Spaces of Healthcare and Hospitals in the Late Ottoman Empire and Early Turkish Republic

by

Uğurgül Tunç

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Spaces of Healthcare and Hospitals in the Late Ottoman Empire and Early Turkish Republic

Koç University

Graduate School of Social Sciences and Humanities

This is to certify that I have examined this copy of a doctoral dissertation by

Uğurgül Tunç

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Committee Members:

Prof. Dr. Lucienne Thys-Şenocak (Advisor)

Prof. Dr. Inge Uytterhoeven

Prof. Dr. Annmarie Adams

Prof. Dr. Önder Ergönül

Prof. Dr. Zeynep Kuban

Date: _____

For my father, Necmi Tunç

ABSTRACT

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This dissertation examines the late nineteenth and early twentieth centuries in the Ottoman Empire and the Turkish Republic through the lens of healthcare architecture. It explores the social, political, cultural forces of the time, and the individuals, particularly the architects, who made decisions about the hospitals and healthcare institutions in Istanbul and Ankara. The four case studies of healthcare institutions examined here are: The British Seamen's Hospital in Istanbul, the American Hospital in Istanbul, the Central Hygiene Institute complex in Ankara, and the Admiral Bristol School of Nursing Nurses' Home in Istanbul. As an architectural history, this dissertation explores these examples of healthcare architecture to investigate the many different social, cultural, political, and economic factors which shaped these projects. The scope of the individuals examined in this thesis include a diverse group of architects from Britain, Austria, the United States, and Turkey, as well as the different groups of patrons, physicians, nurses, faith leaders, diplomats, and political actors who influenced the establishment and development of healthcare institutions. The individuals responsible for the examples of healthcare architecture studied in this dissertation worked in the cosmopolitan environment of the late Ottoman Empire (1839-1922) and the early decades of the Turkish Republic (1923-1950). The stylistic and typological choices made for these four building projects reflect the complex dynamics surrounding architectural output of this transformative era and highlight the intellectual and physical mobility of the individuals responsible for them as well as the impact of different architectural movements such as modernism. In addition to a detailed formal and typological analysis of four examples of healthcare architecture, this thesis explains the transformations that happened in healthcare institutions of the time, their functions, and what they meant to those who financed, built, and used them. A vast number of primary sources from archives in Turkey, the U.S. and U.K. have been used in this thesis including correspondence, periodicals, diaries, parliamentary records, diplomatic exchanges, and architectural plans, some which are presented here for the first time. Oral histories of healthcare workers who lived and worked in these buildings were also conducted to learn more about the later lives of these buildings. Finally, this dissertation and the architectural projects presented here argue for a more nuanced and critical re-assessment of post-colonial theory which has tended to ignore Ottoman agency in the decision-making processes and power dynamics that shaped healthcare architecture in this era.

Keywords: healthcare architecture, hospital history, hospital architecture, Ottoman architectural history, British Seamen's Hospital, *Hıfzıssıhha*, American Hospital, Nurses' Home, Charles Holden, Sedad Hakkı Eldem, Theodor Jost, Robert Oerley, Percy Adams, W. Stuart Thompson, modernism, medical humanities, health humanities

ÖZETÇE

Geç Osmanlı İmparatorluğu ve Erken Türkiye Cumhuriyeti Dönemlerinde Sağlık Mekânları ve Hastaneler

Uğurgül Tunç

Arkeoloji ve Sanat Tarihi, Doktora

Mayıs 2024

Bu tez, Osmanlı İmparatorluğu ve Türkiye Cumhuriyeti'ni on dokuzuncu yüzyıl sonu ve yirminci yüzyıl başlarında sağlık mimarisi merceğinden incelemektedir. Dönemin sosyal, siyasal, kültürel güçleri ile mimarlar başta olmak üzere, İstanbul ve Ankara'daki hastane ve sağlık kurumlarıyla ilgili kararları veren bireyleri araştırmaktadır. Bu tez dört vaka çalışması sunmaktadır: İstanbul'daki İngiliz Denizciler Hastanesi, İstanbul'daki Amerikan Hastanesi, Ankara'daki Hıfzıssıhha Enstitüsü yapıları ve İstanbul'daki Amiral Bristol Hemşirelik Okulu Hemşireler Evi. Bu tezin amacı, mimarlık tarihi açısından bu projeleri şekillendiren birçok farklı sosyal, kültürel, politik ve ekonomik etkeni araştırmaktır. Bu tezde incelenen kişilerin arasında İngiltere, Avusturya, Amerika Birleşik Devletleri ve Türkiye'den mimarların yanı sıra, sağlık kurumlarının kuruluş ve gelişimini etkileyen farklı bâniler, doktorlar, hemşireler, inanç liderleri, diplomatlar ve siyasi aktörler de yer almaktadır. Bu tezde incelenen sağlık mimarisi örneklerinden sorumlu kişiler, Osmanlı İmparatorluğu'nun son dönemlerinde (1839-1922) ve Türkiye Cumhuriyeti'nin ilk dönemlerinde (1923-1950) kozmopolit bir ortamda çalışmışlardır. Bu dört proje için yapılan üslupsal ve tipolojik seçimler, bu dönüştürücü çağın mimari çıktısını çevreleyen karmaşık dinamikleri yansıtmakta ve bunlardan sorumlu bireylerin entelektüel ve fiziksel hareketliliğinin yanı sıra modernizm gibi farklı mimari hareketlerin etkisini de vurgulamaktadır. Bu tez, dört sağlık mimarisi örneğinin detaylı biçimsel ve tipolojik analizine ek olarak, dönemin sağlık kurumlarında meydana gelen dönüşümleri, işlevlerini ve bunları finanse eden, inşa eden ve kullananlar için ne anlama geldiğini açıklamaktadır. Bu tezde, bazıları burada ilk kez sunulan yazışmalar, süreli yayınlar, günlükler, parlamento kayıtları, diplomatik yazışmalar ve mimari planlar dâhil olmak üzere Türkiye, ABD ve İngiltere'deki arşivlerden çok sayıda birincil kaynak kullanılmıştır. Bu binalarda yaşayan ve çalışan sağlık çalışanlarının sözlü tarihlerine de danışılarak bu binaların sonraki yaşamları hakkında tamamlayıcı bilgi edinilmiştir. Son olarak, bu tez ve burada sunulan mimari projeler, bu dönemde sağlık mimarisini şekillendiren karar alma süreçlerinde ve güç dinamiklerinde Osmanlı iradesini göz ardı etme eğiliminde olan sömürgecilik sonrası teorinin daha ayrıntılı ve eleştirel bir şekilde yeniden değerlendirilmesi gerektiğini savunmaktadır.

