



Explorations in Space and Society  
No. 65 | July 2023  
ISSN 1973-9141  
[www.losquaderno.net](http://www.losquaderno.net)

Care and Critical Action

65 Lo sQuaderno

# TABLE OF CONTENTS

## Care and Critical Action

*a cura di / dossier coordonné par / edited by*

**Cameron McEwan, Nadia Bertolino & Cristina Mattiucci**

*Guest artist / artiste présentée / artista ospite*

**Patrizio Martinelli**

*Editorial*

**Lorens Holm**

*My neighbour, the subject of civilisation*

**Nathanael Nelson**

*Deconstructing Hospitality. Postcolonial Care in the Built Environment*

**Andrew Copolov**

*The urban staffroom. Imagining infrastructures of care and solidarity in Melbourne*

**Ceara O'Leary**

*Community Hubs as Networks of Care*

**Jiayi Jin & Yuxin Wu**

*Careful Careless. A System to Restore Ecological Systems in Cities*

**Lee Ivett & Ecaterina Stefanescu**

*To Make is to Care*

**Jonathan Orlek, Claire McAndrew, Cristina Cerulli, Mara Ferreri, Marianna Cavada & Eleanor Ratcliffe**

*For a relational understanding of care in critical urban action*

**Sofia Rivera**

*The caregivers' strike: a tale of violence and care in the entrails of San Salvador*

**Carolina Correia dos Santos & Iazana Guizzo**

*Paths of banana trees: passages of care between unequal worlds*

**Mathilde Redouté**

*Accurate commoning: between primitive and new enclosures*

**Huda Tayob**

*Archival Care*

**Cameron McEwan & Nadia Bertolino**

*Afterword*

# For a relational understanding of care in critical urban action

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## The Introduction

We open this paper by reviewing the care paradigm in urban action and the centrality of the concept of interdependence to this work. We then move on to consider our approach to mapping caring—with practices in urban community-led initiatives. The work presented comes from a British Academy supported project, *Caring—With Cities: Enacting more care-full urban approaches with community-led developments and policy-makers*.<sup>1</sup> We use caring—with, rather than —about or —for, to move beyond understandings of care as a provision from institutions to individuals, or from individual to individual, which positions the cared-for as passive recipients. Here, we illustrate how case studies on urban practices can unravel interdependencies of care by attending to long-term engagements, taking place across sites and scales — rather than being viewed as ‘bounded’ examples. We close with a set of thoughts on our mapping protocol in practice and speculate on future directions that re-situate critical urban action within wider relationalities and power dynamics.

## The care paradigm in urban action

This contribution responds to current, expanded debates on urban care. It acknowledges Maria Puig de la Bellacasa’s consideration of care as a ‘contested concept’<sup>2</sup> and is situated in solidarity with The Care Collective’s assertion that dominant neoliberal ideology is fundamentally “uncaring by design,”<sup>3</sup> offering “neither an effective practice of, nor a vocabulary for, care.”<sup>4</sup> While “no clear-cut definition of care in urban studies has emerged,”<sup>5</sup> recent/forthcoming special issues,<sup>6</sup> monographs,<sup>7</sup> and edited volumes,<sup>8</sup> have started to assemble diverse understandings of urban caring capacities, typologies and relationalities.

In our approach, we understand the urban as the product of dynamic interrelations; as stated by

1 For more information about the project, see: [www.caringwith.city](http://www.caringwith.city).

2 Maria Puig de la Bellacasa, ‘Matters of Care in Technoscience: Assembling Neglected Things’, *Social Studies of Science* 41, no. 1 (February 2011): 85–106, <https://doi.org/10.1177/0306312710380301>.

3 The Care Collective, *The Care Manifesto: The Politics of Interdependence* (London: Verso Books, 2020), 10.

4 The Care Collective, 4.

5 Angelika Gabauer et al., ‘Care, Uncare, and the City’, in *Care and the City: Encounters with Urban Studies*, ed. Angelika Gabauer et al. (New York: Routledge, 2021), 5.

