Care-full Creative Placemaking

A critical review of contemporary placemaking

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Abstract

This thesis explores the ethical implications of creative placemaking to cultivate stronger citizen communities in urban planning. Creative placemaking holds promise in addressing societal issues neighbourhoods face, including climate change adaptation, housing demands, and social challenges such as ageing or loneliness. However, it is essential to recognise and address potential issues that may arise during the process of placemaking, which could impact the original objective of community development. Although some efforts within the field of placemaking attempt to address these concerns, typically through participatory processes, these only tackle a subset of the challenges associated with placemaking. Challenges such as the emergence of apolitical or exclusive projects and placemakers prioritising their artistic practice can overshadow the fundamental objectives of placemaking. These objectives include community promotion, empowering users, reclaiming public spaces, and fostering the creation of culturally meaningful environments. To critically evaluate practices, three criteria are proposed and deployed: the ethical motives of the project, the inclusion of disadvantaged citizens, and the level of commonality and community involvement. Drawing from a critical analysis of placemaking and Joan Tronto's ethics of care, a comprehensive analysis is conducted on two cases employing distinct placemaking approaches, methods, and outcomes. This thesis establishes the theoretical foundation for evaluating placemaking practices by examining the ethical implications revealed by these criteria. The ultimate objective is to develop guiding principles that enhance future community-oriented care-full creative placemaking practices. The findings contribute to a proposed framework that assists future placemakers in evaluating their placemaking endeavours.

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Introduction

In the upcoming years, neighbourhoods will encounter various societal challenges, including sustainability, climate change adaptation and the need for additional housing. Notably, vulnerable neighbourhoods will counter diverse social issues, such as ageing, loneliness, educational disengagement, social alienation, and polarisation (Fennema et al., 2023). With the growing social pressure, it is essential to consider the increasing number of individuals engaged in informal caregiving, as many face overwhelming burdens (de Boer et al., 2020). As a result, the importance of cultivating a caring society is being recognised and celebrated more frequently, and there is increasing attention to what role residents can have concerning these social and physical challenges and within achieving a caring society (Canoy et al., 2023; Ministerie van Infrastructuur en Waterstaat, 2022). Given the transition of the Netherlands from a welfare state to a participation society, it is crucial to emphasise the need for care to be shared among citizens themselves (Canoy et al., 2023). The design of a neighbourhood plays a crucial role in determining the level of residents' affective engagement with their surroundings, raising the question of whether society can be organised in a manner that fosters such involvement. Consequently, the inquiry persists regarding how residents support one another, with or without the assistance of professionals.

The shared public space may significantly enhance the quality of life in neighbourhoods through fostering a sense of community among neighbours. To achieve this, placemaking, which involves community-driven improvements in urban planning, has gained momentum. Initially, placemaking is used to strengthen communities in response to growing segregation and social fragmentation and to promote openness to differences. It is increasingly popular among city makers in the Netherlands to address previously mentioned social challenges (Fennema et al., 2023). While placemaking holds promise, ethical considerations need to be explored, mainly when aiming to create a society that values care. The design or application of placemaking has political implications; it can attract or exclude residents. Critics of placemaking claim that specific interests hide under the guise of placemaking and creating a local community (e.g. Fingerhut et al., 2023; Bedoya, 2013). For example, they contend that when the government enforces placemaking initiatives, practices no longer truly belong to the community. Furthermore, the essence of placemaking may be altered by entrepreneurial actors leading the projects. Consequently, the original objective of fostering a more resilient local community may be compromised.

This thesis aims to critically examine placemaking practices and propose principles that can enhance future placemaking endeavours with a focus on care. This perspective raises crucial questions about community development's ethical intentions, processes, and outcomes. Furthermore, reviewing placemaking practices through a critical lens provides a theoretical foundation to ensure that community development initiatives prioritise the well-being and inclusivity of all community members. The thesis will specifically focus on the practice of *creative placemaking*, which is frequently employed in urban planning. The goal is to strengthen and enrich creative placemaking practices that foster caring communities, drawing insights from the care theory developed by Joan Tronto (1993). By applying the principles of ethics of care, it becomes possible to conduct the required critical evaluation of placemaking projects. Ultimately, the thesis aims to demonstrate how *care-full* practices of creative placemaking can effectively facilitate broader social processes and contribute to the development of stronger communities. The following research question will be the focus of the study.

How can I use care ethics such as Tronto's approach to better arrive at an analytical and ethical framework to enrich creative placemaking as a care-full practice? This question leads to the following sub-question: *What insights may be derived from an ethics of care to reveal ethical implications of creative placemaking?*

Chapter 1 will explore the concept of placemaking, offering a comprehensive understanding of its nature and applications. Furthermore, various problems and critiques surrounding contemporary creative placemaking will be discussed. Chapter 2 will centre around the ethics of care, commencing with an in-depth literature review that explores formulations of care ethics. This review will first emphasise the care/justice debate, serving as the initial groundwork for the ethics of care. Ultimately, this chapter will culminate in the presentation of the leading theory adopted for the thesis, rooted in the influential work of Joan Tronto. In the latter part of Chapter 2, a critical lens will be developed derived from critiques of placemaking, elements of care ethics, and critiques of care ethics. This assists in formulating three criteria that will encompass: the ethical motives of the project, its emphasis on disadvantaged citizens, and the level of community involvement. In Chapter 3, two case studies will be examined through these criteria: Cascoland and Berlijnplein. Mainly the first case will illustrate what a care-full practice of placemaking can entail. While the second case study will be subject to a more critical analysis. For that, it is essential to note that the

intention is not to question the positive intentions behind the second case. Instead, the objective is to enhance placemaking practice by incorporating the ethics of care. Ultimately, the discussion of these case studies in Chapter 3 will lead to developing an analytical and ethical framework rooted in Tronto's care theory. This framework will provide future placemakers with the means to evaluate care-full creative placemaking practices.

Chapter 1: Placemaking Within Urban Development

This chapter shortly dives into the historical origins that have given rise to the concept of placemaking. The subsequent section provides a concise explanation of the essence of contemporary placemaking, accompanied by an exploration of its primary goals. The final sections of the chapter focus on creative placemaking, thoroughly examining its practice and addressing the diverse critiques associated with it.

1.1 Roots and Development of Placemaking

Placemaking emerged in the 1960s as a critique of traditional, rigid urban planning by the establishment and those in power. It offers the opportunity to arrive at a relevant, informal alternative to planning that is more tailored to the local needs of people and their environment. Urban theorists Jane Jacobs (1961) and later William Whyte (1980) expanded the idea of the city that it should not only be a place to live and work but that individuals and persons are *users* of the city. Public space is one of the essential aspects of how the living environment is experienced by its users. One of the theorists, Jane Jacobs (1961), argues that the complexity of a city at that time and its users were overlooked by 'modernist' urban planners. According to Jacobs, planners cared little for a socially sensitive form of urban planning design (Jacobs, 1961). According to her perspective, the emphasis of urban planning should shift away from the aesthetics of buildings and towards addressing the needs of individuals. "Cities have the capability of providing something for everybody, only because, and only when, they are created by everybody" (Jacobs, 1961:238). This thought was important to point out that the public space contributes to social and liveable cities, leading to a further conceptualisation of placemaking. The spatial and material qualities of urban design shape how citizens meet needs, develop capabilities and cultivate relationships. Placemaking encompasses a set of techniques and approaches within contemporary planning practices, intending to involve local communities in shaping their own living environment Whyte

(1980). Placemaking centres around enriching function and significance, creating "lived spaces" as described by Lefebvre (1991:6). It represents the space where social relations occur and is actively experienced within everyday life.

In the modernist architecture era, urban planners primarily focused on creating a progressive and better future, focusing on achieving progress and innovation. However, nowadays, new ideas within urban planning revolve around urban collaboration, livability, collectivity, and inclusiveness (Fitz et al., 2019:12). Therefore, city makers and urban planners are becoming increasingly aware of the potential of placemaking. Placemaking is used more and more often as a tool for improving public space because of its crucial role in user's perceptions of the living environment. (Fingerhut et al., 2023:13). Therefore, placemaking initiatives have gained momentum to fill empty spaces between buildings, aiming to build stronger urban communities (Strydom et al., 2018). This means neighbourhoods are improved in a way that residents like to reside there and that it is easier to encounter other neighbours (Lentini et al., 2010). Furthermore, in the words of Amin (2008:6), when public spaces are appropriately organised, they hold the potential for social connection, enabling us to break free from our daily routines and foster a greater openness towards others. Cities are a dense ecology of cultural differences and pluralistic views, and placemaking is seen as an opportunity where all these different cultures and stories can meet.

Within the Netherlands, much of the public space is in use, built on, or designated (de Nijs, 2022). As a result, there is little public space available where a community can develop naturally. For this, placemaking is introduced as a tool for residents, whether or not supported by professionals. Together they look at how they destinate the shared public in-between space in the neighbourhood. Citizens create and transform urban public spaces when they inhabit said spaces. Engaging people in the development of these places may contribute to enhancing the quality of life in neighbourhoods and cities, fostering a stronger sense of belonging and connection among residents (Placemaking Europe, 2021).

Placemaking projects may start as a temporary intervention in the in-between space of neighbourhoods. However, they may grow into long-term projects. One example of such an intervention is the Buurthaven (Fig 1.) neighbourhood in Amsterdam Noord. The Buurthaven became a hub for various community projects associated with social initiatives and residents from surrounding neighbourhoods. These vary from a vegetable garden to a 'Gallic table' (a participation afternoon where you can fantasise about possible following interventions

together) to a temporary carpentry workshop. This shows a planning technique that offers an open, unstructured framework for planning and implementing targeted interventions. The projects try to transcend a one-size-fits-all architecture that may exclude rather than include (Davis, 2021:25). Where much urban planning still focuses on broad human needs, it is responding to generic needs that may exclude rather than include (Davis, 2021:25). When referring to neighbourhood development, it is more often suggested that it is necessary to look closely to specific needs that are at stake (Hoorn, 2023). A closer look at a specific place or neighbourhood can better address the broader needs and dynamics within it. As Sendra and Sennett (2020) rightly point out, active "communities… hold a powerful knowledge… of great value to urban designers. Partnering with these groups to provide new public spaces and community infrastructure enhances socio-material interactions and starts new ones' (2020:108–109). Placemaking has the potential to do so in this respect.

