterans Affairs and the Department of Health and Human Services to create permanent housing and services to the homeless. By 2004, D.C. joined twenty other cities in a 10-year plan to end homelessness titled “Homeless No More.” The goals of this plan were to use local and federal resources for homeless prevention, develop 6,000 more affordable housing units by 2014, and coordinate services for the continuum of care of the homeless. Although this plan had good intentions, things like a decrease in HUD’s budget, and the closing of several shelters due to high closing costs impeded its success.

²² Ibid.

²³ Ibid.

Conclusion

Understanding how homelessness has been viewed, helped, and prevented in the decades leading up today is crucial to understanding how we handle it, how the government handles it, and how the public perceives it today. As it appears, from the 1970s and forward, as soon as homelessness advocates would take two steps forward in terms of progress, the government would force them to take one step back. There was an increasing tension between the government and the advocates that forced the advocates to find different ways to get noticed and get what they wanted. The 1970s were the most foundational years where advocates were ruthless in getting what they wanted from the government. As soon as laws, regulations and stigmas come into place, the jobs of the advocates become more difficult.

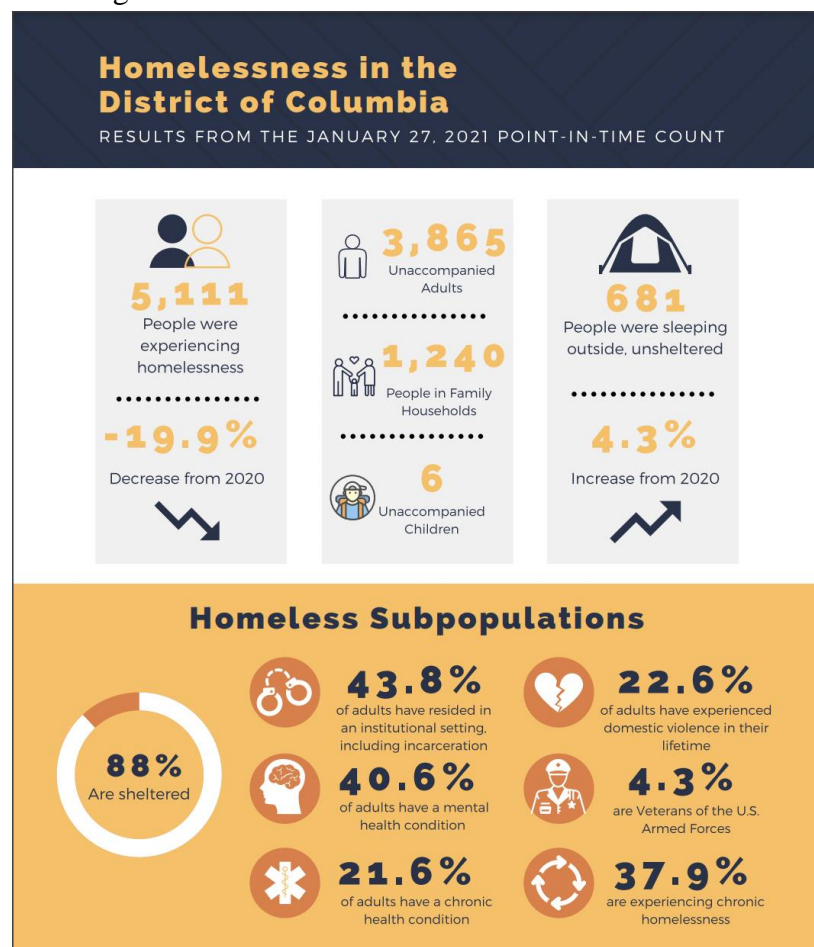


Figure 7: 2021 Point in Time Homelessness Fact Sheet by The Community Partnership For the Prevention of Homelessness

Chapter 4: Current Solutions of Homelessness in Washington, D.C.

Introduction

Because Washington, D.C is the national center of politics, all eyes are watching as it becomes an example of how to deal with important social problems. Therefore, efforts dealing with an issue like homelessness has extreme importance to the nation. This chapter will focus on current and past solutions in Washington, D.C and the rest of the United States.

Current Homelessness in D.C.

There are many increasing issues leading to more difficulty in solving the homelessness in D.C. and in the nation, including higher costs and a housing shortage. There is a shortage of affordable housing that has decreased due to housing being flipped and areas being gentrified. However, many architects and planners have been working hard to introduce more affordable housing and it seems to be “trending” in the world of architecture and urban planning, which is a very positive sign for helping homelessness. Other external factors such as inflation and redevelopment are pushing people off the edge of poverty into homelessness.

In the past, most cities have dealt with homelessness using emergency shelters and other short-term solutions that simply aid the homeless momentarily, instead of taking a long-term approach. Cities were often experiencing religious groups taking

the lead in advocating for the homeless and providing them with basic needs with a neighborly mindset. The government often is not directly involved in solutions to homelessness, rather they provide funding, or create laws to discourage homeless encampments. We have seen throughout many cities and Washington, D.C. specifically, encampments in frequently used public space. The citizens of the city have grown accustomed to the frequency of homelessness, and some have tried very hard to remove these people from their cities. Local governments have tried forcing people out and destroying encampments, which realistically just moves these people to a different location. The only real solutions lie in creating long term solutions. These solutions must focus on making these individuals not homeless.



Figure 8: Homeless encampments have become common in Washington, D.C.

A never-ending cycle of homelessness occurs when we don't address the root causes of homelessness. Many people have extremely personal circumstances and reasons for becoming homeless that are caused by our society, and in turn, these

people become victims of the system. When we give handouts or extremely short-term solutions to the homeless, a dependency on the short-term solutions becomes apparent. Although it seems hopeless because our short-term help and solutions to these problems end up hurting them long term, we can break the cycle by getting to the root of the problem. This includes removing barriers to foundational services like education and housing, in order to mitigate homelessness, and provide resources and opportunities that could give these people a fresh start.

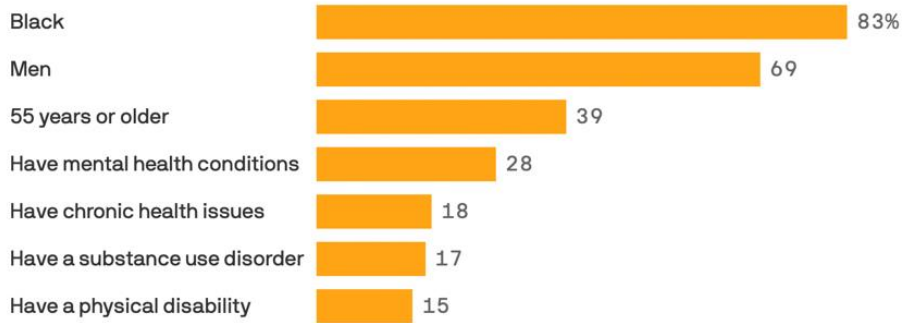
Current Solutions

Homeward DC was an initiative set forth by the city in 2015 to reduce homelessness in the city by 65 percent by the end of 2020. Some other goals of Homeward D.C included ending homelessness among veterans and ending chronic homelessness among families and adults. The goal was not entirely accomplished, and the impact of COVID-19 took a toll on its success. Therefore, the city worked to come up with Homeward 2.0 in order to accomplish some of things that Homeward DC could not and also become more specific in its goals. Some of Homeward 2.0's guiding principles include recognizing racism as a root cause of homelessness and acknowledging that homelessness is often caused by the failure of policy as we've seen over and over again in the past, not by the failure of the people. This plan wants to improve Homeward DC's heavy focus on reducing homelessness of families by emphasizing the support of homeless individuals. Also, the people experiencing

homelessness in Washington, D.C. are aging and require more support, so the plan supports the city investing in permanent housing on-site.

Demographics of single adults experiencing homelessness in D.C.

2022 point-in-time count



Data: [The Community Partnership for the Prevention of Homelessness](#). Chart: Axios Visuals

Figure 9: 2022 PIT Statistics of adults experiencing homelessness

According to annual counts of homelessness, about 39% of homeless people are aged 55 years and older.²⁴ The fact that Washington, D.C.'s homeless population is aging, makes the problems more urgent, and the city must race to find solutions. Although Homeward 2.0 plans on ending homelessness by 2025, the city is still very behind in helping individuals find housing. There is however, a promising housing model that holds a lot of promise for the homeless and homeless seniors. This model is called PEP-V and was tested during the pandemic and could realistically be catered to any demographic, specifically to seniors. The people in the program with medical vulnerability or no housing were placed into hotels and received case management and follow ups from the department of human services if they needed any health aid. These people were also given meals and security, and eventually moved into their

²⁴ Chelsea Cirruzo. *D.C. Just Released The Next Phase Of Its Plan To End Homelessness. Here's What's In It* (dcist.com. July 13, 2021)

own homes. Something so simple was able to help so many people and there is a lot of potential in programs like this in finding homeless people permanent housing. There is an extreme need to come up with a program that could be a long-term solution, and an approach like this could be used to build up to finding permanent housing.

What Can We Do?

In order to steadily increase the homeless population, we must focus on the most vulnerable groups and understand how they can best be helped. There must be a focus on the wellbeing of the individual, and through a continuum of care that provides multiple services, opportunities and a new life can be possible for these people. To know how to target the individual, one must understand the characteristics and experiences that affect a person's vulnerability. Targeting the most vulnerable will also help target all individuals experiencing homelessness. These solutions go well beyond providing emergency shelter, they must be provided services that assist with things like mental illness, physical disabilities, job training etc., and that is what Washington, D.C. 's concept of continuum of care aims to do. Continuum of care intends to coordinate all the services around the district that could be provided to the individual, so a complete, well-rounded, and long-term solution is given to them. Transitional housing for vulnerable people will also reduce their exposure to dehumanization that they may experience as a homeless person. We must treat each individual with dignity and respect, while giving them their basic needs and rights that everyone deserves.

Planners can play an important role in advocating for the homeless population. Planners are necessary in finding sites that need or could be used as facilities for people experiencing homelessness; these facilities could include shelters, transitional housing, or wellness facilities that focus on rehabilitation, therapy, and a new life for the individual. These people could also help combat community resistance that we often see with these types of facilities by educating the people of the neighborhood, negotiating with them, or perhaps entirely changing their perception of the homeless. By seeing and recognizing each homeless person as an individual with a story, hardships and unfortunate consequences, people are able to show more empathy and may be inclined to help advocate for them. Planners can then link the needs of the individuals experiencing homelessness such as, housing, job training, counseling, financial counseling, and medical care in order to create a more holistic system of care. If we approach the problem differently than ever before and focus on the individual and the vulnerable, we can be more successful in helping the homeless.

Houston, Texas

Houston, Texas has truly set the precedent for reducing homelessness in the city, with an astounding reduction in homelessness by 63 percent since 2011.²⁵ The initiative simply started by going to encampments and offering occupants to move directly into one-bedroom apartments instead of sending them to a shelter, fining them for vagrancy, citing them for trespassing, or forcing them to leave. Houston as a city did more than twice as well than the rest of the entire country, which means there

²⁵ Kimmelman, Michael Kimmelman, *How Houston Moved 25,000 People From the Streets Into Homes of Their Own* (The New York Times. June 14, 2022)

is something to learn from them. There is now a streamline process for getting these people into housing that doesn't discourage them from waiting as it did before with processes taking almost two years. The "secret recipe" Houston has used is teaming with county agencies, service providers, corporations, and nonprofits to go all in on a "housing first" practice that includes moving people directly into housing from the streets without any catch such as, creating a rehabilitation program first. The logic behind the program is "When you're drowning, it doesn't help if your rescuer insists you learn to swim before returning you to shore. You can address your



Figure 10: Outreach workers interviewing people in encampments by Christopher Lee for the New York Times

issues once you're on land. Or not."²⁶ And perhaps this solution is not something that will work in Washington, D.C., but it seems to be worth trying while

²⁶ Ibid.

manipulating it to fit the current systems in the district. If successful, it could be applied to other cities.

Conclusions

It is crucial to understand past solutions to homelessness in order to understand what is successful and what is not. If we keep making the same mistakes over and over, we will never make the necessary progress to end homelessness. It is important to also understand homeless people on an individual level to gain empathy for the cause. Targeting the most vulnerable groups will have its own ripple effect on all homeless people. Changing their foundation and resources while providing them with basic needs that they deserve is a step in the right direction. We must remain optimistic and find long term solutions that create a city that is kind to its occupants and focuses on the wellbeing of the individual.

Chapter 5: Site Selection

The Site I selected was between the U street corridor of Washington, D.C., and Howard University in Shaw (Illustration 1). I chose this site because of the rich culture, art and general acceptance and openness in the area. The other buildings on site appear to be abandoned, and a McDonald's sits on the northern part of the site (Illustration 2). The rest of the site is a parking lot.

