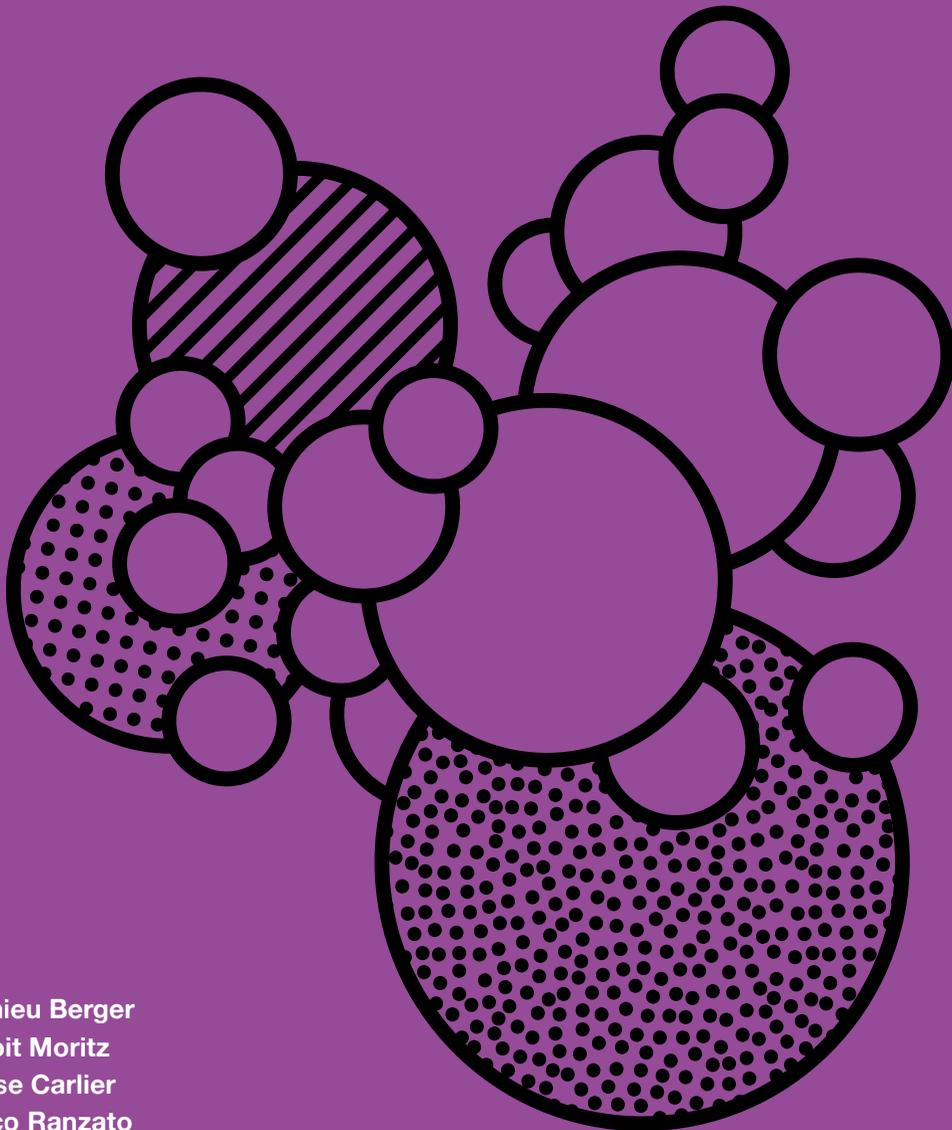
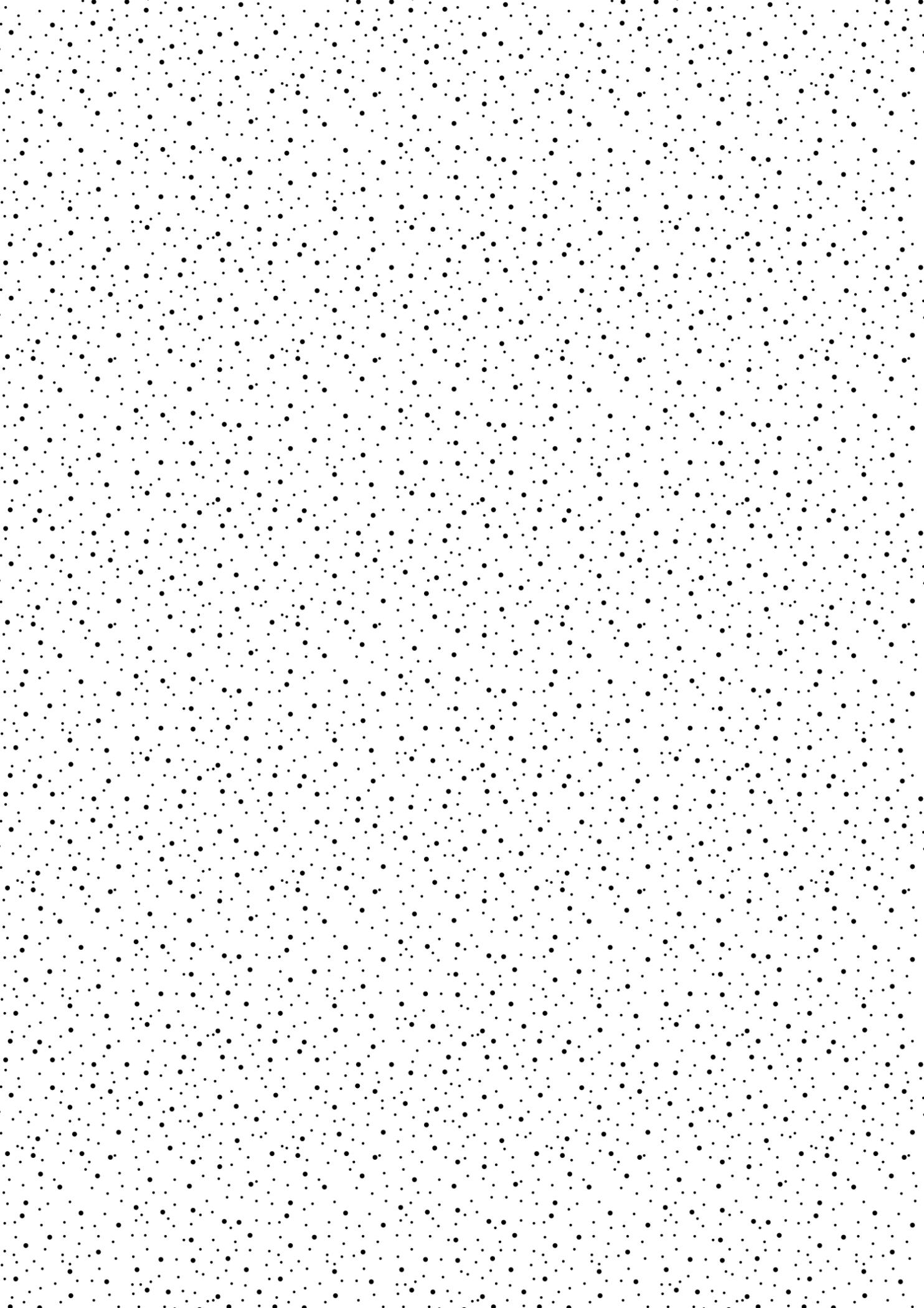


Designing Urban Inclusion

Metrolab Brussels MasterClass I



Mathieu Berger
Benoit Moritz
Louise Carlier
Marco Ranzato
(eds)



