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Chapter One

Designing with Care and Caring with Design

Rob Imrie and Kim Kullman

1.1 Introduction

Research in anthropology, human geography, sociology and related areas is exploring, increasingly, the caring labour that goes into shaping and supporting the precarious attachments between bodies, materials and spaces that compose built environments (see Gregson *et al.* 2009; Till 2012; Denis and Pontille 2014; Mol *et al.* 2010; Schillmeier and Domènech 2010). While the notion of care has been present in past thinking about the design of objects and spaces, it still remains understated and unexplored in design discourse and practice.¹ It is our belief that now, more than ever, a rethinking and reappraisal is required about the connection between design and care, as issues such as sustainability, inclusivity and ageing populations ask for design that conveys certain relational values, along with a renewed engagement with politics and ethics.

We consider the resurgence of ideas about care particularly relevant to the design of built environments, and an objective of this volume is to document the ways in which concepts of care are shaping present modes of design, with a focus on urban settings. The contributors to the book bring concepts and practices of care and design into a dialogue to explore the production of everyday environments. Representing different areas of enquiry, from human

¹One can detect references to care in different literatures and ideas in architectural writings and commentaries about the city. For instance, the publications of Alvar Aalto and Frank Lloyd Wright show much understanding of the ethical nature of design, and among authors exploring urban utopias, ranging from Ebenezer Howard to Le Corbusier, there is a pre-disposition towards designing with ethical sensibilities to the fore.

geography, sociology and art practice to gerontology, architecture and science and technology studies, the authors guide the reader through interdisciplinary debates on care, further enriching these through theoretical and empirical elaborations on a range of case studies on design projects and practices, including the construction of lifelong kitchens and care centres, the planning of public parks, as well as urban curating and post-disaster recovery. The diversity of perspectives and themes demonstrates that cities are essential sites for testing the possibilities of an urbanised world to deal with recent demographic, economic, natural and social changes – a challenge to which strengthening the relationships between design and care seems to offer a timely response.

The primary purpose of this book is to stage an encounter between design and care so as to advance relationally aware, as well as politically and ethically responsive, forms of crafting urban environments. We are especially interested in stimulating an exchange of ideas and inspirations between design and care by engaging with the ways in which the skills and sensibilities of caring can be expressed through design practice in order to enhance the conviviality and wellbeing among those who inhabit, and depend upon, cities. We are *not* seeking to develop normative ideas or theories of care, design or their interconnections, but rather to detect and amplify the variegated ways in which the two are, and could be, brought together in the shaping of urban objects and spaces. The contributors to this book adopt different approaches to ‘care’ and ‘design’, giving the notions a variety of characteristics. What unites these diverse understandings is not so much an endeavour to fix care and design or discover their essence, but a willingness to forge new connections between them.

In this introductory chapter, we provide conceptual and empirical orientation for the rest of the book by exploring how practices of caring and designing have been held apart or brought together at different junctures, and how the recent upsurge in academic work on care can offer critical methodological and pedagogical ideas ~~and orientations~~ for those involved in the shaping of the built environment. We begin by discussing recent work on care in the social sciences to clarify its underpinnings and demonstrate how the notion might be deployed in support of design skills and sensibilities that are responsive to the fragile interdependencies of the world. We then turn to explore ‘good urban form,’ which we consider a fundamental part of the attempt to study and theorise the design and use of civic spaces and the political and ethical relations that they facilitate. While there are countless definitions of good urban form by academics and practitioners alike, we suggest that, historically, the composition of cities has been shaped by ideas that are often insensitive to human

and nonhuman diversity and wellbeing, and therefore work against the ethos of caring. We conclude by introducing the chapters in this volume, highlighting relevant themes and how they contribute to debates around design, care and urban environments.

