Temporary Housing in a Permanent Building

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Abstract

The housing of displaced peoples is almost reflexively treated as provisional and marginal, an ostensibly impermanent situation implying an outlying, impermanent solution. Without longer term solutions or the hope of return, though, those provisional solutions often become semi-permanent. Instead, if we recognized the probably permanent need for dignified housing for short term crises, we could better integrate these new members of society; and, we could also repair our self-inflicted damage to historical cities. In Rome, an under-appreciated historical building type provides a tool that can resolve both dimensions: the hospital. The Early Modern hospital's role serving the poor as well as the sick, its somewhat generic architectural form and the flexibility that that afforded its services, its relatively large scale combined with its urban nimbleness, are aspects of continuity across the centuries that would only be substantially transformed at the end of the nineteenth and early twentieth centuries, when private and semi-private rooms replaced the ubiquitous wards, and hospitals became unwieldy, often anti-urban compounds. The Nolli map of Rome in fact shows the interiors of these earlier hospital buildings along with palaces, churches, and theaters, dignifying them as public buildings and useful urban instruments. By rehabilitating this sliver, or bar-building, type for this urgent modern need, we can connect strangers to their new home, while repairing the home itself and reestablishing a constructive dialogue with the past.

Background

The Hospital and Rome

This project was born over three years ago as a response to two seemingly unrelated problems: the temporary housing of refugees and others in crisis, and the devastating effects on the fabric of Rome of the late nineteenth and early twentieth-century urban *sventramento*— eviscerations or gutting. I believe these two challenges, one humanitarian and one urbanistic, could be addressed with a single solution. The expression in English is "killing two birds with one stone," but I would prefer to replace that destructive metaphor with a more constructive one: feeding two birds with one worm. With the COVID-19 virus, this project develops another dimension as a solution to temporary hospital space.

I've become increasingly aware over the last decade and more of teaching in Rome how much the city we inhabit today was radically transformed by the destructive interventions after the unification of Italy. The rich, subtle texture of the urban fabric (and neighborhoods) that Giambattista Nolli's map of 1748 represents was rent by the work of *sventramento* (evisceration) post-unification and pre-World War II. This gutting was meant to achieve a variety of ends, from first modernizing the image of Rome on the lines of Haussmann's Paris, to then accommodating traffic, to finally celebrating the power and reforming zeal of the Fascist regime. I've written about this process and its effects in my chapter "The Shape of Public Space: Place, Space, and Junkspace" in the book *Perspectives on Public Space in Rome, from Antiquity to the Present Day* (Routledge). There I trace the roots of this scale-less approach to streets and open spaces to the techniques of nineteenth-century Beaux Arts design and planning. With the intention of connecting the city for traffic, boulevards like viale Trastevere actually split the ancient Trastevere neighborhood in half. Conversely,

the via della Conciliazione that leads to Saint Peter's was meant to memorialize the agreement that split the Vatican from Rome and Italy, but it also eliminated the rich texture and scale of the Borgo Leonino neighborhood through which it passed, and destroyed the drama of the old approach to the Vatican basilica.
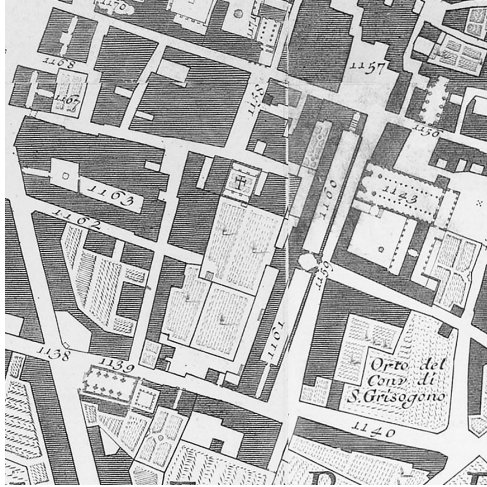

Figure 1 Nolli map, area of viale Trastevere; Ospedale di S. Gallicano no. 1160/61. Courtesy the Hesburgh Libraries, University of Notre Dame

