The affective, practical and political dimensions of care are conventionally marginalised in spatial planning in the UK, in which technical evidence and certified expert judgements are privileged. Citizens are encouraged to participate in the planning system to influence how the places where they live will change. But to make the kind of arguments that are influential, their care for place must be silenced. Then in 2011, the Localism Act introduced neighbourhood planning to the UK, enabling community groups to write their own statutory planning policies. This initiative explicitly valorised care and affective connection with place, and associated care with knowledge of place (rather than opposing it to objective evidence). Through long-term ethnographic studies of two neighbourhood planning groups I trace the contours of care in this innovative space. I show how the groups’ legitimacy relies on their enactment of three distinct identities and associated sources of authority. Each identity embodies different objects, methods, exclusions and ideals of care, which are in tension and sometimes outright conflict with each other. Neighbourhood planning groups have to find ways to hold these tensions and ambivalences together, and how they do so determines what gets cared for and how. I describe the relations of care embodied by each identity and discuss the (ontological) politics of care that arise from the particular ways in which different modes of care are made to hang together: how patterns of exclusion and marginalisation are reproduced through a policy which explicitly seeks to undo them, and how reconfiguring relations between these identities can enable different cares to be realised. This analysis reveals care in practices that tend to be seen as antithetical to caring, and enables speculation about how silenced relations could be made visible and how policy could do care better.
Introduction

There has been a recent upsurge in Science and Technology Studies (STS) research revolving around the theme of care, understood as “an affective state, a material vital doing, and an ethico-political obligation” (Puig de la Bellacasa, 2011, p. 90), constituted in practices in which non-humans are both objects and active mediators of care (Mol, 2008; Puig de la Bellacasa, 2017; Singleton, 2012). This approach urges scholars to be “critical and attentive to the situated workings of care in the world” and ask “questions about the practices of care in sites not traditionally associated with care” (Martin et al., 2015, p. 627).

This paper responds to that call by exploring the diverse realisations of care materialised in neighbourhood planning, a form of small-scale, community-led spatial planning introduced to the UK by the Localism Act 2011. The policy of neighbourhood planning invites communities to articulate their care for and knowledge of place, and give agency to that care and knowledge through the development of statutory planning policies. This was a radical break from previous planning practice, in which public roles were strictly limited to those of consultees. It is recognised that people care about the places where they live, and are entitled to help shape how they change, so public participation has long been encouraged in planning. However, there has been little research on the ways in which communities enact care for place through the practices of spatial planning (Metzger, 2014).

In this paper I argue that although citizens are encouraged to participate in the planning process on the basis of this care, in effect care has conventionally been marginalised from decision-making (Allen & Crookes, 2009). Neighbourhood planning is the latest in a long line of planning reforms ostensibly intended to better enable people to influence development and change. It is unusual in that it explicitly valorizes care and affective connection with place, and associates care with knowledge of place (Bradley, 2017b). However, to establish legitimacy as Neighbourhood Planning Groups (NPGs), citizens have to perform care in diverse ways for multiple versions of neighbourhood. These different cares are performed through the enactment of three distinct identities, which position NPGs in different relations to their neighbourhoods: immersed in, arising out of and entirely apart from them. Each identity embodies different objects, methods, exclusions and ideals of care, which are in tension and sometimes outright conflict with each other. NPGs have to find ways to hold these tensions and ambivalences together, and how they do so (i.e. how relations of dominance and suppression between identities are worked out in practice) determines what gets cared for and how. This analysis assists researchers and practitioners to understand how matters of care are produced in the practices of neighbourhood planning; how patterns of exclusion and marginalisation may be reproduced through a policy which explicitly seeks to undo them; and how reflexively reconfiguring the relations between these identities and their different modes of care could enable the policy to do care better (Gill et al., 2017a).

Methodology

This paper draws on data from two concurrent ethnographies conducted between 2015 and 2019 with Neighbourhood Planning Groups (NPGs) in two locations in the north of England (Yuille, 2019). All place and personal names have been anonymised. Oakley is a small coastal town with a population of just over 4,000; Wroston, a small rural village with a population of around 530 (Office for National Statistics, 2011). Wroston’s plan is primarily concerned with managing the scale, rate, type and location of housing development, although this was densely imbricated with other issues. Oakley’s was concerned with managing development on already-allocated sites, protecting green spaces, economic development, and providing housing for elderly people in appropriate locations.

In each location, I undertook participant observation with the NPG, a small group of volunteer residents and Town/Parish Councillors. This involved becoming deeply embedded in both groups, taking part in regular meetings and working individually and collaboratively with other members in between, attending public consultation events and meetings with other key actors, and providing advice and guidance (due to my previous experience of representing community groups in the planning system). While in many ways I acted as a full member of these groups, developing relationships with their members and commitments to their aims, I was constantly reminded of my liminal status by my lack of the casually intimate knowledge of place that other members shared.

The study was motivated by an interest in how different types of knowledge and affects get included in or excluded from the making of neighbourhood plans: how embodied practices were translated into written accounts and other materialisations, and how they were understood, evaluated and mobilised, thus performing particular realities (Law, 2004; Mol, 2002). Iterative re-readings of fieldnotes from these participant-observation encounters, framed by these interests, led me to develop emergent themes that further sensitized me to particular matters and relations in the ongoing fieldwork, as I stepped in and out of my roles as active participant and critical analyst (Jensen, 2007; Mesman, 2007). Multiple NPG identities were not an issue that I was anticipating attending to, but the performance of these identities quickly and strongly
emerged from the data in both sites and remained a constant throughout the study.

