

REFLECTION

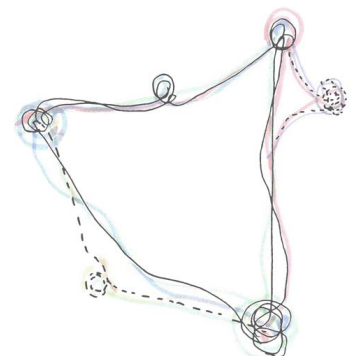
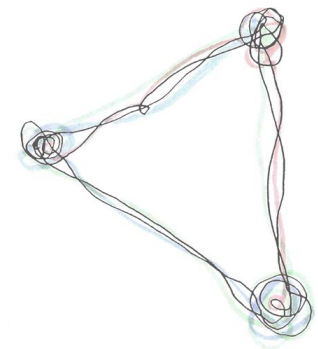
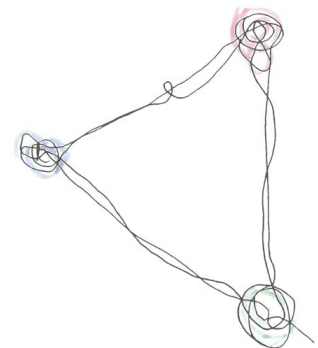
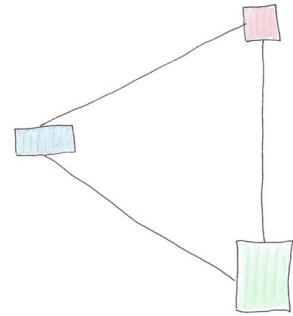
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INTRODUCTION

The current period of austerity in the U.K. has resulted in a withdrawal of state funding and the subsequent shrinking and closure of public welfare programs. This has had a disproportionate impact on those who live in deprived neighbourhoods, such as Wood Green.

Networks of care in Wood Green, both formal and informal, are struggling to survive these funding cuts. For many living in Wood Green, despite the requirement for care being urgent, it is not being met through conventional urban planning models. Urban planners within the council have often overlooked the complexity of issues that result from deprivation, and therefore struggle to provide effective care.

More broadly, across London the practice of care and the spaces it occupies have been commodified and found to be unprofitable. Space for care is disregarded in favour of highly profitable residential and commercial units.



RESEARCH FOCUS

What is care? My research begins by asking what care is, and how it operates within Wood Green. In order to support the existing networks of care in Wood Green, we must establish what care is.

By drawing on feminist theories, including those of Maria Puig de la Bellasca, I conclude that care is specific, situated and complex. But most importantly, care is relational. Care occurs within every connection that a form of life is dependent on, not through the reshaping of objects or individuals.

How is care spatialized? The next question is an examination of how care is spatialized, and how it relates to its urban context. This involves wider questions about conceptual frameworks relating to social interaction and space.

We can see how care is spatialized within urban environments, as a web of connections rather than individual isolated caring resources. To design a caring network across spaces in Wood Green, our approach must be relational, operating within this web of connections. This approach to spatializing care has been underappreciated in Wood Green, leading to ineffective solutions to social deprivation.

How can planning relate to care? I ask how urban planning relates to care, and how this can reflect different theories of both care and space. This questions whether planning can move away from a traditional focus on buildings as objects, and asks whether it can incorporate the inherently relational nature of care and space.

I also look at urban planning as a speculative practice concerning the built environment. The relational conceptualization of care can also be applied to space and urban planning, and I draw on Tim Ingold's understanding of the world as a 'meshwork' rather than a 'network' to do so.

How to apply this? This final question is how to translate different conceptual approaches to care, space and planning into the practical reality of Wood Green.

These theories come together to conclude that by understanding both care and space as relational, and specifically through the concept of a meshwork, we can envisage a more effective planning model in Wood Green. Through knotting meshworks, there is the potential to move planning away from processes that overlook the vital dependencies of neglected people, and instead encourage caring relations.

On a broader level, my research phase concludes that caring architecture is a process of unbinding and knotting, loosening boundaries, and sharing space.

ARCHITECTURAL DESIGN

My design approach has tried to reflect the relational approaches to care and planning discussed in the research stage of the project. The design proposal operates at a neighbourhood scale, speculating on how existing and potential future groups could share and inhabit existing and new caring infrastructure over time. This is a process of loosening boundaries, sharing resources and working collectively.

