

Practice

The Commodification of Architecture

by James R. Franklin, FAIA, ASLA

I first heard it from a corporate architect—an owner's rep: "To me, an architect is just another vendor and architecture is like any other *commodity*."

I've berated myself ever since for not being quick enough: "And do you pay extra for *firmness and delight*?" Beyond that, his remark still rankles, not only with me, but with others I ask. There seems a market trend toward—or at least a lot of talk about—commodification of most everything, and architects resent their services being lumped in with it all. It's like alleging we have complicity in some immoderate, ongoing (and worse, unnecessary and un-green) 1980s-type consumerist binge.

Interchangeability?

Commodities are generally understood to be trade goods having certain assumed characteristics and typically being interchangeable within their categories. One pork future is very like any other—except for price, the pork itself is all government-inspected, as is most everything. By market demand, industry standards, and regulatory law, commodities of each specific category (automobile tires, pine 2x4s, aspirin, whatever) meet applicable quality standards within a reasonable range.

So we have architecture-as-commodity polar subcategories—Modular housing at one end and high art at the other.

If architecture is a specific category of commodity, then by implication, within an acceptable range of quality, any AutoCAD 14 drawing is expected to be equal to any other. If that's the case, it's

only logical to buy what's legal and cheapest, so let's have architects compete only on price. Or in management guru Tom Peters' jargon, "For survival ... you'll have to be ultra-fast, error-free, and dirt-cheap." And, as if that's not enough, add the fact that virtually all commodities are tangible and quantifiable consumables that can be used up (gas gets burned, peanuts eaten, etc.).

It's enough to fairly make one bristle with righteous pontifications about inef-fable qualities of timeless design as intangibles that keep giving value throughout the life cycle of the structure and what about the value of architecture-as-art, we say! All that in one breath.

"And do you pay extra for firmness and delight?"

Formal branding

Which brings up a totally different take on how design services get treated as commodities. When a Frank Gehry, Rem Koolhaas, or Daniel Libeskind wins a commission, you really can't predict the formal statement of the subsequent design, but you *can* anticipate that it will comprise the next notable piece of the body of work of that particular designer. And recognizably so as a matter of visual, *formal branding*. Hence the term "signature designer," meaning the purveyor of an extremely upscale commodity, offering the client a definite one-upmanship value. "Oh yeah, we went all the way and bought a

'Zaha Hadid' for this one!"

So we have architecture-as-commodity polar subcategories—Modular housing at one end and high art at the other. Between these two extremes there labors

When my HMO says to, I may settle for buying a generic prescription. I won't settle for being one.

the vast majority of architects who are on the one hand unwilling to provide, or on the other incapable of committing, "architecture as commodity."

Prescription: generic?

What might be the antidote to this pernicious pressure toward strip-commercial sameness, with *Consumer Reports* looming as arbiters of the best buy? Maybe we can look to our medical colleagues for the answer. I'm no avid reader of *AMA Journals*, but I've yet to hear righteously indignant outcries from doctors about the commodification of medicine via the way of HMO or "Doc-in-the-Box" emergency clinics. Having used both, I actually find those practitioners are very professional. They take me and my problems sufficiently seriously, seem to put themselves in my place and behave with genuine care for my well-being, and make only those decisions that they believe to be in my best interest. It's an agency relationship. We have one of those too, and without fervently using it, we will might turn out to be vendors after all.

When my HMO says to, I may settle for buying a generic prescription. I won't settle for being one.

Jim Franklin, 1999 Kemper Award winner, is a lecturer in the architecture department at Cal Poly in San Luis Obispo. ■