1.2 Care as a concept and practice

We will now examine the notion of care in more detail, with a particular focus on the current proliferation of writings within the social sciences. Researchers in social policy (Bowlby *et al.* 2010), human geography (Amin 2012), sociology (Sayer 2011) and science and technology studies (Mol *et al.* 2010), among others, have turned to earlier feminist theorisations on the ethics of care, which, against universal and individualist notions of morality, rethink existence through the idea of interdependence to bring out the fragility of the world and the need to care for it (Tronto 1993; Noddings 2003). As the concept of care has begun to circulate across disciplinary boundaries, it has left several, sometimes contradictory, definitions in its wake, which have clarified and obscured the notion in equal measure. However, while care, as Phillips (2007: 1) argues, is a 'nebulous and ambiguous concept', its open-ended character is an incentive to refrain from simplistic, potentially constraining, definitions and approach the notion obliquely by considering the shifting environments and embodied encounters that enable practices of care in the first place.

Although there are differences over the exact definition of care, most academic work shares the idea that care is less about predetermined behaviours than a situated, embodied way of responding to interdependence as it shifts across the lifecourse (see Tronto 1993; Noddings 2003; Phillips 2007; Bowlby *et al.* 2010). Care involves acknowledging the transforming character of the social and material environment and our capabilities to act as part of it by cultivating sensitivity to 'the attachments that support people' (Winance 2010: 110). As a reaction to approaches to moral action that embed ethics in general principles, care proposes an alternative orientation by suggesting that these rarely suffice in mundane situations, where people need to develop solutions to problems emerging amidst the unpredictabilities of life (Mol *et al.* 2010: 13). Rather than referring to external ideas about morality, care asks for skills and sensibilities that attune people to the fragile relations making up daily settings and enable them to judge the qualities of those relations so that they can be appropriately supported.

Despite eschewing general principles by maintaining the grounded character of ethical action, care is a habitual practice that can be

refined over time. Seeing care as a practice is essential in order to distinguish between 'good' and 'bad' care as well as to avoid 'over-idealizing care', not least as care may often serve to 'reinforce patterns of subordination' (Tronto 1993: 116) in the society through, for example, the unequal treatment of carers or the abuse of caring relations by those in positions of power (see Phillips 2007: 140–154). The practice view on care is therefore an attempt to outline features of good care in everyday environments by attending to the 'full context of caring'. As Tronto (1993: 118) suggests: 'we must consider the concerns of the care-receiver as well as the skills of the care-giver, and the role of those who are taking care of' (Tronto 1993: 118).

To further expand on the practice view, Tronto (1993: 127) has outlined 'four ethical elements of care': 'attentiveness, responsibility, competence and responsiveness', which refer to dispositions that sensitise people to the needs of those around them and invite recognition of their involvement in a wider infrastructure of care. The four elements are not intended as moral principles, but rather as potential skills and sensibilities that might be considered as conducive to good care – others have enriched this list with 'empathy', 'compassion', 'generosity', 'imagination', 'kindness' and related qualities (see Noddings 2003; Hamington 2004; Phillips 2007; Bowlby et al. 2010). Common to such efforts to define the characteristics of caring is the readiness to overcome the Euro-American tendency to demote care to privatised, often gendered, spaces, and instead create public debate over how 'caring is intertwined with virtually all aspects of life' (Tronto 1993: 119).

The practice approach also suggests a pedagogy that takes bodily engagement as a starting point for stimulating habits of caring (see Shilling 2011). Hamington (2004: 45) notes that 'the knowledge necessary for care is more than a collection of discrete, articulated data; it includes a web of entangled feelings and subtle perceptions understood through the body'. Here, the ethics of care could be seen as a form of generosity, occurring 'at the level of corporeality [...] that constitutes the self as affective and being affected' (Diprose 2002: 5). Although care theorists view bodily susceptibility as an inevitable part of life, this does not involve abandoning 'active' notions of the individual in favour of 'passive' ones, but accepting that vulnerability is omnipresent in the world, which presupposes a different type of agency, the agency of caring (see Turner 2006).

