EduCare

Design Research with Educators

Uncovering Key Issues & Wellbeing in Design Schools

Brief Report · Educator Perspective · Work Package 2

Project partners:

BAU, College of Arts & Design Barcelona

LUCA School of Arts

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The Care Lab

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All institutions and individuals are anonymised throughout this report.
All research methods were conducted and described in Catalan, Spanish or English.

All content was reviewed, validated and approved by the project partners, who remain fully responsible for its accuracy, originality and compliance with Erasmus+ requirements. Artificial Intelligence tools were used only as support instruments for specific tasks (survey data systematisation, extraction of structured information from focus group transcripts, and drafting support).

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1 Executive Summary

This brief report presents the educator-perspective research conducted within Work Package 2 of the EduCare project. It integrates three complementary research methods: an international questionnaire completed by 50 educators and academic staff, 17 online in-depth interviews with educators, and three focus groups with educators and academic leaders in higher art-and-design education. All evidence was analysed through the shared EduCare analytical framework and is reported anonymously.

Across all methods, care is understood as simultaneously relational and pedagogical. Educators express it through listening, psychological safety, trust, adaptive teaching, constructive feedback, student agency, inclusive participation, thoughtful critique, and attention to the conditions in which creative risk and learning become possible.

The most consistent finding is not an absence of care among individual educators. Rather, care is too often sustained through individual goodwill, extra emotional labour, informal memory, and personal sacrifice. Time scarcity, role overload, precarious labour, large groups, unclear professional boundaries, limited pedagogical support, weak referral pathways and output-oriented institutional cultures make caring practice uneven and difficult to sustain.

The evidence therefore points toward a transition from individualised care to a shared care ecosystem: one in which educators, students, colleagues, support services, programmes, and institutions carry differentiated responsibilities with protected time, clear support pathways, pedagogical development, staff care, visible shared values, more developmental approaches to critique and assessment, and structures that support flexibility without making it arbitrary.

KEY FINDINGS AT A GLANCE

Theme	What the educator evidence shows
Primary care model	Care is carried by individual educators, coordinators and personal relationships rather than institutional design.
Dominant care gap	Care as intention without infrastructure: no consistent protocols, resources or shared care pathways.
Top barrier	Time poverty, role overload and precarious labour conditions.
Curriculum gap	Care, inclusion, feminism and ecology appear as project topics without shaping methods, assessment and everyday relations.
Institutional paradox	Discourses about care coexist with market-driven decisions.

Theme	What the educator evidence shows
Systemic diagnosis	Grades, measurable success, employability, competition and acceleration create a wider ‘care-less’ educational circle.
Strategic opportunity	Care as design education’s defining quality — and survival differentiator — in the AI era.

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2 About EduCare and This Report

EduCare — Teaching as a Caring Profession: Nurturing Care & Creativity in Higher Design Education — is an Erasmus+ Cooperation Partnership that develops a care-centred educational framework for higher design education. The project responds to growing concerns about wellbeing, mental health, inclusion and burnout in design schools, for students and educators alike.

Work Package 2 researches and defines care gaps in design education. This document is one of its two planned brief reports and corresponds to activity WP2.1, Design Research with Educators. It summarises the full body of educator-perspective evidence: what educators and academic leaders understand by care, how care is practised today, what obstructs it, what an ideal caring institution would look like, and which enablers and good practices already exist. A companion brief report presents the student perspective; an internal report and the beta version of the Care-Centred Practices Handbook build on both. The findings serve as a blueprint for Work Package 3, which develops care-centred methodologies and training for design educators.

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3 Research Methods and Protocols

The educator research combined three qualitative and quantitative methods, applied between December 2025 and July 2026 across the partner network. All three strands were analysed with the same analytical framework so that findings could be integrated into a single educator-perspective evidence base.

