

13th Conference
International Network
for the History of Hospitals

SPACE

Abstract
Book

Lisbon. 26-28 May 2021

AND

THE

HOSPITAL



Organization

In partnership with

INHH
International Network
for the History of Hospitals

hospitalis
Arquitetura hospitalar em Portugal
nos alvares da Modernidade
PTDC/ART-HIS/30808/2017

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Space and the Hospital - 13th International Network for the History of Hospitals Conference

Abstracts Book

Editorial Organization

INHH-International Network for the History of Hospitals

Edite Martins Alberto

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ISBN (eletrónico)

978-989-8492-79-1

Place and date of publication

Lisbon, May 2021

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This event and publication had the support of CHAM (NOVA FCSH/UAc), through the strategic project sponsored by FCT (UIDB/04666/2020), and «Hospitalis – Hospital architecture in Portugal at the dawn of Modernity: identification, characterization and contextualization» (PTDC/ART-HIS/30808/2017), funded by FCT.

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INTRODUCTION

The International Network for the History of Hospitals (INHH) is supported by the European Association for the History of Health and the Wellcome Trust. The INHH exists to promote studies related to the historical evolution of hospitals, from their beginnings to the present day, by providing an international network to foster collaboration and discussion within the field. We are especially committed to supporting postgraduate, early career and independent researchers.

The 13th INHH Conference explores the relationship between space and hospital. Space, in both its physical and conceptual manifestations, has been a part of how hospitals were designed, built, used, and understood within the wider community. By focusing on space, this conference aims to explore this subject through the lens of its architectural, socio-cultural, medical, economic, charitable, ideological, and public conceptualisations.

This online symposium will bring together academics from a range of disciplines to present case studies from across the globe to explore the relationship between space and hospitals throughout history by examining it through the lens of five themes:

Ritual, Space, and Architecture

Hospitals as 'Model' Spaces

The Impact of Medical Theory and Practice on Space

Hospitality as Social Space

Sponsorship

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CML, Câmara Municipal de Lisboa.

IN PARTNERSHIP WITH RESEARCH PROJECTS:

Hospitalis: Hospital Architecture in Portugal at the Dawn of Modernity
(FCT, PTDC/ART-HIS/30808/2017)
and All Saints Royal Hospital: city and public health (CML; CHAM, NOVA FCSH/UAc).

PROGRAMME

26 MAY

Opening Session | 8:30-9:00

Session 1 | 9:00-11:00

Hospitals as Gendered Space

Chair: Jane Stevens-Crawshaw | *Oxford Brookes University*

Francesca Ferrando | *Università degli studi di Verona*

“Protection or segregation? Gender and spaces in the Genoese hospitals of Early Modern Age”

Radhika Hegde | *St John’s Medical College*

“A ‘veiled’ life: The Gosha Hospital in Bangalore”

Divya Rama Gopalakrishnan | *University of Melbourne*

“Spaces of Confinement and Refuge: Lock Hospitals and Female Resistance in Madras India in the Late Nineteenth Century”

Ashok Kumar Mocherla | *Indian Institute of Technology Indore*

“Hospital and Hospitality as Contested Social Spaces: A Social History of the American Evangelical Lutheran Mission Hospital for Women and Children in Guntur, India (1880-1930)”

Debate

Break | 11:00-11:15

Session 2 | 11:15-13:15

Theory and Memory in Asylums

Chair: Elisabetta Giroto | *Universidade NOVA de Lisboa*

Adelino Cardoso | *Universidade NOVA de Lisboa*

“Gardens as a therapeutic means in the treatment of mental illness”

Monika Ankele | *Medizinische Universität Wien*

“Becoming a ‘good’ hospital? Spatial configurations in mental asylums in Germany around 1900”

Yasmin Shafei | *American University of Beirut*
**“Out of Sight, Out of Mind: Space and Constructions of Madness
in Turn-of-the-Century Egypt”**

Paula Femenias | *Chalmers University of Technology*, Elisabeth Punzi | *University of Gothenburg*
(Presenter) and Nika Söderlund | *University of Gothenburg*
“Psychiatric Hospitals in Transition: The Remembered and the Forgotten”

Debate

Break | 13:15-13:30

Poster Session | 13:30-14:30*

Lunch | 14:30-15:30

Session 3 | 15:30-17:30

Deathcare and Religion in Hospitals

Chair: Elma Brenner | *Wellcome Library*

Marta Ataíde | *Independent Researcher*

**“Poverty, pilgrimage and healing – Our Lady of Light Hospital
at the beginning of the 17th century”**

André Bargão | *Universidade NOVA de Lisboa*,
Sílvia Casimiro | *Universidade NOVA de Lisboa*, Rodrigo Banha da Silva | *Universidade NOVA de Lisboa*
and Sara da Cruz Ferreira | *Universidade NOVA de Lisboa*

**“To Mould, To Walk, To Grief:
An Archaeological approach to the Royal Hospital of All-Saints, Lisbon”**

Susana Henriquee | *EON-Indústrias Criativas*, Liliana Matias de Carvalho | *Universidade de Coimbra*,
Carlos Alves | *EON-Indústrias Criativas* and Sofia N. Wasterlain | *Universidade de Coimbra*
**“The times they are a-changin’: two centuries of spatial management in The Military Hospi-
tal of the Castle of São Jorge (16th-18th centuries Lisbon)”**

Robert Piggott | *University of Huddersfield*

**“Religion and State Medicine in Twentieth Century England:
The Place and Space of the Hospital Chapel”**

Debate

Break | 17:30-17:45

Session 4 | 17:45-19:45

Hospitals in Cities: Revitalising and Shaping Urban Environments

Chair: Sarah Lennard-Brown Birkbeck College University of London

Ana Cláudia Silveira | *Universidade NOVA de Lisboa*

**“The Hospitality Network in Setúbal during the Late Middle Ages:
shaping an urban landscape in a Portuguese town”**

Alfred Stefan Weiss | *University of Salzburg*

and Elisabeth Lobenwein | *Alpen-Adria University of Klagenfurt*

**“Early Modern Times Hospitals as Sensory Places?
The Example of Austria and Southern Germany”**

Joseph Curran | *Maynooth University*

**“A Permanent Monument to the Catholics of Dublin’:
The Mater Misericordiæ Hospital and the creation of confidence in a post-Famine city”**

Magnus Altschäfl | *Ludwig-Maximilians-Universität*

“The San Francisco General Hospital – A Symbol for a Modern City”

Debate

27 MAY

Session 5 | 8:30-10:30

Transforming Spaces through Medical Theory

Chair: Elena Paulino Montero | *Universidad Nacional de Educación a Distancia*

Somreeta Majumdar | *Visva-Bharati University*

**“Buddhist Monastery, Medicine and the Body Politic: A Historical Study of
the Healing Service of the Buddhist Monasteries of Eastern India with Special
Reference to the Nandadirghi Vihara of Jagjivanpur”**

Adélia M. Caldas Carreira | *Universidade NOVA de Lisboa*

“The Royal Hospital of Saint Joseph in Lisbon”

Li Yanchang | *Peking University*

“Nationalization of Modern Medical Space and the Founding of the Peking Central Hospital”

Johanna Rustler | *University of Aberdeen*

“Treatment on Rails: Britain’s Hospital Trains in the First World War”

Debate

Break | 10:30-10:45

Session 6 | 10:45-12:45

Hospitals in the Cold War

Chair: Paulo Drumond Braga | *Universidade de Lisboa*

Andreas Jüttemann | *Charité Universitätsmedizin Berlin*

“The West Berlin University Hospital Steglitz as a political issue – The realisation of a (supposed) US hospital culture in the context of the student movement (1957-1974)”

Ed DeVane | *University of Warwick*

“How I Learned to Stop Worrying and Love the NHS: Operational Research, Think Tanks, and Changing Models of British Hospital Care in the Cold War, 1964-72”

David Freis | *Universität Münster*

“The Rise and Fall of the Medical Megastructure: Hospitals of the Future in Cold-War Western Germany”

Eleni Axioti | *University of the Arts London*

“Corpus: The architecture of British hospitals in the 1960s and the politics of observability”

Debate

Break | 12:45-13:00

Poster Session | 13:00-14:00*

Lunch | 14:00-15:00

Session 7 | 15:00-16:30

Colonial and Indigenous Models

Chair: Raúl Villagrasa Elías | *Consejo Superior de Investigaciones Científica*

Michaela Clark | *University of Manchester*

“Designing the Clinic: Racialised Architecture and the Old Groote Schuur Hospital”

Antonio Coello Rodriguez | *Universidad Privada del Norte*

**“Lima hospitals uses, functions and changes during the viceroyalty”/
“Hospitales limeños usos, funciones y cambios durante el virreinato”**

Ling-yi Tsai | *National Yang-Ming University*

“Taiwanese Hospitals: Plague Quarantine Hospitals Using Han medicine in Early Colonial Taiwan”

Debate

Break | 16:30-16:45

Session 8 | 16:45-18:45

Hospitals as Social Spaces

Chair: Fritz Dross | *Friedrich-Alexander-Universität Erlangen-Nürnberg*

Elena Paulino Montero | *Universidad Nacional de Educación a Distancia*, Marta Visreda Bravo | *Universidad Nacional Autónoma de México* and Raúl Villagrasa Elías *Consejo Superior de Investigaciones Científicas*

**“Spatial Dimensions of the Holy Cross Hospital in Medina de Pomar:
A Unique Case in Late Medieval and Early Modern Iberia”**

Zehra Tonbul | *Istanbul Sehir University*

“Hospitals as Socio-Political Spaces: Mapping Hospitals in Late Ottoman Empire”

Narciss M. Sohrabi | *Université Paris Ouest*

“Reflection of Socio-Cultural Challenges on the Hospitals and Medical Spaces in Iran”

Ronja Tripp-Bodola | *Louisiana State University, Health Sciences Center New Orleans*

“In Charity Hospital’s Shadow: Catholicism, Race and New Orleans Public Health”

Debate

MAY 23

Session 9 | 9:00-10:30

Spaces of Knowledge and Healing

Chair: Anna M. Peterson | *Universidad de Cantabria/Universidad Europea Miguel de Cervantes*

Mats Dijkdrent | *University of Cambridge*

**“Healing through Space: Plague and Mental Health Institutions
in the Sixteenth-Century Low Countries”**

Christine Beese | *Freie Universität Berlin*

**“Knowledge-making between Arts and Science. The Integration of Anatomical
Theaters into Hospital Architecture in Modena, Frankfurt and Paris in the 18th Century”**

Manuel António Pereira Couto | *Universidade de Porto*

**“The origin of Vila Real hospital: hygienist’s guidelines and architecture
for a modern assistance practice (1796-1844)”**

Debate

Break | 10:30-10:45

Session 10 | 10:45-12:45

The Medical and Cultural Heritage of Hospitals

Chair: John Henderson | *Birkbeck, University of London*

Valeria Rubbi | *Università di Bologna*

“Hospital Spaces and Architectures in Bologna in the Modern Age”

Elena Corradini | *Università degli Studi di Modena e Reggio Emilia*

**“The Great 18th century Hospital in the complex of Sant’Agostino in Modena.
For a compatible and sustainable reuse project”**

Yeidy Luz Rosa Ortiz | *Durham University*

**“Use of Space and Non-Combative Populations of the Antiguo Hospital Nuestra Señora
de la Concepción, El Grande, San Juan, Puerto Rico, 1774-1886”**

José Carlos D. R. Avelãs Nunes | *Universidade de Lisboa*

**“The architecture of the New Lisbon Lazaretto (1860-1910).
Modelling controversial confinement in space and time”**

Debate

Break: 12:45-13:00

Session 11 | 13:00-14:30

Read between the Lines: Hospitals in Text

Chair: André Silva | *Universidade do Porto*

Elise Brault-Dreux | *University of Valenciennes*

“Poeticizing the experience of the space in hospital”

Marie Allitt | *University of Oxford*

“Scaling the Hospital: Imagining and Mapping Clinical Space”

Jessica Campbell | *University of Edinburgh*

**“Open Doors and Flattened Hierarchies: Exploring the Boundaries of Space
and Identity in Dingleton Hospital’s Therapeutic Community from c. 1963”**

Debate

Lunch | 14:30-15:30

Session 12 | 15:30-17:00

The Politics of Modernisation

Chair: Joana Balsa de Pinho | *Universidade de Lisboa*

Barry Doyle | *University of Huddersfield*

“The Shape of Things to Come? The politics of planning new hospitals in inter war Europe”

Cansu Degirmencioglu | *Technical University of Munich*

**“The Foundation and Development of Heybeliada Sanatorium
and the Modernization of Turkey (1924-1955)”**

Hongdeng Gao | *Columbia University*

**“Medical Governance Contest over Gouverneur Hospital:
Health Activism in New York City’s Lower East Side, 1956-1972”**

Debate

Break | 17:00-17:15

Session 13 | 17:15-18:45

Maternity

Chair: Kathleen Vongsathorn | *Southern Illinois University Edwardsville*

Fitz Dross | *Friedrich-Alexander-Universität Erlangen-Nürnberg*

“Gendered Medicalised Spaces – Inside and Outside Hospitals in early 20th century Germany”

Kathleen Pierce | *Smith College*

“New Spaces for a New Midwifery at the Lying-In Hospital of the City of New York”

Elzbieta Kassner | *Leibniz Universität Hannover*

“Between home and hospital: Maternity wards in post-war Poland 1945-1970”

Debate

Closing Remarks | 18:45-19:00

***Posters**

Anna Maria Ester Condins | *Universitat de Barcelona*

“Santa Creu Hospital of Vic (Catalonia): a medieval hospital in a modern city”

Mariangela Carlessi | *Politecnico di Milano* and Alessandra Kluzer | *Politecnico di Milano*

**“The Ospedale Maggiore of Milan as a ‘working machine’.
Functions, spaces and architecture through the centuries”**

Carmina Montezuma and João Castela Oliveira | *Museu São João de Deus Psiquiatria e História*

“The Order of St. John of God and hospital care in Lisbon”

Rute Ramos | *Universidade de Évora*

“Power, prestige and royal intervention at All Saints Hospital”

Chiara Mascardi | *THESA – Theater Science Anatomy* and Chiara Ianeselli | *IMT School for Advanced Studies in Lucca*

**“Anatomical theatres inside/outside the cities:
bodies between the universities and the hospitals in Italy”**

Mayumi Iltsuka | *architectural firm IMMUNORIUM*

“How were health and social activities balanced in a hospital’s built environment? - in the case of four centuries’ transformation of the former Saint-Vincent-de-Paul Hospital in Paris”

Isadora Monteiro | *Universidade de Lisboa*

“Os novos hospitaes de Lisboa’ Presenting in Portuguese”

Viviane Trindade Borges | *Universidade do Estado de Santa Catarina*

“Miguel Bombarda Hospital: notes on an unfinished debate”

Donatella Lippi | *Università degli Studi di Firenze* and Manila Soffici | *Università degli Studi di Firenze*

“Space and law in the Hospital of S. Maria Nuova (Florence, 1288)”

Alicia Campos Gajardo | *Universidad de Chile*

“Old San José Hospital, Santiago, Chile”

Josep Barceló-Prats and Josep M. Comelles | *Universitat Rovira i Virgili*

**“The introduction of the architectural project of the moral asylum in Spain,
The case of the ‘Manicomio del Hospital de la Santa Cruz’ (Barcelona, 1835-1860)”**

Renato da Gama-Rosa Costa | *Universidade Federal do Rio de Janeiro* and Inês El-Jaick Andrade | *Universidade de São Paulo*

“A new Project to Santa Casa de Misericórdia in Rio de Janeiro (1840-1865): Hygiene and rationality”

Olga Susana Costa Coito e Araujo Institution | *Universidade Estadual de Campinas*

and Patricia Sammarco Rosa | *Instituto Lauro de Souza Lima*

**“Cultural heritage of ILSL - Lauro de Souza Lima Institute:
a case study of a former leper colony of compulsory isolation, today Research Institute”**

ABSTRACTS AND CURRICULA

SESSION 1

Hospitals as Gendered Space

Francesca Ferrando | Università degli studi di Verona

Protection or segregation? Gender and spaces in the Genoese hospitals of Early Modern Age

This paper aims to analyze how gender influenced the organization of the space in two Genoese hospitals: the Pammatone hospital and the Albergo dei poveri. Pammatone Hospital was built in 1469 to treat acute diseases and to assist abandoned children while the Albergo dei poveri was a confinement structure erected in 1656 for beggars.

Their plans followed the classical model of Renaissance Hospitals which included a clear division between female spaces and male ones. This separation was to avoid promiscuity and to preserve women from violence and abuses, even though there was a relative freedom of movement for patients of both sexes. After Counter-Reformation this division became more marked according to a new concept of women's virginity, which associated the honor of the family to the purity of its female members. This change of mentality had the main consequence of a more tightening control on female habits and costumes which turned into a closure of the women's quarters of the hospital. The majority of Italian hospitals adopted new rules which prevented women from leaving the hospital without permission and they forbade any man to enter in female dormitories. Stereotypes of gender influenced all aspects of daily lives, including education of children and staff recruitments, so Hospitals planned parallel paths for men and women with the financial help of benefactresses.

By analyzing unpublished documents produced by Pammatone Hospital and Albergo dei poveri (rules, notary deeds and public records) we'll be able to see what female spaces and their rules were. Gender shaped the physical space, creating at the same time new social spaces characterized by their own organization and their own networks in the world outside the hospital.

BRIEF CURRICULUM

Francesca Ferrando is a teaching assistant of Early Modern History at University of Verona and she works with Professor Marina Garbellotti. On 30 June 2020 she received her PhD in Historical, Geographical, Anthropological Studies at the University of Padua with a comparative thesis on the confinement structures of Genoa, Venice

and Bologna between 17th and 18th centuries. She's interested in the history of welfare in Italian cities of Early Modern Age and in gender history and she wrote five articles on these subjects published on Italian scientific journals.

Radhika Hegde | St John's Medical College

A 'veiled' life: The Gosha Hospital in Bangalore

On October 31, 1895 the Gosha Hospital managed by the Church of England Zenana Missionary Society was opened in Bangalore. The hospital was started, with the aim of providing medical care to the 'backward' Muslim women. It was constructed on the land gifted by the Princely ruler of Mysore and a substantial amount of fund was raised through local philanthropy. This helped in raising a much bigger building than initially planned. During the outbreak of the Bangalore plague in 1898, the hospital staff played an important role in providing aid to people thus contributing to its popularity. The hospital consisted of caste wards to encourage upper caste women to avail its services.

The women missionary doctors played an important role in popularising the idea of hospitalisation during childbirth, which eventually led to establishment of other zenana hospitals in Princely Mysore and encouraged more active participation of local boards and the royalty. The hospital was also an important space to the missionaries for promoting evangelical activities. Prayer meetings were often held and the central idea was to convert the 'heathens', and spaces like 'Friendship' ward was created for this purpose. Most often in the photographs of CEZMS a lady missionary doctor is often seen preaching to the saree clad Indian Women.

The Zenana missionary was therefore important for two reasons: Firstly, healthcare of women that was often ignored by the British Government was taken up by the missionaries supported by the local elites. Secondly, the women doctors were negotiating a space that became exclusively a speciality of women paving the way for medical doctors not just in England but also in India. This paper will focus on the growth of Gosha hospital in Bangalore and look into its various trajectories of growth and its survival as a women's hospital till to this day.