In studying the city I've also come to appreciate some of the lesser known but sophisticated tools that the architects of Nolli's Rome brought to the urban fabric, and that we might reinvent for today. While Nolli's map is well-known among architects for the way he shows the interiors of churches and palace courtyards as seamlessly connected to outdoor public space, it's less appreciated that he also shows theaters and, oddly enough, hospitals. In researching Nolli's representation of the city's hospitals I can imagine this building type—long wards often anchored by a shared worship space—as a useful urban element that could be redeployed today as a flexible and effective means to recalibrate the scale of over-wide streets, and provide the short-term housing that the city often needs. This bar-building, long and narrow, actually fits just right into the center of Rome's gutted streetscapes. By rethinking its internal workings—preserving its flexibility but adding the services that modern functions require—the building can be made to serve new and even unforeseen needs, from refugee housing to temporary hospitals.

Before the modern development of private and semi-private patient rooms, hospitals consisted of large wards or multi-bed halls; plainly articulated, in a diagrammatic plan like Nolli's these spaces can look like long, narrow boxes; rather innocuous, they are sometimes indistinguishable from urban streets or alleys. Being long and relatively narrow—in proportion more like wide corridors than rooms—they had the primary merit (at least in warm and sunny Rome) of providing large, light and well-ventilated spaces. Indeed, the role of light and air was primary in eighteenth-century healthcare, as it had been for centuries; treatments for disease were as much improvised as tested, and it was for most patients the access to fresh air, hygiene, and regular meals that was improvement enough to, if not cure disease, at least prolong life.

While it is fairly clear why Nolli included the plans of palaces, churches, convents and theaters in his map of the city, it is not so obvious why he included Rome's hospitals. The former functioned as semi-public or public spaces—indeed, the ground floors of palaces were often accessible as secondary urban circulation, offering pedestrian shortcuts through the courtyard when the palace fronted two streets.[i] And palaces had many roles beyond private residences—as places of business, embassies, cultural centers, even theatrical spaces. But hospitals were not in any way so public. While serving the people, both citizens and pilgrims, they tended to serve especially those who could not afford to be cured at home. Places often of quarantine, they were hardly civic corridors or spaces for communal gathering. Perhaps Nolli saw them, morphologically, as analogous to other large halls in the city, especially churches. But it is also probable that he was interested in promoting Rome's enlightened care for the sick, and therefore the hospital as a type was worth calling attention to; in this case, in anticipation of the influx of tourists and pilgrims for the Jubilee Year of 1750, he was concerned to align Rome with other capital cities where hospitals had become prominent urban landmarks. Although Paris' and London's military hospital complexes are vastly larger than anything in Rome, they are rational and church-focused like the Roman hospitals. Unlike the Roman examples, however, the Invalides and Greenwich were far enough outside the heart of the city to create their own contexts; in other words, they were not constrained by urban
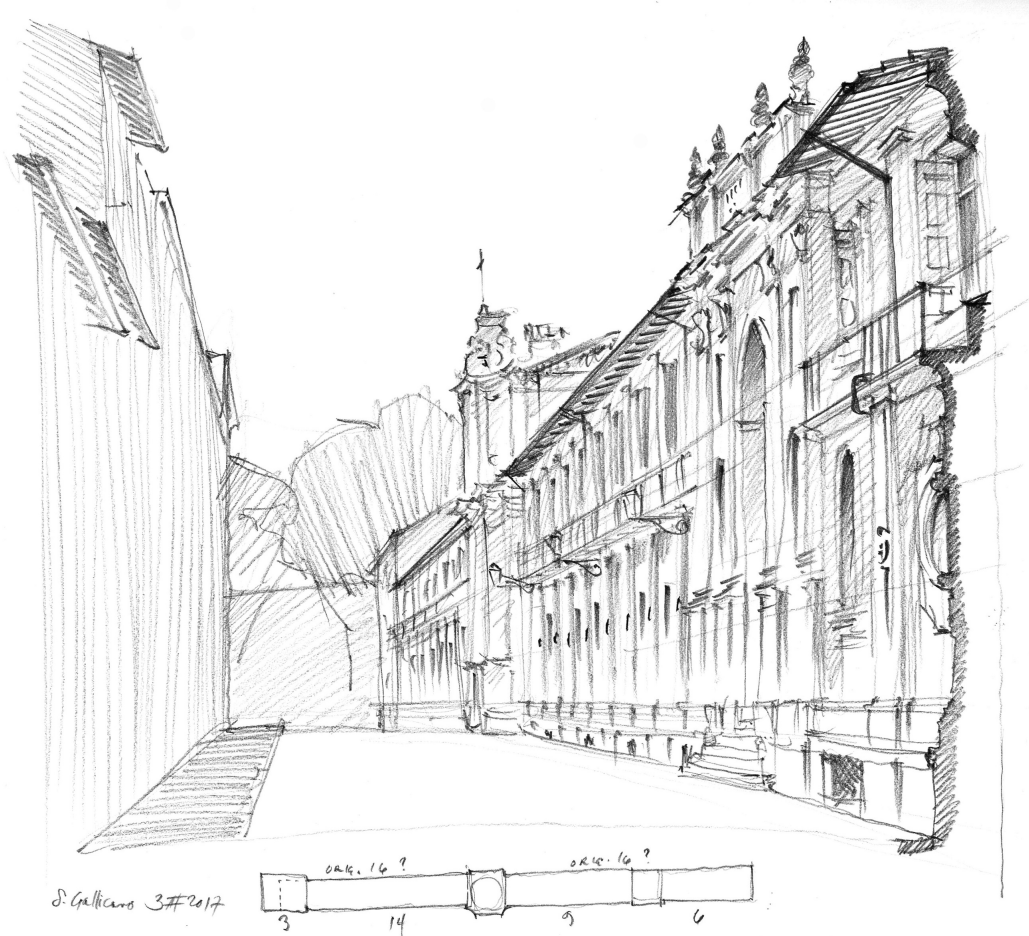
Figure 2 Ospedale di S. Gallicano, street view. Author

