

凯瑟琳·沃德·汤普森：城市空间的生态

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作者寄语

城市从未像现在这样复杂，多方面的问题会影响到城市建设中的理念、规划、开发、管理和老化。在时间维度下，人口聚集过程承载着社会、政治、健康、文化和经济背景。故此涉及到的社会领域包罗万象，包括社会历史学、城市社会学、建筑史和考古学，还有医疗健康与教育、城市地理学与经济学理论。

在这个专栏中，我将游走在世界各地，与各领域的专家、远见者、变革者一道讨论让城市生活更美好的基本要素。并在不同关键维度上，分享他们对未来城市生活的独特见解。

（百瑞·威尔逊于 2018 年 8 月深圳）

上次与著名景观建筑师、健康研究员及教育家凯瑟琳·沃德·汤普森见面，已经是 1989 年的事了。那时我还是个少不更事的大学生，急切想赶完一篇关于爱丁堡艺术学院历史公园修缮项目的毕业论文。凯瑟琳那时是我的导师，公园修缮也是她当时的专业课题。作为我们的系主任，凯瑟琳当时对我们学生而言确实是一个可怕的存在。凯瑟琳年纪轻轻就飞速步入职业巅峰，并在辨别景观与身心健康提升之间的联系上有着极强专业素养，尤其是儿童、青少年与老人的身心健康提升上。她是蜚声国际的 OPENspace 研究中心的创始人兼总监，主导了许多重大研究资助与合作项目，包括为苏格兰政府及获过大奖的 I' DGO 协会所承接的极具创新性的“绿色健康（Greenhealth）”研究项目。

此次我们在广州相见，正逢凯瑟琳在华南理工大学举办演讲及专题研讨会。多年后重逢，我还是忍不住吃惊：凯瑟琳温柔的语调与自然平和的举止在几十年前是怎样震慑住一群大学生的。“其实我当时也挺害怕的，”重逢之际她坦言道，“因为那么年轻，何况又担任系主任这种自己力所难及的职责。”然而，我对昔日记忆的紧张感很快就淡去了。在那个温暖的下午，我们谈论着让各年龄段、各能力阶层的人无论在何地皆可享有接触高质景观空间的重要性及价值。

健康与环境

“财富是预测健康程度与寿命的最佳指标。”凯瑟琳简单阐释道。纵观数世纪历史，无不如此，而且这一现象还在持续。即便是在先进发达的社会里，健康程度最低的人群也总是那些财富最少的。然而，近年来越来越多的证

BARRY INTERVIEWS — CATHARINE WARD THOMPSON AN ECOLOGY OF URBAN SPACES

It was 1989 when I last met Catherine Ward Thompson, the renowned Landscape Architect, health researcher and educator. In those days I was a snivelling student desperately trying to complete a rushed and flimsy final dissertation on the restoration of historic parks at Edinburgh College of Art. Catharine was my tutor, and park restoration was her then specialist subject. But Catharine was also “Head of Department”, and as such a fearsome presence to us students. Despite such youth, Catharine had been rapidly catapulted to the top of her profession, going on to develop an expertise in identifying evidence linking access to landscape with improved mental and physical health, particularly with kids, teenagers and the elderly. As founder and Director of internationally recognised research centre OPENspace, she has gone on to lead numerous major research grants and collaborations, including highly-innovative research on ‘GreenHealth’ for the Scottish Government and the award-winning consortium, Inclusive Design for Getting Outdoors (I' DGO).

We meet in Guangzhou where Catherine is giving a series of lectures and workshops at the



百瑞·威尔逊（右）与凯瑟琳·沃德·汤普森（左）畅谈城市化问题

South China University of Technology. Upon meeting after all these years, I wondered how it could have been that her soft speech and naturally gentle demeanor could have so petrified the students in her department all those years ago. “I was just terrified myself”, she confessed upon meeting again, “being so young and then suddenly out of my depth as Head of Department”. My nervousness of old quickly washed away in our interview however as we spent a warm afternoon discussing the vital importance and value to people of all ages and capabilities of having access to quality landscape spaces, wherever they are living.



据显示，让大众有权享有优质的环境、尤其是自然环境，其实是减少社会不平等的最容易及最划算的方式之一。“最大的利益可以看作是给予最弱势的社会群体的”。2001年凯瑟琳设立 Openspace 时，关于户外环境可及性影响健康的研究尚无人问津。但随着发达经济体越发意识到非传染性疾病（如心肺疾病、肥胖症、糖尿病）的普遍性，也开始急于增强在这一方面的了解了。该领域的最新研究表明，尽管吸入土壤中的微生物有利于精神健康，且能增强免疫力，但林地可及性才尤其重要。绿色空间为社会互动、步行和交流提供了机会，也为人们创造了进行诸如种植之类的有益活动的可能性。

在景观上投入尤其划算

凯瑟琳表示，获取到证明上述事实的证据、并借此突出投入景观的重要性一向都很困难。医学界对于研究成果有着严苛的指标，而且要求强有力的证据程序。“质量调整寿命年”（QALY）是一项衡量疾病负担的指标，包括生命存活的质与量，用于经济评估中，以评估医学干预花销的价值。