BRIEF CURRICULUM

Radhika Hegde is a lecturer of History of Medicine in St John's Medical College Bangalore. She teaches Citizen-Doctor module to medical students and takes lectures on History of Medicine. The Maj Gen SL Bhatia History of Medicine Museum that is a part of the Health and Humanities Division is managed by her. She is now involved in curating the archives of Health professionals and is building the digital archives to encourage more public participation in the Social History of Medicine.

Divya Rama Gopalakrishnan | University of Melbourne

Spaces of Confinement and Refuge: Lock Hospitals and Female Resistance in Madras India in the Late Nineteenth Century

This paper examines how Lock Hospitals in the nineteenth century colonial South India were both a space of confinement, for women suspected of practising prostitution and spreading venereal diseases, and place of refuge, for 'destitute' women. It will emphasise the control and surveillance employed by the colonial government and anxieties about clandestine prostitution and venereal diseases. It will also highlight how these anxieties led to the use of various methods and discourses by the colonial government to confine women to the lock hospitals and subject them to ill-treatment at the hands of both European medical surgeons and Indian staff. Nonetheless, these women were able to subvert the lock hospital space and rules to suit their immediate needs. The lock hospital, a space of confinement, was used as a place of refuge during the famine of the late 1870s in Madras presidency by these women to avoid starvation. By highlighting the changing shape and use of lock hospital space, this paper will describe various strategies of resistance employed by women to subvert the lock hospital space and against the Contagious Diseases Act of 1864 and 1869 in the Madras presidency. By doing so, it illustrates the malleable nature of colonial hospital space, which was constantly changed not just by the imposing colonial rulers but by the subversion and survival of the ruled Indians as well.

BRIEF CURRICULUM

Divya Rama Gopalakrishnan is a PhD candidate at the University of Melbourne. Her thesis examines control of venereal disease and sexual surveillance in colonial South India. She did her Bachelor of Arts and Master's in History from University of Delhi, specialising in Modern Indian History. Her M.Phil dissertation (University of Delhi) was on "Lock Hospitals, Cantonment and Venereal Diseases in Nineteenth Century Madras Presidency." More specifically her work examines the fractured nature of the colonial hegemony, highlighting the vital role of Indian agency in policy implementation regarding venereal diseases. She is interested in research areas such Social History of Health and Medicine, Sexuality and Science, Archival silence, Gender and State, Public Health and Micro History.

Ashok Kumar Mocherla | Indian Institute of Technology Indore

Hospital and Hospitality as Contested Social Spaces: A Social History of the American Evangelical Lutheran Mission Hospital for Women and Children in Guntur, India (1880-1930)

The American Evangelical Lutheran Mission hospital established in Guntur of the erstwhile Madras Presidency, through modern medicine and medical practices, left permanent imprints on social imaginations of the native Telugu speaking community. Having said that, the central focus of this essay is to examine and critically analyze the threefold influence of missionary medicine and medical practices, carried out in and outside the mission hospital, on larger social (re)constructions of health, gender, and religion in this region over time from the standpoint of hospital and hospitality as contested social spaces. Firstly, it examines how the mission hospital facilitated larger changes in the field of gender and medicine, by way of contesting the traditional perceptions and stereotypes, which were complex and interwoven with superstitions of caste, religion, and culture. Secondly, to examine the patterns and means through which the mission hospital and hospitality transformed socio-religious perceptions of what is, broadly construed as, an illness, health, disease, and cure. Some diseases such as smallpox and chickenpox were traditionally viewed as symbols/ results of the wrath of village goddesses or deities. Hence, the propitiation of village goddesses or deities, through religious rituals, was a frequent occurrence in Colonial Madras. Thirdly, to analyze how the mission hospital made steady progress in improving the conditions of women and children, who were otherwise left at the mercy of traditional midwifery, and in turn, became historically anchoring points for the modern medicine to establish itself in this region.

BRIEF CURRICULUM

Ashok Kumar Mocherla is assistant professor of sociology at the school of humanities and social sciences, Indian Institute of Technology (IIT) Indore. His academic interests include, not confined to, sociology of religion (Christianity), caste and religious minorities, political sociology, sociology of faith healing and missionary medicine. His latest book is *Dalit Christians in South India: Caste, Ideology and Lived Religion* (Routledge 2020). He received his Ph.D. from the Indian Institute of Technology (IIT) Bombay and has held visiting positions at the University of Bielefeld, Germany (2010); Drexel University College of Medicine, Philadelphia (2013). He is currently working on a book manuscript that examines questions of Christian modernity and missionary medicine in Colonial Andhra.

SESSION 2

Theory and Memory in Asylums

Adelino Cardoso | Universidade NOVA de Lisboa*

Gardens as a therapeutic means in the treatment of mental illness

Gardens are a cultural form whose concept and function have varied significantly throughout history. A main feature of gardens consists of creating a peculiar atmosphere and establishing a close bond between man and nature.

In its turn, the psychiatric hospital is a recent institution that goes back to the eighteenth century, and generally includes gardens in its organisation of space. Indeed, gardens impact on the human mental state, raise pleasure, inspire peacefulness, open the mind to the external world and stimulate the imagination. Within such framework, one will be concerned with the relevancy of gardens in Conde Ferreira Hospital (Oporto), inaugurated in 1883, and Júlio de Matos Hospital (Lisbon), inaugurated in 1942.

The gardens of Conde Ferreira Hospital are a special case for their dimension and variety, displaying different environments promoting meditation or communication with others. The gardens of Júlio de Matos Hospital are also an intrinsic part of the psychiatric treatment.

BRIEF CURRICULUM

Adelino Cardoso obtained a doctorate in Modern Philosophy at the University of Lisbon (2003) and is currently Integrated Researcher at CHAM – Centre for the Humanities (NOVA FCSH/UAc), where he leads the research team “Science and Culture”. His research interests cover Modern philosophy, Portuguese thought, history and philosophy of science and especially of medicine. Principal Researcher of several projects, namely “Philosophy, medicine and society” (2007-2011), “The concept of nature in the medico-philosophical thought at the transition from the 17th to the 18th century” (2012-2015), “Medical art and scientific intelligibility in the *Archipathologia* (1614) by Filipe Montalto” (2013-2015), “The lucid sleep as an access to the human psyche in the work by the Abbot Faria” (2019-2021). He wrote various papers in specialised Journals and several books such as: *Fulgurações do eu* (Colibri, 2002), *Vida e percepção de si* (Colibri, 2008), *Labirinto do eu* (Kotter Editorial, 2019). He is Member of the Ethics Committee of the Portuguese Institute of Oncology, and of the Ethics Council of the Champalimaud Foundation.

* CHAM, Faculdade de Ciências Sociais e Humanas, FCSH, Universidade NOVA de Lisboa, 1069-061 Lisboa.

Becoming a “good” hospital? Spatial configurations in mental asylums in Germany around 1900

In the psychiatric institutions of the late 19th century, one method of treatment became increasingly important: the so-called bed treatment. It was based on the principle of bed rest and required that the patients were placed in a common room. As corresponding files from mental asylums in German-speaking countries show, the introduction of this method entailed serious spatial configurations: isolation cells, in which patients in the acute stage of illness had previously been confined, were dissolved and the individual cells were connected to larger wards. These wards were equipped with rows of beds so that up to 15 patients could be placed in one room. This spatial arrangement should make it easier for the individual patient to submit to the doctor’s instruction and to fit into the therapeutic regime of the institution. Furthermore – and this is the point I want to address in my presentation – the spatial modifications of the mental asylums were accompanied by a central argument: By establishing common wards, it should be possible to adapt psychiatries – those places in which patients were, as it was said, “buried alive” – to the general hospitals. These were the model institutions to which psychiatries tried to adapt in order to find acceptance both internally and externally as a place where patients received medical treatment and care. In my contribution I also want to shed light on further adaptations in the field of spatial-material culture that were aimed at making psychiatries “good hospitals”: be it the bars on the windows that were removed, or the change from brick walls to natural boundaries, and much more.

BRIEF CURRICULUM

Monika Ankele is a historian. She is a scientific researcher at the Institute for History and Ethics of Medicine at the University Medical Center Hamburg-Eppendorf and curator at the Medical History Museum Hamburg. Her research focuses on the history of psychiatry and its institutional culture in the 19th and 20th century, following a patient-oriented approach. Her current research project, funded by the German Research Foundation, addresses objects and spaces of psychiatry, putting a special emphasis on the hospital bed and the bathtub, both as objects and spaces. In her work she is seeking a better understanding for the entanglement of material culture, spaces, practices (of knowledge), and the senses. She is currently working on a monograph on the sickbed and co-editing with Benoît Majerus a book entitled *Material Cultures of Psychiatry* which will be published in October 2020, including her essay “The Fabric of Seclusion: Textiles as Media for (Spatial) Interaction in Isolation Cells of Mental Hospitals.” Her latest paper “Material Configurations of Nursing and its Ethical Implications. The Prolonged Bath Treatment in Psychiatry” was published in the *European Journal for Nursing and Ethics* 1/2020. 200

Yasmin Shafei | American University of Beirut

Out of Sight, Out of Mind: Space and Constructions of Madness in Turn-of-the-Century Egypt

The history of mental health in the Middle East reflects the multiple ways in which colonial governments and modern nation-states defined both their national projects and relationships with their subjects. This study examines the state's appropriation of mental healthcare and its asylums through the lens of the state's control of the physical nature and location of asylums and their administrative systems and processes. The study demonstrates how the British administration's efforts to police madness focused on asylum reforms which ultimately changed the nature of mental health care in Egypt.

With the British occupation of Egypt in 1882, the colonial administration placed asylums at the center of their 'civilizing mission' in Egypt, investing heavily in expanding and modernizing the physical infrastructure of the asylum, creating vast buildings and grounds and increasing the number of beds. The most lasting impact of British influence, however, was in the manner in which asylums were designed to isolate 'undesirable' elements from society outside the bounds of the city. The physical isolation of the insane reflected British mental health norms which sought to isolate them both legally and ideologically from the communities in which they lived. The asylum was therefore established at a site distant from the capital, located in the Reydaniyya desert which later became the district of 'Abbasiyah. Walls were also erected around both the 'Abbasiyah and Khankah asylums, further isolating patients out of sight from their communities. The isolation and confinement of the insane also resulted in the stigmatization of mental illness in turn-of-the-century Egypt. This was a departure from traditional perceptions of the insane which sought to integrate them in society prior to the twentieth century. The asylum had long been accessible to patients' families in the heart of the capital before British intervention in mental health care.

BRIEF CURRICULUM

Yasmin Shafei is a PhD candidate in modern Middle Eastern History at the American University of Beirut. After receiving her BA (1996) and MA (2001) in International Relations from the American University in Cairo, she spent 15 years managing UN projects on refugees, health, and women. She returned to academia in 2015 and is currently in the final year of her PhD. Her dissertation focuses on the history of mental illness and psychiatry in Egypt, with a particular of emphasis on the impact of British colonial rule on mental health treatment and diagnosis in Egypt. Her research interests include the history of medicine, women and gender studies.

Paula Femenias | Chalmers University of Technology, Elisabeth Punzi | University of Gothenburg and Nika Söderlund | University of Gothenburg

Psychiatric Hospitals in Transition: The Remembered and the Forgotten

Urban areas are expanding and cities are transformed (Högström 2018). In this process, former psychiatric hospitals often become business parks, hotels, or residential areas (Baur 2018; Rodéhn 2017). The beauty of the architectural features and the parks are often emphasized, while former residents seldom are remembered; a process that has been called strategic forgetting (Coleborn 2003; Moon, Kearns & Joseph 2015). In Göteborg, the second largest town in Sweden, two asylums were placed about two kilometers from each other; St Jörgen (1872-1991) and Lillhagen (1932-2013). The years when they co-existed, their patients came from different areas. Lillhagen was used for local patients and St Jörgen for regional patients. Today the sites of the asylums are residential areas and have been subject to strategic forgetting.

We investigate the transition processes for these two hospitals. Distinct periods which are manifested in architecture and social areas are examined. Only Lillhagen seems to be remembered by contemporary inhabitants of Göteborg and there is budding interest in remembering Lillhagen. A street in the new residential area will for example be named after the artwork patients made in the hospital basement. St Jörgen however tends to be forgotten, except for a small burial ground in the new residential area.

These sites hosted institutions with a complex history which includes segregation, oppression and violation of human rights. Through connecting historic sites like this, with contemporary social issues in the present, these sites could be remembered in ways that contribute to social justice in the present and the future (Sevcenko 2010). Moreover, conscientious remembrance might add values for the new residents/residential areas in the form of historical perspectives, identity, and meaning. This might be appreciated and important, not least given the current acknowledgement of mental health issues and how mental distress might be counteracted and treated.

BRIEF CURRICULA

Paula Femenias (Chalmers University of Technology) is an architect and Associate Professor in Sustainable Transformation of the Built Environment, at the Division of Building design. Femenias has been engaged in teaching and research with a focus on sustainable buildings since the mid 1990s and the leader of several research projects with inter- and transdisciplinary collaborations. Her research focuses on clients and users, and holistic perspectives to sustainability in relation to housing, homes, management and renewal, innovation, and living. Femenias has a large and broad network of national and international researchers, and stakeholders in the local building sector.

Elisabeth Punzi is a licensed psychologist, PhD and associate professor at the Department of Social Work, Gothenburg University. Her research concerns mental health care and the prerequisites for providing person-centered care. She is interested in the connection between heritage, places, creative expressions and mental health, and writes about the history of psychiatry and psychoanalysis. She teaches courses in mental health and qualitative research methods.

SESSION 3

Deathcare and Religion in Hospitals

Marta Ataíde | Independent Researcher

Poverty, pilgrimage and healing – Our Lady of Light Hospital at the beginning of the 17th century

The construction of Our Lady of Light Hospital began in 1601, having been inaugurated in 1618. Located in Carnide, in the town of Lisbon, it is part of an architectural and urban complex composed of hospital, convent and pilgrim yard. The pilgrims arrived at this place all year round from all over the country and overseas, specifically on September 8, day of Our Lady of Light. Built by the princess D. Maria (1521-1577) with the aim of recovering poor patients and pilgrims, the hospital construction reflects her Christian, humanist, and cultural actions, eternized by her mausoleum in the convent church. The princess left written in her will to whom the hospital was intended, the financial means necessary for its construction and operation, as well as the provisions to its spiritual and temporal organization and management, made by the Order of Christ.

In a period of innovation in hospital buildings in Europe, the Our Lady of Light Hospital materializes and merges international artistic inflows with national hospital characteristics, emerging a building of great formal and functional clarity, designed by relevant national architects. It is a hospital model that develops a strong system of circulation and communication between its interior and exterior spaces in an articulated process of healing the body and soul, having been considered, in its time, one of the most equipped and modern hospitals in the country.

BRIEF CURRICULUM

Marta Ataíde receives is first degree in Interior Architecture and Building Rehabilitation from Architecture College of Lisbon University and is second degree in Architecture from Lisbon Lusíada University. She received a master's degree in Architectural and Landscape Heritage Rehabilitation from Évora University. Independent worker

in architecture; collaborating architect in various architectural ateliers; collaborating architect in the Office of Historical and Cultural Heritage of Cascais Municipal Town Hall; collaborating architect in the Plan for Safeguarding and Rehabilitation of the Historical Center of Belver.

Independent researcher focused on studies of religious architectural heritage with participation in national congresses and seminars.

André Bargão | Universidade NOVA de Lisboa, Sílvia Casimiro | Universidade NOVA de Lisboa, Rodrigo Banha da Silva | Universidade NOVA de Lisboa, and Sara da Cruz Ferreira | Universidade NOVA de Lisboa*

To Mould, To Walk, To Grief: An Archaeological approach to the Royal Hospital of All-Saints, Lisbon

Founded in 1492, the Royal Hospital of All Saints was an archetype of the Portuguese welfare social assistance. Paradigmatic in Portugal, but largely inspired in European models, the architectural design provided and introduced new routines in the hospital daily lives in all the kingdom.

The primitive cruciform design, integrating four yards, delimited in the interior by corridors and an open area, maintained the physiognomy along the period of activity of the building, even with transformations resulting from eventual necessities or even from natural disasters episodes. These architectural modelling episodes remained recorded in the remnants exhumed in Praça da Figueira in 1960's, with more expression in the archaeological intervention of 1999-2001. Recent studies, in the framework of the Royal Hospital Archaeology have been providing new readings of the building evolution, subject often absent in documental sources, such as the back area of the hospital complex.

In this area the archaeological study revealed a significant set of transformations caused by new functionalities. One of those moments occurred in the first half of the 18th century, when a corridor was turned in to a burial ground, in which several simple and multiple burials, were carried out.

The archaeological data revealed that this transformation occurred between the reform of the back area of the complex and the construction/reform of the passage to São Camilo de Lélis rooms and infirmary. The installation of São Camilo de Lélis Order implied the obliteration of previous contexts assigned to the 16th and 17th centuries. This reading was only possible with the intensive study of the material culture and the architectural remnants.

In the present work, new hypotheses are raised concerning the constructive physiognomy evolution of the back area of the hospital complex. Also, there are new interpretative proposals of the use and the daily lives of the hospital.

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BRIEF CURRICULA

André Bargão (FCT PhD Student at CHAM, NOVA FCSH/UAc), Graduation (2013) and Master in Archaeology (2015), by Faculdade de Ciências Sociais e Humanas, Universidade NOVA de Lisboa (NOVA FCSH), and PhD student in History – Archaeology in the same institution, funded by Fundação para a Ciência e Tecnologia (FCT SFRH/BD/133757/2017), with the project thesis “Hospital Real de Todos-os-Santos, Lisboa: Arqueologia e Arquitectura de um espaço assistencial de época moderna (séculos XV-XVIII)”. Research Assistant at CHAM – Centre for the Humanities (NOVA FCSH/UAc) since 2015.

Sílvia Casimiro (PhD Student at IEM and LABOH-CRIA, NOVA FCSH), archaeologist developing investigation in Archaeology and Bioanthropology interface, and Archaeo-ethnatology. PhD Student in History – Archaeology at Faculdade de Ciências Sociais e Humanas – Universidade NOVA de Lisboa. Researcher at the Instituto de Estudos Medievais (IEM, NOVA FCSH) and in the Laboratory of Antropologia Biological Anthropology and Human Osteology – Centro em Rede de Investigação em Antropologia (LABOH-CRIA, NOVA FCSH).

Rodrigo Banha da Silva (CAL/CML/DMC/DPC; CHAM, NOVA FCSH/UAc), archaeologist at Centro de Arqueologia de Lisboa – Cultural Heritage Department, since 1990. MD in Urban Archaeology, by Universidade do Minho, and PhD in History – Archaeology, by Faculdade de Ciências Sociais e Humanas – Universidade NOVA de Lisboa. Invited Professor of the History Department of NOVA FCSH since 2004, teaching Urban Archaeology, Roman Archaeology, Modern Archaeology and Ceramology. Researcher at CHAM – Centre for the Humanities (NOVA FCSH/UAc) and member of the Permanent Scientific Committee.

