



AMA Journal of Ethics®

June 2025, Volume 27, Number 6: E402-408

MEDICINE AND SOCIETY: PEER-REVIEWED ARTICLE

Psychogeography as Embodied Connection to Place

Zoe Rose Kriegler-Wenk, MFA and John C. Green, PhD

Abstract

This article introduces *psychogeography* as a research method that relies on embodied practices of drifting (*dérive*) through a city, which are followed by subsequent creative cartography. Mapping and documentation that follow *dérive* promote fuller understanding of persons' patterns of embodying sensory data from urban environments. This article then applies key ideas from psychogeography to urban planning and public health.

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As soon as I step outside, I am met with an onslaught of sensory data. The sunlight through the leaves, the smell of recently bloomed roses, the constant buzz and chirp-chirp-chirp of springtime creatures, a child's garden strategically set to appeal to the fairies. A neighborhood cat follows me a few paces down the sidewalk hoping for a scratch behind the ears—I happily oblige.

Litter and sound increase as I near a busier road. Blue Moon bottles and Big Gulp cups; a billboard of Jennifer Anniston overlooks the intersection like a commercial Goddess of late 90s nostalgia. I scribble notes as I walk, sweat dripping from the backs of my knees, chest still tight with the memory of winter.
Zoe Rose Kriegler-Wenk, 2024

Enter, Psychogeography

In the summer of 1957, a group of avant-garde thinkers, artists, and political activists met to form the Situationist International movement under the leadership of Guy Debord.¹ Their declared aim was to revolutionize everyday life by transforming the urban environment from what they saw as the prevailing spectacle of alienated labor and passive consumption into a zone of adventure where citizens would encounter the city in playful rather than rational terms. They developed a process of arts-based embodied research, which they defined as *psychogeography*.

Psychogeography could set for itself the study of the precise laws and specific effects of the geographical environment, whether consciously organized or not, on the emotions and behavior of individuals. The charmingly vague adjective *psychogeographical* can be applied to the findings arrived at by this type of investigation, to their influence on human feelings, and more generally to any situation or conduct that seems to reflect the same spirit of discovery.²

At the heart of psychogeographical practice lies the *dérive* (drift), “a technique of rapid passage through varied ambiances.”³ By walking purposefully through the urban landscape in a state of heightened awareness, the *dériveur* remains open to and present with the sensory input they receive from their environment. The creativity that is sparked by this process substantiates a deeper connection between walking, creative output, and embodied cognition.⁴ While it is well documented that walking has many health benefits (improved circulation; improved bone, joint, and muscle strength; improved sleep; slower cognitive decline; improved immune function; and longer lifespan^{5,6}), it is the emphasis on our connection to the urban environment that makes psychogeography a fruitful embodied approach to collecting experiential data, one that recognizes the complexity of the relationship between the **built environment** and the human body.

Architecture and medicine have a rich and often parallel history. Renaissance doctors and architects each understood their subject’s interior by slicing sections into the whole: dissecting the human body to learn more about its function and dissecting an architectural design into interior sections to help construct the building.⁷ Leonardo da Vinci recognized the potential for the art of architecture to benefit from the science of medicine and vice versa, as architectural interiors often appeared beside anatomical drawings in his sketchbooks.^{7,8,9} X-ray technology appeared in tandem with modern architecture that unveiled progressively more of the interior of the structure to the outside gaze.⁸ The parallel evolution of medicine and architecture demonstrates that our bodies are connected to our urban environments not only because of our proximity to the buildings in which we live and work, but also because of a cross-disciplinary historical narrative.

The rest of this article examines the body’s connection to place—specifically, urban environments—through the lens of psychogeography and introduces the potential for rounding out quantitative geospatial data in public health with arts-based embodied research.

Cartography as Embodied Documentation

Mapping was adopted by the Situationists as a technique by which to record the spatial field of a *dérive*, beginning with the *dériveur*’s point of departure and extending out to the maximum area to be covered—from a single neighborhood to an entire suburb or section of the city. A process indebted to the earlier urban explorations of the Surrealists, cartography as embodied documentation was also influenced by the research of Chombart De Lauwe, who believed that “an urban neighborhood is determined not only by geographical and economic factors, but also by the image that its inhabitants and those of other neighborhoods have of it.”¹⁰ Figure 1 is a collaged map from the cover of Guy Debord’s *Psychogeographic Guide to Paris*, which provides a visual example of the Situationists’ process of embodied mapping that inspired subsequent psychogeographic practices.

Figure 1. *Guide géographique de Paris. Discours sur les passions de l'amour*, 1957



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Psychogeography utilizes mapping to document how the cumulative effects of architecture, street layouts, crowd patterns, weather variations, and visual, aural, and olfactory stimuli impress themselves upon the psyche. The practice of integrating walking and mapping has since been adopted in a wide range of contemporary artistic practices.¹¹ While this approach to data collection and documentation is both intentionally unpredictable (impulse and play are encouraged) and specific to the individual *dériveur*, it would be wrong to discount its value in a society that tends toward an overreliance on dehumanized data points. Figure 2 shows how an artist applies a psychogeographic approach to mapping her physical relationship to the architecture of her home.

Figure 2. Map of Motherhood in Apt 1, 2024



Reproduced with permission of Katherine Tanner Silverman.

