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Mélina Germes, Luise Klaus

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# When Marginalized Subjects Map Their City

## Counter-Mapping Planning Experiments with Drug Users in some German and French Neighborhoods

Germes, Méline (CNRS PASSAGES)

Klaus, Luise (University of Frankfurt)

**Abstract:** This article aims to contribute to the social science discussion on urban policies and the integration (or exclusion) of the perspectives of marginalized groups by asking the question: If there were to be exhaustive urban planning relating to drug issues, what role should drug users play in the planning process? Our answer involves the use of a set of two complementary qualitative cartographic methods which allow us to focus on the inclusion of the voices of marginalized groups. This article is based on methodological experimentation in different French and German cities without aiming at a comparison. The paper exposes and discusses firstly an individual interview method called “Emotional Mapping”, and secondly a participatory mapping workshop called “Ideal City Mapping”. The output of this project has been a web of visual and textual documents, in the form of reports, papers, articles and events such as a travelling exhibition, with the aim of engaging in public discussions with various key players.

**Keywords:** Qualitative methods; mapping; cartography; marginalization; participation; emotions; urban planning; drug use; urban studies; feminist geography.

# Introduction

In the streets of European cities, people still die from overdoses in a context of social isolation, economic deprivation, housing crises, addiction stigmatization, and systemic and institutional discrimination. Since drug use became an urban public policy issue in Western Europe in the 1970s, various policies of criminalization, prevention, harm reduction, therapy and sometimes decriminalization have been established in many countries and cities (Rhodes and Hedrich, 2010). Cartographic representations play an important role in framing the imaginaries beyond media discourses, policies and dominant representations. The following map of syringe finds in some areas of Berlin, originally produced by a government-led study and adapted for publication in a local daily newspaper, purports to show “Where syringes are found in Berlin” (Fig.1). Leaving aside the context of data production (unsystematized crowdsourcing) and the geographic scope of the study (limited to problem areas targeted by urban policies), this map reproduces the familiar framing of “dangerous places” vs. safer ones by using the abstract image of large, scary syringes to indicate where marginalized drug users are considered a threat. Moreover, the map doesn’t give any information about the everyday life of drug users and the structural factors explaining why people inject in urban places.

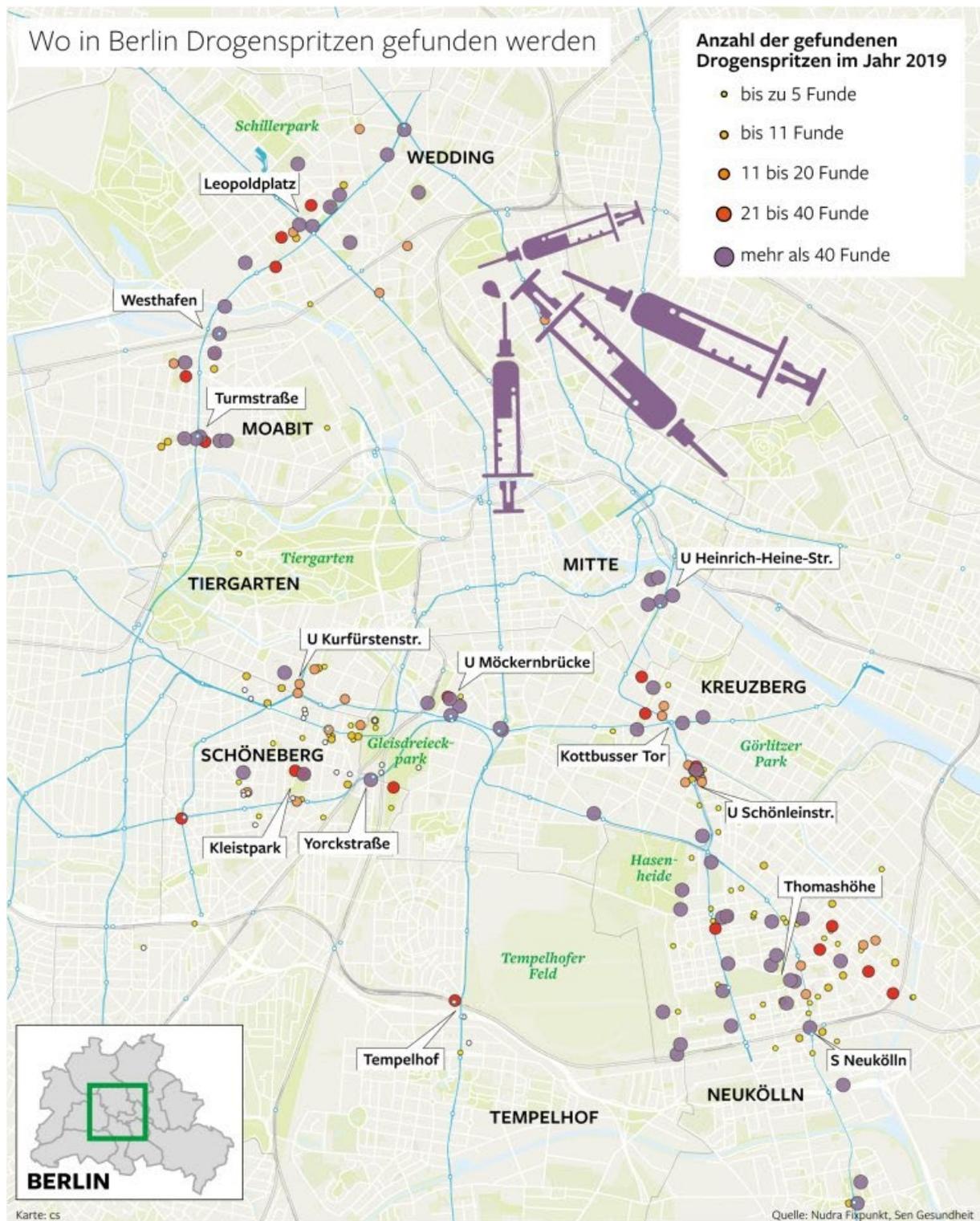


Fig. 1 “Where syringes are found in Berlin” (Source: Berliner Morgenpost, 21.10.2020, <https://www.morgenpost.de/berlin/article230719038/Das-sind-die-Drogen-Hotspots-in-Berlin.html>)

This article is based on an experimental alternative cartographical methodology trialed in different cities in Germany and France without aiming at a comparison between countries,

*Länder, régions* or cities. While Berlin and Frankfurt have decriminalized the use of drugs to a certain extent and have many DCRs (Drug Consumption Rooms), this is not the case in Bordeaux, Nuremberg and Munich<sup>1</sup>. Urban development processes such as renovation, touristification, gentrification and the cleaning up of urban spaces may have removed obvious open drug scenes from the sight of visitors and residents in many neighborhoods, but it has distanced them from social workers and support programs (Azocar, 2016) as a result of neoliberal urban policies (Beste, 2000; Klaus et al., 2019). The term “marginalized drug users” refers to a social process of marginalization (Castel, 1994) fostered by norms and institutions and rooted in economic and social deprivation and the criminalization of a way of life. In this context, the article will focus on the deconstruction, via counter-mapping, of the biases that underlie urban drug policies, the aim being to contribute to a renewal in research and policies (Jauffret-Roustide and Granier, 2017; Pennay et al., 2014).

The presence of marginalized drug users and the use of (prohibited) drugs in public is often cited as the main problem that urban drug policies have to solve (Kammersgaard, 2020; Cusick, 2007). The legitimate subject of urban drug policies is the “inhabitant”, by definition constructed in opposition to the objects of urban drug policies: marginalized drug users. Here, by contrast, they are considered as political subjects whose voices need to be heard in public debates about them; their experiences of everyday life and interactions with numerous institutions are a source of precious knowledge. The illegitimate practice is that of “illegal drug use in public”, considered not only illegal but also a threat to both social order and public health. The focus on illegality drives attention away from structural factors such as the social and urban processes of marginalization, leading to structural exclusion. The everyday reality of marginalized drug users is the permanent search for interstitial spaces far from sight and surveillance, in order not to be evicted, threatened and subjected to violence.

This article aims to contribute to the social science discussion on urban policies in an urban context and the integration (or otherwise) of the perspectives of marginalized groups. Our answer involves the use of a set of two complementary qualitative cartographic methods (both tested in France and Germany) which allow us to focus on the inclusion of the voices of

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<sup>1</sup> See last published reports: Berlin

[https://www.suchthilfestatistik.de/fileadmin/user\\_upload\\_dshs/Publikationen/Jahresberichte/Jahresberichte\\_Laender/Suchthilfestatistik\\_Berlin\\_2018.pdf](https://www.suchthilfestatistik.de/fileadmin/user_upload_dshs/Publikationen/Jahresberichte/Jahresberichte_Laender/Suchthilfestatistik_Berlin_2018.pdf); Bordeaux [https://www.ofdt.fr/ofdt/fr/trend/syntheseTREND2018\\_Bordeaux.pdf](https://www.ofdt.fr/ofdt/fr/trend/syntheseTREND2018_Bordeaux.pdf);  
Nuremberg and Munich: [https://mudra-online.de/downloads.html?file=files/mudra/Downloads/2018\\_03\\_13\\_Auswertung%20KonsumentInnenFrabo\\_b.pdf](https://mudra-online.de/downloads.html?file=files/mudra/Downloads/2018_03_13_Auswertung%20KonsumentInnenFrabo_b.pdf);  
Frankfurt: [https://www.uni-frankfurt.de/77045850/MoSyD\\_Szenestudie\\_2018\\_final.pdf](https://www.uni-frankfurt.de/77045850/MoSyD_Szenestudie_2018_final.pdf); <https://frankfurt.de/-/media/frankfurtde/service-und-rathaus/verwaltung/aemter-und-institutionen/drogenreferat/pdf/konsumraumdokumentation-2018.ashx>

marginalized groups. The rich corpus of counter-mapping practices allows us to elaborate specific methodologies in order to reach marginalized drug users and to relay their experiences, opinions and imaginations to a broader public – in the form of an exhibition – while deconstructing verbal and visual stereotypes around drug use in the city.

The first part of the paper explains the theoretical and methodological foundation of our cartographic approach, while the last two parts present and discuss, firstly, individual interviews we “Emotional Mapping” and, secondly, participatory mapping workshops we “Ideal City Mapping”.

# **1. Situating the production of space and maps: Theoretical and methodological foundations**

## **1.1 Positions and contexts of research**

The research was conducted as part of the French-German research project DRUSEC<sup>2</sup>. The methodological reflection and experimentation were conducted bilaterally, engaging at different stages researchers from both French and German teams. Luise Klaus and Mélina Germes led the theoretical, methodological and interpretative work. Support, input and guidance, mostly from Francesca Guarascio and also from Christian Herrgesell (both of the NUDRA<sup>3</sup> study), were decisive for the implementation of both methods in Berlin. The following text is a product of this network, but the wording and positions adopted are those of the authors. The DRUSEC funding covered financial compensation of the interviewees as well as material and travel costs.

This article is the result of collective research carried out by an unstructured team of white, mostly female and mostly full-time scholars benefiting from European citizenship, located in different cities in France and Germany. While their disciplinary backgrounds differ (from urban planning to social work, including geography and sociology) the team shares similar objectives: producing methodologies which both have high ethical standards in terms of the researcher-

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<sup>2</sup> DRUSEC (Drugs and Urban Security, see: <https://drusec.hypotheses.org/>) is a binational research project founded by the ANR in France and BMBF in Germany between 2017 and 2021. Among other goals, its aim was to understand urban space and safety issues from the perspective of drug users and through the use of cartographical methods.

<sup>3</sup> NUDRA (Netzwerk zum Umgang mit Alkohol und Drogen im öffentlichen Raum, see: <https://www.fixpunktggmbh.org/project/nudra-netzwerk-zum-umgang-mit-alkohol-und-drogen-im-oeffentlichen-raum/>) is a non-academic project funded by the City of Berlin, hosted by the drug help institution Fixpunkt gGmbH, whose aim is to gather information about drug use in public in Berlin in order to make policy recommendations.

participant relationship and which contribute to the representation of participants' lives, perspectives and ideas. Some have previous experience of cartography in diverse contexts (Guarascio, Germes) and/or have already engaged in (counter) mapping in the past (Klaus), whereas sociologists (Scavo, Dichtl, Jamin) were new to this field.

## 1.2 Feminist epistemologies and marginalities

Feminist epistemologies are a way of producing and reflecting on knowledge, the position of the knowing self and the relationship to research subjects – in any scientific field (Haraway, 1988; Sundberg, 2003). In this case, feminist epistemologies proved greatly helpful in laying the basic foundations for our methodologies.

The positivist approach is based on a claim of objectivity through the abstraction of the knower's position – from fieldwork to theorizations, “*so that he and his thought are autonomous, context-free and objective*” (Rose, 2007: 7). This knowledge is presented as the only one possible, a universal knowledge, not influenced by the person or position of the knower, an “*unmarked subject*” (Haraway, 1988: 586). From this unmarked position, “*other identities [are seen] only in terms of his own self-perception: he sees them as what I shall term his Other*” (Rose, 2007: 6). These Others are not only women, but multiple Others such as members of the underclass, Black people, disabled and sick people, etc. These positions are conceived as subjective per se; such groups are handled as objects of knowledge, and considered incapable of (objective) knowledge. Haraway stresses the importance of positioning knowledge without abandoning the quest for partial objectivities: “*I am arguing for politics and epistemologies of location, positioning and situating, where partiality and not universality is the condition of being heard to make rational knowledge claims*” (Haraway, 1988: 589).

