



## Q &amp; A

# How Might the COVID-19 Change Architecture and Urban Design?

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By Michael J. Crosbie

In the wake of the global pandemic crisis, there's been speculation about how architecture, urban planning, and design might be permanently affected. Ashraf M. Salama, a professor at the [Department of Architecture, University of Strathclyde](#), in Glasgow, Scotland, and the director of the university's [Cluster for Research in Architecture and Urbanism of Cities in the Global South](#), has been following how these disciplines might be changing. He's recently written a publicly peer-reviewed paper on some of his findings: "[Coronavirus Questions That Will Not Go Away: Interrogating Urban and Socio-Spatial Implications of COVID-19 Measures](#)." I sat down with Salama to discuss some of the issues he raises, and what their implications might be for the built environment in the future.

**MJC:** Michael J. Crosbie

**AMS:** Ashraf M. Salama

**MJC:** **Is this pandemic making density deadly? Or is that too simplistic a critique of urban environments and the pandemic's impact?**

**AMS:** One view advocates no density, or far less. When the SARS virus spread in 2002/2003, cities in China were not as dense as

they are now. The reason for the spread of COVID-19 is greater density, some people argue. But the nature of the coronavirus is different from SARS, in how much more contagious it is. Hong Kong and Singapore, places with high density, have managed to control the spread of this virus by taking aggressive action. This demonstrates that urban density management can contain the disease, that it can be controlled. Future architects and planners might want to consider the balance between design compartmentalization of working and living environments versus integration of such environments. We need to find a balance between this.

**MJC:** **Policies on social distancing appear to be in conflict with what we've learned from people like anthropologist Edward T. Hall, who wrote about personal distances between people, what is socially acceptable, and how it's shaped by cultural norms. Do you think this pandemic could have impacts on our perceptions of comfortable social distances, and might these impacts be permanent?**

**AMS:** If we look at the four zones of distance—intimate, personal, social, public—people now have more of a preference for social and public distance. Social is a little more than a meter to just less than 4 meters, and public is from nearly 4 to more than 7 meters. There likely will be an impact on how people perceive the comfort level of another person's distance from us and how we function within this distance. If pandemics become annual events, personal distance might naturally become more elastic: closer during safe periods and more distant during outbreaks. This will be an important area for future research, because this concept of comfortable personal space is one of the established canons for architects, urban designers, and planners. It's happening right now, as our sense of comfortable personal distance is being modified right in front of us. I am avoiding people, and they're avoiding me.

**MJC:** **What do you suppose the impacts of social distancing might be on how public spaces are conceived, perceived, and used, how they are expected to function, and how people will act in them?**

**AMS:** Successful public places have always been perceived as places for engagement, sharing space for sharing time and stories with people we do not know. As pandemics and our reactions to them become part of a collective psyche, we might engage other people only by observing them, buffered by natural elements in a space. I think there'll be more of a preference to passive engagement. The idea of "place attachment" considers how people are attached to places, their heritage, memories, even aesthetics. The value of whether a place is healthy for us or potentially threatening will start to have more of an impact on our attachment to places. Places that are more healthy, clean, sanitized might foster a closer attachment to place. Concepts of "home zone" and "home

range” might also undergo shifts in perception. Home zone is the immediate place where we live, while home range is the larger residential environment. These might change, because we would feel safer, psychologically and healthwise, closer to home. I believe that environmental psychology and environment-behavior studies will be more important for designers to address.

**MJC:** You note that biophilic design might become a stronger design determinant. Why so, and how might that happen?

**AMS:** There’s already rising interest in biophilic design, the incorporation of nature into the built environment. Some people see this as a renaissance in design thinking and practice. Biophilic design removes or reduces anxiety in people, primarily through an emphasis on nature or design with natural features. In response to pandemics, researchers are studying syntactic relationships between children and nature, the elderly and nature. Engaging with nature even just visually improves how we feel, affects mental health, so visual engagement may become more important. Given that there could be a growing preference for proximity to nature, because we see it as more healthy and less of a health risk, it’s likely that biophilic design will be of more interest to the design community. It will probably become a greater part of the discourse in architecture, more mainstream, part of collective architectural thinking.

**MJC:** Do you think public and personal health issues and policies might become more of a design determinant in the future?

**AMS:** No doubt. For the past 40–50 years urban theorists have focused on three aspects—mental image, form, activity—which were the constituents of urban places. David Canter, a well-known figure in [environmental psychology](#), describes them as physical attributes, psychological conceptions, and actions and behaviors. They all did not consider the health dimensions. Future thinking about urban design will likely include public health and personal health as part of these parameters.

**MJC:** As an architectural educator, how might this global crisis affect curriculum content, emphasis, and how we educate future architects and planners?

**AMS:** There was a recent study by [Louis Rice](#), at the University of the West of England, that found that architectural education and much of practice does not include serious discussions of public health. Public health issues will probably become more mainstream within the curriculum, especially if pandemics become more and more annual events. Biophilic design should become more prominent in the curriculum. The future will likely see environment-behavior studies and building performance will be brought from the margins of the curriculum more to the center.

There may be far more attention given to comfort-related design issues: indoor environmental quality, ventilation.

Due to the complexity of these issues, architecture education will probably include more collaboration with, and integration of, building science, landscape architecture, and urban planning. In terms of the education process, more of it will probably be online. Schools will explore hybrid modes of teaching delivery. For example, lecture classes will end up online, while studio work might be hybrid in some ways. There will be new standards and protocols to study how critical dialogue can be carried out online. Also, architecture schools have already started introducing graduate programs focused on “crisis architecture,” design responses to natural and man-made disasters: climate change, national conflicts, floods, pandemics.

**MJC:** You mentioned that this global crisis might bring different disciplines closer together in responding to it and its aftereffects. What might that look like?

**AMS:** Transdisciplinary approaches might offer a path. Architecture and urban design and planning need to bring in other disciplines, which might have stronger claims on the direction of the design disciplines. We cannot solve problems on our own. A monodisciplinary approach is one where a discipline acts from its own perspective, based on its own expertise. Interdisciplinary approaches are better, but the boundaries of the disciplines are recognized and not crossed. These boundaries are established and rigid, maybe too much so to address a global issue like pandemics. Transdisciplinary approaches try to transcend the lines of a discipline. They require hybrid modes of thinking and action. For example, understanding urban design in light of a pandemic means crossing the disciplinary lines of transportation systems, global mobility, the spread of diseases—all of which are affected by, and in turn affect, the design of urban centers and peripheral communities. There’s growing interest in disaster psychology, how one reacts to disaster situations, and the role of architecture and urban design in that. Architecture cannot do it on its own.

*Feature image by Andy Yueng, as part of his “Urban Density” drone series.*

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