While I was attuned to ideas and articulations of care, this was initially solely in terms of how neighbourhood planning might enable previously-marginalised care for place to have effects in the planning system. As I became more immersed in the field, I embraced calls in the literature to pay attention to neglected practices of care (Puig de la Bellacasa, 2012), to sites not traditionally associated with care (Martin et al., 2015) and to the ‘dark side’ of care, where care for one ‘thing’ necessarily involves withdrawal from others (Murphy, 2015). This led me to consider the multiple NPG identities in terms of their practices of care, and how performing care for some versions of neighbourhood could hinder their capacity to care for other versions. The analytical categories that this paper turns on — the multiple identities of the NPGs and the objects, methods, exclusions and ideals of care associated with each — arose through this iterative process of observation and reflection, of being a part of the experience and then reflecting on it through the critical lens of care.

### Care in planning

Public participation in policy-making and decision-taking has been a central tenet of the UK planning system for over 50 years (Skeffington, 1969). People care deeply about how the places they live will change, and their right to influence that change has been enshrined in a series of policy iterations, with varying degrees of sincerity and success (Connelly, 2015; Inch et al., 2019).

The knowledge and cares of affected communities are, in principle, central considerations in these participatory processes. However, automatic privileging of some forms of knowledge over others means that although they can ‘have their say’, they may not necessarily be effectively heard (Aitken, 2009). In contrast to rhetoric about valuing community engagement, the experience of non-expert participants in the system is often that it is “complex, remote, hard to understand, difficult to engage with, slow and unpredictable and, generally, ‘not customer friendly’” (Baker et al., 2007, p. 80).

Care for place can be of vital importance to self-identity, wellbeing, and flourishing places (Church et al., 2014; Manzo, 2005), and is a central driver for place-based community action (Devine-Wright, 2009; Perkins & Manzo, 2006; Porter, 2012). However, care is hard to pin down: necessary for life but multivalent and problematic once one tries to define, measure or evaluate it (Martin et al., 2015). The difficulties inherent in translating the embodied practices and experiential knowledge of ‘care for place’ into objects of evidence in a reductionist, positivist planning culture often lead to its neglect and exclusion from debate (Abram, 2000; Davies, 2001).

Although there has been a growing recognition of the need for public buy-in for public decisions, lay knowledge and input remains mistrusted (Petts & Brooks, 2006). Martin et al. (2015) call attention to the formulation of care, frequently manifested in the planning system, which positions it as the rhetorical opposite of knowledge, underpinned by the Enlightenment norm that affective involvement can only muddy rational knowing. Those who care are disqualified from producing objective knowledge: “to be an advocate is to be partial and thus to compromise or taint knowledge claims” (Martin et al., 2015, p. 630). Institutional planning practices tend to reproduce this formulation in a deficit model of lay knowledge (Burningham et al., 2014; Wynne, 1996), assuming that publics are either ill-informed, misunderstand the issues, or are incapable of exercising objective, rational judgement. This reproduces a hierarchical structure in which remote expert accounts of place dominate lived, experiential accounts (Allen & Crookes, 2009), which “serves to distract attention from those expressions of lived space that are rejected and excluded from planning practice” (Bradley, 2018, p. 25).

Indeed, care for place is often portrayed as evidence of self-interestedness, as when community objections to development proposals are characterised as ‘NIMBY’ (Not In My Back Yard) — a pejorative term implying that objectors are acting for purely selfish reasons, and are incapable of acting rationally in the public interest (Burningham et al., 2014; Devine-Wright, 2009). A strong separation is enacted between affect, emotion and care on the one hand, and rationality, objectivity and knowledge on the other (Baum, 2015; Hoch, 2006). So people are invited to participate in planning because they care for place, but in order to be effective, that care has to be suppressed or concealed.

Neighbourhood planning appears to offer a more inclusive practice. It enables communities to determine their own boundaries and issues, produce evidence to justify these, and produce their own statutory plans to address them. Their right to plan is warranted by experiential knowledge and care for place, explicitly invoking affective commitments and associating them with relevant knowledge (Bradley, 2017b, 2018). By insisting on the relevance of affective as well as cognitive dimensions of place-relations, it promises to overcome not only the ‘double divide’ between experts and laypeople and between ordinary citizens and decision-makers (Callon & Rabeherisoa, 2008), but also the conventional strong separations between knowing and caring, cognition and affect (Puig de la Bellacasa, 2011). Neighbourhood planning appears to offer an opportunity for long-marginalised caring relations with place to be “reframed as legitimate attempts to assert a local narrative of place over external versions” (Mace, 2013, p. 1144).
However, care cannot be taken as a self-evident good (Metzger, 2014; Murphy, 2015). It is a selective means of drawing attention to some things, which necessarily requires withdrawing from others; and it is already embedded and circulating in the world, often associated with domination, exploitation, vulnerability and inequalities (Singleton & Mee, 2017). It is acknowledged that valorising care for place in one neighbourhood by one group of citizens may lead to injustice or harm to other people and/or places (Hastings & Matthews, 2015; Wills, 2016). This paper extends that analysis by examining how the practices of neighbourhood planning can hinder the realisation of the particular matters of care that have motivated its practitioners. The following section examines the multiple, conflicting caring relations that are generated through neighbourhood planning, and subsequent sections consider how policy and practice could do care better.