Metrolab series

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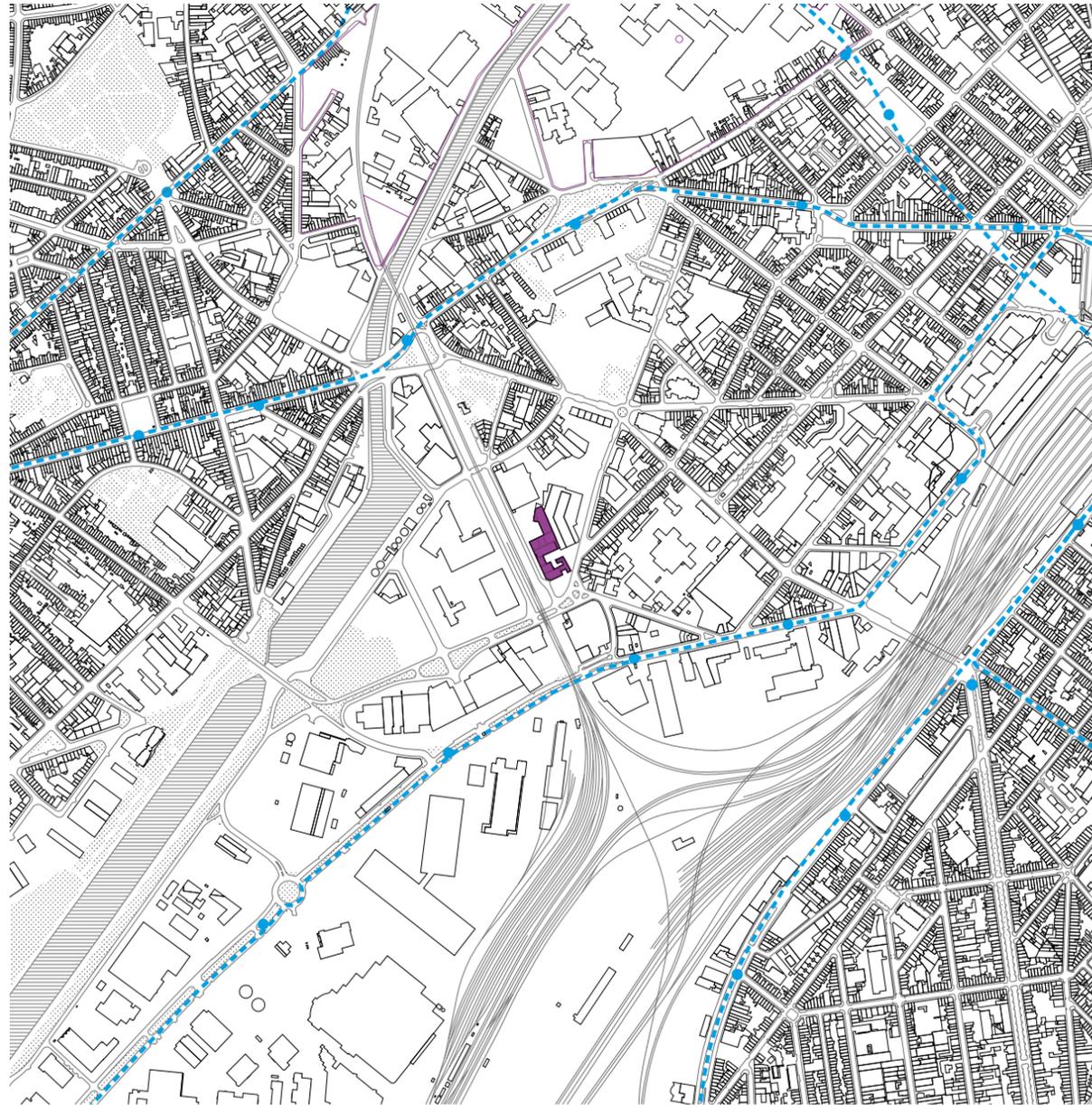
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Context plan

0 200m

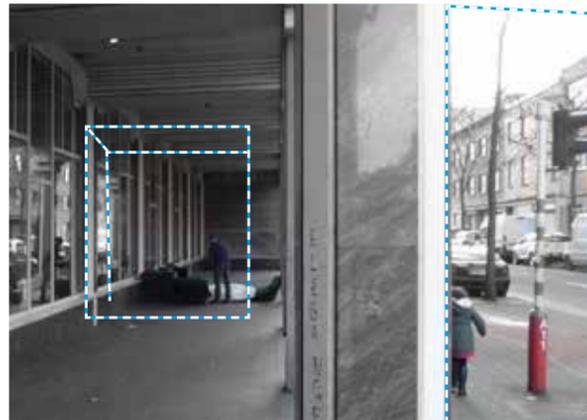


ERDF project built-up space
green areas

public transports
bus / tram stops

Site 2: Médécins du Monde Collective health

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**To invite****To ease****To allow****To shelter****To host**

Introduction

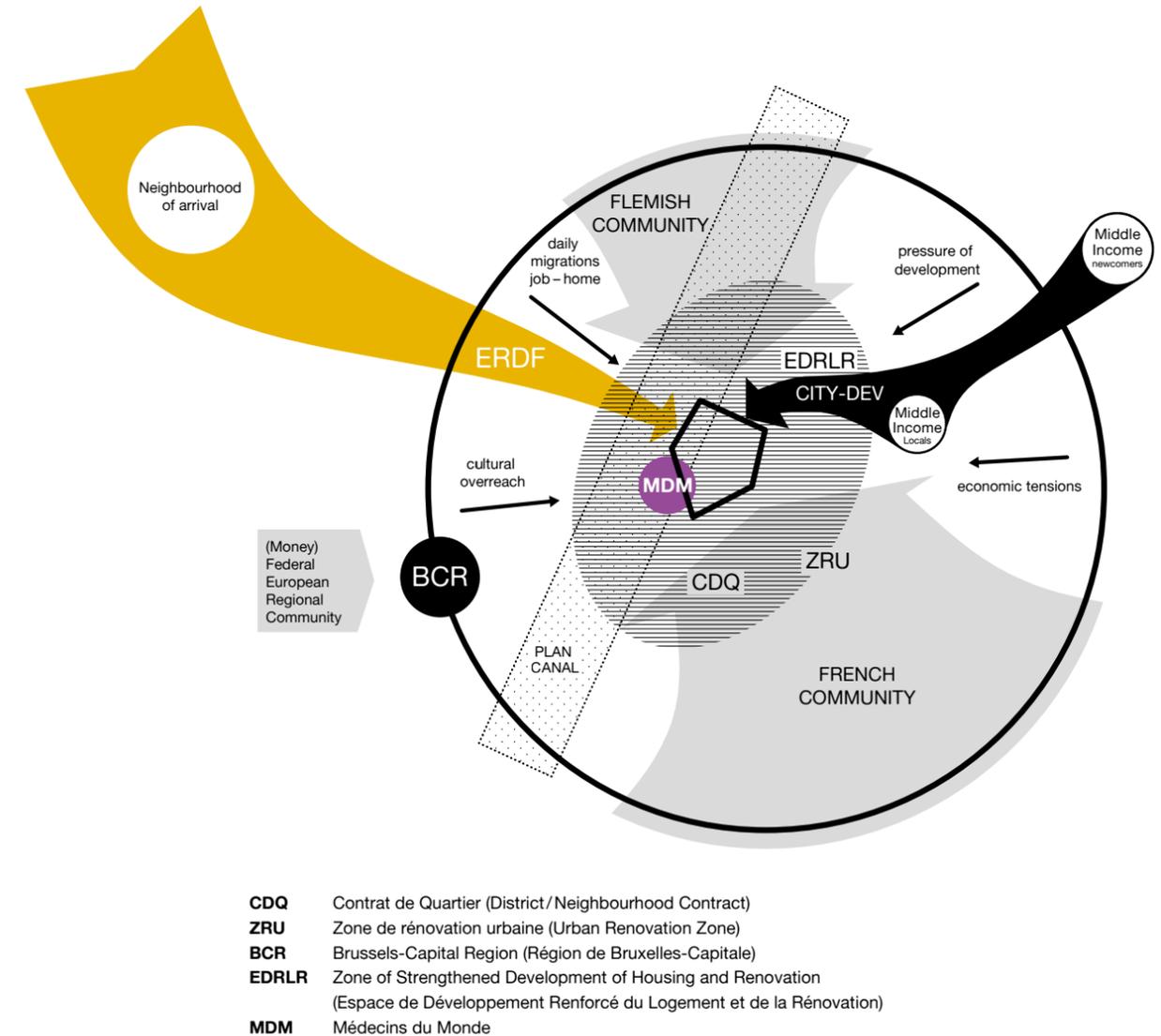
The 'Médecins du Monde' ERDF project is located in the Cureghem neighbourhood in Anderlecht, and involves the creation of an integrated medical centre, targeted at vulnerable and migrant people. The focus of our research has been to understand the relationship between Médecins du Monde and City Dev, a regional housing development agency and partner organisation within the project. The Médecins du Monde centre occupies the ground floor of a City Dev housing project, targeted at middle-income residents who require financial support to purchase property in the city centre (Joschko Nicolas, 2017). The project has been recognised as an experiment and pilot project, bringing together two different visions for sustainable development, and it involves both social and economic concerns. Cureghem has been described as a 'fragile neighbourhood' (Muriel Sacco, 2017) and insights from both macro- and micro-scale analyses support this claim. Our GIS-based analysis shows that the area has a high population density (almost double the regional average), a young population (average age of 31), and a high official unemployment rate (34% while the national average is 8.5%) (see for example, Institut Bruxellois de Statistique et d'Analyse, 2017). The proximity of the Brussels-Midi/Zuid train station also contributes to the site's socioeconomic situation, establishing the neighbourhood as a point of arrival for migrants. Some 120 languages are currently spoken in Cureghem. On the micro scale, and within this multicultural context, barriers exist between existing and new residential projects and communities. For instance, a high-income community has recently entered the neighbourhood, occupying the renovated veterinary school. This gated community and the future City Dev housing are located right next to the Goujon Tower social housing.