As mentioned in the introduction, the subjects of this research have *marked* positions in many ways: as economically deprived people, they are subject to classism; as drug addicts, they are seen and see themselves as ill and subject to ableism<sup>4</sup>; women are subject to sexism and men represent a “threatening” subaltern masculinity; their stories reveal them as subjects of marginalization processes. As *marked* subjects, they are spoken *about* and not *with*, their voices and perspective being absent from the places where their lives are discussed. By contrast, the methodological approach seeks to enhance these subjects' position as sources of knowledge

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<sup>4</sup> Only a few of our participants were subject to racism, which is due to many factors, the two main ones being 1) that users of drug help facilities are mostly white, and 2) that we conducted the workshops in German. Most of the participants were French or German nationals, meaning that the most vulnerable drug users were underrepresented. Therefore our research setting was unable to reach out sufficiently to drug users who experience racism and exclusion due to nationality.

about their own everyday experiences and interactions with institutions. This is the partial perspective this research is about. The research conditions led to a few choices that impacted the profile of the participants and the kind of marginalization discussed. In order to be able to communicate without interpreters, German language skills were required. Therefore, the majority of the participants were German nationals and thus entitled to social benefits – even if they did not always apply for them. The experience of non-national residents, migrants or refugees is very different, including a language barrier, legal exclusion from some social benefits or services (e.g. healthcare) and racist discrimination.

Further issues, such as gender diversity, were also impacted by the research design, since the most visible, frequent and dominant users of low-threshold facilities are cis men. Women are not equally represented and queer persons almost absent. Most of the participants were also clients of drug help facilities and thus not properly representative of those who avoid the facilities and remain on their own. All of our participants were neither sight- nor hearing-impaired, and the research was not designed to be accessible to everyone. These underrepresented experiences are, sadly, only touched on here, highlighting the need for further research: in several languages with interpreters; addressed specifically to women on one hand and to queer persons on the other; incorporating users without access to facilities; and based on an accessible research design in order to include disabled participants. Nevertheless, within these constraints, participants presented a range of biographies, consumption habits, and substitution, housing and employment settings, thus representing a situated diversity of marginalized situations.

Participation in the research activity was considered as work, and thus worthy of remuneration. Given participants' financial precarity, in order to compensate for lost working time and as an incentive, they were reimbursed €10 for a max. 1-hour interview or €15 for a 2-hour workshop. This was regarded as sufficient when evaluated in relation to the minimum hourly wage. Consistently with the findings of Slomka et al. (2007) and Tuck and Yang (2014), the target group showed agency in refusing to participate in the research (e.g. due to time constraints or lack of interest), declining to speak or draw, interrupting the interview, arriving late or leaving before the end of the workshops, indicating that this remuneration was neither undue nor coercive. The information given in advance of the remuneration was often the first motivation to participate – especially for the one-shot mapping interviews. Only a few were obviously keen to finish, giving short, unspecific answers, while the majority were engaged in the process. After the first session, participation in the workshops was usually motivated by the subject's

own interest and merely facilitated by the financial incentive. One Frankfurt participant even bought sweets for everyone at the next session with his money, because he “did not need the money right now”. A Berlin participant was missing for half an hour while having a haircut next door with the money from the day before. Relationships with the participants are discussed in more detail below.

The next section addresses how feminist epistemologies have methodological implications for our understanding of urban space, marginalized experiences and imaginaries.

### **1.3 The production of space in neoliberal times**

What is the “public space” to which drug policies refer and in whose name the deviant bodies of marginalized drug consumers are governed? This term commonly refers to spaces which are not subject to private ownership or controlled access, but rather the responsibility of state and city authorities and their various official agents. “Public space” is assumed to be space requiring public regulation, control and intervention. The notion of public space has been a keystone of public action toward marginalized drug users for decades – though it faces two consistent criticisms.

Firstly, the dichotomy of public vs. private spaces is an ideological construct which fails to encompass the variety of urban practices and appropriations. Beyond the difficulties of determining what *really is* or *ideally should be* a “public space” (Qian, 2020), this distinction fails to take into account the production of (temporary) common places and the practices of control over and exclusion from these spaces. Feminist approaches critique “public space” as an ideological construct, erasing the diversity of relationships to spaces, and most particularly marginalized experiences (Rose, 2007: 16-40). It relies on the assumption that everyone has access to private places, that there is nothing in between. In the lives of marginalized drug users, private space is shown to be rare and conflictual or inexistent; most of the time, privacy and intimacy happen in open or interstitial places. What is seen as “loitering” in the city and conflictual appropriation of places is actually the result of banishment, the inaccessibility of privacy, and vulnerability to violence and harm (Wehrheim, 2019).

Secondly, an important role of public agencies (from police to harm reduction organizations) is to localize places within cities meriting particular interventions because of the so-called nuisance of drug use in public (Martinez et al., 2014). The localization of the drug problem in public is based on normative expectations regarding the spatio-temporal use of (private and

public) spaces for productivity, reproduction, leisure, addiction and illness. This results in the eviction and deterrence of vulnerable people from public places that should belong to everyone (Belina, 2003, Fleury et Froment-Meurice 2014).

Unlike the ideological differentiation between public and private spaces, our conception of space – as researchers rooted in social geography and critical theories – relies on the works of the philosopher Henry Lefebvre, which offer a conceptualization of space for social sciences (Lefebvre, 1974/2000). Lefebvre’s socio-spatial thinking offers the basis for a conception of space as a constitutive element of social relationships (VII, 1). As Chris Butler summarizes, space is the result of a complex process of production and the necessary instrument of the reproduction of society (Butler, 2009: 318-320). The production of urban space is the result of three processes. First, the **representation of space** by “*apparatuses of power*” forms a corpus of spatial normative knowledge that will determine both the building of the city and the norms and practices aimed at marginalized drug users. Social drug science and expertise, drug support and health institutions, plus the media, are the producers of (this) representation of space, which is well known and accessible and relies on an often unquestioned concept of “public space”. Second, we can identify **spatial practices** “*through which the totality of social life is reproduced*”. In this case study, the spatial practices of drug consumers are broadly structured around circular urban mobilities between money making, drug buying and consumption (see 2.2). Third, **representational spaces** “*form part of the social imaginary of ‘inhabitants and users’ of space through which complex symbols are linked to non-hegemonic forms of creative practice and social resistance*” (Butler, 2009: 320). These representational spaces from the imaginations of marginalized drug users are broadly unexpressed, unknown and unquestioned. These three kinds of spaces overlap in the same places. All three concepts describe spatialization processes that make, un-make and re-make spaces.

Lefebvre’s concepts open up a possibility of methodological analysis for research practices. The following explains how cartographic methods offer knowledge about *spatial practices* on the one hand and *representational spaces* on the other.

## 1.4 Counter-mapping methodologies

As a technique rooted in feminist epistemologies, this research needs a methodology to structure the particular relationships, knowledge exchanges and translations between researchers and participants. According to Mekdjian and Olmedo (2016), research interactions based solely on oral language show many limits – particularly regarding the agency of the participants. Our

choice fell on counter-mapping methods, which not only introduce the language of visibility and the relationship to space, but also invite participants to take an active role by speaking and drawing. The multi-sited and collective setting of the research project described above led us to work together to establish precise counter-mapping methods, thus limiting the participants' influence on the research process itself.

In this context, the use of cartography may seem paradoxical, since cartographic practices have faced and continue to face profound criticism due to their use as instruments of power (Harley, 1989), relying on the “the god trick of seeing everything from nowhere” (Haraway, 1988: 582). By representing spaces from above on a flat map and claiming objectivity, cartography tends to erase the positioning of the maker, abstracting from practices and subjects. Particularly in regard to mapping drugs – relying either on crime, epidemic or geopolitical mapping imaginaries – most cartographic attempts are based on the postulation that the social problem of drugs can be addressed by geo-localized representations of data related to drug practices – such as geospatial models of drug use as an epidemic (Gruenewald, 2013) or measures of urban mobilities of injecting drug users correlated to health risks (Martinez, 2014). Cities such as Berlin turn to cartography as a scientific decision-making instrument, seeing mapping as a clue to solving the problems of urban drug policies – the aim of the specifications from the NUDRA study. As Kneale and French (2008) show and as Fig.1 illustrates, this kind of cartography actually masks how institutions themselves produce drinkers (or drug consumers) and how the production and construction of the “problem” involves broader actors, sites and practices. Like crime maps (Belina, 2009; Germes, 2014), these are techniques of government, objectifying space, abstracting from social practices and living conditions, disembodied experience, ignoring the social construction of available statistical data (Desrosières, 2008; Didier, 2011) and relying on the positivistic understanding of space as an object. They produce spatial stigmatization and spatial fetishism (as if space acted by itself), and are shown to reinforce control and repression of those who are most discriminated against, who often figure among the most vulnerable. Feminist approaches have significantly contributed to this critique (e.g. Kwan, 2002).

Counter-mapping practices, by contrast – which are frequently encountered in art and activism as well as science – are theorized as a re-appropriation of one means of power in order to allow alternative representations to emerge. In the contexts of indigenous land conflicts, urban housing struggles and migration studies – among others – counter-mapping has shown multiple possibilities for visualizing and sharing alternative space representations, mobilizing other

contributors to the mapping process, addressing other readers, and allowing other uses of the map committed to the ideals of inclusion, transparency and empowerment (Parker, 2006) and claiming emancipatory effects (Mogel and Bhagat, 2008; Belina and Germes, 2016; kollektiv orangotango+, 2018). Counter-mapping practices are a way of translating, verbally and visually (Caquard and Cartwright, 2014), knowledge from marginalized places to public discourse – in both academic and public fields. Critical cartography approaches and counter-mapping practices offer a repertoire of alternative mapping practices (Counter Cartography Collective, Dalton and Mason-Deese, 2012). They enhance the whole process of mapping from production to reading, from authorship of data to its visualization and reception (Del Casino and Hanna, 2005) and displace the idea of a truthful representation (Mekdjian and Moreau, 2016).

Our aim is neither to produce visual artefacts in “*unregulated gluttony*” (Haraway, 1988: 582), nor to fetishize them. The deployed cartographical methodologies respond to a particular need: the need for a visual means of translation from a multiplicity of subjects to ourselves as a diverse group of researchers, and for different contexts in which to present the results (from public exhibitions to scientific papers). Following Haraway, we take responsibility for these (visual) translations which are “*always interpretive, critical and partial*” (Haraway, 1988: 589) and involving multiple subjects in different positions, in order to show another perspective on the city; in this, we are following the path of many feminist cartographers (Pavlovskaya and Martin 2007; Kelly 2019).

The consistency of our cartographic research practices in the field with feminist theories and concepts was led by a sensitivity to the question of power relationships between organizers and participants as well as among participants, in order to adjust our behavior or sometimes intervene, particularly regarding speech practices: listening, yielding some control, accepting silence, introspection or refusals, and encouraging. Sometimes workshop organizers regulated speech. This also led us to experiment with different graphic and textual languages for the publication of the research results and to try by multiple means – culminating in an exhibition – to reach the target group as well as different publics (policy-makers, activists, media).

How can one integrate the perspective and experience of drug users in both the conception of drug policies and the production of an inclusive urban space? If there were to be exhaustive city planning on drug issues (as suggested by Boland et al., 2020), what role should drug users play in the planning process?

The research collective engaged in two complementary methodologies:

First, eliciting participants' stories and drawings of “*spatial practices*” (Lefebvre) in the city, using the method of mental maps as a means to express subjectivity and emotionality. Mental maps are qualitative maps drawn by participants and focusing on spatial practices and relationships to socio-spatial contexts (Lynch, 1960; Gieseeking, 2013). Mental mapping provides a window on the ways people experience spaces and places – how urban space structures their everyday lives. The way we use it, it does not attempt to objectify social and spatial conditions, but rather to capture the subjectivity and complexity of the production of space and the negotiation processes it involves (Klaus and Germes, 2019: 59). This clearly differentiates the approach from quantitative (drug) crime mapping and its false abstractions from social relationships and processes (Belina, 2009). Building on mental mapping and emotions, Klaus and Germes forged a method called “Emotional Mapping”. The aim is to let participants speak about their lives and express emotions related to places and circumstances, allowing us to understand where structural problems arise.

Second, eliciting imagined future and alternative city planning, i.e. “*representational spaces*” (Lefebvre), using participatory mapping workshops (as distinct from geoweb-based participatory mapping processes; cf. Palsky 2013). Such workshops allow local communities or communities of peers to discuss problems encountered in everyday life, to analyze their causes and to work together on alternatives, solutions, political demands or self-organized planning processes. The collective production of a visualization of the common space is a mediation method for debates, analyses and political organization (Barella, 2020). Building on this, Guarascio, Germes and Klaus forged a particular methodology called “Ideal City Mapping”. The aim in this second phase is to place groups of marginalized drug users in the position of the city planner in order to formulate proposals, demands and a coherent but alternative approach to urban planning and the organization of society.