Sara da Cruz Ferreira (FCT PhD Student at CHAM, NOVA FCSH/UAc): Graduate (2012) and Master in Archaeology (2015), by Faculdade de Ciências Sociais e Humanas, Universidade NOVA de Lisboa (NOVA FCSH), and PhD student in History – Archaeology in the same institution, funded by Fundação para a Ciência e Tecnologia (FCT SFRH/BD/137142/2018), with the project thesis “Negócio da China: Comércio e Consumo de porcelana oriental em Lisboa (séculos XVI-XVIII)”. Research Assistant at CHAM – Centre for the Humanities (NOVA FCSH/UAc) since 2015.

Susana Henrique | EON-Indústrias Criativas, Liliana Matias de Carvalho | Universidade de Coimbra, Carlos Alves | EON-Indústrias Criativas, Sofia N. Wasterlain | Universidade de Coimbra

The times they are a-changin': two centuries of spatial management in The Military Hospital of the Castle of São Jorge (16th-18th centuries Lisbon)

Born from the Renaissance, the 16th century brought new forms of health treatment that not only led to a new look at the human body but also to the creation of new needs in hospital buildings. That was reflected in a new military hospital built in the Castle neighborhood, Hospital of S. Filipe and S. Tiago, ruled under the purview of the Knights Hospitaller of São João de Deus. Archaeological digging put into evidence a planned structure that evolved for two centuries. The data uncovered allied with historical records leads to the discovery of an institution that molded the area, being present on both sides of the street, and having three infirmaries, a chapel, an apothecary, a garden, and a cemetery with an oratory. These changes probably result from the needs not only of an evolving city but also of a greater extension of hospital services to the community.

One reflection of these changes was the necropolis and its several phases, where more than 1000 individual skeletons were recovered. The different needs required by the space management of the necropolis create a dialogue with the hospital structures and with the bibliographic records (among other records of deaths and discharges, hospital accounts).

These records show us that some people treated at the hospital were prisoners who died and were subsequently buried at the hospital cemetery which was rearranged to accommodate these individuals.

The archaeological, anthropological and historic investigation brought to light a religious and military community. The space management changed according to the dynamics and functions of this institution.

BRIEF CURRICULA

Susana Henriques holds a degree in Archeology and History and a master's degree in Pre-History and Archaeology. She has been working in Archaeology for 20 years with a vast experience in urban archaeology. For the past 4 years she has been working at the company EON, Indústrias Criativas in projects involving post medieval realities around the Castle of São Jorge.

Liliana Matias de Carvalho holds a degree in Archaeology and History, is currently a

PhD student in Biological Anthropology a Researcher at the Research Centre for Anthropology and Health. She has a particular interest in the study of paleopathology, and history of medicine.

Carlos Alves holds a PhD in art history from the Universitat Àutònoma de Barcelona where he developed his studies on the Cathedral of Viseu. He is currently an art historian at the company EON, Indústrias Criativas and a member of the Institute of Medieval Studies at the New University of Lisbon. His research focuses on Portuguese religious architecture from medieval and modern periods with special emphasis on the relationship between architecture and liturgy.

Sofia N. Wasterlain holds a PhD in Anthropology, a Masters in Human Evolution and a degree in Anthropology. She is a Professor at the University of Coimbra since 1997 and a Researcher at the Research Centre for Anthropology and Health. Her main areas of interest are the study of past populations, paleopathology and dental anthropology.

Robert Piggott | University of Huddersfield

Religion and State Medicine in Twentieth Century England: The Place and Space of the Hospital Chapel

In May 1948, two months before the new National Health Service (NHS) came into being, Nye Bevan, Minister of Health, made a pledge to the Church of England's Church Assembly. Under the new service, it was reported, 'chaplains, and where necessary, chapels [would] be provided in all institutions under the control of the Ministry of Health'. The NHS nationalised the hospitals and replaced voluntary and local authority control with a centrally funded health service. Many clergy equated the implied loss of voluntarism with a loss of a spiritual side of medical care they connected with Christianity. The chapel, a ritual space within the hospital, had maintained this connection, providing a site for worship while linking the hospital to wider networks. However, World War II had negatively affected these spaces, either through bomb damage or the need for extra space for medical care. Bevan's pledge reaffirmed the place of the chapel in the hospital in the new NHS. Despite this, by erasing the need for fundraising for medical care, the NHS disrupted the traditional connection of local faith communities to the hospital. As a response, fundraising efforts were directed to support worship space in the hospital either by providing new furnishings and fittings, or by building an entirely new chapel. Despite these efforts, in the later twentieth century the decline of Christian worship, coupled with increased religious diversity, further complicated the hospital chapel's traditional role. This paper examines the rituals of the hospital chapel in England and the effect of social change on the chapel space in the post-war period. It will concentrate on the efforts of those who sought to maintain the link between Christianity and medical care in the NHS and argue that the hospital chapel

became a locus of special attention in their endeavours to do so.

BRIEF CURRICULUM

Robert Piggott completed his PhD at the University of Huddersfield in 2019. His research has looked at the effect of the decline in public worship in England on the Church of England's historic buildings, and the role of volunteers in church building conservation. His current research interests centre on the effect of the establishment of the National Health Service on voluntary action in the post-war period.

SESSION 4

Hospitals in Cities: Revitalising and Shaping Urban Environments

Ana Cláudia Silveira | Universidade NOVA de Lisboa

The Hospitality Network in Setúbal during the Late Middle Ages: shaping an urban landscape in a Portuguese town

This study focuses on the port city of Setúbal, in Portugal, integrated in the domains of the Military Order of Santiago, institution that hold both the secular and the ecclesiastical jurisdiction over the city and the surrounding territory.

It aims to reflect on the impact of the deployment of a network of institutions for the care and cure of the sick in medieval Setúbal, analyzing the impact of such institutions in urban topography and in the evolution of urban planning, as well as the strategies used by these institutions to accumulate and to control valuable urban property. The relative success (or failure) of such management reflects either the institutional relationships established by the hospital and welfare institutions themselves with the urban powers (including the Military Order of Santiago and the municipal authorities), as well as their ability to reinforce social relations between different sectors of the urban community, attending to the role of these institutions regarding the reception of outsiders, pilgrims, marginalized groups or weakened individuals.

At the same time, it seeks to analyze the importance of the architectural and artistic investments made by these health care institutions as a form of expressing their importance in the urban daily life and also as a form of social and political ceremonial, performing the power and the prestige of the represented institutions and of the city itself. Building and managing such a powerful institution was a way of proclaiming the qualities of those men, families and groups that were involved in their administration and therefore to contribute to their social and political ambitions.

BRIEF CURRICULUM

Ana Cláudia Silveira is currently preparing a PhD thesis at Universidade NOVA de Lisboa on the urban settlement of Setúbal and the relationship established with the Order of Santiago. She is a research member of Instituto de Estudos Medievais (IEM/NOVA FCSH) and her research interests are the administration of the Order of Santiago, the relationship established with local institutions and issues related with management and control of natural resources, territorial organisation, urban planning and the cross relation established between space control and political power. She has participated in the projects “Les mots de l’impôt dans l’Occident méditerranéen: glossaire de fiscalité médiévale”, coord. Denis Menjot (U. Lyon 2 Lumière) and Manuel Sánchez Martínez (Fundación Milá y Fontanals (CSIC – Barcelona); “Petites villes aux XIII-XV siècles. Royaumes de Portugal et de France et terres d’Empire francophones”, coord. Jean-Luc Fray (Université Clermont Auvergne) and Adelaide Milán da Costa (Universidade Aberta, Portugal) – Programa Pessoa: FCT/CAMPUSFRANCE. Currently she is a researcher of the UNESCO Chair “The Ocean’s Cultural Heritage”, coord. João Paulo Costa (CHAM, NOVA FCSH/UAc); and MedCrafts - Regulamentação dos mes-teres em Portugal nos finais da Idade Média: séculos XIV e XV (FCT - PTDC/HAR-HIS/031427/2017), coord. Arnaldo Melo (Lab2PT – Universidade do Minho).

Alfred Stefan Weiss | University of Salzburg and Elisabeth Lobenwein | Alpen-Adria University of Klagenfurt

Early Modern Times Hospitals as Sensory Places? The Example of Austria and Southern Germany

In the region of Austria and Southern Germany, the creation of hospitals started in the late medieval period and increased in the early modern period. The latest studies show that their placement in the periphery and then increasingly in the urban center (the only exceptions were leprosy and plague hospitals) was the result of a well-thought-out order and logic on the part of the operators (town, territorial sovereign, church, feudal lord). City inhabitants and visitors to larger markets were well aware of the markings of these facilities by means of symbols and colors and of those of their residents who were occasionally allowed to leave the charitable place, recognized by their clothing and the tin or leather tags they were obliged to wear, usually against their will.

The (township’s) public hospital was considered to be the most prestigious facility, and it could well resemble a noble townhouse complex or even a palace, often admired by travelers and traders. These places of lived devoutness – at least in theory – signaled their location to the outside (arrangement of living, economic and chapel or church areas, crosses and offertory boxes near the entrance, painted house walls with Christian symbols, etc.) as well as to their inside (“area-specific behavioral norms”, doors understood as symbolic codes for drawing boundaries,

the connection of sick rooms with church areas, the spacing of inmates and social goods, etc.).

In addition to the visual perception of the hospitals and their rooms, the sensory impressions of smell, taste, touch and acoustics were an essential part of the experience of the charitable urban space, because even professionally experienced hospital masters shied away from the smells therein, where people often ingested substandard food, had to share the hospital room with its racket and noise with small livestock or dogs or cats or could live as “rich beneficiarie” (so-called noble beneficiaries) in separate rooms, the sanitary facilities were mostly fouled, the commodes overflowed and the terminally ill had to be cared for.

The hospital was of course not uncoupled from other urban areas, but – comparable to early hospitals – was built and located according to “centered sensory perceptions” intended to show a pretension of order, cleanliness and Christian virtues to the outside world.

BRIEF CURRICULA

Alfred Stefan Weiß, works at the University of Salzburg, History Department. He has numerous essays and books on the history of hospitals, poverty, sexuality, medicine, criminality and the Austrian regions.

Elisabeth Lobenwein, works at the Alpen-Adria University of Klagenfurt, Institute for History. His research focuses on social history of medicine, personal testimonials and history of the mentality of the early modern period, enlightenment and reform absolutism, cultural history of politics.

Joseph Curran | Maynooth University

A Permanent Monument to the Catholics of Dublin: The Mater Misericordiæ Hospital and the creation of confidence in a post-Famine city

Dublin Corporation, Dublin’s municipal administration, began to report on the management of several of the city’s medical hospitals from the 1870s onwards. These reports referred to the Mater Misericordiæ Hospital as ‘The Queen of Dublin’s Hospitals’, and described how this institution was a great asset to the city. The Mater’s founders had also believed the Hospital would augment the city. They emphasised that patients of all religions would be received but they also claimed this Hospital, managed by the Sisters of Mercy, would be ‘a permanent monument to the Catholics of Dublin’. This paper will explore how the Mater’s architecture and the way this was presented in print, played a significant role in what historian Mary E. Daly called ‘the making of Catholic Dublin’ in the later nineteenth century. Dublin had long been a city of hospitals, many of these were architecturally significant but the most splendid dated from

the eighteenth century and were associated with Dublin's Protestant elite. In the years after the British-Irish Act of Union of 1801, Dublin appeared to be a city in decline and its image of decay was compounded by the Famine years (1845-1850). Although new hospitals were founded in the city, most were modest in appearance. The first hospital managed by a Catholic religious order, St Vincent's, opened in Dublin in the 1830s in a renovated townhouse, but it was much less spectacular than the purpose-built Mater. By examining the presentation of the Mater Hospital in late nineteenth-century media and comparing it with physical descriptions of medical philanthropy in Dublin earlier in the century, and in other cities, this paper will demonstrate how hospital space played a significant role in building the confidence of a previously marginalised religious group and in bolstering the reputation of a maligned city.

BRIEF CURRICULUM

Joseph Curran is currently a Postdoctoral Researcher at the Centre for Teaching and Learning, Maynooth University and have a broad interest in teaching practice, widening participation, and communicating about academic research with the world beyond the University. He is a comparative historian of the nineteenth century and since his postgraduate studies (PhD Economic and Social History, University of Edinburgh, MA Social and Cultural History of Medicine, University College Dublin), he has given attention to the interaction of urban space and medical history. He is particularly interested in the how the architecture of charities in nineteenth-century Dublin and Edinburgh reflected and reinforced their image as capital cities and have a forthcoming book chapter on this topic focusing on the early nineteenth century.

Magnus Altschäfl | Ludwig-Maximilians-Universität

The San Francisco General Hospital – A Symbol for a Modern City

In the early 20th century San Francisco was known as a city of plagues with tuberculosis ever-present and plague outbreaks as late as 1908. The 1872 City and County Hospital, which was once celebrated for its “lofty ceilings” and “well ventilated” rooms had long become a problem and was described in 1908 as “an old, dilapidated, most unsanitary wooden structure”. Thus, a new hospital seemed necessary, but not just any: “the finest of its kind”, one worthy of a city that branded itself the “New Rome”.

The San Francisco General Hospital (SFGH) was opened in 1915 during the last days of the “Panama-Pacific International Exhibition”, that had further troubled the relationship between the city and its working poor whose quarters were destroyed on a large scale to make room for the world exhibition.

The new hospital, I argue, thus offered a chance for city officials to represent the city as both a place of modern science to the rest of the country and one caring about and for the health of its poorest citizens. To achieve that, the hospital's design was crucial.

By analyzing the SFGH's design and architecture I will show how the city used this building – its exterior as much as its interior – to both present itself to medical professionals and to strengthen the city's imagined community. However, the architecture was not only influenced by aesthetic considerations but also medical ones. Which is why the new SFGH had a large state-of-the-art “Tubercular Ward”, to fight San Francisco's most prominent disease.

In my talk I will focus on some parts of the ensemble, like the driveway and the wards. By contrasting it with the old hospital I will highlight the spatial and architectural manifestations of changes in both medical practice and the socio-political role of hospitals.

BRIEF CURRICULUM

Magnus Altschäfl is a PhD candidate at Ludwig-Maximilians-Universität (LMU) Munich's History Department, where he works at the Chair for Modern and Contemporary History (Prof. Margit Szöllösi-Janze). He has studied history and political sciences at LMU Munich and UC Berkeley and was recently a visiting researcher at Stanford University. After having finished his project on medicine and science in the San Francisco Bay Area, he is currently working on his dissertation on the emergence of the biomedical and biochemical research site Munich-Martinsried as a member of the DFG research group “Cooperation and Competition in the Sciences”. However, he is right now working on a paper about the San Francisco General Hospital to publish something about his “old” (but still running) project. This paper is part of this paper he is working on at the moment.

SESSION 5

Transforming Spaces through Medical Theory

Somreeta Majumdar | Visva-Bharati University

Buddhist Monastery, Medicine and the Body Politic: A Historical Study of the Healing Service of the Buddhist Monasteries of Eastern India with Special Reference to the Nandadirghi Vihara of Jagjivanpur

A vast body of knowledge of medical practices and healing services of the Buddhist Monasteries is produced in Pali, Sanskrit, Tibetan, Chinese scriptures of Buddhism. The written sources provide well-documented account of traditional Buddhist remedies for the physical and spiritual maladies. Healing Services of the Buddhist monasteries to cure physical and spiritual illness have been regarded as a path to salvation by compassionate acts. The scriptures offer an insight to the role of meditation, herbs, food to cure the physical and spiritual diseases. Apart from herbs and food, meditation is believed to be the means of cleansing mind and body. Both empirico-rational and magico-religious ways of treatment are discussed for healing services. The cult of Bhaisajyaguru or the “Master of Healing” is developed in the pantheon of Mahayana Buddhism in relation with the Buddhist monastic tradition of healing. The purpose of this study is to inquire the monastic activities of healing services to the monks and laities and hence its role in the political dynamics of the governance in the region of Eastern India from the 8th to 12th century CE. The Nandadirghi Vihara of West Bengal is taken as a case study to understand the nature of relationship between the Buddhist monastery and its surrounding landscape to procure the resources and delivering the knowledge of healing as act of compassion to the sentient living beings of the landscape which oscillates between permanence and impermanence because of the detrimental effect of the seasonal flood. The healing service of the Buddhist monastery is central to this study to understand the relationship between the temporal power of the Pala dynasty and the spiritual authority of the Nandadirghi Vihara which stands negotiating with the flood prone landscape.

BRIEF CURRICULUM

Somreeta Majumdar, the author of the paper titled “Buddhist Monastery, Medicine and the Body Politic: A Historical Study of the Healing Service of the Buddhist Monasteries of Eastern India with Special Reference to the Nandadirghi Vihara of Jagjivanpur” is the Doctoral candidate of Visva-Bharati, Santiniketan, India. Her area of study concerns the landscape and the cultural milieu of the Buddhist establishments of western Bengal.

On September 3, 4 and 5 of 1775, the sick that were formerly lodged at the Royal Hospital of All Saints, were transferred to the newly opened Royal Hospital of Saint Joseph. For its location in a high and airy area, the new hospital in the Portuguese capital, designed by the military engineer José Monteiro de Carvalho (a main actor in the capital's reconstruction program), met the requirements of hygienist doctors.

The hygienist speech, based on the optimism of the Enlightenment, was widely disseminated in Europe during the seventeenth century, through the publication of successive medical treatises, among which the *Treaty on the Conservation of the Health of the Peoples*, by Dr. Ribeiro Sanches, published in Paris in 1756. Based on the realities he knew, the renowned Portuguese physician presented a pessimistic “diagnosis” of the existing problems, associated with the growing number of the poor and sick and with the terrible sanitation conditions of the few existing hospitals

Like most hygienist doctors, Ribeiro Sanches proposed “therapeutic measures” to solve the diagnosed “ills”, considering that the location (in high and airy places) and the layout of the hospitals (with large and well-ventilated wards) were a priority, because the circulation of “clean air”, essential to heal the sick, depended on them.

The proposals by Ribeiro Sanches and, generally, by all hygienists, regarding the construction and renovation of existing hospitals, sensitized the European intellectual elite, which included doctors, military engineers, lawyers and the enlightened aristocrats, whose pressure on the authorities was decisive for the creation of new health policies and renovation of hospitals.

In a paradigmatic way, the Royal Hospital of Saint Joseph reflected in its location and outline not only the proposals of the hygienist doctors, but also the technical-scientific knowledge inherent to the military engineers of the time.

BRIEF CURRICULUM

Adelia Caldas holds a PhD in Art History by the Faculdade de Ciências Sociais e Humanas of the Universidade NOVA de Lisboa. Associated Researcher at the Art History Institute of Universidade NOVA de Lisboa. Communications at various Congresses and Colloquia, from 1991 to 2016; collaborator in the project “Conventos de Lisboa”, organized by IHA. of the Universidade NOVA de Lisboa and the Lisbon City Council (2013-2015). Author of articles published in *Cadernos do Arquivo Municipal*; reviewer of articles of the *Cadernos do Arquivo Municipal de Lisboa*.