(Fig 1. 'Gallische Tafel', Buurthaven, 2020)

Three significant goals of placemaking relevant to this thesis are as follows. Firstly, placemaking aims to foster a sense of community through collective efforts that shape shared spaces, allowing for meaningful experiences for all involved (e.g., Styrdom et al., 2017; Wyckoff, 2014). These experiences give residents a sense of belonging and importance

within their neighbourhood, thereby achieving a sense of place. The urban planning and placemaking literature underscore the significance of "place" as a social-cultural anchor, bringing people together and strengthening community bonds (Thomas, 2016; Castello et al., 2016). Secondly, placemaking serves as an empowerment tool and can be employed to reclaim public spaces affected by privatisation, a concept referred to as critical placemaking by Toolis (2017). It empowers individuals by giving them agency over the shared public spaces they use and develop. It is a counter-movement and critique of traditional urban planning that rulers and influential urban planners often drive. Thirdly, placemaking is crucial for cultural development (Lefebvre, 2004; Hes & Hernandez-Santin, 2020; Friedman, 2019). Public spaces have a unique ability to establish a rhythm of life, contributing to humanising the space, as argued by Lefebvre (2004). According to Friedman (2007), this lies at the core of placemaking, where people's needs, desires, and preferences for their living environment guide the process. Therefore, Placemaking is essential for our existence and culture, as it allows individuals to imbue spaces with meaning, transforming them into meaningful places (Hes & Hernandez-Santin, 2019:3; Harrison & Tatar, 2008). A place becomes significant when it is authentic and fosters an emotional connection and a sense of connectedness to the community.

To conclude this section, the previous insights hopefully shed some light on its conceptual origins and goals. However, it is essential to note that the concept of placemaking remains broad and multifaceted. Since the emergence of placemaking, the concept has been enriched with various in-depth concepts and is therefore understood differently. There are several types of placemaking, each with distinct goals and strategies. As a result, motives, processes and goals from placemaking projects diverge. Fingerhut et al. (2023) argues that placemaking requires a more comprehensive definition due to its flexible nature. In this way, evaluating the effectiveness of the specific placemaking project becomes a challenging task. In an effort to contribute to this understanding from an ethical perspective, my focus will be on creative placemaking, as it is regarded as a promising approach to ethical placemaking. Creative placemaking incorporates art, culture, imagination, and design into the process of shaping places. The subsequent section will delve further into this practice.

1.2 Creative Placemaking

Creative placemaking mainly focuses on creating lively and artistic places. Think of artistic and cultural activities that strengthen the community, especially when they reveal and celebrate its character and identity (Meagher, 2020:170). Creative placemakers use artistic methods that help enhance the users or those involved experience. It is an action-based practice in the public domain, aiming to support the community through artistic methods and support. According to Markusen & Gadwa (2010), the definition of creative placemaking emphasises three features: strategic action by cross-sectoral partners, a place-based orientation, and a core of arts and cultural activities. They argue that creative placemaking improves the quality of life in terms of the concerns of people who live, work, and visit the place, encompassing aspects such as safety, aesthetics, expressiveness, and environmental considerations, all contributing to the overall quality of life (Markusen & Gadwa, 2010:3-7). To complete their definition, as Fingerhut et al., states in a more recent study of placemaking, "The more powerful the place, the more different it is from other places without being disconnected from its surroundings, the better it serves the community." (Fingerhut et al., 2023:3).

Within practices of creative placemaking, artists collaborate with local community members. For example, artists employ artistic methods to gather feedback and insights. To better understand this in practical terms, let us explore an example. The work of Pink Pony Express (2011) illustrates a so-called artistic approach. A 20-meter-long pedestrian and bicycle tunnel would be closed because users felt unsafe in this dark tunnel. Pink Pony Express initiated a project called 'Thirty Meters' (Fig 2). The visualization showcases pedestrians walking through the tunnel, highlighting how busy and important this route is for the community. Due to the input received from the project, the municipality opted not to close the tunnel but instead installed a permanent light sculpture. This example, along with the previously mentioned case of the Buurthaven, shows how artists employ action-based and creative approaches to effectively respond to specific circumstances and engage with the pertinent issues within urban spaces. Artistic methods can be employed in diverse ways to give meaningful form and substance to public spaces, working collaboratively with residents.
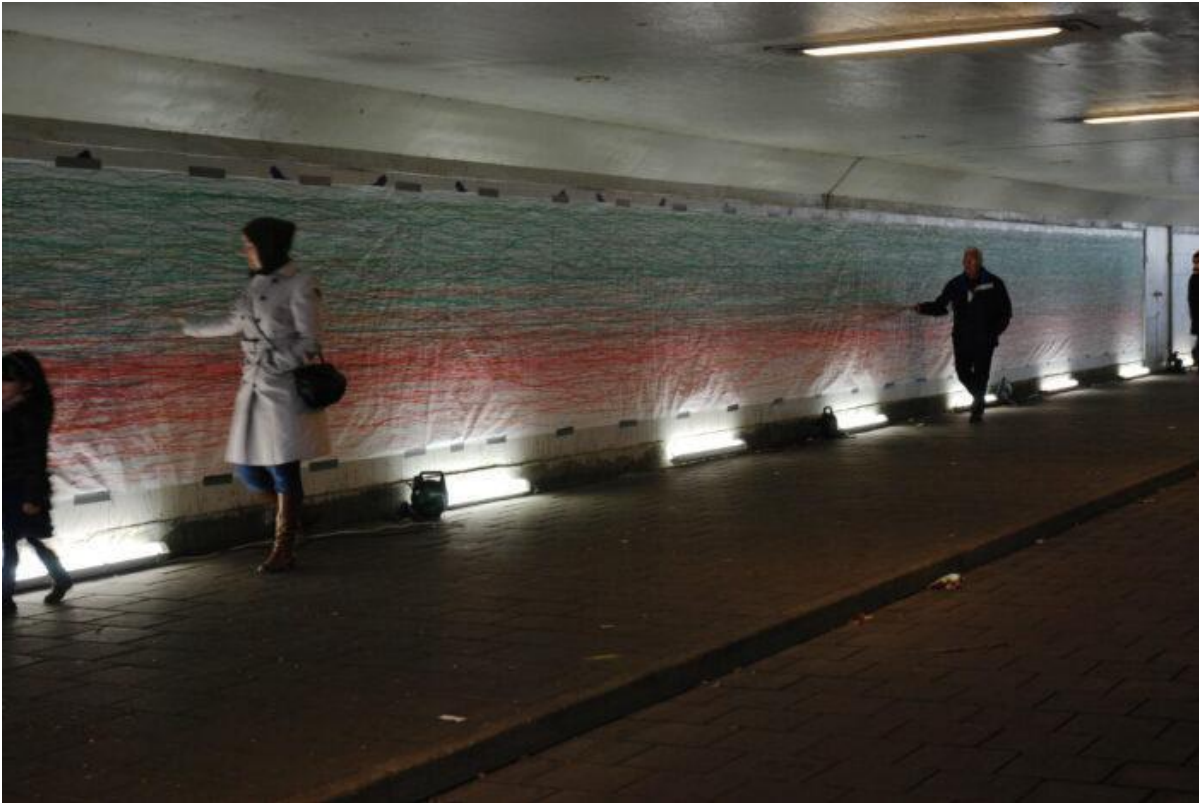
(Fig 2. "Thirdy Meters" Pink Pony Express, 2011)

Concluding this section, it is evident that creative initiatives possess the potential to bring together residents, artists, community organizations, and government agencies, enabling the activation of overlooked public and private spaces through arts and cultural projects. Furthermore, these methods entail using participatory decision-making structures to increase residents' voice and representation (Wichowsky et al., 2022). However, it is important to acknowledge potential challenges associated with creative placemaking. As the subsequent section will demonstrate, critically examining their effectiveness in fostering community and enhancing neighbourhoods through placemaking is necessary. These challenges may divert from the original objective of placemaking, which is to strengthen community-oriented neighbourhoods.

1.3 Criticisms of Creative Placemaking

In this section, two critiques regarding placemaking will be examined. The first critique highlights that creative placemaking can sometimes become apolitical and exclusive, disregarding important socio-political aspects. The second critique asserts that some creative placemakers may prioritise personal artistic gains rather than focusing on the broader benefits of these projects. Subsequently, an exploration of how placemakers strive to address these

issues will be undertaken, with a particular focus on the adoption of participatory processes. However, it is essential to recognize that not all challenges of placemaking can be fully resolved through participatory approaches, as underlying power dynamics inevitably shape placemaking practices. To address this, the perspective of Mouffe (1999) is considered, who advocates for a pluralistic democracy that embraces the coexistence of diverse voices.

The first critique of placemaking entails that initiatives have been criticised as apolitical and exclusive (Hes & Hernandez-Santin, 2019; Bedoya, 2013). For example, Bedoya (2013) argues that creative placemaking makes a public space economically attractive, therefore, it fails to respond to at-play problems such as economic or racial inequality. He emphasises that placemaking efforts should always prioritise cultural and social connections. The primary objective should be reaching a sense of belonging, which is challenging in a society marked by various forms of exclusion. The question remains how to attain community through placemaking, which accommodates cultural differences within civic participation, enhancing community understanding of citizenship beyond the boundaries of leisure and consumption (Bedoya, 2013). There is concern that placemaking may primarily benefit the elite: the "creative class" is "creating exciting and dynamic neighbourhoods as a way to attract affluent residents" rather than helping marginalised residents and possibly even driving them out (Doucet et al., 2010). Polishing, beautifying, or regenerating public spaces are employed to attract investment. If artists fail to learn from the community they are invited to work with, the project not only falls short politically but also aesthetically, regardless of any external consensus it may receive (Tartari et al., 2022:181). Therefore, meaningful artistic projects require genuine engagement and learning from the community to achieve political and aesthetic success, regardless of any external validation the project may receive.