Anahtar kelimer: sağlık mimarisi, hastane tarihi, hastane mimarisi, Osmanlı mimarlık tarihi, İngiliz Denizciler Hastanesi, Amerikan Hastanesi, Hemşire Evi, Charles Holden, Sedad Hakkı Eldem, Theodor Jost, Robert Oerley, Percy Adams, W. Stuart Thompson, modernizm, tıbbi beşeri bilimler, sağlıkta beşeri bilimler

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archivists Ginny Dawe-Woodings and Kate Jarman of Barts Health NHS Trust, and Fiona Orsini and Lauren Alderton of the Royal Institute of British Architects (RIBA) Archives all went out of their way to help me reach the documents I needed for which I will forever be grateful. I would like to thank the American Research Institute in Turkey (ARIT) for the fellowship they provided and their director Dr. Brian Johnson for making the ARIT library available. I am grateful to Linda Rödel of the Goethe Institute in Ankara, who generously provided me with the publications and exhibition catalogues I was looking for. Among the people who helped me source the information I needed to write this thesis were Ayşe Pişkin, Ülkü Deniz Özsu, Can Çakmakçıoğlu, and Erdinç Kadıoğlu who shared their memories and lived experiences with me and I am thankful for their kindness and generosity with their time.

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ABBREVATIONS

ABCFM	American Board of Foreign Commissioners for Foreign Missions
ABHO	*Amiral Bristol Hemşirelik Okulu* (Admiral Bristol School of Nursing)
ABSN	Admiral Bristol School of Nursing
ACASR	American Committee for Armenian and Syrian Relief
ACG	American College for Girls
A.D.F.	Alfred Dwight Foster (Hamlin)
ARC	American Red Cross
A.R.I.B.A.	Associate of the Royal Institute of British Architects
ARIT	American Research Institute in Turkey
ASCSA	American School of Classical Studies at Athens
AWH	American Women's Hospitals Service
b.	year(s) built
BCA	*Devlet Arşivleri Başkanlığı Cumhuriyet Arşivi* (Archives of the Turkish Republic)
BOA	*Devlet Arşivleri Başkanlığı Osmanlı Arşivi* (Ottoman State Archives)
BSH	British Seamen's Hospital
CHI	Central Hygiene Institute (*Hıfzıssıhha Enstitüsü*)
CHP	*Cumhuriyet Halk Partisi* (Republican People's Party)
CMS	Church Missionary Society
DP	*Demokrat Parti* (Democrat Party of Turkey)
F.R.I.B.A.	Fellow of the Royal Institute of British Architects
G.A.T.	George Alexander Thomas (Middleton)
HC	House of Commons (U.K.)
HDS	Harvard Divinity School
IHB	International Health Board
IHD	International Health Division
IRB	Institutional Review Board
KUH	Koç University Hospital
KUSOM	Koç University School of Medicine

KUSON	Koç University School of Nursing
LoC	Library of Congress (U.S.)
METU	Middle East Technical University
MIT	Massachusetts Institute of Technology
MMP	Mary Mills Patrick
MoMA	Museum of Modern Art (New York)
NATO	North Atlantic Treaty Organization
n.d.	no date/date(s) unknown
n.p.	no page number(s)
NER	Near East Relief
r.	years of reign
RAC	Rockefeller Archive Centre
RBF	Rockefeller Brothers Fund
RBML	Rare Books and Manuscripts Library (Columbia University)
RF	Rockefeller Foundation
RIBA	Royal Institute of British Architects
SKL	Suna Kıraç Library (Koç University)
SOM	Skidmore, Owings and Merrill
TB	Tuberculosis
TBMM	*Türkiye Büyük Millet Meclisi* (Grand National Assembly of Turkey)
U.K.	The United Kingdom
U.S.	The United States of America
USAID	United States Agency for International Development
USSR	The Union of Soviet Socialist Republics
VEKAM	*Koç Üniversitesi Vehbi Koç Ankara Araştırmaları Uygulama ve Araştırma Merkezi* (Koç University Vehbi Koç Ankara Studies Research Center)
VKV	*Vehbi Koç Vakfi* (Vehbi Koç Foundation)

Disclaimer regarding transliterations/translations:

Transliterations/translations from Ottoman/Turkish to English are mine unless otherwise indicated.

Chapter 1

INTRODUCTION

In the simplest terms, the 'hospital' can be defined as a space of healthcare where the sick receive treatment. Etymologically, 'hospital' is a derivation of the Latin word *hospitium* ("a place of entertainment for strangers, a lodging, an inn, a guest chamber").[1] The hospital, however, represents a broader phenomenon as an imagined space, despite being a tangible part of almost every individual's life at one point or another in contemporary 'Western' society. It commonly serves as a romanticized setting in popular soap operas, television dramas, comedy shows, movies, and novels. Part of humanity's collective heritage, the hospital, along with its associated symbols, and objects such as the serpent of Asklepion, the red cross, the red crescent, the hospital gown, or the stethoscope, stands as a product of cultural cosmopolitanism associated with medicine and healthcare. This dissertation questions how the architecture of healthcare spaces was influenced by social, cultural, and political forces.

