

capture our attention to the extent that we cannot help thinking how to resolve them. Paradoxical problem situations inspire the creative imagination, much like the famous koans that are used in Japanese Zen training to provoke people to defy rationality and free their minds. While koans are beautiful and poetic, the challenge to come up with a sensible response can also be intolerable (Van de Wetering 1999). The mind-boggling nature of paradoxes and the difficulties they cause for our everyday thinking skills also make paradoxes a fascinating intellectual toy for linguists, logicians, and mathematicians (Hofstadter 1979). But that is not the way we want to talk about paradoxes in this book. Here we deal with real-world paradoxes that are caused by conflicting values and needs on the problem side, or by the incommensurability of design outcomes on the solution side.

In real-world situations, paradoxes are particularly formidable when the needs, interests, and “object worlds” (Bucciarelli 1994) are rationalized by different stakeholders. These perceived rationalities become a problem when a personal or institutional worldview is seen as the only one possible, making life hard for the problem solver, who is caught in the middle. Yet as Whitbeck has observed, designers can somehow deal with these knotty problems. In the Young Designers project on Integrated Living (case 5), the care organizations unquestioningly believed that part of their responsibility was to protect the mentally handicapped people in their charge. And they rationalized this “responsibility to protect” to include “complete control over their environment”—even if this meant isolating the mentally handicapped in their city residences. This result is, of course, completely at odds with the government objective of integrating these mentally handicapped into society. By being isolated, the mentally handicapped are further removed from companionship than ever (in the old days, they would at least have had each other to talk to) and are very far from being able to lead “normal” and “rich” lives in society. The paradox is complete. But one can see where some assumptions of the care organizations could be questioned, “cracked open,” and investigated. Does “care” really mean “protect,” and does “protection” really mean “control”? The government side of the paradox also needs to be unlocked: What are the assumptions that informed the ministry’s thinking, in particular the presumed need to integrate mentally handicapped people in society? Are these assumptions valid? And what are the ministry’s preconceptions about the role the care organizations would be playing in the new situation? Revealing the core paradoxes provides designers with an entry point for examining these assumptions.