### Care, identity and legitimacy

Discourse around neighbourhood planning tends to assume the existence of ‘the’ neighbourhood: a stable, identifiable, self-conscious entity, with shared relations of belonging and care for place, to which power will be devolved (Colomb, 2017, p. 127). However, from an STS perspective, neighbourhoods are rather assembled through the practices of neighbourhood planning (Brownill, 2017), producing a new collective identity, a new political actor (Bradley, 2015). But while all residents in the designated plan area are in principle members of the new polity, a relatively small group (the NPG) actively do the work of producing the plan and they are also a new, distinct and significant actor. The NPG acts on behalf of the neighbourhood, which forms its imagined constituency and upon which it makes representative claims (Bradley, 2020; Della Porta, 2013).

The identities of NPG and neighbourhood are mutually dependent: the specific instantiation of community that is ‘the neighbourhood’ could not exist without an NPG developing a neighbourhood plan, and the NPG could not exist without the instantiation of ‘the neighbourhood’ as a new polity. They emerge together and stabilise each other. Official discourse tends to cast neighbourhood planning communities (an amalgam of NPGs and their neighbourhoods) as singular entities entangled in caring relations with a singular place. However, in the absence of the formal representative legitimacy provided by electoral democracy (Davoudi & Cowie, 2013; Sturzaker & Gordon, 2017), in practice NPGs have to perform care in different ways for different versions of neighbourhood in order to establish their legitimacy to act on behalf of the neighbourhood. These different modes of care are performed through the enactment of three distinct identities, each of which positions NPGs in different relations to their neighbourhoods (Yuille, 2020):

- **In the neighbourhood:** socially and materially embedded in the neighbourhood; embodied and entangled in a dense mesh-work of sociomaterial relations.
- **Of the neighbourhood:** arising out of the neighbourhood in order to face it and reflexively engage with it, and to mediate between it and other actors.
- **Apart from the neighbourhood:** separate, different and detached from the neighbourhood, with experiences and knowledge that are distinct from it.

These identities were enacted in a wide range of the NPGs’ interactions (e.g. their own meetings, casual conversations, meetings with other actors, public consultation events) and inscriptions (e.g. draft plans, minutes, emails, publicity, evidence documents), as well as in the inscriptions and discourses of other actors (e.g. national and local Government, support organisations, consultants, publics). They applied both to the NPG as a whole, and to sub-sets of it (e.g. small groups working on specific elements of the plan or meeting with external actors): the collective identity did not require the entire collective to be present in order to be enacted.

Enacting each identity enables NPGs to draw on different sources of authority and to produce different forms of knowledge, each making a crucial contribution to the NPGs’ situated legitimacy (Connelly et al., 2006). These identities were fluid, with one or other being dominant for both long periods (weeks or months during particular phases of plan preparation) and short ones (it would be a very rare NPG meeting in which all three identities were not performed), with each achieving a significant degree of durability. The following sub-sections briefly summarise the characteristics of these identities and the ways in which they embody different objects, methods, exclusions and ideals of care.

#### In the neighbourhood

In this identity, the NPG are enacted as a synecdoche: they are the neighbourhood, the part standing in (figuratively and practically) for the neighbourhood as a whole. It is based on a shared spatial imaginary, the “socially held assemblages of stories, images, memories and experiences of places” (Davoudi, 2018, p. 101) that embeds and is embedded in neighbourhood planning practices, derived from a dense meshwork of sociomaterial connections. When performing this identity, NPGs speak as the neighbourhood with no distinction between them, as exemplified by these comments from NPG members Ray and Robert:

> “As far as Hobson’s Farm is concerned, we as a village, we as a group, what sort of things do we think ought to be being considered for that?” (Ray, Wroston NPG)

> “I think it’s for the people of Oakley, that is the neighbourhood
plan steering group... it’s for the people of Oakley to put it to the council: these are the ideas we would like.” (Robert, Oakley NPG)

The knowledge that is expressed by this identity comes from direct lived experience and relations of social and material entanglement and immersion. For example, my fieldnotes from an Oakley NPG meeting record that:

“Jane, Sarah and Stephanie were tasked with gathering / taking photos of new development over the last 20 years to use in a mini-consultation with selected groups... names of groups, individuals, contact details and suggested locations (and stories and strong opinions about each) spring quickly to many minds, showing the intensity, depth and breadth of local knowledge”

This identity, where the NPG are enacted as an immersed and emplaced element of neighbourhood, is where care is most obviously embodied, in direct, experiential knowledge and personal sociomaterial encounters. This is the care that is systematically excluded from the planning system and that neighbourhood planning promised to engage with. It is precisely being affected by and caring about the future of the neighbourhood that gives a collective the moral authority to take up the powers of neighbourhood planning.

