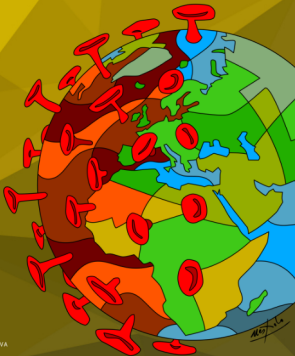


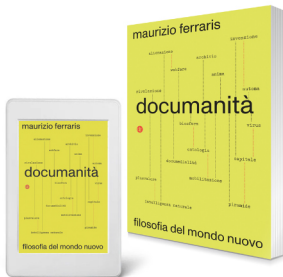
Internet of ThinkS

post-colonial studies



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Maurizio Ferraris



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INDEX

5	Authors
8	Coronial and Post-coronial, Maurizio Ferraris
22	See, isolate, respond. Quickly, Tiziana Andina
30	The virus is natural, and we are its environment, Elena Casetta
35	We can teach online, and at times we should, Mario Carpo
42	COVID-19 and the epistemology of conspiracy theories, Gabriele Gava
47	The day we became who we were. Coronavirus between real and fantasy, Sara Guindani
52	Postcolonial urban adaptations, Matteo Robiglio
58	The right to health care and the responsibility for health, Massimo Reichlin
64	From micro to macro and back. The pandemic between complexity and emergent viruses, Erica Onnis
72	Ten things I know about screens after a year of pandemic, Mauro Carbone
80	Reflections on growth, Melanie Erspamer
87	Restriction policies: an attack on democracy?, Roberta Sala
94	Means and ends, Luigi Filieri
101	"None of us is safe until all of us are safe": biopolitics of the mask, Jon R. Snyder

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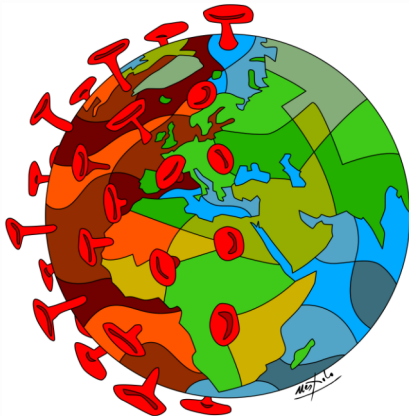
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Postcolonial urban adaptations

MATTEO ROBIOLLO

We have had the dubious privilege – as scholars – of observing the first global urban emergency. Billions of humans – especially urban ones – have simultaneously experienced very similar living conditions in completely different contexts. For sciences such as urban planning, sociology, economics, and human geography, which cannot conduct experiments, this is a rare opportunity to observe cities, economies, and societies in an induced “limit state”, and to do so with an unprecedented power of data collection that the extensive use of ICT tools in emergency management has only recently made possible. And with our ability to observe and measure still intact: unlike a war or an earthquake, the pandemic has not destroyed universities and laboratories.

In spite of this, prescription and prediction seem to have prevailed over observation up to now. Prescription of rules, behaviors, parameters. Predictions of *paligenesis*, or rebirth, for tomorrow: the return to the villages and the end of urban density, the end of the office, the end of global tourism, the home once



again as a place of refuge, and so on. The current dynamic has already taken on the task of putting these prescriptions in contradiction with reality – though past experiences should have already inoculated us against the fallacy of prophecies. However, it would also be wrong to say that nothing changes. This experiment is producing alterations that might not be univocal but that will not be entirely reversible. That will be transcribed in the forms of cities and landscapes. For, urban humans incorporate experiences by adaptively reorganizing spaces, morphologies, and connections.

It is therefore worth noting some hints of ongoing adaptations that might be here to stay. I have in mind here the city as Max Weber defined it in his *Die Stadt* (1911–14), as the coincidence of settlement form (density), political form (self-government), and economic form (mercantile exchange).

First of all, we have witnessed a reduction in the political space of cities. The “century of cities” had, up to the pandemic, seen the city recover an almost medieval role of city-state, an autonomous actor in growing competition with the rational State, even on a global scale. The pandemic has seen the State, at least for now, regain control of the city. The *polis* is silenced, and authority proceeds from the center to the periphery – even in apparently mild vehicles such as presidential health emergency laws. The archetypal public spaces of the square and the market have been emptied by authorities much to the same extent everywhere, as if the territory of the State were continuous and homogeneous, evacuated of sites of resistance. Denying the specificity of places, territories, and populations, where risk is unevenly distributed. But also disproving our claims to be able to deal with complexity.

We have become again afraid of density. The density of relationships that we celebrated as vibrancy, the serendipity of the unexpected, the space-time compression of modernity have been

suspended. They frighten us again. They make us regard the built density of the city as dangerous. An ancient suspicion. As if we were still in walled cities hit by plagues or cholera. Mistaking the built form with the form of phenomena. The Italian epicenter of the pandemic was among the workshops of sprawling Bergamo valleys – not in the skyscrapers of Milan. The outbreaks of the “second wave” started in the forecourts of logistics centers, not in the squares of historic centers. So let’s not expect a massive exodus from cities, but an accelerated multiscale reorganization of urban living with possible temporal alternations between urban, suburban, and rural-urban on weekly or perhaps monthly, rather than daily, cycles. Thus strengthening the relationship between the city and its territories, rooting the city in an extended and discontinuous metropolitan ecology with variable density, dual ecologies.