3.1 OVERVIEW OF THE EVIDENCE BASE

Method	Participants / scale	Primary contribution
Questionnaire	50 educator and academic-staff responses	Shared vocabulary of care, prevalence signals, examples of care and lack of care, institutional supports and obstacles, ratings of caring pedagogical practices.
Online interviews	17 educators	Detailed accounts of caring teaching, critique, boundaries, situated support, professional reflection and concrete pedagogical practices.
Focus groups	3 groups with educators and academic leaders	Programme and institutional perspectives on workload, labour conditions, organisational culture, systemic barriers and desired change.

3.2 INTERNATIONAL EDUCATOR QUESTIONNAIRE

An online questionnaire was distributed internationally through the partner institutions and their networks, addressed to educators and academic staff in art-and-design higher education across Bachelor, Master, postgraduate, doctoral and professional contexts. It combined open questions with five-point Likert ratings, organised in thematic blocks: the meaning of care in education; care in classroom relationships; care in teaching practices; care, attention and creativity; self-care and sustaining presence; and institutional supports, obstacles and good practices. Fifty complete responses were received and analysed.

3.3 ONLINE IN-DEPTH INTERVIEWS

Seventeen semi-structured interviews were conducted online with educators teaching at Bachelor, Master, postgraduate, doctoral and professional levels. Interviews followed a common guide while leaving room for each educator's own experiences and examples. The guiding questions were:

- What does a caring learning environment mean to you in the context of design education?
- Can you share a concrete example of a memorable, caring teaching experience? What made it possible?

- What is an example of 'lack of care' that you have experienced in education? What might have helped?
- What personal practices help you stay present, balanced and engaged in your work?
- Which aspects of the institutional culture support or hinder caring educational practices?

Interviews were recorded with informed consent, transcribed, and analysed thematically. Findings are integrated anonymously as one educator-perspective evidence base. The interviews make a distinctive contribution by showing care from inside everyday teaching practice. They reveal how educators frame briefs, manage critique, structure participation and group work, support students through uncertainty, approach sensitive topics, negotiate assessment, maintain professional boundaries and respond to institutional pressures. They also show that care is not an additional service but part of how teaching itself is designed and enacted.

3.4 FOCUS GROUPS WITH EDUCATORS AND ACADEMIC LEADERS

Three focus groups were conducted with directors, programme coordinators, heads of studies, itinerary coordinators and educators. Sessions combined semi-structured group conversation with participatory, collaborative visual mapping organised around four areas: as it is today; barriers; hopeful bridges and workarounds; and as we want it to be. Sessions were facilitated by the EduCare research team, conducted confidentially in Catalan, Spanish or English.

3.5 THE EDUCARE ANALYTICAL FRAMEWORK

All transcripts and open responses were coded with the shared EduCare analysis framework: four dimensions of care are examined through four lenses, each read across three layers of educational life. Sections 4.1–4.4 of this report work through the four lenses, each subdivided by layer; recurring findings are marked throughout as CARE GAP, ENABLER or TENSION.

Four dimensions of care	Four lenses	Three layers
Relational care	1 · As it is today	a · Interactions & behaviours
Pedagogical care	2 · Barriers to caring practices	b · Organisational culture
Creative conditions	3 · As we want it to be	c · Underlying conditions
Institutional culture	4 · Enablers & good practices	—

3.6 ETHICS, ANONYMISATION AND DATA PROTECTION

Participation in all strands was voluntary and based on informed consent. Questionnaire responses were collected anonymously. Interview and focus-group recordings were transcribed and then anonymised: names of individuals and institutions were removed or replaced with generic roles, and quotes originally spoken in Catalan or Spanish were translated into English preserving register and meaning. Raw data are stored on access-restricted project drives in line with GDPR; only anonymised material is reported here.

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4 Findings

4.1 AS IT IS TODAY

a · Interactions & behaviours

Care is not absent from design schools. Across the questionnaire, the interviews, and the focus groups, care is already actively practised in design education through attention, adaptation, and presence. Educators define care as an educational climate where students feel safe, respected, heard, and supported to grow; "listening without judgement" and "seeing students as humans", as questionnaire respondents put it.

