CITY 248 (Fall 2026)

ARCHITECTURAL HISTORY RESEARCH WORKSHOP

SPATIAL HISTORIES OF HEALTH

Tuesdays & Thursdays, 2:40-4:00 pm EST | Dalton Hall 1

Instructor: M.C. Overholt (she/her)
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Student drop-in: Tuesdays and Thursdays, 1–2pm, Old Library 220

Accessibility guidelines, from Raymond Lifchez, Dennis Williams, Chris Yip, Michael Larson, and Joanna Taylor, *Getting There: A Guide to Accessibility for Your Facility* (1979).

COURSE DESCRIPTION

This course will explore architectural history research methods, focusing on spatial histories of healthcare, accessibility, and radical health activism. Over the course of the semester, students will develop methods of interpretation for exploring the agency of individuals and groups who have shaped spaces of health and care—including hospitals, clinics, homes, community centers, landscapes, and activist spaces—as well as the lives shaped by these buildings and by the notions of "health" they produce. The aim of the course is twofold. First, to cultivate feminist, disability studies, and critical race studies perspectives on the history of the built

environment through the interpretation of sites of medical authority, discipline, and care. Second, to build confidence in reading urban and architectural documents—floor plans, perspective drawings, photographs, three-dimensional objects, design periodicals and product advertising, post-occupancy surveys, etc.—by connecting them with these broader historical themes. To this end, the course will be structured as a hybrid lecture and methodology workshop, with each week including interactive activities ranging from collective architectural drawing interpretation and annotation to site visits that illuminate how spatial histories of health are curated in the present.

Following two introductory weeks of reading discussion illuminating how notions of the "healthy" or "normal" body have been historically constructed in ableist, gendered, and racialized terms, this course will be organized around three modules: **Designing Health**, **Environmentalizing Health**, **Reclaiming Health**. Each module has its own set of questions animating historical conceptions of embodiment and well-being through the lens of architectural history and landscape studies:

PART I. DESIGNING HEALTH
How have hospitals, clinics, maternity wards, rehabilitation centers, and other spaces of care been shaped by changing ideas about health, illness, and bodily difference? How have these spaces, in turn, sorted, disciplined, segregated, or cared for bodies differently, producing racialized, gendered, and class-based hierarchies of care and shaping definitions of disability and mental illness?

PART II. ENVIRONMENTALIZING HEALTH
What if the very spaces designed to shelter and make us healthy can also make us sick? How have the materials and infrastructures of the built environment—from lead and toxic adhesives to petroleum-derived plastics and polluted landscapes—exposed different bodies and communities to different forms and degrees of risk? Who gets to decide which risks are acceptable, and whose bodies are considered expendable?

PART III. RECLAIMING HEALTH
What would health look like if communities, rather than hierarchical institutions, were given the power to define and produce it? How have Black and Latine activists, disabled and neurodivergent people, LGBTQ+ communities, women, and other marginalized communities challenged institutional models of care and created alternative spaces rooted in autonomy, mutual aid, and collective power?

Over the course of the semester, we will explore these questions by placing our own, embodied experiences of the built environment in conversation with scholarly texts historicizing the transformation of health spaces and infrastructures. We will

also center our own embodied experiences, needs, and constraints as we visit key sites, including the Pennsylvania Hospital Museum in Philadelphia.

STUDENT DROP-IN HOURS
Student drop-in hours are times for you to ask clarification or follow-up questions, dig deeper into something that excited you during class, talk through nascent ideas for how to tackle assignments, discuss areas where you might be struggling, learn more about my work, and more. There is no educationally-related interest, question, or concern too big or too small for student drop-in hours! To keep things simple, I ask that you sign-up for my office hours using the printed sheet on my office door. If you are unable to make my office hours and would like to meet, please email me and we will find another time.

