fem*MAP BERLIN. FEMINIST SPATIAL SYSTEMS FOR A NON-SEXIST CITY.

CAREWORK Neighbourhood of Care

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Neighborhood (of) Care Hypothesis

"The way in which women's subsistence work and the contribution of the commons to the concrete survival of local people are both made invisible through the idealizing of them are not only similar but have common roots... In a way, women are treated like commons and commons are treated like women."

(Marie Mies and Veronika Bennholdt-Thomsen, The Subsistence Perspective: Beyond the Globalized Economy, London: Zed Books, 1999).

"In academic theories of care, care is conceived as all the supporting activities that take place to make, remain, maintain, contain and repair the world we live in and the physical, emotional and intellectual capacities to required to do so." (Dowling, 2020)

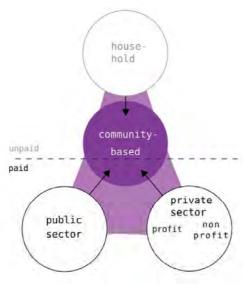
Why Care?

We live in a time of multiple crises. The COVID-19 crisis has brought once again our reliance on collective systems of care provision to the surface. However, these systems themselves are also in a state of crisis. This crisis of social reproduction and care has been called out by prominent voices not only in Europe (Winker, 2015, Fraser, 2012), but also globally (https://news.un.org/en/story/2018/06/1013372). In a global view the markets of the North are eroding the care commons of the South (Isaksen et. al. 2008).

How can we instead envision a care system based on solidarity and equality - a building block of a non-sexist city? As a strategy Silvia Federici (2010) calls for using the crisis to force a new society upon us that communalizes housework. But what is the status quo of communalized care work? What is the situation of care provided through this alternative logic of commons here in Berlin? How is community-based care organized spatially on a neighbourhood scale? These questions are explored in this critical counter cartography.

Who Cares?

We all care about someone or something. But when talking about who does the majority of unpaid care work the answer is simple: Womxn. Globally women do three times as much unpaid care work as men (UN Women's Progress of the World's Women 2019-2020). In Germany they perform 60 % of domestic work in total and 70 % of child care related work (Samtleben et al., 2020).



diagrammatic sketch of the different sectors of care

What is care work?

Caring for someone or something and performing care work is a deeply human activity. The boundaries of what constitutes care work are debated and porous. As part of this mapping we focus on a selection of care work types, which we were able observe through our particular methods:

body and health care

from cutting hair to physiotherapy

child and youth care

from playing with a child to helping a young person with their homework

elderly care

from home care to organizing social events

emotional and psychosocial

from talking with a friend in distress to counselling people in need about social services

providing food

from buying groceries for a neighbour to providing meals to the public

caring for a place

from gardening to repairing common infrastructures

How is care work organized?

Care work is provided following various systems of logic. In the household care work is unpaid and invisible - hidden in the private sphere. The public sector sustains - as long as there is no crisis - institutions of basic care, first and foremost schools, but also physical infrastructure like playgrounds. The private non-profit sector plays a significant role in Berlin, supporting not only the vast majority of kindergartens, but also senior homes and psychosocial centres. The for-profit sector in most care types is still marginal, however, in the field of body care all hair dressers, massage therapists and similar are operating under this logic. The community-based care sector is the least visible, while still ubiquitous. Asking a neighbour to look after your child in the courtyard in order to go for a run, organizing collective transportation to the school with other parents or helping out people in need on the street without expecting anything in return - all kinds of everyday activities are subsumed under community-based care.

Community-based care relies on infrastructures and

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"Child care, elderly care, preparing food and the daily production of family life - all types of work that serve the reproduction of humans - are still seen as matters of private concern. Reproduction work is still not accounted for in a macroeconomic view and in individual households is predominantly done by women. *Therefore, the question of its* organization is a central concern with regard to the blatant and still unresolved social inequalities between men and women." Arch+ 232 An Atlas of Commoning Orte des Gemeinschaffens

Neighborhood (of) Care Hypothesis

resources from the other sectors. It often is sustained through commoning - concerted actions of members of individual households. At the same time it often depends on infrastructure sustained by the public and private sector, like public playgrounds or small shops allowing for encounters. However, community-based care is essential in filling the abundant gaps in between the other sectors. It can relieve the burden on individuals, mostly women, which can always only partly rely on the state to provide child care. Since schools close in the afternoon, someone has to accompany the child from home to a care institution if the parents are working. Help from neighbours allows elderly people to live at home longer. Collective organizing has the potential of communalizing care work.