> *"Being open to listening even if I do not necessarily understand the position of the student."*
> — Questionnaire respondent

> *"Caring learning means cherishing the humanity of everyone involved."*
> — Educator interview

Interviews show that adaptation occurs through the design of teaching itself. Educators combine lectures, exercises, visual materials, making activities, field engagement and discussion; use smaller groups to support quieter participants; and create alternative ways of contributing for students who may not be comfortable speaking immediately in a plenary setting. Walking meetings, reflective exercises, cultural visits and informal conversations are also used to reduce hierarchy and create different conditions for engagement.

> *"It is not only about what I teach, but how I engage students and what type of context I facilitate: can they fail, can they find support?"*
> — Questionnaire respondent

Psychological safety is therefore understood as a creative condition. Design students are regularly asked to expose personal ideas, values and unfinished work to others. A caring environment makes it possible to take those risks without critique becoming too personal. Safety does not mean avoiding difficulty or disagreement; it means structuring challenges so that students can remain engaged, ask questions and continue developing their work.

> *"We turned peer review into a structured, collaborative game. The playful structure removed the fear of judgement."*
> — Questionnaire respondent

Group formation also emerges as an important care practice. Interviews show that immediate self-selection can reproduce popularity, friendship networks and unequal confidence, while quieter students or newcomers may be left at the

margins. Some educators therefore discuss strengths, preferred roles, working rhythms, comfort zones and learning goals before groups are formed, or initially assign groups before gradually returning greater responsibility to students.

Care also includes attention to professional boundaries. Educators frequently become trusted figures for students experiencing emotional, psychological, financial or social difficulties. Many are willing to listen and provide an initial response, while recognising that they are not therapists and may also be responsible for assessment. Caring practice therefore includes knowing when to accompany, when to adapt and when to connect a student to specialist support.

> *"Teachers can respond humanly without becoming therapists."*
> — Educator interview

ENABLER	Multiple participation formats, small-group discussion, structured group formation, proactive check-ins and permission to share unfinished work are practical, relatively low-cost ways of strengthening care and creative participation.

CARE GAP	Responsive teaching still depends heavily on the attentiveness, confidence and personal capacity of individual educators. Students may therefore experience very different levels of care across courses and teaching teams. Personalised support depends on small scale and team memory remaining intact, it has no structural continuity if people leave.

b · Organisational culture

The dominant organisational pattern is care as an intention without infrastructure, it's carried by people instead of systems. Institutions have a genuine orientation toward care, particularly toward students, but lack the structures, protocols and instruments to make it consistent: "it's like an intention on the part of the institution to care, but it's not carried out in practice."

In smaller institutions, educators and coordinators may know students by name and can raise specific concerns rapidly within teaching teams. This proximity creates responsiveness and a strong sense of belonging. It can also make care fragile: when a key person leaves, changes role or becomes overloaded, the knowledge and support they carried may disappear.

> *"On the part of the institution I think it's non-existent; on the part of the people who work there, yes, it is present."*

— Focus group, Coordinator

Some programmes already provide important organisational enablers. Interviewees describe stable teaching teams, fixed cohorts, dedicated classrooms, student-representative meetings, course committees and informal sharing of teaching materials. These practices strengthen continuity and allow educators to respond collectively rather than individually.

However, teaching cultures remain uneven. Many educators begin teaching without formal pedagogical preparation, induction or mentoring. Junior educators often rely on informal peer support, while new staff may have to recreate course structures and materials from the beginning. Course evaluations may also arrive only after a course has ended, limiting their usefulness for the students who raised the concerns.

A recurring distinction across the focus groups is the difference between care as a topic and care as a method. Institutions may teach projects about inclusion, feminism, ecology, health or social responsibility while classroom relations, critique formats, workloads and assessment systems continue to reproduce exclusion or pressure.

> *"I think we have it as a topic, not as a method."*
> — Focus group, Coordinator

The focus groups also reveal a family-business paradox. Staff may feel emotionally connected to their institution and give substantial personal energy because they believe in its educational community. Yet that attachment can make it difficult to recognise or resist unsustainable expectations, particularly when commercial or organisational decisions override relational values.