Thanks to the intellectual and physical mobility enjoyed by individuals who shaped healthcare institutions, hospital architecture adopted a particularly cosmopolitan language. The hospital at times was transformed into a political tool to assert influence and display power. The hospital, as an institution and an architectural typology, has a contested history and historiography that continues to be written and rewritten. This is also the case for the architectural projects investigated in this thesis: the hospital and healthcare buildings established in Istanbul and Ankara, Turkey during the nineteenth and twentieth centuries.

This thesis begins by examining the competing claims regarding which civilization created the concept of the hospital and how the meaning of what constitutes a hospital space differed across geographies and time periods. The varying opinions found in the scholarship on the origins of the hospital and how it evolved into what it is today are evidence that healthcare institutions are social and political entities. By examining the patronage, financing, design, planning, and construction of hospitals and other healthcare-

[1] L. Cilliers and F.P. Retief, "The Evolution of Hospitals from Antiquity to the Renaissance," *Acta Theologica* 26, no. 2 (2005): 215; Charlton T. Lewis and Charles Short, *A Latin Dictionary* (New York: Harper and Brothers, 1884), 867.

related structures supported by Britain, the United States, and the local authorities in Istanbul and Ankara we can better understand how healthcare projects and spaces allocated for the purpose of healthcare played a vital part in the dynamics and distribution of power in these cities. In this thesis I explain how the rules and regulations imposed by the Ottoman authorities hindered Britain's building activities in Istanbul and assess how the architecture of the British Seamen's Hospital in the city represented British aspirations in the Ottoman Empire in its final years. I then turn to examine the healthcare institutions established in Turkey by or with the support of American organizations such as the American Board of Commissioners for Foreign Missions (ABCFM) and the Rockefeller Foundation (RF), question in what ways their architectural projects differed from that of the British Seamen's Hospital, and explain what kind of cultural, political, and diplomatic roles these institutions served. The differences between the design, financing, and construction processes of the British Seamen's Hospital and the healthcare institutions supported by Americans demonstrate that Britain and the United States followed different approaches with regards to their relationship with the Ottoman Empire and later the Turkish Republic. This thesis investigates how the architectural styles chosen for these projects embodied political statements and carried symbolic or diplomatic meanings.

Methodologically, this dissertation examines architectural and social histories through research about the political and cultural influences that shaped the built environment of healthcare in Europe, the Ottoman Empire, and the Turkish Republic from the mid-nineteenth to the early twentieth centuries. It examines four major case studies using comparative typological and formal analysis: the British Seamen's Hospital in Istanbul, the Central Hygiene Institute complex in Ankara, the American Hospital in Istanbul, and the Admiral Bristol School of Nursing Nurses' Home in Istanbul. Using the methodologies of architectural history as it is practiced today, this research pushes beyond typological categorization and formal analyses of buildings to better understand the many different social, cultural, political, and economic forces that shaped these four examples of healthcare architecture presented.

The British Seamen's Hospital in Istanbul designed by Charles Holden and H. Percy Adams was built in 1903 at a time when the pavilion plan typology in hospital design, which had spread around the world from Britain, was the norm. While examples of this typology existed in the Ottoman Empire at the time the British Seamen's Hospital in Istanbul was constructed, this British-built hospital stood out as an urban healthcare

structure erected on a site which was very constricted. Instead of the regular horizontal pavilion plan hospitals, which required vast spaces as was the case with the Hamidiye *Etfal* (Children's) Hospital in Istanbul built in 1899, the British Seamen's Hospital was designed as a vertical pavilion plan building featuring wards stacked on top of each other. It was so unique and masterfully planned that the building was selected as an example of best practices for a hospital building on a restricted urban site in George Alexander Thomas (G.A.T.) Middleton's (1861-1935) manual for architects *Modern Buildings, Their Construction and Equipment* published in 1905.[2] Although there were other foreign-built hospitals in Istanbul at the time, no other hospital building commissioned by a foreign entity in the Ottoman capital was as prominently positioned on the cityscape of the late Ottoman capital as the British Seamen's Hospital, which featured a tower that ensured the British flag was visible to all who entered Istanbul from the Marmara Sea. Academic scholarship on this building had been limited to its restoration and although the building had been briefly mentioned in the works of Eitan Karol, Nuran Yıldırım, and Elain Harwood, a comprehensive architectural history of the building had not done previously.[3] Through textual records found in the National Archives in the United Kingdom, the Royal Institute of British Architects, and the Ottoman State Archives, I explain how this building was built, what restrictions were imposed on the building's patrons and architects by both British and Ottoman officials, how the building was used by different groups of people, and what this hospital's presence meant socially, culturally, and politically.

The second case study is the American Hospital in Istanbul, which also had a school of nursing, but did not have a purpose-built hospital of its own for many years despite several attempts and proposals by different architects to construct an American healthcare institution in the city. Part of the information presented in this thesis regarding the American Hospital in Istanbul, as well as other American-founded institutions such as the Medical School of the American College for Girls and the Admiral Bristol School of Nursing Nurses' Home, also appears in a forthcoming publication I co-authored with

[2] George Alexander Thomas Middleton, *Modern Buildings, Their Construction and Equipment, vol. 3.* (London: Caxton Publishing Company, 1905), 39-47.
[3] Nursu Büyükhelvacıoğlu, "Beyoğlu Hastanesi'nin Restorasyon Projesi" (MArch thesis, Istanbul Technical University, 1994); Eitan Karol, *Charles Holden* (Spalding, UK: Shaun Tyas, 2007), 109-11; Nuran Yıldırım, *A Tour of the History of Medicine in Istanbul* (Istanbul: The Turkish Society of Clinical Microbiology and Infectious Diseases, 2008), 80-83.