My proposal tests an expandable framework, extending from either new or existing resources and crossing boundaries to encourage the caring inhabitation of space, focused on connecting separate groups. The framework opportunistically occupies space that opens up through the removal of the boundaries separating different groups. It is placed to retain and activate existing connections within the neighbourhood. It can be internally configured to respond to the changing requirements of those who need care in the neighbourhood

The system is designed so that the same approach can be adopted in other sites across Wood Green, thereby further reinforcing the meshwork of caring resources facilitated in the original site.

RELATIONAL ARCHITECTURE

More broadly the design project has tried to explore the concept of relational architecture. That is to say, the focus has been on fostering relationships between different care giving resources through architecture, rather than just housing individual resources independently. There's an inherent paradox between a profession rooted in designing specific buildings and the need to consider the relationships between entities. However, the relational approach here reflects both the research conducted on care and the wider teaching at TU Delft. Explore Lab and previous studios have encouraged me to think more broadly about how architecture interacts with its social context, and the freedom provided by Explore Lab has allowed me to consider this in the broadest possible way. There are clearly limits to this process, but I think it is important to consider the possibilities that a relational approach to architecture offers, even if these can't always be achieved in a practical setting.

IMPLICATIONS

The project has wider professional, social and personal implications which I have started to explore.

Professional Implications

There is an ever increasing focus in the architectural profession on development in areas of deprivation in London. Most urban development in London is now happening in areas of deprivation and this brings significant challenges to the architectural profession.

Designing within fragile communities from which you are personally removed, brings clear ethical dilemmas and contradictions for the architectural profession. The theories of care explored in this project, can act as a guide to intervening in landscapes of deprivation. Instead of compartmentalising or isolating those who are struggling, entering into their world and reconfiguring existing issues allows architects to practice in a way that can meaningfully counteract neglect. This is a highly complex and situational question. This project doesn't look to provide a solution but is an exploration into means of approaching it.

The focus of development has often been on erasing issues and replacing them with new models instead. Maintenance and reconfiguration of the existing context are often overlooked. By working within existing structures architects can allow existing social resources to meet their potential, enact wider changes. Over time this becomes a self-reinforcing process, intervening at one point of neglect strengthens a web of relations with broader implications.

Architecture is limited in form, but it can still accommodate diversities of neglect through what it can intermittently manifest, the temporalities it can accommodate. There is potential to think about

form in terms of its potential means. In light of this, I consider design as a means of working together in order to negotiate forms of entanglement and in turn enact a continuously evolving publicness.

Social Implications

This exploration into deprivation in Wood Green has shifted my understanding of how care. To work against deprivation, it is important to

Popular attitudes towards care often categorise it as a specific limited sector that can be a quantifiable resource. Through exploring processes of deprivation and care in Wood Green I've learnt that care is complex, diverse and multiple. Limiting care to specific spaces, times and categories overlooks the potential to address and override complex everyday realities of neglect. On a broader social level, the project highlights the importance of opening up the concept of care to allow us to engage with neglect more fully.

Personal Implications

The scope of research that Explore Lab encourages and the depth of focus on care in a deprived community in London have changed my perspective. The importance of collective encounter has become a key principle in how I think of architecture. I also appreciate the importance of working within and alongside neglect and struggle, rather than erasing it. By focussing on these areas we can give them the attention needed to find speculative openings for positive change.

EVALUATION & FEEDBACK

The design project has been structured into two stages, neighbourhood and the architecture scale. To some extent both parts of the project have the same objective and similar means, so the sudden separation between the two parts is arbitrary. In hindsight the design project could have been structured as one continuous process, with the neighbourhood level and architectural levels developing directly with one another. This would reflect a more organic development of care giving resources within a society, but would also be harder to foster within the confines of a studio project at a conceptual level.

A graduation project is inherently limited in the extent that it can be situational and responsive to the social context of the topic. The focus on relational approaches has therefore brought challenges in terms of negotiating the boundaries, requirements and capacities of the project. Therefore, the relations explored within the project are largely speculative, imagining potential openings for spatial change within a specific context, rather than a definitive solution. By imagining architecture as a means to accommodate connections and interactions, I have explored one scenario that reflects how caring principles could be applied more widely. As a result, the project is in many ways detached from the conflicts and negotiations that would arise from this approach in reality. Conflicts could be seen as a positive tool for negotiating space, addressing issues and developing new caring relationships that respond to social realities.

Finally, the project is devised to be adaptable and develop with changing needs over time. The scale and complexity of the problems make this hard to imagine within the time constraints of a graduation project. With further work I look to explore the changeability of the scheme, but the immediate focus has been on explaining a coherent initial stage within an already complex landscape.