Contemporary work on care elaborates on the above arguments by shifting the attention from human interaction to the material conditions that facilitate caring relations (Mol et al. 2010; Schillmeier and Domènech 2010). Research in science and technology studies, for example, has drawn attention to how care is often mistakenly distinguished from mundane artefacts and technologies, which are taken as



apersonal and cold compared with the assumed human warmth and intimacy of caring (Mol *et al.* 2010: 14). However, caring practices are inescapably dependent on technologies, such as oxygen masks, wheelchairs, farming equipment and mobile phones, which, in their own distinct ways, mediate caring relations, as studies on diverse mundane settings indicate, from hospitals and homes to farms and telecare services (Mol *et al.* 2010; Schillmeier and Domènech 2010).

Research also shows that artefacts and technologies 'do not work or fail in and of themselves. Rather, they depend on care work' (Mol *et al.* 2010: 14). A growing number of studies highlight the fragile constitution of material infrastructures, arguing that these require continuous repair and maintenance to hold together (Amin 2014; Puig de la Bellacasa 2010). Material infrastructures are relational entities, meaning that they are far from fixed phenomena, but need to be painstakingly sustained in a range of caring practices, from street sanitation work to the renovation of buildings (Graham and Thrift 2007; Gregson *et al.* 2009; Till 2012; Denis and Pontille 2014). Although earlier feminist thinking explored nonhuman materials as part of caring relations (see Tronto 1993; Noddings 2003), recent work has significantly expanded on this theme by considering the precarious entanglements and ecologies between nominally human and nonhuman bodies that make up the common world (see Puig de la Bellacasa 2011).

A concurrent strand in present research is the endeavour to understand the temporal and spatial specificities of care, particularly how complicated 'caringscapes' (Bowlby *et al.* 2010: 7) have emerged due to recent social, political and technological transformations in Euro-American settings. While care has often been regarded as taking place within bounded sites, such as privatised or institutionalised environments, an emerging line of enquiry suggests that care expands beyond any single location or temporal frame (Bowlby *et al.* 2010; Mol *et al.* 2010; Schillmeier and Domènech 2010), drawing together objects, people and places from near and far through, for example, digital technology, personal mobility and other practices that confuse distinctions between public and private, distance and proximity, local and global.

Those who study the urban realm have traced out 'transitory spaces of care' (Johnsen *et al.* 2005: 323) in cities, arguing that environments usually deemed public and impersonal are characterised by ongoing caring work, as strangers sustain forms of conviviality and kindness in their momentary encounters (also, see Bowlby 2011). In particular, the work of the [redacted] of Amin (2012) has sought to understand the material mediations of care in urban space, developing a new 'politics of togetherness' in order to 'make the connections and dependencies visible, to reveal the value of a shared and functioning commons, [...]



so that care for the urban [...] leads across the social fabric' (Amin 2012: 79–80). Most important, following from this argument is the idea that built form can serve as the basis, albeit a constantly shifting one, for 'an expanded politics of care' (Amin 2012: 34) that regards material environments and infrastructures as a central component of, even a precondition for, interpersonal relations in urban settings.

1.3 The problem of 'good urban form'

In this section, we turn our attention to an unexplored theme in contemporary research – the relationship between care and design – and contextualise it within longstanding debates on 'good urban form'. Any effort to study, theorise or shape urban spaces presupposes, implicitly or explicitly, certain assumptions about the 'good city,' or the 'kind of urban order that might enhance the human experience' (Amin 2006: 1009). From the earliest urban settlements, the manner in which cities have been understood, inhabited and developed has always been premised on geographically and historically situated assumptions about the relationship between values and material form. Important to this endeavour are the writings of Kevin Lynch (1981), who elaborated his notion of 'good urban form' to investigate and evaluate the political and ethical dimension of this relationship, and especially how it becomes translated, in different times and places, through practices of design, into the material infrastructure of cities. For Lynch (1981), architects, designers and other professionals who shape urban environments are engaging in a 'material form of doing ethics' (Verbeek 2011: 91) by folding values into the physicality of space.