ACCOMMODATIONS FOR DISABILITIES
Bryn Mawr College is committed to providing equal access to students with a documented disability. Students needing academic accommodations for a disability must first register with Access Services. Students can email accessservices@brynmawr.edu to make an appointment with the Access Services office to begin this confidential process. Once registered, students should schedule an appointment with me, the instructor, as early in the semester as possible to share the verification form and make appropriate arrangements. Please note that accommodations for disabilities are not retroactive and require advance notice to implement.

Any student who has a disability-related need to tape record this class must first speak with the Access Services office and to me, the instructor. Because of laws within the State of Pennsylvania, class members need to be aware that this class may be recorded. More information can be obtained at the Access Services website.

Rooted in disability studies, this course not only asks how built environments have produced accessibility barriers for people with diverse ways of moving, sensing, thinking, and communicating, but also how disabled and neurodivergent communities offer other ways of knowing and other approaches to designing sensuous and affirmative environments. To this end, we will think of our classroom itself as a design project, and work iteratively to reconfigure and interact with the space in ways that reflect the values of students and our collective class.

HONOR CODE / ACADEMIC INTEGRITY
I regard plagiarism as a very serious matter. In this class, plagiarism consists of work taken partially or entirely from an uncited source (online content, a peer, a published article, etc.) and assumed as your own. If I have reasons to suspect plagiarizing, I will ask that you report yourself to the Bryn Mawr Honor Board. See

the Bryn Mawr Honor Code and Honor Board Hearing Process in the Student Handbook for more information.

STATEMENT ON AI
The use of ChatGPT and other AI technologies are strictly prohibited in this class (and in all assignments, including in-class presentations), following the Bryn Mawr College Honor Code (IV. Policies, 2. Other Academic work, subsection "f"). A key goal of this course is to help you sharpen your critical, visual, and historical analytical skills. AI chatbots like ChatGPT circumvent this process, preventing you from gaining confidence as a learner and researcher.

As we study the environmental and embodied harms of the built environment, we must also acknowledge the impacts of the data centers that fuel the AI revolution. Data centers disproportionately expose low income communities of color to air pollution from fossil-fuel-powered energy grids, localized emissions from diesel-powered back-up generators, and chemicals leaking from electronic waste. According to research completed at the University of Illinois Urbana-Champaign, Google's data centers (alone) have also consumed an average of 550,000 gallons of water per day.

WEEKLY READING SCHEDULE

Weekly "Key Word" Reading Responses due Monday 11:59PM before class, Weeks 2–9

INTRODUCTION: CONSTRUCTING "HEALTHY" BODIES

Week 1. Feminist Disability Studies: The Myth of the "Normate"
Tuesday, September 1

- Cyrée Jarelle Johnson, "Autistic Heaven," in *Slingshot* (Nightboat Books, 2019).

Thursday, September 3

- Rosemarie Garland-Thompson, *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature* (Columbia University Press, 2017 [1997]). Excerpts from Chapters 1 and 2, pages 5–9, 12–15, 19–29.

Week 2. (Un)Building Access, Exclusion, and Erasure
Tuesday, September 8

- Aimi Hamraie, *Building Access: Universal Design and the Politics of Disability* (University of Minnesota Press, 2017), Chapter 1. "Normate Template:

Knowledge-Making the Architectural Inhabitant," 19–40.

Thursday, September 10

- Fabiola López-Durán, *Eugenics in the Garden: Transatlantic Architecture and the Crafting of Modernity* (University of Texas Press, 2018), Chapter 2. "Paris Goes West: From the Musée Social to an 'Ailing Paradise'," 45–82.

PART I. DESIGNING HEALTH

Week 3. Modernizing the Hospital: Biopolitics, Disease, and the Medicalized Environment

September 15 & 17

***Tuesday, September 15 tentative visit to the Pennsylvania Hospital Museum for a guided tour, 3–4pm*

- Jeanne Kisacky, *Rise of the Modern Hospital: An Architectural History of Health and Healing* (University of Pittsburgh Press, 2016). Chapter 1. "The Hospital Building as a Means of Disease Prevention," 12–77.