The second criticism highlights that creative placemaking is used to benefit one's artistic practice (Fingerhut et al., 2023). Artists may seek to showcase their skills, secure funding, and promote their artistic vision and abilities. At the same time, the creators strive for an aesthetically impressive product that represents their practices and illustrates their artistic skills. Either way, these motivations may conflict with the vision or needs of the community. When these elements are not only absent but not even considered, marginalised communities are exposed to the full consequences of aesthetic injustice, which often arise from real estate-focused urban development processes (Tartari et al., 2022: 182). The decision-making processes involved in artistic projects are often led by 'experts' in their

respective fields rather than actively involving residents or community organisations. As a result, the projects may occupy a prominent place in urban space but may not necessarily foster social engagement or community activities (Fingerhut et al., 2023). Calls for creative placemaking can attract external creatives who may need more familiarity with the specific local context, and not only being specialised in designing or constructing particular public space projects. The commercialisation of placemaking may turn it into an economical product driven by public donors, artists, or entrepreneurs aiming to create visually appealing places that showcase creativity. Unfortunately, community involvement is often secondary in such projects, and the potential for local community empowerment needs to be improved (Fingerhut et al., 2023). Furthermore, the artist may become a dominant figure who intentionally exploits the community's cultural assets, making a project only accessible for the wealthy elite (Tartari et al., 2022:182).

To address the criticisms of creative placemaking being apolitical, exclusive, and prioritising personal artistic gains, proponents argue that adopting a bottom-up, participatory approach is crucial to achieve social success in placemaking (Slingerhut, 2021; Pannone, 2019; Kalandides, 2018). For example, Slingerhut (2021) studies participatory processes and how to actively involve people in the research process of designing interventions. Involving citizens in the design process enables them to better understand the actual needs and requirements at hand (Slingerhut, 2021:9). Harvey (2003) argues that the claim to a public (city) space should go beyond individual interests to enhance the preceding further. Reshaping this place is, in fact, a collective exercise. If we look at the intrinsic goals of placemaking, the dominating goal is to strengthen the community, but what constitutes a strong community? Therefore, our relational nature and its societal role must be recognised and prioritised. This is also referred to by geographers as 'intersubjectivity', meaning that we are constitutive of each other's identities and environments (Massey, 2004). We are "made by and making [our] relations in reciprocity with other subjects and with… (multiple, diverse) locations" (Massey, 2004:128). We are not isolated individuals, but rather, we are interconnected and mutually influenced by diverse factors.

As Iris Marion Young (2000) eloquently describes, we should 'dwell together' in 'complex and causal' relations of interdependence within specific atmospheric and material conditions (Young, 2000:224). Within her vision of the ideal city, the recognition and validation of social relations among diverse groups take precedence over their concealment,

thus embodying an aspired normative ideal. She characterises 'city life' as the coexistence of unfamiliar individuals who collectively form the fabric of our social connections. Therefore, we must see ourselves as embedded beings in close relationships with others, including non-human life forms, who need care and a place for sustenance. Simply put, we are in a continuous connection with our living environment. As Jessica Riley described in the Routledge Handbook of Placemaking, the city is alive yet often thought of as 'built' rather than 'lived'. Riley describes how aesthetics of place shape our behaviours, beliefs and relationships; they are crucial to understanding our position in the world and with each other. Our responses to these interconnected aspects reflect the society we are part of, the collective influence of others we share it with, and our individuality (Riley, 2020). By acknowledging interconnectedness and embracing a bottom-up approach through, for example, participatory processes, placemaking aims to move away from an instrumental or commercial focus to prioritising the well-being and empowerment of communities. If placemakers fail to acquire knowledge from the community, the project ultimately becomes a failure in terms of its political impact and aesthetic value, regardless of any external consensus it may receive (Tartari et al., 2022:181).

Establishing participatory processes can be highly complex, particularly due to the intricate networks of relationships within urban life, where various actors hold diverse political interests and desires. Chantal Mouffe (1999) offers a critique of deliberative and participatory democracy, in which differences are sometimes ironed out because individuals are asked to agree. Sometimes even to already predetermined outcomes. Instances of the misuse of participation are prevalent, ranging from the advancement of hidden agendas (White, 1996) to deceptive engagement (Arnstein, 1969). In placemaking, the inherent complexity necessitates that participatory processes strive to provide everyone with a voice and ensure that desired outcomes are shaped by their input, to the extent possible within each individual's capabilities. This does not imply that everyone will agree with the final result, especially considering that not everyone may have equal opportunities to participate. Mouffe (1999) suggests unity can be achieved by recognising and respecting differences rather than erasing them. As Mouffe argues, an 'agonistic' democratic approach recognises "the real nature of its frontiers and recognises the forms of exclusion that they embody, instead of trying to disguise them under the veil of rationality or morality." (1999:757) She argues that every identity is relational. The existence of every identity depends on affirming difference and acknowledging the role of the "constitutive outside" (Mouffe, 2005:2). Moreover, such

an agonistic approach helps to ensure the multiplicity of voices that a pluralistic society encompasses and the complexity of different power structures that this intrinsically entails (Mouffe, 1999:757). In this context, the role of art is not solely to enhance the livability of a neighbourhood or the viability of individuals. Instead, they should engage in a dissensual practice challenging established norms, assumptions, and power structures, operating in opposition to hegemony and grounded in people's real lives and conflicts. According to Mouffe, the public space in modern metropolises and city planning not only reflects but also reinforces asymmetrical power relations in liberal societies. Chapter 3 should include these valuable insights and considerations in the critical analysis of the case studies.

To conclude, this section addressed two key criticisms of creative placemaking: its potential apolitical nature, exclusivity issues, and potential exploitation for personal artistic gain. These criticisms serve as the basis for the first criteria for evaluating the case studies, which will be further developed in Chapter 3. A comprehensive analysis of the ethical implications and effectiveness of creative placemaking can be conducted by addressing these concerns. Participatory processes are often seen as a solution to these criticisms. However, hidden challenges within placemaking pose obstacles to achieving community reflection. However, this only solves some of the problems of placemaking. It is vital to examine whether creative placemakers possess the necessary capabilities to effectively cater to the needs of residents rather than solely focusing on creating aesthetically captivating projects. Bedoya (2013), therefore, argues for an "aesthetic of connectedness" that prioritises spatial justice, healthy communities, and imaginative spaces beyond mere development strategies. Artists must renegotiate their aesthetic intentions while collaborating with the local community to ensure the mutual significance of the project. The following chapter will explore the ethics of care, providing a valuable framework to delve deeper into the issues of placemaking and guide the practice of a care-full creative placemaking.

Chapter 2: Ethics of Care

In this chapter, the key focus entails exploring the ethics of care. Firstly, the origins and evolution of this theory will be delved into, with particular emphasis on the care/justice debate between Lawrence Kohlberg and Carol Gilligan. Subsequently, Joan Tronto's (1993) conception of care, encompassing five phases and elements, will be examined as integral to care-full practices of placemaking. Furthermore, relevant critiques of the ethics of care

pertinent to the thesis will be discussed. By considering these aspects, a better understanding of the importance of care-full placemaking practices can be achieved.

2.1 Care-Justice Debate

The ethics of care has its roots in the field of ethics, particularly in the critique presented by Carol Gilligan in her book 'In a Different Voice' published in 1982. Gilligan's critique challenged Lawrence Kohlberg's theories of cognitive moral development and shed light on how societal norms assign different psychological competencies based on gender. This critique sparked the care/justice debate, revealing the limitations of a male-oriented moral discourse emphasising autonomy and rational decision-making. Gilligan's research, as outlined in her book 'A Different Voice' (1982), aimed to explain why women consistently scored lower in Lawrence Kohlberg's tests of moral development. Through her analysis of women's thinking about moral problems, she identified a distinct moral perspective, referred to as a different voice, that differed from the perspective embedded in Kohlberg's theory. Gilligan found that two moral voices could be reliably distinguished in how people framed and resolved moral problems and evaluated choices (Gilligan, 1988:8). One voice emphasised connection, care, and response. In contrast, the other emphasised equality, reciprocity, justice, and rights. Although the predominance of these voices was not strictly tied to gender, there was a gender-related pattern.

One of the key criticisms of the prevailing theory of rights and duties was the focus on the individual as a separate entity, detached from others. In contrast, a different perspective emerged emphasising human beings' interconnectedness and relational nature. Gilligan embraced this view, recognizing that individuals are not isolated entities but are shaped and defined through their relationships with others (1982:8). This approach led to a sense of responsibility for nurturing and maintaining these relationships. Those who adopt the care perspective see themselves as accountable for fostering connections and ensuring the well-being of others within their circle of familiarity and protection. In contrast, prevailing justice theories centred on individualism often prioritize self-interest and overlook the importance of maintaining meaningful relationships with others.

Kohlberg, in contrast, asserted that individuals at the highest stage of moral development tend to respond to moral dilemmas using language such as 'duty' and 'morally

right', employing them in a manner that implies universality, ideals, and impersonality (Kohlberg, 1981:22). Kohlberg's theory defined moral development through phases, with the highest phases rooted in a reflective understanding of human rights. However, Gilligan highlighted a distinct difference between the morality of rights and responsibility. The morality of rights emphasises individualism and separation, prioritising the individual over relationships. The previous drew inspiration from Kantian philosophy, including the ideas of Rawls (1971), who focused on justice and equality in distributing resources within a liberal society, particularly among the most vulnerable. According to Kohlberg, a morally good person reasons and acts based on principles of justice and fairness. However, this perspective needs to improve in developing comprehensive problem-solving skills and address the societal and institutional factors that contribute to problems or potential solutions. In contrast, adopting the ethics of care approach promotes effective problem-solving, nurtures connected knowledge, and encourages a broader perspective on ethical issues (Gilligan, 1982).

Gilligan's research on women's moral reasoning reveals a distinct approach to moral problems that emphasises care, relationships, and responsibility (Gilligan, 1982). While this moral voice is not exclusive to women, it is more commonly observed among them. Gilligan underscores the importance of care rooted in qualities like closeness, compassion, and mutual respect, leading to moral judgments centred around empathy, harm prevention, and suffering avoidance (Gilligan, 1982:62). The ethics of care, as proposed by Gilligan, prioritises contextual knowledge, emphasises the significance of connection, and recognizes the compatibility of self-care and caring for others (Gilligan, 1982). Gilligan also acknowledges the complementary nature of the ethics of care and the ethics of justice, considering them integral to understanding human development (Gilligan, 1982:33). However, she clarifies that the contrasting voices are intended to highlight different modes of thought and address interpretive issues rather than making broad generalisations about gender (Gilligan, 1982:2). Despite this clarification, a cultural discourse has associated women's voices, female identity, and the ethics of care as a specific "moral problem by women", partly due to the ambiguity in Gilligan's early work (Gilligan, 1982:19). This unintentional association has reinforced gender stereotypes and hindered the development of a comprehensive, all-inclusive, and politically oriented ethics of care.