Questions of good urban form are relevant to all authors in this volume, and Lynch (1981: 151–186) highlights a central design challenge that they seek to foreground: the importance of attending to the 'fits' and 'misfits' between people and built form, as well as the politics and ethics implicated in these. There is a well-developed literature highlighting that the design and use of urban objects and spaces are not necessarily sensitised to the diverse needs of bodies and collectives, thereby creating misfits that limit the caring potential of everyday environments (Imrie and Hall 2001; Pullin 2009).² Garland-Thomson

²The term 'misfit' is one of the core conceptual underpinnings of Kevin Lynch's 1981 book *Good Urban Form*. Garland-Thomson (2011) also refers to the term 'misfit' and uses it in ways not dissimilar to Lynch. There is, for us, a task to be done to trace the genealogy of the term and the different ways in which it has been used to illuminate the interrelationships between materials, bodies and design.



(2011: 594) refers to misfitting as 'a way of being in an environment' and a material arrangement that induces incongruence between things. Misfits highlight the 'discrepancy between body and world' and draw attention to the injustices of things that do not work (Garland-Thomson 2011: 593).

Misfitting includes the design of urban space that can constrain bodies that do not combine well with infrastructure, such as steps into buildings that prevent ease of movement for wheelchair users, or street furniture that creates obstacles for vision-impaired people (Boys 2014). The temporalities inscribed into spaces are also a common cause of misfit, as demonstrated by traffic lights and the opening and closing of automatic doors on train carriages. In both instances, people's abilities to cross a road, or access a train, is shaped by regularised rhythms that have been pre-programmed into the workings of infrastructures. This temporality may be indifferent to contrasting corporeal capabilities, and for people with neurological conditions, such as obsessional slowness, the rhythms of a place can create anxiety and be debilitating (Lam *et al.* 2008; Ganos *et al.* 2015). The material of misfitting is also entangled with social attitudes that can perpetuate exclusions based around identity, including sexuality and gender. An example is public toilet provision that is rarely gender neutral and may force transgender people to use facilities that do not accord with their embodied identity (Doan 2007).

These illustrations draw attention to the often problematic encounters between people's bodily capabilities and built form. For Lynch (1981: 158), such encounters constitute the very foundation of urban ethics, because they raise essential questions about how should places 'be fitted to what we want to do', and 'how should we act in the world' to create environments that respond to the 'wily plasticity of the human being'. These questions are relevant to our focus on interdependencies between urban form and the body, and the different ways in which people are embodied by design, and, conversely, the power of design in shaping embodiment. Given the directive nature of design, or its capacity to shape experiences, we ask why is there often failure to respond to diversity and reluctance to cultivate caring relationships among urban collectives? Here, it is important to explore why current ways of designing continue to produce spaces that result in systematic incompatibilities between bodies and built form.

The authors in this book attend to such questions through the notion of care and its relational ethics and politics. While recognising that care is as much a part of design as any other practice and relationship, the authors note that its potential has so far not been sufficiently explored within contemporary design. When the notion of care does



appear, it tends to assume relatively limited forms and functions. For example, the obligation to take care by ensuring that a building or object meets specified standards of quality and performance is an enduring characteristic of the design process. From the earliest periods of architectural production, practitioners have been bound by professional and legal codes, specifying their duties and responsibilities in relation to assuring a minimum quality of design (Imrie and Street 2014). Codes range widely, including specifications about weight-bearing loads on building structure to fire risk and safety, including means for ease of human evacuation. These obligations to care specify an ethical disposition that revolves around what Engster (2005) describes as the negative duty to refrain from causing harm (see Wicclair 2011).