Both methods allow us to give a voice to marginalized drug consumers, to consider this marked, othered and stigmatized position in terms of how they inhabit the city and imagine an ideal city, and thus to co-produce a situated knowledge. These methods structure the relationship between researchers and participants, in organizing intimate, interpersonal conversations or group discussions and reflections, and offering a material and visual mediation within the context of the almost unavoidable symbolic violence of fieldwork interactions.

## 2 - Emotional Mapping: Lived spaces of marginalized drug users

What does the city and its neighborhoods look like from a marginalized perspective? What kind of places are important for, accessible to and appropriated by drug users? Often considered as a threat themselves, how do they feel in urban landscapes? The research began with these questions and with the need to establish a common methodology with similar rules for different interviewers in diverse German and French cities. In order to focus on the situated knowledge and emotions of marginalized drug users, the authors developed the methodology of Emotional Mapping in an attempt to find a suitable means of understanding their *spatial practices*, as well as the emotions they attach to space – their lived space. Once the methodology was established, this individual and intimate interview method was implemented in different German cities and one French city by several interviewers.

### 2.1 Mapping emotional geographies

An important goal is to reach beyond the dominant discourses around the “feeling of insecurity” and “fear” (Shirlow and Pain, 2003; Jayne et al., 2010) and to open up to the diversity of emotions associated with everyday urban life. The method of Emotional Mapping highlights the spatial subjectivity of interviewees and allows an understanding of their lived space and its complexity.

#### The construction of emotions and spaces

Research involving emotions questions the repertoire of social-scientific research methods and calls for experimental methods to find new and manifold methodological approaches (Schurr and Stüver, 2016: 88). Recently there has been growing interest in the role of emotions, especially the role of pleasure within the context of drug use (Bouhnik, 2002; Duncan et al., 2019; Rhodes et al. 2007). Emotions are increasingly recognized as an important factor influencing how and why people do drugs. Emotions are not immanent; they are social and political constructs, experienced individually but embedded in a higher level of power structures which politicize the emotional experience of spaces (Guinard and Tratnjek, 2016). In this sense, emotions also express relationships between subjects and places or spaces. Sarah Ahmed stresses that “*emotions are not simply “within” or “without” but that they create the very effect of the surfaces or boundaries of bodies and worlds*” (Ahmed, 2004: 117).

Emotions are lenses that allow us to understand how power relationships, along with hierarchizations, are embodied: through recognition of sameness and rejection of otherness, as well as through institutional violence. In a word: they are political. How someone feels is never an individual, immanent fact: it is always in relationship to others, situating interpersonal interaction in the broader frame of social positions. In this sense, research involving emotion is a medium through which to consider embodied subjectivity within the social context of existence. Emotions qualify interpersonal encounters; indeed, they qualify spaces and places. They are not merely volatile expressions of fugitive moments – connections between places, events and emotions and their associated memories draw complex emotional geographies in space. Thus, the interviewer asks the participants about their emotions regarding the spaces of their everyday lives, encouraging them to express negative and positive feelings, and thereby reinforcing their position as sensitive subjects. As Ahmed (2004) argues, we understand the emotions of marginalized drug users as a collective, political and non-private matter. In the context of marginalized groups seeking support programs, the emotion-based approach makes it possible to render the ambiguity of many experiences, showing mixed feelings relating to the same time and place.

### **Emotional Mapping**

Counter-mapping practices are particularly suitable for mapping sensibility and emotions (Mekdjian and Olmedo 2016). In order to understand how drug users' emotions are connected to specific contexts, practices and settings (Jayne et al, 2010: 540) and allow them to draw the city they live in, the authors elaborated a method involving a spectrum of diverse emotions in order to visualize the feelings of marginalized drug users in relation to drug practices, policies and spaces. Its trilingual legend (in French, German and English) of chosen emotions takes the form of a color wheel (see Fig. 2). Each color in this wheel stands for an emotion such as relaxation (green), happiness and pleasure (yellow), bliss and desire (orange), worry and insecurity (blue), disgust (purple) and hostility and aggression (red). The colors are arranged on a continuous wheel to allow for shades of better and worse, as well as greater or lesser intensity. Using colors to represent feelings helps the interviewees to talk about experiences of exclusion, criminalization or othering. The mapping of individual emotions expresses a situated, partial and embodied experience of the city from a largely ignored perspective. The resulting maps therefore represent not only *spatial practices* but also lived spaces.

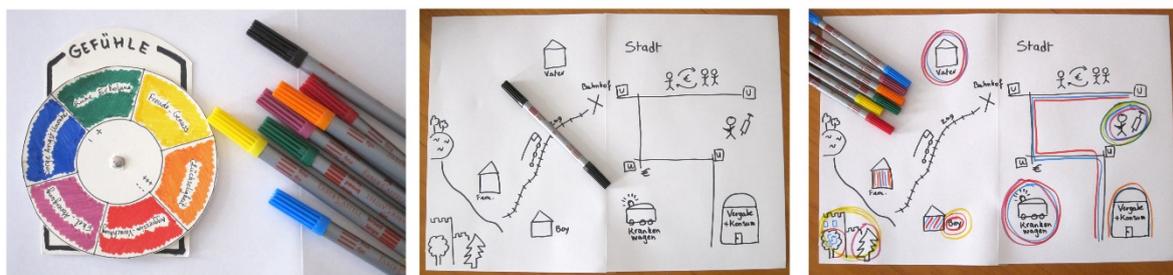


Figure 2: Emotional Mapping: legend and drawing process in German (Photo: Germes, Berlin, 2019)

Interviewers encouraged the participants to engage in mapping, answering their questions, giving them reassurance and also the creative space of a blank page with no toponyms or signs. There is no right or wrong way of mapping: every person will appropriate the mapping process in a unique, valid and meaningful way.

In this research into criminalized practices, the anonymity of the participants is fundamental. Interviews were pseudonymized from the very beginning of the interaction. Neither interview transcripts nor emotional maps were published in their entirety, since they hold a certain amount of personal information even if the name of the person does not appear. Textual and visual quotations from the transcripts and maps were deemed sufficient (see 2.3).

## 2.2 Interview experiences: drawing and appropriating spaces

This section presents our experiences of Emotional Mapping interviews conducted in different drug support facilities in German and French cities (see Tab. 1). Either the staff or we ourselves asked clients of these institutions if they wanted to participate in an interview. The introduction routine included an explanation of the possibility of drawing a map of their individual everyday life with our help, plus a guarantee that interviewers were not part of a drug support facility and that no information would be shared with the staff of the facility. It was therefore fundamental to conduct the interviews in a private room without risk of overhearing or disturbance. The supportive facilities provided us with special rooms, as well as coffee and any necessary assistance. The participants in the mapping interviews were heterogeneous in terms of age, gender, housing conditions, biography of drug use and so on.

Table 1: Conducted mapping interviews<sup>5</sup>

City	Support institution	Participants	Gender ratio M/F	Non-native speakers
<b>Berlin</b>	Druckausgleich (Fixpunkt gGmbH)	14	11/3	3
<b>Bordeaux</b>	La Case (Médecins du Monde)	9	7/2	1
<b>Frankfurt</b>	La Strada (AIDS-Hilfe Frankfurt e.V) Drogennotdienst Elbestraße	10	7/3	0
<b>Nuremberg</b>	Mudra e.V.	7	4/3	1
<b>Munich</b>	Prop e.V., Drogennotdienst L43	12	8/4	2

### **The Emotional Mapping process: appropriation of the map**

The participants were asked about the spaces of their everyday lives. Step by step, interviewers talked about practices and routines which form the everyday lives of people from open drug scenes. While talking, the participants drew their everyday spaces on a blank page. The participants held the pencils and paper in their own hands, enabling them to appropriate the map by choosing ways of drawing. In the second part of the mapping process, the interviewees were asked about their emotions in relation to places and invited to color their map according to the legend. This part deepens our understanding of the urban experience from a marginalized and vulnerable position. The coloring process offers a means of attributing meaning to the lived spaces and situating oneself within them.

The results analysis showed the different ways in which the participants chose (or not) to draw: lists of toponyms, whole scenes, lines representing mobility or just a few strokes. This method allows a wide diversity of appropriations of the map, of engagement (or otherwise) in the mapping/speaking process, and of forms of expression. The reluctance to draw places and emotions is illustrated by Figure 3a: this interviewee used all the pencils at once to draw a rainbow circle. By contrast, 3b shows a playful drawing of a happy home, with warm colors and a cat. Some people began to dive deep into the visualization of their everyday lives while

<sup>5</sup> Interviews were conducted by Anna Dichtl and Daniela Jamin in Frankfurt, Luise Klaus and Jennifer Martens in Nuremberg and Munich, Mélina Germes in Berlin with the support of Francesca Guarascio and Christian Herrgesell, and Roxane Scavo in Bordeaux.

others refused to localize different topics, such as public places of drug use; one participant for example, when asked to put the prison they talked about on the map, answered: “No, I’d rather not”.

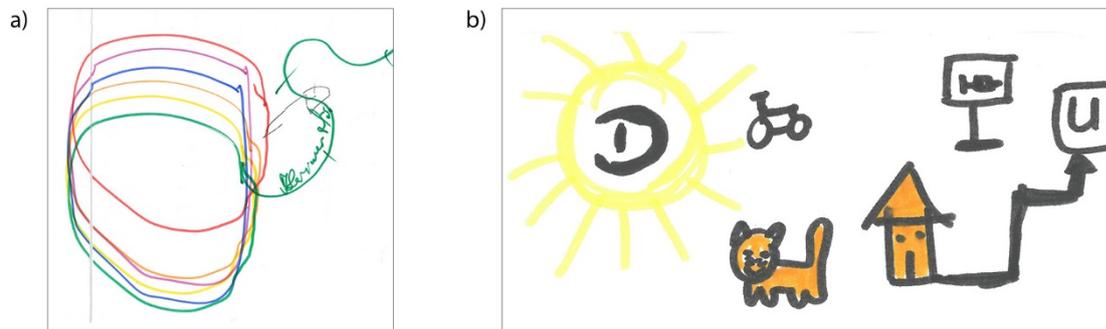


Figure 3: The diversity of emotional maps: from non-representational (a) to carefully detailed (b) (Sources: Interviews by Germes and Klaus 2019)

The process of mapping from a blank page empowers the interviewee by setting them up as the expert of their own map, which they can visualize according to their individual representations, choices and ways of drawing, thereby enhancing their own position.

### 2.3 The emotional city of marginalized drug users

The approach of Emotional Mapping offers an alternative practice of mapping and interviewing. Nevertheless, any interview situation entails some exposure to symbolic violence. There was also a certain risk of re-traumatization for this public. Simple questions can lead to background stories of trauma or cravings for substances. The mapping process involved objects – the rotatable color wheel, pens and paper – as a means of mediating between researcher and interviewees. Blank minutes in the recording tapes indicate that drawing gave time for introspection and silence. These circumstances always require sensitivity and respectful management of the interview situation, and repetition of the information that it is possible to interrupt the interview or to ignore a question, in order to reduce symbolic violence.

The results of the Emotional Mapping interviews clearly show that marginalized drug users experience similar exclusions, discrimination and everyday struggles. Lack of safety and police controls, the daily routine of procuring money, buying and consuming drugs, moving around the city as well as meeting other drug users and hanging out in different urban places are motifs and signatures in the majority of the interviews. These issues define the urban lived spaces of the interviewees. None of the individual maps are published in their entirety for two reasons: 1/

To avoid fetishization of the individual emotional map, in order to enhance the process of mapping and visualizing the situated knowledge of the participants. 2/ To guarantee anonymity for the participants. Instead, our published papers quote from the transcripts and the maps, recognizing that maps and spoken words should not be separated since they only make sense together.

### **From individual maps to citywide collages**

How do we quote without artificially separating visual and textual information? How do we analyze the results of interviews conducted in so many different cities? How do we reproduce visual material depicting the mixed feelings and places participants spoke about? In order to solve these questions, we experimented first with collages of pictures (led by Klaus in the case of Nuremberg), then with collages of pictures and text (led by Germes in the case of Berlin). Collage is a very interesting visual method which is used in artistic contexts and counter-cultures and allows diverse readings of divergent voices and ideas. It juxtaposes visual material as a way of superposing different voices, and belongs to the same repertoire of crafting techniques and aesthetics as mental maps. Based on the experiment, we established a common legend and a common theme, in order to produce one collage for each city. We decided to work with two grey tones: light for the background map and dark for each theme. The smaller pieces of white paper denote the citations (serving as a visual quotation mark). First, we established the topography of each city from the toponyms cited in the interview corpus and drew it on the large sheet of light grey paper. The topography of the mapping collage thus differs according to the topography of each city: in Frankfurt, it is centered on the very small neighborhood around the main train station; in Berlin, it covers a neighborhood of several kilometers structured by subway stations. In a second step, we found visual and textual quotes for each of the 10 or so most important issues for marginalized drug users that we identified and pasted them on what we call a “theme island” on dark grey paper. Following these shared principles, the researchers created collages for each city in order to illustrate a collective situated objectivity representing the collective experiences, similar and divergent, of marginalized drug users in one city (see supplementary material (SM) pp.2-4).