> *"You form part of a living organism and you believe in it because it's part of your feelings. But that can become a vicious circle, because you might be giving more than is viable to sustain a full life."*
> — Focus group, Leader

Session leaders also articulate the family-business paradox of private institutions: deep emotional investment from staff coexists with business logic that can override relational values.

> *"You form part of a living organism and you believe in it because it's part of your feelings. But that can become a vicious circle, because you might be giving more than is viable to sustain a full life."*
> — Focus group, Leader

CARE GAP Care and critical values appear in the curriculum as project topics but not as a transversal methodological orientation shaping teaching, assessment and everyday relations.

ENABLER	Stable teaching teams, student participation, shared resources and close institutional relationships create real care capacity and can support rapid, coordinated responses.

TENSION	Affective investment in the institution ('family culture') can be used to justify absorbing unsustainable workloads.

c · Underlying conditions

Time scarcity is the dominant structural constraint; for coordinators juggling incompatible roles, for educators, and for students with no time to develop ideas deeply. Beneath it, leaders name hyperproductivism — the societal imperative of constant, measurable output — as the macro-condition shaping everything else, and acknowledge the risk of reproducing it in their own classrooms. Socioeconomic inequality within the student body adds an often invisible care disparity: students commuting long distances or working to pay fees lose access to informal learning time and campus life.

> *"The greatest care you can give to any person is to give them time."*
> — Focus group, Leader

Interviewees connect time scarcity to wider questions about what institutions recognise as academic work. Preparation, feedback, mentoring, emotional labour and pedagogical reflection are essential to educational quality but are frequently less visible and less rewarded than research, administration or market-facing activity.

For coordinators, the multiplication of roles further reduces depth of attention. The same person may be expected to teach, coordinate programmes, respond to student welfare concerns, manage administration, communicate with external partners and represent the institution commercially. Care remains expected, but the conditions for sustained presence are weakened.

The research also shows that student diversity has increased without educational structures always adapting accordingly. Students differ in language, educational background, neurodivergence, disability, financial resources, employment, family responsibilities, commuting time, cultural references and confidence with open-ended learning. Educators often respond through local adaptations, while institutional timetables, assessment systems and assumptions about attendance continue to be organised around an imagined standard full-time student.

> *"It doesn't work for every student"*
> — Educator interview

Physical space also shapes relational and pedagogical care. Dedicated studios, shared work areas, circular layouts and informal meeting places can support continuity,

belonging and dialogue. Conversely, intimidating coaching arrangements, overcrowded rooms or a lack of stable shared space can reinforce hierarchy and reduce opportunities for informal support.

Participatory and community-facing projects require additional conditions. Educators describe the need for time, budget, ethical preparation, external partnerships and structured debriefing before and after contact with communities or participants. Institutions may encourage socially engaged design while underestimating the practical and emotional infrastructure required to conduct it responsibly.

Beneath these immediate conditions, educators and leaders identify a wider culture of hyperproductivity. Grades, measurable success, competition, employability and accelerated output shape both student and staff experience. Educators recognise that they may unintentionally reproduce the same pressures in their classrooms that they themselves experience institutionally.

CARE GAP	Time poverty is a systemic condition that undermines care at every level: for students, educators, and coordinators alike. Student diversity is frequently addressed through individual adaptation rather than through institutionally designed inclusive pathways. Participatory and socially engaged education may be encouraged without sufficient time, budget, partnerships, ethical guidance, or debriefing structures.
TENSION	Educators risk unconsciously reproducing with students the same hyperproductive dynamics they receive from the institution. Flexibility is necessary for equity, but when it depends on invisible individual decisions it may become inconsistent, paternalistic or perceived as unfair.

4.2 BARRIERS TO CARING PRACTICES

a · Interactions & behaviours

Feedback and critique are among the most important expressions of pedagogical care, but also among the practices most likely to become harmful. Across the questionnaire and interviews, educators distinguish constructive challenge from feedback that is vague, delayed, personal, overly authoritative or impossible for students to translate into action.