Care is also present in the contrasting, positive, disposition that directs designers to engage with people dependent on the built environment, and to discuss, evaluate and respond to their vulnerabilities, desires and needs. This ethical attitude can be found in design practices that, after Pallasmaa (2009: 66), build on a 'craftsman-like ethos and maintain an intimate, tactile connection with the work', through, for example, attending closely to the embodied and material situatedness of design. Coinciding with this attitude is the attempt to elaborate participatory methodologies, such as 'co-design', which incorporate the diverse views and skills of users ~~into the design process~~, and is often referred to as a way for professionals to develop empathy with clients (Strikfaden and Devlieger 2011). While important, such approaches are sometimes seen as an indication that it is easy for a designer to empathise with others. This, however, masks a central characteristic of practices of caring explored by the authors in this book: engaging with and understanding the experiences of others is an acquired ability, based on a precarious process that requires constant attention (Köppen and Meinel 2015).

Longstanding design criticism, often stemming from within the profession itself, provides further insight into the challenges involved in cultivating caring dispositions in design, particularly through exploring pedagogic practices. Fry (2010: 17), for example, suggests that 'design is not taught or (in practice) led from a caring perspective' and he questions the training of architects for acculturating students into what Sarfatti-Larson (1993: 10) describes as an 'idealised notion of architectural practice'. Webster (2005: 274) documents the domination of design studio culture in the teaching of architects, and its cultivation of 'implicit criteria relating to notions of aesthetics or architectural value'. Here, Webster (2005) is referring to the centrality of design studio education that has changed little since the late nineteenth century, and which is focused less on



the specificities of people's interactions with design, and more on inculcating the importance of architecture as the making of art objects, and with 'project appearance instead of the actual design process' (Bashier 2014: 424).

For Lynch (1981: 147), the challenge is to change designers' sensibilities from their 'focus on things', to the broader impact of design on collective wellbeing. This challenge is not without problems, as design knowledge is often divided into discrete entities, reflecting and reproducing professional specialisms, and not always well-related to the contexts of practice (see Sarfatti-Larson 1993). By contrast, the American architect, Frank Lloyd Wright (1943: 339), advanced an education for architects that took them away from the design schools and into a pedagogy based on 'building design from the nature of construction', or the materialities of everyday practice. Likewise, Vitruvius (1960: 5), over 2000 years ago, noted that those 'who relied only upon theories and scholarship were obviously hunting the shadow and not the substance'. This sentiment is also echoed by Lynch (1981: 154), who advocates 'immediate experience', or 'the here and now, place and the actual action in it', as the basis for an education that enables designers to develop a caring awareness of the variations in embodied encounters with built form.

What is being referred to here is the importance of experiential and practical knowledge in shaping caring sensibilities, including the immersion of architects and designers into everyday lives. However, a widespread observation is that the actions of design professionals are often shaped by contractual obligations to a client, or activities that are not necessarily orientated towards the wider good (see Imrie and Street 2011). This is further compounded by an ideology of professionalism and value neutrality, or a disposition that does not necessarily entail recognition of the ethical basis of practice (also, see Till 2009; Imrie and Street 2011). The architect Le Corbusier (1928: 24), in seeking to defend the expert-practitioner, outlined a still commonly held understanding about the social standing of the professional: 'the harmonious city must be planned by experts who understand the science of urbanism [...] once their plans are formulated they must be implemented without opposition'.

A related tendency is the rationality of design, often evident in the techniques and tools used by professionals that tend to reduce embodied, material and spatial complexity to arch-types, and the justification of identikit designing that 'regards variation and difference as a nuisance' (Sayer 2011: 85). As an example of such standardisation of urban form we may take the way bodily movement is often understood within the design process as 'propositional knowledge' that is 'abstract and disembedded' (Sayer 2011: 61) from the



manifold nature of embodiment. For instance, design guidance to architects, including manuals instructing how to achieve building regulation standards, rarely depart from representing the body as 'a normate', or what Garland-Thomson (1997: 8) refers to as 'the corporeal incarnation of collective, unmarked, normative characteristics'. Apart from excluding bodily diversity from the design process (Imrie 2006; Boys 2014), there is often the expectation that where misfits between urban form and bodily performance occur, it is not unreasonable for people to adapt themselves to the elements of the built environment that do not accord with their needs.