Insights

We have identified a central conflict between economic development agendas, central to both City Dev and ERDF, and the social realities of existing marginalised communities. This can be articulated through two insights: firstly, social improvements require raising municipal income through residential taxes. This results in a continual need to bring new middle-income residents into fragile communities in order to sustain any future social infrastructures. This tension can be seen in the complex and fragmented institutional background, hence the need to take into account economic, social, and cultural dimensions. Secondly, we have identified issues of inaccessibility and inhospitality in healthcare. This can be understood through limits in local capacity, for example many existing local medical centres are full and their capacity to carry out outreach activities is therefore limited. Exclusion also exists on a systematic level, with access to healthcare predicated on having a legal address and legal work. Knowledge of the system has also been identified as a barrier, as even those with rights can encounter difficulties navigating or reintegrating the system. We share these healthcare insights with Médecins du Monde, who are actively seeking broader outreach strategies and a wider understanding of health issues.¹

So how can a broader and more inclusive provision (and vision) of healthcare emerge through this pilot collaboration? We have identified potential actors who are already active in Cureghem and who can support a broader view of healthcare (which would include everyday life and well-being) and provide a more diverse and hybrid understanding of productive economies.

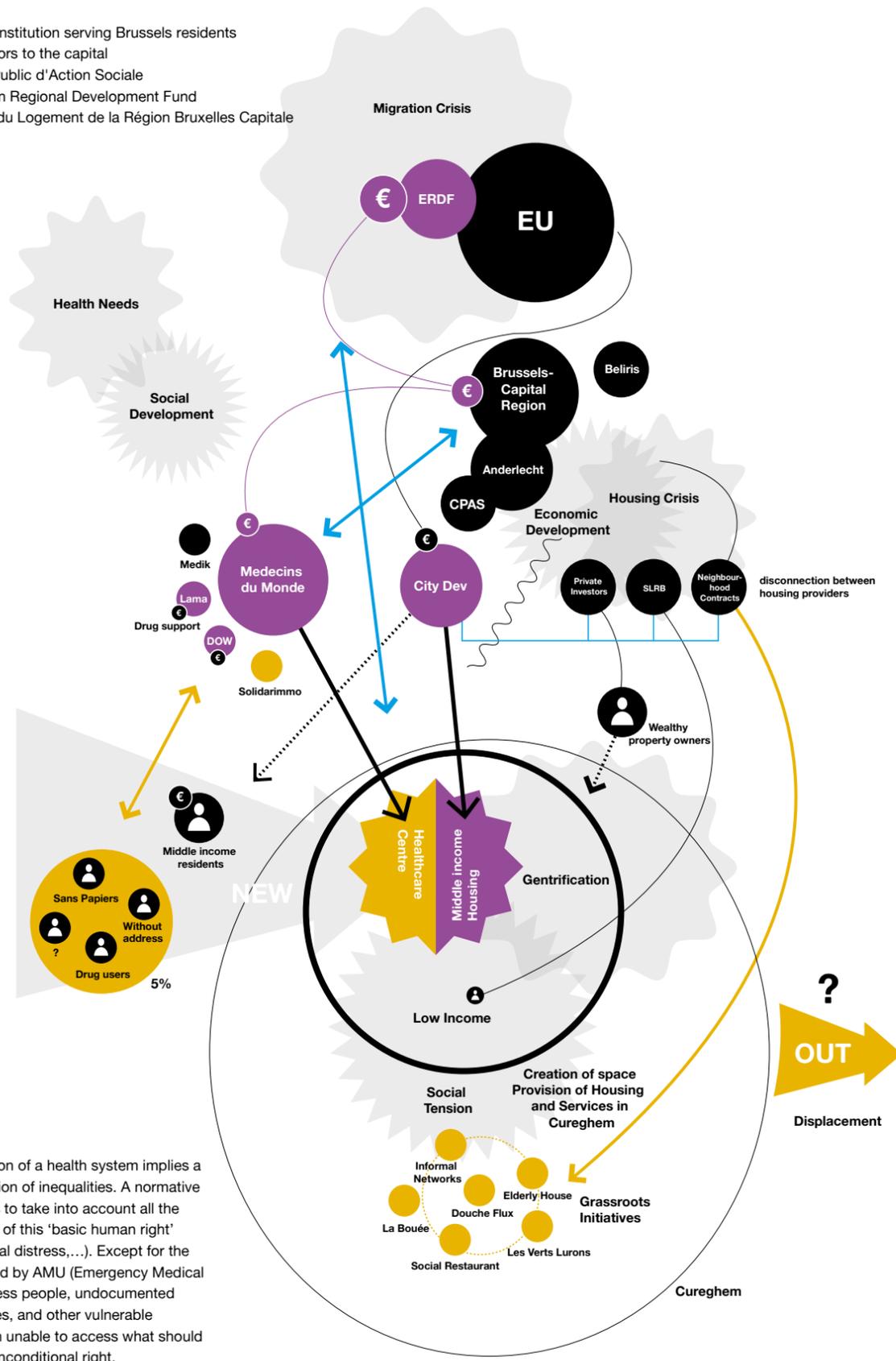
¹ Some representatives of Médecins du Monde have actively collaborated to the development of this work during the MasterClass Designing Urban Inclusion.