In our society care work in the household is unpaid and in the public and private sector usually paid - Communitybased care work is in between. Sometimes it is done next to paid work, sometimes it is unpaid. In all cases it will require societal reorganization for unpaid care work in the household to become remunerated.

Community-based care...

...is not visible in the discourse on care work

...is part of a future, non-sexist empowering system of care work

...needs space and suitable infrastructure

<u>Methodology</u>

In order to make community-based care work visible we approach the field in a methodology inspired by the "3 Cs: critical, counter, cartography" (kollektiv orangotango+, 2018). We wanted to map types of care work which cannot be easily mapped by relying on data provided by the government, because this only includes formal care institutions. Thus, we used interviews, observations and collective mapping.





Axonometric mapping - Made in Tokyo

Axonometry is part of a coherent pictorial language and a valuable alternative to photorealistic imagery. In their book "Made in tokyo" from 2001 the Japanese architecture studio Atelier Bow Wow examines simple and often anonymous buildings found in Tokyo. The map foremost deals with buildings that are engaging in a hybrid manner with their urban environment.

Graphical Reference

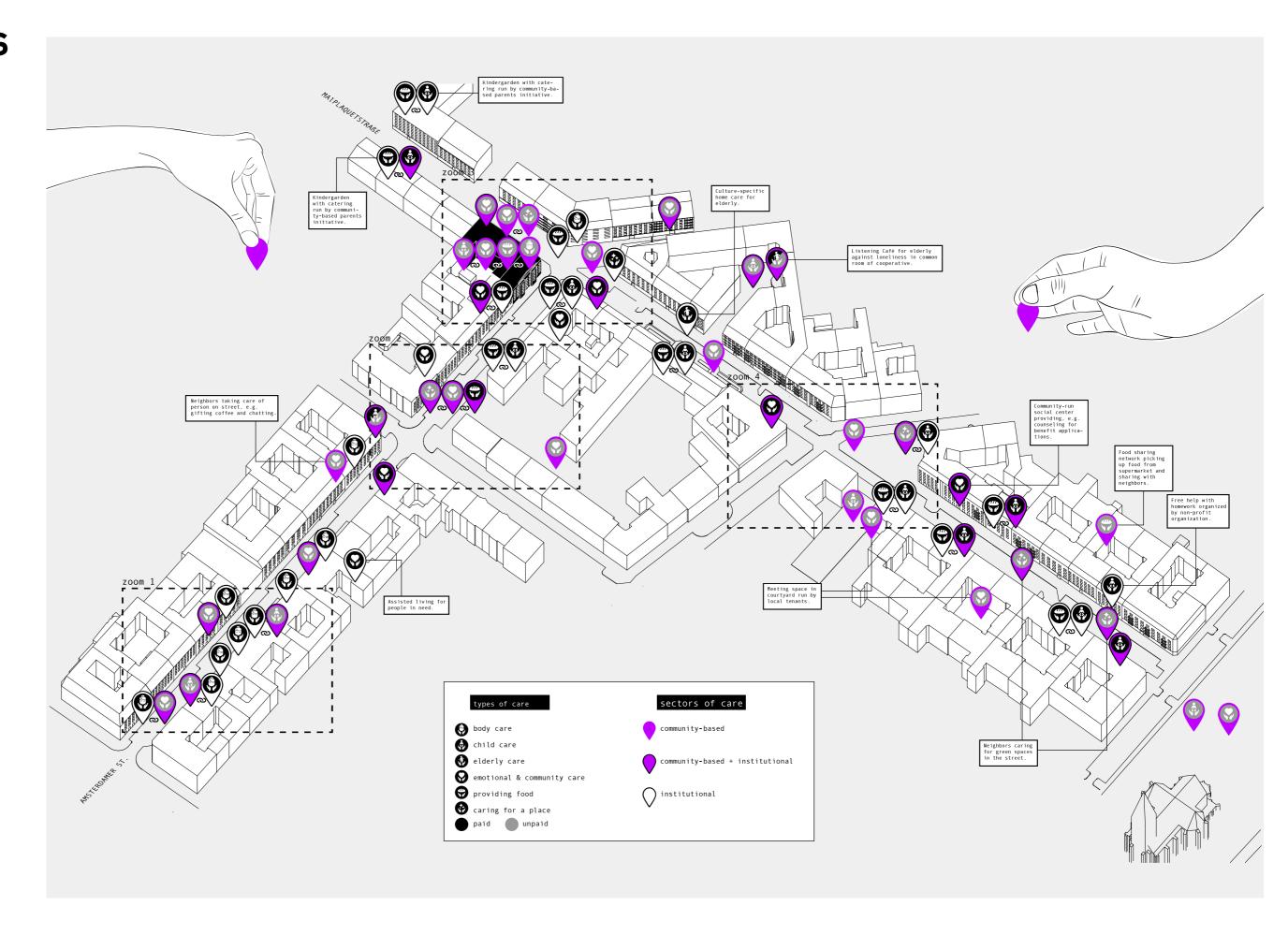
Thematic fem*MAP Translokale

Mapping the care networks of 5 households living in one Multi-family tenement house. Where do they receive care or take care of others? Which ways need to be travelled?