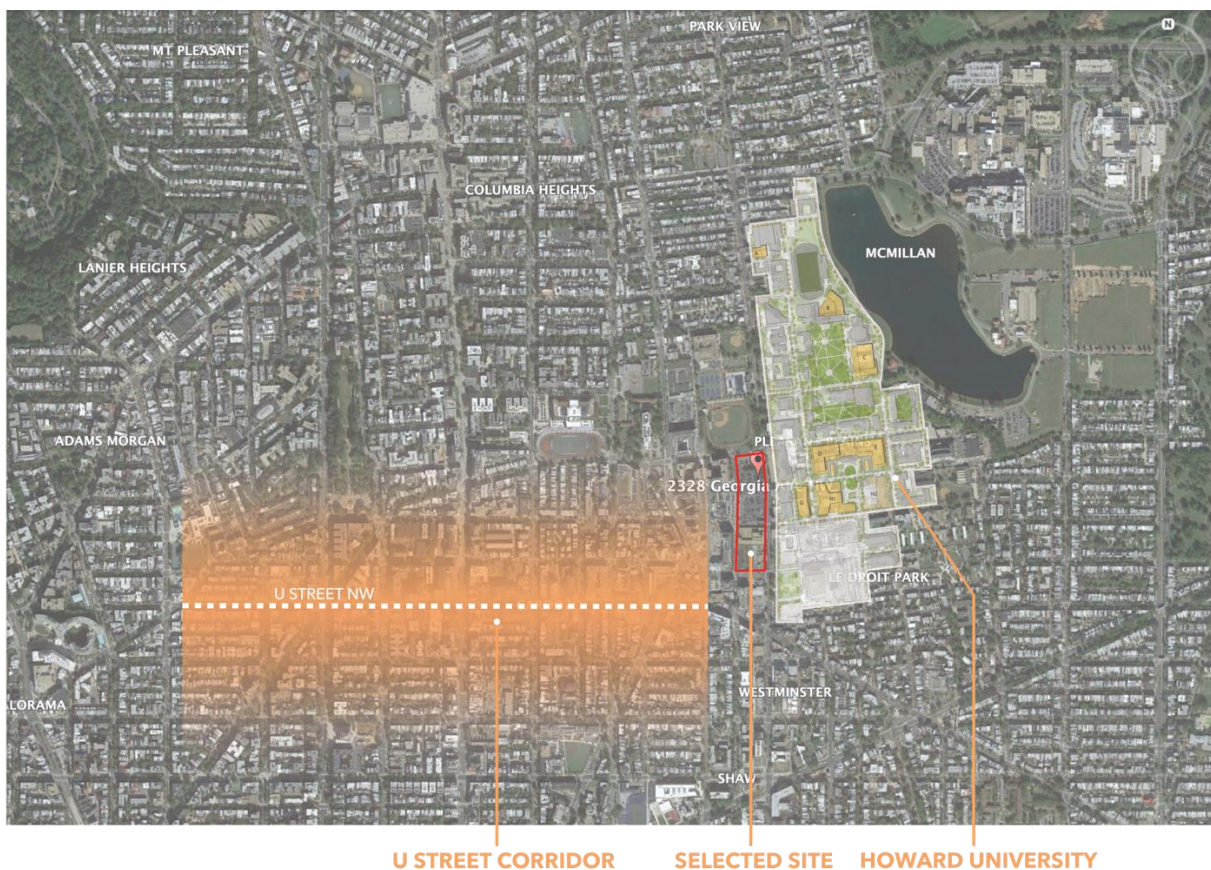


Illustration 1: Site Selection between U Street corridor and Howard University

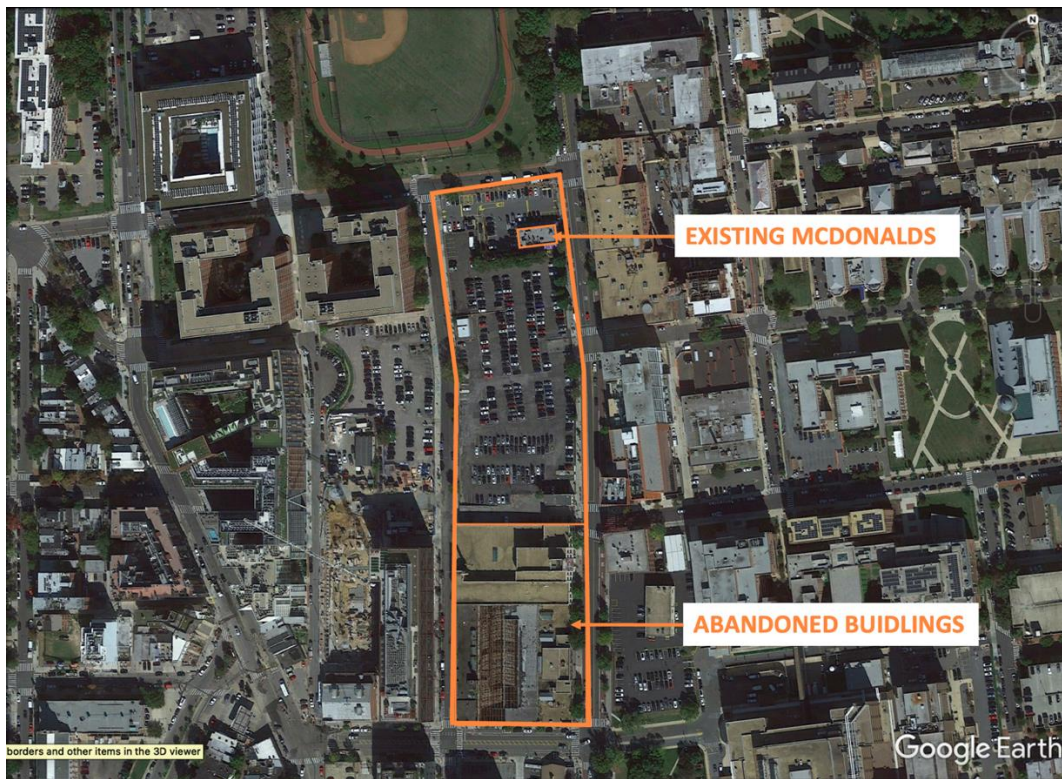


Illustration 2: Site selection zoomed in

The site is about 270, 000 square feet, large enough for a small-scale urban design intervention (Illustration 3). The site is surrounded by Georgia Avenue, W Street, Barry Place, and 8th street.

SITE

TOTAL SQFT: ~270,256

Development Standards							
	Floor Area Ratio (max.)	Height (ft.)	Penthouse Height (ft.)/Stories ¹	Lot Occupancy (percentage)	Rear Yard (ft.)	Side Yard (ft.)	Green Area Ratio
MU-10	6.0	90	20	75	A minimum rear yard of 2.5 in. per 1 ft. of vertical distance from the mean finished grade at the middle of the rear of the structure to the highest point of the main roof or parapet wall, but not less than twelve feet (12 ft.) ²	No side setback is required; however, if a side setback is provided it shall be at least 2 in. wide for each 1 ft. of height of building but no less than 5 ft. ³	0.20
	7.2 (IZ)	100 (IZ)	1 plus mezzanine; Second story permitted for penthouse mechanical space	100 (IZ)			
	3.0 (non-residential)	N/A				8 ft. for a single-family detached or semi-detached dwelling	
Zoning Regulation Reference							
Subtitle G, Chapter 4							

Illustration 3: Site square footage and zoning

A benefit to choosing this site is that it creates a public, private partnership with Howard University, because the University owns the site, we can utilize Howard university resources, staff, students to supplement the operation of the wellness facility.

Chapter 6: Site Analysis

U Street

Beginning of U Street

U Street, Washington, D.C., is a truly unique site because of its rich history and establishment as a black cultural center. The U Street we know now, used to be a rural area, and when streetcars were able to reach this part of the district, development began. In the early 1870s, a district-wide public improvement project led to the paving of streets, planting of trees, and implementation of water and sewer lines.

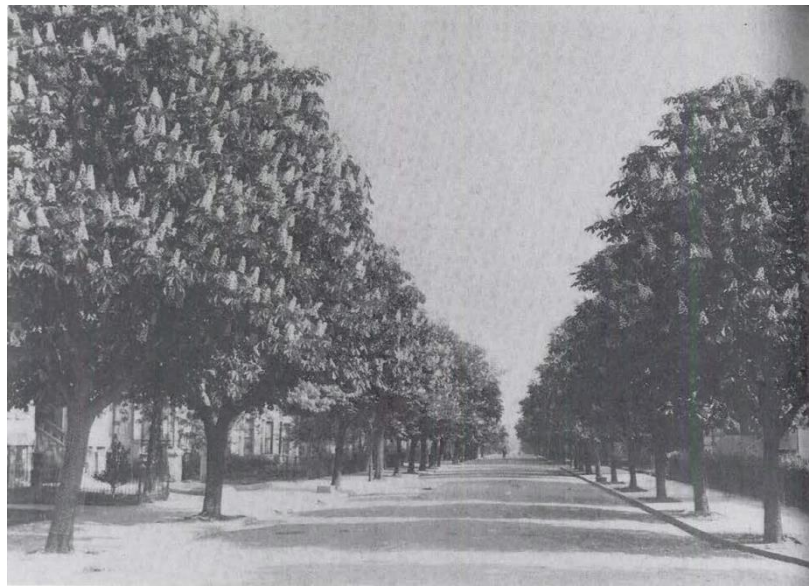


Figure 11: U Street after the district-wide public improvement project

Between 1890 and 1910 freedmen and white people were moving to the area. Former slaves and newly freed men came to this rural part of D.C. mainly because they were not wanted in the city. Upper class white people were moving to the area because of the overcrowding caused by the civil war population boom. This mix in population was the first to establish the varied culture of U Street, where values and traditions are exchanged.

After the Jim Crow era of segregation, U Street transitioned into a predominantly black neighborhood, becoming the home to Washington, D.C.'s growing community of educated, middle class African Americans.²⁷ In the early 20th century, black business, institutions, and gathering places were established, and by 1920, around 300 black-owned businesses on U Street existed. In 1920, Washington, D.C had the largest urban African American community in the nation, and U street was its heart and soul.²⁸ U Street became the home to many black leaders in science, education, religion, arts, law, medicine, and many other disciplines. It also cannot be ignored that by 1960, 50% of these pillars in the black community received their education at Howard University; the predominantly black university that sits close to the U Street corridor.²⁹ Also notably, was the abundance of lawyers- approximately 96% trained at Howard University, who helped majorly with leadership and strategies during the civil right movement.³⁰

Not only did middle and upper-class African Americans reside near U street, but also many poorer blacks, and those who have immigrated from the South. Although the differences in education, wealth, and skin tone caused conflict among the residents of U Street, their differences also helped the area blossom into the music and art center that it remains today. The area was a mix of people from all different walks of life, but friendships and families began and were strengthened by the deep sense of community that existed in the churches, schools, businesses, and other local spots of Shaw- the area of D.C. that U Street exists in. The area was eventually

²⁷ Blair A Ruble, *Washington's U Street: A Biography* (DC History Center, 2011)

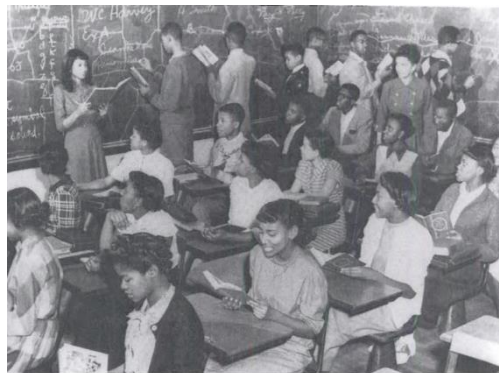
²⁸ Kathryn S. Smith, *Remembering U Street* (Washington History 9, no. 2, 1997) 29.

²⁹ Ibid.

³⁰ Ibid.

nicknamed the “black Broadway” because it was now home to jazz music, theaters, and institutions like Howard University.³¹ The night life of U Street became vibrant and well known because of its first run movies theaters, nightclubs, ballrooms, and restaurants. The Howard Theatre, built in 1910, was the first theater for black audiences and entertainers in the country, and attracted crowds lined down the block.³² All of these places for the community also supported individuals and groups in training and providing opportunities. This sense of community filled with so much support, made the residents feel valued and safe.

Once desegregation hit the district around 1950 and blacks were free to live wherever, many of U Street’s middle-class residents moved into suburbs and towards the upper Northwest parts of Washington, D.C. During this time, many poor blacks



Figures 12- 15: U Street thriving as a black cultural center for business, music, and education.

³¹ Blair A Ruble, *Washington’s U Street: A Biography* (DC History Center, 2011)

³² Kathryn S. Smith, *Remembering U Street* (Washington History 9, no. 2, 1997) 34.

were now moving to U Street, many of those who were displaced by the revitalization of Southwest D.C.³³ U Street officially went into decline after the assassination of Martin Luther King Jr., sparking riots in the district that left buildings in the area in disuse and disrepair. Among the disrepair of the area, was issues of poverty and joblessness of the residents, a crack cocaine epidemic, and seemingly endless metro construction that left this once vibrant area as a slum.

Redevelopment and Demographic Change

After the once vibrant U Street hit its decline after 1968, its metro station finally opened, attracting new generations of residents. This gave the residents hope of revitalization, but as we've come to know from the urban revitalization movement of minority communities across the United States, it brought a huge threat of gentrification. The community along with the government attempted to redevelop the area starting in 1986 with the Reeves center, which houses city agencies and includes an urban plaza for community activities like a weekly farmer's market. A more transit-oriented site with the new metro and bus stops, as well as capital bikeshare locations also increased accessibility to U Street. In 1998, HUD granted funds to "Remembering U Street," which included marking historic properties and improving storefront facades along U street. More housing efforts have also been made to improve existing housing and create more affordable housing, and housing that serves senior citizens.