Li Yanchang | Peking University

Nationalization of Modern Medical Space and the Founding of the Peking Central Hospital

Beijing Central Hospital was set up under the background that the western hospitals were transforming from traditional to modern and the debates between Chinese and western medicine was increasingly fierce. During the late Qing dynasty and the early Republic of China, it was proposed twice. Under the efforts of Wu lien-teh, Shi Zhaozeng and others, it is the first “the most scientific and great hospital created and run by Chinese people” in the way of social charity. It reflected not only the dissatisfaction of the domestic western medical circles and social intellectuals with traditional medicine and hospitals, but also the desire for modern medicine and medical space owned by Chinese. In the sense of “modern hospital”, it was honoured as “the first hospital in capital founded by Chinese”. From the synchronic and diachronic perspectives, it is not hard to find that the establishment process of the Central Hospital reflects dual missions of “nationalization” and “modernization” undertaken by the domestic western medicine circle.

BRIEF CURRICULUM

Yanchang Li, lecturer at the School of Health Humanities in Peking University, China. My research focuses on the history of medicine in modern China, history of Western-style hospitals in China, health politics. At present, I’m undertaking a project of “Social History of Antibiotics in China (1941-1978)” sponsored by the Ministry of Education of China.

Johanna Rustler | University of Aberdeen

Treatment on Rails: Britain’s Hospital Trains in the First World War

The circumstances of the First World War created novel physical and mental injuries and diseases, which meant that medical treatment facilities and transportation of patients had to be innovated. Special vehicles were created in order to treat casualties fast and effectively while removing them from war-torn territory as quickly as possible. High casualty numbers influenced new ideas of a desperately needed space to accommodate vast numbers of men, while treating, caring for and transporting them. This meant that hospitals were made mobile by moving them onto rails, which ensured that casualties got closer to home, get treated by specialists as soon as possible and relief base hospitals at the front.

The hospital train was one of the most vital first aid vehicles in the War. By comprising a hospital unit into a moving vehicle, a major task was given to railway companies. It was an architectural experiment built by British railway engineers who repurposed passenger wagons into medical treatment areas. While rudimentary in design, the hospital on wheels was usually equipped for more than 500 patients, including separate cars for pharmacies, treatment, including separate cars for infectious cases, segregated ward cars for officers and higher-ranking soldiers, staff cars for doctors and nurses, personnel cars for railway staff, kitchen and pantry cars. For propaganda purposes, the train was painted in railway company colours in order to be distinguished from others and received great pride and admiration, especially when it was put on show before it was brought into service. With the hospital train, the treatment facility was able to get to the casualties, rather than the other way round.

BRIEF CURRICULUM

Johanna Rustler is currently a PhD student at the University of Aberdeen and the National Railway Museum, York with Professor Anthony Heywood, Dr Ben Marsden and Dr Oli Betts. Her doctoral research focuses on the social and cultural history of British railway workers on the home front during the First World War. She obtained her MSc in Economic and Social History at the University of Oxford with Dr Roderick Bailey focusing on the history of military medicine and my BA (Hons) at Queen Mary, University of London and King's College London with Professor David Edgerton. She is interested in the study of modern war and conflict, the history of medicine, and the spaces in which those overlap, as well as history from below. In trying to unravel the enigma of the total effect of the First World War, she has written on the impact of new industrialised methods of warfare upon an unsuspecting and unprepared population, both combatant and civilian, particularly regarding new forms of warfare and the medical consequences this placed upon all those affected.

SESSION 6
Hospitals in the Cold War

Andreas Jüttemann | Charité Universitätsmedizin Berlin

The West Berlin University Hospital Steglitz as a political issue – The realisation of a (supposed) US hospital culture in the context of the student movement (1957-1974)

The world-famous Charité hospital was the only university hospital in Berlin until 1945. After the war, the city was divided into East and West. A second general university was founded in the western part of the city in 1948: the Freie Universität Berlin with an affiliated medical faculty. This gave rise to a need for a large teaching hospital in West Berlin and gave birth to the University Hospital 'Steglitz', built with US-American support (foundation stone laid in 1959 and opened in the winter semester 1968/1969). In 2003 it was integrated (as the Campus Benjamin Franklin) into the clinic group Charité – Universitätsmedizin Berlin.

The building of the new West Berlin University Hospital proved to be a political issue from the outset. Firstly, because the project had propaganda issues – the US State Department wanted to build the large hospital, not only (co-)financing, but also demonstrating the economic and architectural superiority of the USA over the Soviet Union. But the US State Department's plan ended up being characterised by a number of political paradoxes: The first was that the American architect chosen by the State Department, Arthur Davis, was a Gropius student, and cannot actually be said to be the founder of an original American style – the departmental system he designed for Steglitz, which was assumed to be American, is actually rooted in the German Bauhaus tradition. A second became apparent in the context of the student movement. The West Berlin medical students demanded the dissolution of the hierarchies in the personnel structure of the new clinic and protested. On the one hand, they were protesting against America's much criticised role in the Vietnam War and, on the other hand, they were demanding a more consistent implementation of a concept which the students considered to be American. However, the restructuring of the hospital system demanded by the students in 1968/1969 never materialised. There was a test, in Steglitz, of the new model under the Medical Director Frank Matakas, who had been elected to this position as an assistant doctor, but it was never adopted. All that said, regardless of whether Steglitz can be identified as a Bauhaus project or as an American creation, and regardless of the fact that flattened hierarchies are rare in German

hospitals today, the Steglitz Hospital can nevertheless be said to be a prototype for the modern European hospital system (“all under one roof”).

BRIEF CURRICULUM

Andreas Jüttemann studied psychology at the Free University of Berlin and the University of Bremen as well as urbanism at the Bauhaus University Weimar. From 2013 to 2015, Jüttemann worked as a research assistant at the Institute for History and Ethics of Medicine at the University of Halle-Wittenberg and received his doctorate in 2015 at the Institute for the History of Medicine at the Charité Berlin on lung sanatoria in Prussia (1863-1934). Since 2016 he has held this position at the Charité Institute for History of Medicine. In addition, he was employed as a research assistant at the Institute for Working Theory of Vocational Training at the TU Berlin from 2015 to 2020. In 2018, Jüttemann was a postdoctoral fellow of the Charité’s commission for young researchers, among other things to provide scientific support for the 50th anniversary of the Charité Hospital Benjamin Franklin. For this he received 2018 the sponsorship award of the German Society for Hospital History. As a post-doctoral fellow of the Fritz Thyssen Foundation, he was a visiting scholar at the historical seminar of the Institute for Advanced Study in Princeton, New Jersey, in spring 2019.

Ed DeVane | University of Warwick

How I Learned to Stop Worrying and Love the NHS: Operational Research, Think Tanks, and Changing Models of British Hospital Care in the Cold War, 1964-72

This paper will concentrate on hospitals as ‘model’ spaces, focusing on British attempts to apply Operational Research to make ‘bad designs’ function ‘better’. Internationally, the 1960s saw a rapid change in architectural and planning thought towards health-care facilities. As the Cold War prompted more sceptical attitudes towards science and technology, physical modernity alone seemed less capable of addressing the concerns of different publics. Many tower-on-podium building designs were already regarded as obsolete and inhumane by the time of their completion. In Britain, the Ministry of Health responded by investing in a research and development programme to make these spaces appear more functional and cohesive.

Through a case study of one of the beneficiaries of this funding, the Institute for Operational Research, I argue that models of the planned hospital did not simply fail but were dynamic and evolving. New knowledge from psychology and the basic sciences was applied to problems of commissioning, appointments, waiting lists, and ward management. The Institutes’ aim was to prove how human understanding could be aided, rather than aggravated, by the advance of technology with more synthetic bodies of research and the utilization of digital computers. Anxiety in the professional

self-image of Operational Researchers acted as a motivating force. By disseminating mathematical techniques and theories from the military-industrial complex to health services, they hoped to prove the peacetime viability of their discipline. Through more complex planning, the Institute enacted cultural debates about how hospital-community relations could be reconciled in a mood of global social crisis.

BRIEF CURRICULUM

Ed DeVane is a third-year PhD student in the Centre for the History of Medicine at the University of Warwick. His project, *Building the NHS: planning, publics and Britain's new state healthcare facilities, 1945-1974* is supervised by Professor Mathew Thomson and Professor Roberta Bivins and is supported by the Wellcome Trust. He studies the planning, design, construction, and commissioning of primary and secondary healthcare institutions in post-war Britain. Whether due to wartime bomb damage or decades of under-investment, the poor condition of inherited buildings was one of the earliest crises the British National Health Service (NHS) had to contend with. Yet for almost fourteen years, no central government policy came close to providing adequate support for the development of new facilities. His project argues that in spite of this, the planning and design of hospitals and health centres continued as a dynamic, locally rooted, and often contentious process, which is altogether symbolic of how the wider health service really developed and acquired meaning.

David Freis | Universität Münster

The Rise and Fall of the Medical Megastructure: Hospitals of the Future in Cold-War Western Germany

In the second half of the twentieth century, large high-tech hospitals emerged as symbolic spaces of the future of medicine in a technological age. In Western Germany, several new medical centres were built in the period the late 1950s and the mid-1980s. Despite local differences, their architecture relied on the greatest possible concentration of the hospital's functions into an integrated material infrastructure under a common roof, the spatial structure of the hospital representing rationalised efficiency and close cooperation between medical specialities.

To hospital planners, members of the medical community, and the public, these buildings became entangled with expectations of the medicine of coming decades. However, these material and spatial anticipations of the future had to be used and inhabited by doctors, staff, and patients in the present. While initially greeted as harbingers of the high-tech biomedicine of the future, they increasingly became embroiled in controversies about politics, architecture, medicalisation, and the looming dehumanisation of modern medicine. Even before the construction of some of these hospitals was

completed, they were already widely considered as anachronistic hulks and relics of yesterday's future.

This paper will use several built examples – the university hospitals of Berlin, Cologne, Münster, Aachen – as well as architectural and medical debates and audio-visual sources to trace the history of the rise and fall of the medical structure in Western Germany. I will show how the conflicts around the new hospitals were themselves framed in temporal terms and reflected conflicting visions of the future.

BRIEF CURRICULUM

David Freis is a medical historian at the Institute for the Ethics, History, and Philosophy of Medicine of the University of Münster. He has studied history, political sciences, and gender studies at the University of Bochum and received a Ph.D. in History and Civilization from the European University Institute in Florence in 2015. He is the author of articles and book chapters about the history of psychiatry and psychotherapy, and his monograph *Psycho-Politics between the World Wars* was published by Palgrave Macmillan in 2019. He currently researches the history of the medicine of the future in cold-war Germany.

Eleni Axioti | University of the Arts London

Corpus: The architecture of British hospitals in the 1960s and the politics of observability

The paper takes as its point of departure the Hospital Plan of 1962 and the launch of the extensive ten-year building program by the British welfare state, which came with explicit instructions regarding the design of hospitals. The use of space in the wards based on the pattern of movements, the arrangement of rooms and facilities, planning considerations based on population statistics, but even the examination of the lighting, sound control, and the effect of colors were included in accompanying reports. This extreme rationalization and scientification of the design of hospitals in the 1960s are directly related to an explicit attempt for modernization. Within this context, two typologies of hospitals emerge, the tower block hospital, and a flexible form of the hospital that is characterized by adaptability. The paper will focus on the impossibility of both these architectural systems to function without the application of the new technologies of communication and observation. The modern hospital becomes indispensably linked to the development of these technologies, marking a transformation of people from bodies to monitored objects and data. To explore these aspects of the hospital space, the paper investigates the operation of observability within the architectural space of the two specific hospitals (the Guy's Hospital and the Northwick Park Hospital). It takes into account the physical arrangement and material characteristics

of architecture that allow for this operation to take place as well as the implementation of the technologies that extend it. Hence, the paper endeavors to explore how the concept of the individual as an object of medical care within the hospital spaces expanded and transformed from an examined body into a set of scientific data and the implications that this had in its desubjectification. Michel Foucault's idea of the 'medical gaze' describes exactly the break between the patient as a person and his body as the object of medical inquiry and scientific knowledge. Through this separation, the human body becomes an object of administration and enters the field of power relations, while the clinic becomes a space of conduct, where the transformation of the observed human body to translatable data takes place.

BRIEF CURRICULUM

Eleni Axioti is a researcher and an educator. She is lecturer in contextual studies at University of the Arts London and course leader of the second-year history and theory studies at the Architectural Association School of Architecture. Eleni also supervises dissertations at the third year of the BArch at Central St. Martins School of Architecture. She concluded her Ph.D. thesis at the Architectural Association on the institutional architecture of the British welfare state. She holds an M.A. in History and Theory of Architecture from the AA and a Diploma (MEng.) with honors from the Aristotle University of Thessaloniki. Her research focuses on the relation between institutional architecture, the welfare state and issues of social policy. She has practiced in London since 2008 and has participated in numerous international conferences and publications.

SESSION 7
Colonial and Indigenous Models

Michaela Clark | University of Manchester

Designing the Clinic: Racialised Architecture and the Old Grootte Schuur Hospital

Located in Cape Town, South Africa, the Old Grootte Schuur Hospital was the largest teaching facility harnessed by the city's medical school from 1938 until 1987. But the design of this structure was notably informed by more than clinical needs. Conceived of and constructed in the decades leading up to the official implementation of apartheid (a system of governance based on racial segregation), the layout of this building embodies the racialised discourses of the country in a city whose demographic make-up troubled national norms.

This paper attempts to articulate the spatial entrenching of race-based power relations in the architectural makeup of the Old Grootte Schuur Hospital. Drawing on the history of hospital design both internationally and within South Africa, it suggests that the physical layout of this built environment not only mirrored but reinforced the socio-political macrocosm that lay outside its walls. Today, this 'old' building lies on the outskirts of the 'new' teaching facility (constructed in the 1980s), where it continues to be harnessed for medical administration and lectures. Ultimately, it is by thinking through the physical structure of the 1930s hospital through the intersecting lenses of new materialism, socio-spatial theory, and semiotics that this paper seeks to unpack the architectural as well as affective afterlife of structural and symbolic prejudice in post-apartheid South Africa.

BRIEF CURRICULUM

Michaela Clark is a 2nd-year PhD candidate at the Centre for the History of Science, Technology, and Medicine (CHSTM) at the University of Manchester and her prior academic training lies in Visual Culture Studies (conducted through Stellenbosch University in South Africa). While her main research focus lies in the history of clinical photography, her engagement with medical institutions of the past (particularly those operating during South Africa's apartheid-era) has greatly drawn my interest in terms of epistemic violence and contemporary redress.

Hospitales limeños usos, funciones y cambios durante el virreinato Lima fue fundada en 1535, junto con el soldado español llegó su religión, idioma y cultura, justamente una de esas fue la de construir hospitales, los mismo que más que cumplir una función curativa, eran un albergue temporal donde podía dormir y alimentarse el indigente y a la vez pasar sus últimos días para luego poder morir en paz, rodeado de amor y caridad. Estos hospitales eran centros religiosos donde la ciencia estaba subordinada a la religión, en ella los tratamientos eran muy pobres y se notaba una constante influencia de oraciones y acumulación de sacramentos. Otra característica de estos hospitales era la separación de personas, de acuerdo al tipo de raza, es así que para los blancos se tenía el Hospital de San Andrés, para los indios Santa Ana, y para la población esclava San Bartolomé.

En cuanto a la arquitectura, esta se caracterizaba por presentar un gran claustro central, con una capilla a uno de sus lados y diversas oficinas en los otros lados. Asimismo, presentaba un cementerio. Mientras que las salas de enfermos denominadas “crujías” eran salas rectangulares donde se depositaban a los pacientes en filas frente a frente, mientras que en la parte delantera de cada sala se levantaba un pequeño altar con una imagen de un santo; todas las salas miraban frente a este altar. Al momento de ingresar un paciente y conforme se ponía peor su salud el enfermo iba ascendiendo de la parte alejada a la más cercana al altar, en donde moría junto a Dios.

Al llegar las Reformas Borbónicas, en la segunda mitad del XVIII, los hospitales empezarán a sufrir cambios a nivel de su arquitectura (cambio de concepto de hospital claustro por hospital pabellón, asimismo aparecerán ideas de salubridad, todo lo cual modificará el concepto de hospital.

BRIEF CURRICULUM

Antonio Coello studied archeology at the Universidad Nacional Mayor de San Marcos, obtaining a Bachelor's degree, later he studied history there, being only a graduate, years later he studied a Master's Degree in History at the same University His research topics are, in history, health, hygiene and hospitals, while in archeology, he investigates the Inka and historical archeology. He has published various health issues in national and specialized magazines, as well as in foreign magazines. While in the area of historical archeology he has developed excavations in hospitals and settlements in general of the viceroyalty period. International speaker at various congresses, such as the International Congress of Americanists, as well as at the Ibero-American Urban History Seminar. Among his contributions to the history of health and hospitals, we can mention the one published in 2018 by the National Autonomous University of Mexico, and in the Journal of the University of Chile, Faculty of Architecture. He also works as a professor at Universidad Privada del Norte, and researcher; at the same time directs an editorial group, Sequilao Editores.

Ling-Yi Tsai | National Yang-Ming University

Taiwanese Hospitals: Plague Quarantine Hospitals Using Han medicine in Early Colonial Taiwan

In 1896, the bubonic plague outbreak in Taiwan. The plague policy of quarantine, separation, disinfection, and lockdown disturbed Taiwanese people. In the beginning, ill patients, Japanese or Taiwanese, were both removed to the quarantine hospitals. However, the Taiwanese strongly opposed to western medical care. Taiwan local elites petition for a traditional medical hospital solely for Taiwanese, setting apart from western hospitals for Japanese. Appealing to possible hidden plague patients and appeasing Taiwanese people, the first official Taiwanese Plague Clinic established in Monga, Taipei, directed by a Japanese doctor but using Han medicine. Since the clinic was successful, more Taiwanese hospitals were built subsequently.

From the Taiwanese Plague Clinic to Taiwanese hospitals, the hospitals create a unique space that allows traditional *Han* medicine to evolve. By using *Han* medicine, Taiwanese hospitals encouraged more patients to show up and receive medical treatment. Due to considerable clinical experience, Taiwan traditional doctors were able to bring forth new medical knowledge, including medical texts and articles. For example, Huang Yu-Jie, one of the employed doctors in Taiwanese Plague Clinic, published *Gedawen Zhifa Xinbian* (疙瘩瘟治法新編), wrote his expert

opinions on the plague. Other Taiwanese doctors publish articles about the epidemic caused by foul-qi, possibly influenced by miasma theory in the newspaper. Taiwanese medical doctors also formed study groups to learn the latest knowledge from Japanese doctors. The new space of Taiwanese hospitals makes traditional medicine join in the colonial government's medical network.

As we have been through a COVID-19 pandemic, the history of plague hospitals may shed light on the current frustration over the lack of treatment and vaccines. We overlook the value of quarantine and separation that was a primary method to halt the spread of contagious diseases in the past. And the use of traditional medicine is another possible aid for disease control.

BRIEF CURRICULUM

Ling-Yi Tsai is a physician of Traditional Chinese Medicine graduated from the Institute of Science, Technology, and Society (STS), National Yang-Ming University, Taiwan. Her master's dissertation explores the plague control policy in Early Colonial Taiwan. In this study, she found Taiwanese plague hospitals, using traditional medicine, were major health care institutions for Taiwanese plague patients. Tsai is interested in the history of traditional medicine, hospitals, and pandemic/epidemic in East Asia.