Some interpretations of Gilligan's theory explicitly labelled the 'other voice' as representative of female morality, perpetuating the gendered stereotype (e.g., Tronto,

1993:82; Voet, 1998:118; Wendel, 2003:40). This interpretation overlooks the broader possibilities of care as a moral perspective embraced by individuals of any gender. The conceptual and theoretical ambiguity in Gilligan's early work contributed to the formation of this phenomenon and hindered the development of an all-encompassing, political ethics of care. In contrast, contemporary care theorists have vehemently opposed and refuted associating care ethics with feminist essentialism (e.g. Tronto 1987; Ruddick, 1989; Fisher & Tronto, 1990). According to Tronto, care ethics must be seen as intellectual care. It should not focus on gender differences but "in discourse about the ethics' adequacy as a moral theory" (Tronto, 1987:646).

The theory of Gilligan has therefore failed to be regarded as a fully-fledged moral and political theory of care because ethics of care does not only focus on relations and activities between women, which was still the basis of their care theory. Later versions of the theory of care penetrated the politics, public policy, and ethics field, leading to several important works by famous care ethicists (e.g. Tronto, 1993; Sevenhuijsen, 1998; Kittay, 1999). Gilligan paved the way, in particular, for the theory of Noddings (1984) and Tronto (1987). Nel Noddings puts forth the concept of "an ethic of caring" as a feminist approach to ethics that emphasises care with a primary focus on the philosophy of education. However, this ethics of care is problematic for feminism because it promotes caring as the exclusive foundation of ethics, which can impede a woman's quest for autonomy and reinforce traditional gender roles. Tronto especially warns against the risk of confusing an ethic of care with women's private life-oriented morality and presenting it as a supplementary moral theory, both of which she identifies in Noddings (1984) and the dominant interpretation of Gilligan (1982). Tronto developed an ethics of care that expanded into politics, public policy, and ethics, making it possible to explore the broader implications of care in societal structures, institutions, and decision-making processes.

In summary, Gilligan's fundamental ethics of care were explored, along with the care/justice debate. The ethics of care originated from Gilligan's critique of Kohlberg's theories of moral development, challenging male-oriented moral discourse and emphasising the importance of relationships and interconnectedness. While Gilligan's work unintentionally reinforce gender stereotypes, this conception of ethics of care eventually will pave the way for Tronto to develop a full-fledged theory of care, which will be the specific focus of this thesis. Tronto (1987) suggests detaching ethics of care from the ideal of

maternal care and morality of justice, as it entails a fundamentally hierarchical perspective on human relationships and obscures power dynamics that often impact the content, distribution, and boundaries of care activities (Dietz, 1985). The following section will elaborate on Tronto's so-called full-fledged theory of care.

2.2 Towards a Full-fledged Theory of Care

This section will center on Tronto's conception of the ethics of care, specifically its political implications and its link to justice. Tronto's theory provides a critical framework for understanding the political dimensions of care, which is essential in evaluating and addressing social issues related to care practices, such as placemaking.

Tronto critically examine the philosophical potential of the ethics of care, resulting in a proposal of "a full-fledged moral and political theory of care" (Tronto 1987:657). Tronto's work laid the foundation for a comprehensive moral and political theory of care, offering a deep understanding and examination of care. Her theory encompasses a wide range of human activities that sustain life while addressing the inherent political dimensions of power and conflict within caregiving efforts. Eventually, Tronto and Fischer (1990) arrived at the following much-quoted definition of care: "a species activity that includes everything we do to maintain, continue, and repair our 'world' so that we can live in it as well as possible. That world includes our bodies, ourselves, and our environment, all of which we seek to interweave in a complex, life-sustaining web" (Fisher & Tronto 1990:103). This generic definition of care emphasises that care revolves "in everything we do" (Fisher & Tronto 1990:40). They deliberately define the field of care broadly because this field is so vast that it encompasses not only care activities but also care for the natural environment, for non-humans, animals and even for man-made spaces.

Eventually, Tronto's book Moral Boundaries (1993) became an influential work on care that deals with the political significance of care. Her work deals with arguments that focus not only on women's morality but on ethics of care that encompasses values traditionally associated with women (Tronto, 1993:5). In her book, she sheds further light on the care/justice debate between Kohlberg and Gilligan, but argues the debate should not necessarily be about the difference between sex. She analyses that both theories focus on separating the public and private spheres and fail to question the distinction between justice and care. According to Tronto, Gilligan interprets the ethic of care almost entirely in terms of

personal relationships, ignoring the possibility of connections to larger entities, such as one's extended family or community. Both Kohlberg and Gilligan's theories fail to challenge the division between public and private spheres and the distinction between justice and care (Tronto, 1993:96). That is why Tronto delves deeper into the social and political arrangements that facilitate care and contribute to creating a more just world that embodies good care. Tronto emphasises the close relationship between care and justice and the need for concepts such as equality, democracy and justice to address care-related issues and understand the conditions for good care. She argues that care flourishes best in a just, pluralistic, and democratic society (Tronto, 1993:21). As a practice, care can inform democratic citizenship as it encompasses the qualities individuals require in a diverse society.

Tronto (1993) makes three distinctions between the ethics of care and the ethics of justice: first, the ethics of care is based on the concepts of responsibility and relationships rather than those of rights and rules; second, the ethics of care is bound to actual conditions rather than to formal and abstract conditions; and third, care is an activity, not a set of principles. In addition, it is essential to mention that the ethics of care focuses on actions from agents. Tronto argues that ethics of care involves a "habit of the mind to care" (Tronto, 1993:127), not only to be emotionally affected by the plight of others but also to be oriented to help them. To quote Tronto: "The moral question ethics of care takes as central is not – What if anything do I (we) owe to others? But rather – How can I (we) best meet my (our) caring responsibilities" (Tronto, 1993:137). Tronto's view of care ethics emphasizes a shift in focus from the abstract notion of moral obligations and duties to the practical question of how individuals can effectively fulfil care responsibilities. Rather than thinking only about what we owe others, care ethics focuses on actively pursuing fulfilling our caregiving responsibilities. It is essential to mention that care should not be viewed as a burden but rather as a vital aspect of active citizenship. This viewpoint acknowledges the fundamental interconnectedness among individuals, highlighting the significance of care as the foundation for a resilient community. Furthermore, "care ethics is a practice of active citizenship based on notions of relationality and interdependence. Care is best thought of as a practice [which involves] ... both thought and action, that thought and action are interrelated, and ... are directed to some end" (Tronto, 1993:108). Thus, care as a practice is not a mere set of arbitrary actions; it aims to achieve particular goals that contribute to strengthening a community. By focusing on this concern, individuals can engage in concrete actions that foster a regenerative process for the betterment of their community.

However, in order to arrive at a complete understanding of this all-encompassing practice, Tronto recognises several important problems and harmful aspects of care. She describes the destructive patterns of care (Tronto, 1987:661). She pays explicit attention to those negative sides because only when we have a picture of them can we fully develop an ethics of care. Indeed, one of the main problems of an ethic of care she recognises is unequal power relations determined by existing political structures. Against the background of the understanding, we ought to consider care and how existing social and political power structures and inequality influence it. Flawed social and political arrangements mainly create fragmentation and imbalance of care. That is why it is crucial to arrive at a fully-fledged ethics of care that also scrutinises the functioning of social and political institutions from a critical perspective. These theories should critically examine existing institutions and address important questions about the origins of care, membership in a caring society, the role of the market, educational responsibilities, acceptable levels of inequality, and the inclusivity of relationships. Such a social and political theory must answer some of the following questions: How to ensure that the web of relationships spun widely enough so that some are not beyond its reach? Who are the actors of caring? How far should the boundaries of caring be expanded? How can we guarantee that groups of people are not unnecessarily privileged in their ability to acquire care? How do caring arrangements contribute to meaningful social and political participation? Who should be responsible for the availability and quality of care on a social scale? (e.g. Tronto, 1987-1989; Sevenhuijsen, 1998; Sevenhuijsen., 2003)

Tronto emphasises the importance of critically analysing questions and examining the influence of social and political structures in shaping care practices to achieve a comprehensive understanding. Tronto focuses on conducting an analysis of care that enables the evaluation of care practices. If care is seen as an ongoing process, it compromises distinct yet interconnected phases (Tronto, 1993:106). The following section will provide further elaboration on these phases.

2.3 Five Phases and Elements of Care

In this section, the examination of the five care phases associated with the five care elements will be conducted. These phases and elements serve as valuable tools for critically evaluating placemaking practices. These components hold significant importance as they form the basis for the second criterion utilized in analysing placemaking cases.

As proposed by Tronto (1993), the five phases of care are *caring about, caring for, care giving,* and *care receiving*. In 2013 she supplemented these phases with a fifth, namely *caring with* (2013). Tronto argues that to care correctly, it is necessary to integrate all of them into one's caring actions and into the five 'phases' of care. In caring about, one is attentive; in caring for, one is responsible; in care giving, one is competent; in care receiving, one may also receive care and is sensitive to the caregiver's perspective; in caring with, agents ensure that care takes place reciprocally. It seems reasonable to assume that Tronto's indication of phase suggests a temporal ordering so that the phases progress sequentially. However, as she clarifies in her theory, these phases partially overlap, and their order is not obligatory. Let us delve deeper into these phases and explore their associated elements. These phases and the two remaining criteria will form the basis for analysing the cases discussed in Chapter 3.

The first phase, *caring about*, entails "the recognition in the first place that care is necessary" (Tronto, 1993:106). This implies the value of attentiveness as a moral predisposition to an ability to notice and adjust to another's situation. According to Tronto, the care process begins with 'caring for', when we become 'attentiveness' to the needs around us. Attentiveness is also the tendency to become aware of the needs. This means "recognition of a need and that there is a need that is cared about" (Tronto, 1993:107). As Tronto says, "[c]are is the perspective of taking others' needs as the starting point for what must be done" (Tronto, 1993:105). Tronto argues that promoting this kind of attention is essential in ensuring that certain individuals and things are not neglected but taken care of. Tronto also reminds us that insufficient attentiveness can be a moral failing. Needs form the basis on which care as a practice encourages a specific response (Held, 2006:32-4). It acknowledges that care involves responding to specific requirements or demands that individuals may have. Attentiveness entails a hyper-receptive 'listening-in' to 'others' needs (Noddings, 2003). It implies actively listening and paying close attention to the nuances and subtleties of what others require or desire. For instance, it could involve designing spaces that facilitate encounters between neighbours within the context of urban development. Brownlie and Spandler (2018) researched those spatial characteristics and everyday infrastructures, enabling neighbourly interactions that can contribute to caring relationships among residents (2018:8). Placemaking practices can play a crucial role in enabling and facilitating these meaningful encounters. When attentiveness between neighbours transforms into intention, we transition into the second phase.