Lucienne Thys-Şenocak.[4] As the presence of the United States in the newly founded Turkish Republic became more prominent, the patrons of the American Hospital were able to acquire land and eventually build a hospital on it in 1939. Unlike other foreign hospitals such as the British hospitals which served sailors working on British merchant ships and British subjects in the Ottoman Empire, the American hospitals in the Ottoman Empire, which were initially established by missionaries, aimed to serve the locals as well as the American expatriate community without differentiating race, religion, nationality, or ethnicity. When the American Hospital's purpose-built hospital was finally constructed in 1939, the architect of the project was the American W. Stuart Thompson, and its modernist style resembled other healthcare buildings which were celebrated in the newly founded Turkish Republic. Apart from the aforementioned article by Lucienne Thys-Şenocak and myself, academic publications about the American Hospital in Istanbul are limited to institutional histories such as a comprehensive volume written by the former directors of the hospital Warren H. Winkler and George D. Rountree, and a brief subsection included in a book on the activities of the American Red Cross in Istanbul written by Cenk Demir.[5] The research I conducted on the American Hospital in Istanbul was informed by archival sources found at the American Research Institute in Turkey Istanbul Center Library, Harvard Divinity School Library, SALT Research Library and Archive, and the Library of Congress in Washington, DC. My research also includes the interviews I conducted with the current staff of the American Hospital in Istanbul.

The third case study examined in this thesis is the *Hıfzıssıhha* (Central Hygiene) Institute in Ankara. This architectural project provides insight into the relationship between the Ankara-based government of the newly established Turkish Republic and American institutions that were interested in exercising influence in the region in the first half of the twentieth century. For the United States, support to healthcare initiatives in the newly established Turkish Republic played a diplomatic role. American institutions such as the Rockefeller Foundation (RF) supported the creation of state-sponsored public health establishments particularly in Ankara, the new capital of the Turkish Republic. The

[4] Uğurgül Tunç and Lucienne Thys-Şenocak, "American Healthcare Architecture in Istanbul in the Early Twentieth Century: The American Hospital, the Medical School of the American College for Girls, and the Admiral Bristol School of Nursing Nurses' Home," in *Places of Illness, Spaces for Healing: The Built Environment of Healthcare in Anatolia through the Ages*, eds. Lucienne Thys-Şenocak and Inge Uytterhoeven (Istanbul: Koç University Press, 2024).

[5] Warren H. Winkler and George D. Rountree, *Amerikan Hastanesi, 1920-2007* [also published in English as *The American Hospital, 1920-2007*] (Istanbul: Amerikan Hastanesi, 2012); Cenk Demir, *Osmanlı'da Amerikan Kızılhaçı* (Istanbul: Yeditepe Akademi, 2022), 312-22.

Central Hygiene Institute (CHI) buildings were designed by the Austrian architects Theodor Jost and Robert Oerley in a modernist style that reflected the aesthetic preferences of the founders of the Turkish Republic rather than those of the RF representatives. This case study, in addition to providing insight into healthcare architecture that was built outside of Istanbul allowed me to examine some of the reasons behind the stylistic choices made for healthcare architecture at this time, and to chart the development of the modernist aesthetic as it evolved in the early years of the Turkish Republic. This part of my research utilized the archives of the Rockefeller Foundation to understand how the CHI project came into being and to analyze the unpublished preliminary architectural plans of its buildings. I also used photographs found in the archives of the Vehbi Koç Ankara Studies Research Center and the Goethe Institute in Ankara. Since the extant CHI archives in Ankara have been inaccessible and largely destroyed after the complex was shut down in 2011, I primarily had to rely on archival sources outside of Turkey for this section of the thesis. I also built on the work of scholarly sources available on the subject such as publications by Bernd Nicolai, İnci Aslanoğlu, Ali Cengizkan, Leyla Alpagut, Sadet Altay, and Aziz Küçük.[6]

The fourth and final case study in this thesis is the Admiral Bristol School of Nursing (ABSN), which was designed by a renowned Turkish architect named Sedad Hakkı Eldem and built between 1949 and 1950. This institution was the nursing school of the American Hospital in Istanbul, and its building was constructed as a Nurses' Home, an architectural typology that had emerged in the late nineteenth century in Britain as a building that provided nurses and nursing students with educational, recreational, and residential spaces. The ABSN Nurses' Home was a rare example of this typology in the Turkish Republic. Although Eldem's design alluded to the Turkish home, its interior organization was similar to Nurses' Home buildings in the United States. This building exemplified the evolving nature of the American approach to building healthcare structures in Turkey and the choice of a Turkish architect in this case was emblematic of the diplomatic character of this project. This final case study examines a building

[6] Ali Cengizkan, *Modernin Saati* (Ankara: Arkadaş, 2002); Leyla Alpagut, "Erken Cumhuriyet Dönemi'nde Ankara'daki Eğitim Yapıları" PhD diss., Hacettepe University, 2005; İnci Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı, 1923-1938,* 3rd edition (1st edition: 1980) (Istanbul: Bilge Kültür Sanat Yayın, 2010); Bernd Nicolai, *Modern ve Sürgün: Almanca Konuşulan Ülkelerin Mimarları Türkiye'de, 1925-1955* (Ankara: TMMOB Mimarlar Odası, 2011); Sadet Altay, *Atatürk Döneminde Numune Hastanelerine Dönüştürülen Osmanlı Hastaneleri (1924-1938)* (Ankara: Atatürk Araştırma Merkezi Başkanlığı, 2019); Aziz Küçük, *Filantrokapitalizm: Rockefeller, Ford & Gates Vakfı ve Türkiye* (Ankara: Siyasal Kitabevi, 2022).