SESSION 8

Hospitals as Social Spaces

Elena Paulino Montero | Universidad Nacional de Educación a Distancia, Marta Vísreda Bravo | Universidad Nacional Autónoma de México, and Raúl Villagrasa Elías | Consejo Superior de Investigaciones Científicas

Spatial Dimensions of the Holy Cross Hospital in Medina de Pomar: A Unique Case in Late Medieval and Early Modern Iberia

The Vera Cruz Hospital was founded in 1438 by Pedro Fernández de Velasco, Count of Haro, in the Castilian town of Medina de Pomar, near Burgos. The hospital was adjacent to the Poor Clare's monastery, place of the funerary vault of the lineage.

This was a unique case in the Iberian context at the time. It was a hybrid foundation, conceived to host a group of temporary residents, sick and poor, plus a group of permanent residents, composed by impoverished knights from different villages and cities of the Count's lordship. The Count had a private apartment at the complex, where he retired during the last ten years of his life, and he donated his rich library to the hospital for the use of the community. He also founded the first chivalric order ever created by a member of the nobility and made the hospital the spiritual centre of it.

The architectural structure suffered greatly during the next two centuries. In this paper we first aim to reconstruct the space of the hospital, based on the discovery of new written sources, as well as photographs and field research. We will consider the relationship between architectural structures and function and the problematic interactions between gendered spaces of the monastery and the hospital. Secondly, we will analyse the different spatial dimensions of such structure. Considering the space as something socially constructed, and a reflection of the mentality and ideology of the one who orders it, we will delve into the ritual dimension, centred in the participation of the hospital residents in both, daily preachers at the church of the monastery and the main funerary ceremonies of the members of the lineage; the territorial dimension, and the role of the hospital in the organization of the lordship; and the ideological dimension, as part of the genealogical project of the Count of Haro that evolved during the next generations.

BRIEF CURRICULA

Elena Paulino Montero is Associate Professor at Universidad Nacional de Educación a Distancia. Prior to that, she has been postdoctoral fellow at the UNED in Madrid (2018-2019), and at the Kunsthistorisches Institut in Florence (2015-2017). Her research is devoted to patronage, gender studies and transcultural artistic exchanges during the Late Middle Ages in the Iberian Peninsula. She is part of the Cost-Action I8129 *Islamic Legacy. Narratives East, West, South North of the Mediterranean (1350-1750)*.

Marta Vírveda Bravo is postdoctoral fellow at the Institute of Historical Research (IHR) of the National Autonomous University of Mexico (UNAM). She had recently defended her doctoral thesis about the library of the Velasco family in the hospital of the Holy Cross. She is currently the secretary of the *Red del Libro Medieval Hispánico*, group of interdisciplinary researchers interested in the history of the handwritten and printed book: (<http://www.libromedievalhispanico.net/>).

Raúl Villagrasa-Elías is a predoctoral fellow at the Institute of History of the Spanish National Research Council (IH-CSIC) in Madrid and a PhD candidate in the University of Saragossa (UZ). He is developing a doctoral thesis titled *Power, Memory and Charity: the Hospital Renaissance in the Iberian Peninsula (15th-16th centuries)*. He is also improving the web page about hospital networks called *Retia Hospitalium (Rethos)* (<http://rethos.scriptamanent.info/>).

Zehra Tonbul | Istanbul Sehir University

Hospitals as Socio-Political Spaces: Mapping Hospitals in Late Ottoman Empire

The paper aims to trace the socio-politics of first civil hospital buildings of the Ottoman Empire. The establishment of modern hospital buildings in the Ottoman Empire dates to the second half of the twentieth century and their architecture marks a transformation from medieval complexes. They are reflective of the modernization process of the Empire with their similar Western spatial typologies, and they are also indicators of transforming society of the Empire. The reasons of their establishment -- as imperial projects, as minority hospitals and as French, American and British missionary projects -- are indicative of the different political approaches to the new society. The paper aims to map these hospitals geographically and architecturally to develop an alternative reading of the social geography of the late Ottoman Empire.

BRIEF CURRICULUM

Zehra Tonbul is currently Assistant Professor of History and Theory of Architecture at Istanbul Sehir University. Her research focuses on turn of the century intellectual history from the point of view of art and architecture; it covers topics of historiography,

West-East perspectives, the relation between natural sciences and humanities. She has completed her doctoral thesis in 2018 at Bogazici University of Istanbul and with co-advisorship of the Department of Art History at the University of Vienna, with a thesis titled “The Art Historiographical Odyssey of Ernst Diez (1878-1961).” She has an undergraduate degree in Architecture from Istanbul Technical University and an MPhil in History and Philosophy of Architecture from the University of Cambridge. She is one of the authors of a Turkish language book on first civil hospital buildings of Turkey, “Tarihi Hastaneler: Gureba Hastaneleri’nden Memleket Hastaneleri’ne İlk Sivil Hastaneler” dating to 2009.

Narciss M. Sohrabi | Université Paris Ouest

Reflection of Socio-Cultural Challenges on the Hospitals and Medical Spaces in Iran

In Iran, the hospital is of particular importance as a place where the process of care and treatment of the patient is performed. In its architecture, the centrality of man and meeting his needs is a priority. Healing is a multidimensional process that includes various factors, including psychological and physical factors. Psychological factors are related to spiritual, mental, emotional, and social requirements. Medical spaces in Iran indicate the fundamental difference in people’s attitudes and public culture towards the hospital space. The architecture and design of the medical space, concepts such as the relationship between the patient’s companions and visitors following Iranian culture, differentiate the hospital space in Iran from other countries. From the pre-modern period, the establishment of health institutions has always been one of the branches of cultural-civilizational changes. In this era, along with military and government hospitals, hospitals were created by Europeans, Americans, and missionaries for civilians. These health institutions, along with considering the characteristics of Iranian culture, are significant treatment spaces that many of them have been nationally registered due to their outstanding architecture. This research deals with investigated the relationship between hospitals with cultural and indigenous characteristics and public spaces through a library study on hospitals’ history in Iran, hospital space and their architecture and it seeks to investigate the relationships between hospitals’ local perceptions, interviews, and questionnaires .The following questions have been answered in this research: What were the effects of the performance of pre-modern hospital on the social and medical structure now? How did religion and socio-cultural beliefs affect the form and architecture of historical hospital? And what meanings are associated with the presence of social activists in the hospitals?

BRIEF CURRICULUM

Narciss M. Sohrabi received a Ph.D. degree in the management of space and society from Paris Nanterre University. Currently, he is a visiting research fellow in LADYSS, Nanterre. His Ph.D. dissertation was structured around public space theory focusing

on documenting how geopolitics affects revolution changing and Tehran's urbanization processes in the 20th century and Middle East countries. After completing the Ph.D. in France, his research interests were on the abstraction of public space and urban histories challenges in the Middle East counties. Then, he worked on socio-historical movements review of in comparison projects studying the effects of memorials, creativity, and public attraction using quantification and qualification methods. He has published manuscripts in peer-reviewed journals and publications, such as Hermitage publishing house, ARTisON, Urban Creativity Journal, Institute of Middle East Studies-Canada, Arts and Social Sciences Journal, Bloomsbury Publishing, L'Harmattan, and the Multidisciplinary Journal of World Affairs. Besides, for reaching a broader audience, he has published manuscripts for online outlets, such as Lo Squaderno, Iwan (France-Persian), and Tandis Journal (Persian). he published his first book titled: "La révolution iranienne et les espaces publics à Téhéran" in 2016, and developed several research projects on public religious, services building with emphasis on public space. I have received Awards, Grants and Fellowships.

Ronja Tripp-Bodola | Louisiana State University Health Sciences Center New Orleans
In Charity Hospital's Shadow: Catholicism, Race and New Orleans Public Health

Charity Hospital New Orleans is one of the oldest hospitals in the United States. It shaped more than the local cultural imaginary, collective memory or New Orleans public health. This paper argues that its history is a history of spatial concepts that have been feeding into the architectural designs of its various incarnations. At the same time, its different locations throughout the city read as a socio-cultural history of New Orleans. A closer look at the concepts and architectural spaces of 'Charity Hospital', from its founding days in the late 18th century to today's University Medical Center New Orleans, will reveal how deeply ingrained this hospital is in the city space, in its race relations and social politics as well as in regional history. The talk will illustrate how the history of Charity Hospital traverses all the aspects mentioned in the call, however, it will focus mainly on points four (social space) and five (sponsorship). The talk will trace the significant shifts and changes from the beginnings as a "hospital for the poor" to the significant name change after Hurricane Katrina that distanced itself from the original Christian principles, from segregated wards to wards divided by the patients' home addresses; finally, it looks at its different locations in the city and how it relates to eminent domain, redlining and monumental racism.

BRIEF CURRICULUM

Ronja Tripp-Bodola, PhD, is a medical humanities scholar who works at the Department of Psychiatry, LSU Health Sciences Center New Orleans. Her research interests include biopolitics, intersectionality the history of Louisiana mental health and its institutions.

SESSION 9
Spaces of Knowledge and Healing

Mats Dijkdrent | University of Cambridge

Healing through Space: Plague and Mental Health Institutions in the Sixteenth-Century Low Countries

How has medical knowledge been used to shape hospital space? This paper aims to answer this question by examining the case of the sixteenth-century St. Caecilia hospital, a plague hospital and madhouse (*dolhuis*) in Leiden in the Low Countries. There are of course some examples in Italy of medical knowledge that is integrated in the hospital design. Existing historiography overwhelmingly dates, however, the medicalisation of hospital architecture to the eighteenth century. This paper demonstrates that both traditional expectations about the arrangement of hospital space and medical theories about the impact of space, light and flow of air were already integrated into Dutch sixteenth-century hospital designs.

In the Low Countries, plague and mental health institutions often were combined in one building. This practice originated from the confraternity of Cellites that cared for both groups in the period before the reformation. After the reformation, the city of Leiden lacked such an institution and therefore, in 1598, the masters of the Leiden's main hospital wrote an architectural plan for a new plague hospital and madhouse. They sought advice from three different medical institutions and based their design upon medical insights on how to create a healthy, therapeutic space. The location of the plague hospital within the city, the position of the windows and the orientation of the beds were for example all based on medical knowledge. The design for the madhouse states that secluding the mentally ill in dark cells was based on medical advice and the confinement was meant to cure the inmates. The integration of knowledge in the design created a space with its own discourse which legitimised the authority and actions of the medical staff. The plague hospital and madhouse are furthermore social spaces that marked the social otherness of the groups housed in the St. Caecilia hospital.

BRIEF CURRICULUM

Mats Dijkdrent has completed two BA degrees – in History and in Art History – at Leiden University (The Netherlands) and recently obtained his Research MA degree in Medieval and Early Modern History from the same university. Mats is currently enrolled

in the MPhil History of Art and Architecture programme at Cambridge University. He is especially interested in the interrelation between pre-modern art and theoretical/scientific knowledge.

Christine Beese | Freie Universität Berlin

Knowledge-making between Arts and Science. The Integration of Anatomical Theaters into Hospital Architecture in Modena, Frankfurt and Paris in the 18th Century

Having emerged primarily within university complexes (including the Palazzo del Bo in Padova and the former Beguine-Church in Leiden, 1596), the building type of the Anatomical Theater realized in space the shift in knowledge that New Philosophy had brought to universities in early modern period. As a place for exercising, presenting and disseminating medical knowledge, the Anatomical Theater had become a symbol but also an aid to the integration of surgical arts into medical erudition. During the 17th century, the Anatomical Theaters became an integral part of the newly erected headquarters of Surgeon Guilds in London (Royal College of Physicians, Hooke 1675) and Paris (Le Confrérie de Saint-Côme, Joubert 1691) not least because of the Guilds' aspiration to the status of academical Institution. As they were also built in academies of sciences, in royal courts and hospitals, Anatomical Theaters became increasingly widespread in the 18th century.

By analysing and confronting the historical background as well as the spatial organisation of medical institutions in Modena (Ospedale Sant'Agostino, Toschi 1775), Frankfurt (Senckenbergische Stiftung 1768) and Paris (École de Medicine, Gondoin 1775), this paper will investigate the reasons for and consequences of the implementation of Anatomical Theaters into hospital architecture. Hence this paper will shed a light on the conception of medical learning but also on the intellectual and social status of healthcare during the 18th century.

BRIEF CURRICULUM

Christine Beese, born in 1981, is a research associate and lecturer at the Art History Department of the Freie Universität Berlin. She received degrees in Art History, Modern History and Museology from the University of Münster (2004), Heidelberg and École du Louvre Paris (2008). As a research associate, she worked at the Department of Architecture at the Technical University of Dortmund, where she also completed her PhD thesis on the topic of Marcello Piacentini's urbanistic projects (2014). Her thesis was awarded the Hans-Janssen Preis of the Göttingen Academy of Sciences and Humanities in 2014. At the Bibliotheca Hertziana, Max-Planck- Institute for Art History in Rome she held a scholarship and organized the conference L'Urbanistica a Roma durante il Ventennio Fascista (2013). She is currently working on the architecture of

anatomical theaters in early modern times with a special interest in the relationship between space and knowledge-making. Her main publications are: Beese, C (2016). Marcello Piacentini. *Moderner Städtebau in Italien*. Berlin: Reimer Verlag; Beese, C., 2016; Beese, C and Dobler, R eds. (2019). *Urbanistica a Roma durante il Ventennio Fascista* (Quaderni della Bibliotheca Hertziana 1). Rome: Campisano Editore.

Manuel António Pereira Couto | Universidade do Porto

The origin of Vila Real hospital: hygienist's guidelines and architecture for a modern assistance practice (1796-1844)

In a main village in the north of Portugal at the end of the 18th century, the local brotherhood of Our Lady of Mercy (*Santa Casa da Misericórdia*), took the steps to found a new hospital to replace the only and very old medieval hostel. However, this hospital was nothing more than a rented house where more needy people could be accommodated, and so it remained for about 27 years, until the mid-1810s.

At this time, the village witnessed changes. Some half-ruined structures were demolished and a neoclassical style palace was born thanks to the 1st Count of Amarante, a military hero of the peninsular wars.

The Count was the brotherhood's *Provedor* (same as head of the administration) and he encouraged the construction of a new building designed to be a hospital.

The sources reveal that physicians were consulted on the selection process for the building's location and efforts were made to comply with the hygienist's guidelines concerning hospital's architecture.

As the Count's Palace, the building follows the neoclassical taste, a style conceptually associated with scientific rationalism. And the development of the personnel linked to the assistance practice (increasing complexity and "laicization") is another sign that suggests a transition trend between a strictly charitable vision and a most modern and comprehensive assistance practice.

In short, fulfilling greater fullness the fourteen works of Mercy (take care of Soul and Body). If this infrastructure, which still exists today but applied to another functionality, remains striking in the urban setting of Vila Real, it was even more so at its early times, because it redefined an entire urban space. Even more, it promoted the appearance of new complementary equipment, destined to fulfil the last of the works of Mercy: to bury the dead.

BRIEF CURRICULUM

Manuel António Pereira Couto born on December 5, 1972. Master Degree in History by the University of Porto since 2009 with the dissertation entitled “Diseases and Patients at the Divina Providência’s Hospital at Vila Real de Trás-os-Montes (1796-1836)”. Research associated at *CITCEM – Transdisciplinary Research Centre «Culture, Space and Memory»* and *CEPESE – Research Centre for the study of Population, Economy and Society*. Booth research centers from University of Porto. History researcher and producer of scientific and cultural contents for academic institutions, museums and cultural enterprises, such as *Glorybox - Gestão Integrada do Património Cultural, Lda*. Examples of studies and conferences about Mercy brotherhoods and hospitals: “The health of the body – Santo António Hospital (1820-1910)”, (co-author), chapter included on “Contributos para a história da Santa Casa da Misericórdia do Porto” (“Under the cloak of Mercy – Contributions to the history of the Oporto’s Mercy Brotherhood”), Vol. III, published by *CEHR – Centre of Religious History Studies* (2018); “Dangerous travellers who could «not be seen, felt or touched» – concepts and the fight against the pathogens at the end of the eighteen century”, paper presented on the IV International Meeting of Young Researchers in Early Modern History (EJIHM). June 6, 2015.

SESSION 10

The Medical and Cultural Heritage of Hospitals

Valeria Rubbi | Università di Bologna

Hospital Spaces and Architectures in Bologna in the Modern Age

The hospitals of Santa Maria della Vita and Santa Maria della Morte, once placed one in front of the other, were born in medieval times (about 1275) thanks to the confraternities of the Battuti, in the heart of the city of Bologna. The first one was dedicated to the reception and care of the sick and pilgrims; while the other, as the name says, had to take care of the very sick and had the purpose of assisting prisoners and those sentenced to death, also providing for their burial. In the sixteenth century, the Pope's ambassador, Pier Donato Cesi started a great propaganda operation with the renewal of Piazza Maggiore and the surrounding areas, including the two hospitals: he designed more welcoming spaces and more "decorosi" environments, reorganizing the urban layout of a portion of the historic center. Through new documents it is now possible to reconstruct those hospital environments, which perpetuated the care and devotional function for the next two centuries.

BRIEF CURRICULUM

Valeria Rubbi is a RTDa researcher at Bologna University from 2013 to 2016, with extension until 2018, she carries out her research activity mainly in the field of modern art history. Her interests are principally oriented to the study of architectural contexts, as well as iconography, between 15th and 18th centuries. In particular, she has been engaged in Bolognese architecture. She holds lessons in DAMS, Master's Degree, in Didactics of Visual Arts and Iconography and Iconology at the Department of Primary Teacher Education. From 2000 to 2014 she has held courses of History of Architecture and History of Art at Economics, Rimini Campus (University of Bologna) and later at Department of Philology, Literature and Classical Tradition of Bologna.

Elena Corradini | Università degli Studi di Modena e Reggio Emilia

The Great 18th century Hospital in the complex of Sant'Agostino in Modena. For a compatible and sustainable reuse project

It is intended to present the work in progress linked to a restoration project for cultural purposes of a building complex called Sant'Agostino, from the square of the same name, located on the western edge of the historic center of Modena (<https://www.agomodena.it/>). The vast complex, which will be reused for cultural services, still in the process of being defined within the AGO Modena cultural buildings (<https://www.agomodena.it/it/>), consists of adjacent buildings interspersed with two courtyards. The oldest building, the large eighteenth-century hospital wanted by Duke Francesco III d'Este with a plant with a very original distributive-spatial concept, different from the common single lane or cruise plants. The plant with an original "pincer structure" is in fact characterized by a symmetrical division of space for women's hospitalization (three lanes to the west) and men (three lanes to the east), from the need for a single atrium access to the male and female departments and especially the importance of religion: the three lanes reserved for women are arranged radially with an optical cone around the altar dedicated to St. Job and those of the men's ward around the altar dedicated to S. Nicolò. The building was expanded especially during the nineteenth century and remained in use until 2004 when a new hospital in Baggiovara, on the outskirts of the city, came into operation. The restoration project, still under discussion, of this large building will have to take into account a compatible and sustainable reuse for cultural services. In the Sant'Agostino complex there is also an Anatomical Theatre, the only space in the area recently restored and enhanced with a series of events and exhibitions of contemporary art: the Theatre was built between 1773 and 1775 by Antonio Scarpa, professor of Anatomy and Surgery at the University of Modena. Moreover, there are three nineteenth-century buildings in the same complex. They were built between 1840 and 1863 for the Medical Clinics of the same University and will be reused to house the collections of the University Museums currently not on display.