—“质量调整寿命年”相当于健康完好无损的一年。如果个体健康低于此最大值，那么其“质量调整寿命年”便以每年小于1的比例累积。“质量调整寿命年”可用于为个体决策提供信息，可应用于评估项目，并为未来项目

设定优先项。在英国，如果在一“质量调整寿命年”中人均花费低于2万-3万英镑（20万人民币），便说明这是价值良好的。公共空间可以以较低成本显著提升“质量调整寿命年”，因为它作为一种干预手段，可以广泛用于众多群体，而非单单针对一人。通过上游介入公共健康，绿色空间可带来巨大益处。

人口老龄化

众多发达经济体都面临人口老龄化的问题。因此，创建一个对老人友好的城市变得至关重要。让人们在活动中“变老”非常重要，而高质景观可及性便可让徒步出行显得较为容易且具乐趣。不平坦路面和台阶的存在、歇息平台或厕所的缺乏，都对渴望出行的老人构成了障碍。而日光、自然环境及社交环境的可及性又创造了可供性。从家到目的地的这段旅途中所包含的出行挑战对于老人们的决定有着关键影响。其中一个环节出错或有困难，就可能使得老人们不愿出门溜达。因此，实体环境的设计至关重要。凯瑟琳暗示，座位配有扶手，可助老人起身或坐下；选择不会出现明显温差的材料；这些细节都会带来很不同的效果。

为更好地了解保持活跃一事，就需注意到，人在身处户外时，比身处室内，更容易选择步行。出行还可以间接避免社会隔绝及随之而来的孤独感与精神健康问题。身体需要阳光来获取维生素D。而日光可改善人体的昼夜节律，

HEALTH AND THE ENVIRONMENT

“The best predictor of how healthy you are and how long you are likely to live is how wealthy you are” Catharine simply explains. This has been true for centuries and continues to be so, even in advanced and sophisticated societies, where those with the poorest health remain typically the least well off. There is however increasing evidence that access to good quality environments, particularly access to natural environments, is one of the easiest and most cost-effective ways of reducing social inequalities.

“The greatest benefits can be seen to those most disadvantaged” . When she established Openspace in 2001 there was little or no research available on how access to outdoor environments affected health. But as advanced economies have become more aware of the prevalence of noncommunicable diseases such as heart and lung disease, obesity and diabetes, an

urgency for more understanding has developed. Newly completed research in these areas suggests that access to woodlands can be particularly valuable, whilst breathing microbes from soil is good for mental health and can boost the immune system. Green spaces supply opportunities for social interaction, walking and talking as well as the potential to undertake beneficial activities such as growing food.

FUNDING LANDSCAPE IS EXTREMELY COST EFFECTIVE

Obtaining data to demonstrate these facts and therefore emphasise the need for funding has been difficult Catherine suggests. The medical profession has rigorous standards of research and needs strong evidentiary procedures. The term “Quality Adjusted Life Year” (QALY) is a standard by which to measure disease burden, including both the quality and the

quantity of life lived. It is used in economic evaluation to assess the value for money of medical interventions.

One QALY equates to one year in perfect health. If an individual's health is below this maximum, QALYs are accrued at a rate of less than 1 per year. QALYs can be used to inform personal decisions, to evaluate programs, and to set priorities for future programs. In the UK a QALY is considered good value if it costs less than 2030 thousand pounds (200,000 RMB) per person. Public space makes significant improvement to QALYs at low cost since as an intervention it can be applied to a very wide group rather than person specific. As an upstream intervention to public health it can have huge benefits.

AGING POPULATIONS

As many developed countries move towards the problems of ageing populations, making our cities more age enabled to all sectors of society becomes essential. Being active through ageing is important and accessibility to quality landscape makes it easy and enjoyable to get out on foot. Uneven paving, steps, a lack of rest opportunities or toilets can all act as barriers to elderly wanting to take a walk whereas access to daylight, the natural environment and sociable places act as affordances. It's the challenge of the journey from the home to the destination that has a key impact on decision making. Just one thing wrong or difficult can stop elderly getting out and about, so the design of the physical environment is critically important. Details such as having arms on seats to help get up or down and choosing materials that don't get too hot or cold can make a huge difference Catharine suggests

In better understanding the issues of keeping active it is noteworthy that people are simply more likely to walk if they are outside rather than being indoors. Getting outside can also help to avoid social isolation and the resultant problems of loneliness and mental health. The

进而影响睡眠质量。科技创造的“虚拟人工景观”是无法取代真正的景观的。

有趣的是，老人对于目光所及的景观种类有着非常分明的态度，这主要是基于他们的儿时体验。年少时经常接触“自然”林地的老人到了老年仍旧倾向于选择富有林地的绿色空间，而封闭的绿色空间对那些年轻时候并不怎么接触林地的老人却具威胁性，可能会令其觉得“不安全”或对此种绿色空间带来的隔绝感感到不适。因此城市需要营造各色景观类型，以适应不同的用户群体。恰如凯瑟琳反复强调的那样，要打造一个城市空间的生态系统。而用户群体的存在反过来又可提高整体生物多样性。