The result of our analysis of the transcripts and mappings highlighted the following issues (SM, p.4-6): precarious or uncertain housing situations (looking for shelters, sometimes building their “own home” from scratch in a hidden place or living on the margins of the city, cf. Fig.3); drug use in urban places, meaning time pressure and anxiety for the users, experiences of aggression

and awareness of risk-taking (Dovey et al., 2020); finding support (at a drug help facility); lack of safety (encountering the police or stays in prison); procurement of money; having access to healthcare; relationships with family members; and mobility. The scope and content of the theme islands inevitably varies between the cities.

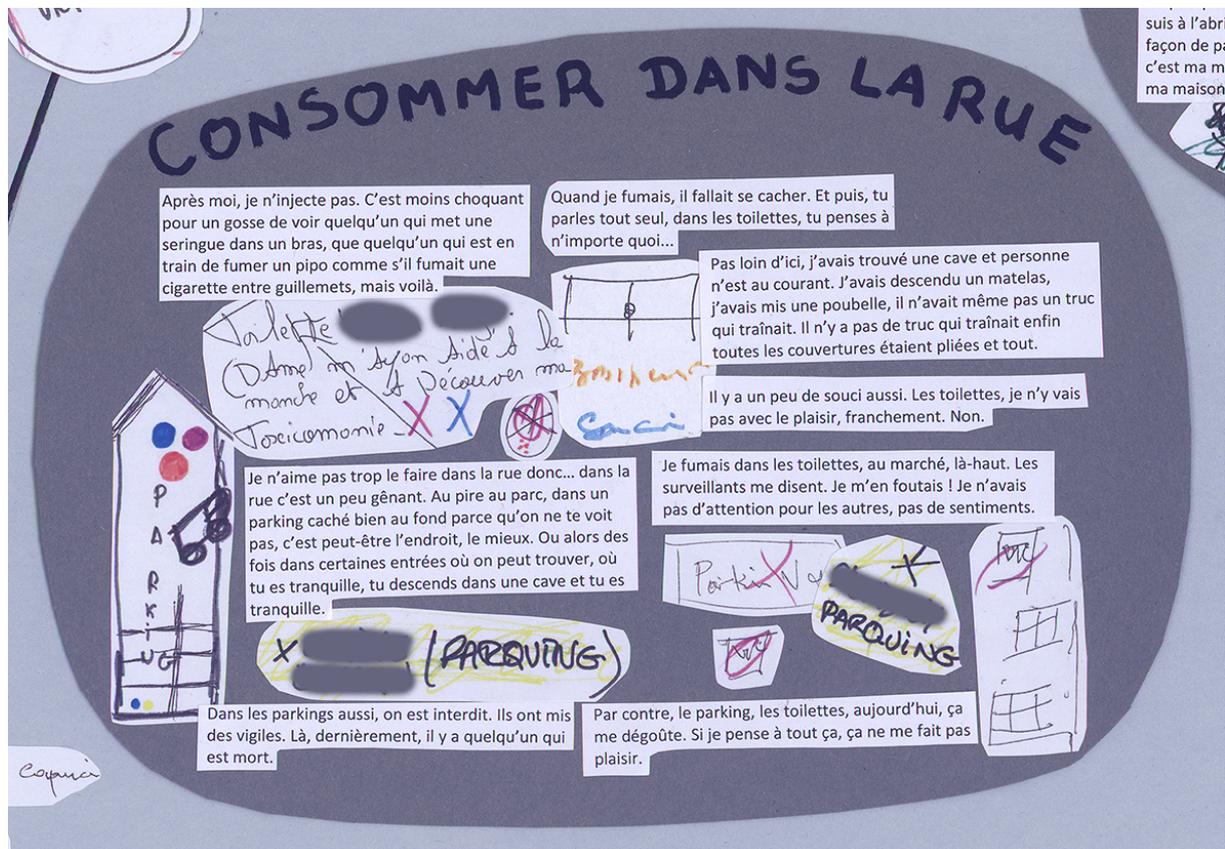


Figure 3: Public drug use in Bordeaux (interviews and collage by Scavo)

After the series of Emotional Mapping interviews – which, despite the variety of places and emotions they documented, essentially showed how much local drug and urban policies shape the lived space of marginalized consumers and how support systems sometimes foster precarity – it was clear that we could not stop the research there as planned. Some of us gathered to think about the possibility of using other (carto)graphic methods in order to highlight the perspective of marginalized drug users in terms of dreams, hopes, expectations and demands. Present emotions did not give participants enough scope to explore and explain their issues; stopping there was cutting short subjectivities and omitting a significant dimension. The shift towards the future and ideals, the search for another kind of knowledge based on the notion that participants are experts on their own lives, therefore emerged as a necessary complement.

### 3 - Planning an ideal city as drug users

What would an ideal city look like from the very particular perspective of marginalized drug users? What kind of research design allows the emergence of ideas, their discussion and the outline of another vision for the future of cities? In this phase, we were seeking the *representational spaces* of marginalized drug users. We turned to participatory mapping workshops, with the aim of putting participants in the position of the city planner – the person bending over the map of the city, looking down on the picture from above and designing the necessary infrastructures, landscapes and mobilities. In order to show that marginalized people are political subjects, capable of envisioning and designing spaces for themselves, we elaborated a method called “Ideal City Mapping” based on Lefebvre's “Right to the City”.

### **3.1 Participatory counter-mapping and Right to the City**

Modernizing readings of Lefebvre, such as that of David Harvey, renews the concept of “Right to the City” (Lefebvre, 1967): Since (neo)liberalism spatializes inequalities and exploitation, the claim to and fight for social justice has to be a spatial one, focusing on the right to housing, mobility, public ownership and communities (Harvey, 2011). Claiming a Right to a City is made possible by both the empowerment of *representational spaces* and the power to imagine possible worlds of social justice in the very same place. The aim in our case was to listen to the unheard claims of marginalized drug users.

By using the concept of Right to the City, the research identified with a tradition of activism and academic research, and explicitly formulated a shared normativity. Organizers endorsed this normativity during the workshop in different ways: in the title of the workshop, “What is your Ideal City?”; in the introduction to each session via discussion cards including “City for all”, “Self-determination”, “Own space”, “Equality”, “Access”, “Decriminalization” and “Tolerance”; and through the invitation to think about “the most vulnerable among you” and “what’s best for all”. Moderators encouraged the participants to think about what they wanted; not to worry about feasibility or funding possibilities, but to think of ideal places in the cities where they already live. In this sense, the ideal city needs neither be a blank-page utopia, nor a realistic set of ready-made policies.

Following on from the results of the Emotional Mapping as well as the “Right to the City” approach, organizers chose to focus on the five themes of housing, mobility, health, safety and drug use, since they had emerged as areas of institutional and interpersonal discrimination and exclusion, forming a nexus of precarity. It was therefore crucial to find a workshop format in which participants could express their views and imagine a whole new city.

## An ad-hoc participatory mapping concept

Participatory mapping refers to a variety of cartographic practices. Participatory research aims to integrate participants into the research itself, often relying on an existing community (a neighborhood, an indigenous community, a social movement, etc.) and involving non-researchers in collective discussions and research processes. It appears an ideal way of amassing collective situated knowledge, leading to a collective situated approach to city planning.

Our understanding of participatory mapping is one of collective critical mapping (kollektiv orangotango+, 2018) rooted in critical cartography. It emphasizes the importance of collectively producing a map, visualizing a common space and sharing a worldview of the past, present or future (Sletto, 2009), creating new visualities as a language among those whose perspectives are usually absent, and who are not trained cartographers. It entails much reflection on the part of the initiators regarding their role as moderators and mediators: all their decisions are critical to the results (Kim, 2015: 216-217). While more and more participatory mapping relies on digital web 2.0 participation, it also comprises classic, low-threshold pen and paper mapping.

Organizers printed huge base maps (119x84 cm) of sections of urban space, large enough to depict a certain level of detail and to allow the participants to gather around it. The base maps defined the spatial limits of the mapping: one focused on a neighborhood or just a DCR, while another represented the city as a whole. Simple materials including plain and colored notes, different kinds of pencils and glue allowed the participants to put themselves in the shoes of the city planner, thus re-affirming their right to belong in these places.

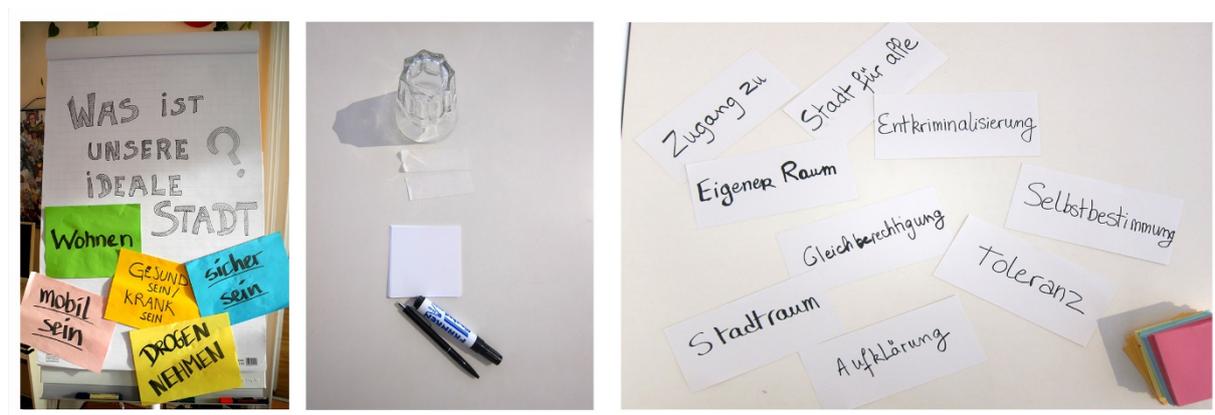


Figure 5: Preparation of the workshop: warm and welcoming place (Source: Guarascio, Klaus, Germes, 2019)

To ensure anonymity, pictures and recordings from the workshop are kept secure, and the results of the workshop are strictly anonymous. With the enthusiastic consent of some participants, a few group photographs taken at the end of the workshop were pinned up in the Berlin partner facilities as a souvenir.

## **3.2 Workshop experiences**

The aim of the workshops was to produce an alternative plan of an ideal city conducive to the needs, recognition, empowerment and equal treatment of drug users. Concrete ideas on how to change existing places, policies, institutional practices and living conditions were to be gathered and represented. Three workshops were held in Berlin and Frankfurt. Workshops took the form of 2-hour sessions, each one dedicated to a particular theme (Fig 5). During the first hour, we held an open discussion on the topic of the day, considering the issues and talking as a group. We then collected concrete proposals for the ideal city. During the second hour, after a short break, participants visualized these proposals by drawing a motif on a colored note. Then each participant located their proposals on the base maps. To conclude, everyone explained their proposals and their chosen locations. By the end of all the workshop sessions, we had gathered maps depicting a complex alternative urban planning scheme for Berlin and Frankfurt, reaching way beyond the everyday lives of drug users and connecting with many urban issues.

### **The organizers' influence on the participants and the workshop**

In this case, the participants reflected the huge differences between the usual, theoretical subjects of "Right to the City" concepts and counter-mapping workshops. This has diverse implications. Firstly, it was the organizers' own desire for knowledge and social justice that led to the creation and design of participatory counter-mapping workshops, and not an initiative of the participants. Secondly, the targeted social group is highly unorganized – in contrast to the well-organized working class of the 1970s described by Lefebvre (2009) – and more marginalized than the social and urban movements described by Harvey (2011): their most acute daily challenge is one of safety and subsistence, with participants reporting distrust of peers. Thirdly, the participants had no common political viewpoint or identity prior to the workshops. The research featured neither local communities nor social movements<sup>6</sup>, which are

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<sup>6</sup>That said, there are some collectives or organizations which existed in the past or still engage in the interests and needs of drug users, like the German "JES-Verbund (Junkies, Ehemalige, Substituierte)" (national network of junkies, former drug users and people in opiate substitution treatment) or the "Junkfurter-Ballergazette", a local zine from the 90s edited by drug users in Frankfurt a.M..

often the starting points for participatory actions. On the contrary, most of the interviewees reported a sense of isolation, of being left to fend for themselves.

The differences among participants described above had significant implications for our role<sup>7</sup> as initiators, in terms of defining a group, its common interests and a normative ideal. This role was huge during the whole process, and there were many occasions where moderators could have influenced the participants, from the normative concept of the “ideal city” for the most vulnerable to the management of our own emotions in some conflictual cases. One form of passive moderator influence was when participants, used to dealing with institutions and social workers, tended to say what is socially expected of them in order to be judged positively. Active influence occurred when moderators gave examples in the first minutes of each workshop, before discussions got under way; when moderators caught themselves praising ideas that they agreed with and questioning others that shocked them; when they asked the participants to take more time to think about other suggestions because some expected issues had not emerged, or, conversely, when they moved on to the next phase thinking everything had been said.

The process and results of the workshops are thus a co-construction in which the organizers’ inputs and different characters, experiences and opinions played a role. The results we gathered are not the unmediated expression of the ideal city by an unsituated “marginalized drug user”. The situatedness of both participants and organizers need to be considered, as well as the relationships of power and influence between all persons present. Furthermore, the results of each workshop should not be essentialized as “the voice of marginalized drug users”; they are contingent, depending both on production processes and that day’s mood. Nevertheless, after three parallel workshops, we noticed notable convergences and complementarities in the results, which highlights the relevance of the process and the desires expressed.