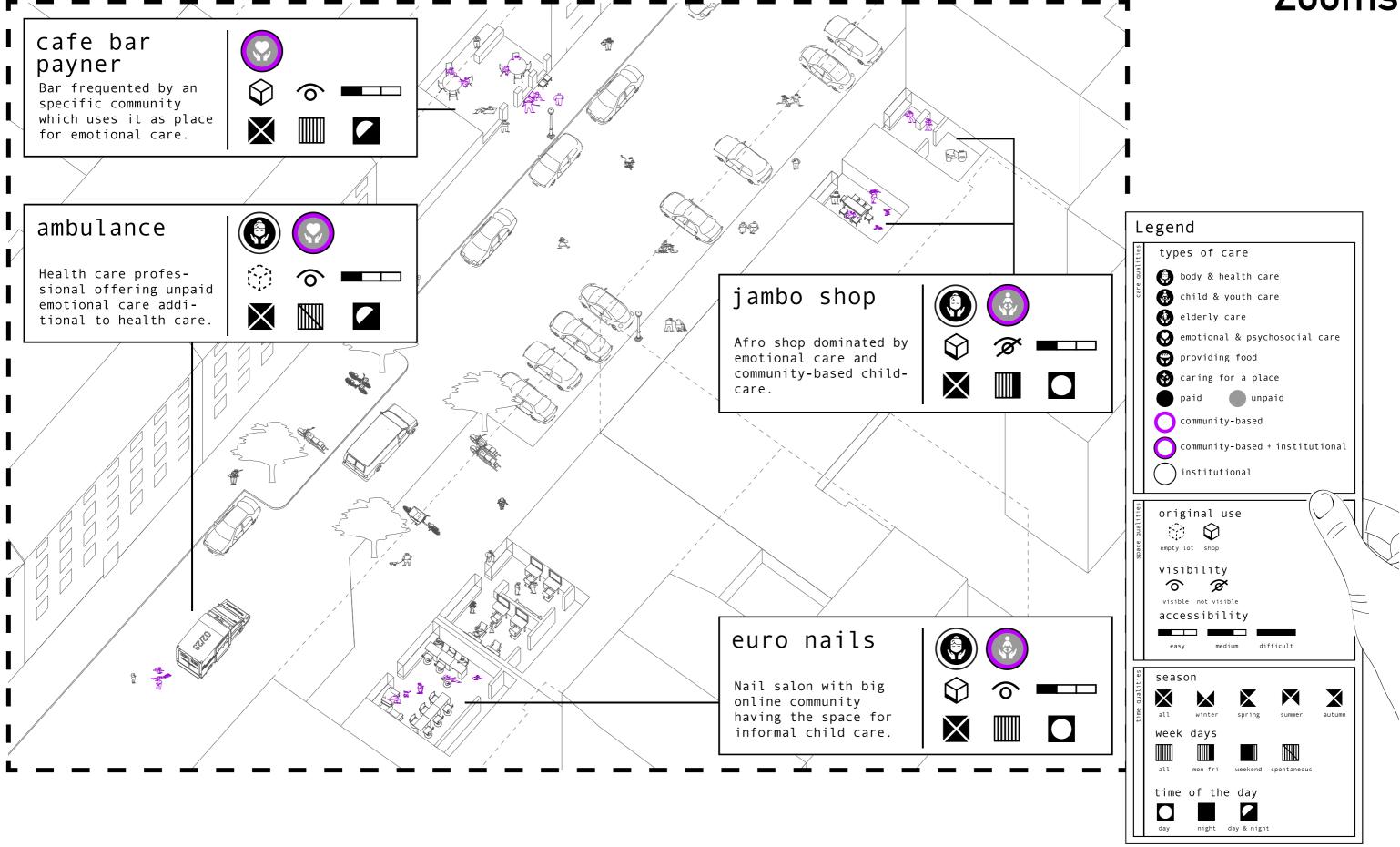
Method: interviews



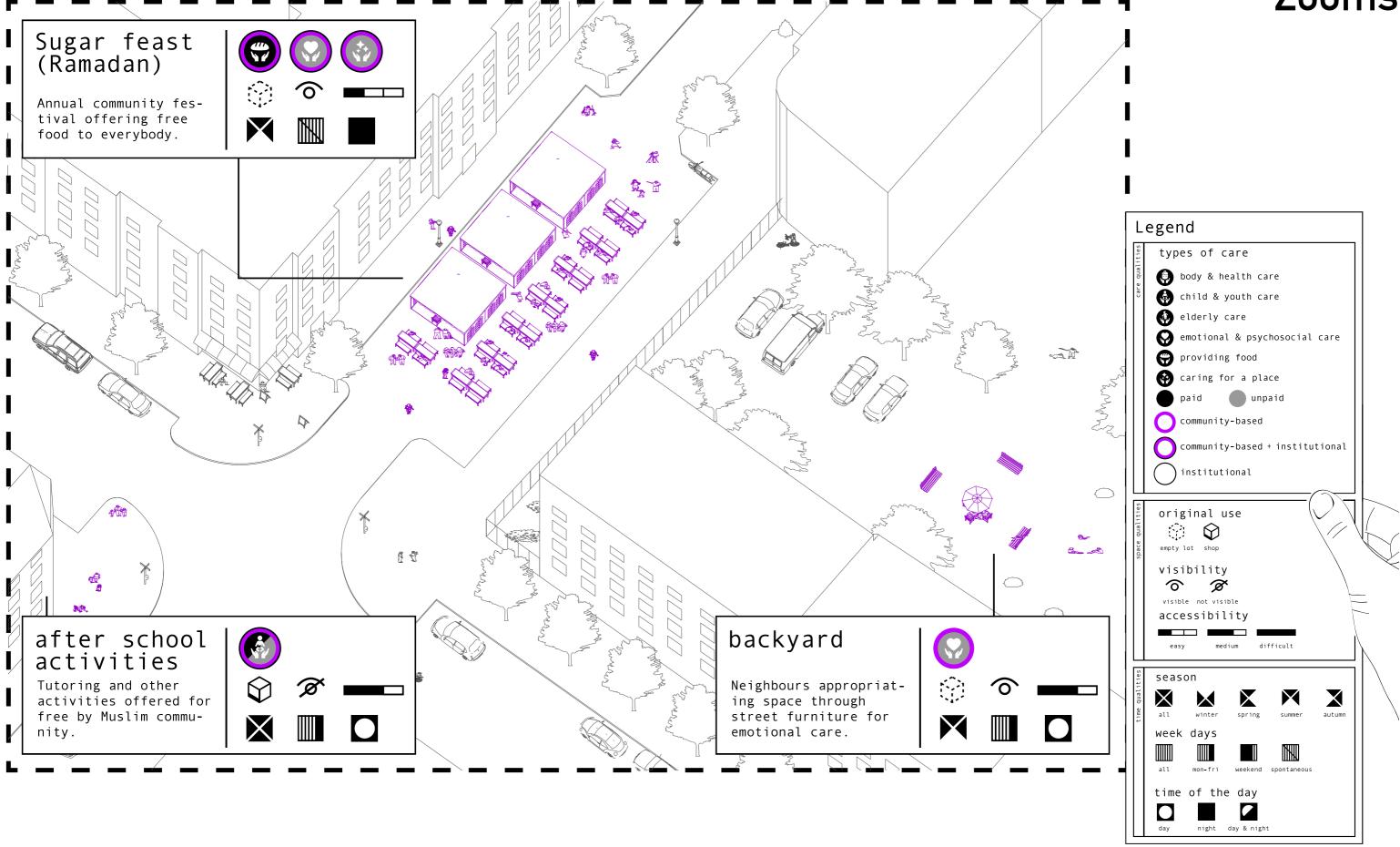
Synthesis Map



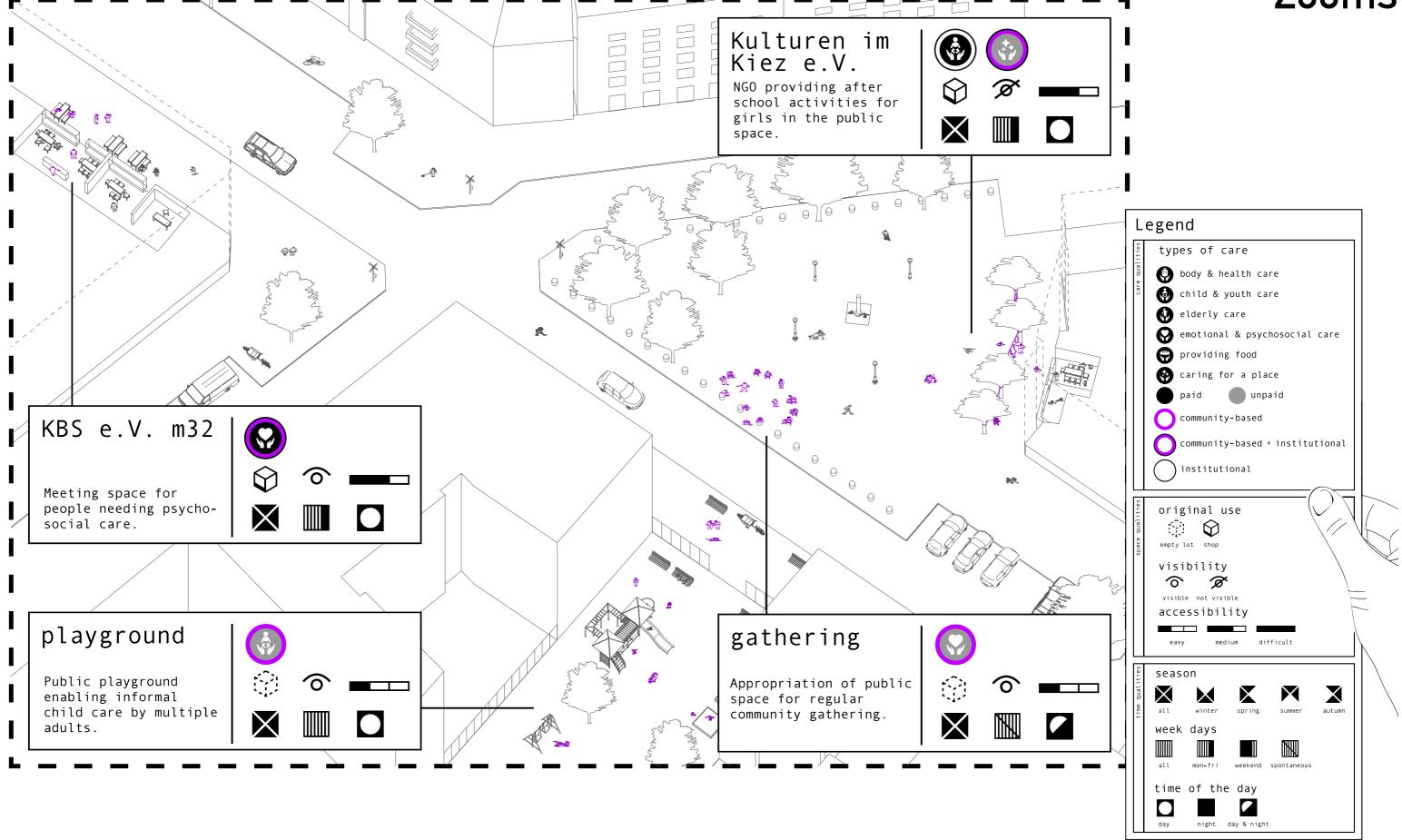
Care



Care

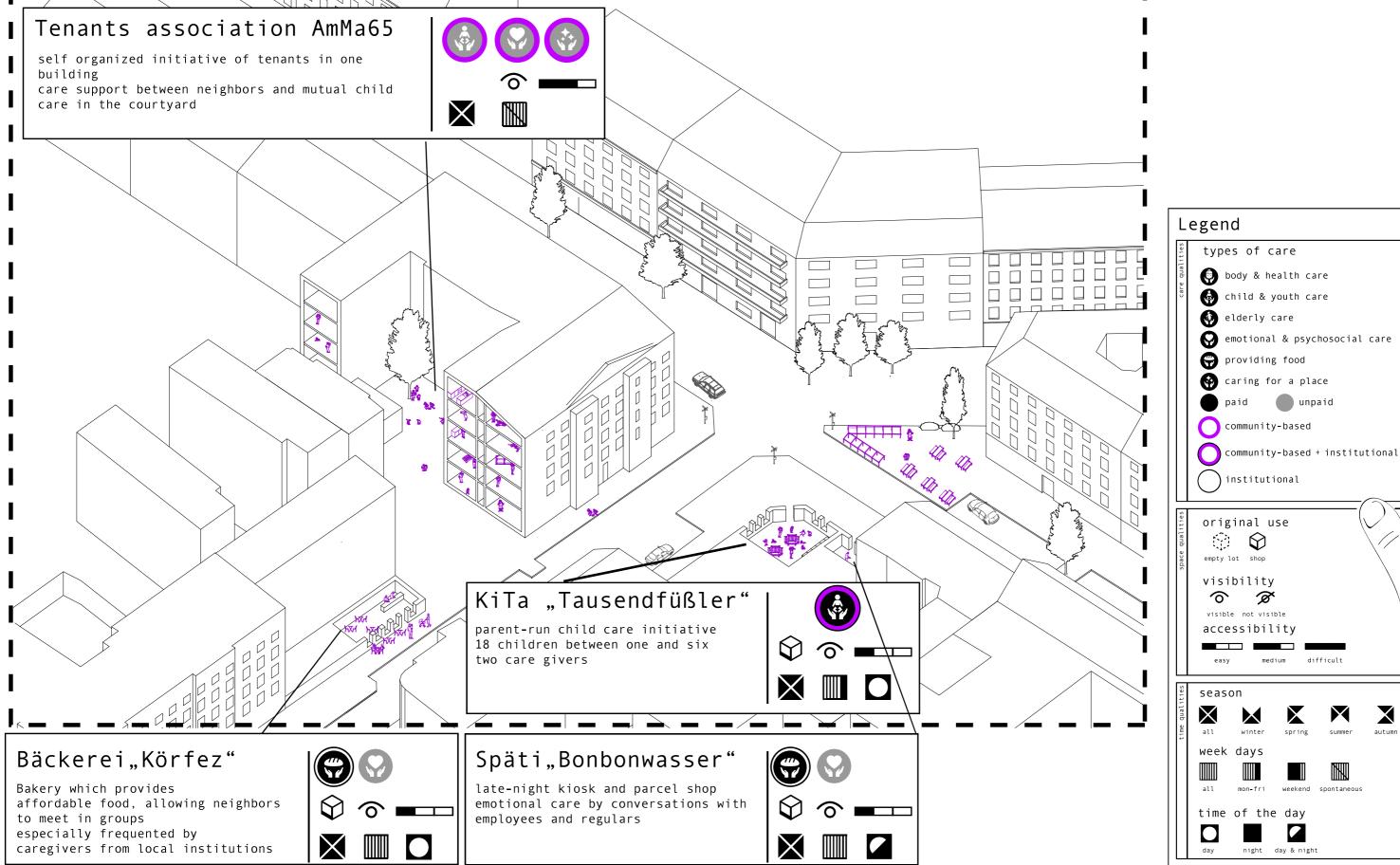


Care



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Care

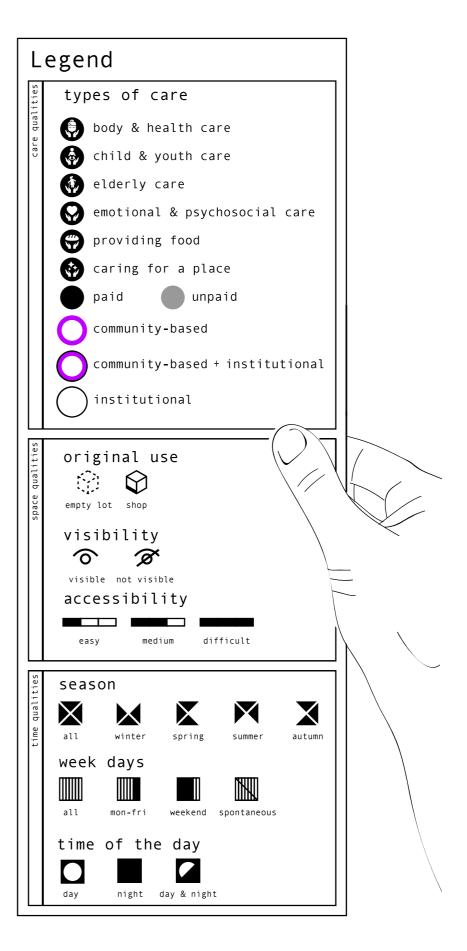


Legend

caring for a place

unpaid

types of care body care community-based child care elderly care emotional & community care providing food sectors of care community-based community-based + institutional



fem*MAP puzzle piece

CARE IN A NON-SEXIST CITY

A non-sexist city is a city that understands care as one of its central values. This extends from caring for our planet and local ecosystem to caring for all communities and individuals living in Berlin. Care work is omnipresent in the public sphere. It is valued in monetary terms as well as through recognition, made easy and facilitated through infrastructure.