The first signs can be seen in the “light” actions of rapid modification of the public space that were implemented immediately after cities reopened, from Milan to New York, giving greater breathing room and space for necessary amenities without losing cities’ intensity. Pedestrianization, outdoor eating, and “temporary” cycle paths might mark the historical end of a century of domination by private vehicular mobility over the public space of the city. A process that has been underway for some time, which the pandemic has catalysed and accelerated. The result will be a different and higher density – no means of transport has more potential capacity than a pedestrian street – and at the same time one that is more fluid and pleasant. The result will be a more desirable and more efficient city, and therefore one that will be more capable of attracting intelligence and producing wealth in the future. A precondition of this is powerful public transportation infrastructure. That requires and also creates more density, not less. It strengthens hierarchies

between parts of cities and parts of territories.

This emergency has already revealed significant differences in resilience between more and less robust elements of the urban infrastructure – think for example of data transmission, or the reorganization of health services – and accentuated long-term social inequalities, not necessarily in gradients from center to periphery. Those who were already weak have become weaker, those who were less connected have become even more distant. The material and immaterial capital coming from one’s family counts even more than it did before – the size of one’s house, one’s economic reserves, one’s access to tangible and intangible tools, one’s ability to manage long-distance relationships.

Emergency is a collective experience of learning, of managing work and relationships in hybrid forms, of mixing distance and presence. It dissolves the functionally segregated times and spaces of the industrial city, which had survived the end of fordism only thanks to the inherent inertia of buildings and organizations. It re-incorporates fragments of previously social or public time and space into the private sphere – the office and school, for example, but also the “green domestic” that, in the form of a balcony, rooftop or garden attached to one’s house or flat, has become the most coveted object on urban real estate markets. It has freed up opportunities for autonomous determination and reconciliation between the time for life and the time for work, for example. But it has also widened the gap between material and immaterial production, which can more easily than the former be made “remote”. And between protected and precarious workers, for whom the health emergency was immediately an economic one. Between smart workers and essential workers, who even in the most acute phases of the pandemic had to accept risk and guarantee presence and continuity.

The emergency exposed the intimacy of the

private sphere to public eyes – the background of my home offered to strangers’ gazes in Zoom meetings. The (intellectual) worker found himself in an atomized solitude that was unfamiliar since the time that *industrie aux champs* ceded to urban, concentrated manufacturing. We were deprived of shared places where we might at least potentially catalyze a collective identity. Similar remarks can be made regarding universities, schools, theaters, museums.

Undergoing a drastic simplification of its complexity, urban space has returned to being a public health and safety device. As it was before antibiotics and vaccines, when we were often unable to access cures or to immunize, we must walk separately, maintain distance. The *lazzaretto* for the infected, the quarantine for the foreigner, the huge sanatoriums for the convalescent, the country retreats for the rich to escape the plague: we have returned to learn and use ancient words and devices.

The technological hospital that we have built as the model of modern healthcare has proved vulnerable to a pandemic, revealing the weaknesses of concentration, segregation, and specialization. We will have to design more flexible lines of defense, diffused across the territory – lines that could, in the future, begin with houses that incorporate elementary sanitary infrastructure, just like a century ago they began incorporating running water and then electricity and gas; and extend to low-intensity neighborhood care structures. We have been able to activate emergency spaces – unsurprisingly, the large unused pavilions of exhibitions and fairs. After the loft, we have thus rediscovered another ancient Saxon etymology, the half a large and generic volume, free from structural constraints, therefore flexible and available for a variety of configurations – even as a temporary hospital.

These are precious reserves whose reuse challenges the idea in modern urban planning,



that every space in the city must be optimized with a permanent, continuous, and single use. The twentieth-century organization of the city into specialized mono-functional areas historically originates in the desire to cure the city, by separating the healthy from the sick. But the flexibility generic structures displayed during the pandemic outlines the need for a new articulation of urban space, no longer based on simple and stable homogeneous functions, but on mixed, heterogeneous, temporally variable, strategically spread structures, with potentially autonomous basic equipment. We have been predicating this for some time already, but perhaps we will finally be able to incorporate it into our planning systems. The Paris that today wants to reorganize itself into pedestrian districts each walkable in "fifteen minutes" promises a high quality of life, and at the same time prepares units that can be easily isolated in future emergencies.