³³ Blair A Ruble, *Washington's U Street: A Biography* (DC History Center, 2011)

Redevelopment continued into the early 2000s, and although these changes have really improved the area and returned the corridor's vibrancy, it has also led to gentrification in parts of the area. The area is no longer predominantly black, and residents are scared that this will cause U Street to lose the rich culture that was created. Also, mixed use development along the street has added a lot of housing units, which has increased the cost of living and the population drastically. The original residents have been discouraged by the gentrification, but efforts are being made to remember and embrace the history of U Street as a black cultural center through things like street art and exhibits.

Local Art, Style, and Craft

The rich culture of U Street is accurately represented through that abundance of street art made of murals and graffiti along the corridor. Most of the artists choose to commemorate the history and achievements of the black community, while others designed for the vibrancy of the area or other abstract stances. tributes to historical black figures of the U.S. and U Street specifically, remind the residents of those that made the area what it is today. There also exists an exhibit near 13th and U Street that is part of the "Remembering U Street" grant to display the history of the site.



Figure 16: Street art on U street

The industry on site seems to revolve around the shopping district during the day, and the night club, bar, and restaurant scene at night. So, mostly small business and food services are the main source of income and spending for residents.

Something that also seems important to the residents is the local farmers market that takes place right in front of the Reeves Center weekly. This is where residents can purchase vegetables, meats, dairy, and other local sourced products. The emphasis on



Figure 17: Famous restaurant, Ben's Chili Bowl on U Street

these industries is something that could be embraced and capitalized on in the future, in order to further benefit the community.

Howard University Area

Establishment of Howard University

Howard University is a Historically Black College and University (HBCU) that offers undergraduate, graduate, and professional programs, focusing on liberal arts and science-based curriculums. The university was founded in 1867, only two years after the civil war, in order to secure the adjustment of former slaves entering into American society. The founders believed that all men are created equal and that means that everyone should have equal opportunities to develop their fullest capacities.³⁴ This means that the founders of the University believed that former slaves and their children should be educated like everyone else, and the advantage of higher education should be made available to everyone, regardless of race and sex. The University and its students faced the hard period of black existence and education after the civil war together.

The University of Howard was first proposed in 1866, by Reverend Benjamin F. Morris among others, as a theological seminary for training colored preachers to serve among the freedmen. The first proposal was named “Howard Theological Seminary” after the congregationalist, General Oliver Otis Howard, who was a

³⁴ Rayford W. Logan, *Howard University: The First Hundred Years, 1867-1967* (NYU Press, 1969) vii.

prominent figure in the promotion of the welfare of slaves and freedmen. General Howard also was a religious, civil war hero, who led the Freedmen's bureau and had interest in providing education opportunities to freedmen.³⁵ Shortly after the first proposal, there was a new proposal called "The Howard Normal and Theological Institute for the Education of Teachers and Preachers," that also focused on the education of teachers. This proposal came about because the founders believed it had a higher chance to obtain congressional approval than if it was just a seminary. Shortly after its establishment, the founders decided to change the name to Howard University, which would be a liberal arts college and university. They believed that this was the perfect opportunity to transition the institution into one of higher education for predominantly colored students. This was one of the most remarkable shifts of goals in American Education, and now the University remains successful and predominantly black. The reason why Howard University was such a big deal was because predominantly black higher education facilities were very rare, especially during the Jim Crow era and times of extreme segregation. The University brought a large black population to the U Street corridor and continued to educate its residents through the growth of the middle-class black community.

Howard University Master Plan

The most current University Master Plan is an attempt to meet the growing needs of the Science, art, business, and law programs. More specifically, the University needs to enable leadership that allows the students to take advantage of

³⁵ Rayford W. Logan, *Howard University: The First Hundred Years, 1867-1967* (NYU Press, 1969) 13.

opportunities in the work economy. The University also needs to enrich their campus experience by creating experiential learning and improving campus life and activities. Lastly, the University want to optimize land use, program consolidation, and diversify revenue streams in order to improve their efficiency and financial stability.³⁶ The University also has specific goals for the new master plan, including supporting the academic mission by creating physical resources that support education, research, health, and creativity. Another goal of the master plan is to improve the quality of life for all affiliates to the University, by providing a variety of spaces that allow the campus community to relax, study, socialize, network, and learn. The new plan also aims to advance sustainable urban design by creating balanced density, mixed use buildings while enhancing the campus and surrounding community. The plan also attempts to enhance the public realm by enhancing and maintaining cultural landscapes that have meaning, while creating new public spaces. Another goal of the master plan is to enhance the physical access and connectivity by strengthening the network of walkable spaces, and bicycle connections. Lastly, the new master plan will support interdisciplinary academics and research by creating environments that spur interdisciplinary study and research.

³⁶ *Howard University Central Campus Master Plan* (realestate.howard.edu, 2020.)



Figure 18: proposed Campus master plan for Howard University, 2020

Chapter 7: Precedent's Analysis

Homeless Shelter: NoHo Bridge Housing Shelter

Architect:

Location: San Fernando Valley, California

Date Completed:



Figure 19: NoHo Bridge Housing shelter cubby room

THE NEED

There are still more than 7,000 people who will sleep on the streets tonight in the San Fernando Valley. This is why we are working with the City of LA to open an 85-bed Bridge shelter in North Hollywood.

WHAT IS BRIDGE HOUSING?

Temporary housing offering service-enriched programs to help those experiencing homelessness to rebuild their lives, find a job, and move off the streets permanently.

SERVICES PROVIDED

In addition to housing, hot meals, showers, and laundry services, the site will also offer Case Management, Mental Health Services, Substance Abuse Treatment, and more permanent Housing Placement services.



Figure 20: What is Bridge Housing?

NoHo Bridge Housing Shelter is a year-round housing shelter through a public, private, corporate partnership that aims to provide transitional housing for the homeless in San Fernando Valley. Bridge housing is temporary housing that offers services to help the homeless rebuild their lives, find jobs, and move into permanent housing. The 15,000 square foot facility was also planned to be the least expensive facility of its kind through planning and construction that will serve 85 people at a time with a bed that comes with a nightstand and a storage cubby. This includes 60 of these “cubicle concept” bedrooms for men, and 25 for women based on homeless demographics in the area. Beyond sleeping, the shelter also provides showers and meals for each person, as well as a large dining and multipurpose space, offices for

services, a computer learning center, a food prep room and pantry, group therapy rooms, an outdoor patio, and space for a dog run. The facility provides long term services besides the basic needs of the individual, including substance abuse treatment, case management, mental health services, and permanent housing placement.³⁷ The services provided aim to help these people past their temporary stay by getting them back on their feet by getting help recovering from what is holding them back or what made them homeless in the first place, lining up a job and source of income, and helping them get placed in permanent housing. The NoHo Bridge Shelter's goal is to assist over 400 people each year through the facility.

³⁷ *The First Year-Round Bridge Housing Shelter in San Fernando Valley* (Hope of the Valley Rescue Mission, 2022).

Rehab Facilities

Recovery Village at Cherry Hill

Architect: Spiezle Architects

Location: Cherry Hill, New Jersey



Figure 21: open room at Recovery Village Cherry Hill



Figure 22: fitness room at Recovery Village Cherry Hill

The Recovery Village at Cherry Hill is an inpatient substance abuse treatment facility that offers initial detox and patient aftercare. The campus includes a 47,000 square foot treatment building with residential services, and a 12,000 square foot fitness and wellness facility. The program within the building includes, treatment and recovery, therapy, patient rooms, gaming, family meeting, outdoor courtyard, and sports and fitness space. The facility has on-site chefs and nutritionists, and hotel-like accommodations with private bathrooms.³⁸ The goal of the facility is to create a healthy and calm environment, where patients can receive treatment in their own way and those helping have knowledge on addiction from their own life experience. The multitude of services allows each patient to get the specific care they need, including

³⁸ *Drug and Alcohol Rehab in New Jersey - Addiction Treatment Center and Detox* (The Recovery Village Cherry Hill at Cooper, October 11, 2022)

one on one counseling, psychiatric specialist, interventionist, group therapy counselors, eating disorder specialists, and round the clock care.

Spaulding Rehab Hospital

Architect: Perkins + Will

Location: Boston, Massachusetts

Date Completed: April 2013



Figure 23: Spaulding Rehab Hospital Patient Room



Figure 24: Spaulding Rehab Hospital

Spaulding Rehab Hospital is an inpatient facility for physical and brain injuries, specifically musculoskeletal rehabilitation, amputee rehabilitation, and pediatric rehabilitation. The building is situated on the Charlestown Navy Yard in Boston, giving a perfect opportunity to provide views of the Boston Skyline to patients. The facility provides 132 beds in one eight story patient tower, and a three-story element with an aqua therapy pool.³⁹ Some of the other services include a daily living suite and transitional apartments to help patients return to independence, private bathroom shades and sleeping accommodations for family members, rooftop terrace, and an outpatient facility with rehabilitation gyms and other satellite gyms. The physical design of the hospital includes extensive glazing and curtain walls for

³⁹ *Rethinking the Design of Rehab Centres*. (DesignCurial, April, 2014)

natural light and calming views of nature to enhance the healing process. In order to have a more inclusive design, the architects made the ground floor open to the public, incorporating the Boston Harbor Walk. The design also attempts to call back to the curves and color of military battleships and aircraft carriers that used to dock here and use reclaimed timber to reference the dock's first purpose as a timber receiving basin.⁴⁰ The overall goal of the facility was to create a hospital that helps patients "regain mobility, independence, and confidence."⁴¹

Career Training Facility: Madison Adult Career Center

Location: Mansfield, Ohio

Date Completed: around 1980

Madison Adult Career Center (MACC) is an adult technical training center focused on further education and career development. The variety of programs include career development, short term career and personal enrichment courses, and customized training services for employers.⁴² MACC aims to link business and industry with the community and students, by meeting the specific training needs of the area. Certified instructors help give students quality, hands-on, technical training that aligns with their career goals. The range of students includes anyone wanting to prepare for their first career, people transitioning to a new career, and anyone looking to learn new skills and become more employable. Some of the adult programs include, customer and office support, dental assisting, manicuring, precision

⁴⁰ Ibid.

⁴¹ Abigail Gillespie, *Spaulding Rehabilitation Hospital* (Perkins&Will, 2019)

⁴² *Madison Adult Career Center* (Madison Adult Career Center, December 13, 2022)

machining, nurse aide, gas metal arc, welding, advanced cosmetology, medical and legal office management, and phlebotomy and ekg certification. Overall, MACC is securing a future of well-trained employees in the community, while helping individuals meet their goals and even start a new life.

Affordable Housing: 901 Fairfax Avenue

Architect: Paulett Taggart Architects/David Baker Architects Joint Venture

Location: San Francisco, California

Date Completed: March 2018



Figure 25: 901 Fairfax Avenue ground floor plan



Figure 26: 901 Fairfax Avenue

901 Fairfax Avenue is an affordable housing project in San Francisco, California that also serves as a community hub. This project is situated on the hillside above the former Hunters Point Naval Shipyard, as part of the restoration of the Hunters View neighborhood, which is one of the most historically underserved neighborhoods in San Francisco. The restoration and redevelopment of Hunters View has aimed to replace the housing, develop new housing, and design a master plan for the site. The site also has challenges of steep topography and dysconnectivity, so the plan aims to create spaces that encourage community interaction and create welcoming spaces that embrace the topography. The building includes 72 new affordable units, ranging from 1-bedroom to 5 bedrooms, incorporating views of the bay. The building also includes centralized community space with a childcare center.⁴³ Other spaces include an entry plaza, playground, community and podium courtyard, and a playground to continue the idea of creating connections in the community and to the unique site. The center oculus lightwell in the design brings light into the first-floor wellness center, creating a dialogue between the interior and exterior. Overall, the architects wanted to create a welcoming, connected, and safe space for the community that did more than just meet specific program goals, but it enhanced the new vision for the neighborhood.

⁴³ *901 Fairfax Avenue* (David Baker Architects, December 13, 2022)

Campus Planning: Howard University Central Campus Master Plan

Architect: Collaboration of Brailsford & Dunlavey, Lee and Associates, Inc, R.

McGhee & Associates

Location: Shaw, Washington, D.C.