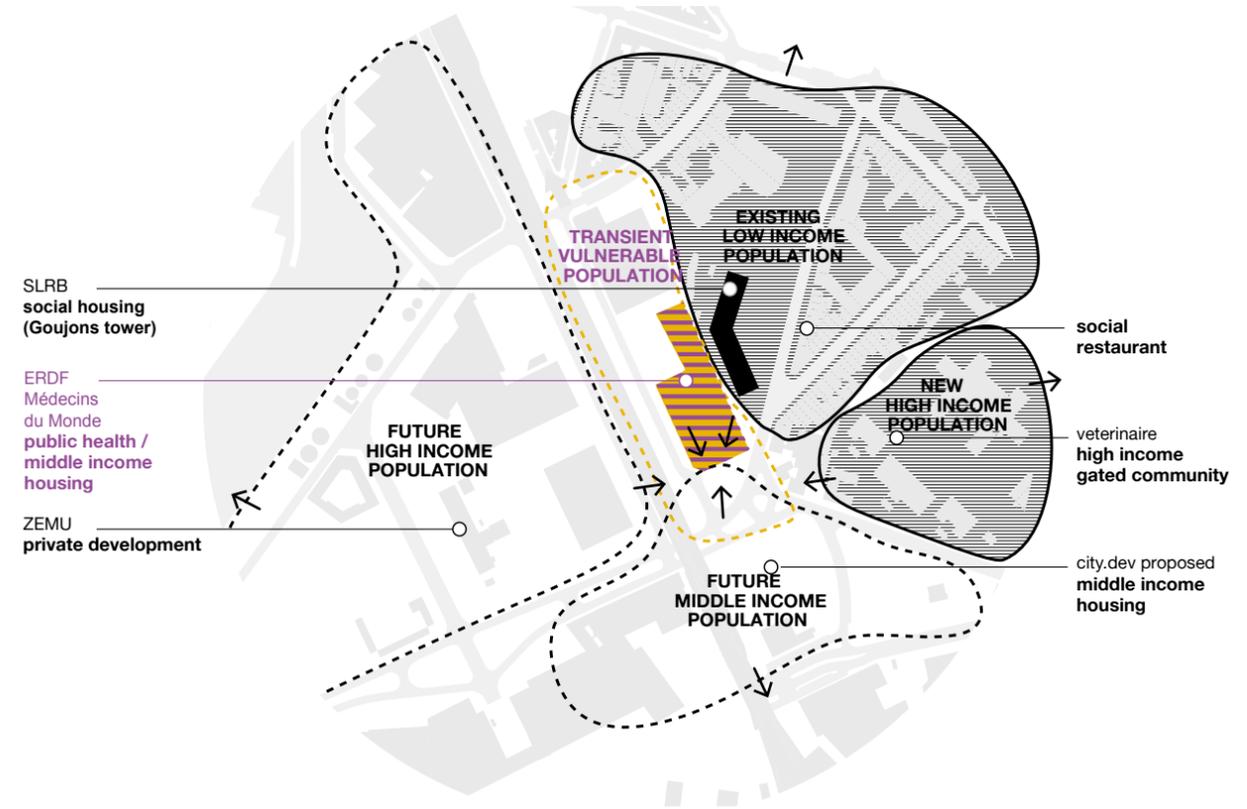
Currently, in the centre of Brussels, especially in the area along the Bruxelles-Charleroi Canal, different economic and institutional visions are overlapping with demographic pressures, resulting in tensions between the city's economic and social performance.

Health Economic and Social Development

- Beliris** Federal institution serving Brussels residents and visitors to the capital
- CPAS** Centre Public d'Action Sociale
- ERDF** European Regional Development Fund
- SLRB** Société du Logement de la Région Bruxelles Capitale



The bureaucratisation of a health system implies a systemic reproduction of inequalities. A normative vision of health fails to take into account all the marginalised facets of this 'basic human right' (housing need, social distress,...). Except for the opportunities offered by AMU (Emergency Medical Assistance), homeless people, undocumented immigrants, refugees, and other vulnerable categories are often unable to access what should be considered an unconditional right.



Potential future social tensions

Cureghem is already marked by social tensions between the existing low-income population and a new high-income population living in the nearby gated community. The development of new middle-income housing by City Dev and high-income housing by private developers, combined with Médecins du Monde's Medical Centre's project open to all these different categories in addition to vulnerable transient populations, will create new tensions and intensify existing ones in Cureghem and especially in the area marked in the map above.

What kind of community space?

As a newly arrived provider of medical services, MDM still does not know what kind of community space it would like to install in addition to its health service. This is an opportunity to explore what type of community space is needed for the establishment of such a medical institution.

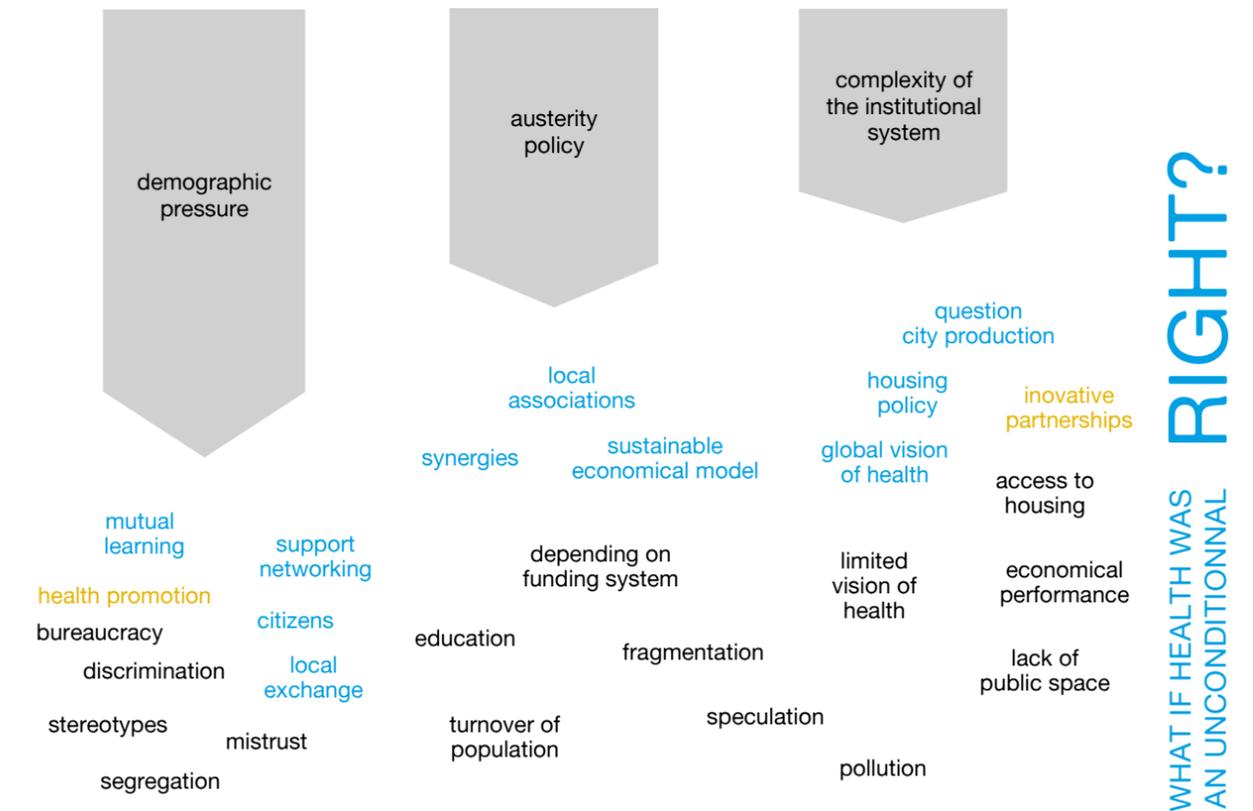
Scenarios

Our scenario takes place in the four-year period before the opening of Médecins du Monde's ERDF-supported healthcare centre, in 2020. During this period, Médecins du Monde will operate from a number of containers installed in the car park of an empty Leonidas chocolate factory owned by City Dev.¹

As a baseline for our proposals, we decided on the scenario 'What if health were an unconditional right?', using this perspective to identify and overcome various spatial obstacles (both social and material) for healthcare to be accessible and implemented in this way.