BRIEF CURRICULUM

Elena Corradini is a researcher of Museology and Restoration at the University of Modena and Reggio Emilia, now teaches Monumental Buildings Restoration History. She is Coordinator of the Italian University Museums Network (www.retemuseiuniversitari.unimore.it) and was board member and deputy-president of ICOM-UMAC and from 1980 to 2006 she worked for the Ministry of Cultural Heritage as director archaeologist in Modena, Bologna and as manager in Rome. She is freelance journalist, author of more than 170 publications about museology, history of collecting, conservation and valorization of cultural heritage, recently about the University heritage, she directed restoration works and has been curator of a lot of exhibitions.

Yeidy Luz Rosa Ortiz | Durham University

Use of Space and Non-Combative Populations of the Antiguo Hospital Nuestra Señora de la Concepción, El Grande, San Juan, Puerto Rico, 1774-1886

The neoclassical structure that today houses the League of Art and the School of Plastic Arts and Design of Puerto Rico was originally built in 1774 as the first hospital on the Caribbean island under Spanish colonial rule. Initially destined to serve 500 poor, women sex workers, and formerly enslaved residents from the same urban neighborhood that was displaced in order for its building— each group segregated into separate spaces within the hospital—, it also served as the first medical school and only pharmacy on the island. Today, the 500 art students that express their creativity within this space also express curiosity as to what their studios and gallery spaces were originally used for, and as to the people that worked, lived, and died in what are now their classrooms and workshops. Through archival material and the original building plans, we set out as a community to answer some of these questions, and what was uncovered was the history of a hospital at the center of a century-long dispute over ownership between the church, the military, and the municipality. The grand vision of an archbishop that was never to be, the archival materials depict intended façades that were interrupted by the war with England in 1797; beds for the poor reduced from 500 to 30, and even those were in constant danger of being taken by the military for the use of soldiers or by the municipality for the use of the city's prison and/or paying customers, and the final resting place for a group of imprisoned Chinese laborers accused of a crime in Cuba they passionately argued they did not commit. This archival search also created a community space of dialog within the building's current inhabitants in which local histories were recovered, embodied, and performed through artistic practice.

BRIEF CURRICULUM

Yeidy Rosa completed a BA in History of Art at The Ohio State University (2001), an MA in Humanities and Social Thought at New York University (2005), an MA in Social History of Art at University of Leeds (2020) and is currently a PhD researcher in History of Art, Spanish Studies and Early Modern Latin American Visual Culture at Durham University in the UK. She has completed programs in History of Art, Archaeology, Visual Anthropology, Ethnographic Film, Palaeography, and Rare Books at Koç University (Turkey, 2000-2001), Ohio University (United States, conducted in China, 2001), Columbia University (United States, conducted in Brazil, 2003), School of Advanced Study at University of London (United Kingdom, 2015) and Casa Árabe in Córdoba, Spain (2016). She has taught History of Art at the University of Puerto Rico at Río Piedras (2015-2019), the School of Plastic Arts and Design of Puerto Rico (2013-2019), and the Pontifical Catholic University of Ecuador in Quito (2008-2010).

José Carlos D. R. Avelãs Nunes | Universidade de Lisboa

The architecture of the New Lisbon Lazaretto (1860-1910). Modelling controversial confinement in space and time

From the 1870s onwards, the city of Lisbon was subject to urban requalification to build a defence system against contagious diseases that, at the time, were spreading around the world. The capital's strategic position worked as a gate to the European continent, especially in what is concerned with international trading. The circulation of both people and goods worked as a vector to disease's spreading, especially of cholera, yellow fever and tuberculosis. Upon the international discussion about the most efficient methods of quarantine systems, Lisbon erected a particular building on the other side of the Tagus River, from 1861 and 1869. Facing the city, but not touching it, the New Lisbon Lazaretto was a model to disaggregate the not controlled entrances in the town, to protect its citizens and to make sure that all the new regulated sanitary measures were put in practice.

This star-like building was subject to several discussions, from the project and construction, until its general use. Architectural models such as the French Mazas Prison on the Bentham's panopticon or the pavilion system influenced the design of the Lazaretto. Still, an entirely new concept was designed, to the extent that there is no comparable lazaretto in Europe, in what relates both to its architectural shape and space configuration.

In this communication, three central axes are going to be intersected in the Lisbon Lazaretto. Firstly, the international models and the circulation of architectural and medical knowledge, with the identification of actors and networks. Secondly, how medical and architectural disciplines are interconnected. Finally, there will be analysed the role of containment regulation, political agents and scientific experts in shaping its internal and external space unique configuration.

BRIEF CURRICULUM

José Carlos Avelãs Nunes is an architect, Ph.D. in architecture and researcher in the areas of the history of architecture and in the history of medicine. Was awarded with an individual doctoral fellow, through a public competition by the Foundation for Science and Technology, which resulted in the doctoral thesis "The architecture of sanatoria in Portugal: 1850-1970". With this thesis, he was awarded, ex-aequo, with the Victor de Sá Prize for Contemporary History in 2018. José Avelãs Nunes integrates several R&D networks and participates in several research projects. He is the author of national and international articles, book chapters and magazine editing, and also a lecturer at international and national conferences, as well as guidance and jury of master's and PhD's dissertations. Currently, he develops academic and research activities at the

Faculty of Sciences of the University of Lisbon, particularly with a postdoctoral research individual project, in the CIUHCT - Centro Interuniversitário de História das Ciências e da Tecnologia.

SESSION 11

Read between the Lines: Hospitals in Text

Elise Brault-Dreux | University of Valenciennes

Poeticizing the experience of the space in hospital

My purpose is to analyse how some 20th and 21st-century English poets have repeatedly introduced the hospital into their poetic space. Relying on Foucault's "Incorporation de l'hôpital dans la technologie moderne » and Bachelard's *Poétique de l'espace*, I will show how the building is often introduced, by some poets (e.g. Philip Larkin, Roy Fisher, Peter Reading), as a massive, even threatening, austere architecture. But more powerful are the evocations, by the patient (the poets or their *persona*) of their subjective experience of the inside (or the bowels) of the hospital: the waiting-room, the corridors, the "zones" and, most frequently, the bedroom – i.e. the main stage of countless poems. Mundanely furnished, with the hospital bed (a quasi-extension of the patient's body) at the centre, the bedroom is experienced as a place of both safety *and* brutal limitation. The poetic voices repeatedly evoke its constraining bare walls, its closed door (or reversely its too often opened door), its locked windows, as well as the horizon harshly limited by its wan (and often imperfect, spotted) stared-at ceiling. Tension thus arises between the extreme intensity of the physical and ontological experience of the bedridden patient *and* the latter's experience (again physical) of the limitation of space, the awareness of which is magnified by what hectic life is perceived beyond the walls and curtains. The noises and smells of the circulation of air, of staff (voices and steps), of visitors, of materials (the trolleys), of beds on wheels regularly reach the senses of the vulnerable patient. All too aware of the "normal" life outside the building, the patient feels an intermediary movement in the liminal spaces just outside their bedroom, while their own experience of this massive institution is (as is often suggested in the poems) limited to the immediate surroundings of their bed.

Corpus: poems by Sarah Broom, Julia Darling, Helen Dunmore, Roy Fisher, Philip Larkin, Peter Reading, Jo Shapcott, Hannah Sullivan, and Hugo Williams.

BRIEF CURRICULUM

Elise Brault-Dreux is a senior lecturer at the University of Valenciennes (France). She has been working on English poetry for years and has published a book on the poetry of D.H. Lawrence (*Le 'Je' et ses masques dans la poésie de D.H. Lawrence*, 2014). She is the co-editor of *No Dialect Please, You're a poet* (Routledge, 2019). She is the author of many book chapters and articles on modernist poetry. For a couple of years, she has worked on the poetic representation of the experience of hospitalisation. She has published articles on that theme about Philip Larkin's poems ("Exposing Bare Lives – Philip Larkin's Hospital Poems") and about the "hospital smells" (a book chapter will be published by the end of the 2020).

Marie Allitt | University of Oxford

Scaling the Hospital: Imagining and Mapping Clinical Space

This paper explores ways of conceptualising and viewing hospital spaces, asking what alternative physical and disciplinary viewpoints can bring to our understanding of space and hospital design. These alternative viewpoints primarily stem from a literary and critical medical humanities perspective.

By taking the idea of 'model hospitals' quite literally, I focus on the King's Fund Miniature Hospital, created and put on display in London in 1933, as a showcase for what the charitable Fund were doing for healthcare, and attract further donations. The object itself is significant, but so too are attitudes to the object. I begin with an almost absurdist, parodic *Country Life* article from 1933, where the King's Fund Hospital is imagined as the 'Lilliput Hospital' and a tour is described by an imagined descendent of Lemuel Gulliver (of Jonathan Swift's *Gulliver's Travels* (1726)). This specific piece of writing is curious about the model of the hospital, with its innovations and modern design are wondrous, but there is also an aura of exoticism and Othering. This perspective raises numerous questions about how we see, understand, and move through the hospital. Does a literal change in viewpoint – a bird's eye view on the miniature – impact the understanding of that space? Does this unusual, literary, and fantastical narration alter how the hospital is viewed? How might we extend this, to think of contemporary modern hospitals, with their use of wayfinding and maps to visualise the hospital space? What is emphasised, and what is omitted? How does the hospital visitor navigate the psychological and physical hospital space?

I use this Gulliver text as a launch point from which to explore imaginative ways of conceptualising and conceiving of medical spaces: to think, for example, about what metaphors are invoked about the hospital space, and what work such images might be doing.

BRIEF CURRICULUM

Marie Allitt is a Humanities and Healthcare Fellow at the University of Oxford, on the project 'Advancing Medical Professionalism: Integrating Humanities Teaching in the University of Oxford's Medical School'. She is also the Postdoctoral Research Assistant for the Northern Network for Medical Humanities Research, at the University of Leeds. Marie is a collaborator on the Wellcome small grant project 'Senses and Modern Health/care Environments: Exploring interdisciplinary and international opportunities', led by Dr Victoria Bates. She is also a co-investigator on a Wellcome Discretionary Award, 'Thinking Through Things', which aims to develop a cross-disciplinary ECR research network that engages with the Wellcome Collection, in connection with the Northern Network for Medical Humanities Research and Durham's Institute for Medical Humanities. Marie completed her PhD in English Literature at the University of York in 2018, focusing on experiences and representations of spaces and senses in First World War medical caregiving narratives. Marie's research focuses on medical life writing; practitioner health; medical spaces and senses; and early 20th century surgery.

Jessica Campbell | University of Edinburgh

Open Doors and Flattened Hierarchies: Exploring the Boundaries of Space and Identity in Dingleton Hospital's Therapeutic Community from c. 1963

This paper examines the dynamics of an important yet overlooked institution within Scotland's history of psychiatry: Dingleton Hospital's therapeutic community. Shaped by the counter-cultural influences of the 1960s and an increased interest in the approaches of social psychiatry, this small, unassuming asylum-turned-hospital in the Scottish Borders pioneered the development of an innovative approach to mental healthcare in which the principles of democracy, openness and permissiveness were applied within an institutional setting, disrupting the long-established boundaries, physical and symbolic, of its former nineteenth-century asylum structure. Focusing on the theme of boundaries, it seeks to draw attention to the ways in which notions of self and other were replicated in the hospital's social and spatial structures through a close analysis of Dingleton's in-house magazine *Outlook* and explores the following key questions: Were the boundaries of identity and space truly tested at Dingleton? Did the pioneering and liberal rhetoric of Dingleton's advocates match the expressions of lived experience within the therapeutic community? Or was it merely another form of control, 'a simple reconfiguration of power relationships without any in depth change' (Fussinger, 2001)? By addressing these questions, this paper ultimately assesses the extent of change in a period heralded as a turning point in the history of psychiatry: the demise of the asylum. In doing so, it seeks to demonstrate that just as the popular image of the Victorian asylum as an isolated entity surrounded by impenetrable walls

is questionable, so too is the conception of the therapeutic community as a model *without* boundaries for, in the twentieth century, we find ‘once again, that the boundaries between asylum and community are vague and uncertain’ (Bartlett and Wright, 1999).

BRIEF CURRICULUM

Jessica Campbell is an ESRC funded PhD student within the School of History, Classics and Archaeology at the University of Edinburgh. Her current research focuses on the relationship between madness, creativity and experience. Her MScR thesis entitled ‘The Boundaries of Madness’ (2018) explores the notion of space and identity through an examination of the patient-produced writings of nineteenth and twentieth-century Scottish asylum magazines. Her doctoral project ‘From Moral Treatment to Mad Culture’ seeks to extend upon these interconnected themes of creativity and patient expression through a historical enquiry into the nature of alternative psychiatric therapies in Britain since 1840.

SESSION 12
The Politics of Modernisation

Barry Doyle | University of Huddersfield

The Shape of Things to Come? The politics of planning new hospitals in inter war Europe

The First World War gave a boost to the popularity and profile of Europe's hospitals as populations 'acquired the hospital habit'. As a result, demand for hospital beds increased substantially creating an accommodation crisis across the continent. This crisis was exacerbated by the fact that much of the existing infrastructure was old and/or not designed for modern medical practices. Across much of Europe, especially away from the big cities, hospitals remained basic, focused on care, with limited specialisation and slow patient turnover. The further east one travelled, the more simplistic the institutions proved to be. But over the following twenty years the continent experienced a medical building boom as all sorts of providers working alone, or in partnership, looked to shape new, exciting accommodation that showcased political and national ambitions.

This paper will explore some of the ways politics and nation underpinned this modernisation of Europe's medical infrastructure. Drawing on case studies from England, France, Czechoslovakia and Hungary it will examine a range of new build and renovation projects that sought to increase provision and make political capital. It will consider issues such as cost, architectural design, locality and even the significance of institutional names in the politics of planning and building hospitals. In the process it will show that medical buildings and medical spaces were highly contested as the voluntary sector, municipal authorities, national government, religious bodies and the labour movement came together and clashed over who should pay for, who should have access to, who should manage and what should be the role of, healthcare provision in the post war world.

BRIEF CURRICULUM

Barry Doyle is Professor of Health History and Director of the Centre for Health Histories at the University of Huddersfield. He specialises in the history of hospitals in the modern period offering comparative analyses of provision in a number of countries including England, France, Poland, Hungary and Czechoslovakia. His research has been funded by Wellcome and the AHRC and his publications include a 2014 mon-

ograph, *The Politics of Hospital Provision in Early Twentieth Century Britain*, and numerous articles and book chapters in English and French. He is currently editing a special issue of *European Review of History* with Hannah Louise Clark on Imperial and Post Imperial Healthcare before Welfare States. He has been a member of the Board of the International Network for the History of Hospitals since 2013.

Cansu Degirmencioglu | Technical University of Munich

The Foundation and Development of Heybeliada Sanatorium and the Modernization of Turkey (1924-1955)

In 2020, the Turkish Thoracic Society started a petition demanding the renovation and re-use of the nonoperating sanatorium in Heybeliada Istanbul, as a pandemic hospital including a medical history museum. Along with its potential role in the struggle against the Corona pandemic, the complex is a cultural heritage as well, testifying for the collaborative modernization of architecture and medicine. These two fields concurrently emerged as modern disciplines in the nation-building years of the Turkish republic, a period marked with the regime's efforts to disintegrate the image of "the sick man of Europe". The ruling officials, a majority of which were medical graduates influenced by Social Darwinism, identified physical weakness and sickness with moral corruption and treason, which led to a strong emphasis on the struggle against medical diseases, Tuberculosis (TB) in particular. While the architects and physicians borrowed techniques and terminology from each other, the traditional spatial elements such as caged windows and the extensive use of decorative textiles in interiors were condemned as potential causes of TB. Along with public hygiene propaganda, sanatoria and dispensary construction had been high-priority projects. This paper examines the foundation and development period of the first pandemic hospital in Turkey: the Heybeliada Sanatorium, regarding its modernist architectural aspects. Through periodicals and official publications, this paper further focuses on representations of sanatoria and the position of medical institutions as mediums of state-initiated modernization. Moreover, it discusses how this particular facility resonated with the biopolitical discourse of the regime and set a precedent for the subsequent medical institutions. Finally, this historical and architectural analysis of the Heybeliada Sanatorium intends to contribute to the current discussions about its re-use.

BRIEF CURRICULUM

Cansu Degirmencioglu is a doctoral candidate at the Technical University of Munich, the chair of Architectural History and Curatorial Practice. She is currently residing and carrying her studies in Berlin, teaching online Design History courses at a foundation University in Turkey, and working on her dissertation titled "*Prescribed Modernity: The Impact of Health and Hygiene Concerns on Turkish Architecture During the Early Republican Era (1923-1950)*", funded by the DAAD doctoral scholarship. Her scholarly research main-

ly focuses on the modernization of Turkey, and intertwined histories of medicine and modern architecture. In addition to various conference and seminar presentations, Degirmencioglu is currently in the process of publication in a peer-reviewed journal and the revising process of a book chapter, which will be published in 2021.

Hongdeng Gao | Columbia University

Medical Governance Contest over Gouverneur Hospital: Health Activism in New York City's Lower East Side, 1956-1972

Historians have examined how a variety of forces—including the emergence of new technologies, the rising power of physicians, and the expansion of American social welfare provision—transformed American hospitals in the twentieth century. Most have focused on how these forces changed individual hospitals. It remains largely unclear how hospitals were designed, built, and used in relation to one another. Analyzing the little-known post-World War II history of a public hospital, Gouverneur, in New York City's Lower East Side, this paper shows how competing medical theories, community activism, and local and federal government funding influenced the location, architectural designs, and activities of Gouverneur vis-a-vis those of nearby public and voluntary hospitals. By the late 1950s, New York City's municipal hospital system had acute personnel shortages and dilapidated buildings. Drawing from physicians' papers and documents from government and community agencies, the first part of this paper explores how physician administrators at the time sought to reform the city's public hospital system by closing municipal hospitals that had outdated physical plants and were located in working-class immigrant neighborhoods. They argued that residents from these neighborhoods could travel thirty miles farther for better care at private and public hospitals where the administrators had expanded facilities, increased bed capacity, and formed medical school affiliations for staffing. The second part of this paper shows how Lower East Side residents, who believed that the community should have a say in the operation of public medical institutions, shaped the physical designs and usage of Gouverneur: turning the hospital first into a nationally known neighborhood health center with innovative social and health services departments and bilingual community outreach programs; then into a general care hospital that had expanded maternity wards and rehabilitation facilities, and only relied on other hospitals in the region for back-up specialty services.

BRIEF CURRICULUM

Hongdeng Gao is a History Ph.D. candidate at Columbia University. Her dissertation examines how Cold War geopolitics and grassroots activism in New York City improved access to health care for under-served Chinese New Yorkers in the late twentieth century. A Dissertation Fellow at the Consortium for History of Science, Technol-

ogy and Medicine, Hongdeng has worked as a research consultant for New York City's Department of Health and Mental Hygiene and as an intern at the American Italian Cancer Foundation. Before pursuing a PhD, Hongdeng co-founded Health Bridges, a grassroots initiative based in California that trains multilingual college students to serve as health advocates for patients with limited English proficiency.