associated with a typology that emerged almost at the same time as the pavilion plan in the late nineteenth century, which the first case of this dissertation examines. The contrasts between the British Seamen's Hospital built in the beginning of the twentieth century and the ABSN built between 1949 and 1950 document both the different approaches to building healthcare institutions by Britain and the United States, and how healthcare architecture, especially with regards to the organization of labor, evolved in the first half of the twentieth century. My research on the ABSN Nurses' Home primarily relied on archival sources, particularly unpublished plans, available at the Suna Kıraç Library at Koç University. To understand how the building was used, I relied on the interviews I conducted with Ayşe Pişkin and Ülkü Deniz Özsu, who had lived in it by Eldem in the 1960s. I also consulted with Can Çakmakçıoğlu, an architect who had worked on a remodeling project in the 1990s proposed for the ABSN Nurses' Home building designed by Eldem. This thesis and the aforementioned forthcoming article by Lucienne Thys-Şenocak and myself are significant contributions to academic literature as they document this unique building, and the American Hospital in Istanbul, which were demolished in 1999. Our research also contributes to scholarship as an exploration of the presence of the Nurses' Home typology in Turkey.[7] Apart from the work by Lucienne Thys-Şenocak and myself, there are no scholarly publications on the architecture of Eldem's design for the ABSN Nurses' Home or the Nurses' Home typology in Turkey. The institutional history of the ABSN Nurses' Home is limited to a volume by the school's former principal Gülsevim Çeviker and subsections included in the works of Nuran Yıldırım and Cenk Demir as well as the volume on the American Hospital in Istanbul by Warren H. Winkler and George D. Rountree.[8] The building itself is only briefly mentioned in works cataloguing Eldem's oeuvre.[9]

This dissertation pays particular attention to the architects who shaped the establishment and development of these institutions. The buildings in my case studies were designed by a diverse group of architects who had equally diverse reasons for working in the cosmopolitan environment in the late Ottoman Empire (1839-1922) and

[7] Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[8] Gülsevim Çeviker, *Amiral Bristol Hemşirelik Okulu (1920-1999)* (Istanbul: Vehbi Koç Vakfı Yayınları, 2011); Winkler and Rountree, *Amerikan Hastanesi*; (Istanbul: Koç University Press, 2014); Nuran Yıldırım, *Savaşlardan Modern Hastanelere Türkiye'de Hemşirelik Tarihi* (Istanbul: Koç University Press, 2014); Demir, *Osmanlı'da Amerikan Kızılhaçı*, 312-22, 333-40.
[9] *Sedad Hakkı Eldem: 50 Yıllık Meslek Jubilesi* (Istanbul: Mimar Sinan Üniversitesi, 1983), 106-7; Sibel Bozdoğan, "Modernity in Tradition," in *Sedad Eldem: Architect in Turkey*, eds., Sibel Bozdoğan, Suha Özkan, and Engin Yenal (New York, NY: Media Pte LTD, 1987), 53.

the early decades of the Turkish Republic (1923-1950). This dissertation tells the story of these architects and explores the different reasons why they may have designed these buildings the way they did. Architecture, and the meaning of buildings are not only the product of the patrons and architects, but also shaped by the users. As such, this thesis examines how physicians, nurses and other healthcare workers used these healthcare-related projects and contributed to the establishment and transformation of spaces of healthcare. Exploring the social connotations of the buildings I studied was particularly challenging since it is difficult to find records about patients' or healthcare workers' experiences, and I used oral histories as well as primary sources such as diaries and correspondence to understand how these buildings were interpreted and understood by their users. In this respect there is more research that needs to be conducted to write a more comprehensive social history of the built environment of healthcare in Turkey. I continue to work on oral histories to achieve this goal. The social history of the built environment of healthcare is a promising area for future research. Although the scope of my current research does not include the second half of the twentieth century, there is a great deal to learn by following the more recent past of healthcare buildings and understanding how their use and meanings have changed.

1.1 The Hospital: A Contested History

In his landmark 1936 article, "An Outline of the Development of the Hospital," Henry Sigerist writes that "1,600 years of history of the European hospitals" was repeated in two hundred years in the United States.[10] He posits that two factors determined the history of the so-called 'western' hospital: society and medicine. Sigerist's timeline for the development of the hospital began in the early medieval period and tied the concept of the hospital closely to the history of Christianity.[11] He and many others who follow in his footsteps claim that the Christian understanding of charity brought with it a more compassionate view of disease, which led to the invention of the hospital.[12] Perhaps inadvertently, this mindset suggests that the Christian/European tradition of establishing

[10] Henry E. Sigerist, "An Outline of the Development of the Hospital," *Bulletin of the History of the History of Medicine* 4, no. 7 (Jul. 1936): 576.
[11] Ibid., 573-81.
[12] See for example Cilliers and Retief, "The Evolution of Hospitals," 213-32; C. Ben Mitchell, "The Christian Origins of Hospitals," Bible Mesh blog post, Feb. 6, 2012, accessed Feb. 9, 2024, https://biblemesh.com/blog/the-christian-origins-of-hospitals/; Edward Whelan, "Christianity and the Rise of the Hospital in the Ancient World," Classical Wisdom blog post, Mar. 27, 2020, accessed Feb. 9, 2024, https://classicalwisdom.com/culture/history/christianity-and-the-rise-of-the-hospital-in-the-ancient-world/; John Stonestreet and Glenn Sunshine, "How Christianity Created the Hospital," Break Point article, Aug. 17, 2022, accessed Feb. 9, 2024, https://breakpoint.org/how-christianity-created-the-hospital/.