> *"It is not only about what I teach, but how I engage students and what type of context I facilitate: can they fail, can they find support?"*
>
> — Questionnaire respondent

Interviewees describe how experienced design judgement may remain intuitive and insufficiently explained. Educators may know that a project is not working, but students still need to understand what has been observed, why it matters and what they can do next. Feedback loses its educational function when it reflects the educator's personal preference rather than the student's intention, or when praise during a project is followed by a low grade without a clear explanation.

Educators across the questionnaire and interviews stress that critique, feedback and teachings should not become less demanding, but that the critique should separate the student from the work, explain the grounds of judgement, and leave the student with agency. Rubrics can support transparency, but they cannot fully replace professional judgement or capture all forms of creative growth, experimentation and personal development.

> *"There is still a lot of intuition involved in design education, and that intuition is used to give feedback. I don't think that is caring. The intuitive part is valid, but you can always rationalise it and provide an explanation. I think you owe that to the student."*
>
> — Educator interview

CARE GAP	Feedback loses its caring function when it is unexplained, delayed, one-directional or detached from the student's own process and intentions. Belonging and group participation are often left to chance. Without active facilitation, group work can intensify existing inequalities rather than support peer learning.
ENABLER	A caring critique sequence begins by clarifying intention, describing before judging, identifying what is working, explaining intuitive responses, asking questions before prescribing and offering concrete directions for further development. Educators describe group formation as a pedagogical responsibility and suggest supporting this process. Discussed methods are structured discussion of strengths, roles, working rhythms, expectations and comfort zones can make collaboration more equitable.
TENSION	Creating space for vulnerability is not the same as requiring disclosure. Caring teaching must preserve the student's choice about whether and how personal experience enters the learning process. Educators also face complex professional boundaries. Students may approach them with emotional, psychological, financial or social concerns, while the educator is simultaneously a supervisor, assessor and authority figure. The same relationship that enables trust can make

disclosure difficult or create uncertainty about how personal circumstances should affect assessment.

b · Organisational culture

Mental-health, welfare and conflict pathways are often unclear or fragmented. Educators may know that specialist support exists but remain uncertain about referral thresholds, confidentiality, documentation or what happens after a student is referred. In some cases, responsibility remains with the educator because services are distant, overloaded or insufficiently connected to teaching teams.

> *"There is psychosocial support, but students still have to take the step themselves towards someone they do not know—often through an unfamiliar email address. That makes the threshold very high."*
>
> — Educator interview

Staff care is similarly underdeveloped. Institutions expect educators to be emotionally available, flexible and responsive while offering limited formal support for educator wellbeing, burnout prevention, pedagogical development or difficult teaching situations. Informal peer relationships therefore carry much of the support work.

> *"Structural care for staff is absent. There's no policy on how people get taken care of here."*
>
> — Focus group, Coordinator

Interviewees describe entering teaching without induction, formal pedagogical preparation or a shared set of resources. Junior educators often learn through informal observation or reproduce how they themselves were taught. When teaching teams change, effective practices may be lost because they were never documented or collectively owned.

CARE GAP

No formal structure for staff wellbeing: support, career development and burnout prevention depend on informal networks.

The existence of a support service does not guarantee accessibility. Referral remains high-threshold when students must independently contact an unknown person during a period of distress.

Care knowledge is insufficiently documented and transferred. Good practice may disappear when an individual educator leaves or changes role.

TENSION	Educators need autonomy to adapt their teaching, but autonomy without shared values or accountability can allow harmful and outdated practices to continue.

c · Underlying conditions

Assessment systems sit in tension with care values. Compulsory rubrics can support transparency and consistency, but may constrain recognition of forms of intelligence, judgement and creativity that resist quantification. One coordinator proposed a simple pass / not-pass system to reduce anxiety and re-centre learning.

One-size-fits-all teaching similarly overlooks neurodivergence, mental health, cultural difference and unequal access to time and resources. Beneath these issues, labour precarity is identified as a structural root of the care deficit: poorly paid educators may work across multiple institutions, leaving less time for preparation, pedagogical development and sustained presence.