### **The constitution of the participant groups**

The team began by organizing one workshop in August 2019 in Berlin Neukölln with the support of the DCR Druckausgleich (Fixpunkt). Organizers announced the workshop publicly the previous week, asked the partner facility to draw up a register of up to 8 or 9 participants and picked them up from its premises. There was no particular concept regarding the composition of the group as we were not certain whether the workshop would raise any interest at all. Participants could come to one or many sessions. By the end of the workshop week, men

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<sup>7</sup> Beside moderation (one or two people), the roles of the organizing team consisted of providing snacks and drinks and support, taking notes in the background and lending individual assistance in the drawing phase.

had accounted for 30 out of 31 participations<sup>8</sup>. This was not surprising, given that only 9% of the facility's clients are women. In order to avoid this gender bias, which is a trope in community mapping (Parker, 2006), Mélina Germes and Francesca Guarascio organized a second workshop in Berlin in November 2019, partnered by the women's drug support facilities FrauSuchtZukunft und Frauentreff OLGA<sup>9</sup> and using a similar registration and pick-up process. Luise Klaus also organized a third workshop in Frankfurt/Main<sup>10</sup>, where participants were recruited in the *Bahnhofsviertel* just before each of the three sessions; it was not possible to arrange a 5-day workshop due to lack of organizer availability. The team led three workshops altogether, as shown in Table 2.

Table 2: Overview of Ideal City workshops and participations

Place	Partners	Time	Topic each day	Participations*
<b>Community premises</b>			2h/day	Up to 8 or 9 persons per session
<b>Berlin Neukölln</b>	Druckausgleich	08/19	<i>5-day workshop</i> Housing, mobility, health, safety and drug use	31 participations (30 men), 24-45 yo 1 non-native speaker
<b>Berlin Kurfürstenstrasse</b>	Frauenladen OLGA Frauentreff	11/19		40 participations (all women), 25-65 yo 3 non-native speakers
<b>Frankfurt Bahnhofsviertel</b>	Recruitment on the street before each session	11/19	<i>3-day workshop</i> Housing, safety and drug use	18 participations (7 women) 20-60 yo 1 non-native speaker

\*Participants could and did come back on different days, so we counted the total number of participations.

All participants were clients of the local drug support services. Therefore, people outside this support network were not reached. In Berlin, the partner institutions assembled the group of participants and issued a register. We trusted the expertise of the social workers in the field to find likely candidates, to ask a wide variety of people, and to manage the attendance list, which was limited to 8 or 9 people per session. Partner institutions consequently played a huge role, informing and motivating – but also selecting – participants. In Frankfurt, participants were approached on the street in the *Bahnhofsviertel* as well as within and in front of local drug support venues.

Aside from the gender gap in the first workshop, the participants were diverse (see above), so that very different subject positions were represented. During the workshop in Berlin-Kurfürstenstrasse, most participants claimed to be regular or occasional sex workers. During

<sup>8</sup> Workshop created and led by Francesca Guarascio, Mélina Germes, Luise Klaus und Christian Herrgesell.

<sup>9</sup> Workshop led by Mélina Germes, Francesca Guarascio and Jenny Künkel.

<sup>10</sup> Workshop led by Luise Klaus, Daniela Jamin, Anna Dichtl and Aaron Zielinski.

this workshop, because there were too many participants, a social worker asked two trans non-white non-German sex workers to leave. This discrimination was later explained with reference to their trauma at school, their poor German and their mental health diagnosis. The organizers didn't allow the exclusion, since they already knew these two individuals from a previous session. This also illustrates the impact on this research design of social workers whose prejudice can dramatically influence the outcomes of the participatory setting (Coupland Maher 2005). It showed us that workshops reserved for trans\* and queer persons, as well as for nonnative speakers, would be necessary. The results of these workshops therefore show signs of situated knowledge and partial objectivity, which need to be complemented with other drug users' positions.

### **The discussions and their moderation**

Participants showed great interest and engaged with a high degree of motivation and creativity in the discussion and drawing processes. Their proposals address a wide range of areas and actors: lawmakers, politicians, public institutions and their employees, neighborhoods and the drug scene itself. Many appealed to fellow drug users to show more responsibility toward their own scene. This emphasis is explained by attempts to identify personally with "good practices" in the rather institutional context of the workshop.

Most of the time, group cohesion was good and the moderation of the workshop ensured that even quiet characters were given the opportunity for verbal participation. Two or three dominant participants would regularly monopolize speech in a dialogue, seldom leaving room for other voices and raising the necessity of more moderation. When emotional questions arose participants could become competitive in terms of taking the floor or imposing their views. In order to allow everyone to be heard and to structure conflicts, an object was used as a talking stick, making clear who was speaking and who had to listen at that moment. Unstructured discussions alternated with going round the table. Conversely, during the workshop in Berlin-Kurfürstenstrasse the theme of sexual violence was brought up late, slowly and with a lot of caution by a participant, after which it appeared that many participants had an experience to share: the tone then shifted through more anger to resolution. Moderation was a sensitive task, requiring the harmonious involvement of at least two moderators. The moderation may not have been as unsituated, omniscient and patient as one could have wished.

Participants expressed their disagreement or opposition on a few matters, reflecting the heterogeneity of their backgrounds and circumstances. When some called for unconditional

universal access to healthcare or to public transportation during the first workshop, others strongly disagreed, arguing that existing measures were largely sufficient. At times, some participants showed an understanding of the ideal city based on individual wishes instead of structural changes. On several different occasions, some participants expressed discriminatory opinions regarding for example "the foreign sex workers, the new ones" (Berlin-Kurfürstenstrasse). Statements such as the improper generalization of participants' individual experiences can be explained by the structural racism, sexism and classism surrounding us; their occurrence within the workshop was predictable. On other matters, different political opinions, coming from different social positions, were expressed, with some daring to call for more (e.g. a city without cars), while others proposed minor changes (e.g. only a small reduction in the cost of public transportation). Given short time and limited energy, it was clear right from the start that, despite our goal of working toward a common picture of an ideal city for all, it would be impossible for the larger groups to agree on a single idea for each issue.

### **Making a map: drawing and localizing**



*Figure 6: Mapping of an ideal city (source: Guarascio, Klaus, Germes, 2019)*

After the initial discussion stage, a symbol was drawn for each idea. The design of the symbols created by the participants used some classical icons such as § for laws, along with stick figures for people and house outlines, and this repertoire was enhanced with the participants' own drawing skills. The discussion continued during the drawing phase, in small groups or all together, once again sharing personal experiences and opinions. The last task was the localization of the drawn symbols on the large base maps. Localization was at times difficult: since spatial equality was very important for the participants, they were sometimes reluctant to localize ideas (“*[it] should apply everywhere*”, “*all Berlin and beyond*”). The localization of symbols was discussed informally (in Berlin) or collectively (in the smaller groups in Frankfurt). The moderators encouraged participants to choose one or many meaningful localizations for their ideas, to think about where the decision is taken, where the practices are

designed – e.g. “police violence” does not occur just anywhere: it is directed at a particular institution, located in definable places. Nevertheless, this last step was sometimes difficult for the participants, given that they had worked with deep concentration for the previous hour and a half.

### **3.3 Re-drawing an ideal city**

At the end of each workshop, there was a lot of material: huge maps with lots of small notes stuck to them, minutes and recordings of the discussions. The first post-workshop process performed by Francesca Guarascio and Luise Klaus was the digitalization of the colored notes along with their symbols and meanings. The main results of the workshops – from approx. 200 symbols drawn during the sessions – were as follows. Comparison and analysis of the results of the three collective mapping processes led us to conclude that three issues stood out as major concerns throughout the sessions (SM, p.7). First, there was a need for new places and landscapes in the city: emergency shelters, secure private housing, places for meeting and spending time together, a tighter infrastructural net for consumption, material needs, substitution therapy and care reaching to the margins of the cities, and places for women only. Second, effective addiction awareness campaigns for everyone, from children to medical personnel and from police to neighbors, could be a good way to fight prejudice and achieve fair treatment, in addition to protection against violence, sexual harassment and assault. Third, dramatic changes in legislation (such as decriminalization of drug use and unticketed use of public transportation) and in regulations (such as ending the rule of abstinence as a condition for accessing help or support) would be a basis for equal treatment.

#### **Drawing and re-drawing the maps**

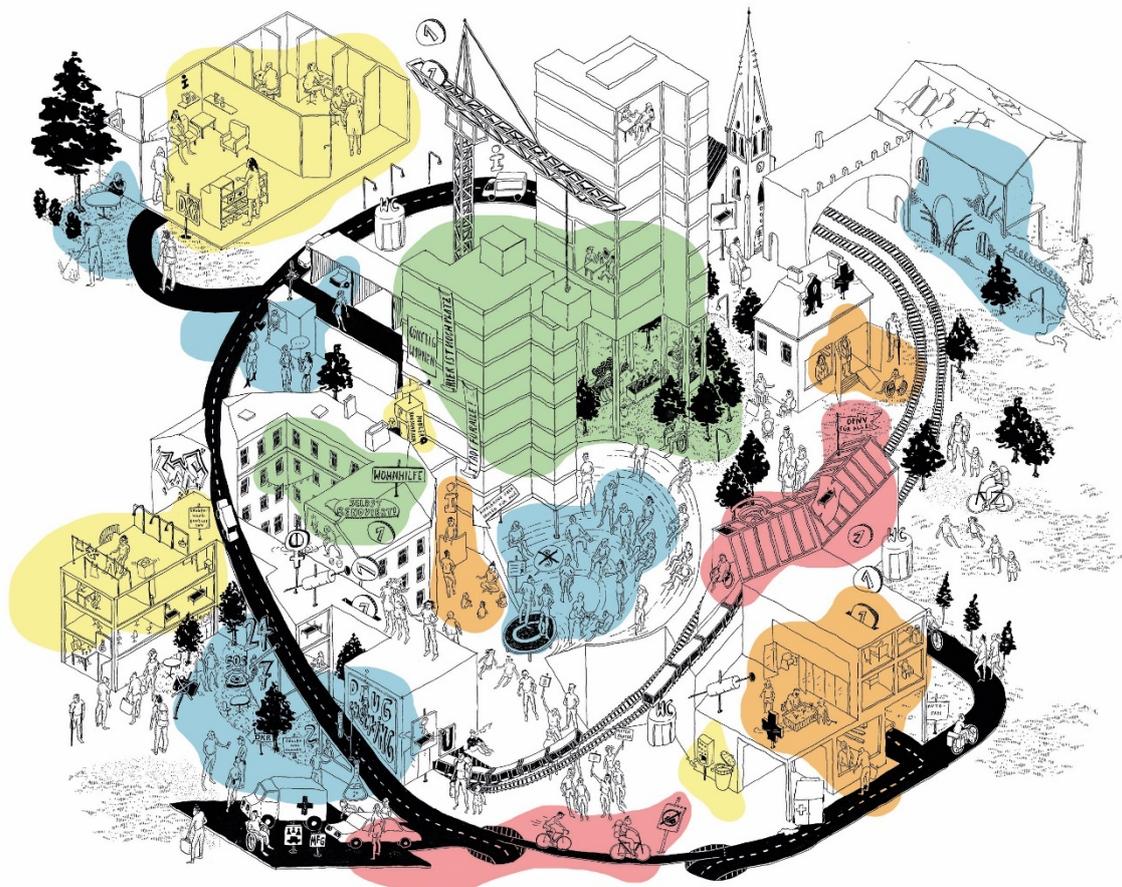
The next step was the production of the reports for our partners and participants by combining text and maps (Germes et al., 2020b; Klaus et al., 2020). The text was written with the aid of notes taken during the workshops and audio recordings of the discussions. Francesca Guarascio and Luise Klaus placed the symbols on digital base maps according to their original position. We then simplified these results, identifying identical ideas and grouping them under a single symbol and formulation. The [supplementary material \(p.8\)](#) gives an overview of these first results for both cities – for the exhaustive maps, their legends and further explanations, please refer to the original reports (cited above).

From November 2019 onward, the preliminary results of the Berlin-Neukölln workshop, such as the digitalized maps (next to the second draft of a collage) were exhibited at the DCR Druckausgleich (SM, p.9). Several discussions with users and social workers showed that the maps were difficult to read and understand. The visualization, similarly to the immediate outcomes of the workshops, mixed two divergent aesthetics: the base map with the classical representation of a city from above and the unusual hand-drawn symbols of non-professionals. Further, the loose relationships between the individual symbol drawings and the abstract ideas behind them require the viewer to look back and forth between legend and map. Reflecting on this, we now also think that the base maps' top view of urban space should not have been the only graphic support for the workshops. In Frankfurt, participants asked for the creation of a third base map featuring the plan of a DCR. This shows that the perspective of users in the city is grounded in places such as "train station", "doctor's office", "injection room", "hospital", "police station", etc., and not in an overview of the city – even if these base map overviews allowed the participants to think about places far away from their everyday lives.