conditions, and were realized with far greater resources. What is remarkable about the more modest Roman hospitals is their nimble negotiation with their environment, and their sponsorship of the kind of incremental urbanism that the historian Joseph Connors has described in the context of religious institutions[ii].

Moreover, since Nolli's was at one level a tourist map, and hospitals were often needed by tourists (whether cultural or religious pilgrims), the prominence Nolli gave them could be practical. But it is also possible that, being an architect himself, with an eye for the elegant urban gesture, Nolli saw hospital wards as useful, rational urban elements whose formal potential was only beginning to be fully exploited. Indeed, they might still have something to offer in that regard today. As modern hospitals have become driven to grow ad hoc by internal needs, making them sprawling, ungainly urban oil slicks, it is worth

recalling the role hospitals once served as agents of urban cohesion. And the long, open hospital ward, long ago replaced by the private rooms whose origins are in the cells of monasteries and prisons, could serve today as functionally flexible spaces with the capacity to recalibrate the scale of overwide modern streets. Giambattista Nolli's map remains a landmark of urban mapmaking; but it is also an argument for a handful of building types—palazzi, churches, convents, theaters, and hospitals—whose complex urban roles his plans reveal with elegant clarity.

The hospital of S. Gallicano in Trastevere is an ideal example of the type. The first building for Pope Benedict XIII by the architect of the piazza S. Ignazio, Filippo Raguzzini, it's a simple structure with a central chapel and two long, unequal wings for men and women; advanced for its time, it included an external balcony accessible by staff to open and close the

windows and shutters of the wards without disturbing the patients, and water closets between every two beds with direct exterior ventilation. The hospital today is partly occupied by the Italian organization for the promotion of the health of migrants and the fight against the diseases of poverty, INMP (*Istituto Nazionale per la promozione della salute delle popolazioni Migranti ed il contrasto delle malattie della Povertà*).
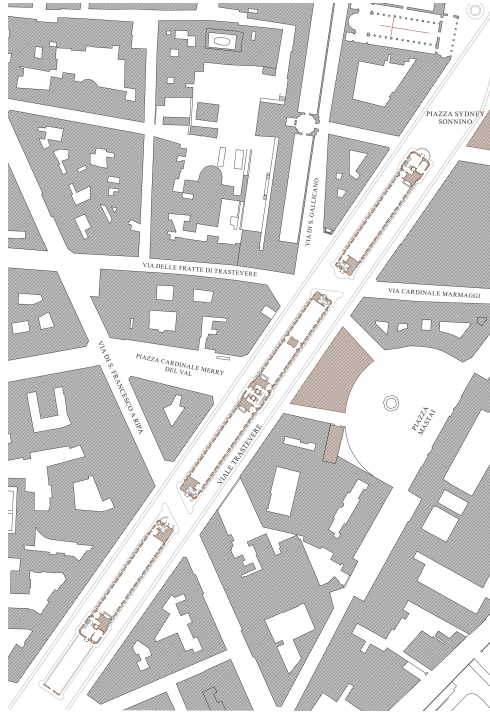