The focus groups extend this diagnosis outward, describing a wider educational system as "care-less." Neoliberal measures of success, bell-curve grading, competition, employability pressure and AI-related uncertainty all work against slower, relational and reflective learning.

> *"The work conditions of the teaching profession affect the quality of pedagogical practice radically. This is the problem and the injustice."*
>
> — Focus group, Coordinator

CARE GAP	Labour precarity, educators working multiple jobs at low pay, is the structural root of inconsistent care quality.

4.3 AS WE WANT IT TO BE

a · Interactions & behaviours

Educators want classrooms where students can ask questions, expose unfinished work and acknowledge uncertainty without fear of ridicule. Psychological safety is not imagined as permanent comfort, but as a relational condition in which students can take creative risks, receive demanding feedback and remain engaged through difficulty.

> *"An environment that allows mistakes and supports not only knowledge transfer but also the development of the personality."*
>
> — Questionnaire respondent

Feedback should be concrete, dialogical and process-oriented. Students should understand what an educator sees, how a judgement was formed and what possible

next steps are available. Critique should support the development of the student's own judgement rather than replacing it with the educator's preferred solution.

Different participation routes should be treated as legitimate. Small-group dialogue, visual work, making, writing, embodied activities and time for individual reflection can complement plenary conversation. This is especially important for students who process information differently, are working in an additional language or need more time before speaking publicly.

> *"The idea is not to be the sole support but to establish clear, effective accompanying paths, and make those paths easy to understand for anyone in a situation that exceeds the normal institutional framework."*
>
> — Focus group, Leader

Group work should be actively facilitated rather than assumed to function automatically. Educators envision processes in which students discuss roles, expectations, access needs, strengths, working rhythms and conflict before collaboration problems become entrenched.

Personal or sensitive material should be approached with consent and choice. Students should be able to bring context into the classroom without being required to disclose experiences they would prefer to keep private. Educators want to support difficult discussion while retaining clear boundaries and referral pathways.

Participatory and community-facing projects should include preparation before external contact, accompaniment during the process and structured debriefing afterwards. Students should not be expected to manage ethical responsibility, emotional complexity or external relationships without support.

b · Organisational culture

Care should be explicitly recognised as part of teaching rather than treated as an optional personal quality. Institutions should articulate what caring pedagogy means in relation to feedback, assessment, participation, boundaries, workload and professional conduct.

Educators call for clear mental-health, welfare and conflict protocols. These should identify what educators can reasonably do, when specialist support is needed, how referral works and what responsibilities remain after a referral. Support pathways should be easy to find and connected to the everyday life of courses and programmes.

Teaching teams should share responsibility for care. When one educator becomes aware of a student's circumstances, relevant information and agreed adjustments should not depend solely on that person's memory. Collective responsibility requires appropriate confidentiality, documentation and communication.

> *"I'd like the institution to return to that ethical positioning: we aren't going to cure the planet, but we can take care of people — in classes, in the institution, and in the communities where design acts."*
>
> — Focus group, Coordinator

New and junior educators should receive induction, mentoring and access to shared resources. Pedagogical development should include critique, group facilitation, assessment, inclusive participation, sensitive topics, referral and educator boundaries. Educators also need consultation spaces in which they can discuss difficult situations without being individually blamed.

Student participation should extend beyond end-of-course evaluations. Course committees, student representatives, co-designed community agreements and mid-semester feedback allow concerns to influence the present learning experience.

> *"A circular classroom without hierarchy, where educators are also learners, not top down."*
>
> — Questionnaire respondent

c · Underlying conditions

The desired future requires working conditions that allow educators to be present, prepared and relational. Participants call for dignified pay, more stable employment, manageable student-to-educator ratios and sufficient paid time for preparation, feedback, coordination and reflection.

Assessment should value process, experimentation and growth alongside final outcomes. Clear criteria remain important, but should not reduce creative learning to what can be easily measured. Several participants also advocate slower educational rhythms, with more time to develop ideas, revise work and learn through uncertainty.

Institutions should recognise unequal starting positions by supporting flexibility around language, disability, neurodivergence, employment, commuting and caring responsibilities. This flexibility should be guided by shared principles so that it does not depend only on individual negotiation.