The object of care for this identity is the sociomaterial neighbourhood as experienced, in all its human and more-than-human encounters. This object most frequently emerges in the ‘chatter’ in and around meetings and in informal gatherings, and as explanation, clarification and context in formal meetings, where the casually intimate knowledge that the NPG share about place surfaces. However, it also implicitly permeates and informs everything the groups do and say. A range of affective states are associated with this object (which is, of course, itself constituted by a diversity of experienced neighbourhoods), e.g. senses of connection, appreciation, and protectiveness — but also frustration, sadness, anger, and hope. This diversity is gathered together into a collective desire to conserve some characteristics and to change others. The associated ethico-political obligation is that there is something about this place that is valuable and that should be protected and/or enhanced — change should not be allowed to harm that which is valued. This was epitomised by a meeting in Oakley where the NPG tried to encapsulate the character of the town in a few sentences. I noted that:

‘The discussion is very heated. The usual polite, respectful turn-taking breaks down almost entirely, with people chipping in dis/agreements from all sides, and side conversations starting up around the table. ‘Genteel’ is the first proposed aspect under attack: some agree wholeheartedly, some say it’s nothing like that, someone hates the word, it’s so old-fashioned, it’s a lively town, it’s not, there’s a lot going on, there’s nothing to do... other words are suggested, and equally torn apart — tranquil, peaceful: ‘sounds like a cemetery!’ Mary scoffs”

But they are later able to agree on at least some of the characteristics that make Oakley special and around which their plans for development and conservation should revolve:

“The prom, the bay, the green spaces, the trees, the surroundings, the climate, a traditional seaside town, the ambience, the only northern seaside town facing south, sun in the winter, its position, the views, the parks, it’s peaceful, it’s friendly, relaxed”

One obvious method of doing this care for place is the act of doing neighbourhood planning, the commitment of hundreds of hours of unpaid time over several years, through the stress and pressure and sheer difficulty of the process. But it is also done by NPG members through involvement with other community organisations and activities (e.g. a community festival; local heritage, climate change, youth and seniors’ groups) and through everyday personal and shared practices (e.g. walking particular routes, shopping, eating or drinking locally, tending the material environment through gardening, litter-picking, helping neighbours with maintenance). Bringing these practices to presence through talk can in turn help to inform the practice of neighbourhood planning.

Ideals of good care for this identity involve being entangled and involved in the neighbourhood. What is excluded from care here are the objects of instrumental, calculative rationalities: the statistics, assessments and reports that are often used to discredit expressions of care within planning. But also excluded from this version of care are sociomaterial elements and relations that constitute the neighbourhood for others (or might do so in the future), but which are not tightly or visibly enmeshed with the NPGs’ networks.

Of the neighbourhood
This identity engages with other residents’ associations with place. Its object of care is partly the sociomaterial neighbourhood as encountered by other human actors: the experiences, attachments, and other relations that residents have with neighbourhood. As Wroston NPG member Tom put it, “I want to know exactly what people in the village want, that’s why I want this survey out ASAP”. But it is also the ability to demonstrate engagement with other residents, and to represent their spatial knowledge, lived experience and emplaced relations in acceptable material forms, as suggested by this exchange in Oakley:

“What your community tells you, that’s your evidence, that’s what the Inspector needs to see” (Andrea, consultant)

“So what you’re saying is we need an evidence base, that has power, if it’s evidence no-one can say no to it” (Martin, NPG member)
The methods of care involve using ‘technologies of participation’ (Chilvers & Kearnes, 2016) — techniques and devices such as surveys, templates, consultation events and feedback forms that are acknowledged within this community of practice as able to distance NPGs from their own experiences and relations, and to transform those of the wider neighbourhood into the kind of spatial knowledge that has traditionally been ‘heard’ within a system which privileges quantified, abstract evidence (Allen & Crookes, 2009). This enables NPGs to represent the experience of others in simplified, codified forms (Potter, 1996) and to speak not as the neighbourhood, but for the neighbourhood. It produces knowledge from the neighbourhood, but also defines the neighbourhood in particular ways. My notes from a meeting where the Wroston NPG were developing a survey to capture the experiences, views and desires of neighbourhood residents record that:

“The survey has a strong focus on yes/no or numerical ranking questions. Anne [NPG Vice-chair] explains that this is ‘so that it can be measured, quantified, that’s what we need to do’ and that it is ‘about testing our assumptions’, and there is little disagreement. There is a very strong focus on gathering quantitative not qualitative evidence, partly because that is what the group perceive ‘evidence’ to be — numbers, measurements, quantities, statistics — and partly because that kind of information is easier to analyse and to present: as Anne insisted, otherwise ‘you’ll get three page essays about irrelevant stuff, things from the past… that’s why we’re doing closed questions, we just want to measure them’”

The affective states associated with this object were often concern, worry and fretting. NPGs agonised over whether people would support their proposals, whether they had become too removed from the sentiments and understandings of the neighbourhood, whether they had done enough to involve people, whether certain groups had been excluded and what they could do to engage them — and also, whether and how they would be able to represent their engagements adequately. Shortly before a public event that had been intended as a consultation on near-final policies, I noted that the Oakley NPG had:

“a very long discussion involving the whole group about where the group sit in relation to ‘the community’ — a recognition that many, if not most people don’t know what they’re doing or who they are, what an NP is in general or what this one in particular can and intends to do, and what they can do to address that”

As a result of this, the event was re-framed to provide more general information and seek more general feedback, in order to prevent detachment from the wider neighbourhood and to more effectively “carry the community with us” (Mary, NPG member). The related ethico-political obligation is to reflect the experiences and wishes, as far as possible, of the whole neighbourhood: “The

plan’s got to be done by the village, not just by a group of people” (Elliot, NPG member, Wroston).