Figure 3. Proposal for viale Trastevere. Author

Proposal

Surgical Implants in the Urban Fabric

What I'm proposing to solve Rome's refugee crisis is a reimagined ward-type hospital, now a hospice for displaced people, with lodging on the top floor in a series of discrete two-bed units separated by bathroom modules, and on the main ground level below dining areas over a naturally-lit semi-basement with kitchen and workshop spaces. At the top of the central pavilion is a multi-faith worship space. A simple building, in other words, flexible and adaptable. Not a permanent answer to long term housing, but a dignified temporary solution for displaced people—refugees, victims of environmental disasters, the homeless, etc.—and the need for temporary hospital space in a pandemic. Functionally, the kitchen could also be a classroom for refugees to learn practical, marketable skills.

The merit of the type is its generic flexibility. Being divisible, it can be calibrated to a variety of housing needs, from single-sex to couples or families. This divisibility and repeatability (with variations of orientation and termination) makes it relatively nimble in its response to a variety of urban conditions, allowing it to privilege one side over the other, define piazzas, respond to changing block sizes, and link or terminate the infill elements. Naturally ventilated and cooled, it is a low-consuming building; built of durable, organic building materials, it is sustainable over the long term. Built on open land that effectively has no economic value, simple in form and with modular fixtures, it can be realized at relatively modest costs. Adapted to a variety of existing conditions, its repeatability would never be monotonous, but unique and responsive.

While the needs it serves are temporary, its impact on the urban fabric would be permanent and positive. A series of these sliver buildings surgically inserted into an overwide street or boulevard would effectively split the traffic-corridor in two, while maintaining multiple lanes of traffic—trams, cars, and pedestrians—and parking. The building could be injected into a void like the viale Trastevere or via della Conciliazione, accommodating traffic, parking, and public transit by a more careful calibration of dimensions on either side. Two streets emerge where there was one, more human-scaled and more effectively functional. The ends of the buildings might incorporate an outdoor market space for the vending of refugee-produced goods, softening its termini with semi-public spaces rather than facades.

Figure 4. Cut-away section: top floor housing, ground floor (raised) dining, lower level kitchen/service. Author

Permanent, flexible buildings that privilege urban public street spaces are an antidote to

highly specific object buildings that are neither adaptable nor capable of dialogue with their neighbors or neighborhood. Dignifying the presence of displaced peoples in the heart of the city is an antidote to their marginalization and transitory condition; having a permanent solution to temporary crises avoids dehumanizing the victims. While temporary structures are often necessary, architects can also fetishize their impermanence. And flexibility is often best served by simple, uncomplicated spaces that can adapt instead of complex structures that depend on their own mutability. It involves thinking of buildings as types rather than models or morphs.

Our political and societal crises are often the consequence of false choices: between tradition and innovation, between the native and the stranger, between the temporary and the permanent. A typological approach to the past distances modern historically-informed solutions from nostalgia or pastiche. With just a little creativity we can build on what is valuable from the past to make a better future, integrate the displaced and make better urban spaces, or solve short-term crises with long-term solutions. It's not a question of going back or going forward, but going together.

Figure 5. End view in a street as wide as viale Trastevere. Author

[i] Allan Ceen, *The Quartiere dei Banchi*, PhD dissertation (Ann Arbor: Garland, 1986)

[ii] Joseph Connors, "Alliance and Enmity in Roman Baroque Urbanism," *Römisches Jahrbuch der Bibliotheca Hertziana* 25 (1989): 209-294.