6 See for example: Ilan Wiesel, Wendy Steele, and Donna Houston, ‘Cities of Care: Introduction to a Special Issue’, *Cities* 105 (October 2020): 102844, <https://doi.org/10.1016/j.cities.2020.102844>; Zannah Matson and Tim Waterman, eds., ‘Special Issue: Landscapes and Care’, *Landscape Research*, Forthcoming.

7 See for example: Juliet Davis, *The Caring City: Ethics of Urban Design*, 2022.

8 See for example: Hélène Frichot et al., eds., *Infrastructural Love: Caring for Our Architectural Support Systems* (Boston: De Gruyter, 2022).

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human geographer Doreen Massey, we recognise space “as constituted through interactions, from the immensity of the global to the intimately tiny”.<sup>9</sup> Such interrelations may also build upon physical proximity, but a relational imaginary of space moves beyond a topographical understanding, to incorporate dynamic relations and interactions across and between individuals, groups, and processes. As Kim Trogal has argued, while these relational and dialectic concepts of space “have implications for care, care is also something that produces *spaces and relations*”.<sup>10</sup>

Within the paradigm of care, the concept of interdependence has been key to interdisciplinary feminist scholarship. As explained in *The Care Manifesto*, the devaluing of activities that are considered ‘reproductive’ still dominates political imaginaries,<sup>11</sup> while social reproduction was and continues to be a ‘constitutive outside’ in urban scholarship.<sup>12</sup> Against understandings of interdependence in terms of a lack of autonomy, proposals have been put forward for a radical reformulation of care as a guiding principle in self-organisation, opening up new horizons for more caring social and spatial practices.<sup>13</sup> Interdependence, in a practical sense, means that we cannot understand care and urban action as something to be grasped, theoretically and empirically, by focusing on bounded ‘case studies’ alone. Multiple interconnections and webs of interdependence must take centre place to avoid understanding community-led practices as standalone, autonomous entities *within* cities. This contribution seeks to illustrate how interrelated interdependencies of care can be unravelled by attending to long-term urban practices of engagement taking place across different sites and scales.

Long term, recurrent, engagement with places and artefacts, such as through maintenance, is a form of urban care. Blurring the boundary between practice and scholarship, Shannon Mattern’s thoughts on the everyday work of urban maintenance, care and repair provide a helpful anchor; working between disciplines and “connecting threads, mending holes, amplifying quiet voices” can be considered careful acts in and of themselves.<sup>14</sup> Similarly, Julia Udall highlights how practices of repair might offer possibilities to address ruptures “through the ethical decisions they prompt, the assemblages they generate, or gestures of care they manifest”, framing repair as an activity with “spatial and material agencies”.<sup>15</sup>

Critical scholars such as Power and Williams have similarly called for “an expanded scale of urban care analysis”.<sup>16</sup> They argue for an approach that is attuned to lived experience(s) of care as they unfold within and through city veins and which extends beyond interpersonal sites and situations: an attention to “caring work at the scale of the city”<sup>17</sup> which includes urban governance and more-than-human materialities. Exploring interdependent working across scales, Gabauer et al. suggest how macro-research can work to “unbound situated research”, by critically opposing and reimagining trans-local/national care regimes through processes they describe as “becoming-related”; they argue that links to meso-research on policy infrastructures and institutional frameworks can form a scaffold

9 Doreen Massey, *For Space* (London: SAGE Publications, 2005), 9.

10 Kim Trogal, ‘Caring: Making Commons, Making Connections’, in *The Social (Re)Production of Architecture: Politics, Values and Actions in Contemporary Practice*, ed. Doina Petrescu and Kim Trogal (Abingdon: Routledge, 2017), 159.

11 The Care Collective, *The Care Manifesto*.

12 Linda Peake et al., eds., *A Feminist Urban Theory for Our Time: Rethinking Social Reproduction and the Urban* (Hoboken: Wiley, 2021).

13 The Care Collective, *The Care Manifesto*.

14 Shannon Mattern, ‘Maintenance and Care’, *Places Journal*, November 2018, para. 3, <https://doi.org/10.22269/181120>.

15 Julia Udall, ‘Mending the Commons with the “Little Mesters”’, *Ephemera: Theory and Politics in Organization* 19, no. 2 (May 2019): 254.