What is excluded here are the NPGs’ own personal relations, affects and experiences: “It’s very contentious . . . We’ve got nothing but our personal opinions at this point in time, I’d rather not put it in’ (Anne, vice-chair, Wroston NPG). But, because of the particular ways that NPGs tended to represent their findings, a lot of depth, nuance and texture was also excluded. The specificities of individual and collective articulations of relations with place were often occluded by their translations into material forms that were assumed to be admissible as evidence. The very action of ordering things so as to make some things visible necessarily conceals other things (Law, 2004). This was a deliberate choice, as Oakley NPG Chair Stephanie explained about their decision to present a multiple-choice survey to neighbourhood residents:

“the big mistake we made [previously] was asking for people’s comments. You can’t quantify comments. With a tick-box exercise you can easily set out what people have told you, but we had reams of people’s thoughts”.

By ordering things in this way, the specific, affective textures of lived experience are obscured, either entirely or through their marshalling into narrow, pre-defined categories.

The ideals of good care for this identity include impartiality, inclusivity, accountability, and transparency. Performing this identity, NPGs remain connected to the neighbourhood for whom they speak: a neighbourhood which is beyond their own experience, but with which they are nevertheless still associated. They iteratively move from the outside reflexively looking in, to presenting their own neighbourhood from the inside to the outside. In this identity, the NPGs repeatedly emphasise the importance of hearing what they want before we can make any decisions; of keeping them engaged; of making sure it’s their plan: “We need to know what everyone thinks, not just us, people we know. We need to reach out to businesses, young parents, kids. What do they think? What do they want to see?” (Geoffrey, Oakley NPG member).

Apart from the neighbourhood

In this third identity, NPGs are enacted as detached and separate from the neighbourhood, transformed by their collective practices and experiences. The requirements of neighbourhood planning oblige them to “adopt professional methodologies” and “adapt ... an expert discourse” (Bradley, 2018, pp. 31, 38) in order to to speak for the facts of the material world. The NPGs become ‘lay-experts’, distanced from the sociomaterial neighbourhood in order to perform the “god trick of seeing everything from nowhere” (Haraway, 1988, p. 58), becoming self-invisible (Haraway, 1997). While performing this position is highly problematic from an STS perspective, it is vital to achieving credibility in a positivist
planning system. This identity and its associated practices are furthest removed from obvious interpretations of care. NPGs in this mode are performed as detached, rational lay-experts, entirely disconnected from affective relations with place. But this concealing or suppression of more immediately recognisable versions of care is done through the manifestation of other versions of care, as described below.

The object of knowledge here is the neighbourhood as revealed by technical analysis, its categorizable and often quantifiable characteristics (such as housing demand and need, demographic evidence, traffic surveys, economic data). Conventionally in the planning system, “[l]egitimate knowledge is that which is constituted at an epistemic distance from neighbourhoods ... even though this might not correspond with experiential forms of knowledge” (Allen & Crookes, 2009, p. 483), necessitating this form of knowledge production to demonstrate epistemic authority.

The object of care is thus the ability to credibly represent the neighbourhood in this way, to be able to craft or source evidence that will be accepted as objective fact. The care taken to establish this credibility was often extraordinary, exemplified in the Wroston NPG’s production, distribution, collection and analysis of their Housing Needs Survey, considered to be a central piece of evidence. They commissioned a professional planning consultant to lead development and analysis of the survey (rather than doing it themselves, as they did for the ‘opinion survey’ referenced above); sourced an existing survey from a local expert stakeholder to use as a template; dedicated several meetings to debating which questions should be included and excluded, and how they should be worded; made elaborate arrangements to ensure that the data collected could not be distorted (e.g. by households returning more than one survey); hand-delivered and collected surveys from every household in the neighbourhood; and made alternative arrangements so that surveys could be returned if hand-collection was not convenient.

The affective states associated with this object revolve around detachment, dispassionateness and rationality. These states are often seen as antithetical to care, but represent the embodiment of this version of care, as the related ethico-political obligation is to be ‘objective’ — removed from entanglement with the object of knowledge. However, considerable anxiety and passion was expended in the attempt to achieve this end; the debates over the Wroston housing need survey often got heated, with a particularly detailed and intricate discussion over whether assessment of local housing need should include family members who had moved away and wanted to return. To resolve disputes, Scott, their consultant, often employed variants of the argument that “This has been used already, it’s not perfect but it’s been used by the council” to dissuade them from significant changes to the template on the basis that it had been accepted as capable of producing objective evidence in its current form.