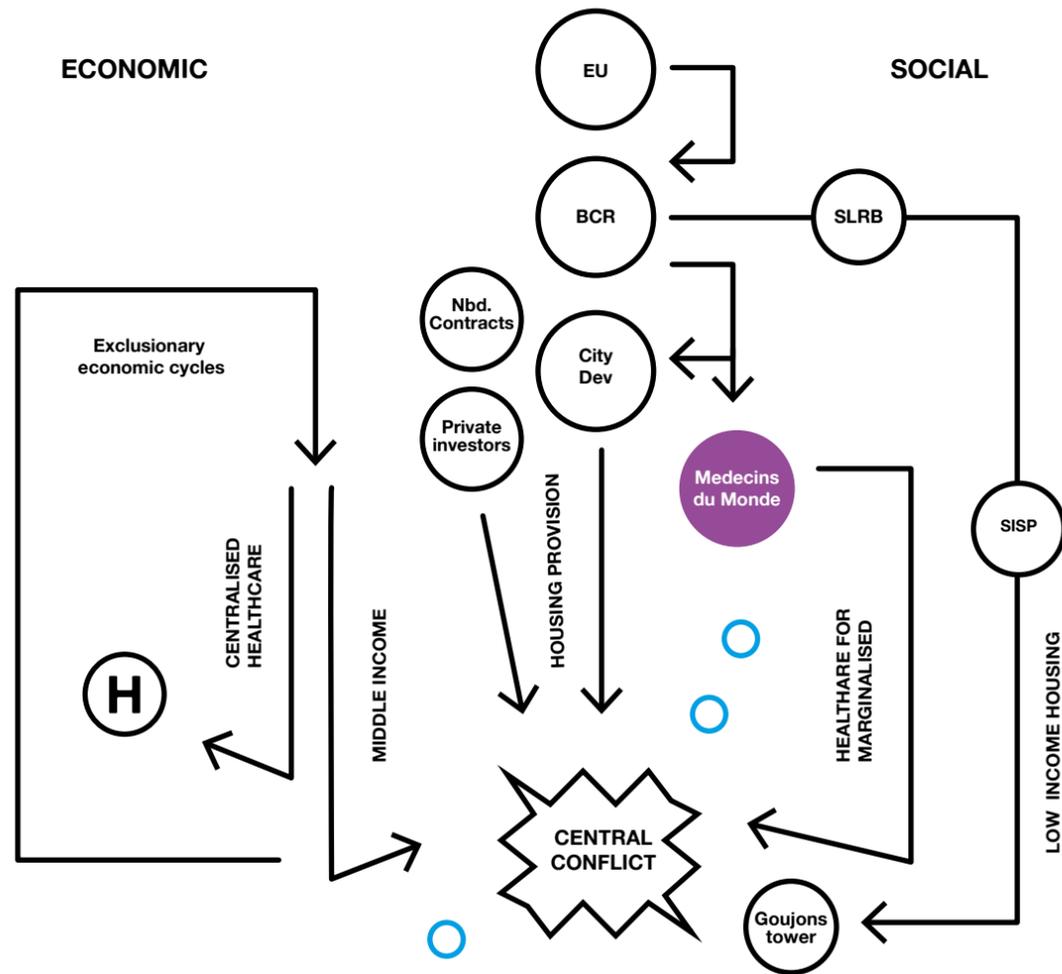
Throughout the MasterClass, we have worked collaboratively, in a group of eight students, to develop insights, strategies and values that can be used to develop more inclusive and hospitable healthcare services and improve connections between existing grassroots organisations and top-down authorities and resources. Our scenario imagines the creation of an organisation called 'Collective Health', which carries out research, investigation, interventions and collaborations in Cureghem as a lead-up to designing and building the Médecins du Monde healthcare centre. This transdisciplinary organisation would adopt the methods and working principles that we have used during the MasterClass: a positive atmosphere, collective decision-making, a non-hierarchical structure, shared responsibility, cooperation. We have developed a scenario in which this organisation works throughout the four-year period, developing programmes, activities, and architectural and aesthetic proposals in collaboration with Médecins du Monde and City Dev, but most importantly with the existing communities in Cureghem.

¹ At the time of the studies the outreach programme of Médecins du Monde was not yet fully defined and this idea of installing a number of containers was just a possibility.

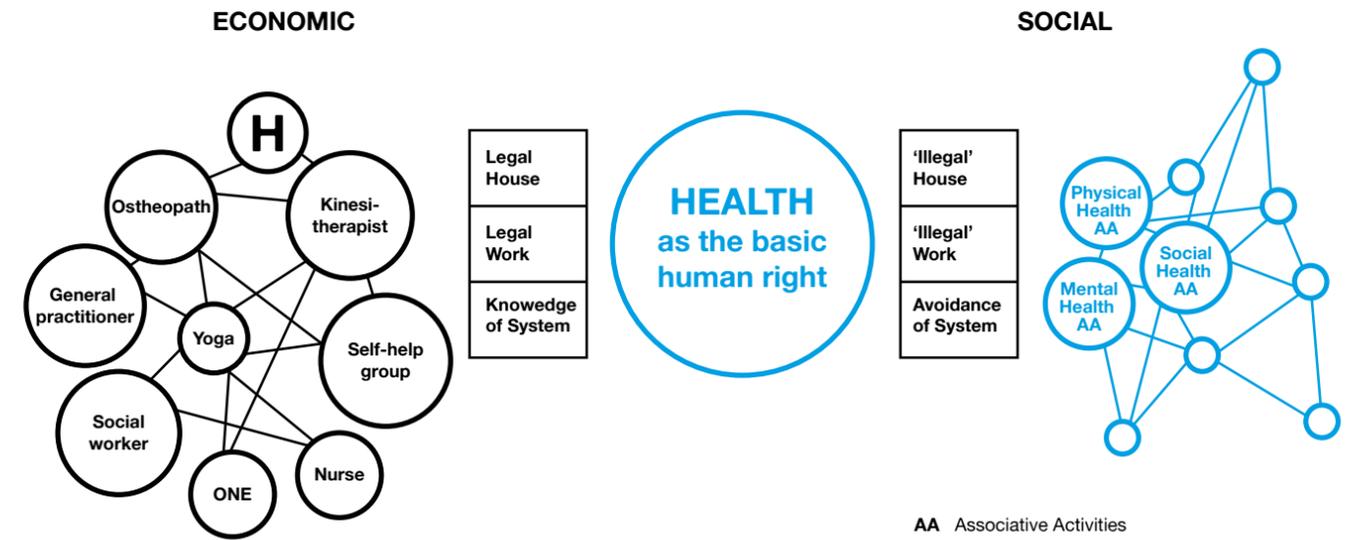


What if Health were an unconditional human right?

