Mobile medical units may travel around the Southeast Asia to provide immediate medical care and may leave the area without changing much of its environment. Mobile care has bigger coverage for rural area than centralized hospital but the care is limited only to the short period, while visiting.

Therefore, we propose “Moved to Care” mobile medical unit expands while its stay and leaves locally built “Legacy Centre”. Selected local people will be educated intensively so that they can provide informative service to their own local. After “Moved to Care” unit and medical staffs leave the site, the legacy centre continues to exist as a “Local Centre”, providing light health treatment, education and information. Together with physical space “Local Centre”, educated people will make the Moved to Care socially sustainable architecture. In the long term, Local Centre will act as a docking station for “Mobile Centre”, such as regular medical service, school, religion, etc. When future help comes in the 20’ container form, the mobile centre will have better association with the local centre spatially and functionally.
Moved to Care:

“Moved to Care” units are mobile facilities, built from 20’ container, sized 2.4mX2.5mX6m. The use of universal size container maximizes the ease of provision and can source from all around the world. The primary “Moved to Care” unit accommodates operating room with built-in surgical facility and basic drug storage, and this enables to provide immediate medical care on arrival. The secondary unit accommodates consulting room and temperature controlled drug storage. This supporting unit may or may not be accompanied by the primary unit subject to local condition and requirement. Both units have solar panels installed on the roof to assist electrical power in poor infrastructural environments.

Legacy Centre

By providing basic materials and construction guide, the local will be encouraged to build their own legacy centre, which extends the function of “Moved to Care” from immediate healthcare to prevention and education on hygiene, food, and well-being. Provided basic materials comprise of steel frames, floor panels, apitong, roof membrane, recycled goods truck cover, and these can be sourced from nearby developed areas. Cladding will be added with locally sourced materials, such as bamboo. Columns and beams are cut to module size to build a modular architecture.

Materials of Each Legacy Unit

1. Foundation (cement 300 x 300 x 1000mm) 2. Column (SRS 100 x 100 x 5500mm) 3. Column (SRS 100 x 100 x 4900mm) 
4. Column (SRS 100 x 100 x 4000mm) 5. Floor beam (THK 16 x 2400mm) 6. Floor beam (THK 26 x 6000mm) 
7. Ceiling beam (SRS 100 x 100 x 2300mm) 8. Ceiling beam (SRS 100 x 100 x 3400mm) 9. Ceiling beam (THK 26 x 6600mm) 
10. Roof frame (Aluminum □ 6600 x 2300mm) 11. Recycle truck fabric 12. Floor slab (apitong plywood 1200 x 2400mm) 
13. Window frame (apitong plywood 1150 x 2400 x 90mm) 14. Bamboo curtain 15. Bamboo wall 16. Curtain frame (1500 x 2300mm)
17. Bamboo curtain 18. Bamboo short wall (2300 x 950 x 20mm)
Local Centre

Legacy Centre can be built in various size and layout subject to local popularity and site condition, as shown in the diagram. Module of Legacy Centre and the “Moved to Care” container dimension 2.4mX6m are identical, and this maximizes the variety of layout to fit to site condition. A number of 2.4mX6m basic modules can be connected in a row to create one big room or in a zigzag shifted form to create a number of individual rooms with decent relationship with outdoor space. Three sample plans are shown in this panel, creating different care environment.
Local & Recycle Materials

- Recycled membrane from goods truck cover (Reference: Feritag)
- Apitong: Locally common material in South East Asia
- Locally produced bamboo

Turning Waste Plastic Bottles into Solar Bulbs

![Diagram of recycling process]

- Bleach
- Water
- 

![Diagram of solar bulb]

![Diagram of assembled solar bulb]