The second Phase, *caring for,* involves recognising that "one can act to address these unmet needs" and developing a sense of 'responsibility' to respond to another's situation. It can be understood and adopted to varying degrees in the different relational contexts in which people and things are involved. Responsibility should entail that individuals are both involved in care giving and receiving. "Ultimately, responsibility to care might rest on several factors; something we did or did not do has contributed to the need for care, and so we must care." (Tronto, 1993:132) This notion highlights a sense of responsibility and a duty of care we owe one another. Tronto argues that this responsibility can be extended to cases where individuals have a direct causal relationship with the need for care (for example, caring for a child). Moreover, it may apply to situations where individuals may not have a direct connection to the arising need for care. Neglecting or bypassing an opportunity to assist an elderly neighbour in carrying a heavy online order may be an example of disregarding this responsibility. Placemaking plays a significant role in shaping the experience of a neighbourhood, as the surrounding environment influences it. Shifting from individual neighbours to a unified community is essential, encompassing more than individual care between neighbours. It involves cultivating a culture of care within the neighbourhood itself. This emphasizes the need for specific prerequisites within the shared environment to foster meaningful connections among residents.

The third phase, *care giving*, contains meeting needs and relates to 'competence'. The phase of giving care takes a closer look at the actual practice of care, whether this means giving medicine to a patient, repairing something broken, or helping someone perform a task. Which care is required depends on needs. Competence is the ability to provide excellent and successful care; the proposition here is that when care is contracted, it must be performed skillfully; to do it incompetently means a lack of care. Including this element reinforces the point that ethics of care, as Tronto sees it, involves more than just the experience of an affective state; it includes action. According to Tronto, for care to be meaningful and sincere, concerns are embedded in an "actual practice that we engage with as a result of these concerns". She thereby assumes a 'burden' of care labour. However, the nature and extent of this burden depend on various factors, including the specific context and the qualities and capacities of caregivers (Held, 2006). These factors are influenced by caregivers' acquired experience and knowledge, as well as external factors such as the availability of financial or material resources to support care provision. When considering care within placemaking, it implies that placemakers should be attentive to and actively engage with the entire process.

This involves ensuring inclusivity and participation for all individuals involved to the best of their abilities. Therefore, placemakers must be sensitive to the needs of residents, aiming to incorporate them within the process of developing the project. Additionally, if placemakers involve other parties which are not necessarily located within the neighbourhood, examining their intentions and practices is crucial to ensure a genuinely caring approach.

The fourth Phase, *care receiving*, "recognises that the object of care will be affected by the care it receives" (Tronto, 1993:107) and relates to the 'responsiveness' of caring agents. Responsiveness involves the caregiving agent considering the position of others as they see it and recognising the potential abuse in care (Tronto, 1993:126-136). In this phase, it becomes evident that caring is not a unidirectional action but a mutually dynamic and interactive process involving multiple parties. The main focus of Tronto's explanation of this element concerns the idea of vulnerability. She suggests that when we are in need of care, it reminds us of our own vulnerability. In the context of placemaking, it is paramount to recognize and attend to the voices and needs of vulnerable individuals. Understanding various stakeholders' interdependence and reciprocal relationships is vital in this context. This raises crucial questions: What avenues for participation are accessible to vulnerable groups? How can their limited capacity for engagement be acknowledged and accommodated? It is imperative to create inclusive spaces that facilitate the involvement and representation of all individuals, regardless of their vulnerabilities or limitations. This entails considering how vulnerable parties can be meaningfully included in the chosen engagement methods during placemaking and ensuring that their vulnerabilities are duly acknowledged and addressed.

The fifth and last phase, *caring with,* stems from the idea that the entire care process should be conducted in a way that recognises everyone's dignity and knowledge and that creates the necessary conditions for empowerment. Tronto sees this phase as in line with the principle of 'solidarity'. However, an alternative perspective by Moriggi et al. suggests the value of 'reciprocity' (Moriggi et al., 2020). Reciprocity emphasises the potential for mutual learning, co-becoming, and transformative change that can arise through careful practice (Moriggi et al., 2020). One may question if care is reliable over time. Tronto also addresses this concern. According to her, this reliability is related to an appreciation for those who develop care. When care is provided reliably and consistently, it increases the likelihood that others will respond reciprocally, even if the initial need for care stems from asymmetrical needs. Tronto introduces the concept of "circles of concern" that encompass the life cycle.

When people live in communities where such care is part of their lives, they will feel safer, more involved, and more attentive to their living environment (Tronto, 2020:32). For example, people that are excluded from deliberations and accountability processes within placemaking significantly affect how well individuals can live and participate in the project. The final phase consolidates all the preceding phases, encompassing their interconnectedness and reinforcing the importance of comprehensive care.

To conclude, an ethics of care informs the approach to placemaking, extending its focus beyond the immediate community. By incorporating the care phases and elements mentioned earlier, placemaking projects strive to nurture a sense of neighbourliness. While these elements do not serve as a definitive checklist for placemaking, they provide a guiding horizon. When applying an ethic of care to a specific placemaking practice, relevant elements can be selected to emphasise specific goals. These five phases and their associated elements establish a foundation for the second criteria used to evaluate case studies, which will be discussed in Chapter 3. However, before delving into the evaluation of the case studies, it is crucial to address three critiques of the ethics of care in the next section. Examining these critiques enhances the comprehension of the challenges and limitations associated with the ethics of care, which will be subsequently employed in the second criteria for analyzing the case studies.

2.4 Criticisms of Care Ethics

This section examines three significant criticisms of the ethics of care that are relevant to my thesis, serving as the basis for the third criterion. Such analysis aids in gaining a more profound understanding of a critical care perspective. The first criticism concerns that the ethics of care is too broad to guide action. Second, the ethics of care needs to be clarified about where responsibilities begin and end, with the added consequence that particular needed care may not be performed. Third, ethics of care assume positions of power, which makes the person in need of care vulnerable.

First of all, the critique that the interpretation of Tronto is too broad to guide the framework of care ethics. To repeat, Tronto's generic definition: care includes "*everything that we do* to maintain, continue and repair 'our world' . . . which we seek to *interweave in a complex, life-sustaining web*" (Tronto, 1993:103). Several theorists, such as Daniel Engster and Virginia Held, have argued that too many of the labour-intensive aspects of society are

included in the theory, making it an overly inclusive practice (Engster, 2007:24; Held, 2006:32). When a large part of our daily lives consists of preserving, continuing and restoring the world, care has become indistinguishable from any caring practice. Held argues that almost any economic activity could fall under the care definition, such as "retail, residential and commercial cleaning" (Held, 2006:32) and therefore the definition "seems almost surely too broad" (Held, 2006:31). Consequently, distinctive normative care features could get lost. "Any activity that maintains, continues, or repairs our world can be justified as a form of caring (Engster, 2007:24)." However, Tronto has defended the broad interpretation of care because it is intended to operate only "at the most general level". More as an umbrella term from which specific notions of care can be derived and applied in different contexts. The limited notions of concern would be "embedded" in the broader understanding of the all-encompassing web (Tronto, 2013:19). This broad definition is necessary for evaluating placemaking because it is a comprehensive process that involves various factors, processes, and aspects. Placemaking should be approached as a comprehensive practice to recognize how these projects are interconnected and embedded within the broader understanding of the community at stake.

Second of all, regarding the distinction between obligation and responsibility-based ethics, where does the responsibility of a caring agent begin, and where does it end? On the one hand, Tronto's philosophy focuses on practice and may apply to specific situations. Care must encourage action, but it also has a more evaluative and process-oriented character. Is there a clear cause when prompted to care? For that cause, caring agents need a specific competence. Think for example of a nurse who knows what to do when the IV alarm goes off because they are trained to do so. However, some agents may not in all cases be well trained or trained to hear so-called 'alarm bells'. Assume, for example, Tronto's example of a homeless person. Stepping past a homeless person on the street in a city is one way to evade responsibility. As Tronto also wonders, what should one do? Throw money in the cup? Take the person home? Call the police? Support more housing for people with low incomes? Deciding to act and address these unmet needs is another critical aspect of care (Tronto, 2020). Tronto addresses this criticism by acknowledging that care is part of a broader web of activities in which individuals are competent agents. According to her perspective, being embedded in this web allows individuals to understand and determine appropriate actions based on their competence. Within a creative placemaking project, this could for example mean taking responsibility for considering the environmental impact of the interventions and

how it is applied in terms of sustainability. This is connected with a particular duty of a placemaker and needs to tell us something about duties that fall outside a professional character. Tronto argues that an ongoing process is crucial, which aligns with the caring-with phase. It emphasises the importance of creating a climate where coordination and processes can be recalibrated and improved.

Thirdly and finally, we come to the critique of unequal power relations within care relationships, which requires our attention. Care relationships are intricate and diverse, characterised by imbalances, responsibilities, and power dynamics between individuals. The ethics of care has faced debates regarding the desirability or undesirability of dependence within these relationships. Some critics in disability studies question the emphasis on mutual dependency, arguing that independence is also crucial for leading a fulfilling life, and creating dependency can make the person vulnerable (Kröger, 2009). Moreover, Hamrouni (2021:143) points out that Tronto's portrayal of care presents a polished and embellished image, overlooking the dominant power dynamics inherent in asymmetrical exchanges that define care relationships. By obscuring the unbalanced aspects of care, it becomes practically impossible to fully grasp its distinct facets and address the problems or understand the material consequences it may have on all involved agents. Therefore, it is crucial to consider the long-term implications and potential changes in dynamics within care relationships. Moreover, it is important to note that care should not be seen as an obligatory moral duty in all situations. Instead, understanding care and relationships helps see how individuals engage with one another and how care can contribute to attaining a good life. Tronto argues that an essential aspect of care lies precisely in these power relations and inequalities, as they can foster mutual trust and interdependence, encompassing different aspects of the broader web. When examining placemaking, it becomes imperative to contemplate how the physical aspects and processes of a given environment shape and influence the specific dynamics of human dependence, as they are all interconnected within the vast web of care. Dependency through care creates an imbalance that is not necessarily undesirable, as long as these power relations are carefully considered and shaped by projects. An example of utilising participatory processes to gather input for a project without actively empowering the participants is, this is in fact, exploiting them. Hence, it is crucial for placemakers to incorporate elements of empowerment, mediation, or facilitation to enable citizens to reclaim public space and actively contribute to the shaping of their environment.