hospitals represented continuity and was a model exported to other geographies of the world as a 'civilizing mechanism,' particularly through missionary activities, and that local models of host societies either did not exist or faded over time. Recent architectural histories of the hospital hailing from Europe and North America, such as Michael Murphy's *The Architecture of Health: Hospital Design and the Construction of Dignity*, only occasionally explore local approaches to what constituted a hospital in the local tradition and do so for later eras of the 18th and 19th centuries.[13] Scholarship on hospital history, such as the work of L. Cilliers and F.P. Retief, echoes Sigerist's line of thinking as they boldly write "[i]t is to the Christians that one must turn for the origin of the modern hospital."[14] While acknowledging that early Christian hospitals did not necessarily focus on medical cures but rather emphasized 'miracles' and spiritual healing, and even promoted a belief of disease as punishment for sins, the authors credit early Christians for the 'invention' of the hospital as an institution focused on caring for the destitute based on the notion of 'Christian compassion'.[15] These approaches to hospital history exclude not only the hospitals predating Christianity which were built in 'other' geographies such as those established during the reign of King Ashoka in the third century BCE in India that were motivated by the notion of Buddhist compassion, but also discredit the spaces of healing of the pre-Christian classical period in the Mediterranean such as the ancient Greek *Asklepieia* or the Roman *valetudinaria* (space for 'valetudinarians,' i.e., individuals, specifically slaves and soldiers, lacking *valetudo* or health).[16]

The competing narratives and 'pioneering' claims in the history of the hospital are indeed extensions of larger debates in the history of science and medicine. The perspective that regards the hospital as an element of European heritage and Christianity's gift to the world serve as a precursor to the medical missionaries and establishment of mission hospitals in the late nineteenth century as part of a 'civilizing' mission.[17] This

[13] Michael Murphy, *The Architecture of Health: Hospital Design and the Construction Dignity* (New York, NY: Cooper Hewitt, 2021).
[14] Cilliers and Retief, "The Evolution of Hospitals," 213.
[15] Ibid., 214.
[16] The *Asklepieia* were healing temples dedicated to the healer-demigod Asklepios in Greek mythology where practices of humoral medicine were applied. The *valetudinaria* were were institutions designed to maintain the physical health of the two most important categories of workers, the slaves and soldiers deemed essential for the livelihood of the Roman Empire. For more information, see Guenter B. Risse, *Mending Bodies, Saving Souls: A History of Hospitals* (New York & Oxford: Oxford University Press, 1999), 15-68. Asklepios is known as Aesculapius in Latin.
[17] Rufus Anderson, *History of the American Foreign Missions to the Oriental Churches* (Congregational Pub. Society, 1872); William E. Strong, *The Story of the American Board: An Account of the First Hundred Years of the American Board of Commissioners for Foreign Missions* (Boston, New York, Chicago: The Pilgrim Press, 1910): Margaret R. Leavy, *Looking for the Armenians: Eli Smith's Missionary Adventure*

Euro-centric view, however, is rather problematic since the earliest Christian spaces which could qualify as hospitals did not originate from Western Europe, but rather from Anatolia most notably with the healing center of St. Basil founded on the outskirts of Cappadocian Caesarea in the 370s.[18] In his *Oration* 43.63 dated circa 382, Gregory of Nazianzus provided a description of this prototypical hospital as he eulogized his friend St. Basil, who had passed away in 379:

> Go forth a little way from the city, and behold the new city, the storehouse of piety, the common treasury of the wealthy, in which the superfluities of their wealth, aye, and even their necessaries, are stored, in consequence of his exhortations, freed from the power of the moth, no longer gladdening the eyes of the thief, and escaping both the emulation of envy, and the corruption of time: where disease is regarded in a religious light, and disaster is thought a blessing, and sympathy is put to the test.[19]

St. Basil's complex came to be known as the *Basileias* during his lifetime and consisted of a *xenodocheion* (place for the reception of strangers, hospice), a *ptōchotropheion* (place for the nurture of the poor, shelter), a *nosokomeion* (place for the care of the sick, hospital), residences for staff and storage buildings among other features.[20] Despite the presence of documentation related to this building complex, its physical remains are yet to be discovered. Byzantinists often assert that the Basileias subsequently became an ideal exported and emulated throughout the Byzantine Empire and beyond, giving rise to the prototypical modern hospital.[21] In subsequent centuries, works of art depicting St. Basil

(1830-1831) (Connecticut Academic of Arts and Sciences, 1992); Jeremy Salt, "Trouble Wherever They Went: American Missionaries in Anatolia and Ottoman Syria in the Nineteenth Century," *The Muslim World* 92, no. 3-4 (Sep. 2002): 287-313; David Hardiman, *Healing Bodies, Saving Souls: Medical Missions in Asia and Africa* (New York: Rodopi, 2006); Michael Jennings, "'Healing of Bodies, Salvation of Souls': Missionary Medicine in Colonial Tanganyika, 1870-1939," *Journal of Religion in Africa* 38, no. 1 (2008): 27-56; Karen Vallgårda, "Were Christian Missionaries Colonizers?" *Interventions: International Journal of Postcolonial Studies* 18, no. 6 (2016): 865-86; Sara Honarmand Ebrahimi, *Emotion, Mission, Architecture: Building Hospitals in Persia and British India (1865-1914)* (Edinburgh: Edinburgh University Press, 2023).

[18] Peter Brown, *Power and Persuasion in Late Antiquity: Towards a Christian Empire* (Madison, WI: University of Wisconsin Press, 1992); Timothy S. Miller, *The Birth of the Hospital in the Byzantine Empire* (Johns Hopkins University Press, 1997); Susan R. Holman, *The Hungry are Dying: Beggars and Bishops in Roman Cappadocia* (Oxford University Press, 2001); Andrew T. Crislip, *From Monastery to Hospital: Christian Monasticism and the Transformation of Health Care in Late Antiquity* (Ann Arbor, MI: University of Michigan Press, 2005); Mark Alan Anderson, "Hospitals, Hospices and Shelters for the Poor in Late Antiquity" (PhD diss., Yale University, 2012).