How, then, might it be possible to cultivate caring dispositions and practices among those involved in the everyday shaping and use of urban environments? How to design places that are not reduced to types, or normate body parts, but rather where the relationalities of urban living are in the foreground? It could be argued that for care to become realised, such tools need to be aligned to a purposive ethics and politics of design. As demonstrated by the authors in this book, a caring disposition is more likely to recognise the complex and situated character of bodily interactions with urban materials, and to provide the means for people to access designed environments, as well as to engage in what Lynch (1981: 164) describes as guiding and opening up collective understandings of design, without coercion, by 'inventing and communicating new forms of place b[odily] our'. The authors indicate that a caring disposition involves t[he] recognition of the affective and sensory qualities of materials, and that to care, as designers, entails responsibility to those who use space. Such responsibility is to avoid overdetermining how urban form will function, or to define it through narrow categories that essentialise bodies and collectives. Instead, to care is to recognise the irreducible nature of human and nonhuman interaction with (in) space, and to ensure that 'the setting is sufficiently flexible for them to reshape it to their requirements' (Lynch 1981: 167).

1.4 The collection

A question that remains outstanding in the above work is what role design might have in the shaping of caring environments, and what kinds of methodologies and pedagogies are required to ensure that caring becomes an integral part of design. As this book demonstrates, although the notion of care occupies a relatively minimal position within design, recently there have been attempts to introduce new



approaches and concepts to inspire caring modes of designing, which share the commitment to craft objects, spaces and services that are attentive to human and nonhuman specificities. These approaches are based on the idea that it is possible for designers, through engaging with communities and recognising their entanglements with the world, to create environments that support the interdependencies of daily settings (see Imrie and Hall 2001; Steinfeld and Maisel 2012).

As the authors in this volume indicate, to foster caring relationships, designers do not so much need new instruments or methods as skills and sensibilities that allow them to attend to the fragile attachments among the human and nonhuman others for whom they design. Developing receptivity to the changing and open-ended character of the world does not necessarily require novel normative frameworks, standardised methods or moral principles to guide the design process, but rather more responsive ways of working that allow built environment professionals to trace out the complex relationality of the objects and spaces that they are shaping and how these 'mediate human actions and experiences, thus helping to form our moral decisions and the quality of our lives' (Verbeek 2011: 90). We will now provide an overview of how the authors in this book address such key questions in their distinct, but interconnected, ways.

The 12 chapters that comprise the rest of the volume examine the relationships between design, care and cities through the context of diverse domestic, public and institutional settings, and offer a range of pedagogical, methodological and theoretical reflections. We start with a chapter by *Sheila Peace*, who writes from the perspective of social gerontology and considers contemporary challenges of inclusive design in light of urban demographic change. Peace connects the study of interior design with the concept of care and asks how the latter might have relevance for the way homes, and particularly kitchen spaces, are shaped. We learn that various factors, from cost effectiveness and building regulations to a lack of participatory design, works against the creation of age-friendly environments. Peace demonstrates how an understanding of the variation in people's use of domestic spaces across the lifecourse can offer designers insight into ways of enabling ageing in place and facilitating home care arrangements that respond to human change.

Daryl Martin continues to discuss the theme of domesticity, albeit by shifting the focus from homes to institutional settings. Drawing on sociological research with staff and visitors at Maggie's, a British charity offering support for people with cancer through diagnosis and treatment, Martin indicates that the organisation provides an alternative to mainstream clinical environments through its unique



architecture, which is designed to inspire a sense of homeliness among people who work and spend time in the buildings. The kitchen in particular has a central role in facilitating such an atmosphere due to its prominent place within the centres, and also because it is used by staff to mediate relations of care in ways that appear to be in stark contrast with formal medical settings. The architectural brief for Maggie's refers to the affective potential of design, and Martin suggests that this is evident in the welcoming hospitality and mutual generosity among visitors and staff.

