

Creative Placemaking from the Community Up: From Activating Space to Exposing Structural Racism

Elizabeth Hamby

For the last three years, I've been working as a, "[naturally occurring artist in residence](#)," at The Center for Health Equity, part of the New York City Department of Health and Mental Hygiene. I've embedded myself in work across sectors and city agencies to address the systems that maintain dramatic disparities in health along the lines of the city's racially segregated neighborhoods. I've created opportunities to use arts-based projects to explore the ways that people, history, and place converge to create health, culture, and justice.

Since I began my work at the Department of Health and Mental Hygiene, I have been preoccupied by a single, big question. What creates health? The scientists and researchers whom I spend my days with have many answers to this question, but there is not a tidy solution.

For example, in 2010, four New York City agencies plus the American Institute of Architects published the [Active Design Guidelines: Promoting Physical Activity and Health in Design](#). The purpose of the guidelines was to help architects, urban planners, and the city agencies that direct capital investment build places that would help tackle the crisis of obesity and related diseases.

The *Guidelines*, and the resulting Center for Active Design, were groundbreaking in their work to reconnect the fields of urban planning and public health. They represented a departure from the public health work of the previous 40 years, which had focused on health education as a strategy to encourage lifestyle changes recommending increased physical activity, increased consumption of fruits and vegetables, and smoking cessation. The *Guidelines* were based on the idea that individual behavior was shaped by the environment, and offered planners and public health professionals the chance to help "make the healthy choice the easy choice" through their design decisions.

Open Streets projects, ground murals, and parklets were all included in the prescription for healthy neighborhoods, along with mixed use zoning, bike lanes, and public plazas. A space for culture opened up at this convergence of urban planning and public health, as idea of "activating public space," emerged as a strategy to build healthy communities.

2010 was also the year that Ann Markusen and Anne Gadwa published their white paper, "[Creative Placemaking](#)," for the National Endowment for the Arts. Like the *Active Design Guidelines*, Markusen and Gadwa talked about placemaking as a strategy for improving communities' livability. They also saw the opportunity for new forms of economic development, driven by smaller scale, creative projects. These projects, they asserted, could address the crises facing towns and cities across the United States.

But 8 years later, as economic inequality has become even more acute, the state-sponsored terrorism of black and brown communities becomes ever more widely visible, and awareness of the consequences of these systems in life or death terms becomes unavoidable, a new conversation is needed about the intersection of people, history, and place where urban planning, public health, and placemaking operate.

Dr. Zinzi Bailey and her co-authors have made the case that [it is not possible to address the disparities in health between white and non-white Americans without undoing structural racism](#). “Institutional racism in one sector,” they say, “reinforces it in other sectors, forming a large, interconnected system of structural racism whereby unfair discriminatory practices and inequities in the health and criminal justice systems and in labour and housing markets bolster unfair discriminatory practices and inequities in the educational system, and vice versa.”

This is a challenge to public health practice, but also to urban planning, and to placemaking. Annette Koh has asked, “[What will placemaking look like when Black Lives Matter?](#)” “The fundamental problem with placemaking as currently popularized,” she states, “Is that it does not challenge the logics that undergird discriminatory policies such as broken windows policing. Urban design arguments for the activation of public space still take “disorder” as a neutral category, rather than one shaped by legacies of vagrancy laws and Jim Crow.”

Koh uses PARKing day to illustrate her point. Using furniture and programming to reclaim the streets from cars and activating them as public space is great, she says, but, “if five black males took over a parking spot and had a barbecue and listened to music . . . would they last 10 minutes?” So-called, “[Permit Patty's](#)” and “[BBQ Becky's](#),” embody the dangerous ways that white people use state power to enact control over public space.

How do we practice creative placemaking from the community up, illuminating and untangling these complex systems, in order to undo them? In my work, one of the ways I've begun to do this is by creating games as a way of making the histories of people in place legible. My colleagues at The Department of Health and I created a Dungeons and Dragons-style adventure game to look at the legacies of policy and planning decisions that created and sustain the inequities in health and wealth between New York City neighborhoods. During an early test run of the game, one participant loudly complained that, “for some people, there is just no way to win this game!” It's true.

We are also thinking about how to use games to animate the intricate connections between health and housing, as well as [mobility justice](#). Developing a more robust understanding of these systems, as well the role of policymakers and planners in building them, is a critical step. The harder work is to look at the ways that we--as planners, bureaucrats, and public health professionals--are implicated in maintaining these systems to this day. It's one thing to condemn the logic of redlining, but another to look at the subtle (and not so subtle) ways that we influence the distribution of resources today.

In some ways, this work faces something like the [Heisenberg Uncertainty Principle](#). It is difficult to simultaneously see position and pattern, but it is imperative. Literally, the public health researchers tell us, this is a matter of life and death. We need new ways of seeing, new tools (maybe they're games!) to help us perceive all of the ways that places are not neutral. Seeing the systems that uphold and enforce the rules about [who gets to use public space, and when and how they get to use it](#) is the key challenge at this moment in the evolution of creative placemaking, urban planning, and public health.

Creative placemaking from the community up has less to do with the activation of space, and more to do with illuminating the ways that places are constructed through imagination and perception, [which themselves are shaped by history and systems of oppression](#). Perhaps rather than using the arts to activate public space, creative placemaking from the community up is about working to transform the systems that determine what it is public in the first place. It's about pushing ourselves, over and over again to enact that *this* is what democracy looks like. We cannot undo inequities in health without undoing the racist systems and structures that created and perpetuate them. This, then makes the challenge to planners, placemakers, and public health professionals clear: history matters, place matters, and the lives of black and brown people matter.