[19] *Panegyric on S. Basil. Oration* 43. 63, NPNF 7, 416

[20] Brown, *Power and Persuasion*, 38-42; Miller, *Birth of the Hospital*, 85-88; Holman, *Hungry are Dying*, 74-75; Crislip, *From Monastery to Hospital*, 103-20; Anderson, "Hospitals, Hospices and Shelters," 32-33, 127-28.

[21] For examples, see Timothy S. Miller, "Byzantine Hospitals," *Dumbarton Oaks Papers* 38 (1984): 53–63; Crislip, *From Monastery to Hospital*.

of Caesarea and Gregory of Nazianzus in hospital settings appeared, which signaled the importance of this geography of care as part of Christian heritage.[22]

Examining the scholarship on the medieval healthcare institutions established in geographies where Islam was the dominant religion similarly reveal the politicized nature of claims concerning the invention of the hospital. For instance, in an article titled "The Origins of the Islamic Hospital," Michael W. Dols argue that the advancements in science and medicine in the Near East was the result of a 'cultural diffusion' that occurred thanks to the presence of Christians in these geographies.[23] He notes that Christian physicians served in Muslim courts and hospitals while adding that scholars such as Sami Hamarneh, who attributes a major hospital to the Abbasid caliph Harun al-Rashid (r. 786-809), are only exaggerating the achievements of Islam.[24] Dols defines the hospital as "a public charitable institution that affords care to the sick over an extended period of time" and associates the fourth century Early Byzantine institutions with this definition, while arguing that institutions such as the Roman *valetudinaria* did not qualify as hospitals since they were neither charitable nor public as they solely served slaves and soldiers.[25] However, as Dols also admits, any of these institutions, including the Byzantine healing spaces, were not necessarily medicalized settings in the sense we think of hospitals today and they focused on caring rather than curing.[26]

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[22] One example of such portrayals is found on folio 149r of a ninth century illuminated manuscript dedicated to Basil I the Macedonian who ruled the Byzantine Empire between 867 and 886. The Homilies of Gregory of Nazianzus (B. N. gr. 510), folio 149r. For more information on this manuscript, see Sirarpie Der Nersessian, "The Illustrations of the Homilies of Gregory of Nazianzus: Paris Gr. 510. A Study of the Connections between Text and Images," *Dumbarton Oaks Papers* 16 (1962): 197-228; Leslie Brubaker, "Politics, Patronage, and Art in Ninth Century Byzantium: The *Homilies* of Gregory of Nazianzus in Paris (B.N. GR. 510)," *Dumbarton Oaks Papers* 39 (1985): 1-13.

[23] Michael W. Dols, "The Origins of the Islamic Hospital," *Bulletin of the History of Medicine* 61, no. 3 (Fall 1987): 367-8.

[24] Sami Hamarneh, "Development of Hospitals in Islam," *Journal of the History of Medicine and Allied Sciences* 17, no. 3 (Jul. 1962): 368; Dols, "Origins of the Islamic Hospital," 367.

[25] Dols, "Origins of the Islamic Hospital," 370.

[26] Dols, "The Origins of the Islamic Hospital," 371. See also Emilie Savage-Smith, "Medicine in Medieval Islam," in *The Cambridge History of Science*, eds. David C. Lindberg, and Michael H. Shank (Cambridge: Cambridge University Press, 2013): 158; Suzan Yalman, "Hospitals and Philanthropy in Seljuk Anatolia," in *Philanthropy in Anatolia through the Ages* (Proceedings of The First Suna and İnan Kıraç Symposium on Mediterranean Civilizations, March 26–29, Antalya), eds. O. Tekin, C. H. Roosevelt and E. Akyürek (Koç University Press, 2020), 170. Miller, however, posits that Byzantine establishments functioned as full-fledged hospitals. See Miller, *Birth of the Hospital*. Although these scholars made arguments concerning whether the healthcare settings they focused on provided care or cure, thinking of hospital history along the lines of caring vs. curing binary is a rather problematic approach since these have been fluid concepts throughout history and they often went hand-in-hand in healthcare settings.

1.2 Hospitals of the Islamic World

The 'cultural diffusion' theory concerning the development of Islamic medicine implies a unilateral transfer of knowledge from Christians to Muslims in the medieval Near East according to Dols. However, as Suzan Yalman demonstrates in her survey of Seljuk hospitals the cosmopolitan geographies of Islam supported an environment of cultural exchange which both adapted ideas from various civilizations, including Greek, Byzantine, Arabic, Armenian, and Syriac traditions, and produced innovations of its own.[27] Yasser Tabbaa suggests that there was a spirit of competition between Christian and Muslims to build hospitals which emerged in the region particularly during the Abbasid caliphate.[28]

Tabbaa divides what he terms the 'premodern history of the Islamic hospital' into three periods: early (785-1000), medieval (1150-1500), and Ottoman (1500-1800).[29] He regards the period between 850 and 1100 as the 'peak of Islamic medicine' emphasizing that this era curiously did not correspond to the large-scale hospital building activity which began in the twelfth century and reached its zenith in the thirteenth century.[30] According to Tabbaa, the Islamic hospital, or the *bimaristan* (a word adapted from Persian to signify the hospital in Arabic), had a distinctive architectural form and enjoyed charitable, social, medical, and educational functions.[31] He identifies three main causes that led to the establishment of these institutions: the rise of post-Seljuk city-states in the twelfth century, the creation and availability of patronage such as *waqf*s (endowments), and the professionalization of medicine.[32]