Care is provided through the logic of the various sectors, public, community-based, private. A strong infrastructure of public organisations provide a basic net of care all over the city - from health to education. Smaller private enterprises use niches and cater for specific needs and sustain spaces that allow for care. Community-based care fills gaps and dissolves the boundaries. Public institutions allow for community take over of available resources and self-organization, like the use of school buildings for communityrun after school activities. Private enterprises and work spaces allow for environments where care work can blend with other activities. Households have porous boundaries, they are

active in creating community-based care for others and can rely on care from people in their communities. Let's look at the building blocks of such a city.

PREPARING THE SOIL FOR COMMUNITY-BASED CARE...

...THROUGH MOBILITY NETWORK CONNECTING CARE SPACES

Care work is created through individual and collective networks. There is no central care work destination or origin. Thus, facilitating a mobility network that caters for the people that deliver care work, or that allows people to be mobile without needing care, is central. This transportation network will consist of various modes and be barrier-free. It will be accessible for people with children, in wheelchairs, without eyesight. It will be affordable for everyone.

This system is decentralized, not catering for journeys to central places and back, but allowing for all the individual care networks to be served. Not a direct property of the mobility system, but just equally important is the freedom of individuals and

Care fem*MAP puzzle piece

households to relocate their place of living to be more central with respect to other people in their care network. In times of housing crisis this is extremely limited. This includes safety from being pushed out of a functioning neighbourhood of care, which is highly disruptive for people needing care. Security of tenure and having longlasting rights to stay in one place are a properties of the future city.