SESSION 13

Maternity

Fitz Dross | Friedrich-Alexander-Universität Erlangen-Nürnberg

Gendered Medicalised Spaces – Inside and Outside Hospitals in early 20th century Germany

Regarding obstetrics and gynaecology, the Foucauldian concept of the 'clinic' looks even more plausible than for any other medical branch: by defining birth-giving as a medical process the pregnant women were separated from both their social and everyday living environments to give birth within specially medicalised maternity clinics, supervised by medically trained men using special instruments (forcipex) and thus allowing for the 'Medical Gaze' at the female body. Women were exposed to special risks, as the maternity clinics provided a medicalised research environment to understand these, as the case of Ignaz Semmelweis demonstrates. As maternity clinics, contrary to 'normal' hospitals, made 'healthy' women (giving birth) available to medical research, they were of extraordinary value for bacteriological research.

In a reciprocal development, prominent (German) gynaecologists in the early 20th century claimed *Frauenkunde* (women's studies) to be "the science of women in all areas of their lives", while gynaecology (*Frauenheilkunde*) would only be a "province in the huge empire of the science of women" (M. Hirsch: Was ist Frauenkunde, 1912). Beginning in 1914, the journal *Archiv für Frauenkunde* was initiated by mostly liberal gynaecologists. Usually, *Frauenkunde* is historically judged as the very beginning of social gynaecology, but already the first volume of the journal integrated an article of Wilhelm Schallmeyer, one of the leading figures of early racial hygiene in Germany. The proposed paper aims at focusing on *Frauenkunde* as an example for a typically clinical gynaecological knowledge overcoming hospital borders and blurring ideological frontiers illuminating the crossroads of (de-) hospitalised and medicalised gendered spaces in gynaecology, ideology, and women's every-day living.

BRIEF CURRICULUM

Fritz Dross is assistant professor for the history of medicine at Friedrich-Alexander-Universität Erlangen-Nürnberg. Beside his research on early modern hospitals, epidemics and urban health services he is working on the history of gynaecology in 20th century, especially during national socialism.

Kathleen Pierce | Smith College

New Spaces for a New Midwifery at the Lying-In Hospital of the City of New York

In January, 1902, crews completed construction on the Lying-In Hospital of the City of New York. The building project was funded by a \$1,000,000 donation from J.P. Morgan, who hand-picked its architect, Robert Henderson Robertson. Morgan's patronage arrived at a moment of transition simultaneously operating at several registers: new theorizations of vanguard hospital design and construction, increasing specialization and professionalization in medicine broadly and in the field of obstetrics specifically, and changing understandings of pregnancy, labor, childbirth, and post-natal care. The 1902 hospital sits at the nexus of these intersecting cultural threads.

In this paper, I center the Lying-In Hospital of the City of New York as a case study, illuminating the productive and formative role the built environment played in shaping this discourse. The lying-in hospital, unlike many other medical facilities, was inherently gendered: its patients were necessarily women. While historians have examined the general shift of childbirth from the homosocial space of the home to the heterosocial, professionalized, and impersonal space of the hospital, I contend that the architectural structure of the maternity hospital itself—that is, the spaces chosen to be included or excluded from its plan, the physical organization of its wards, and its location within the city—is equally ripe for analysis. Through close study of the planning, construction, and operation of the 1902 Lying-In Hospital, I demonstrate that the building's plan made manifest physicians' efforts to professionalize obstetrics, mechanize the process of childbirth, and prevent midwives from practicing. These theoretical solutions for physicians, however, simultaneously transformed patients' understandings of pregnancy and birthing through the experiential space of the reorganized hospital. Unlike birthing in the home—wherein labor, delivery, and recovery all took place within a singular room—the hospital physically and temporally segregated labor, delivery, and postnatal care, contributing to the medicalization of childbirth.

BRIEF CURRICULUM

Kathleen Pierce is currently a Visiting Assistant Professor in the Department of Art at Smith College in Northampton, Massachusetts in the United States. She received her Ph.D. in Art History from Rutgers University in May 2019. Her research focuses on the intersection of art and architectural history and medicine in the nineteenth- and early twentieth-century French empire. She is in the process of revising her dissertation for publication as a monograph. book, titled *Ephemeral Surfaces: Skin, Disease, and Visuality in the Fin-de-Siècle French Empire*, examines a broad range of objects — from dermatological illustrations and wax-cast models, to public health posters and avant-garde painting — to understand relationships between the surface of the modern body and the surface in modern art. Her research has most recently appeared in *Medical History* in January 2020 in an article titled “Photograph as Skin, Skin as Wax: Indexicality and the Visualisation of Syphilis in Fin-de-Siècle France.”

Elżbieta Kassner | Leibniz Universität Hannover

Between home and hospital: Maternity wards in post-war Poland 1945-1970

Following the ideas of socialist health care, the Ministry of Health in After World War II Poland did not foster birth as a private home event. Moreover, health politics aimed to institutionalize obstetric care and planned to locate obstetrics exclusively in hospitals. However, due to financial reasons and the shortage of qualified personnel, the state was not able to realise the hospitalisation of births immediately.

Starting near Warsaw in 1945, a new type of institution: maternity wards - *izby porodowe* - were established in neighbourhoods all over the country, occupying the space between home and hospital and thus filling this gap. By 1949, there were already 85 maternity wards. In 1956, 16% births took place in a maternity ward. From 1959 onward, the importance of the 800 maternity wards continuously decreased, until delivery in a clinic became standard practice in the 1970s.

On the basis of archival materials, regulations, handbooks, and periodicals for midwives and obstetricians, memories of women covered in sociological studies, as well as a number of interviews with older midwives, the proposed conference contribution seeks to reconstruct the manner of how the “new” institutions were run.

My research focuses on this unique form of obstetric care on local community level, organised and managed by midwives bound by “Instruction on the Organization and Operation of the Maternity Wards”. The maternity wards constituted part of the health care center and had, depending on local requirements, three to ten beds. Regularly, the midwives lived in small houses which were likewise their working space,

where they monitored independently women during birth and childbed. Only in cases of emergency Doctors were called in.

The unique working and living arrangement of midwives in communities allows a deeper understanding of the relationship between midwives and local citizens as well as the midwives role and function as mediator of knowledge between public-health-system and their clients in the immediate post-war realities.

BRIEF CURRICULUM

Elżbieta Kassner is a PhD student under the supervision of Prof. Dr. Barbara Duden, Institute of Sociology, Leibniz University Hannover. Her research interests include history of the Midwifery, medicine and social history of the 19th and 20th centuries, motherhood, parenthood, reproductive health, biopolitics.

POSTERS

Anna Maria Ester Condins | Universitat de Barcelona

Santa Creu Hospital of Vic (Catalonia): a medieval hospital in a modern city

The Santa Creu hospital of Vic (Osona, Catalonia) was founded by a legacy from a merchant, Ramon Terrades, who died in Majorca in 1348. According to his specific wishes, the hospital was located outside the city walls, next to the main road to Barcelona.

It's very remarkable that Terrades in his will specified not only the place where it should be built but also the physical characteristics it must have. First, the hospital had to consist of two houses, one for men and the other for women, each one with a capacity for twelve beds. Secondly, the ceiling had to be supported by three stone arches. And finally, he defined the construction size: a width according wooden beams and a length equal to similar buildings.

He specified clearly that the hospital never had to be controlled by any ecclesiastical organization and that's why he committed the responsibility to the City Council. He also stated that periodically the work and the positions of managing people should be evaluated.

Subsequently, several extensions and modifications have changed the original appearance of the building that is still in the same place and remains faithful to its original sanitary purpose. The oldest rooms nowadays are offices and administration areas, and the patient rooms were moved to more modern and better equipped buildings. The interest in this work is the analysis of the building's evolution over the time and the conservation of previous elements as a memory of its history.

BRIEF CURRICULUM

Anna Maria Ester Condins, born in Barcelona (Spain), PhD in Medicine from the University of Barcelona (UB), has focused her work in Hematology and Hemotherapy. Also, she has studied for a degree in History at the University National of Distance Education (UNED) and a master's degree in Medieval Culture at UB. She's interested in the study of hospitals, medicine and social life in the Middle Ages in Catalonia. Her PhD in Medieval History project focuses on the hospital of Vic (city in Central Catalonia).

Mariangela Carlessi | Politecnico di Milano and Alessandra Kluzer | Politecnico di Milano
The Ospedale Maggiore of Milan as a “working machine”. Functions, spaces and architecture through the centuries

The Ospedale Maggiore in Milan is wordly known for having been an absolute typological model, because of its rigorous plan. Most of all, it has always been, and still is, a “working machine”, as Ambrogio Annoni called it. Through the centuries, it could patently adapt to the changing of requirements related to the clinical progress, to the always increasing need of space, and, after the rupture caused by World War II, to a new life.

We propose an unusual and not stereotypical reading of such an important “monument”, through the observation lens and the on-site experience of those who question the buildings in order to take care of them, searching for data and clues in archive documents and in the countless traces sedimentated in the matter of the buildings themselves. We examine the complexity of the Hospital through its diachronic structures that witness the ageless issue of the relationship with pre-existing buildings.

We would start from the study of a part of the Hospital that still astoundingly preserves its old features and recalls to opposite aspects of the life inside the Hospital: the most representative places (the *Chapter Halls* and the *Annunciata Church*) and the most hidden and humble ones, related to the everyday management of the many who could not recover (the sepulchre underneath the church). The coexistence of such different functions has led us to extend the analysis of the functional asset to the whole building complex. Crossing the data given by the inventories and the historic floor plans, it was possible to reconstruct the hospital’s detailed layout, identifying, for the first time, the use classification of each single place in different ages. A layout that gets complicated and quickly changes, until the brutal disbanding caused by war and the “puristic”, although extremely cultivated, post war interventions.

BRIEF CURRICULUM

Mariangela Carlessi and Alessandra Kluzer are Architects, Specialized in Building Preservation, PhD, respectively in Building Conservation and History of Architecture, and they teach at the Politecnico of Milan as Cotract Professors. They combine their professional and research activities, mainly focused on building conservation: from preliminary studies, surveys, and diagnosis to the architectural and conservation project. They are authors of publications dealing with history of architecture and the theory and practice of building conservation. Since 2002 they have worked for the *Fondazione IRCCS Ca’ Granda Ospedale Maggiore Policlinico di Milano*, mainly focusing on the Chapter Halls, the Annunciata Church and the adjoining places, doing preliminary research and surveys, a feasibility study and designing the interventions for the conservation and reuse of the Crypt underneath the Annunciata Church.

The Order of St. John of God and hospital care in Lisbon

The Order of St. John of God provided charitable and health care assistance in Lisbon, since the Iberian Union in 1580 until the extinction of the Religious Orders in 1834, always fulfilling a universal, integral and ethical Hospitality as inspired by the Founder. During this period, the Order owned the Convent and Hospital of St. John of God and was responsible for the administration of the Military Hospital, at first installed in the Castle of St George and later transferred to the above-mentioned Convent and Hospital, following the Lisbon earthquake in 1755.

Located in the community area of Santos, the Convent and Hospital of St. John of God had a privileged location next to the Tagus River. The building, with a U-shaped plant, in addition to the convent spaces and the Church, had several nursing wards and a pharmacy. The Military Hospital was located in the Castle of St George, close to military structures, including the jail; for this reason, it provided health care to prisoners.

In these two hospitals, the assistance was exclusive to male patients. However, women and children, from all social categories, were also provided with religious assistance not only during liturgical celebrations and in the improvement of chapels, but also in the permission of burials within the Church and in the convent space.

The Brothers of St. John of God, as doctors and nurses, always intended to develop a socio-sanitary action among the population in general, mainly during the epidemics that periodically plagued the capital.

The purpose of this work is to identify the main contributions of the Order of St. John of God and their experience in Hospitality, over the course of 250 years, while contextualizing the architectural spaces used and their interrelation with the population of the city of Lisbon.

BRIEF CURRICULA

Carmina Montezuma, PhD in Fine Arts, Faculty of Fine Arts, University of Lisbon (2012), Master in Museology and Cultural Heritage, New University of Lisbon (1996) and History course, Autonomous University of Lisbon (1992). Responsible of the Saint John of God Museum – Psychiatry and History, since 2014. Curator of this Museum (2007-2011). Between 1993-2006, worked in several institutions and projects regarding cultural heritage and education. Participation in national and international conferences about the history of health, nursing and religious Orders in the past years. Author of several books, including co-author of “Caridade e Assistência. Ordem Hospitaleira de S. João de Deus em Portugal, desde 1580” (2019).

João Castela Oliveira, graduated in History with a Postgraduate degree in Medieval History from the Faculdade de Ciências Sociais e Humanas da Universidade NOVA de Lisboa and a Master degree in Documentation and Information Sciences from the School of Arts and Humanities of the University of Lisbon. From 2012 to 2014 was fellow researcher of the FCT Project “Hebrew Illumination in Portugal during the 15th Century”, in a partnership between the Center of Sephardic Studies and the ARTIS - Institute of Art History, of the University of Lisbon. Currently developing professional activity as a librarian/ archivist at the Documentation Center of the Museum São João de Deus in Sintra.

Rute Ramos | Universidade de Évora

Power, prestige and royal intervention at All Saints Hospital

Inaugurated by D. Manuel I in 1504 and administered by Lisbon *Misericórdia* since the mid 16th century, All Saints Hospital represented a paradigm shift in hospital care in Portugal in the modern period. All Saints Hospital has developed a new dimension of public service, has adapted to the needs of a city in constant change and growth and has become a place of medical education, medical care and healing where thousands of individuals moved

around administrators, servants, suppliers, beneficiaries of their rents and, obviously, patients. This paper aims, in the first place, to get to know the evolution of the administration model of the All Saints Hospital, keeping in mind that the institution was a space of power and prestige that benefited from the notoriety of those who served it, in particular, the administrators of the Lisbon *Misericórdia*, but also enhanced them. Secondly, to determine the conditions, namely materials, that allowed the construction of the hospital knowing beforehand that it was granted with various privileges, benefits and exemptions and that it was the Crown that, for a long time, provided the sustenance of the institution. And finally, to understand how All Saints Hospital survived and readjusted itself to the multiple political, social, economic changes that occurred during its more than three centuries of existence.

BRIEF CURRICULUM

Rute Ramos is graduated in History, variant of Art History by the University of Coimbra (2000), master's in information and Documentation Sciences by the Universidade NOVA de Lisboa (2008) and a PhD in History – Change and Continuity in a Global World by the University of Évora in association with the University of Lisbon, Universidade Católica Portuguesa and ISCTE - University Institute of Lisbon (2019). Her main interests are charity and health care in early modern period. She is an integrated member of UE-CIDEHUS (University of Évora – Interdisciplinary Center for History, Cultures and Societies).

Chiara Mascardi | THESA – Theater Science Anatomy and Chiara Ianeselli | IMT School for Advanced Studies in Lucca

Anatomical theatres inside/outside the cities: bodies between the universities and the hospitals in Italy

Anatomical theatres can be considered a feature of the Italian history of medicine from the Middle Ages until the twentieth century. Their function of teaching and researching on the human body was influenced by the relationship between the universities and the hospitals, and also between these buildings and the cities. This panel aims to analyze some aspects of the historical evolution that characterized the correlation of theatres, universities, hospitals and cities.

In their first phase anatomical theatres were temporary constructions, only at the end of the sixteenth century they became permanent buildings. They were placed inside the universities, often professors took directly unclaimed bodies from hospitals. This praxis created many issues for what concerns social and religious aspects. Furthermore, there were practical issues to deal with, as for example the transport of the bodies, ensuring respect to the dead and to the people of the neighbourhoods. Cardinals and governments established rituals and rules for the passage of the bodies from hospital to university. Here, during the carnival, the public anatomy took place. In cities like Bologna and Padua hospitals and universities (where anatomical theatres were located) were usually in the centre of the cities, to emphasize their involvement in the urban structure. During the eighteenth centuries great changes occurred, that transformed the relationship between medical spaces and cities. Anatomical theatres entered a new phase: universities and hospitals were moved outskirts, ideally also removing the pain and the death from the city centres. More and more often anatomical theatres were built inside the hospitals, with a increasing loss of ritual and public aspects of the anatomic lesson, and an increasing attention on the scientific and didactic aspects. Examples of this new period was the anatomical theatres in “Arcispedale di Santa Maria Nuova” (Florence) and “Ospedale del Ceppo” (Pistoia).

BRIEF CURRICULA

Chiara Mascardi (1982, IT) has a Ph.D. in Theatrical studies at the Bologna University. In her doctoral thesis she studied the correlation between anatomical theatres and the history of theatres, from medieval age until the eighteenth century. In 2013 she founded the cultural association DNB, aimed to promote interdisciplinary projects. She is currently managing the project *In Studiis Artistarum*, focused on the dialogue between contemporary art and scientific heritage. In its framework she organized exhibitions in anatomical theatres, museums of anatomy and palaeontology. She is also a founding member of THESA (Theater Science Anatomy), fostering the research in this field.

Mayumi Iitsuka | architectural firm IMMUNORIUM

How were health and social activities balanced in a hospital's built environment? – in the case of four centuries' transformation of the former Saint-Vincent-de-Paul Hospital in Paris.

In this poster, we will illustrate how the future Saint-Vincent-de-Paul eco-neighborhood in Paris, a former novitiate transformed into a children's and maternity hospital, will be transformed. The site was founded in 1650 and has undergone various major phases of successive assignments: religious, maternal, orphan, hospital and in the future mixed-use buildings. The hospital ceased operations in 2012.

The first construction sites will begin towards the end of 2021 and the completion of the neighborhood is scheduled for 2024. Nearly two-thirds of the architectural heritage on the 3.4 Ha site has been preserved and the new buildings should give priority to noble and bio-sourced materials.

We will present the studies of the architectural projects in progress, focusing on the oldest buildings on the site, the historic Robin and Oratory complexes, which will be conserved and converted into a cultural "The Third Place", implementing several social, solidarity and environmental programs.

The rehabilitation of the Robin and Oratory buildings has been designed to highlight the original qualities of the buildings and volumes. The future planning and design will be inspired by four centuries of their hospitality history: the use of wellness materials, the intermediate space with depolluting plants, eco-design under the principle of air quality, reused/upcycled furniture in low-tech craftsmanship, thus creating an atmosphere of welcoming, healthy and hospitality in order to encourage collaboration between future residents.

BRIEF CURRICULUM

Mayumi Iitsuka is the founder of the architectural firm IMMUNORIUM based in France and Japan. She was previously the Maître Assistant Associé at the Ecole Nationale Supérieure d'Architecture de Paris-La Villette. She is involved in architectural projects with public and private contractors to provide them with innovative solutions in the field of environment and health. To do so, she uses her knowledge of sustainable development and Japanese wood architecture, for example. Her educations in HMONP at the Ecole Nationale Supérieure d'Architecture de Paris-Malaquais in France and the bachelor's degree in applied engineering in architecture at the University of Chiba in Japan as well as her experience as a self-taught therapist with her family, a traditional Japanese doctor, provide her with an expertise in the planning and design of space for care and well-being. Her final thesis has received several awards.

Os novos hospitaes de Lisboa

Os novos hospitaes de Lisboa is an article published on the newspaper *Diário de Notícias* on February 12th, 1905. It describes a Lisbon with a growing population and lacking in resources to respond to that growth, particularly in the case of an epidemic. Not only does the city need bigger and better hospital facilities, but it also urgently needs a hospital dedicated to the treatment of infectious diseases. The article then presents the two hospitals being designed when it was written: the “Hospital para Tuberculosos” (Hospital for Tuberculosis Patients) and the new “Hospital de Isolamento” (Isolation Hospital), both to be built in the area occupied by the old Convento do Rego. As a result of the elimination of the religious orders in Portugal, the convent was now empty and in the government’s possession.