Turning momentarily away from architecture to public space, *Ola Söderström* elaborates on the themes introduced by Martin through a geographical investigation of the relationship between the urban milieu and psychosis, with a focus on young people with mental illnesses in Lausanne, Switzerland. The chapter describes a broader shift in contemporary health care, which has entered a 'post-asylum' era due to the de-institutionalisation of services. This raises a series of new challenges for the design of urban spaces for people with psychotic troubles. Söderström reverses the perspective of mainstream studies in psychiatry by engaging with the experiential aspects of urban space to describe a set of design features that he sees as conducive to a wider 'landscape of caring,' which takes into account the emotional and sensorial needs of people with mental health issues. Like Martin, Söderström attends to the subtleties of urban environments, from scale to atmosphere and rhythm, highlighting the difficulties of designing for people who might experience the same space in diametrically opposed ways. However, he also demonstrates that responding to the challenge of designing for people with psychotic troubles opens the possibility to craft spaces that are inclusive of all.

Joyce Davidson and *Victoria L. Henderson*, also applying a geographical perspective, address current challenges in inclusive urban design by drawing on a corpus of autobiographical texts by writers with autism spectrum disorders (ASD). Highlighting the distinctive spatial experiences of ASD individuals, Davidson and Henderson use their data to draw attention to features in the urban environment, such as fluorescent lighting and poorly sound-proofed buildings, which often pass unnoticed among 'neurotypical' people but may cause distressing experiences of sensory overload among ASD persons. Similarly to Söderström, Davidson and Henderson demonstrate how a detailed understanding of the affective and sensory aspects of people's engagements with the city could be incorporated into design practices to improve access not only for ASD people but a wider urban population. Attending to bodily specificity, the authors argue, is paramount to the design of caring built environments that allow for 'neuro-affective diversity'.



Charlotte Bates, Rob Imrie and Kim Kullman draw on contemporary urban theory to discuss three particular case studies: a public park in London, a hospital garden in Japan, and housing in Japan and Korea. In doing so, they develop the notion of 'configurations of care', whereby they refer to the ways in which designers, displaying certain ethical and political intentions, arrange human and nonhuman materials to accomplish caring relations in urban spaces. Instead of adopting an explicitly normative stance on care and design, the authors attend to diverse qualities that might be said to characterise caring environments, concentrating on three in particular, *ownership*, *healing* and *openness*. Each of these offers insight into the ideas, materials and practices that come together in the making of caring design. While highlighting different aspects of the built environment, the three configurations share a view of caring design as characterised by a spatial permeability, which allows citizens flexibility in negotiating and sustaining their relationships to their everyday urban surroundings.

Writing from the discipline of landscape architecture, *Jacky Bowring* concentrates on the redesign of urban environments in the aftermath of the destructive 2011 earthquake in Christchurch, New Zealand, leading to 185 deaths and the devastation of 80 per cent of the urban fabric in the central business district. Describing how sites of trauma were protected, Bowring shows how these exposed a complex of memories and emotions in urban space, and that caring for the sensitive environments demanded both practical and empathetic responses. While the web of caring most directly encompassed those individuals who were affected by the trauma of the event, various nonhuman entities also became involved, including mementoes brought by people, as well as ruins and surviving trees, each requiring a particular form of care that was attentive to the ecological specificities of the site. Bowring's chapter thereby brings into focus the profound fragility of urban environments and how design can both express sensitivity to and respond to such fragility.

After discussing care and its different manifestations in the design of urban environments, we turn to explore how practitioners have been developing design pedagogies and methodologies around the notion of care. Looking at a historical case, *Juhani Pallasmaa* describes in close detail Finnish architect Alvar Aalto's work on the Paimio Sanatorium (1929–1933) in order to argue for an approach to architectural training that encourages to design with *human* fragility in mind and, particularly, for the widest possible range of sense modalities so as to make the environment more responsive to bodily diversity. Here, Pallasmaa claims, designers will benefit from developing their empathetic and compassionate dispositions, which he regards as acquired abilities, learned through embodied engagements with others and their worlds.