In this section, three critiques of the ethics of care have been examined: its broad applicability, the lack of clarity in defining responsibilities, and the vulnerability of individuals requiring care. These critiques contribute to the formulation of the third criteria for evaluating the case studies. In the following section, an outline of these three criteria will be provided in more detail.

2.5 A Care-full Practice of Creative Placemaking

The goal of this section is to introduce an analysis framework encompassing three criteria derived from the preceding discussion. These criteria will be valuable tools for assessing two different case studies of placemaking practices in the subsequent chapter. Before doing this, it is important to summarise the fundamental components of an ethics of care and its relevance to urban design.

The incorporation of care into urban design is a growing trend, as reflected in the expanding literature on care in architecture and the nurturing relationships among residents (e.g., Lin, 2022; Davis, 2022; Cohen, 2021; Sandström, 2020; Newalker, 2017). Scholars have explored the application of caring principles to urban design (Cohen and Fenster, 2021; Fitz et al., 2019). Additionally, the concept of care has expanded to encompass discussions about infrastructures and technology. María Puig de la Bellacasa (2017) emphasises the significance of care in these contexts by considering the interdependency of buildings, machines, technological systems, and the environment. She acknowledges that care is not just a moral ideal but an inherent condition. Care is essential for the sustenance and survival of various living beings in intricate networks beyond human interactions. In light of current times, she states that architecture and urbanism must acknowledge the interdependence of planetary coexistence and the imperative to ensure ongoing livability.

The growing importance of emphasising interconnectedness and interdependence, despite the playful aversion to 'dependency' in modern industrialised societies that still exist (Puig de la Bellacasa, 2017:4). In the Netherlands, the focus on individual households is prominent within Dutch society. Nevertheless, the rising demand for increased emphasis on care and welfare is driven partly by the strains on the labour market and the ageing population. Cultural expectations and societal obligations influence individuals' ability to care for and be cared for. Consequently, citizens' initiatives have become crucial in addressing these challenges (Canoy et al., 2023). Despite the importance of such initiatives, a common

hurdle they face is the lack of consistent funding, which hinders their continuity and sustainability. As de la Bellacasa points out in her earlier work, interdependence or, we would say, reciprocity is not a contract but a condition; even a precondition" (2012:198). This perspective emphasises that reciprocity is not just a transactional concept but a crucial precondition for cultivating thriving communities. In this way, being a caring citizen encompasses the fundamental right to allocate time for caring and to actively create space for care in our daily lives (Sevenhuijsen, 2003:194). Care exists as a democratic practice in our daily lives, and being a caring citizen means making time for caregiving and actively creating space for care.

In the upcoming chapter, an examination will be conducted on two case studies of placemaking to assess the extent to which they demonstrate care-full practices of creative placemaking. The evaluation will be based on three underlying criteria derived from the previous sections and chapters: the project's ethical motives, the inclusion of disadvantaged citizens, and the level of commonality and community involvement. By critically evaluating placemaking practices using this framework, gaps in community building can be identified.

The analysis will be divided into three criteria. Firstly, the ethical motives of the specific case study, which will discuss the critiques of creative placemaking earlier discussed, namely, if the project is apolitical or exclusive. Alternatively, if the makers attached to the case study primarily use the project to benefit their artistic project. Secondly, the degree of commonality and community involvement in the case study will be examined. Drawing from Tronto's ethics of care, the analysis will assess how the placemaking project attempts to strengthen the community. This approach emphasises responsibility and relationships as crucial elements in fostering a sense of care. This will be done by utilizing the different elements and associated care phases: attentiveness (1), responsibility (2), competence (3), responsiveness (4), and reciprocity (5). In this way, the project's adherence to an action-oriented and care-focused practice can be evaluated. It is important to note that not all criteria need to be fulfilled individually, as some may overlap. However, evaluating the project's alignment with these elements and phases will help determine the extent to which it embodies a care-based approach. Thirdly, the case study will be examined regarding including disadvantaged citizens. This assessment will focus on how placemakers engage different stakeholders and whether their efforts align intending to create a stronger community. This examination directly relates to criticisms directed at care ethics, including concerns about its

broadness in guiding action, delineating responsibilities, and the potential for creating unequal power relations.

By using these three criteria, a comprehensive evaluation of the placemaking project will be conducted, considering ethical considerations, community involvement, and the inclusion of disadvantaged citizens. The upcoming chapter will evaluate two case studies based on these criteria to gain a comprehensive understanding and critically examine care-full creative placemaking practices. This analysis will provide valuable insights for future practitioners striving to achieve a care-full approach.

Chapter 3: Examining the Two Case Studies

In order to gain a deeper understanding of care-full practices of creative placemaking, it is imperative to analyse two case studies that vary in their approaches, methods, and results. Beginning with a general overview of the placemaking cases, each case study will then be examined in detail using the three criteria developed in the previous Chapter. These criteria comprise the ethical motives behind the project, the extent of community involvement and commonality, and the inclusion of disadvantaged citizens. This analysis is crucial to better understand how to approach creative placemaking in a way that is both ethical and practical.

3.1 Case Study 1: Cascoland

Cascoland is a network of designers, visual artists, performers and academics located in Amsterdam. Their expertise lies in creating sustainable public spaces that are community-driven. The projects are based on bottom-up development and shared ownership of the public space to retrieve a socially and ecologically sustainable society. The overarching goal of the creators of Cascoland is to present a different, environment-specific approach that responds to what is at stake in vulnerable neighbourhoods. As stated on their website, they initiated projects and interventions that are art- and design works that can be understood as tools to improve the public space (Cascoland, n.d.). They do not introduce their practice as a form of creative placemaking. Nevertheless, they can be adopted as such, as specific characteristics of placemaking can be linked to their working method.

For the purpose of this thesis, the focus will be on a specific long-term project of Cascoland, located in the Kolenkitbuurt, a neighbourhood in Amsterdam. When Cascoland settled there, commissioned by the municipality of Amsterdam, this neighbourhood was

characterised by high unemployment and high school dropout rates. The municipality labelled it a "problematic district" (Hannema, 2018). The municipality of Amsterdam involved Cascoland and asked them to start interventions in the Kolenkitbuurt to improve the quality of life and strengthen the neighbourhood's social fabric (ibid). Before proposing any specific projects, the makers and artists of Cascoland undertook extensive research on the targeted neighbourhood. During this process, they gained a different perspective from what the municipality had initially portrayed. Through engaging with residents and listening to their experiences, the makers discovered that the residents found it offensive to be constantly labelled as a problematic neighbourhood. They acknowledged the existence of challenges but highlighted the presence of a strong social fabric (Hannema, 2018). Therefore, before implementing any artistic interventions, the makers took the time to get to know the neighbourhood and its residents, aiming to establish an ethical foundation from which the interventions could originate. Let's describe two of these interventions to illustrate the thesis.

One example of a smaller project initiated by Cascoland is the installation of mobile chicken coops (2011-2014). The makers of Cascoland asked residents what they missed in their neighbourhood. Residents wanted to keep chickens for eggs and for the children of the neighbourhood. Since many residents lived in single-family homes, apartments, or flats, they had limited outdoor space. However, due to existing legislation, keeping chickens within the public areas of the neighbourhood was not permitted. The makers listened to the residents and came up with a solution that allowed them to keep chickens and developed mobile chicken coops. Furthermore, the project of mobile chicken coops acted as a catalyst for another initiative called Radio Kolenkip (Fig. 3). This project allowed the residents' voices to be heard in the local ether to discuss local topics.

(Fig 3. Cascoland, Mobile chicken coops, 2011-2014)

A second example of a larger project resulting from local needs was 'Kas-coland'. The project involved installing several greenhouses that the community could use for different purposes. For example, the greenhouses have been used as a community radio station, a repair workshop, a musical performance space, a library, a greenhouse to grow vegetables, and a community kitchen where cheap and saved meals are consumed (Fig. 4). While some of the greenhouses were designed as shorter-term interventions, others were installed for extended periods. The greenhouses arose from the fact that the function of public space is shifting. Much of the public space is predestined, and the shared public space disappears. The community-owned greenhouse functions as these missing shared public spaces which residents could use and substantiate for all purposes. The use and usage of these places stem from local needs and are determined through collaboration with locals. In the end, the maker's intention was to withdraw from the project so that the project could be transferred to local and benevolent residents.

After providing an overview of the creative method employed by the creators of Cascoland, a comprehensive analysis of their work will be undertaken. This analysis will be conducted using three specific criteria, allowing us to gain a more profound understanding and evaluate how we can perceive this as a practice of care-full creative placemaking.

(Fig 4. Cascoland, KlereKas, 2019 - 2020)

3.2 Cascoland: Examining the Case

This section will analyse the Cascoland case based on three criteria: ethical motives, commonality and community involvement, and inclusion of disadvantaged citizens. Through evaluating these factors, insight into the impact of Cascoland on the community can be gained, and its role as a care-full practice of placemaking can be assessed.

Firstly, the ethical motives of the specific case study will be discussed, derived from the critiques of placemaking. The first critique of placemaking is that creative placemaking is criticised for being apolitical and exclusive. However, this criticism does not apply to Cascoland's projects. Their main objective is to enhance the neighbourhood for the benefit of its residents rather than making their art projects appealing to external parties. They strive to tailor their interventions in public spaces to address local needs specifically. The projects are designed to align with their aspirations by relying on the residents' commitment, minimising the risk of exclusivity or detachment. The second critique revolves around the potential self-benefit that creatives may gain, presenting a more challenging aspect. This is because their project involvement allows them to build a reputation and expand their portfolio, creating personal advantages. However, it does not appear that the makers are solely focused on

showcasing their skills or capitalising on an impressive project. Therefore, their approach seems to align with the concept of the "aesthetic of connectedness" advocated by Bedoya, emphasising that intrinsic and ethical questions should drive projects rooted in local and social interventions. This means that the project and its aesthetics should be completely determined by the intrinsic and ethical questions underpinning it. Their intrinsic motivation is to do something other than develop an impressive project. For example, the chicken coops are designed with a functional aesthetic that prioritises their purpose rather than aiming for artistic grandeur. Similarly, greenhouses foster creativity among users through collaborative design processes conducted with residents.