Week 4. Exporting Medical Modernity: The Hospital and Empire

September 22 & 24

- Simon De Nys-Ketels, "A Hospital Typology Translated: Transnational Flows of Architectural Expertise in the Clinique Reine Elisabeth of Coquilhatville, in the Belgian Congo," *ABE Journal* 19 (December 2021).

Week 5. Maternal Health: Lying-in Hospitals, Taylorized Delivery, and "Family-Centered Care"

September 29 & October 1

- Annemarie Adams, *Architecture the Family Way: Doctors, Houses, and Women* (McGill-Queen's University Press, 1996). Chapter 4. "Childbirth at Home," 103–128.
- Adams, *Medicine by Design: The Architect and the Modern Hospital, 1895–1943* (University of Minnesota Press, 2008). Excerpt from Chapter 2. "Patients," 42–52.
- Judith Walzer Leavitt, *Make Room for Daddy: The Journey from Waiting Room to Birthing Room* (University of North Carolina Press, 2010). Chapter 1. "Alone with Strangers: The Medicalization of Childbirth," 21–47.

Week 6. Psychology, Mental Health, and the Limits of the Clinic

October 6 & October 8

- Joy Knoblauch, *The Architecture of Good Behavior: Psychology and Modern Institutional Design in Postwar America* (University of Pittsburgh Press, 2020). Chapter 2. "Better Living Through Psychobeaurocracy?: Community

Mental Health Centers," 57–96.
- Patrick Jaojoco, "Autistic Spatiality and the Limits of Care," in *Sick Architecture*, edited by Beatriz Colomina with Nick Axel, Guillermo S. Arsuaga, and E-Flux Architecture (MIT Press, 2025), 104–113

FALL BREAK, OCTOBER 10–18

PART II. ENVIRONMENTALIZING HEALTH

Week 7. Buildings as Toxic Environments
October 20 & 22
- M. Murphy, *Sick Building Syndrome and the Problem of Uncertainty: Environmental Politics, Technoscience, and Women Workers* (Duke University Press, 2006), Chapter 3. "Feminism, Surveys, and Toxic Details," pp. 57–80.
- Nicholas Shapiro, "Manufactured Home Syndrome," in *Sick Architecture*, edited by Beatriz Colomina with Nick Axel, Guillermo S. Arsuaga, and E-Flux Architecture (MIT Press, 2025), pp. 222–231.

Week 8. Chemical Modernity, Toxic Materials, and Risky Labor
October 27 & 29
****No class Thursday, October 29***
- Janet Ore, "Workers' Bodies and Plywood Production: The Pathological Power of a Hybrid Material," *Aggregate* 10 (June 2022).
- David Rosner and Gerald Markowitz, *Deceit and Denial: The Deadly Politics of Industrial Pollution* (University of California Press, 2013). Chapter 3. "Cater to the Children: The Promotion of White Lead," pp. 64–107.

Week 9. Landscapes of Extraction and Pollution
November 3 & 5
***Potential visit to the Mütter Museum*
- Dorceta Taylor, *Toxic Communities: Environmental Racism, Industrial Pollution, and Residential Mobility* (New York University Press, 2001). Chapter 1. "Toxic Exposure," pp. 6–32.
- Desiree Valadares, "Thinking Like a Gulch: Pacific War Heritage, Settler Lands, and Subsurface Toxic Uncertainties in Oʻahu," Aggregate 11 (May 2023)

PART III. RECLAIMING HEALTH

Week 10. Unlearning Ableism, Cripping Spatial Practice
[*Student-led Primary Source Workshops*]
November 10 & 12

- Lucas Cassidy Crawford, "Four Gestures toward a Trans Mad-Aesthetics of Space," *Social Text* 39, no. 3 (2021): 55–77.
- Ignacio Galan, "Unlearning Ableism: Design, Knowledge, Contested Models, and the Experience of Disability in 1970s Berkeley," *Journal of Design History* 36, no. 1 (2022), 73–92.