16 Emma Power and Miriam Williams, ‘Cities of Care: A Platform for Urban Geographical Care Research’, *Geography Compass* 14, no. 1 (2020): 2, <https://doi.org/10.1111/gec3.12474>.

17 Power and Williams, 6.

that frames and affects how local everyday caring/uncaring practices occur.<sup>18</sup>

In what follows, we put forward the need to understand care as emerging and embedded in sets of relationalities that challenge the boundaries of a given organisation or community, re-situating such urban action within wider relationalities and power dynamics. Visualising these relationalities requires not so much a conceptual reflection (upon the multiple ways in which ‘care’ occurs, or doesn’t, in specific case studies) but a refraction, capturing/collecting/absorbing traces of instances of care across multiple sites and scales. Responding specifically to these concerns and theoretical approaches — and drawing on understandings of maps as “of-the-moment, brought into being through practices (embodied, social, technical), *always* remade every time they are engaged with”<sup>19</sup> — within the Caring—with Cities project we designed and deployed a relational mapping protocol to support a refractive way of exploring existing practices through the lens of care.

### Mapping caring—with practices in urban community-led initiatives

The Caring—with Cities project aimed to understand instances of care within community-led developments and to explore the interface between these projects and relevant institutions and policies in contemporary cities.<sup>20</sup> To do so we deployed a range of methods in collaboration with participants embedded within the initiatives studied, including relational mapping. This follows a long interdisciplinary and creative tradition of using mapping to support and understand community-led practices.

In designing and undertaking this mapping activity with participants, the definition of care we worked with was broad, encompassing “everything we do to maintain, continue, and repair our world so that we may live in it as well as possible”.<sup>21</sup> We specifically worked with Toronto’s notion of caring—with to name a different and more holistic way of envisaging, revealing and discussing care as “an ongoing system of caring acts in which we’re sometimes on an extreme end of the giving—receiving scale, and sometimes in the middle”.<sup>22</sup> Caring—with is also central to Emma Power’s work around ‘capacity to care’<sup>23</sup> and shadow care infrastructures.<sup>24</sup>

We designed a template and a protocol, which we used to investigate relational caring practices at play in four case studies. For each of the case studies, two mapping exercises were carried out with members of the community partner organisation, guided by two members of the research team. A mapping template was designed to support participants to think about chains of care linking multiple scales, from hyper-local practices through to policy-making landscapes. A blank template included a colour-coded key to emphasise and articulate our open-ended understanding of care relationships, which encompassed: support, financing, advocacy/education, and space/resource provision. In addition, a vertical axis was added to prompt discussions about where action lies between formal urban sites of policy-making and community-led initiatives.<sup>25</sup>

Initially, participants created a relational map of their organisation, showing different organisations

18 Gabauer et al., ‘Care, Uncare, and the City’, 9.

19 Rob Kitchin and Martin Dodge, ‘Rethinking Maps’, *Progress in Human Geography* 31, no. 3 (June 2007): 335, <https://doi.org/10.1177/0309132507077082>.

20 Mara Ferreri et al., ‘Caring—with Cities: Project Report’, 2022, <https://caringwithcity/Publications>.

21 Joan Tronto, *Who Cares?: How to Reshape a Democratic Politics* (Ithaca: Cornell Selects, 2015), 13

22 Tronto, 16.

23 Emma Power, ‘Assembling the Capacity to Care: Caring-with Precarious Housing’, *Transactions of the Institute of British Geographers* 44, no. 4 (April 2019): 763–77, <https://doi.org/10.1111/tran.12306>.

24 Emma Power et al., ‘Shadow Care Infrastructures: Sustaining Life in Post-Welfare Cities’, *Progress in Human Geography* 46, no. 5 (June 2022): 1165–84, <https://doi.org/10.1177/03091325221109837>.