Secondly, the degree of commonality and community involvement can be explored through the given elements: attentiveness (1), responsibility (2), competence (3), responsiveness (4), and reciprocity (5). The case of Cascoland shows a critical, reflective and creative working method that stems from predetermined project intentions. All focused on the local needs of the community. Cascoland's projects depend on the community's commitment; it is essential to listen in carefully. Therefore, the makers of Cascoland were both attentive (1) and responsible (2), attuning to local needs, simply because their projects will only succeed through the commitment of the community, as stated on their website (Cascoland, n.d.). Furthermore, they rely competently (3) on artistic practice strategies to develop creative interventions that enhance social interaction. For example, the 'kassen' function as a public space that can be used for all sorts of goals, enhancing social interactions between residents. Additionally, the makers demonstrate responsively (4) on mutual learning: what needs are at stake, and how could these needs be met? They actively engage with the local community, fostering a sense of mutual dependence and reciprocity (5). Moreover, it is essential that their projects are initiated through a situationist approach. Although Cascoland initiates intervention, that does not mean they solely have ownership over the projects because they share ownership with residents. Eventually, the projects are planned in a way so that it is possible to be taken over by residents. Lastly, through questioning and getting to know the neighbourhood, they included culturally-based values and issues at stake. Therefore, their creative approach entails the five phases of care defined by Tronto. The projects are entangled with the daily life of residents. This shows that the makers of Cascoland specifically focus on strengthening the degree of commonality and community involvement through a care-full approach; they initiate projects tailored to local needs with the aim of strengthening community

Thirdly, an examination will be conducted on how certain disadvantaged citizens are included in the projects of Cascoland, departing from the critiques of ethics of care. The first critique suggests that care ethics should provide narrower guidance for action. In the case of Cascoland, they have effectively tackled this by embracing a situation-bound approach, which entails providing creative solutions in a supportive manner that caters to the specific needs of all community members. They achieve this by taking to the streets and dedicating time to familiarise themselves with the neighbourhood and its residents. The second critique revolves around the issue of responsibility. It is unclear where the specific responsibilities of the creators of Cascoland begin and end. While Cascoland has undertaken numerous projects, it remains to be seen whether they encompass all the social problems at the local level. The makers of Cascoland may not possess the expertise or capabilities to address all the challenges that individuals may face. Additionally, as the composition of Cascoland may vary over time, changes in the level of experience and competence of the makers can affect the extent of their responsibilities. Therefore, whether they should be expected to bear all the responsibilities that arise is questionable. Moreover, none of these projects would have taken place if the makers of Cascoland weren't assigned to the neighbourhood. Without Cascoland, many of the identified needs would have remained unsolved. The third critique of care ethics is that the projects may create a dependency on the makers of Cascoland. What if, for example, the makers of Cascoland will no longer continue their practice due to all sorts of reasons? Won't the locals be left behind? In a sense, Cascoland creates a mutual dependency; their artistic practice also depends on residents' benevolence and residents' vice versa, on the skills of the makers. As discussed earlier, there is a controversy within the ethics of care regarding the desirability or undesirability of dependence. However, dependency is unavoidable within a caring society. The main question is when this dependence is abused. This is related to Tronto's notion that projects should be continued as practice so that it becomes part of the social fabric and is therefore approached more broadly than as a temporary intervention. However, it is argued that the responsibility lies with the makers of Cascoland to ensure that projects can be transferred to residents when they come to an end for any reason. The inclusion of aftercare becomes a crucial component of this project.

Upon analysis of Cascoland, it is evident that the project exemplifies careful creative placemaking. Their hands-on approach prioritises the local community's needs and utilises artistic interventions to serve its residents and the neighbourhood's social fabric. The approach encompasses ethical motives, community involvement, and inclusion of

disadvantaged citizens. The following section will discuss a case of creative placemaking, highlighting the relevance of some of these critiques. This case will shed light on specific vulnerabilities and challenges that can arise in creative placemaking.

3.3 Case Study 2: Berlijnplein

The municipality of Utrecht assigned the Berlijnplein in Utrecht to become a 'diverse cultural meeting place' situated between the Leidsche Rijn Center and the Stadsbaantunnel in the Leidsche Rijn. The project started in an empty, vacant lot in the middle of a new residential area, which was later renamed to the Berlijnplein. Stadslab RAUM was the first party to develop the space in 2016 by organising a program focusing on co-creation and they started from scratch Berlijnplein (Fig. 5). They used creative placemaking as an artistic method to develop this location and designing the cultural program (RAUM #1, 2020). The primary goal was to transform the Berlijnplein into a significant public space that fosters meaningful interactions between various stakeholders (RAUM #1, 2020). RAUM designed this public space involving various parties, such as residents, commercial creative parties and the municipality, who shared input and ideas. They involved the (ultimate) users of the area in the development process, making it a community-driven project (RAUM #1, 2020). It was important for the designers of RAUM that the area is designed sustainably, which is why re-used containers are placed. These containers eventually accommodated various stakeholders, including Wijkrestaurant Venster, design agency Goede Vrijdag, consultancy agency Jonge Honden, Buurtwerkkamer Hart voor Leidsche Rijn and theatre collective NUT. An essential part of developing the Berlijnplein and the cultural program involved organising exhibitions, talk shows, neighbourhood drinks and experience dinners. The makers of RAUM eventually presented an overlapping concept for the Berlijnplein, namely, to consider the city's future (RAUM #1, 2020). The aim was to engage individuals in shaping the city's future through workshops, work sessions, and dinners involving residents, creators, and companies. Using art and design, RAUM shaped the program, the terrain, the concept of envisioning a future city, and social challenges.

In their yearly publication, they state to implement principles throughout the development process, such as 'thinking along' and 'working together'. An example of one of the conducted activities is the RAUM #1 event in 2020. Stadslab RAUM worked with the design company Afdeling Buitengewone Zaken in a 'Living Apart Together' project. The work sessions and workshops at the Berlijnplein aimed to explore future challenges. They

invited various designers through an open call to create workshops concerning the theme of loneliness. The open call sought answers to how to foster a socially inclusive city when individuals withdraw due to a lack of social interaction, emotional connection, or a sense of purpose. The workshops aimed to examine this question critically, and the generated outcomes could serve as a design method for future research in different urban locations. The workshop outcomes focus on conceptualising specific solutions using a research-by-design approach for the future.

In sum, Stadslab RAUM transformed the Berlijnplein into a diverse cultural meeting place in Utrecht. They engaged residents, creative parties, and the municipality to shape the space through exhibitions, workshops, and events. One project addressed loneliness, aiming to create inclusive solutions. The outcomes informed future research and design approaches for urban locations. In the following chapter, the case study will be analysed using the same three criteria as the analysis of Cascoland.

(Fig 5. Berlijnplein, Bas van Setten in DUIC, 2019)

3.4 Berlijnplein: Examining the Case

This section will analyse the Stadslab RAUM case study to evaluate its ethical considerations, inclusion of disadvantaged citizens and community involvement. Firstly, the ethical motivations of the specific case study will be discussed. The first criticism concerning apolitical and exclusive stems from Bedoya's criticism that creative placemaking is mainly for the elite and the 'creative class'. Moreover, I quote, is "creating exciting and dynamic neighbourhoods as a way to attract affluent residents" rather than helping marginalised residents and possibly even driving them out (Doucet et al., 2011). It is worth considering whether this critique is applicable to the Berlijnplein case, as it aspires to become a vibrant creative hub. While it is beyond this research's scope to prove its apolitical nature, it is apparent that the programming and design of the Berlijnplein may not be inclusive of all target groups, thus potentially excluding certain individuals. Secondly, it is crucial to evaluate whether the concerns raised by Fingerhut et al. (2023) regarding placemaking are evident in this project, namely the potential prioritization of Stadslab RAUM's own artistic practice. Deductions from this case study suggest a strong emphasis on the participation of the creative class, encompassing the creative entrepreneurs who ultimately will be accommodated on the Berlijnplein (Kuijpers, 2021). Furthermore, the act of polishing, beautifying, or regenerating public spaces is often employed as a strategy to attract investment. As Fingerhut et al. (2023) suggest, certain creative placemaking initiatives seem to prioritise the creation of visually appealing projects that serve as representations and demonstrations of impressive artistic endeavours. However, this motivation can potentially clash with the vision and needs of the community. While the explicit intentions of Stadslab RAUM may be obscure, it can be inferred that it functions as an entrepreneurial entity operating within the area. While the creative entrepreneurs may address social issues, the initial objective of this specific project does not appear to be primarily responsive to the needs of the local vulnerable population. Thus, the emphasis on Stadslab RAUM's artistic practice may overshadow the broader community empowerment and development goal.

Secondly, when analysing the level of community engagement and collaboration in the five elements of care, the first two elements, attentiveness (1) and responsibility (2) were apparent in the initial phase of the Berlijnplein project by Stadslab RAUM. They employed participatory processes that engaged various stakeholders, including residents. However, Kuijpers' (2021) findings suggest that community involvement fell short, despite the

organisation of several participatory events aimed at incorporating the local community's voice. The specific impact of these events on the development of the Berlijnplein remains unclear. The events appear to strongly emphasise creative entrepreneurs who establish themselves in the area (Kuijpers, 2021). Regarding competence (3), the designers at RAUM have created an exciting space that primarily appeals to creative individuals and attracts external visitors for leisure purposes. They attract many outsiders; in the starting year, 40,000 visitors (Gemeente Utrecht, 2020). Additionally, there is a degree of responsiveness (4) through organising various participation evenings. However, it remains unclear if the group is inclusive. It needs to be clarified whether residents who cannot participate in the evenings are involved differently. As previously discussed, inclusion through participation does not guarantee the genuine involvement of diverse voices and inputs. The critical question is the extent to which the project allows for divergent outcomes, considering that much of the interpretation has already been predetermined. This raises concerns concerning Mouffe's critique of deliberative democracy, which highlights the risk of homogeneous outcomes and thereby smoothing out differing political interests and desires. Lastly, reciprocity (5) can be associated with the eventual realisation of the program within this public space. Reviewing the Berlijnplein as a practice of care may be possible because the cultural program focuses on (future) social issues. The Berlijnplein is a vibrant location where social matters are discussed, potentially leading to innovative approaches that could be applied elsewhere. Evaluating the actual implementation and determining the extent of these methods' impact proves challenging. Nevertheless, addressing various social issues is a crucial aspect of repairing the 'world' (Tronto, 1993:103), even if its focus extends beyond improving the neighbourhood's social fabric or responding to local needs.