Week 11. Feminist and Queer Ecologies of Care
Visit from S.E. Eisterer, presenting on spaces of HIV/AIDS care in Vienna
[*Student-led Primary Source Workshops*]
November 17 & 19

- M.C. Overholt, "Self Help as Spatial Practice: California's Feminist Women's Health Centers," in *In the Daylight of Our Existence: Architectural History and the Promise of Queer Theory* (gta Verlag, 2025).
- Torsten Lange, "Another Infrastructure: Queer Ecologies of Care," *The Architectural Review* (March 15, 2021)
- Iván López Munuera, "Lands of Contagion," *e-flux Architecture* (November 2020).

Week 12. [*Student-led Primary Source Workshops*]
November 24

- No reading assigned

THANKSGIVING BREAK, NOVEMBER 26–29

Week 13. Community Medicine and Decolonized Care
December 1 & 3

- Alondra Nelson, *Body and Soul: The Black Panther Party and the Fight against Medical Discrimination* (University of Minnesota Press, 2013), Chapter 3. "The People's Free Medical Clinics," 75–114.
- Johanna Fernández, *The Young Lords: A Radical History* (University of North Carolina Press, 2022), Chapter 9. "The Lincoln Offensive: Toward a Patient Bill of Rights," 271–304.

Week 14. *Sites of Health Activism* Student Presentations
December 8 & 10

STUDENT DELIVERABLES & REQUIREMENTS

Assignments in this class are meant to build student literacy around key concepts and terms from the readings and to develop skills in interpreting primary sources, whether more traditional architectural documents like plans, elevations, and sections, or untraditional sources like community-based photographs, films, 'zines, etc.

MAJOR ASSIGNMENTS:

1. *Weekly "Keyword" Reading Responses* – **Due Mondays before class by 11:59pm EST (Moodle)**

   Weeks 2–9, students will submit a short response of approximately 250 words reflecting on the week's readings. Inspired by Raymond Williams' analysis of "keywords"—words whose meanings, resonances, or associations have changed over time—each reading response should be structured around a keyword that the student identifies in relation to the readings. This might be a term that an author explicitly engages, such as Aimi Hamraie's analysis of "access" and "accessibility," or a broader concept that the text illuminates in a particular way, like "health," "normal," "illness," or "care." A keyword might also be an architectural typology that an author defines or examines in a particular moment, whether "clinic," "hospital," "maternity ward," etc.

   The purpose of this assignment is to draw connections between the readings and the broader themes of the course while building an index of concepts that different authors define, deploy, or understand in multiple ways. To this end, students may also decide to return to the same keyword across two or more weeks, using their responses to explore how different authors define or engage a term in complementary, overlapping, or diverging ways. Knowledge is also created and interpreted through our personal and embodied experiences. Students are encouraged to include personal testimony and evaluation of the concepts they are encountering in their reading responses.

   Students are permitted to submit seven out of the eight reading responses without penalty. Students do not need to contact the professor for approval regarding which week they select to not post a response.

2. *Annotation as Analysis: Interpreting Architectural Drawings* – **Due Friday, October 9 by 5pm EST (Moodle)**

   Building on the methods of primary source analysis developed in class, students will select one or two architectural drawings—a floor plan, site plan, section, elevation, etc.—of a historical health space, such as a hospital,

clinic, maternity ward, or rehabilitation center. The selected building should be a specific historical example explored in class or in the course readings. Other building examples may be approved on a case-by-case basis in consultation with the professor.

Students will use the drawings as primary sources, identifying and analyzing at least four locations or features within them that reveal how the building organizes bodies and constructs particular notions of health, access, and care. These might include particular rooms or spaces, circulation routes, thresholds, services, materials and surfaces, or other architectural features that merit closer interpretation.

The deliverable will include:

1. An annotated image of the selected architectural drawing(s), with at least four markers identifying the locations or features that you will analyze.
2. A written analysis of approximately 1,000 words (~250 words per annotation) that explains what each location or feature reveals about the intended design and use of the space. Your analysis should place these architectural details within their broader social, cultural, and political contexts, connecting what you observe in the drawing to the historical themes and questions explored in the course.