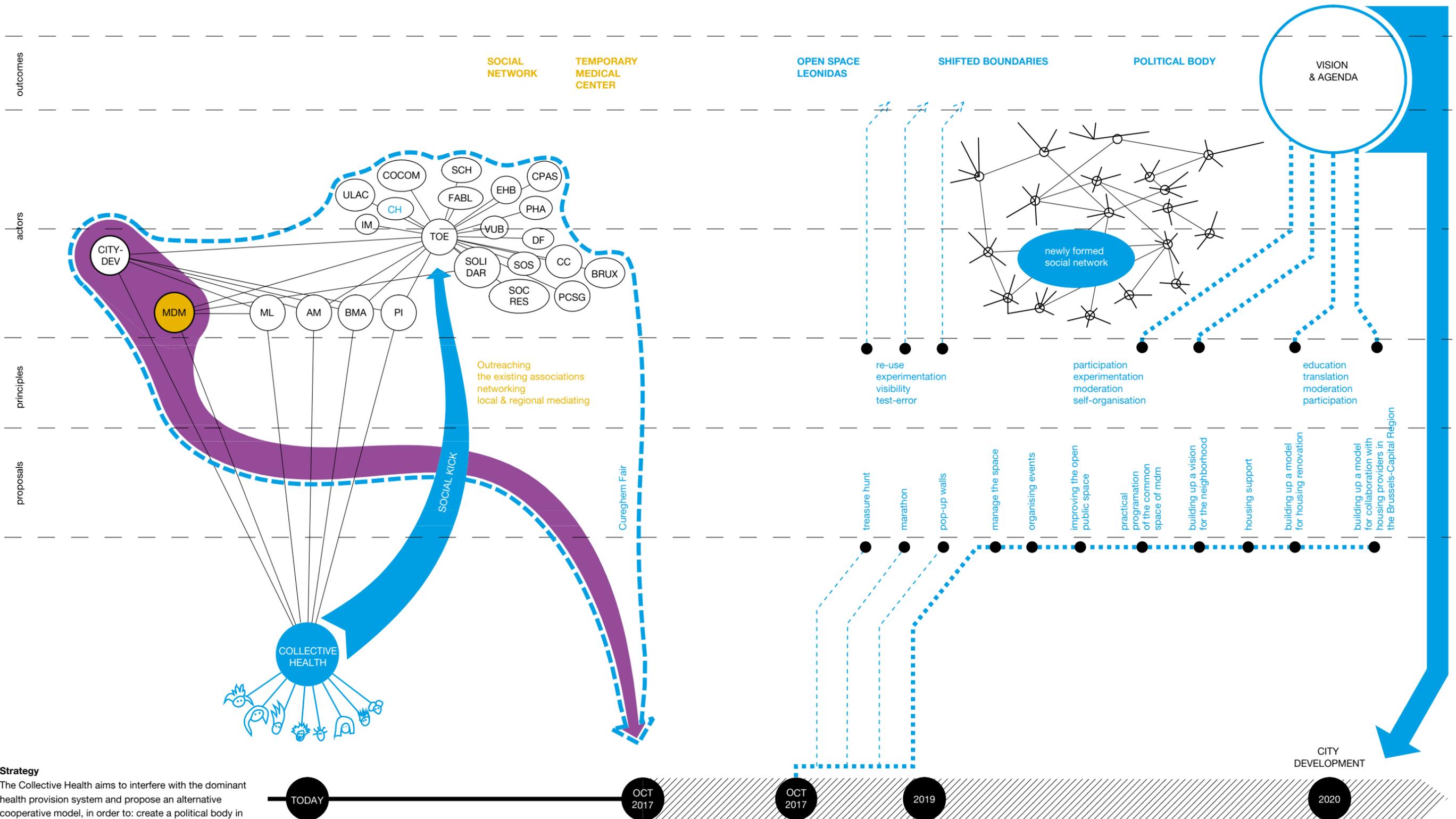
Health as an unconditional human right is highly challenged in the Brussels-Capital Region. People are facing issues with bureaucracy, stereotypes, mistrust, systemic austerity policies, a fragmented and complex institutional system for housing and health provision, economic performance as the main criteria for valorisation of the city, etc. The diagram attempts to show the strategies used to overcome all barriers to understanding and politically addressing the question of health.



SISP Sociétés Immobilières de Service Public



In order to counteract the systemic reproduction of inequalities, a comprehensive vision of health should take into account all the marginalised facets of this 'basic human right'. Who to concretely implement this vision of health (this page) in the present confrontational and fragmented context where health is narrowed down to a technical matter (left page)? Médecins du Monde and its locally centred approach play a key role in overcoming this problem and our action aims to integrate its own by promoting social networking between the organisation and existing associations.



Strategy

The Collective Health aims to interfere with the dominant health provision system and propose an alternative cooperative model, in order to: create a political body in the district, able to combine existing associations with the main actors of the projects (MDM and Solidarimmo), to promote social networking around a common notion of health and to provide a shared space where to make it possible (Leonidas). Through a 4-years period program, this project represents an attempt to promote an inclusive system and social resilience, in order to prepare the field to convert the potential conflicts in common benefits.

- ML** Metrolab
- MDM** Médecins du Monde
- AM** Anderlecht Municipality
- BMA** Brussels Bouwmeester
- PI** Private Investors
- ULAC, COCOM, SCH,...** local associations or organisations

Proposal

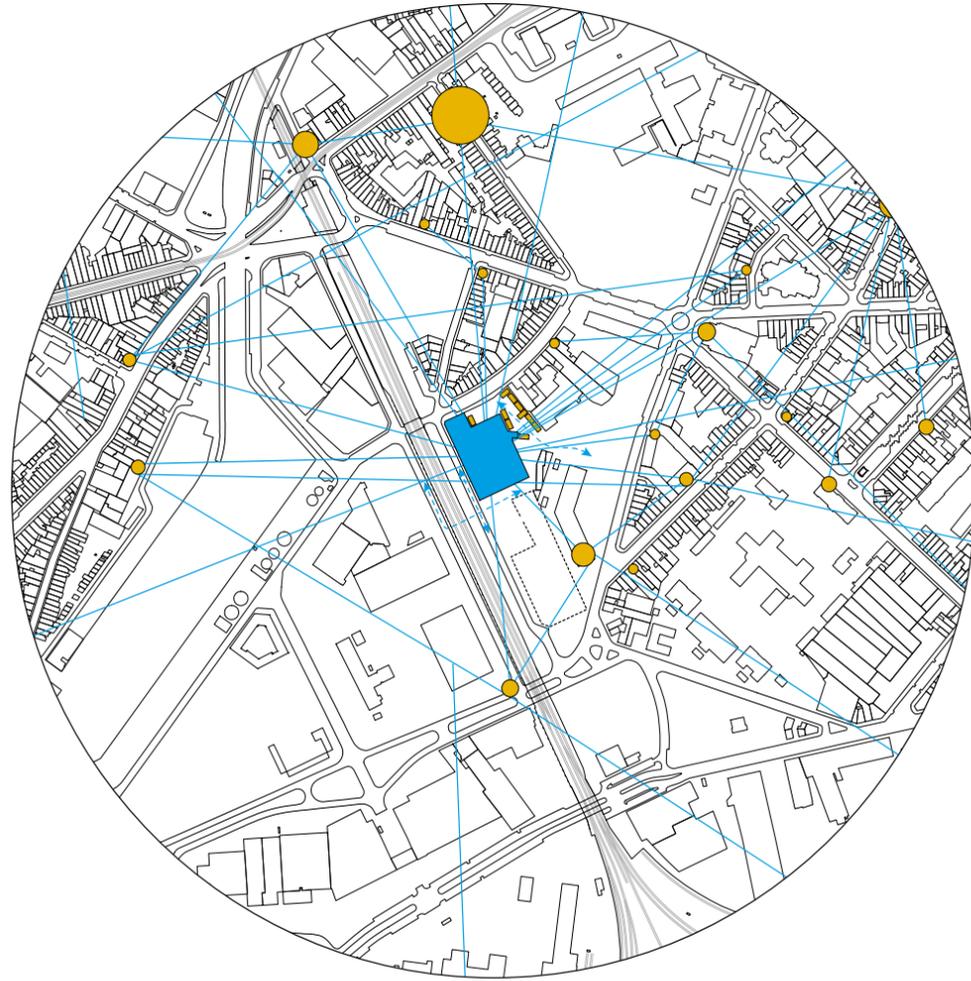
Our proposals focus on boundaries to our diverse understanding of health. These include physical boundaries such as walls and gates present on the site, as well as socially constructed and less tangible boundaries. Our spatial proposals include setting up a fair in Cureghem, establishing a diverse economic ecology within the Leonidas building, organising marathons, designing game-based interventions inside and around walls. Our ambition is that these propositions develop into a community-focused cooperative platform empowered to inform local architectural projects through engagement with planning and design decision making.

Aesthetics as a visual and cultural identity of a space is never devoid of meaning. Its manifestation speaks to the identification and appropriation of the environment by its inhabitants. It simultaneously creates bonds and exclusions: while it evokes that which brings us together as a community, it also often marks and fuels the social distance separating those who create a space and those who use it. We choose not to impose an aesthetic direction to the future project, and have instead created spaces fostering emergence and providing conditions that lead to collective, organic and site-specific aesthetic and architectural responses. The Leonidas building provides a test-bed for such temporary aesthetic and architectural experiments. In addition to the spatial proposals that have emerged from this scenario, the working principles and culture developed and envisioned for the 'Collective Health' organisation could be adopted as a model for future research on possible actions. This could be operated by or through Metrolab.