During spring and summer 2020, Germes, Guarascio and Klaus worked with designers in order to organize an exhibition of our main results in two window displays of community venues located within the studied neighborhoods in Berlin and Frankfurt, as well as an online exhibition (Germes et al., 2020a)<sup>11</sup>. This time the cartographical approach was modified. In order to present a synthesized drawing of workshop results for both cities, we abandoned the top view of the city as a whole – in other words, we moved away from the classical aesthetics and semiology of map making, following the aesthetics of participants' drawings in order to enhance their place-orientated approach to a messy city (Fig. 8), and using the same colors for the themes as during the workshops: green for housing, blue for safety, orange for health, pink for transportation and yellow for drug consumption. We developed a concept uniting the results of the three workshops, grouping them into places – a DCR, a residential neighborhood, at the doctor's, etc. – before submitting a concept to the designers and illustrators of the exhibition. We then reviewed the first draft from the illustrator at a meeting with former participants and social workers, improved it and removed some misunderstandings. The preparation of the exhibition meant simplifying texts and graphics, making choices from among the huge array of results, and shortening and strengthening content.

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<sup>11</sup> The exhaustive results of the research will be available in English from October 2021 via the following link: [narcotic-archive.org](https://narcotic-archive.org)



*Figure 8: An ideal city for marginalized drug consumers? (Conception: Germes et al.; Design: Studio 8/4, Berlin 2020)*

Around the exhibition, open-air and video events were organized to foster the interest of the target audience, namely drug policy actors and structures as well as a broader activist public, this last group being the most in attendance. The exhibition and related events undoubtedly aroused broad interest, but we were told by some that the phrasing remained too complex – even if the various pictures were attractive and understandable and did reflect the experiences and perspectives of many of those involved.

## Conclusion

The inclusion of inhabitants in urban policy design is an issue that has been discussed in social sciences for decades. There is also a growing awareness of the need to include drug use as a valid issue in city planning – as Boland puts it: “planning *for* drugs” (2020). This article focuses on the voices of marginalized drug users, underlining the necessity of working and planning *with* drug users. The making of urban drug policies may include a variety of local actors in France and Germany, but it still ignores the perspectives and analyses of marginalized groups who should be entitled to participate (de Souza, 2006). Their stories and analysis of everyday challenges and political situations – plus their own ideas for city planning – demonstrate this. Where users are usually objectified, feminist epistemology following Haraway allows drug users to be considered as collective subjects producing a situated knowledge. Through both mapping methods, drug users became co-authors of their own and collective visualizations of both the city they live in and the city they would like to live in. Making maps is a powerful gesture of appropriation of space, of self-assertion as legitimate political subjects. This was confirmed by the participants’ desire to author education campaigns (Berlin-Neukölln workshop) and lead guided tours of exhibitions to come (Frankfurt workshop). Not all, but a significant number of participants expressed their thanks at the end. After having participated almost every day in a workshop, some even hugged us warmly.

The two complementary methods employed allow for the co-creation of original visualizations, which make these marginalized perspectives and analyses visible and tangible for a broader public. The traditional framing of drug use in urban places as a “public space” issue is made obsolete. Counter-cartography methods appear fruitful when adapted to the situation of high marginalization and they remain coherent and complementary with feminist and Lefebvrian approaches: It is possible to integrate the perspective, situated knowledge and experience of drug users in the process of conception, development and organization of drug support as well as in the production of urban space. At the same time, no one is free *per se* from influence over (marginalized) participants.

The results show that the lack of accessible places in the city and the lack of recognition and basic services for drug users, as well as their lack of political presence, are the root problem. The aim in publishing the final visualizations in various contexts (online and as exhibitions) is to claim belonging, to assert legitimacy and to take a first step towards transforming our cities.

One output of this project is a large amount of visual and textual documents, whereby we must still guard against the danger of a map fetish. The visibility of the mappings resulted from a co-creation involving different actors: the researchers, who established the principles of each interaction method; the participants, who did the drawing; the researchers again, when we analyzed the results and had to impose order and make choices in order for them to be comprehensible to third parties; and the designers and graphic artists involved in the conception of the exhibition, thereby influencing the presentation of those results. These maps make no claim to exhaustiveness and objective data, or to the “essential” representation of marginalized experiences. Contingencies in the production process should not be forgotten, nor should the positioning of most participants as native speakers with a local nationality. As is often the case with counter-mapping projects initiated within academia, the key question concerns the future of the experiment. Particularly when the community is marginalized and when the initiators are not part of it (Choplin and Lozivit, 2019), once the funding ends, everything ends. Yet “*it is not enough to just put a map ‘out there’*” (Kim, 2015: 216) and that is why we also gave a lot of thought to what would happen after the fieldwork and mapping. Reports, papers, articles and events such as a travelling and online exhibition aim to trigger public discussions with various actors. Even if the outcomes for participants were mostly temporary, we still heard positive feedback from two of them a year after our research. This set of methodologies also aroused wider interest within the academic and institutional communities. While Emotional Mapping is being adopted and enhanced by a working group of early-career researchers based in Frankfurt, we attempted an experimental method transfer to drug policy actors in Nuremberg and Bordeaux, and were approached by an association supporting refugees in Bordeaux. The initial experiments showed how sensitive these methodologies are: maybe more than the methodology described above, the way researchers behave and interact with the participants matters, as always, as does the discipline of listening and accepting beyond one's own values and judgment.

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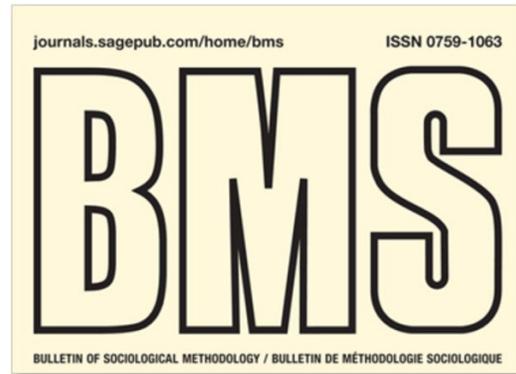
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Illustration template

**Supplementary material to:**

**WHEN MARGINALIZED  
SUBJECTS MAP THEIR CITY**  
Counter-cartographic planning experiments  
with drug users in some German and French  
Neighborhoods



**Mélina Germes**  
CNRS PASSAGES, France

**Luise Klaus**  
University of Frankfurt, Germany

**Matériel supplémentaire**

Ces pages constituent les illustrations citées dans le texte de **Mélina Germes** et **Luise Klaus** (BMS XX, 202W, DOI : YYYYYY). Il est mis gracieusement à disposition par l'éditeur.

**Supplementary material**

These pages contain the figures from the article by **Mélina Germes & Luise Klaus**, published in BMS XX (202W), DOI: YYYYYYY. Access is provided free of charge by the publisher.

**Part one : Emotional Mapping Collages, pp.2-6**

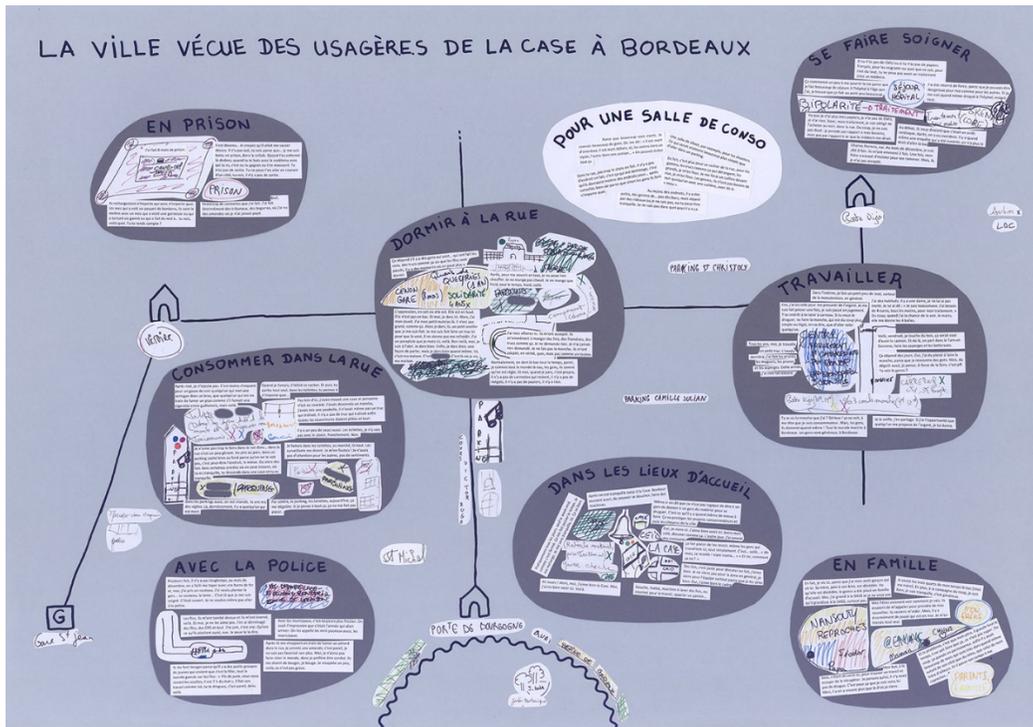
**Part two: Ideal City Workshops and Maps, pp.7-9**

*For more documents, see the online exhibition in German:*

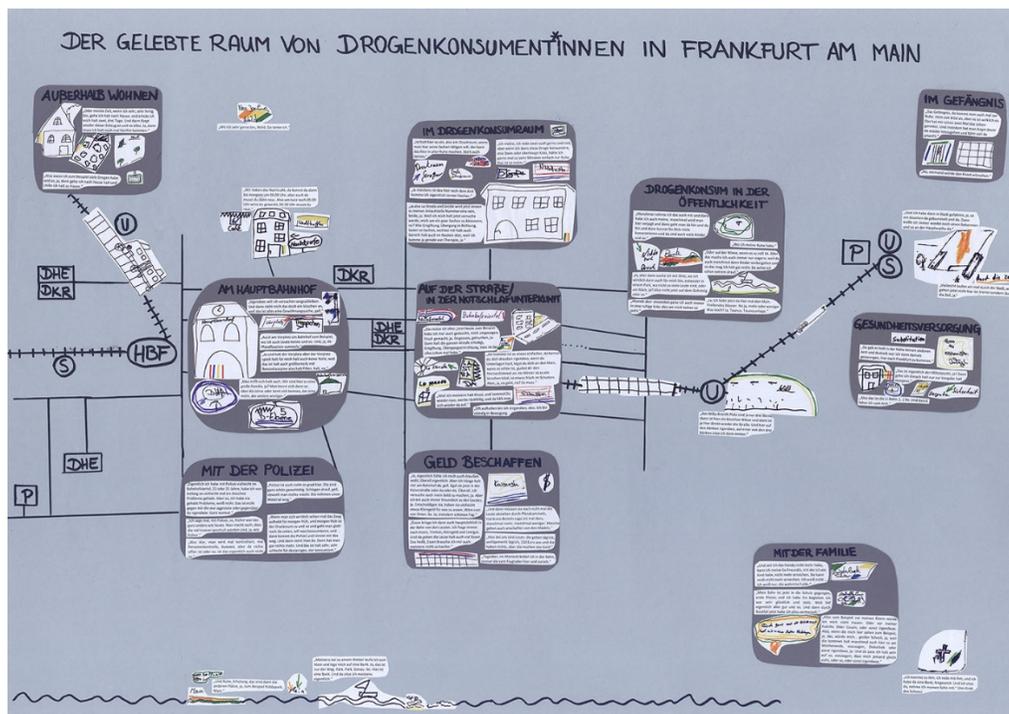
<https://drogenalternativeplanung.wordpress.com/>

