



**CATEGORY** Urban/architectural

**TEAM REPRESENTATIVE** Architect / landscape architect / urban planner

**LOCATION** Dikemark - Asker municipality

**POPULATION** 57 238 (Asker), 1300 (Dikemark)

**STRATEGIC SITE** 1500 ha

**PROJECT SITE** 11 ha

**SITE PROPOSED BY** Asker municipality, Oslo University Hospital and Oslo municipality

**OWNER(S) OF THE SITE** Oslo municipality, Oslo University Hospital

**COMMISSION AFTER COMPETITION**

Zoning plan, possibility for a building commission

## HOW THE SITE CAN CONTRIBUTE TO THE ADAPTABLE CITY?

Peacefully situated in pastoral surroundings just outside of the city, Dikemark was considered the perfect location for Oslo's new psychiatric hospital at the turn of the 20th century.

As its activity related to psychiatric treatment has been phased out over the years, today most of the buildings stand empty and have been listed for protection.

Now the entire area needs to be adapted to a new time and filled with new content.

## CITY STRATEGY

Dikemark is in many ways a unique place within its regional context thanks to its preserved, landmark architecture, its picturesque landscape and its history and identity. Yet, in spite of all its qualities, Dikemark faces a great challenge as its hospital functions will be relocated to Oslo, rendering all buildings empty. How to ensure the development of a new and attractive society at Dikemark?

There is a strong wish in the municipality to establish a complete and viable society at Dikemark with jobs, private and public services.



## SITE DEFINITION

Dikemark is a place with a strong identity, first and foremost related to its former use as a psychiatric hospital, but also in its architectural and spatial qualities. The site and its buildings is located in scenic surroundings by the Verkensvannet lake, encircled by forests and fields.

An architectural landmark designed almost entirely by the architect Victor Nordan, and built between 1902 and 1934, Dikemark Hospital represents today a unique historical record of an era and moment in medical treatment.

Within the project site there is about 20 patients and administrative buildings and 15 workshops. In addition, there is staff housing, a community house and a dormitory. Together the existing buildings on the site constitute approximately 80,000 m<sup>2</sup>, of which the hospital buildings comprise less than 55 000 m<sup>2</sup>.

Endowed with its own waterworks, power plant and surrounding farmland, Dikemark Hospital was almost a self-sustained community. During its heyday, it housed over 900 patients and had a staff of 1500 employees.

## ADAPTABILITY: MAIN CHALLENGES TO TAKE INTO ACCOUNT

For the overall plan competitors are asked to investigate a total development potential between 100 000 and 250 000 sq. m. of residential and mixed-use programs (existing buildings included). What types of functions can take place there? How to best make new use of the existing buildings? How to bring new life to the area? How to negotiate the issues of memory and preservation along with new use and adaption? Can Dikemark take on a new regional role?

The competition asks for innovative proposals that can open up for new possible futures for Dikemark.

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