...THROUGH ENABLING INFRASTRUCTURES

Community-based care needs infrastructure and resources.

...THROUGH DWELLING

On the level of the individual dwelling Berlin offers a range of flexible typologies from single person apartments with access to community spaces to big flats fit for shared living. Housing projects and cluster-flats are a well established category and households beyond the nuclear family find spaces fit for their needs. Tenant groups of tenement houses have legally guaranteed rights to certain elements of self-governance, leading to a considerable share of houses with

internal decision making processes and strong neighbourhood ties.

...THROUGH COMMON SPACES

Spaces in common use include courtyards, spaces for non-profit community uses, and commercial space, for example neighbourhood-based shops, cafés and providers of body care. Through regulation or collective and public ownership a sufficient amount of spaces in neighbourhoods are reserved for these types of uses under secure and affordable terms.

In commercial spaces the spheres of work and care are merging, because of less intense market pressures and an increase in the valuation of care work. Hairdressers and cafés with a play corner are the norm. A significant part of nonresidential inner spaces is reserved for non-commercial common usages. Some shops in the neighbourhood are empty, always allowing for collective initiatives to start a community-run child care space or meeting space. These spaces are spread out in every neighbourhood close to the places of dwelling. The variety of spaces make sure any needs, from openly accessible to

Care fem*MAP puzzle piece

intimate can be met. Courtyards and semi-public spaces are a main space for informal care, they are unlocked by tenant groups having rights to shape their design and by taking space-intensive uses like bike parking and garbage into the street.