In recent years a lot has been said about urban resilience. In the real-scale test we have undergone, danger came from where we did not expect it. Not a flood or an earthquake, but an epidemic. The real robustness that was ultimately perceived and appreciated was a product of both the intrinsic quality of basic urban infrastructure, its offering of redundant, rapidly convertible spatial resources; and of the capacity to manage risk with rapid measures customized for different places, age groups, conditions, and requirements. Test, treat, trace: this triad outlines a profound change in approach for city governance and management. The dynamic and adaptive reaction to unexpected conditions proved more effective than the *a priori* organization of an increasingly less predictable future. If we combine this with the ability of citizens to self-discipline during acute phases of lockdown, and the self-organization of fields hitherto not very permeable to innovation – such as schools, local commerce, public administration, parts of which have gone digital



much better and sooner than anticipated – we can see unexpected non-hierarchical innovation potential. The pandemic accelerated the widespread incorporation of measurement and control devices into urban infrastructure, and the consequent availability of real-time big data: 5G has played a central role in managing the acute phase of the emergency in Wuhan, and a facial recognition camera appeared a few days after the end of the first wave at the entrances of my gym, my favourite shop, and my university library. Devices whose greater pervasiveness also points to an increasingly urgent question of how we will use their data and how this data can

be an ingredient of decentralized freedom rather than centralized control.

Perhaps the ancient answer to these new issues could be the city itself. The city as a political body, to be reconquered after the renewed domination of the State. The city as the sole arena where democracy remains a viable action, and citizenship is a tangible experience, not just a formal expression.

The perimeter of the possible has suddenly expanded. It is up to us to draw its shapes.

Some solutions to the present social and economic crisis could come, hopefully, from reorganizing urban spaces. Matteo Robiglio's article makes an interesting point, important on the philosophical, social, and economic levels: the need to rethink the post-coronarial urban space. Throughout history, cities – like every other social agglomerate able to constitute an organized nucleus – have been fundamental for the life paths of many people; we can trace this idea to Plato's political philosophy. Industrial revolutions (in particular the first and the second) favoured the city, as it offered itself to workers as a habitable place within reach of industry. Today, few things have changed. The city, despite the groups of people that manage to live within it – in particular, young, retired, and unemployed people – remains, for a large part of the day, a place of "transit", and not, or only in part, a place where life is fully realized. The current sanitary emergency, however, shed light on the problems of living in a city, but it is also giving us the possibility to rethink and restructure it in material and social ways. However, smart working does not seem to be a workable solution for it (in the long-term) because it isn't able to maintain an economic system based on the confluence of commuters. First of all, to rethink cities, we have to consider all the aspects which lie outside the work sphere and that have

become part of daily life – hobbies, sports, tourism, etc. – and start seeing cities as places where the social soul of a community expresses itself and finds a dimension of suspended time, the only one able to separate, at last, working time from living time.

Stefano Ippolito

The Treccani dictionary defines the word space as “an indefinite and unlimited place in which all material things are thought to be contained, which, as an extension, occupy a part of it, and take up a position there, defined by means of the qualitative relational properties of proximity, distance”. Robiglio perfectly captures how in just one year, though we could also say in just a few months, the global pandemic has led us to redefine our spaces, not only material and domestic, but also relational. Reflecting on our domestic spaces, surely the most difficult test has been that of living in them, no longer for just a few hours a day, but for months at a time without any real respite. As mentioned in the definition of “space”, it is interesting to think of ourselves as an extension of these spaces. We no longer have the freedom to go outside, and so we become, for a time that seems never-ending, an integral part of them. It is also interesting to note the change in relational space, where the keyword has become “distancing”, here too we have a new social conception of what our personal space is, not only physical but also digital. If we showed ourselves much more on videocall platforms, we might allow, as Robiglio says, our private domestic space to be shown to everyone. Outside of this private area, our space has expanded, at least by a meter and a half, no longer allowing anyone, neither family nor friends, to cross it. Difficult premises to maintain, however, as now we rediscover our spaces as we always imagined them.

Margaux Cerutti

The right to health care and the responsibility for health

MASSIMO REICHLIN

The Republic protects health as a fundamental right of the individual and an interest of the community and guarantees free treatment to the needy”. The coronavirus pandemic has undoubtedly reminded us of the importance of these words, which appear in Article 32 of our Constitution; but above all, it has shown us how important it is

to emphasise the second element alongside the first. Health, as is often repeated, is a right; or rather, it is a fundamental right (the only one for which the Constitution reserves this adjective) to receive appropriate and proportionate medical care for one's illness or condition. A public system such as the Italian one guarantees this right as part of the collective commitment to remove the obstacles that prevent the full development of a human person and his effective participation in public life (art. 3). Less often, however, is the emphasis placed on the second element: health – and here what is meant is undoubtedly one's state of health, i.e. being in good physical condition – is also an *interest of the community*. The case of Covid-19 – a previously unknown infectious disease for which there were (at least at the beginning) no effective drugs to combat it and no vaccine to prevent it – highlights how it is in the interest of all that everyone is as healthy as possible. To stop the spread of the virus and prevent the collapse of the healthcare system, it became necessary to take maximum responsibility for one's own health, and this was strongly advocated since such self-care was also in the supreme interest of the community. In other words, the general





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