For Pallasmaa, however, this form of caring is increasingly difficult to sustain due to, among other things, the proliferation of building regulations and the widespread devaluation of manual skill, all of which, he argues, may undermine the inclusive potential of design.

Jos Boys continues to investigate the theme of professional training by discussing how ideas about care are mobilised within architectural education in the UK, and particularly how these are refracted through the concept of place-making. Boys offers a constructive criticism of a widely used textbook in the area, *Analysing Architecture* by Simon Unwin, which outlines a phenomenological approach to inspire caring sensibilities among professionals through stressing the emotional, sensory and material qualities of place. While insightful, Boys argues that the book advances a series of unsustainable ideas, among them the assumption about the universality of certain built forms and experiences, which, according to Boys, disregards bodily diversity and difference as well as the fact that built environments can often be profoundly disabling. Boys therefore draws on contemporary social theory and critical design to develop alternative ways of understanding care in architectural education, ones that direct attention to the potential exclusions of design as well as invite professionals to actively recognise and creatively disrupt normalising tendencies in current practices.

Among the alternative pedagogical resources that Boys mentions is the work of *Sophie Handler*, whose chapter describes practices of 'urban curating': art and performance-based interventions into urban space that seek to uncover hidden experiences, knowledges and relations within those spaces to effect a rethinking of them. Handler discusses her work with elderly people in London that attempts to trace the rich, but largely neglected, geographies of ageing in urban environments through participatory methods, such as walking, dancing and storytelling, each providing a creative counterpoint to prevailing ideas of ageing as a demographic, economic and health problem. Instead, Handler demonstrates how designers could benefit from exploratory modes of engagement with everyday settings in order to facilitate a more caring design process that seeks to counteract stereotypical assumptions about different people and involve them on their own terms.

Tomás Sánchez Criado and *Israel Rodríguez-Giralt* also elaborate on alternative design methodologies through a discussion of *En torno a la silla* (ETS), an experimental collective in Spain, which seeks to develop more accessible, affordable and multi-functional technical aids for disabled people through extensive collaborations between social scientists, designers, craftspeople and users. Constituting an alternative to mainstream participatory design, ETS engages in a shared 'problem-making' that not only exposes the limitations of



contemporary notions of inclusive design but creates new economic, political and material conditions for collaborations that foster a long-term, caring commitment towards the design process. This caring also extends beyond the ETS collective, as the group documents its activities and makes them open access to share ideas and insights more widely and contribute to the empowering potential of design.

Michael Schillmeier asks fundamental questions about the composition of the common world and the role of design in cultivating caring relations to maintain it. Schillmeier demonstrates the value of engaging in critical reflection on the theoretical assumptions underlying the vocabularies of care deployed in contemporary debates. Like Handler, he approaches design indirectly, by attending to the work of Argentinian artist and activist Raul Lemesoff, whose *Weapons of Mass Instruction* – a vehicle that is shaped to look like a tank but works as a book bus spreading free knowledge – constitutes a deliberate, non-violent intervention into urban space. Drawing on diverse philosophies, from Heidegger to Whitehead, Schillmeier proposes that design needs to participate in similar creative disruptions to spread forms of togetherness that are respectful of difference and diversity. In order to do so, however, design has to rid itself of its human exceptionalism and attend to entanglements between humans and nonhuman world, a task that care thinking is particularly well suited to due to its relational orientation.

Charlotte Bates and *Kim Kullman* conclude the book with an afterword drawing on insights from the previous chapters to explore the futures of design and care. Where current academic research describes care as a relatively modest relational practice that is concentrated on present challenges, Bates and Kullman argue that within every moment of caring there is a possible future in the making. Discussing a strand of utopianism that engages in an equally speculative and critical mode of thinking, the authors argue that care, particularly in combination with design, can serve to inspire alternative, possibly more inclusive and egalitarian forms of urban collectiveness. Such future-making, the authors indicate, is not without its challenges and requires a commitment to a new kind of pedagogy and politics of caring that reconfigures contemporary understandings of the design and use of built form.

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