Thirdly, including disadvantaged citizens in the project is crucial, drawing upon the critiques rooted in care ethics. The initial criticism suggests that care ethics should provide more actionable guidance, but unfortunately, this is lacking in this particular case. The 'Living Apart Together' project aims to target vulnerable individuals suffering from loneliness. The workshops and creative solutions generated may not effectively address the deep-rooted social issues these individuals face. There is a risk that the project primarily serves as a platform for the makers to develop their methods and skills and further their artistic endeavours rather than genuinely prioritizing the well-being and inclusion of the vulnerable population. The second criticism, the responsibility aspect, raises concerns about whether the Berlijnplein project truly contributes to fostering a caring neighbourhood

structure as initially intended in placemaking objectives. While efforts are made to create a sustainable environment and minimize the environmental impact, focusing on sustainability alone does not necessarily translate into a caring and supportive community for all residents, especially marginalized or disadvantaged. In response to the third critique, namely that one of potential exclusion, the Berlijnplein program aims to involve participants from diverse population groups through participatory events. However, it is crucial to critically evaluate whether these efforts genuinely bridge the gap and address the systemic barriers that certain groups may face. As earlier discussed, mere participation in events does not guarantee the development of a genuinely inclusive and caring community.

Therefore, when critically evaluating the Berlijnplein project, it becomes evident that it falls short of being an exemplar of care-full creative placemaking practice. This project underscores the significance of addressing criticisms of placemaking and diligently assessing the intended beneficiaries and their contribution to community development. Upon analysing, it becomes apparent that its goals must align with placemaking's fundamental objectives. The artistic interventions predominantly prioritise utilising creative participants rather than genuinely addressing the needs of the residents. C Therefore, it is crucial to prioritise a care-oriented approach in placemaking, which involves ensuring that the project actively and meaningfully addresses the social issues present in the local community.

3.5 Proposal for an Empirical Framework to Evaluate Future Practices

This thesis aimed to show that within specific placemaking goals, it is possible to exclude certain people, which contradicts the principles of a caring community. When a community is being developed, especially a caring and self-sustaining community, the ethics of care provide an essential evaluation framework to measure placemaking projects on being a care-full practice. Rawsthorn (2018:8) states, "Design has always had one elemental role as an agent of change that interprets shifts of any type – social, political, economic, scientific, technological, cultural, ecological, or whatever – to ensure that they will affect us positively, rather than negatively." This does not necessarily mean that design practices always have positive outcomes. For example, practices may have unintended side effects because they target specific target groups, such as a creative class. There is a risk that designers and creatives may overestimate their abilities, highlighting the importance of ongoing critical reflection on their artistic practice. Furthermore, placemaking must not be used as a one-size-

fits-all approach. A situational approach that takes into account local needs and wishes is essential. Ideally, placemaking processes should encompass stakeholders' capacities to care and be cared for. This should be expressed in togetherness, reciprocity and solidarity, defined by cultural expectations and obligations of the prevailing cultural identity.

To conclude this chapter, when looking at the future of creative placemaking projects, it is essential to have a framework to assess the efficacy. Table 1 is a framework that draws upon Tronto's care phases and elements, offering a valuable tool to assess the success of (creative) placemaking practices. This framework is particularly useful when evaluating projects that strengthen communities and promote a care-full practice. Applying this helps the empirical inquiries, which allows us to critically assess and evaluate creative placemaking to gain a deeper understanding of what constitutes a caring placemaking practice. By utilising this framework to guide empirical inquiries, we can critically assess and evaluate creative placemaking projects, thereby deepening our understanding of what constitutes a caring placemaking practice.

Phases of care	Elements of care	Question(s)
Caring about	*Attentiveness*	What and whose needs are at stake? And where and to whom is the attentiveness directed?
Caring for	*Responsibility*	What possibilities correspond to what agents are/have become attentive to? What is needed within a specific situation to perform on needs?
Care giving	*Competence*	How is the above put into practice, what specific principles are embodied in the practice, and are there any challenges to encounter? Which creative methods are used?
Care receiving	*Responsiveness*	How do placemakers create opportunities for those engaging in the process? Which mechanisms are at stake, and to whom and to what extent can stakeholders participate? Is there room for flexibility?
Caring with	*Reciprocity*	In which ways is placemaking oriented towards mutual learning and co-agency and involves all different perspectives and viewpoints? Will the practice of care become reliable over time; will it integrate as a reliable practice within a neighbourhood's social fabric? Does the project in question have any provisions for aftercare or transferability. Are there any efforts made to avoid abruptly discontinuing the project?

Table 1. Analytical framework for care-full practices of placemaking

Conclusion

In conclusion, as mentioned in the introduction, today's neighbourhoods face various physical and social challenges. These challenges can increase the pressures experienced by vulnerable individuals and informal caregivers. Cultivating a caring society with a stronger social fabric becomes crucial in response. The quality of the living environment plays a significant role in how individuals feel connected and engaged with their surroundings. Therefore, this thesis focused on exploring the potential of creative placemaking to address this need. This concept is gaining popularity due to its potential to contribute to developing a more caring and socially cohesive fabric within neighbourhoods. This objective aligns with the intrinsic goals of placemaking that emerged in the 1960s, emphasizing the creation of stronger communities. However, ethical considerations arise when employing placemaking to achieve a more caring society. Creative placemaking is subject to some strong criticisms, two of which have been discussed and are relevant to this thesis. Practices have been criticised on the one hand for being apolitical and exclusive, or for artists to use them to strengthen their own artistic practice by creating an impressive and unique project, countering the essence of placemaking.

Thus, this thesis addressed the following questions: *How can the utilisation of care ethics, such as Tronto's approach, contribute to the development of an analytical and ethical framework to enhance creative placemaking as a practice rooted in care?* This primary question led to the exploration of a sub-question: *What insights can be gained from an ethics of care to uncover the ethical implications of creative placemaking?* To answer these questions and examine the practice of placemaking, I assessed two case studies on three criteria. Firstly, the project's ethical motives aligned with the critiques of placemaking. Secondly, targeting disadvantaged citizens, associated and examined through the five elements and associated care phases: attentiveness (1), responsible (2), competence (3), responsiveness (4) and reciprocity (5). Thirdly, the degree of commonality and community involvement is examined through the criticisms of care ethics, namely that it is too broad to steer action, where responsibilities begin and end, and the problem that it creates unequal power relations and dependency. Through this evaluation, it became evident that a context-specific and caring approach is crucial for creative placemaking. The ethics of care provides the appropriate imperatives and insights to accomplish this, guided by the five relevant elements in the particular placemaking practice.

The two examples discussed demonstrate that the ethical and caring nature of a practice depends on the project's working method and objectives. The analysis of the case studies revealed that Cascoland demonstrated a more caring practice than Berlijnplein, despite both being forms of creative placemaking. Cascoland focused on local needs and committed to strengthening the community's social fabric. The Berlijnplein focuses primarily on appealing to the creative class rather than strengthening the social fabric of the surrounding neighbourhood. To foster a society rooted in care, placemaking practices must prioritise local needs that demand creatives to respond responsively to the at-play situation.

While this thesis has shed light on the ethical aspects and provided a redefinition through alternative practices, it is important to note that not all aspects have been addressed comprehensively. The practice of placemaking within the Netherlands remains complex and needs further development. Therefore, the table presented in the last chapter is a valuable resource that can be utilised and expanded upon to guide future practices. It offers a critical evaluation framework from an ethics of care, enhancing and strengthening placemaking practices with a particular emphasis on care. This framework provides a foundation for ongoing improvement and exploration within care-full practices of creative placemaking.

The main limitations of my study arise from relying heavily on secondary sources, which can introduce bias due to the absence of field analysis and direct observation by the researchers themselves. Despite these limitations, this study presents valuable findings regarding the connection between care and community. The outcomes are expected to interest various stakeholder groups, such as researchers, urban planners and artists. These findings can serve as a foundation for more comprehensive discussions and future research in placemaking, particularly in exploring the spatial dynamics of power relationships inherent in community engagement projects based on placemaking.

In future research, I aim to delve into the concept of Affective Scaffolding, which initially had my attention as a focal point of this thesis but did not align with its scope. Affective scaffolding provides a valuable framework for understanding the delicate nature of placemaking projects. Placemaking serves as a crucial scaffold for shaping a neighbourhood's social fabric and profoundly impacts its residents' emotional experiences. The concept of affective scaffolding explores how a neighbourhood's aesthetics and external features, influenced by a sense of care, can shape the degree of empathy and connectedness among community members. By examining the role of affective scaffolding in placemaking,

I aim to shed light on the interplay between the built environment, aesthetics, and the cultivation of caring attitudes within neighbourhoods.

Furthermore, I acknowledge that I have ignored an essential aspect of care ethics. Ethics of care extends beyond human beings and encompasses a broader interconnectedness with our living and non-living surrounding world. However, it is essential to acknowledge that in the scope of this thesis, the discussion on this aspect needs to be expanded, despite its significance. The placemaking projects examined primarily focus on human activities, overlooking the ethical considerations related to the environment's material living and non-living elements. In future research, it is imperative to devote more attention to this critical aspect and to deepen further, strengthen, and enhance the connections between human and non-human actors involved in placemaking practices (Olsen, 2022). This endeavour involves envisioning a future in which humanity does not solely occupy the role of the protagonist. As Haraway states, "it is past time to practice better care of kinds-as-assemblages (not one species at a time)" (Haraway, 2015:165). Therefore, it is essential to acknowledge the agency of all non-human beings within an ecological framework. Future research should delve deeper into this aspect to gain a more comprehensive understanding of the ethical implications of placemaking.

For the present, my contribution to future placemaking projects has provided value in the pursuit of a more relational and caring society. Subsequent investigations can explore placemaking as a practice rooted in care. It is important to note that the case studies presented may encompass only some of the diverse creative placemaking approaches. Nevertheless, by emphasising the significance of care ethics and fostering a sense of collectivity, we can envision the emergence of a new cultural "we-ness" where communities flourish.

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