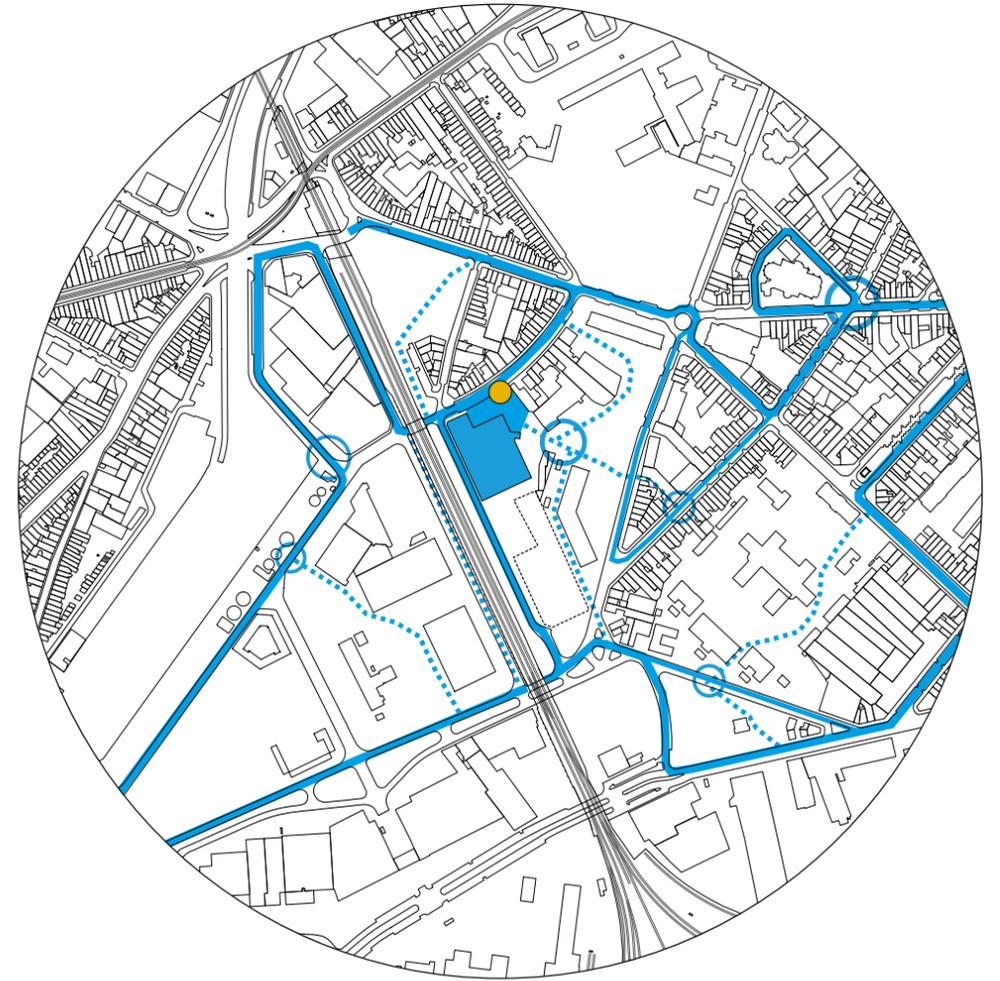
Community fair, as a space for connection

The Community Fair will be an event and an opportunity to promote the newly formed social network of associations to the local population, which will be invited to participate in the appropriation and co-production of the proposed social cooperative. This will happen in parallel to the installation and opening of the temporary Médecin du Monde's Medical Center next to the Leonida's factory.



A space for networking

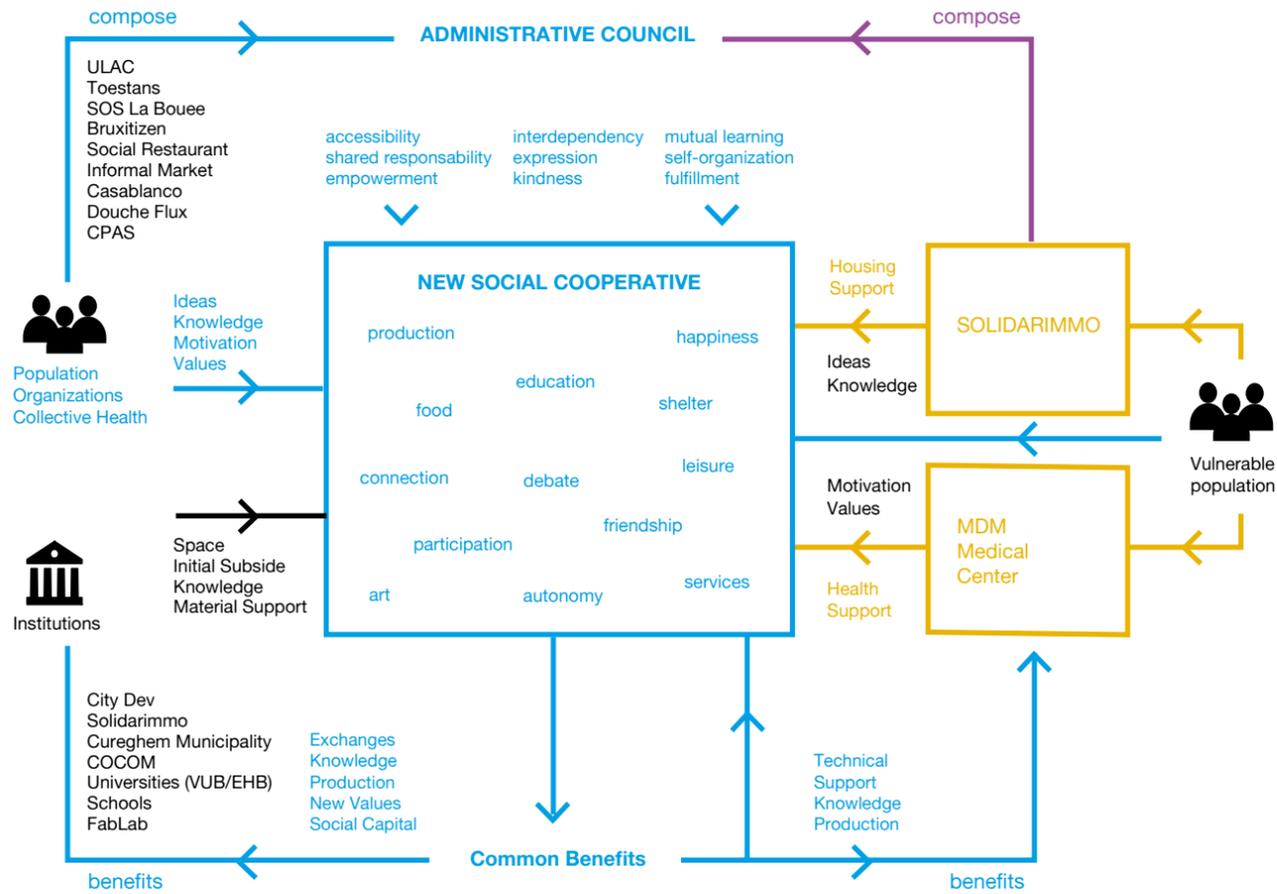
The Leonidas factory belongs to the same developer (City Dev) that will implement various projects in the area, and we see this as an opportunity to engaging with the space in order to envision potential changes in future developments.