Sites of Health Activism: Reading Grassroots Design & Spatial Strategies – **Student-facilitated primary source workshops Weeks 10–12; Written Deliverable Due Monday, December 7 at 5pm; Final Presentations Week 14**

Grassroots health activists have developed models of care that challenge, resist, or reimagine institutional approaches to health. In doing so, they have also developed alternative ways of creating, organizing, and using space—from the Black Panther Party's mobile clinics and the Young Lords' occupation of Lincoln Hospital to feminist health centers organized around domestic spaces and cooperative housing models pioneered by disabled activists in the Independent Living Movement.

For this assignment, students will create a dossier analyzing the spatial strategies of a grassroots health activist organization, collective, or group of individuals. Because activist initiatives often work by retrofitting, occupying, or repurposing existing spaces rather than designing new buildings (an expensive enterprise), their architectural strategies may not be documented through conventional drawings. Instead, students will learn to read

photographs, films, posters, zines, newspaper articles, and other alternative primary sources as evidence of spatial practice.

Each dossier should include at least five primary sources: three visual and two written. Students will annotate each visual source, using the methods developed in previous assignments to identify and analyze spatial strategies and place them in conversation with the written primary sources and relevant historical scholarship. The annotations will form the basis of a five-page analytical essay that argues how the group used space to enact an alternative model of health, care, or bodily autonomy.

The dossier will conclude with a two-page speculative writing piece that draws on the case study to imagine a contemporary health space or spatial strategy for the TriCo campus. Rather than simply reproducing the historical example, students should consider how its spatial strategies might be adapted to address a health-related need, inequity, or form of collective care today. Speculative drawings and images can append the writing, but are not required.

During the "RECLAIMING HEALTH" module, students will each facilitate a primary source workshop, bringing key materials related to their case study for group interpretation. Students should familiarize themselves closely with their sources and help guide the group's analysis, while also using their classmates' insights and questions to deepen their own interpretations. The final dossier is due Monday, December 7 at 5pm. In the last week of class, each student will give a brief, 10-minute presentation reflecting on their completed dossier and speculative writing piece.

GRADING

10% Attendance

One unexcused absence is permitted. Each additional unexcused absence will result in a 1% deduction from the final course grade.

15% Discussion Participation
15% Weekly "Key Word" Reading Responses
15% Annotation as Analysis Assignment
10% Sites of Health Activism Presentation & Primary Source Workshop
35% Sites of Health Activism Final Dossier

FINAL GRADES

A	4.0	94-100%
A-	3.7	90-93%
B+	3.3	87-89%

B	3.0	83-86%
B-	2.7	80-82%
C+	2.3	77-79%
C	2.0	73-76%
C-	1.7	70-72%
D+	1.3	67-69%
D	1.0	60-66%
F	0.0	<60%

COMMUNITY STATEMENT

Crafting our classroom community is a collaborative project. Throughout the semester, we will hear from authors, museum docents and curators, and other interlocutors who bring with them as wide a range of experiences and perspectives as each of you will to our classroom. One key ground rule for our class is to treat everyone—both within and outside of our classroom—with respect, generosity, and a willingness to listen. We should also actively work to empower one another to share our perspectives while respecting each other's boundaries around what we are, and are not, willing to reveal in an academic environment.

As your instructor, I will help us remain grounded in these commitments throughout the semester. If you ever feel that our classroom is not living up to these aims, please meet with me so that we can discuss your experience and consider pathways forward.

Our class will engage histories of spatial activism and health activism that are empowering, uplifting, and inspiring. Through archival materials and readings, we will also encounter histories that depict and document various forms of violence, including sexism, homophobia, transphobia, colonialism, racism, ableism, and classism. I recognize that revisiting these histories and topics may at times be painful or uncomfortable. Whenever we interrogate systems of violence, we will do so with the aim of understanding and working toward their dismantling. We should also recognize that each of us may have different capacities to engage with difficult material at different moments throughout the semester. You are never obliged to disclose these capacities or experiences to me, though I am always available to discuss course content with you individually.