The methods of care, partly exemplified in the example above, are to use devices such as templates that are already recognised by key audiences as being able to produce ‘objective’ evidence; to employ certified professional experts; to draw on the embedded expertise of inscriptions (such as already-adopted plans or surveys from other places — Wroston used an emerging development plan for a nearby Area of Outstanding Natural Beauty as a model, and Oakley’s consultant Andrea more than once said that she would “find a policy to fit” from the existing ‘bank’ of neighbourhood plans once she understood the local issues); to rely on sources that have already demonstrated their epistemic authority (e.g. council evidence base); and to develop sophisticated procedures to guard against skewing or corruption of data.

What is excluded here is any explicit sense of emplacement, of the NPGs’ own or others’ embodied and contingent being-in-the-world. The NPG do not here speak as the neighbourhood, or for it, but about it, as something quite removed from them. The ideals of good care are of objectivity, detachment and disconnection, to take care not to ‘pollute’ the facts produced with any ‘taint’ of subjectivity: as Wroston NPG member Ray said about the Housing Needs Survey, “This is our really basic facts that we’re trying to establish”. It is a mode of relating to the world that attempts to negate its own relationality and entanglement, in which care is taken to engage with the world only within the positivist evaluative framework taken for granted by custom and practice. NPGs are very care-full in enacting this identity, as it is the one from which they, as an instantiation of community, would in other circumstances be considered most distant from, but which is crucial to enacting them with agency in the community of practice of professional planners. But it is also one which they know to be flawed, precisely due to its exclusion of elements of neighbourhood that matter significantly to them. This was exemplified in the Wroston NPG’s critique of the council’s Landscape Character Assessment of two potential development sites, (see Discussion). Its basis in a formal assessment matrix with pre-defined categorisations and its mechanistic approach to assessment gave it a superficial air of technical rigour, but working back from its recommendations to the ‘raw data’ in the matrix, they revealed that it artificially constrained the characterisation of the sites and led to inaccurate and inappropriate recommendations. 

Identities, cares and relations

Enacting each of these identities plays a crucial role in the ordering of sociomaterial relations: different relations are performed by each identity, and in turn each identity is bound up with specific materials and practices that depend on particular more-than-human networks (Barad, 2003; Latour, 2005). This enables each to perform different versions of care, produce different forms of knowledge and to generate different types of legitimacy, that in combination provide the basis for the NPGs to act on behalf of the neighbourhood. The enactments of these relations have been described in some detail in the previous sections and are
summarised in Table 1. However, there are tensions and conflicts between these enactments: the identities do not sit easily together as a coherent whole. While they must be held together, they may not necessarily hold together in an equitable balance. If the performance of one or two dominates, the other(s) may be suppressed in response. So it matters in what configurations they are held together, because this determines which relations, cares and knowledges are made visible and strengthened or weakened (Moser, 2008).

TABLE 1. Identities, cares and relations

<table>
<thead>
<tr>
<th>Identity</th>
<th>In the neighbourhood</th>
<th>Of the neighbourhood</th>
<th>Apart from the neighbourhood</th>
</tr>
</thead>
<tbody>
<tr>
<td>Material relations with neighbourhood</td>
<td>Embedded, embodied, entangled, lived</td>
<td>Technologically mediated, engaged but distinct</td>
<td>Technologically mediated, detached, distanced</td>
</tr>
<tr>
<td>Type of knowledge</td>
<td>Direct first-hand experience, informal social contact</td>
<td>Formally synthesised &amp; codified second-hand experience</td>
<td>Technical, specialised, ‘objective’, ‘factual’</td>
</tr>
<tr>
<td>Neighbourhood represented as</td>
<td>Synecdoche: speaks as the neighbourhood</td>
<td>Mediator: speaks for the neighbourhood</td>
<td>Expert: speaks about the neighbourhood</td>
</tr>
<tr>
<td>Type of legitimacy</td>
<td>Moral</td>
<td>Political</td>
<td>Epistemological</td>
</tr>
<tr>
<td>Object of care</td>
<td>Sociomaterial neighbourhood as experienced by NPG</td>
<td>Sociomaterial neighbourhood as experienced by others; ability to represent relations in acceptable material forms</td>
<td>Ability to represent sociomaterial neighbourhood ‘objectively’ in acceptable material forms</td>
</tr>
<tr>
<td>Methods of care</td>
<td>Doing neighbourhood planning per se; personal engagements with neighbourhood, relating these to plan production</td>
<td>Distancing from own lived experience; connecting with, simplifying and codifying others’ experience</td>
<td>Relying on recognized sources of epistemic expertise/authority; ensuring these are not ‘corrupted’</td>
</tr>
<tr>
<td>Exclusions from care</td>
<td>Formal representations of neighbourhood; elements and relations that (may) constitute neighbourhood for others</td>
<td>NPGs’ own personal relations, affects and experiences; depth, nuance and texture of others’ experience</td>
<td>Sense of emplacement/embodied and contingent being-in-the-world: neighbourhood as experienced</td>
</tr>
<tr>
<td>Ideals of good care</td>
<td>Involvement, entanglement, embeddedness</td>
<td>Impartiality, inclusivity, accountability</td>
<td>Objectivity, detachment, disconnection</td>
</tr>
</tbody>
</table>

Discussion: Configurations and politics of care

Care is enacted through neighbourhood planning in many ways, and each must be performed in order to enact the NPG as a legitimate representative of neighbourhood. However, the relative configuration of these conflicting cares — which are prioritised and which marginalised — has consequences that may be detrimental to both the subjects and objects of care. The politics of care in neighbourhood planning are first and foremost ontological: concerned with which worlds can be represented and enacted through its practices (Mol, 1999).