> *"Being very demanding about care will probably be the differential point and the survival insurance in a world where design will be structured through artificial intelligence — where care, as something AI can't really value, won't exist in AI. But society will continue to need it."*
>
> — Focus group, Coordinator

TENSION	AI creates pressure to prove the value of long-term design education, while strengthening the argument that relational care is uniquely important.

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4.4 ENABLERS AND GOOD PRACTICES

a · Interactions & behaviours

The evidence identifies several practices that already support care in everyday teaching. Educators use multiple forms of participation, including small-group discussion, visual work, writing, sketches, roleplay and embodied activities. These formats reduce dependence on immediate verbal confidence and allow students to engage in different ways.

Educators also normalise uncertainty by sharing unfinished, failed or unpredictable aspects of their own practice. Quick exercises and prototypes help students act before reaching certainty or polish, while structured group formation can make collaboration more equitable by addressing roles, strengths, rhythms and expectations explicitly.

Alternative feedback formats can reduce hierarchy. Walking supervision, informal conversations and structured peer-feedback exercises create conditions in which critique feels more like shared inquiry than one-directional judgement.

> *"Walking lowers the barrier and makes the meeting feel more like a conversation than a supervision meeting."*
>
> — Educator interview

ENABLER

Multiple participation routes, structured group formation, informal feedback formats and explicit permission to work with uncertainty can strengthen both care and creative engagement.

b · Organisational culture

Several organisational practices already function as small forms of care infrastructure. Weekly workload check-ins make cumulative pressure visible and allow teaching teams to adjust expectations before overload becomes a crisis.

> *"Every week when I go to class, one of the things we do is review as a group what they have that week."*
>
> — Focus group, Coordinator

Tutoring becomes more caring when it is framed as accompaniment rather than only project correction. Regular tutoring can provide space for planning, reflection, broader concerns and referral.

Student participation is another important enabler. Course committees, student representatives, co-created agreements and in-semester feedback allow students to influence their learning environment while change is still possible.

Collegial sharing and collaborative teaching also make care more sustainable. Stable teaching teams, mentoring, shared materials and peer reflection prevent individual educators from having to develop practices alone and help protect continuity when staff change.

ENABLER	Workload check-ins, tutoring as accompaniment, student participation and collegial sharing can turn informal care into a more collective and continuous practice.

c · Underlying conditions

Pedagogical freedom is an important strength of design education because it allows educators to adapt methods and formats to particular groups. This freedom is most effective when supported by shared values, sufficient resources and opportunities for reflection.

Process-first pedagogy is another existing advantage. Design education can value experimentation, iteration, multiple forms of intelligence and diverse outcomes rather than one predetermined solution. Continuous assessment can support this orientation when feedback is timely and process is genuinely recognised.

Physical learning environments also matter. Dedicated studios, shared workspaces and informal meeting areas can strengthen belonging, visibility and collaboration.

Participatory and socially engaged projects are more sustainable when institutions provide time, budget, ethical preparation, external partnerships and structured debriefing.

Making care work visible is itself an enabling strategy. Documenting practices, sharing cases and creating collective repositories can turn individual workarounds into shared pedagogical knowledge.

> *"Care in itself is allowing yourself the time to treat something with care. What design is dedicated to is allowing that time."*
>
> — Focus group, Leader

ENABLER	Care becomes more sustainable when effective practices are documented, shared and supported by time, space, resources and collective responsibility.

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5 Priority Care Gaps

Integrating the three methods, ten priority care gaps emerge. They are not ranked; several are interdependent. They are the starting point for defining key care gaps in WP2.3 and for the Care-Centred Practices Handbook.