Date Completed: 2020

The 2020 Central Campus Master Plan for Howard University focuses on the long-term transformation of the central campus experience for not only faculty and staff, but all visitors and the surrounding community.⁴⁴ The planning committee felt that this new plan makes capital improvements and new projects that better align with

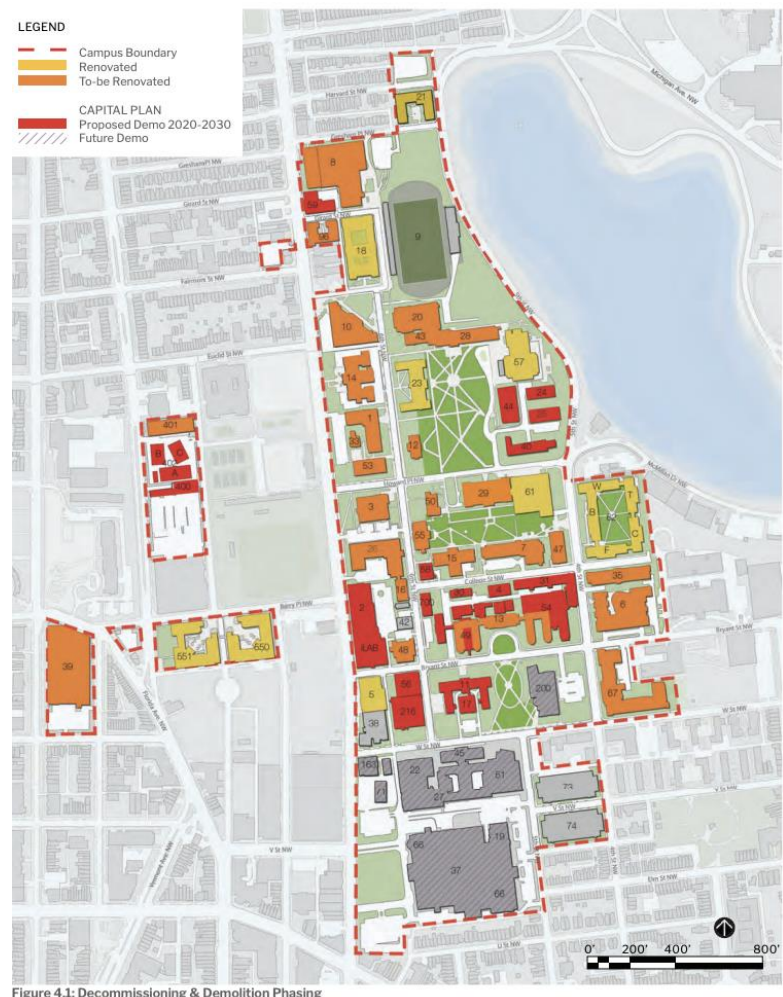


Figure 27: Howard University Master Plan, 2020

⁴⁴ *Moving Howard Forward with 2020 Central Campus Master Plan* (The Dig at Howard University. December 2022)

the University's vision and mission. The plan focuses on all stakeholder feedback in order to be more responsive to the campuses and surrounding community's needs. The new plan aims to create more vibrant, innovative, and mixed-use development along Georgia Avenue. Some of the new interdisciplinary buildings include: a student Union Building to support student activities, community wellness, and recreational sport, a Center for Arts and Communications, an Integrated Health Sciences Complex and STEM Center, a Teaching Hospital and Medical Office Building, an Intercollegiate Athletics Annex, and a Housing Community with direct pedestrian connection to campus. The new buildings aim to support education, research, health, and creativity, all in which support the University's new academic mission. The plan is advancing the community's urban design, by creating balanced, mixed-use buildings, effective outdoor spaces, and pedestrian connection to everything.

Therapeutic Space: Nuuk Psychiatric Clinic

Architect: White Arkitekter

Location: Nuuk, Greenland

Date Completed: Ongoing



Figure 28-29: Nuuk Psychiatric Center and its connection to nature

The new psychiatric clinic in Nuuk is an ongoing project that aims to be a healing space for those in need of extensive psychiatric care. The facility focuses on creating a calm atmosphere by providing an abundance of daylight and views of the dramatic landscape from large windows, spacious rooms and safe surroundings, and wood as the primary material because of its calming and stress-reducing effect on occupants. The building's connection to nature is crucial for a Zen atmosphere that enhances the healing process and is done through an atrium space with an open-air garden that can also be experienced outside, and a ground floor that is entirely open to the landscape. Other outdoor experiences include a courtyard and landscape, and an unprogrammed garden facing the atrium, both flexible to different activities. The building itself stands out and serves as an architectural landmark, while also reflecting the building structure of Nuuk. The architects firmly believe that there are seven pillars for creating healing architecture, including: promoting dignity,

encouraging normalcy, creating a free and open atmosphere, promoting social interaction, promoting patients' independence, offering views of and free access to the outside, and balancing the demands for a safe and healing environment.⁴⁵ The architects wanted to design a space that had a positive influence on the healing process while fighting the stigma of mental health issues. This includes understanding the impact of the architecture on its patients, while connecting to the natural landscape in order to create a tranquil, calm, and healing environment for the visitors

Green Space

Klyde Warren Park

Architect: The Office of James Burnett

Location: Dallas, Texas

Date Completed: 2012

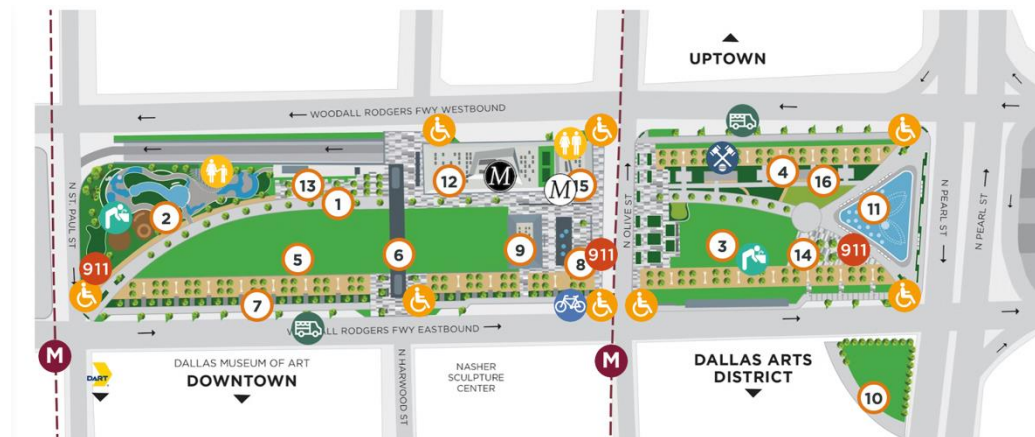


Figure 30: Klyde Warren Park Map

Klyde Warren Park is a central park for gathering in the city of Dallas, allowing visitors to enjoy the heart of the city. The park is 5.2 acres total, spanning

⁴⁵ A New Type of Psychiatric Clinic in Nuuk (White Arkitekter, 2022.)

over the Woodall Rodgers Freeway. Key features of the park include a shaded walking path, native Texas gardens, open activity space, performance stage, restaurant, dog park, children's park, water features, and lawn space.⁴⁶ The park is for all people, free of charge, serving as a hub of activity, aiming to have events every day from exercise classes during the day, to movies and concerts at night. The architects aimed to create an open space, consisting of outdoor rooms with different characters and uses that can be enjoyed by anyone. The city wanted to increase foot traffic in order to bring attention to the art institutions and street level business of the city's Art District. They also wanted to connect the uptown, downtown and Art's district by promoting pedestrian, trolley, and bicycle use. Overall, Klyde Warren Park has made the city of Dallas more walkable and picturesque for its visitors

Central Park

Architect: Frederick Law Olmsted, Calvert Vaux

Location: Manhattan, NYC

Date Started: 1858



Figure 31: Map of Central Park 1863, NY Public Domain

⁴⁶ Daniel Sánchez, *Klyde Warren Park / The Office of James Burnett* (ArchDaily. November, 2012)

Central Park is a large, 843-acre park inside the dense city of New York, that allows New Yorkers to escape the everyday stresses of urban life. Landscape architects Frederick Law Olmsted and Calvert Vaux entered the design competition for a park that would address the recreational needs of a rapidly growing city and won in 1858. The design focus was to create a park that appears to be naturally occurring, when in reality it was carefully planned and entirely human made. The design combines landforms, water, vegetation, flowers, bridges, and other man-made elements to make a picturesque, formal, and pastoral landscape, all in one space. The picturesque features include the complex, rough and irregular landscape with winding pathways and natural, eclectic materials to intrigue visitors and their imagination. The formal elements of the park include the mall and Bethesda Terrace, Grand Army Plaza, and the Conservatory Garden, in order to provide a promenade and draw visitors into the heart of the park. The pastoral features of the park include the gentle, sprawling lawns and shaded walks, and the expanses of water to evoke peace and spaciousness for reflection. Overall, Central Park still remains successful in providing everyday city dwellers with respite, while providing a multitude of intentional spaces for each visitor's needs.

Chapter 8: Thesis Transition

LGBTQIA+ Youth

After previous research, I decided that I wanted to narrow down my users of the wellness facility to a specific demographic. The focus of the thesis needed to be narrowed in order to have more complete architecture. I felt that the best way to tackle the problem of homelessness in Washington, D.C., was to start with the youth population. While researching statistics on homeless youth in Washington, D.C., I found alarming statistics on the rates of homelessness for LGBTQIA+ youth. For example, 40% of youth experiencing homelessness identify as LGBTQIA+.⁴⁷ Among our youth, those who identify as LGBTQIA+ have 120% higher chance of experiencing homelessness.⁴⁸ These statistics convinced me that the LGBTQIA+ homeless youth population is extremely unaccounted for, so I wanted to do something about it. Now the thesis would be focused more on creating spaces that serve LGBTQIA+ youth and focus on individual expression, creativity, and wellbeing.

⁴⁷ *LGBTQIA+ Youth Experiencing Homelessness Say More Support is Needed* (dcist.com. July 22, 2022)

⁴⁸ *LGBTQ+ Youth Homelessness* (nn4youth.org. June 9, 2022)

Chapter 9: Design Approach

Site Design

The site is situated between the U street corridor and Howard University, so there are two very rich histories and many zones that needed to be considered before creating a site design. Surrounding the site is residential, commercial, retail educational, and medical zones (Illustration 4). This helped determine zones for the site. The site parti was created with a sustainability lens, getting maximum sunlight and ventilation to the buildings by orienting them East to West, and creating relationships between building on each portion of the site while also relating each portion of the site to one another (Illustration 5).

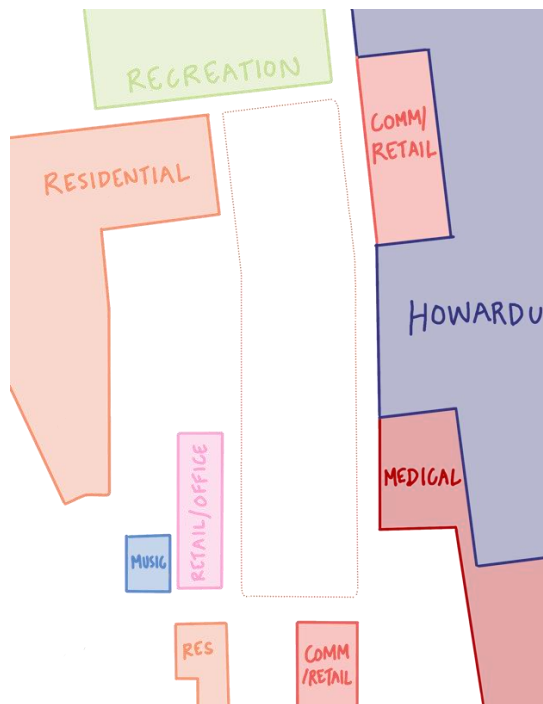


Illustration 4: Site surrounding zoning

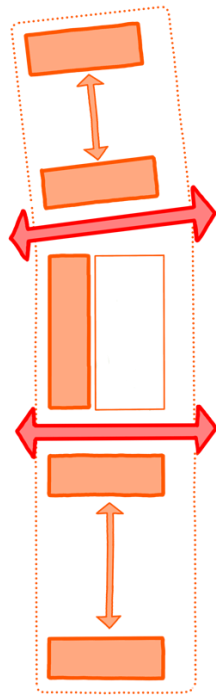


Illustration 5: Site Parti

After an extensive analysis of the site and visiting the site, I was able to decide what the site needed. For being such a busy area with a lot of pedestrian activity, Georgia avenue is quite unsafe, so I felt that there was a need to create a 50-foot setback from Georgia Avenue to create a safer and more pedestrian friendly urban thoroughfare, that included retail at the ground floor for a more enjoyable experience (Illustration 6 and Illustration 7). I also carried Bryant Street and W Street through the site for further connectivity (Illustration 8).

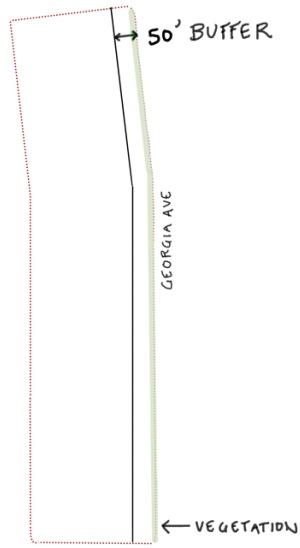


Illustration 6: Site setback and vegetation buffer

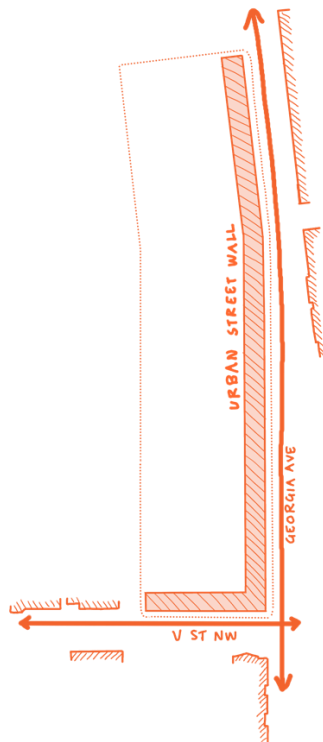


Illustration 7: Site urban thoroughfare

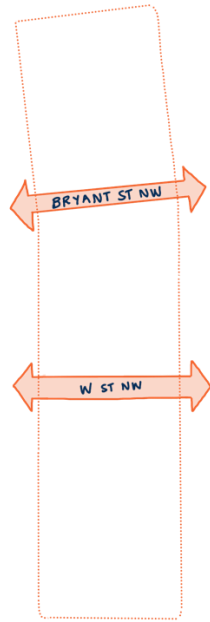


Illustration 8: Site divided by Bryant Street and W Street

After considering the University and surrounding area's needs, I was able to locate the area of the site for the thesis on the northernmost part, the wellness facility called haven that provides housing, rehabilitation, and education for LGBTQIA+ youth (Illustration 9). I placed the thesis portion here because it was more private, and away from the local bars, busy streets, which felt most appropriate when considering the rehabilitation and safety of the building users.