重塑城市

将街道从车辆或“金属盒”(凯瑟琳喜欢这样称呼它们)中抢回，会是提升公共健康的一个重大驱动力，尤其在清除路面污染这一层面上。不止如此，我们还需要提升步行环境，好的步行环境应当是怡人、阴凉且能调动人的感官系统的。听鸟鸣、闻花香、感受天气变化与季节流转都很重要。凯瑟琳感叹道，然而目前“机动车辆在城市环境称王称霸，行人沦为了二等公民”。道路对老人而言尤为碍事，因为他们需要花时间过马路，且不得不对路面高度的变化，而且还疲于评估过往的车辆速度及活动。

自行车作为目前一种流行的城市交通方式貌似正走向复兴。凯瑟琳对此表示欢迎。但这的确需要再为行人提供独立的专门空间。因为行人们或许会担心与移动飞速的自行车尤其电动自行车分享本已足够狭小的空间。这对老人群体而言尤其是一个挑战。对凯瑟琳来说，她到晚年所偏爱的，或许应是“三轮车”之类的出行模式了，即可运载行李，又可遮阳避雨，而且全程笔直稳定。当然，随着科技日新月异的发展，这样的交通工具很可能会变得自动化，而且随着城市居民越发适应于共享经济，也便不必再担心“把控”车辆、车辆维修或停车问题了。这应该会减轻她的未来焦虑及精神压力。“金属盒”的大扫除定是她所欢迎的图景。



了解景观与个人健康之间的紧密联系本是一项由来已久的传统，但在上世纪里，随着现代医学的发展，一些为时甚久的基本常识被笼罩模糊，人们似乎将这两者剥离开来了。公共健康项目需要在社会各界、各色环境中开展。较之于其他高强度的矫正型公共医疗投入，将景观作为改善公共健康的工具进行投资是低成本高收益的。但要全方位衡量并见证高质景观的供给及反复维修给社会带来的整体回报，则需较长时间，有时甚至可能需要数十年。又该如何令资助机构相信投入景观可带来切切实实且不断累积增长的价值呢？

兴许我们正处于一个关键节点吧：社会再度意识到自然环境的重要性，未来的城市将变得绿色、干净兼具包容性。凯瑟琳在城市景观之于健康益处上独具开创性且掷地有声的贡献将为时间所证明。由衷期待她在这一领域的后续耕耘！

body also needs vitamin ‘D’ through sunlight and daylight can affect our circadian rhythms and impact sleep quality. Technology providing a ‘virtual and artificial landscape’ can never replace the real thing.

Interestingly the elderly appear to have differing attitudes to the type of landscape they encounter based significantly on childhood experiences. Those who were used to ‘natural’ woodlands and landscapes in their youth still seek them out in their older age, whereas enclosed, vegetated spaces can be threatening to those who were less accustomed to them when young. They may find they “don’t feel safe” or are uncomfortable with isolation. So cities need a variety of landscape types, suitable to different users, an ECOLOGY OF URBAN SPACES as Catharine repeatedly emphasises, where they could act to greatly enhance overall biodiversity.

RESHAPING OUR CITIES

Reclaiming streets from cars, or “boxes of metal” as Catherine likes to call them, can be a major driver towards improved public health, particularly in removing roadside pollution. However more than that we need better pedestrian environments, which are pleasant, shaded and can activate the senses. Hearing birdsong, smelling flowers, and enjoying the change of weather and season are important. Currently “cars are king in the urban environment and pedestrians are second class citizens”, states Catharine, becoming a touch animated. Roads are particularly barriers to the elderly who worry about having time to cross, have to deal with level changes and can have trouble assessing speeds and movements of vehicles.

A seeming renaissance of cycling as a popular form of urban transport is welcomed by Catharine, but it does

need a separate and dedicated space for pedestrians, who worry about sharing small spaces with fast moving bikes and particularly e-bikes, a challenge in particular for the elderly. Her preferred mode of transport in her own twilight years would perhaps be some form of “trike” which could perhaps carry luggage, have a canopy against sun and rain and would be upright and stable. Of course, with technology changing so fast there is a good chance that such a vehicle will be autonomous, so she won’t need to worry about “handling” it or even maintenance or parking as urban dwellers continue to adapt to a sharing economy, which should relieve her future worry and mental stress. Getting rid of all those ‘metal boxes’ is certainly something she welcomes.

There has been a long tradition of understanding the strong links between the landscape and personal health, however the last century seems to have alienated the two, with the growth of modern medicine obscuring some long standing basic understandings. Public health is something that needs to work across all sectors and all environments and investment in landscape as a public health tool is extremely low in cost and high in benefit compared to intensive corrective public medical costs. It takes a long time however to fully measure and witness the return on investment to society at large of quality landscape provision and of its recurrent maintenance cost, perhaps even decades. How to convince funding bodies of the real and valuable benefits that can be accrued?

Perhaps we are at a point when society is again realising the importance of the natural environment, and our future cities will be clean, green and inclusive. Catharine’s pioneering work and evidentiary contribution to the health benefits of urban landscape will have proved invaluable by that time. We welcome her continued endeavours. 