Map hand-drawn by Katherine Tanner Silverman using crayon enhanced by Canva after drifting through her Chicago apartment with her 1-year-old son. The map displays a color-coded collection of footprints and of body parts regularly used in each room. The size of the body parts suggests what the room is used for and who it may belong to, lending itself to an interactive game for the reader.

In an ever-expanding discussion of social determinants of health, geospatial determinants (“home, the neighborhood, the built environment, and other location characteristics”¹²) are gaining traction as essential components of a comprehensive understanding of public health.^{12,13} Mapping is a common tool to track the spread of disease,¹² and recent publications advocate its increased value and use for individual patient care.¹⁴ Technologically advanced geographical information systems allow location-specific data to be collected and mapped at record speed, and **geospatial analysis** is being integrated into public health curricula across the United States.¹³ These scientific approaches are intended to produce and analyze large samples of quantitative data. In contrast, the psychogeographic approach to mapping produces a unique snapshot of qualitative data, the application of which can be beneficial in holistic approaches to urban health.

In an attempt to distill the concept of psychogeography, author Karen O'Rourke summarizes the intention behind the practice with the phrase, "remaking the world."¹¹ This lofty goal is shared across disciplines that seek to build new systems to better serve their communities. Psychogeography is, at its root, an attempt to heal the city by empowering communal agency, because residents are more likely to advocate for positive change in their cities if they are emotionally and physically connected to those places. In this way, embodied engagement with the city has the potential for meaningful applications to the broader canvas of urban design and public health.

Applications of Psychogeography to Urban Planning and Public Health

Jane Jacobs, writing in the 1950s on urban development, celebrated what she called the "pavement pounding city planner"—individuals who get to know parts of a city by walking through it—noting that "the walking and the good planning are two sides of the same attitude."¹⁵ This approach goes hand in hand with public health, because **addressing issues of urban planning** has direct consequences for the health of the populations living in the communities affected.^{16,17,18,19} Some researchers are already employing methodologies with psychogeographic qualities in their work. For example, wearable mobility sensors have been attached to study participants to gather data on the effort needed to walk through sections of the city. The intention of the study was both to help the individual create a customized mobility plan and to make the case for improvement of physical structures throughout the neighborhood.¹⁹ The integration of embodied approaches to data collection should be encouraged, with the priority placed on research methodologies and policy initiatives that engage the physical environment they seek to improve. The practice of embodied walking and the focus on the body's relationship to architecture and environment remind those working in the public health sphere about the value of on-the-ground embodied research for crafting holistic approaches to community well-being.

Conclusion

Interaction with and documentation of the urban environment shed light on the depth of connection between the body and the spaces it inhabits. Psychogeography requires establishing a dialogue between our internal and external spaces. Facilitating an openness to and awareness of environmental sensory input actuates the agency of the individual and promotes the goal of transforming the urban environment for the better. The tandem histories of architecture and medicine provide a unique perspective of the city as a macro-body in need of healing, one whose treatment has the potential to heal not only itself, but also the human bodies who reside within it.

I'm less careful to follow my route on the way back; less focused on recording every detail.

Cars screech to my left as I run my fingers around the stone wall of a cemetery, prying a piece free to take home with my other withered treasures.

A memorial to a child outside an apartment complex gives me pause. The weary stare of an elderly resident sets my feet in motion once more.

A magnolia tree reminds me of my late grandmother; how we used to climb to the roof from the tree in her front yard.

The sun is setting, and the sky is radiant. Beams of gold light shoot out from the clouds over the drive-through White Castle, a fast-food fairytale.

I turn towards home (Zoe Rose Kriegler-Wenk, 2024, unpublished).

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Zoe Rose Kriegler-Wenk, MFA is a writer, editor, and an interdisciplinary theatre-maker. She is a graduate of Smith College (BA, English and theatre), Arthaus Berlin (embodied dramaturgy certificate), and Columbia College Chicago (MFA, European devised performance practice), and is the senior editorial assistant at the *AMA Journal of Ethics*. Her work appears in the *Athens Journal of Humanities and Arts*, *European Stages*, and *Enchanted Living* and has been featured in 2 recent anthologies; *Theatre Responds to Social Trauma: Chasing the Demons* (Routledge, 2024) and *Essays on Psychogeography and the City as Performance: Drifting Through Wonderlands* (Cambridge Scholars Publishing, 2024).

John C. Green, PhD is a stage director and adjunct professor of theatre at Columbia College Chicago. His latest book is *Essays on Psychogeography and the City as Performance: Drifting Through Wonderlands* (Cambridge Scholars Publishing, 2024). His other publications include *Mnemodrama in Action: An Introduction to the Theatre of Alessandro Fersen* (Cambridge Scholars Publishing, 2019), “The Hunchback Variations” in *Music on Stage* (Cambridge Scholars Publishing, 2015), and “Going Back to Dionysus” in *(Dis)placing Classical Greek Theatre* (University Studio Press, 1999). His award-winning productions have been staged in Europe, the United States, the United Kingdom, and Australia.

Citation

AMA J Ethics. 2025;27(6):E402-408.

DOI

10.1001/amajethics.2025.402.

Conflict of Interest Disclosure

Authors disclosed no conflicts of interest.

The viewpoints expressed in this article are those of the author(s) and do not necessarily reflect the views and policies of the AMA.