SITE ORGANIZATION



Illustration 9: Thesis site designation

The area of the site designated to a university creativity building and green space was most appropriate in the middle portion of the site (Illustration 10). This portion has a clear connection back to the existing campus green space, furthering the connection to Howard University (Illustration 11). The university creativity building was chosen because Howard's new master plan called for more creative space, and I felt that a building of this use could really bring out the art and culture of the university, and perhaps the landscape outside of this creativity building could reflect that.

SITE ORGANIZATION

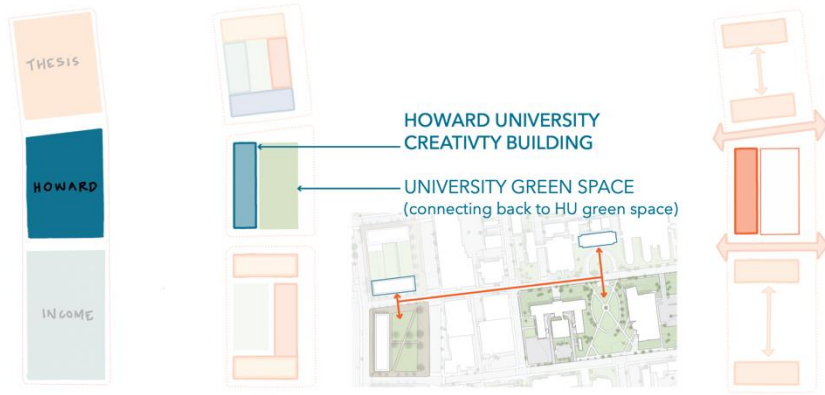


Illustration 10: Howard University site designation

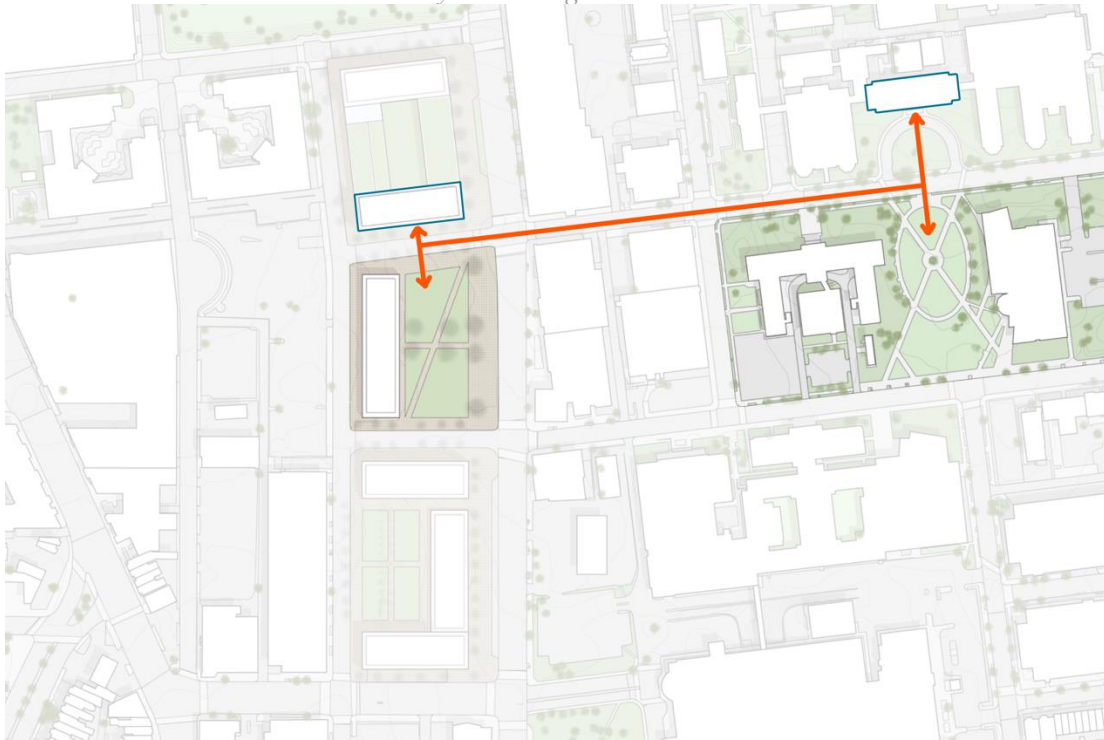


Illustration 11: Connection of thesis site to Howard University Green Space

Lastly, the area of the site focused on generating income and providing affordable housing, campus housing, and retail space felt most appropriate on the southernmost portion of the site (Illustration 12). This decision was made because of the retail space, commercial space, and housing that is closest to the southern part of the site. Shaw needs more affordable housing and newer retail and commercial space, and the University is facing a housing shortage, which led to the decision of providing housing.

SITE ORGANIZATION

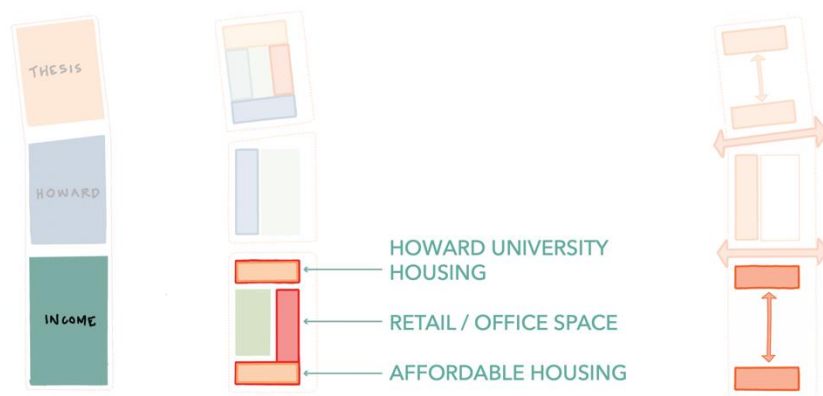


Illustration 12: Income generating and Shaw resources site designation

Overall, the site design was meant to bring more green space to the site, blend in with surrounding context, and create a strong urban throughfare along Georgia avenue (Illustration 13 and Illustration 14).



Illustration 13: Site Plan

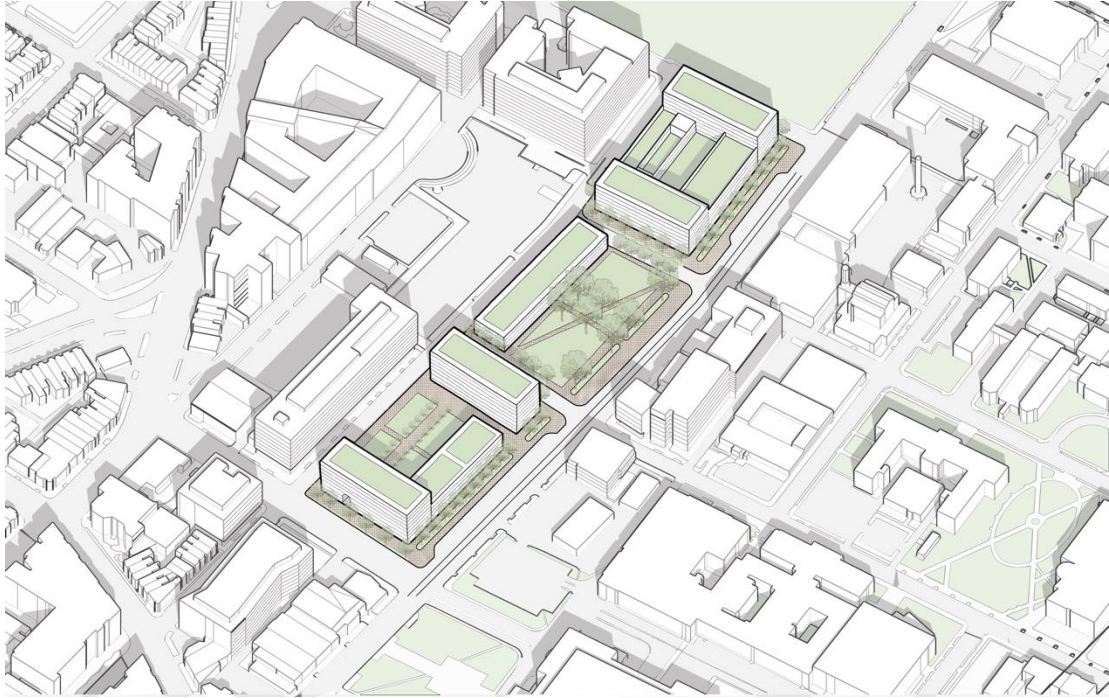


Illustration 14: Site Axonometric

Building Design

The building that was fully designed was named Haven, A building on the northernmost part of the site and focused on Housing, Education, rehabilitation, shelter, and retail (Illustration 15). There is one facility; however, there are technically five building combine into one. Each portion of the building has two means of egress and separate entrances on the ground level of the street.

BUILDING ORGANIZATION

Creating a Facility that focuses on the wellbeing of homeless LGBTQIA+ youth by providing:

- **HOUSING**
- **EDUCATION**
- **REHABILITATION / THERAPY**
- **SHELTER**

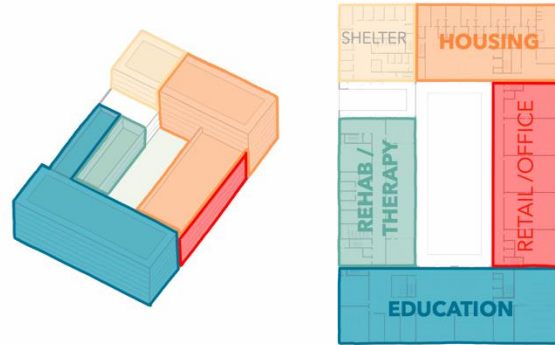
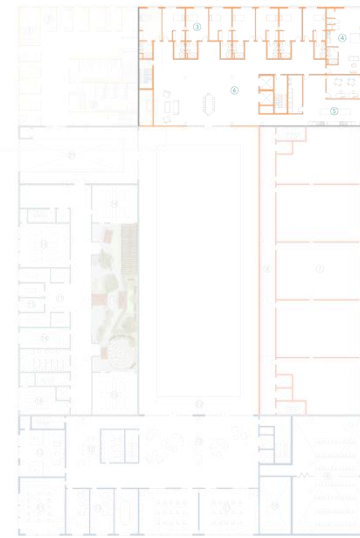
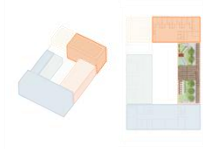
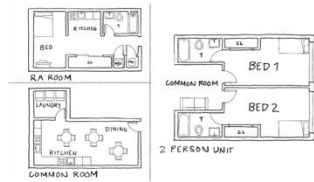
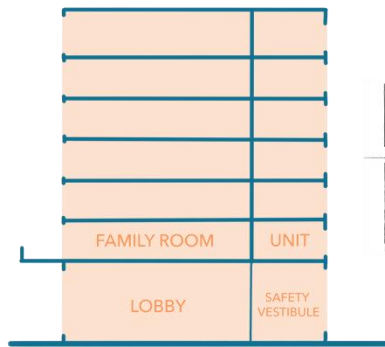


Illustration 15: Building Organization

The housing portion of the building works to evoke a sense home by promoting family, togetherness, and individuality through spaces like a family room, large kitchen, and common spaces between the two-bedroom units to decorate (Illustration 16). I aimed to create very simple floor plans, that just had a balance between family and unit space that fed into one another Each floor has an RA room for occupant safety. Units are all two bedrooms to create a ‘buddy system’ to ensure occupant safety and comfort. The ground floor has a very large lobby with a security vestibule, and a gym. The lobby can enter the courtyard at ground level, and on the third floor, users can walk around the balcony outside of the courtyard (Illustration 17). There is an outdoor space on the fourth floor, leading out from the club room to promote gathering and spending time with peers (Illustration 18).



FLOOR 3 PLAN - TYP.