Challenge the boundaries

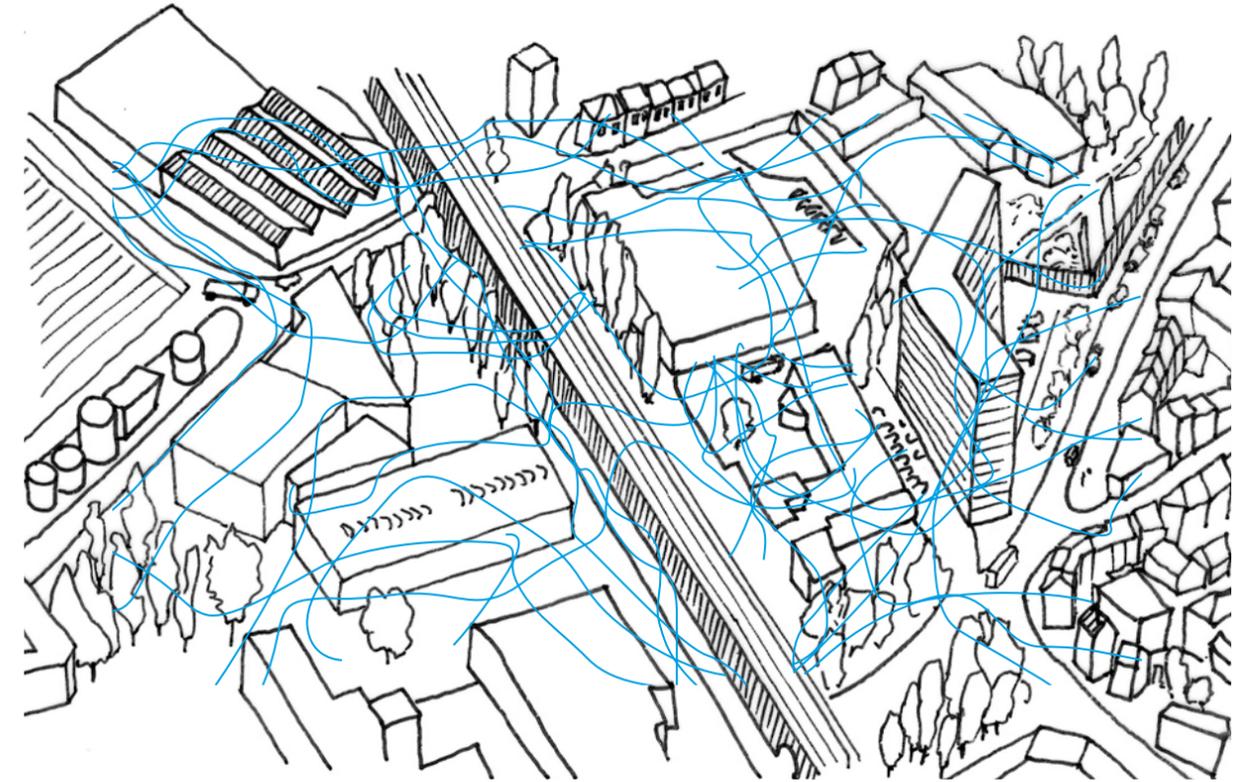
In order to boost the networking dynamic between existing associations and the local reality, the organisation will aim to organise temporary events intended to question existing boundaries — physical or otherwise — in the neighbourhood. These will provide opportunities to pursue the integration of local initiatives into the vision of the neighbourhood.

Empowerment and hospitality in a social cooperative



Alternative cooperative model

Inside the new space of Leonidas, the organisation will also promote the creation of a new cooperative model around a common vision of health, by bringing together existing neighbourhood associations and involving the main actors on the site.



Social Kick!

The network resulting from this process can become a political body that will take part in defining an alternative vision of urban life, with special emphasis on health and housing.

Conclusion

Marco Ranzato and Maguelone Vignes

The ‘Collective Health’ proposal sheds light on the wider context of Cureghem in which Médecins du Monde’s project will take place. At the end of 2016, before the MasterClass, Metrolab researchers’ collaboration with Médecins du Monde focused on the very core of their project, that is, the Integrated Health & Social Centre (IHSC). Through a co-design workshop with representatives of the professionals who will work in the new health centre, we investigated the architectural dimension with an emphasis on how the centre could support the goals of the project: for example, through interprofessional and intersectorial collaborations, and relevance to local needs. Among other findings, this participatory activity resulted identifying a need for embedding the centre into its neighbourhood and allowing room for community activities and representation within the building (Médecins du Monde, 2017). The result is that a community space is now planned in the architectural project. The shape and content of this space have not yet been decided, and they will be the subject of a negotiation process.

The MasterClass participants working on the Médecins du Monde case chose the forthcoming community space of the centre as a stepping-stone to further think about how Médecins du Monde’s project relates to its close social and spatial environment. Their proposal captures a bigger picture of the regional housing and health policies and shows that Médecins du Monde’s project is part of a wider change in the neighbourhood. If Cureghem has long been a place of arrival for newcomers — especially immigrants — and labelled as an infamous part of Brussels (Sacco, 2010), today its proximity to the city centre and the Brussels-Charleroi canal makes it one of the region’s areas that receive the most attention in terms of urban development and investments. Housing and office compounds, commercial clusters, marinas, and other amenities are planned and will make the area a work in progress for the coming years (BUUR, 2017). Not only did the MasterClass make this improved vision possible, but it also embedded Médecins du Monde’s project into the longer timeline of

neighbourhood developments that have yet to come: current situation (2017) — ERDF funding (2016-2020)/City-Dev plans — future (2020 and beyond).

The upcoming major spatial transformations will also bring new social groups to inhabit and use the area. The work carried out during the MasterClass made clear the risk that upcoming urban transformations could create — or increase — tensions between different social groups (for instance, poor/wealthy; long-time residents/newcomers; housing projects/gated communities). The ‘Collective Health’ organisation proposal stresses how the IHSC and the community space in particular could work as fundamental point of contact between the social groups already inhabiting and using the area, and those who will come. The proposition focuses on how local residents can prepare for these changes and take advantage of the situation to create a supportive environment for health and quality of life in Cureghem, with Médecins du Monde possibly playing a federating role.

By adopting this view on the project, it is worth noting that the proposal of creating a ‘Collective health’ platform fully meets the World Health Organization’s view of health as being highly dependent on a number of social and environmental determinants and of cities as having a major role to play in creating such supportive environments for health. This perspective seems to be of great value in an underprivileged area like Cureghem, where the need for proximity services, multifunctional activities and multisectorial cooperation could help people find the resources they need. The community space is a potential departure point that can open the doors to the foreseen cooperative organisation.

In the ‘Collective Health’ proposal, the pivotal expanded role of Médecins du Monde emerges in relation to Solidarimmo, the non-profit responsible for the ERDF funds intended for the construction of the IHSC. Solidarimmo’s main goal is to promote the implementation of social housing through fundraising. This is entirely in line with the need to create opportunities for the social classes inhabiting the area to stay. Enhancing the social housing programme as part of the new developments could be an option in this respect¹.

The MasterClass proposal reveals that the planned urban renovation changes have their own logic and timeframe, related to the ERDF funds or to City Dev planning, which reduces the possibility of real negotiation. The proposal brings the issue of how to involve long-time residents in the upcoming changes, in order to — at worst — prevent social tensions from exacerbating or — at best — make them see the changes as an opportunity to create a win-win situation for all groups. In any case, it addresses the question of improving community resilience primarily by reinforcing the existing civil society and developing opportunities for exchange and cooperation.

From these findings, the MasterClass’ experience leads us to advance some reflections regarding public action and urban planning in Brussels. The ERDF program could benefit from the existence of a transdisciplinary platform, similar to Collective Health and Metrolab that would be active even before the call for proposals. For the next programme, the platform could help the region in its challenging mission of identifying potential projects that are also shared by the civil society and meet the needs of those communities who currently inhabit and use the space that the projects involve. As in the case of the ‘Collective Health’ proposal, this transdisciplinary platform could play a key role in building a human network providing proposals for the next campaign. In other words, this raises the question of integrating participation into the ERDF’s scope and budgets.

As it was carried out on a short-term basis, the work done during the MasterClass could not provide deeper insights into the existing dynamics, density and networks of associations in Cureghem, which will be very important for Médecins du Monde’s project. This should be the focus of a future research project.

Notes

- 1 The overall project of CityDev already includes a social housing building that will be managed by the Société du Logement de la Région de Bruxelles-Capitale (SLRB) (Joschko, 2017).

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