# Part One: Emotional Mapping Collages

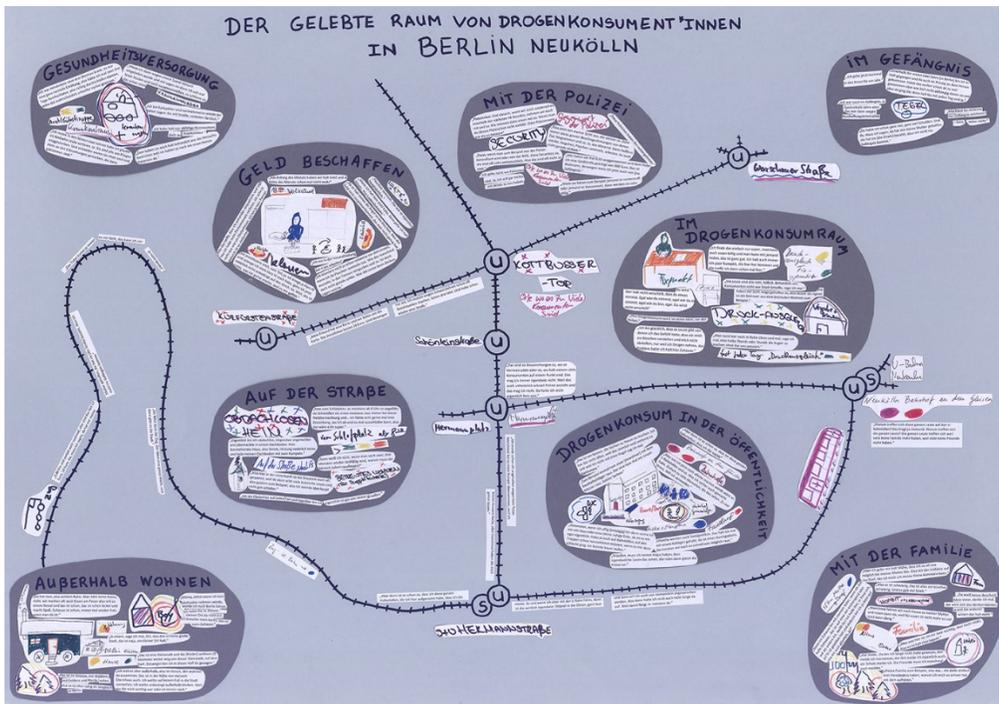
## FIVE CITIES, FIVE COLLAGES



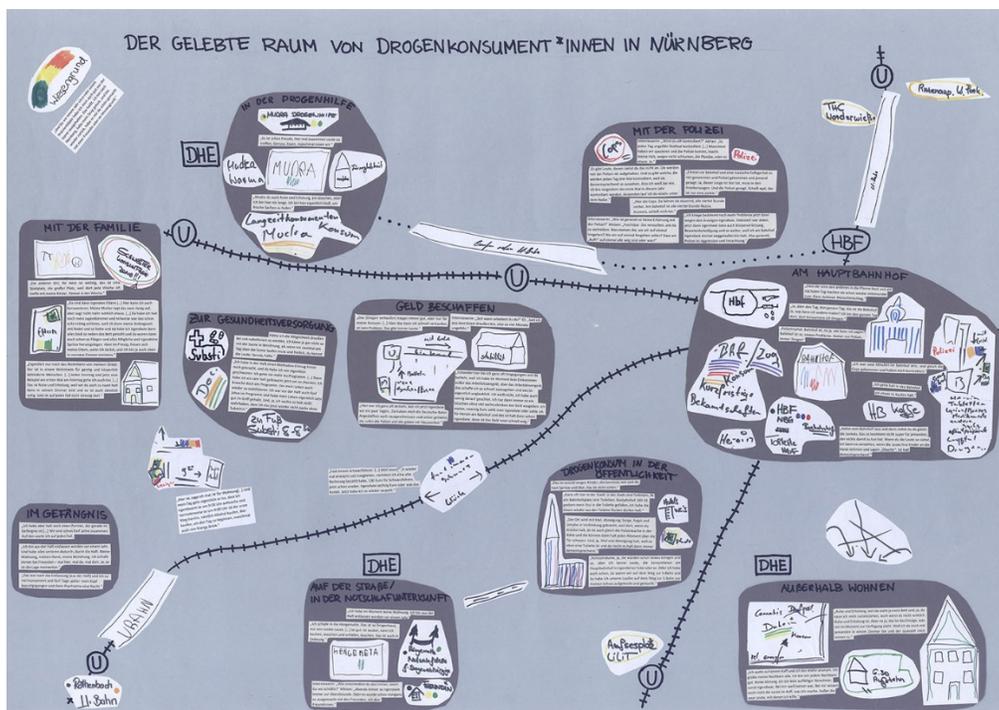
*The lived city of the clients of LA CASE in Bordeaux  
(Interviews and collage: Roxane Scavo, 2019-20)*



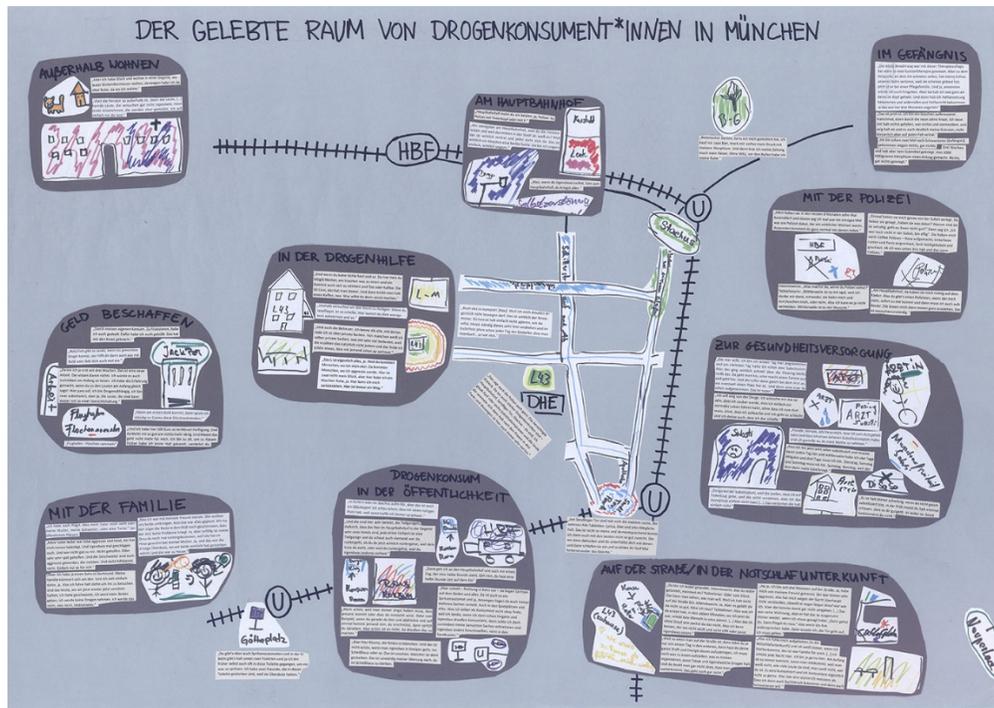
*The lived city of drug users in Frankfurt  
(Interviews: Anna Dichtl, Daniela Jamin; Collage: Christina Padberg, 2019-20)*



The lived city of drug users in Berlin Neukölln  
(Interviews and collage: Méлина Germes, 2019-20)



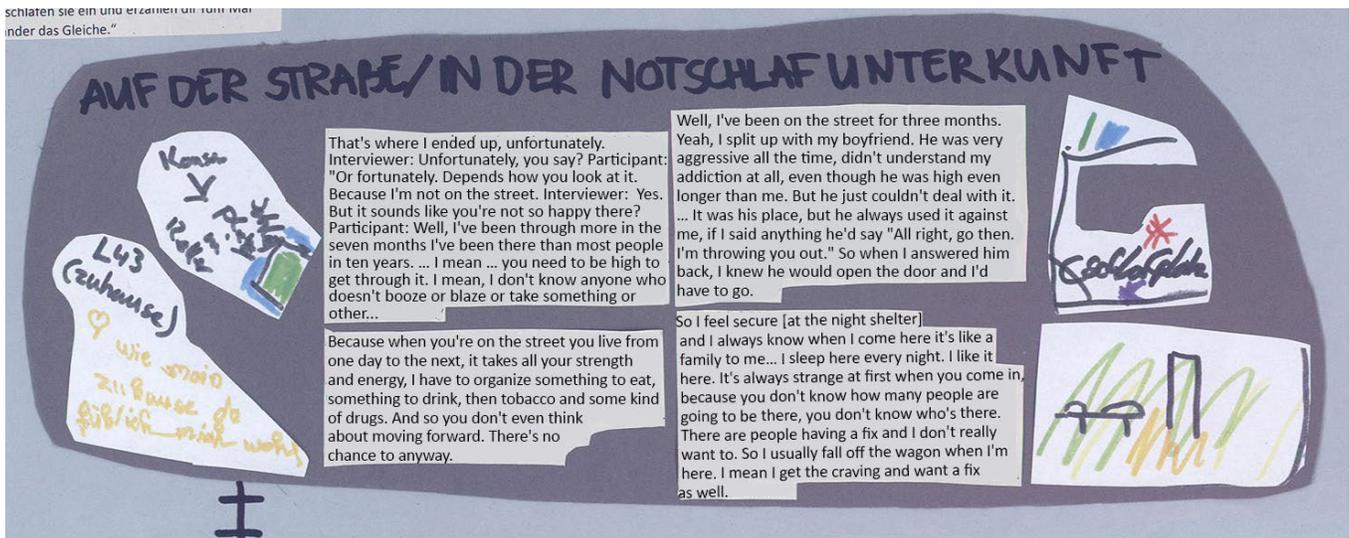
The lived city of drug users in Nuremberg  
(Interviews and collage: Luise Klaus and Jennifer Martens, 2019-20)



*The lived city of drug users in Munich  
(Interviews and collage: Luise Klaus and Jennifer Martens, 2019-20)*

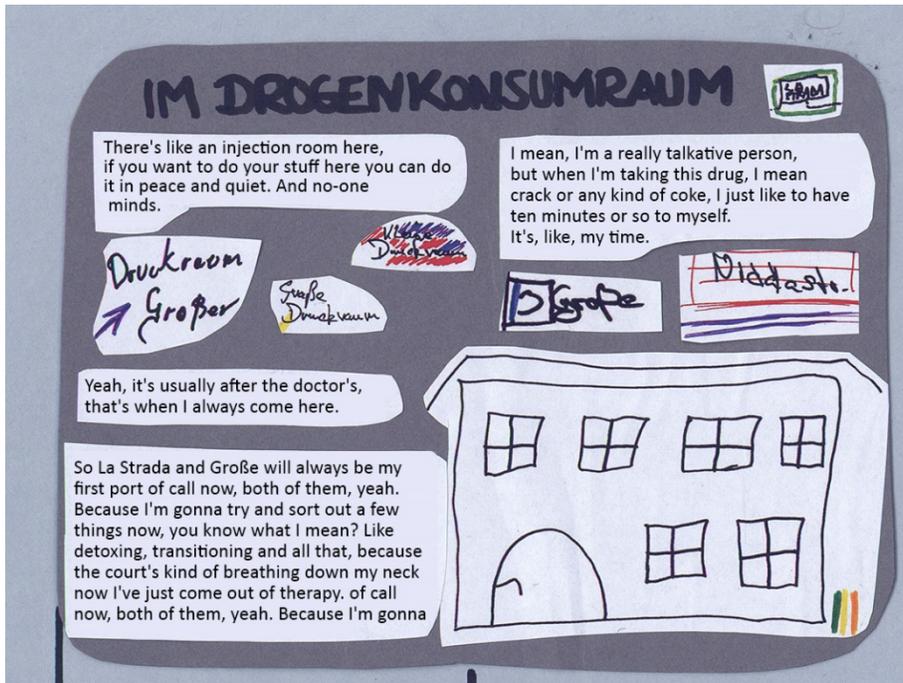
## PRECARIOUS HOUSING SITUATION IN MUNICH

schlafen sie ein und erzählen um fünf Uhr  
ander das Gleiche."



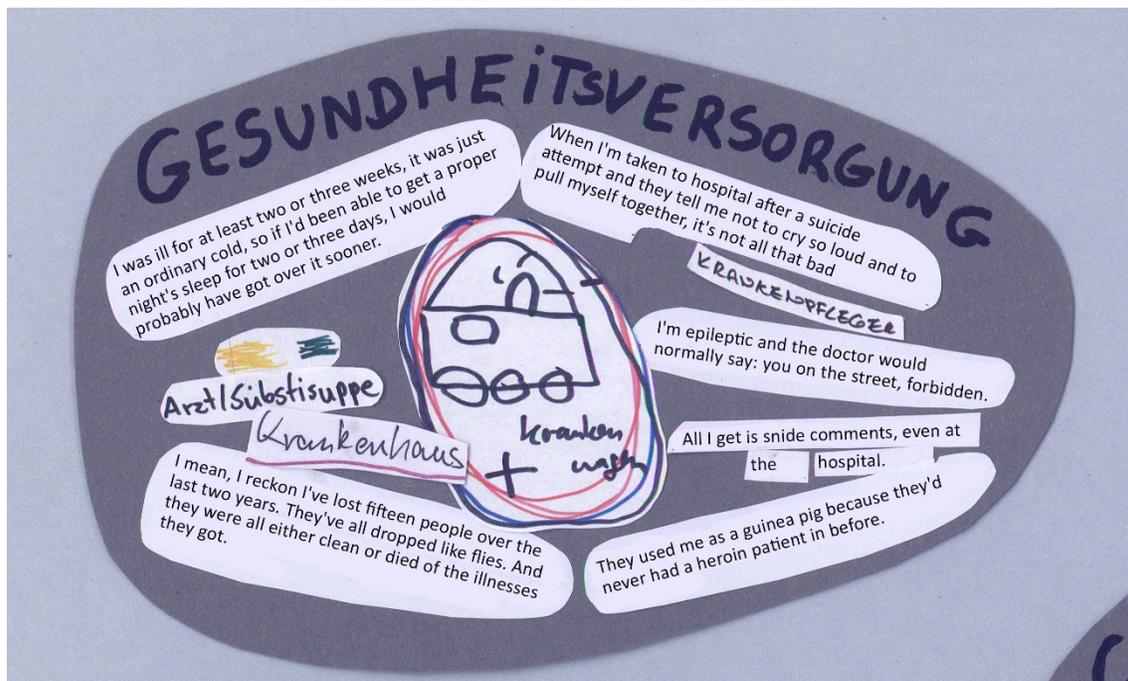
*(Interviews and collage: Luise Klaus and Jennifer Martens, 2019-20)*