Illustration 16: Housing portion of facility



Illustration 18: Housing outdoor space

The education portion of the building influences and promotes collaboration between teacher and student by having these spaces flow into one another and teachers scattered throughout each floor of the building (Illustration 19). With a lobby, trade classrooms, administration, and a career center on the lowest level, the users can take the grand staircase to the courtyard level. The floors above this are focused on learning and collaboration, leading up to the top floors with a double-heighted library and study hall (Illustration 17). The combination of teacher offices, classroom, and collaboration space is meant to engage the students and encourage collaboration. There is an outdoor space on the fourth floor of the education portion for students to have the opportunity to study, gather, and collaborate in the outdoors and enjoy the sunshine (Illustration 20).

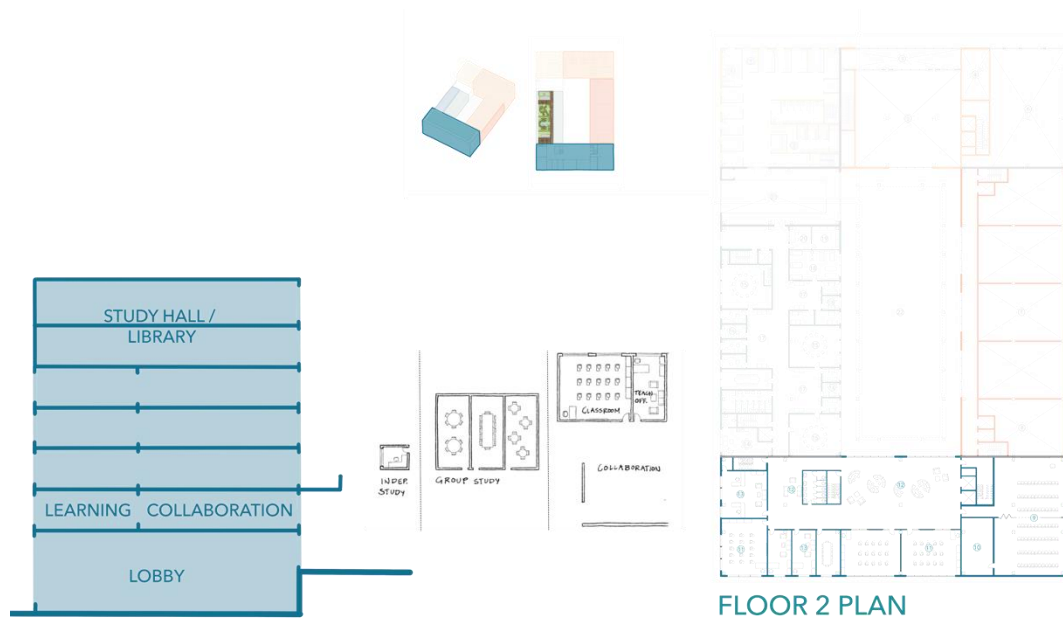


Illustration 19: Education Portion of Facility

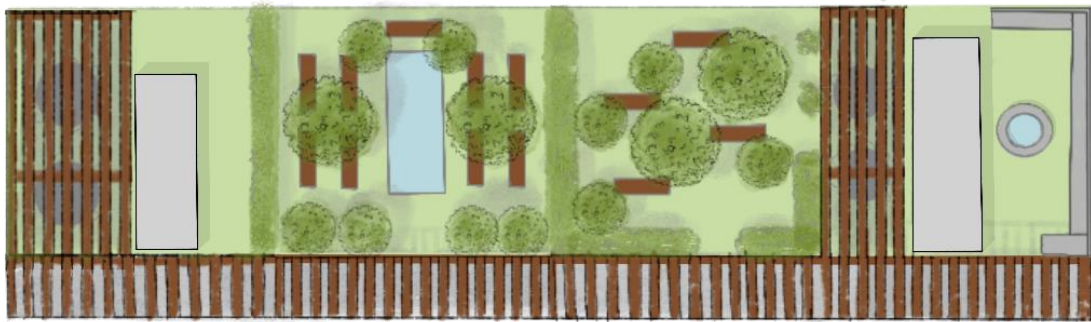


Illustration 20: Education Outdoor Space

The rehabilitation portion really breaks up the double loaded corridor for light, air, and sunshine (Illustration 21). How can we make a medical building not feel so medical, while providing things that are crucial to a patient's mental health and overall wellbeing? This is why each floor has a simple and unique layout that starts with reception for patient accessibility and easy navigation. The building is split into three components, which includes an examination floor, a therapy floor, and a healing floor (Illustration 17). The examination floor includes exam and patient rooms, doctor

and nurse offices, and open, relaxing waiting areas (Illustration 17). The therapy floor is split up by substance abuse therapy, physical therapy, and LGBTQIA+ therapy, providing individual and group therapy rooms. Lastly, the healing floor includes group and private meditation, which feed into a Zen Garden (Illustration 22).

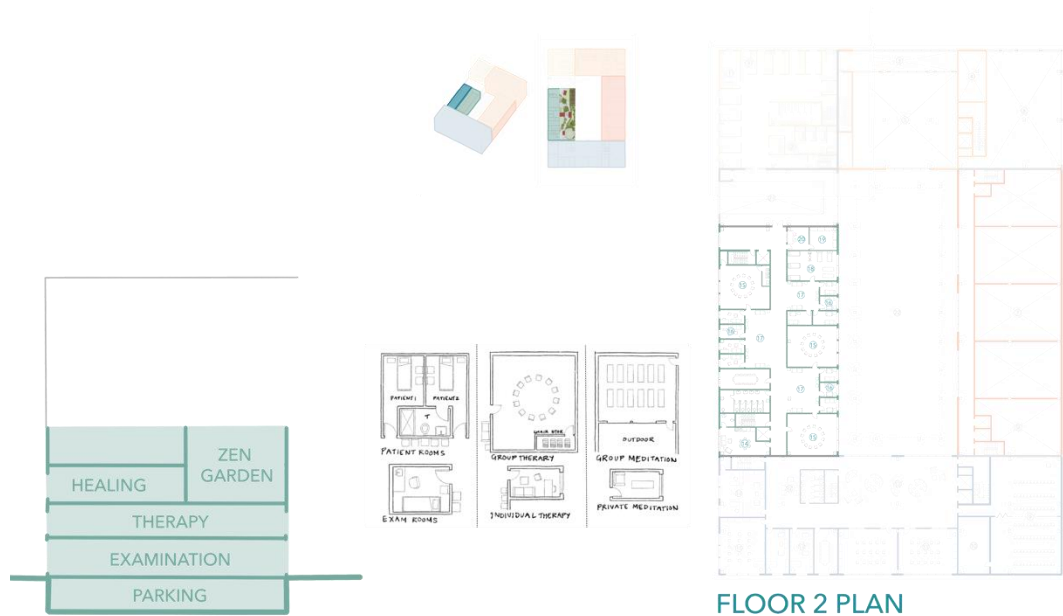


Illustration 21: Rehabilitation portion of facility

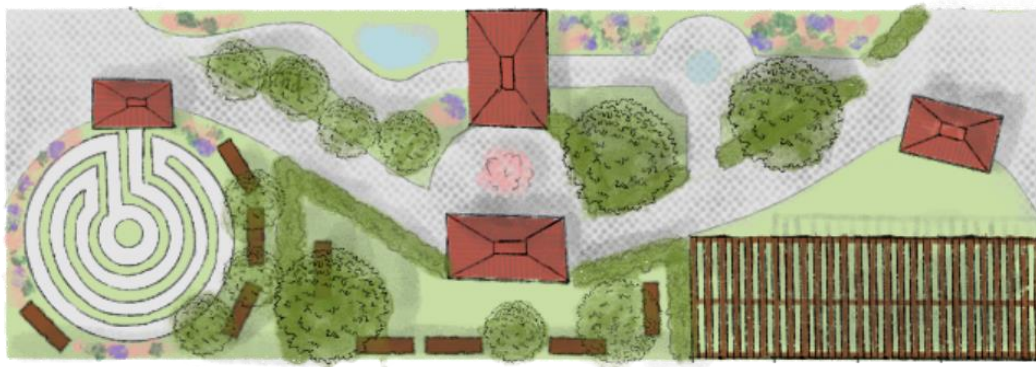


Illustration 22: Rehabilitation portion Zen Garden

The shelter portion provides basic necessities and amenities while giving personal storage to each building user (Illustration 23). A lot of homeless people are discouraged to use shelters because they typically lack space for personal items and

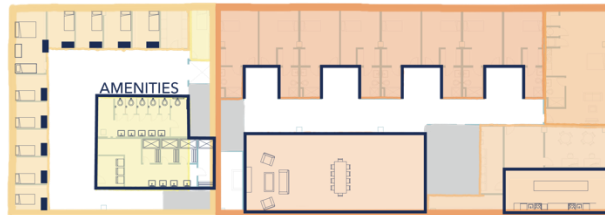
property, which seems so simple yet hard to find. The first floor includes a kitchen and dining space for those just coming for food, and the floors above are all focused on individual rooms and amenities (Illustration 17). The rooms are simple and open, including a twin bed and storage cabinets, and there is one family bedroom on the corner of each floor. The amenities include individual showers, bathrooms, and laundry.



Illustration 23: Shelter portion of facility

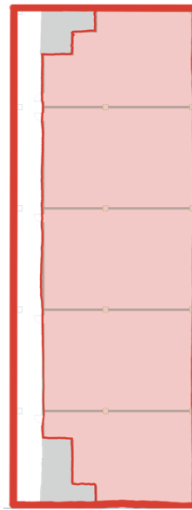
Lastly, the retail portion of the building is focused on a better pedestrian experience (Illustration 24). Because Georgia Avenue is heavily populated with students and others during all hours of the day, it is really important to provide retail and commercial space along the street. This space also includes office space at the top floor for local small businesses (Illustration 17).

PROVIDING BASIC NEEDS AND AMENITIES,
AS WELL AS STORAGE FOR PERSONAL ITEMS



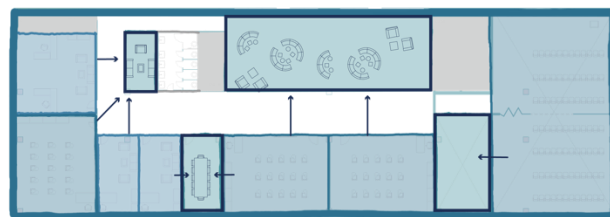
EVOKING A SENSE OF HOME BY PROMOTING
FAMILY, TOGETHERNESS, AND INDIVIDUALITY

- UNITS
- FAMILY ROOM
- KITCHEN / AMENITIES
- RA ROOM



BREAKING UP THE CORRIDOR
FOR LIGHT, AIR, SUNSHINE, AND CALM

- PATIENT / EXAM ROOM
- DOCTOR / NURSE OFFICE
- ADMINISTRATION



INFLUENCING AND PROMOTING COLLABORATION
BETWEEN TEACHER AND STUDENT

- COLLABORATION
- TEACHER OFFICE
- LEARNING SPACE

Illustration 24: Plan organization diagram

Building Diagrams

The big idea was to have all portions of the facility related to one another through the courtyard. The courtyard can be accessed by all portions of the facility on the first floor, and the education and housing users can enter the courtyard balcony on the third floor (Illustration 25). This is mostly for observation, but also for access to the murals that users are allowed to add onto.

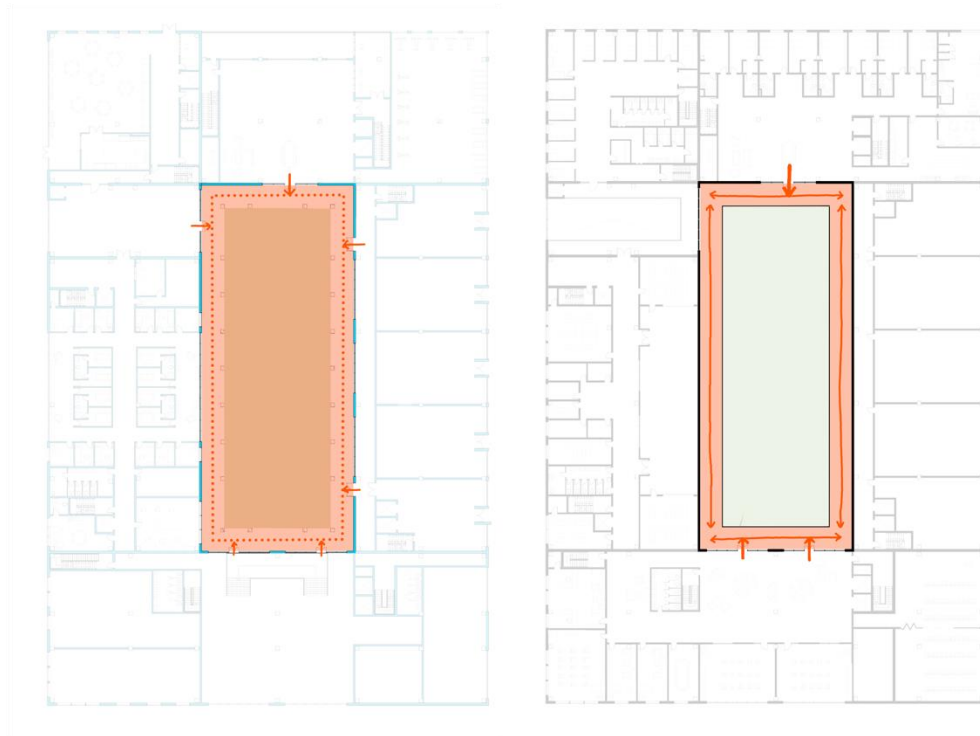


Illustration 25: Courtyard access diagram

Not only are the portions of the facility all connected to each other by the courtyard, but they are also connected by the winter garden (Illustration 26). The winter garden is a place to relax and view wildlife all times of the year, while also

providing access to the shelter and rehabilitation portions of the facility, and access to the courtyard.