Gap	Description
1 · Time and workload	Care requires protected time for presence, preparation, feedback, coordination, reflection and accompaniment.
2 · Labour and staff care	Precarity, unpaid work, low recognition and insufficient support undermine educator wellbeing and continuity of care.
3 · Consistency and infrastructure	Care varies by person, course and programme because shared values, protocols, roles and responsibilities remain underdeveloped.
4 · Boundaries and referral	Educators need clear, warm, accessible pathways for mental-health, welfare, conflict and specialist support.
5 · Feedback and critique	Critique can become personal, vague or humiliating unless it is concrete, dialogic, developmental and held within trust.
6 · Equity and flexibility	Different circumstances and ways of learning require inclusive design and flexible pathways supported by shared principles.
7 · Pedagogical competence	Disciplinary expertise must be accompanied by pedagogical preparation, mentoring, reflection and willingness to adapt.
8 · Assessment and output culture	Grades, competition, polished outcomes and measurable productivity can undermine experimentation, collaboration and process.
9 · Recognition	Relational, emotional and care-intensive teaching labour remains hidden and insufficiently valued.
10 · Coherence	Institutional language about care does not always align with everyday teaching, employment, management and commercial decisions.

CROSS-CUTTING READING

Most of these gaps are structural rather than interpersonal. The care educators already provide is real, but it is doing the work that institutional design should share, which is why it is felt as generous yet fragile, and why it exhausts the people who carry it.

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6 Tensions and Emotional Patterns

The evidence is characterised by recurring tensions rather than problems with one simple solution. Care-centred education requires educators and institutions to hold competing values without allowing responsibility to fall entirely on individuals.

TENSION	Private culture vs. market logic: staff give emotionally to organisations whose decisions are commercially driven.
TENSION	Care as individual commitment vs. the need for systemic structures: goodwill is real but fragile without institutional design.
TENSION	Care and challenge; psychological safety should enable critique, experimentation and productive discomfort, but challenge becomes uncaring when it turns into humiliation, intimidation or abandonment.
TENSION	Flexibility and fairness; identical treatment may reproduce inequality, while individual adaptations can appear arbitrary when they are not supported by shared principles.
TENSION	Closeness and professional boundaries: trust and approachability enable students to seek support, while educators cannot become unlimited support persons, particularly when they also assess students.
TENSION	Assessment is expected to recognise learning, yet grades and bell curves produce competition and narrow definitions of success.
TENSION	Teaching freedom vs. the need for shared protocols and collective accountability for care.
TENSION	Many care problems are experienced inside design education but originate in wider political, economic and institutional systems.

Emotionally, educators and leaders express ambivalence: affection for their institutions alongside chronic frustration with structural conditions; fatigue from multi-role overload and invisible emotional labour; moral uncertainty when deciding how to adapt, intervene or refer; reflexive guilt at reproducing the very pressures they want to protect students from; isolation when systemic problems are carried as individual responsibility; and frustration at the distance between care discourse and institutional practice.

Yet the dominant register is critical hope: a persistent belief that care is possible, valuable and worth fighting for. This is accompanied by agency through naming problems, making hidden work visible, experimenting with alternative practices, building collective approaches and connecting local action to wider systems.

7 Conclusion

The educator research describes a field in which care is widely valued and actively practised, but insufficiently supported as a shared educational responsibility. Educators create psychological safety, adapt teaching, facilitate participation, explain feedback, accompany uncertainty and respond to students' different circumstances. These practices are not additional to teaching: they are part of how meaningful design education is designed and enacted.

Yet the quality and continuity of care remain dependent on who is teaching, how much time they have and whether they are personally able to absorb work that has not been formally recognised. Precarious employment, fragmented roles, high workloads, large groups, weak referral pathways, limited pedagogical development and output-oriented cultures make caring practice inconsistent and difficult to sustain.

The findings therefore point toward a transition from individual goodwill to a shared care infrastructure. At classroom level, this means constructive critique, multiple routes for participation, supported group work, respect for agency and careful approaches to sensitive topics. At programme level, it requires coordinated workloads, mentoring, student participation, documentation and connected support pathways. At institutional level, it requires dignified labour, protected time, staff care, explicit values and coherence between care discourse and everyday decisions.

Care-centred design education should not be understood as education without rigour, critique or uncertainty. It is education in which challenge is accompanied, judgement is explained, difference is recognised and responsibility is distributed.

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