To acquire legal force, a neighbourhood plan must be reviewed by an independent Examiner, who may approve, reject, or require it to be modified. Approved or suitably modified plans must then pass a local referendum. In extreme cases, a failure to attend adequately to the relations of care associated with one these identities has led to plans failing at these stages. Nine have failed at Examination on technical grounds, due to insufficient care being enacted in the identity and practices of the detached expert, e.g. failure to provide adequate criteria for site allocation (Bradley, 2017a). Six have been defeated in local referendums (Parker, 2020), suggesting a failure to enact sufficient care in their identity as mediator, engaging the neighbourhood. However, in one striking case, a referendum was lost when the NPG campaigned against its own plan because they felt that the Examiner had required such extensive modifications to it that it no longer reflected the community’s wishes (Milne, 2016), and another plan was withdrawn after Examination for the same reason (Lichfield District Council, 2018). These two provide vivid examples of the cares of the detached ‘expert’ identity being prioritised over and imposed upon those of the other two by an external force — and of NPGs resisting this and reasserting the importance of cares ‘in’ and ‘of’ the neighbourhood, by ‘misbehaving’ and subverting the framing and expectations of the process (Michael, 2012).
However, it is much more common for these identities and their associated practices to become internally configured in a way which valorises the cares of the detached identity ‘apart from’ the neighbourhood (and to a lesser extent the disciplined, codified enactments of those ‘of’ the neighbourhood), at the expense of the more textured, emplaced cares ‘in’ and ‘of’ the neighbourhood. NPGs frequently feel compelled to turn their attention away from their original object of care, the neighbourhood-as-experienced, in order to represent a version of neighbourhood in the “dry as dust” forms of technical expertise (Sandercock, 2003, p. 21). They take great care to produce these, because this is an indirect attempt to do care for the experienced neighbourhood. But while this may enable NPGs to be enacted as having agency within the community of practice of professional planners (plans have often been effective in shaping the material development of neighbourhoods (Bailey, 2015; Vigar et al., 2017)), it generates feelings of loss, disappointment and alienation that their plans do not represent the object of care that mobilised them (Bradley, 2018; Yuille, 2019; Parker et al., 2020). When their plan was nearing completion, several members of the Oakley NPG echoed this sentiment, with complaints such as “I just can’t see anything of us in there, it’s just like a document from the council, it doesn’t feel like Oakley” (Jane) and “It doesn’t sound like our voice” (Sarah). In Wroston, the NPG judged that their consultant’s early presentation of evidence “doesn’t sound like Wroston, you know, specifically about Wroston” (Laura), and they set out to re-familiarise him with the neighbourhood of their experience as a result.

However, while these contingent configurations of care have often led to disappointment and alienation, NPGs are in a unique position to weave these cares together in different arrangements, to resist the reproduction of dominant modes of practice. Traditionally, these modes of care have been associated with different actors. Community groups in formal planning situations tend to be enacted as incapable of accessing the kind of epistemic authority that defines the detached expert identity ‘apart from’ the neighbourhood (Burningham et al., 2014; Welsh & Wynne, 2013), and collective action is often portrayed by powerful actors as driven by subjective, emotional or selfish interests (Bradley, 2015; Devine-Wright, 2015). The promotion of collective action based on care for place, and the bringing-together of these different versions of care within the NPG, opens a space for cares to be enacted in different combinations and configurations, and for policy to do care better (Gill et al., 2017a), despite the pressures to reproduce traditionally dominant patterns and practices (Parker et al., 2015, 2017).

One example of this was provided by a contested landscape character assessment (a method of describing the sense of place a landscape produces by identifying and describing the combination of elements and features that make different areas distinctive) in Wroston. An assessment by the council’s consultants, using a highly regimented, tick-box style assessment tool, had concluded that two large sites enclosing the village on two sides were suitable for development on landscape grounds. The NPG hired a landscape architect to conduct a second assessment. She was briefed beforehand by members of the NPG on the background to the project, the context of the sites in relation to the village and the surrounding landscape, their critiques of the original assessment, and on important viewpoints, approaches and travel lines. She spent a whole day undertaking fieldwork, in contrast to the apparently hurried visit of the council’s consultants, walking around and through Wroston and its surroundings as well as visiting each potential development site individually, building up a picture of the area as a whole and making use of the NPG’s advice. She located her assessments of the sites within a broader appraisal of the village and its surroundings as a whole. As well as being deeply informed by the NPG’s experience and interpretations, her material practice of fieldwork more closely resembled their modes of engagement with place, and her more qualitative, fine-grained and richly-textured analysis reflected this. The policy proposals made on the basis of this rival assessment, which re-configured the relations between care for rigour and objectivity with care for engagement and relationality, were accepted at Examination, overturning the council’s objections. The tensions between the different versions of care had been worked together productively, and had generated new representations of the world that enriched both lay and expert perspectives and generated new effects (Tsing, 2005; Verran, 1998).