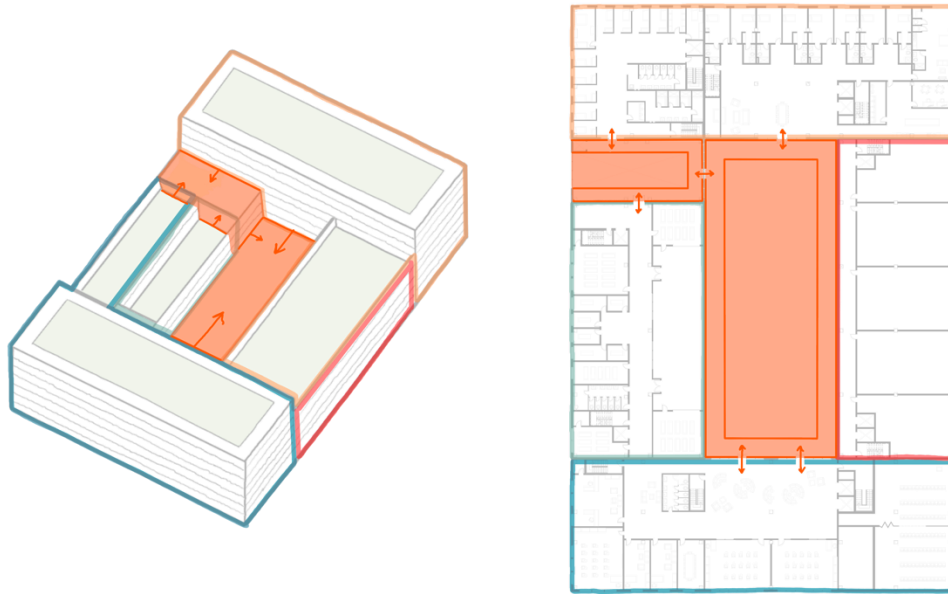


Illustration 26: Building Connectivity diagram

Another design approach included the contained courtyard. The idea was to have the courtyard on a neutral level, that could only be accessed by entering the building (Illustration 27). This ensured the safety of building users, and gave a large space that people felt comfortable to be themselves and represent their individuality and pride for the LGBTQIA+ community.

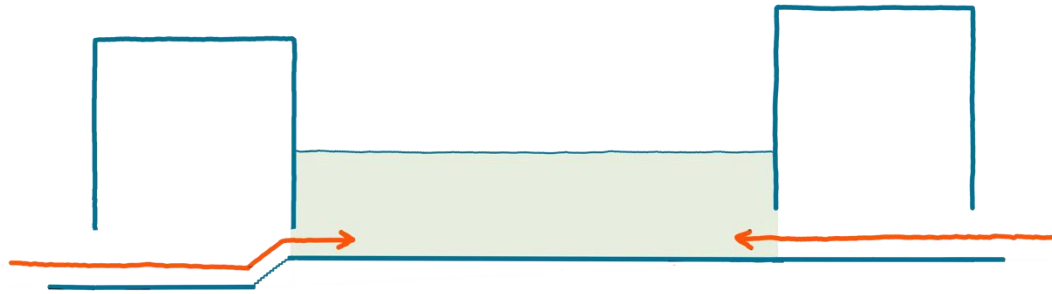


Illustration 27: Containing Courtyard diagram

Each building has two means of egress and one main path, along with some secondary paths for an easily navigable experience. The goal was to use open space to break down the traditional double loaded corridor in each portion of the building (Illustration 28).

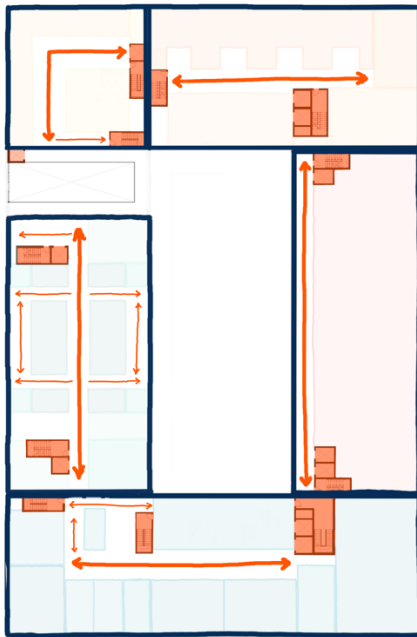


Illustration 28: Circulation diagram

Visual connection to the courtyard was heavily focused on to create a well-connected experience. The visual connection allows users to influence progress,

individuality, and togetherness amongst some another. The visual connection between each program makes a well-rounded experience (Illustration 29).

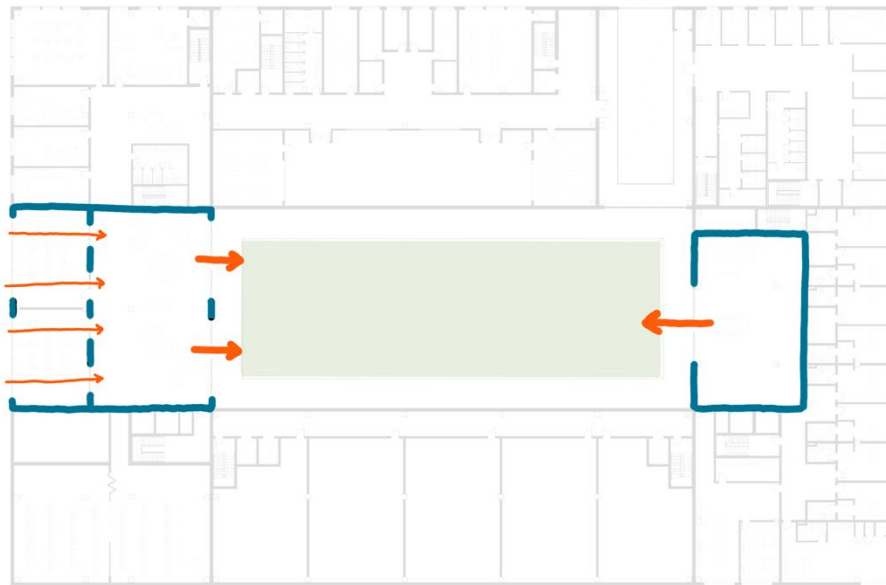


Illustration 29: Visual connection diagram

The massing had evolved over the design process as a result of providing light, air and sunshine to users, as well as providing a variety of outdoor spaces to users (Illustration 30). A next phase of the project would most definitely include pushing and pulling the exterior of the building for a more dynamic interior and exterior.

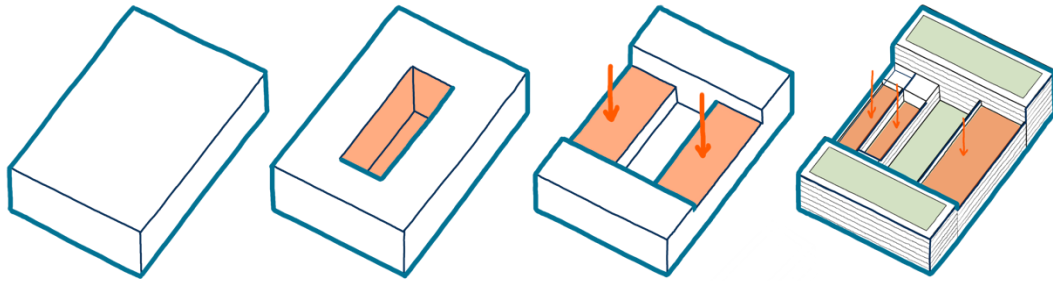


Illustration 30: Massing evolution diagram

Overall, the design of the facility was intended to be simple and clear, while maintaining the safety of its users.

Chapter 10: Conclusion

So not only does haven provide housing, education, rehabilitation, shelter, and retail space, but it provides a home. A home is where we are always welcome. Haven will never fail to make those feel welcomed and wanted, embracing the individuality and uniqueness of its occupants (Illustration 31). A home is where we find comfort and safety. Haven not only provides physical safety with its enclosed walls and contained outdoor spaces, but it also provides comfort and a chosen family that makes it a place those can retreat to when times are tough and peace within oneself needs to be restored (Illustration 32). A home is where we put down our roots. Haven is where the individual can begin a new life full of possibilities, whether its recovering from a physical disability, drug or alcohol addiction, mental health struggles in the Rehabilitation component (Illustration 22), or continuing education to receive a GED, higher education, trade license, leadership, and business practice in the education component (Illustration 33). A home is where our dreams become reality. Haven is where the individual can imagine the possibilities that lie ahead. This is where their future begins, and they are able to use the facility to create the life they imagine for themselves.



Illustration 31: Courtyard perspective

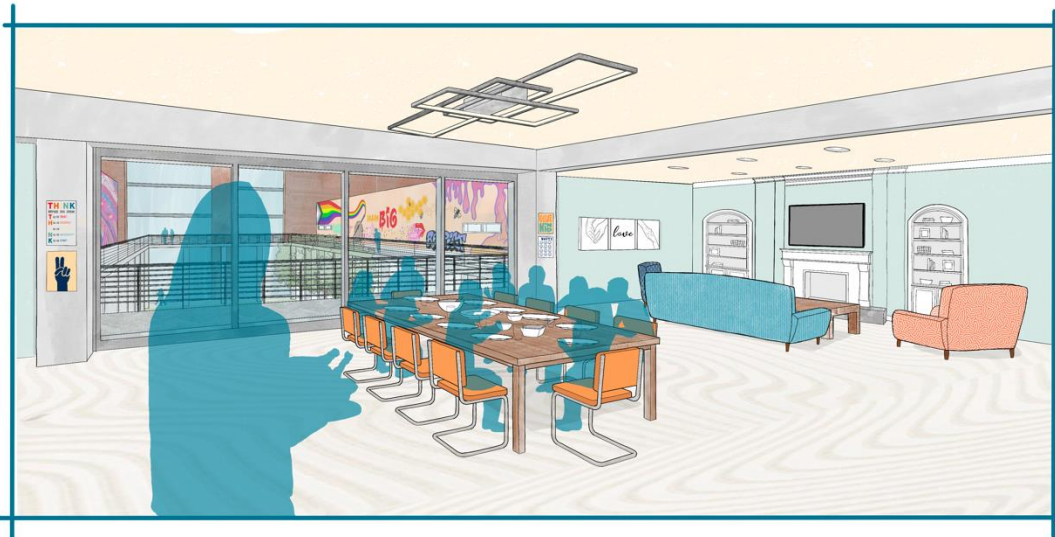


Illustration 32: Family Room perspective



Illustration 33: Collaboration perspective

The wellness facility provides spaces and moments that can change a person's life and provide things that they were previously missing (Illustration 34). Security spaces like classrooms and collaboration space to secure a better and brighter future (Illustration 35). Wellness spaces like a doctor's office, a group or private therapy room to heal physically, mentally, and emotionally (Illustration 36). Tranquility spaces like a Zen Garden, private or group meditation rooms to become the best version of yourself (Illustration 37). Community spaces like a courtyard to hang out, eat lunch, study, gather for an event, to come together with those around you (image 38). Individuality spaces like the courtyard to physically express your individuality and creativity onto the facility murals (Illustration 39). Family spaces like a family room to cook and eat family dinners, play games, hangout (Illustration 40). Identity Spaces like a unit common space to bond with a roommate, decorate, and personalize for the rest of your peers to see (Illustration 41). Privacy spaces like the two-bedroom units with individual rooms to make your own and feel safe in your own space (Illustration 42). Haven is a new beginning, a chosen family, a place that provides the intangible feeling of home.