...THROUGH PUBLIC SPACES

Another cornerstone of community-based care is public infrastructure. This includes playgrounds close to every home with car free pathways from home, which allows older children to travel alone. It is common that groups appropriate streets and public places for gatherings and little events. The state acts as a mediator between the different interests. There is no specific gender which occupies the streets and no specific gender which is seen as responsible for carrying for children.

...THROUGH TIME & MONEY

Institutional support for communitybased care goes beyond just spatial infrastructure. Small grants are easily available from the local government to support neighbours and community artists in organising collective care practices. Due to a decrease in working hours everybody has more time to perform care work.

COMMUNITY IN COMMUNITY-BASED CARE

Stepping out from this utopian vision, the limits of design impacts have to be emphasized. Community itself is a much debated concept, which should neither be idealized nor simplified. Community-based care needs trust and connections, which can only grow over time through common practices and encounters. The process of community building is outside of the design sphere - the conditions for it can be improved by bringing resources like neighbourhood management and spaces to an area, but it cannot be forced. The basic care provided by the state is an essential condition and backbone in order for community-based care to fill the gaps.

Appendix

data collection





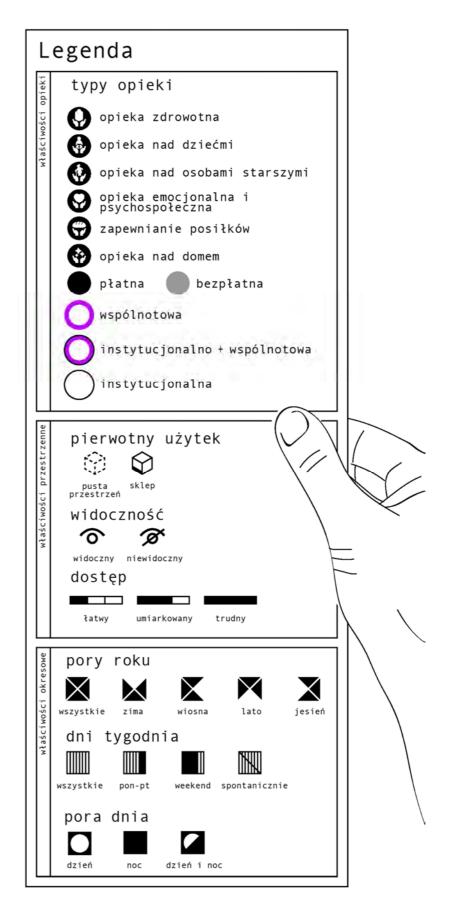




Appendix

Legend tranlations

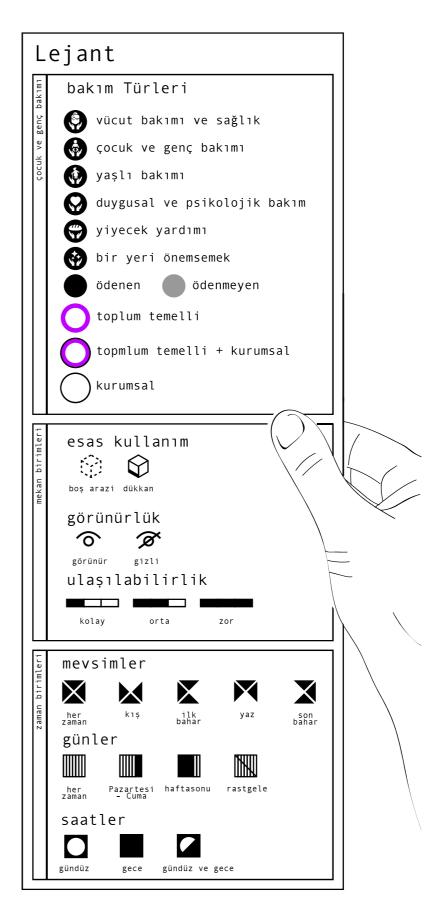




Appendix

Legend tranlations





Legend in Turkish language. Translated by Tayfun Saman.

Appendix Sources

Quantitative Data

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Qualitative Data

three semi-structured interviews with inhabitants of the neighborhood, two informal interviews

participant observations (May-July 2020)

Artists

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