Conclusion

Neighbourhood planning is a dense imbrication of policy and care: a national policy is intended to enable citizens to articulate their care for place, and give agency to that care by producing local policies which will shape future change. Care is intended as an output of policy and policy is intended as an output of care. This paper traces the contours of care in this policy and practice domain, and provides detailed empirical knowledge about how the relationship between policy and care is shaped (Gill et al., 2017b). It resonates with the papers in Gill et al.’s edited monograph (2017a) in exploring distributions of care and suggesting ways in which these distributions could be otherwise, but in contrast to them considers how (local) policy is made as well as how (national) policy is implemented.

The analysis shows how a policy intended to foster one form of care reproduces its exclusion by generating and privileging other subjects, objects and methods of care. However, it also shows how policy and care can be done otherwise: in the example in the previous section, generating richer representations of neighbourhood-as-experienced, in the context of a system that
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This speaks to debates around the ‘dark side’ of care (Metzger, 2014; Murphy, 2015) by highlighting that although care is necessarily selective, directing attention towards some (potential) objects of care and away from others, there are ambiguities and fluidities within this selectiveness. Policy impinges on multiple facets of care, and often on multiple versions of subjects and objects of care: there are different ways of doing care for ‘the same’ object (the ‘neighbourhood’) by ‘the same’ subjects (the NPG). Making all modes of care visible — especially those not normally conceptualised in terms of care — may enable a more reflexive approach to policy design, application, and research, that can ameliorate the contingent tendency of policy enactment to marginalise specific modes of care.

While the anticipated features of policy and care are often seen to work against each other (Gill et al., 2017b), this paper shows policy and care deeply, if unevenly, embedded in each other. Rather than finding tensions between the features of policy and the features of care (Lavau & Bingham, 2017), it finds tensions between different cares in the enactment of policy. It suggests that while the situated enactment of policy in this location does act to suppress some forms of care, it does so by encouraging others. Care does not appear as being at odds with the demands of policy but rather woven through them in complex relations which are contingently configured. These configurations are frequently inimical to the object of care that the policy is ostensibly intended to foster. However this is not an inherent feature of the policy but rather a consequence of its situated enactment.

All the modes of care identified in this paper are necessary for doing good care in this location of practice. It is not simply the case that care is marginalised by policy protocols (Gill, 2017; Lavau & Bingham, 2017) that are overly-focused on measurement, quantification and standardisation (Schillmeier, 2017). Rather, approaches that involve measurement, standardisation and quantification can themselves be partial embodiments of good care. In this case, practices of understanding locations as abstract space (known from a distance through technical methodologies and technologies, with categorizable and quantifiable characteristics — for example assessing housing need and demand) are vital for doing good care for the future growth of neighbourhoods. They are crucial components of the ongoing and changing relationships between people and place, and without these techniques planning with care would not be possible. Problems arise both when these practices marginalise other, more situated and responsive practices of care — in this case, practices of understanding locations as lived place (known from within through practical and affective engagements, with meaningful and symbolic characteristics) (Agnew, 2011) — and when the caring dimensions of these more abstract practices are obscured, leading to perceptions that they are somehow oppositional to more responsive and situated articulations of care.

In some domains, such as spatial planning, it may be that policy can do care better not by replacing one set of (standardised) care practices with another that holds a more situated awareness of difference, but by reconfiguring the relations between them to allow them to ‘go on well together in difference’ (Joks & Law, 2017; Verran, 1998). Policy can only respond to that which is made visible. Dominant planning practices tend to marginalise the visibility of certain objects of care (such as the neighbourhood-as-experienced), while reproducing others (such as housing need and demand) as matters of fact. Surfacing and explicitly paying attention to different modes of care, and understanding their objects as matters of care (Puig de la Bellacasa, 2011), can better enable both researchers and practitioners (NPGs, professional planners and Examiners alike) to collectively reflect on them and the relations between them. Making different objects and relations — different worlds — of care more visible is the first step towards discussion and deliberation on how policy should respond to them.

Acknowledging the qualitative differences between these matters of care, the impossibility of reducing one to another but nevertheless the importance of each, and holding them together visibly in tension, will not produce easy answers for practitioners. But it could open up possibilities for more conscious and reflexive decision-making about the ways in which they are combined, and reduce the likelihood of matters that matter to people being automatically sidelined. For example, richer, more textured representations of neighbourhood-as-experienced are central to understanding how people and place relate to each other, and should therefore be valid and vital elements of the evidence needed to plan with care. By neither attempting to collapse these into quantitative understandings of location as abstract space, nor allowing them to displace or be displaced by them, policy can be developed that is more conscious and responsive to the varied material needs of neighbourhoods, which can only be fully articulated as a combination of the qualities and characteristics of both lived place and abstract space.

Each mode of care attends to different versions of neighbourhood and ways of representing it, each of which is necessary to successfully enact the policy. But the specific ways in which they are enacted, which are privileged and which marginalised, shift the conditions of possibility for what can be cared for in policy. Opening up how matters of care are produced, making diverse subjects, objects, and relations of care visible, opens the possibility...
of responding to them and working them together in less exclusionary and dominatory ways (Haraway, 2016; Martin et al., 2015). Making visible more of the work of care enables disruptions to what is cared for and how; making different relations of care visible (or making them visible in different ways) enables policy to do care differently by (re)presenting different realities to which it can respond.

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