Illustration 34: Section Perspective



Illustration 35: Security concept of the facility



Illustration 36: Wellness concept of the facility

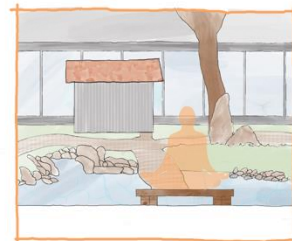
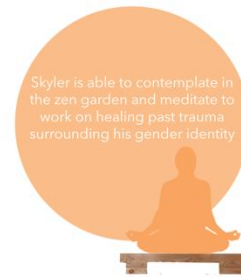


Illustration 37: Tranquility concept of the facility

COMMUNITY



Illustration 38: Community concept of the facility



Illustration 39: Individuality concept of the facility



Illustration 40: Family concept of the facility

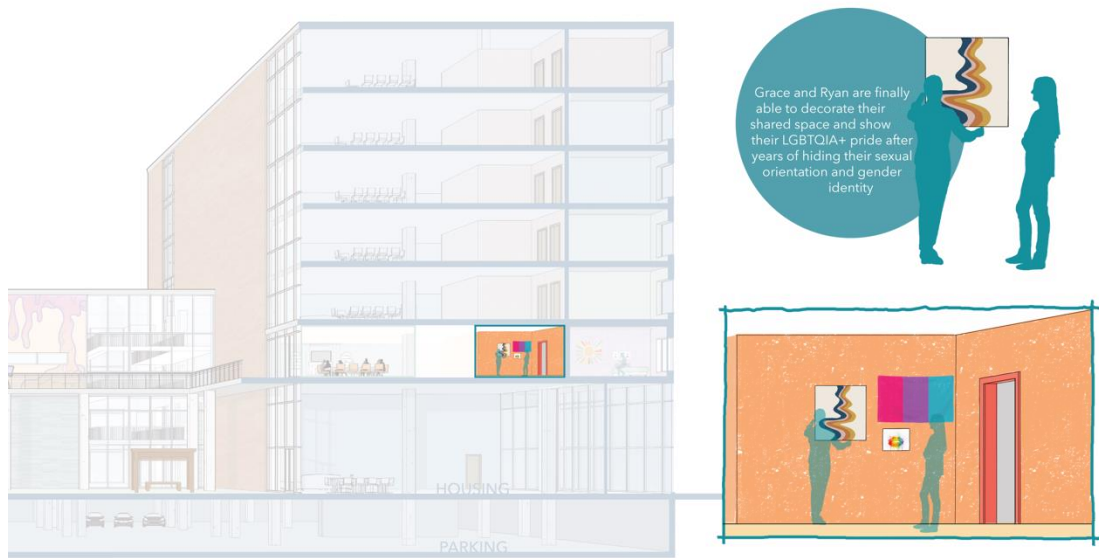


Illustration 41: Identity concept of the facility



Illustration 42: Privacy concept of the facility

Appendices

Image Credits

Figure 1: Causes of Homelessness in DC by Central Union Mission

<https://www.missiondc.org/learn/about-homelessness/>

Figure 2: Washington, D.C. Homeless Population statistics by Central Union Mission

<https://www.missiondc.org/learn/about-homelessness/>

Figure 3: CCNV's first homeless shelter built from an abandoned building

<https://www.dcfpi.org/all/redeveloping-the-ccnv-shelter-to-meets-the-needs-of-residents/>

Figure 4: CCNV's Union Station sit-in

<https://whosedowntown.wordpress.com/the-ccnv-and-the-fight-to-create-the-federal-city-shelter/>

Figure 5: Washington Post's coverage of CCNV's efforts

<https://whosedowntown.wordpress.com/the-ccnv-and-the-fight-to-create-the-federal-city-shelter/>

Figure 6: CCNV's leader Mitch Snyder uses his publicity to his advantage

<https://whosedowntown.wordpress.com/the-ccnv-and-the-fight-to-create-the-federal-city-shelter/>

Figure 7: 2021 Point in Time Homelessness Fact Sheet by The Community

Partnership For the Prevention of Homelessness

<https://community-partnership.org/wp-content/uploads/2021/06/Homelessness-in-the-District-of-Columbia-4.27.21.pdf>

Figure 8: Homeless encampments have become common in Washington, D.C.

<https://dcist.com/story/21/07/13/homeward-dc-strategy-to-end-homelessness-in-dc/>

Figure 9: 2022 PIT Statistics of adults experiencing homelessness

<https://www.axios.com/local/washington-dc/2022/05/19/dc-aging-homeless-issues>

Figure 10: Outreach workers interviewing people in encampments by Christopher Lee for the New York Times

<https://www.nytimes.com/2022/06/14/headway/houston-homeless-people.html>

Figure 11: U Street after the district-wide public improvement project

Figures 12-15: U Street thriving as a black cultural center for business, music, and education

Figure 16: Street art on U Street

<https://studioist.co/posts/travel-guide-dc-u-street-corridor>

Figure 17: Famous restaurant, Ben's Chili Bowl on U Street

<https://studioist.co/posts/travel-guide-dc-u-street-corridor>

Figure 18: proposed Campus master plan for Howard University, 2020

https://realestate.howard.edu/sites/realestate.howard.edu/files/2022-11/HU%20CCMP%20FINAL%20APRIL%202021%20SUBMISSION%202021.03.04_reduced_1.pdf

Figure 19: NoHo Bridge Housing shelter cubby room

<https://www.hopeofthevalley.org/nohoshelter/>

Figure 20: What is Bridge Housing?

<https://www.hopeofthevalley.org/nohoshelter/>

Figure 21: open room at Recovery Village Cherry Hill

<https://www.spiezle.com/project/recovery-village-cherry-hill/>

Figure 22: fitness room at Recovery Village Cherry Hill

<https://www.spiezle.com/project/recovery-village-cherry-hill/>

Figure 23: Spaulding Rehab Hospital Patient Room

<https://www.designcurial.com/news/consider-yourself---one-of-us-4213515>

Figure 24: Spaulding Rehab Hospital

<https://perkinswill.com/project/spaulding-rehabilitation-hospital/>

Figure 25: 901 Fairfax Avenue ground floor plan

https://www.dbarchitect.com/project_detail/184/901%20Fairfax%20Avenue.html

Figure 26: 901 Fairfax Avenue

https://www.dbarchitect.com/project_detail/184/901%20Fairfax%20Avenue.html

Figure 27: Howard University Master Plan, 2020

https://realestate.howard.edu/sites/realestate.howard.edu/files/2022-11/HU%20CCMP%20FINAL%20APRIL%202021%20SUBMISSION%202021.03.04_reduced_1.pdf

Figure 28-29: Nuuk Psychiatric Center and its connection to nature

<https://www.archdaily.com/906440/white-arkitekters-design-for-nuuk-psychiatric-clinic-emphasizes-the-relationship-between-architecture-nature-and-mental-health/5bfd02e808a5e566ee000b35-white-arkitekters-design-for-nuuk-psychiatric-clinic-emphasizes-the-relationship-between-architecture-nature-and-mental-health-image>

Figure 30: Klyde Warren Park Map

<https://www.klydewarrenpark.org/visit-the-park/park-map.html>

Figure 31: Map of Central Park 1863, NY Public Domain Library

<https://www.designboom.com/design/archives-design-central-park-masterpiece-landscape-architecture-06-27-2021/>

Illustrations 1-43: Sourced by author

Bibliography

- Azzaarello, Nina I. "Into the Archives: The Design of Central Park, a Masterpiece of Landscape Architecture." Designboom, Last modified June 28, 2021. <https://www.designboom.com/design/archives-design-central-park-masterpiece-landscape-architecture-06-27-2021/>.
- Bogard, Cynthia J. "Claimsmakers and Contexts in Early Constructions of Homelessness: A Comparison of New York City and Washington, D.c." *Symbolic Interaction* 24, no. 4 (2001): 425–54.
- Cirruzzo, Chelsea. "D.C. Just Released the next Phase of Its Plan to End Homelessness. Here's What's in It." DCist, Last modified July 13, 2021. <https://dcist.com/story/21/07/13/homeward-dc-strategy-to-end-homelessness-in-dc/>.
- Cirruzzo, Chelsea. "D.C. Struggles to End Homelessness by 2025." Axios, Last modified May 23, 2022. <https://www.axios.com/local/washington-dc/2022/05/19/dc-aging-homeless-issues>.
- Duddy, Lindsay. "White Arkitekter's Design for Nuuk's Psychiatric Clinic Emphasizes Nature in Mental Health Design." ArchDaily. Last modified November 23, 2018. <https://www.archdaily.com/906440/white-arkitekters-design-for-nuuks-psychiatric-clinic-emphasizes-the-relationship-between-architecture-nature-and-mental-health>.
- Dwell. "901 Fairfax Avenue by David Baker Architects." Dwell, Last modified September 18, 2021. <https://www.dwell.com/article/901-fairfax-david-baker-architects-andersen-e0bc5020>.
- Gillespie, Abigail. "Spaulding Rehabilitation Hospital." Perkins&Will, Last modified July 2, 2019. <https://perkinswill.com/project/spaulding-rehabilitation-hospital/>.
- Grinderslev, Chantal-Majken. "The History of Homelessness in Washington, DC: Part I, 1975-1985." Street Sense Media. February 15, 2005. <https://www.streetsensemedia.org/article/the-history-of-homelessness-in-washington-dc-part-i-1975-1985/#.Y5j88-zMKEt>
- Horner, Daniel. "The History of Homelessness in Washington, DC: Part II, 1985-1994." Street Sense Media. March 15, 2005. <https://www.streetsensemedia.org/article/the-history-of-homelessness-in-washington-dc-part-ii-1985-1994/#.Y5j9MezMKES>

- Kimmelman, Michael. "How Houston Moved 25,000 People From the Streets Into Homes of Their Own." *The New York Times*. June 14, 2022.
- Kusmer, Kenneth L. *Down and Out, on the Road : The Homeless in American History*. Oxford: Oxford University Press, 2002.
- Logan, Rayford W. *Howard University: The first hundred years, 1867-1967*. NYU Press, 1969.
- Rossi, Peter H. *Down and Out in America : The Origins of Homelessness*. Chicago: University of Chicago Press, 1989.
- Ruble, Blair A. "Washington's U Street: A Biography" DC History Center, 2011
- Rukmana, Deden. *The Causes of Homelessness and the Characteristics Associated With High Risk of Homelessness: A Review of Intercity and Intracity Homelessness Data*. Taylor & Francis Online. January 14, 2020.
<https://www.tandfonline.com/doi/citedby/10.1080/10511482.2019.1684334?scroll=top&needAccess=true>
- Sánchez, Daniel. "Klyde Warren Park / The Office of James Burnett." ArchDaily. Last modified November 26, 2012. <https://www.archdaily.com/298385/klyde-warren-park-the-office-of-james-burnett#:~:text=Designed%20by%20The%20Office%20of,the%20heart%20of%20the%20city.>
- Smith, Kathryn S., "Remembering U Street" *Washington History* 9, no. 2, 1997.
<http://static1.1.sqspcdn.com/static/f/292282/11420736/1301175620023/MHNA+4.pdf?token=5r16PdYQanHDV%2B7Ec%2B2kMErMozc%3D>
- TCP. "Washington DC Homelessness Characteristics Map." ArcGIS StoryMaps. Last modified July 8, 2021.
<https://storymaps.arcgis.com/stories/19b87f84e3204904a291ec9ceb3d7200>.
- "About Homelessness." Central Union Mission. Accessed, 2022.
<https://www.missiondc.org/learn/about-homelessness/>.
- "A New Type of Psychiatric Clinic in Nuuk." White Arkitekter, Last modified October 26, 2022. <https://whitearkitekter.com/project/nuuk-psychiatric-clinic/>.
- "Drug and Alcohol Rehab in New Jersey - Addiction Treatment Center and Detox." The Recovery Village Cherry Hill at Cooper, Last modified October 11, 2022.
<https://www.southjerseyrecovery.com/>.

- “Homelessness in DC.” The Community Partnership For the Prevention of Homelessness, Last modified April 26, 2022. <https://community-partnership.org/homelessness-in-dc/>.
- "Howard University Central Campus Master Plan." realestate.howard.edu. June 14, 2022. https://realestate.howard.edu/sites/realestate.howard.edu/files/2022-11/HU%20CCMP%20FINAL%20APRIL%202021%20SUBMISSION%2021.03.04_reduced_1.pdf
- “LGBTQ+ Youth Experiencing Homelessness Say More Support Is Needed.” *DCist*. Last modified March 11, 2022. Accessed May 18, 2023. <https://dcist.com/story/22/07/27/dc-homeless-youth-lgbtq-housing-shelter/>.
- “LGBTQ+ Youth Homelessness.” *National Network for Youth*. Last modified June 9, 2022. Accessed May 18, 2023. <https://nn4youth.org/lgbtq-homeless-youth/>.
- “Madison Adult Career Center.” Madison Adult Career Center. Accessed December 13, 2022. https://www.mlsd.net/adultcareercenter_home.aspx.
- “Moving Howard Forward with 2020 Central Campus Master Plan.” The Dig at Howard University. Accessed December 13, 2022. <https://thedig.howard.edu/all-stories/moving-howard-forward-2020-central-campus-master-plan>.
- “Noho Shelter.” Hope of The Valley. Accessed December 13, 2022. https://www.hopeofthevalley.org/nohoshelter_livetour/.
- “Recovery Village Cherry Hill • Spiezle.” Spiezle, Last modified November 15, 2021. <https://www.spiezle.com/project/recovery-village-cherry-hill/>.
- “Rethinking the Design of Rehab Centres.” DesignCurial, Last modified April 11, 2014. <https://www.designcurial.com/news/consider-yourself---one-of-us-4213515>.
- "The History of Homelessness in Washington, DC: Part III, 1985-1994-Present." Street Sense Media. April 15, 2005. <https://www.streetsensemedia.org/article/the-history-of-homelessness-in-washington-d-c-part-iii-1994-present/#.Y5j9C-zMKEs>
- “901 Fairfax Avenue.” David Baker Architects. Accessed December 13, 2022. https://www.dbarchitect.com/project_detail/184/901%20Fairfax%20Avenue.html.
- “901 Fairfax Hunters View " Landezine International Landscape Award Lila.” Landezine International Landscape Award LILA RSS. Accessed December 13, 2022. <https://landezine-award.com/901-fairfax-hunters-view/>.