# DRUG CONSUMPTION ROOM IN FRANKFURT



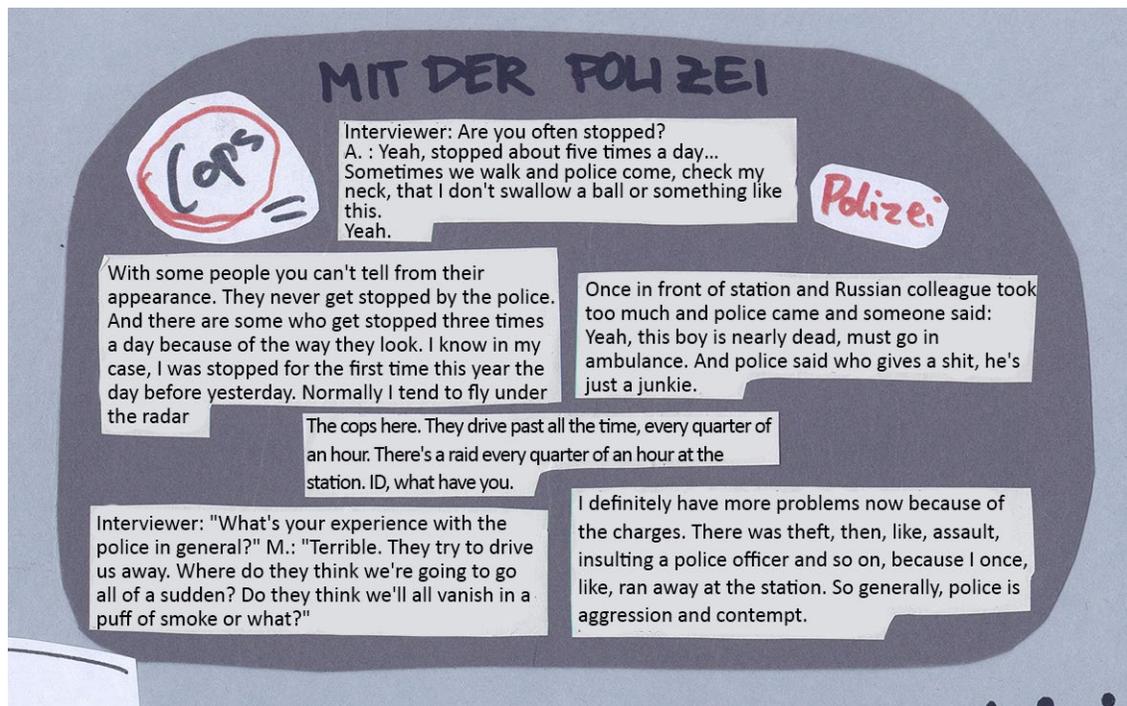
(Interviews: Anna Dichtl, Daniela Jamin; Collage: Christina Padberg, 2019-20)

# HEALTHCARE IN BERLIN



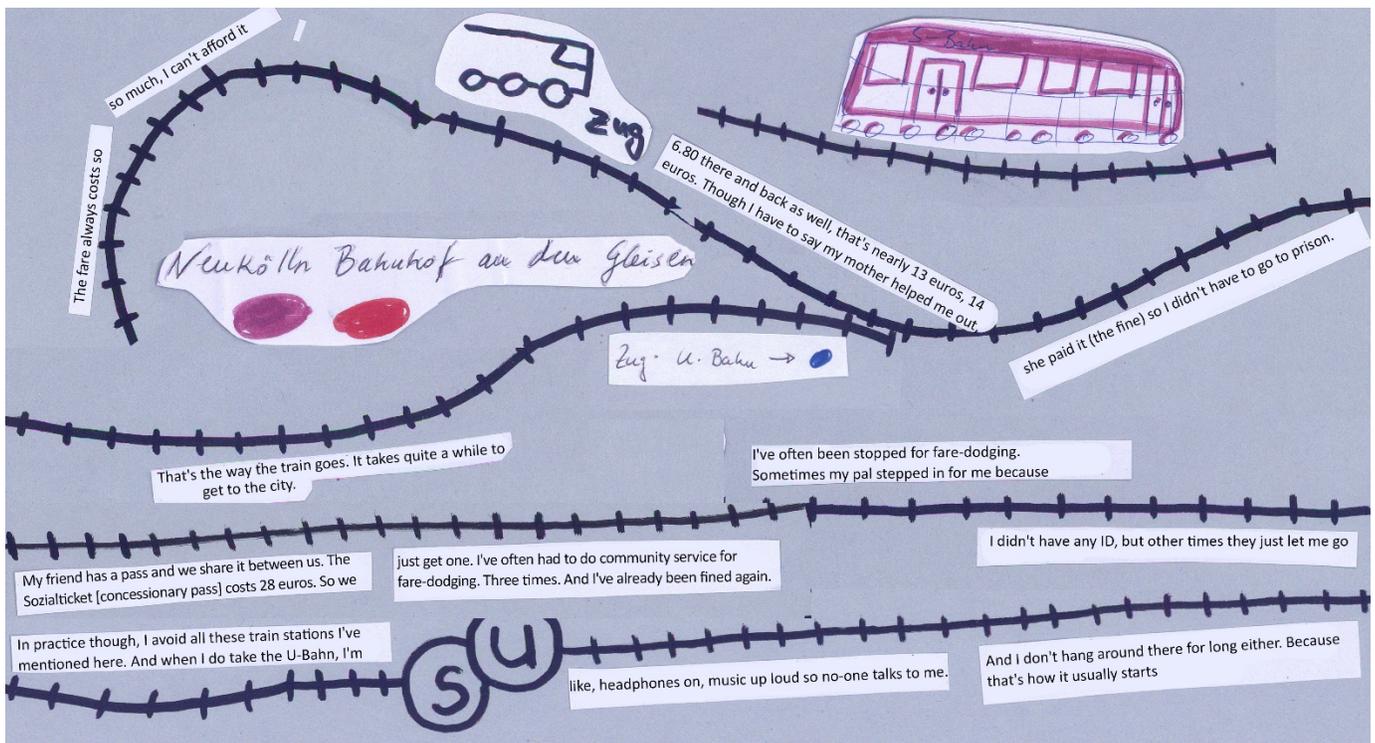
(Interviews and collage: Méline Germes, 2019-20)

## WITH THE POLICE IN NUREMBERG



(Interviews and collage: Luise Klaus, 2019-20)

## MOBILITY IN BERLIN



(Interviews and collage: Mélina Germes, 2019-20)

## Part two: Ideal City Workshops

### EXAMPLES OF REMODELING THE SPACES OF THE CITY



Habitable room reserved for women

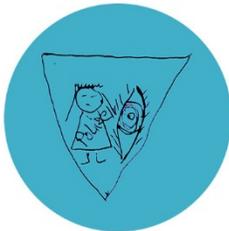


Anonymous consumption rooms



Requisition of unoccupied housing

### EXAMPLES OF SUGGESTED ACTION AGAINST DISCRIMINATION AND VIOLENCE



No arbitrary police controls



No sexual blackmail



Education campaign by Junkies for citizens

### EXAMPLES OF SUGGESTED ACTION FOR EQUAL TREATMENT



Allowing housing for drug consumers too

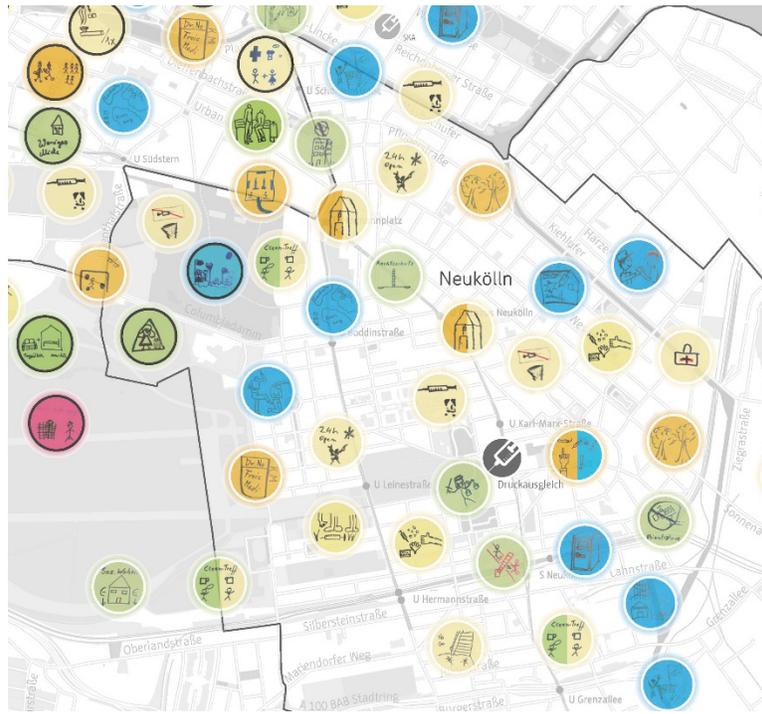


No imprisonment for fare dodging

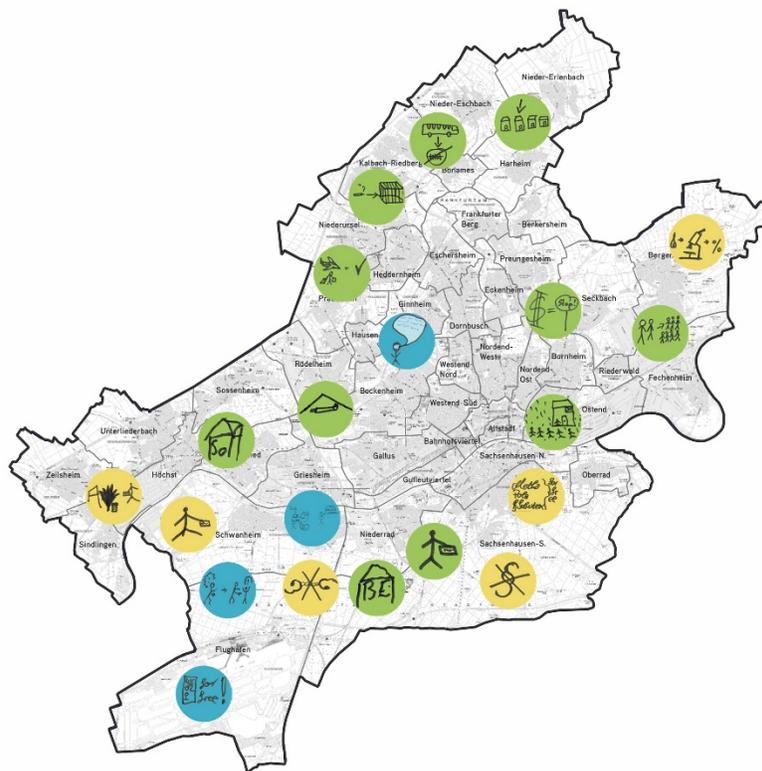


Legalisation of substances

# EXTRACTS OF THE DIGITALIZED MAPS OF BERLIN AND FRANKFURT

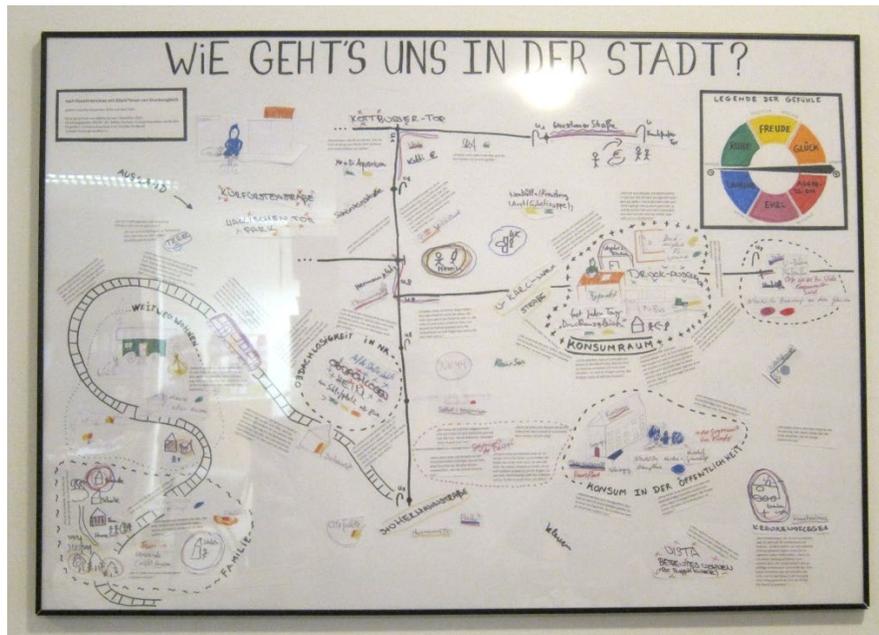


*The Nord-Neukölln neighborhood (Digitalization: Guarascio)*



*Frankfurt (Digitalization: Klaus)*

# FIRST EXHIBITION OF THE PROVISIONAL RESULTS



First collage of the Berlin interviews at DCR "Druckausgleich" (Germes, 2019)



Ideal City Workshop 1 results at DCR "Druckausgleich" (Germes, 2019)