The *Eppendorfer Hospital* in Hamburg was the model for the new hospitals. Like Lisbon, Hamburg saw a growth in its population around 1879 and with it grew the concern with epidemics. Seeing as Hamburg is a port city, just like Lisbon, it was subject to the easy entry of many illnesses. The hospital consisted of several pavilions and was the new modern architectonic model followed by various countries. This hospital is now the *University Medical Center Hamburg-Eppendorf* and continues to be considered one of the best hospital complexes in Europe.

It is interesting to look at this article under the light of the current pandemic. In 1900 the increase in hospital beds and the improvement of hygiene conditions were urgent, so as to reduce the spread of contagious diseases. It seems like the situation has not improved as expected. Should we not be paying more attention to History?

BRIEF CURRICULUM

Isadora Monteiro is a second-year student in the MA *History and Philosophy of Sciences* of the *Faculty of Sciences of the University of Lisbon*. Isadora Monteiro is particularly interested in History of Sciences and is now working on her Master thesis, supervised by Professor Ricardo Lopes Coelho, vice-president of the *Department of History and Philosophy of Sciences* of the *Faculty of Sciences of the University of Lisbon*. The paper proposed here was written in 2020 for the course *Science and City*, lectured by Professor Ana Simões, founder and co-coordinator of the *Interuniversity Center of History of Sciences and Technology* (CIUHCT).

“Save the Hospital!” The red graffiti on the entrance wall of Hospital Miguel Bombarda is a symptom of a latent discussion. Abandoned, vacant, underutilized, the hospital continues to be ensnared by contradictions and disagreements about its heritage meanings and its new uses in the present. Created in 1848 and closed in 2010, the oldest psychiatric hospital in Portugal and the first to be closed, it remains in ruins that attest traces of an uncomfortable presence. Bombarda’s heritage is part of a broader debate regarding the preservation of the built and documentary heritage of the Colina de Santana hospital complex. The invention of these patrimonies hitherto silenced and separated from the public debate until their structures were threatened, is part of a political field marked by contradictions, helping to denaturalize the very notion of cultural heritage. The unconditional appreciation of heritage and its inscription as a relic are here questioned and devastated, a process that constitutes a social demand, marked by living testimonies and conflicting opinions that attest that the field of heritage is unstable and difficult. Such questions will be triggered by crossing two categories: hospital heritage and difficult heritage.

BRIEF CURRICULUM

Viviane Trindade Borges is PhD in History at Pos-Graduation Program of History at *Universidade Federal do Rio Grande do Sul*, with Split PhD at *École des Hautes Études em Sciences Sociales – EHESS*, Paris. Associate Professor at *Universidade do Estado de Santa Catarina (UDESC)* and member of the Cultural Patrimony Laboratory (LabPac/UDESC). Works in Undergraduation and Postgraduation Courses of History and Professional Master Course of History. Coordinator of Extension Program “Marginal Archives”. Representative in Brazil of Ibero-American Network of Psychiatry’s History and of The International Federation for Public History (IFPH). Performed post-doctoral in Social Studies at *Universidade de Coimbra* (2019). Developing research in History of institutional practices of confinement, Biographies, Public History and Cultural Patrimony Preservation, especially Difficult Patrimonies and Prison Patrimony.

Donatella Lippi | Università degli Studi di Firenze, and Manila Soffici | Università degli Studi di Firenze

Space and law in the Hospital of S. Maria Nuova (Florence, 1288)

The hospital of Santa Maria Nuova (SMN) was founded in Florence in 1288 and it is still in work today, representing an extraordinary example of adaptability of a health facility to the change in the historical-social situation.

The case of SMN has always been a model also from a regulatory and statutory point of view, acting as a model for other structures' space and organization.

Actually, at the beginning of the 16th century, SMN legislation had achieved a remarkable specificity and completeness.

In 1513, Pope Leo X Medici sent his personal physician to Florence to study management methods and medical practice applied in SMN, as a model for the new hospital of Santo Spirito in Sassia in Rome.

The Duke of Milan Francesco Sforza, planning a new hospital in Milan, in 1456 sent his architect Filarete to Florence, to examine the structure of the building SMN and to assess its Statutes as well. In 1546, Ferdinand of Austria received by Cosimo I the Statutes as a model for the hospitals of his kingdom.

Also, Leonor of Portugal modelled the Statute of the hospital of All Saints in Lisbon (1492) on the ordinance of SMN: a copy of the Florentine Statutes was acquired by cardinal Jorge Costa. Henry VII (1485-1509) and his son Henry VIII chose SMN as a model for the Savoy Hospital, founded in London at the beginning of XVI century. Francesco Portinari, patron of SMN and papal protonotary, personally carried the Statutes of SMN from Florence to London, as an example of Florentine good health management.

The surviving Statutes of the Savoy Hospital, recently edited by us, constitute an interesting term of comparison to evaluate the importance of the Florentine model on influencing the development of the spaces of care.

BRIEF CURRICULA

Donatella Lippi is Professor of History of Medicine at Università degli Studi di Firenze, president of the Scienza e Tecnica Foundation and of the International Lyceum Club in Florence.

Manila Soffici hold a PhD in History and Tradition of Texts in Middle Age and Renaissance at the Università degli Studi di Firenze. She lives and works in Florence.

Alicia Campos Gajardo | Universidad de Chile

Old San José Hospital, Santiago, Chile

The Old San José Hospital, in Santiago, Chile, is the last example of pavilions sanitary architecture, built during 19th century. Located adjacent to the General Cemetery, it was built as a lazaret to receive those infected with smallpox, cholera and later, was built as a hospital for the treatment of tuberculosis. It constitutes a unique case in South American, that has a dividing wall with the Cemetery and three portals which were kept in operation between 1895 and 1925 approximately, to allow the transport of the deceased to the cemetery, preventing the spread of epidemics.

The morphology of the architectural complex, present an exterior central route that connects several perpendicular volumes, which in their time, were used as pavilions for the patients, alternating with wooded courtyards. From the 1960s it assumed the role of general hospital at the northern of Santiago city and at the end of 20th century it migrated his functions to new facilities that performed better sanitary tasks.

Part of its facilities were declared Historical Monument and until this year 2020 hosted various non-profit institutions for the development and application of complementary medicines. The management of the space that was underutilized after the migration of functions to the new hospital, is an example of heritage integration and openness towards the possibilities of revitalization of preventive medicine in the communities.

BRIEF CURRICULUM

Alicia Campos Gajardo, architect graduated from the Faculty of Architecture and Urbanism of the University of Chile. PhD in Architecture and Heritage from ETSA Polytechnic University of Madrid. Academic and researcher of the Faculty of Architecture and Urbanism, University of Chile. Author of research and publications about hospital architecture and modern architecture. Coordinator of the Diploma en Arquitectura Hospitalaria in the same Institution. Editor of Revista de Arquitectura, Universidad de Chile.

Josep Barceló-Prats and Josep M. Comelles | Universitat Rovira i Virgili

The introduction of the architectural project of the moral asylum in Spain, The case of the “Manicomio del Hospital de la Santa Cruz” (Barcelona, 1835-1860)

In 1835, the Barcelona City Council began a midterm project to build a mental asylum linked to the international movement of moral psychiatry. The final written project was drawn up in 1860 by the alienist Emilio Pi i Molist and the architect Josep Oriol i Bernadet. This project, entitled *Proyecto medico razonado para la construcción del Manicomio de la Santa Cruz*, would end up becoming in the first moral asylum in Spain. Our proposal aims to describe the international influences in its conception. For example, the role of Jean Étienne Dominique Esquirol or Alexandre Briere de Boismont as the references of French psychiatry. To write the final project, Pi i Molist did not start from scratch. A previous specific project was written by Felip Monlau in 1846. Monlau's project served as a starting point by Pi i Molist, his student in 1847. Later, in 1854, Pi i Molist travelled by Western Europe to visit two dozen of asylums and another time with the architect Oriol i Bernadet in 1856. The spatial distribution of the institution was discussed as a «Spanish model», a local adaptation based on climate, and social and cultural differences. The architect applied its experience building factories to organise the space following strictly Pi i Molist requirements. Finally, the asylum was built as it was projected between 1885 and 1915. It was partially demolished in 1970 and converted in a public equipment.

BRIEF CURRICULA

Josep Barceló-Prats has a M.Sc. PhD. in Anthropology (*Universitat Rovira i Virgili*, Tarragona) and is a medical anthropologist and historian of medicine. He is a professor of History of Medicine at the Universitat Rovira i Virgili (Tarragona, Spain) since 2009. His fields of specialization include medical anthropology, public health policies, and history of the health professions. One of his main lines of research focuses on the cultural analysis of hospitals in different historical contexts. His main books are: *Poder local, govern i assistència pública: l'Hospital de Sant Pau i Santa Tecla de Tarragona*. Tarragona: Arola Editors (2017), and *L'evolució del dispositiu hospitalari a Catalunya (1849-1980)*. Barcelona: PAHCS (2020). Main papers and book chapters: “La economía política de los hospitales locales en la Cataluña moderna”. *Asclepio*. 2016; 68(1): 127-142; “Las bases ideológicas del dispositivo hospitalario en España: cambios y resistencias”. In: Vilar-Rodríguez, M.; Pons, J. *Un siglo de hospitales entre lo público y lo privado (1886-1986)*. Madrid: Marcial Pons; 2018, pp. 83-138; “De la descoordinación a la descentralización. La evolución del dispositivo hospitalario catalán durante el franquismo y la Transición (1939-1980)”. In: González-Madrid, D.A.; Ortiz, M. (coords.) *El Estado del Bienestar entre el franquismo y la transición*. Madrid: Sílex Ediciones; 2020, pp. 231-258.

Josep M. Comelles has a M.Sc. Ph.D. in Medicine (*Universitat de Barcelona*), and a Ph.D.

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Renato da Gama-Rosa Costa | Universidade Federal do Rio de Janeiro, and Inês El-Jaick Andrade | Universidade de São Paulo

A new Project to Santa Casa de Misericórdia in Rio de Janeiro (1840-1865): Hygiene and rationality

As a Brazil political and social pole in the 19th century, Rio de Janeiro faced the urban growth and densification typical of post-industrial revolution. At the same time that profound social and structural changes were introduced in cities, it also brought diseases and epidemics. The public health actions undertaken sought to reverse the situation of diseases and unhealthy urban environment, aggravated by the specific conditions of the city of Rio, due to its hot and humid climate. Thus, many hospitals were built to provide assistance and care for victims of epidemics and other diseases of the period - yellow fever, cholera, smallpox. Santa Casa would stand out from a significant set of hospitals built at the time to attend patients from any social group, slave or free, age or color.

Dating from the middle of the 16th century, the General Hospital of Santa Casa de Misericórdia would receive a new project in 1840 within the scope of the transformations driven by the 19th century and, in this case in particular, by the arrival of the Portuguese Court in the then Brazilian capital, which became the headquarters of government Portuguese Monarchy. The project of the new headquarters, designed by José Domingos Monteiro and José Maria Jacinto Rebelo, should follow the hygiene and rationality recommendations of the 19th century: regular architecture; ventilated in-

ternal rooms and infirmaries; large wards to facilitate air circulation; internal patios; wards separated by sex and type of disease, especially those that required isolation, as for the hectic, smallpox and the alienated sick. The new hospital would be built in two stages: between 1840 and 1852, and with final works in 1865. Even exemplary for the occasion, such a project would receive criticism because of its location - central region of the city - always in constant urban transformation.

BRIEF CURRICULA

Renato da Gama-Rosa Costa is an architect and urban planner with doctorate in Urbanism from the Federal University of Rio de Janeiro, with an internship at the Institut d'Urbanisme de Paris. Post-doctorate at the University of Coimbra Center for Social Studies. Invited professor of Architecture for Health Course at the Pontifical Catholic University. Researcher and Coordinator of the Professional Master's Degree in Preservation and Management of the Cultural Heritage of Sciences and Health at Casa de Oswaldo Cruz/Oswaldo Cruz Foundation. Docomomo Brasil Coordinator.

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Olga Susana Costa Coito e Araújo | Universidade Estadual de Campinas, and Patricia Sammarco Rosa | Instituto Lauro de Souza Lima

Cultural heritage of ILSL - Lauro de Souza Lima Institute: a case study of a former leper colony of compulsory isolation, today Research Institute

The museum at Lauro de Souza Lima Institute (Bauru, São Paulo) is a protected heritage that represents the public health struggle of isolation to control leprosy. Today the institution promotes research, teaching and health assistance service in Brazil, the second country ranked with higher number of leprosy patients. The asylum colony was built in 1933 with 400 acres the self-sustaining city remote 17 km from the city. However, the crescent cure of the disease originated the dismantling of the territory since the 60s. The process of heritage safeguard started in the early 90s and focused on the social area (CONDEPHAAT, 2016). Inside the sanitary dermatology hospital, the museum had to create a new communication strategy to reflect the public engagement and new visitors with focus on inclusion and diversity, important to combat the stigma associated with the city of lepers. It was necessary to reach the staff and patients, so a monthly exhibition module at the clinic was developed, also a project to improve communication at long-term exhibition and itinerant modules for outdoor exhibits were

prepared. The exhibition addressed the several territory occupations: asylum/ sanatorium/hospital/research institute. It allowed a critical review about the quality of life of institutionalized and socially marginalized citizens, preservation of memory and impact of leprosy on individuals, families and society. A grant award of Culture and Creative Economy Department of the State of São Paulo implemented in 2020 allowed the access to public health cultural heritage in the interior São Paulo region.

BRIEF CURRICULA

Olga Susana Costa Coito e Araujo is a PhD student at the UNICAMP- University of Campinas State / Province Gerontology – School of Medical Sciences. Master in Museology by University of São Paulo USP and anthropologist by Universidade NOVA de Lisboa. Interest in cultural heritage, territory and society. Winner of Award “Creative Economy Itaú Cultural” research in development in 2017. <http://Lattes.CNPQ.br/5681764902412784>

Patricia Sammarco Rosa is the technical Director of Health – Department of Research and Teaching in Health Division of Instituto Lauro de Souza Lima, Research level II.

WELCOME TO LISBON



LISBON

CITY PROFILE

GENERAL INFORMATION

Country: Portugal

Metropolitan area: Lisbon

Area: 100,05 Km²

Population: 545,245 inhabitants

Density: 6,458 inhabitants / Km²

Metropolitan area: 2,821,876 inhabitants

Official website: www.cm-lisboa.pt

CONTEXT

Lisbon, capital of Portugal, is located on the right shore of the Tagus River Estuary, which is the longest river in the Iberian Peninsula. It is one of the most ancient towns in Europe.

Lisbon is a city of irregular topography, dominated by hills and valleys of variable dimension. Given this irregular topography, Lisbon is known as the city of the seven hills.

The capital occupies an area of 100 Km². In 2013, its resident population was up to 520,549 people. The city's population density is of 5,202.7 inhabitants per Km², 46 times higher than the general density in Portugal, which was of 113.4 inhabitants per Km² approximately in 2013.

Due to its geographic position and climate conditions, Lisbon receives an average of 260 days of sunshine in a year, meaning it is one of the sunniest cities in Europe. Moreover, the conjugation of several factors generates a distinctive light in Lisbon, which makes it the subject of literature, cinema, painting, and advertising, among other forms of expression.

The city of Lisbon is included in the Lisbon Metropolitan Association (LMA) composed by 18 municipalities forms the highest concentration of population and economic activity in Portugal.

In *City Profile Lisbon*, Câmara Municipal Lisboa, 2016

(available in http://www.agenda21culture.net/sites/default/files/files/cities/content/cityprofile_lisbon.pdf)

WELCOME TO LISBON

IN A VIRTUAL WAY ...

THE CITY

Lisboa Promocional
Câmara Municipal de Lisboa, 2019
<https://vimeo.com/252925007>

CULTURE

Lisboa Cultura - We think, create, and share culture
Câmara Municipal de Lisboa
<https://vimeo.com/299872168/d4c6ea2e8c>

Cultura em Lisboa | Culture in Lisbon

EGEAC, 2017
https://www.youtube.com/watch?v=Hz8HP76_VBI
EN / PT

Project Shops with History | Saving historic Lisbon | DW Documentary

The city council initiative „Shops with History” is fighting to preserve traditional stores at risk of closure because of the real estate boom.

A film by Lourdes Picareta, SWR/Arte, 2019

<https://www.youtube.com/watch?v=cVycW-iqdsQ&fbclid=IwARoPMweWrzTKd4G-Rib1z2dVLZhJniANvEPlcpIVKGWwaz37Vxqc3xLEnsyo> EN

<https://www.youtube.com/watch?v=RaMIe-XYxJE&fbclid=IwAR2HLB1eCrV6Rhg-JDrDp9-17PmZkesyWXIdIPiSiMjhhayRUUZJoofS2JXY> ES

LISBON EUROPEAN GREEN CITY 2020

Portuguese Flag

At the opening of Lisbon Green Capital 2020, the first sustainable national flag made from 2 tons of wire created from plastic collected from the oceans was hoisted at Parque Eduardo VI

Câmara Municipal de Lisboa, 2020

<https://vimeo.com/384489903>

EN

Lisboa, Growing Together

Lisbon's application vídeo for European Green City

Câmara Municipal de Lisboa

<https://vimeo.com/274858928>

EN

Aos Indiferentes / To the Indifferent

Câmara Municipal de Lisboa, 2020

<https://vimeo.com/467774253/7c399f98ed>

EN

HEALTH AND HOSPITALS HISTORY

Hospital Real de Todos-os-Santos | All Saints Royal Hospital

History, archaeology and documentar sources

Museu de Lisboa, 2020

<https://www.youtube.com/watch?v=5WVZ8JWKIDs>

PT

Hospital Real de Todos-os-Santos | All Saints Royal Hospital

Film of the exhibition commemorating the 500th anniversary of the foundation of All Saints Royal Hospital

Arquivo Municipal de Lisboa - Videoteca, 1992

<https://www.youtube.com/watch?v=ta6xH8GIyyo>

PT

Psychiatric Hospital Miguel Bombarda

Set of 3 buildings, one of them rare in the world – pannotic. The architecture at the service of behavior control.

RTP 2, Visita Guiada, 2015

<https://www.rtp.pt/play/p2002/e211315/visita-guiada>

PT

Sant'Ana Orthopedic Hospital

It was a maritime sanatorium, turned into a reference hospital in the field of orthopedics. Parts of his story are reported on guided tours held every month.

Santa Casa da Misericórdia de Lisboa, 2019

<https://www.youtube.com/watch?v=pbJcOaSh8uM>

PT

Pharmacy Museum of Lisbon - 5000 years of history

https://www.youtube.com/watch?v=ljP76_caZwE

OTHER PLACES

Thermal Hospital of Caldas da Rainha

Founded in the late 15th century on healing water springs, it is considered the oldest thermal hospital in the world

RTP 2, Visita Guiada, 2019

<https://www.rtp.pt/play/p5656/e406727/visita-guiada>

PT

Hospital Centre Museum, Porto

Omnia, Ez-Team

<https://hospitalsantoantonio360.pt/>

PT/ EN/ FR/ES

... SEE YOU SOON!