25 The mapping template, handout and protocol are available for download on our project’s website: <https://caringwithcity/resources>.

and groups that they work with and the type and role of these collaborations/connections. This was followed by a reflective/refracting revisiting of the mapping to qualitatively define the relationships identified. The same participants were asked to expand on how the relationships mapped related to care and whom we should talk to, to find out more about these relationships, leading to a series of follow-up interviews across the community-led/policy-making axis.

The relational mapping protocol became key to *spatialise* how care is understood, by whom and where it is positioned within webs of relations across institutional and non-institutional urban collectives, multiple sites of practice and loci of decision-making. The exercise of participatory mapping helped gain a more nuanced understanding of this system of care, by exploring how community-led organisations connected with other organisations and localised democratic policy-making mechanisms. The mapping activity was not intended to produce an overview of the whole organisation or of its role in connection with established urban relations, but rather a trace of the multiple and complex relationships of care that are understood by insiders who are actively engaged in long-term efforts to shift some of the power dynamics in contemporary cities.

### Reflections and conclusions

We set out to explore instances of caring—with<sup>26</sup> within community-led projects to develop understandings of the “*spaces and relations*” produced by care<sup>27</sup> within such initiatives and, more broadly, within wider urban relations. Underpinning the focus on care was a desire to counter neoliberal “uncaring by design”<sup>28</sup> dynamics within the production of cities and to turn our attention to, and amplify the signal of, the potentially radical instances of mobilisation and self-organisation needed for such action.

Within the Caring—with Cities project we focussed on articulating care frameworks in relational terms, beyond bounded case studies, identifying traces of caring practices, which we, together with our project partners/participants, helped to make visible and understood as such. Through the participatory mapping activity (and holistic framing of care that underpinned the mapping protocol) organisations started to see the work they were doing, both internally and in partnership with others, as care, sometimes for the first time.

The mapping activity revealed how caring—with practices, even if institutional, often boiled down to relationships between people, highlighting their strength but also their potential fragility. This led to the identification of specific moments of rupture or impasse between community-led practices and policy-making organisations, as well as cultural and operational silos existing within and across the organisations mapped.

Visions of a caring city, expressed by participants, incorporate different elements and values; in some cases, the city as a whole was conceptualised as a receiver of care, in others care involved specific groups and locales. Caring—with cities practices thus appear to be based on the creation, recognition and maintenance of webs of relations between multiple communities and public institutions. In some instances, the outsourcing of care to community groups had transformed, with time, into an iterative process that changed and challenged formal roles, for instance of external service providers or consultants. The relational mapping became a constructive way of discussing and revealing these caring webs and articulations, their frictions and potentialities, across different scales.

In the mapping and follow up interviews, participants within and outside the partner community organisations also remarked on the importance of managing personal boundaries and expectations

of care over time. Caring—with practices were frequently described as being long-term projects, requiring significant personal commitments. Interviewees from community-led organisations and within policy-making roles described several strategies to make these practices more sustainable, for example by opening-up and closing off; stepping-in during key moments; and striking a balance. Our research made visible long-term commitment to places and projects through the lens of caring—with, and beyond the precise time boundaries of specific projects. A number of temporal scales were held together, from short and fixed (the research project) to long and fluid (previous personal and professional involvement of researchers with projects studied) and continuous long and iterative (the organisations and their projects studied).

Our project was relatively limited in resources and for this reason, served as a pilot. Even though we selected case studies for which we had existing connections and ongoing relationships with, it took time to formally negotiate the framework to facilitate conversations with participants and our interactions with the projects were both expedient and contingent. Follow-on research from this pilot might take a range of different paths. One might involve a more systematic, centralised, resource intensive, approach sustained over time and involving more actors for each project case through a larger research project; other paths might take more decentralised, embedded and self-directed forms. The latter might involve creating a framework for independent unmediated use of our mapping protocol, adapted to be used outside of the research project paradigm, as a citizen science, where organisations employ it as a reflexive diagnostic tool.

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<sup>26</sup> Toronto, *Who Cares?*

<sup>27</sup> Trogal, ‘Caring: Making Commons, Making Connections’, 15

<sup>28</sup> re Collective, *The Care Manifesto*, 10.