Tabbaa defines the dominant typology of almost all extant pre-Ottoman hospitals as "a four-*iwan* (a vaulted hall with an arched opening) structure entered through a single monumental gate."[33] The configuration of al-Nuri *bimaristan* in Damascus (b. 1154) was exemplary of this typology:

> The four iwans converge on a large rectangular pool with four corner niches. The eastern iwan served as a lecture hall, as is evident from several early descriptions and the presence of niches for

[27] Franz Rosenthal, *The Classical Heritage in Islam* (Berkeley and Los Angeles: University of California Press, 1975); Yalman, "Hospitals and Philanthropy in Seljuk Anatolia," 170.
[28] Yasser Tabbaa, "The Functional Aspects of Medieval Islamic Hospitals," in *Poverty and Charity in Middle Eastern Contexts*, eds. Michael Bonner, Mine Ener, and Amy Singer (Albany, NY: State University of New York Press, 2003), 100.
[29] Ibid., 97.
[30] Ibid., 99.
[31] Ibid., 95-120.
[32] Ibid.
[33] Ibid., 100-6.

> books. The corner rooms were reserved for the patients. The *bimaristan* was also equipped with a large latrine, with six stalls centred around a pool.[34]

These *bimaristan*s were centrally located, large, well-built, and amply provided establishments easily accessed from anywhere in the city; their cruciform four-*iwan* plans and elaborate, yet controlled entrances were features usually associated with palace architecture which also appeared in some *medrese*s (educational institutions) of the time.[35] *Bimaristan*s rarely featured a mosque unless added as in the cases of al-Nuri *bimaristan* in Damascus (1154, a small mosque was added later) and Arghun al-Kamili *bimaristan* in Aleppo (1354) signaling the rather pragmatic nature of these establishments when compared to their contemporary counterparts in Europe (Figure 1.1).[36]

Hospitals in Anatolia did not necessarily correspond to Tabbaa's descriptions of the *bimaristan* typology. For instance, the early thirteenth-century mosque-hospital complex in Divriği consisted of a mosque (1228) and a hospital (1229) commissioned respectively by Ahmadshāh, one of the rulers of the late Mengujekid dynasty in the early thirteenth century, and his wife Tūrān Malik.[37] As Oya Pancaroğlu explains, the Ottoman Empire would later inherit this "institutional configuration, juxtaposing the accommodation of communal Muslim prayers with the dispensation of social services."[38] The hospital in Divriği was a variation of the *medrese* plan composed of vaulted halls surrounding a covered and arcaded courtyard, which reflected the standard architectural typology of the medieval Anatolian hospital, or the *darüşşifa* (Figure 1.2).[39]

1.3 The Ottoman Darüşşifa

Ottoman healthcare institutions replaced the medieval *bimaristan*s by the seventeenth century in the Arab lands that the Ottomans conquered, and some were repurposed as *tekke*s (Sufi fraternities) which offered faith healing practices.[40] Bayezid I (r. 1389-1402) was the first member of the Ottoman dynasty to establish a hospital

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[34] Ibid., 100.
[35] Ibid., 106.
[36] Ibid.
[37] Oya Pancaroğlu, "The Mosque-Hospital Complex in Divriği: A History of Relations and Transitions," *Anadolu ve Çevresinde Ortaçağ* 3 (2009): 169.
[38] Ibid.
[39] Ibid. This hospital particularly stood out with its decorative program. See also Doğan Kuban, *Cennetin Kapıları/Gates of Paradise: Divriği Ulucamisi ve Şifahanesi'nde Hürremşah'ın Yontu Sanatı/The Sculpture of Hürremşah at Divriği Ulucami and Şifahane* (Istanbul: YEM, 2021). Kuban called the Divriği complex "the most extraordinary structure of Islam in the medieval era"[39] and views it as "almost an encyclopaedic dictionary." Kuban, *Cennetin Kapıları*, 357. Yalman translates the term *darüşşifa* or *dār al-shifā'* as "house of cure." See Yalman, "Hospitals and Philanthropy," 167.
[40] Tabbaa, "Functional Aspects," 112.

complex. Located in Bursa, the complex included a madrasa as well as a *darüşşifa* which functioned both as a medical school and a hospital.[41] Perhaps the best-known example of Ottoman hospitals was established by Mehmed II's (r. 1444-1446, 1451-1481) son Bayezid II (r. 1481-1512) and built between 1484 and 1488 in Edirne.[42] Located by the River Tunca, this building complex consisted of a mosque, an *imaret* (soup kitchen), a kitchen, storage facilities, a *madrasa* (school), *darüşiffa*, and *hamam* (bath house) (Figure 1.3).[43]

Miri Shefer notes that the early modern Ottoman hospitals in Bursa, Edirne, and that Istanbul enjoyed a reputation as 'the prime examples of benevolence.'[44] Established as *waqf* (charitable endowment) institutions, the act of founding a hospital was the privileged duty of a small circle of Ottoman elites, and the Ottoman hospitals were meant to serve the needy and the immediate staff employed in the hospital.[45] Early modern Ottoman healthcare institutions, like their counterparts in Europe, were both philanthropic establishments and also served the political aspirations of their founders for legitimation, status, and hopes of salvation in the afterlife.[46] This was the case for many of the 'charitable' works of Ottomans and Europeans as highly visible architectural projects which served many purposes for the users and patrons alike.[47]

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[41] Orhan Bolak, "Hastanelerimiz: Eski Zamanlardan Bugüne Kadar Yapılan Hastanelerimizin Tarihi ve Mimari Etüdü" (Qualifying essay, Istanbul Technical University Faculty of Architecture, 1947), 32; S. Nezih Alataş, "The Restoration Project of the Darüşşifa of Yıldırım Bayezid in Bursa" (MArch thesis, METU, 1988); Sezer Erer, "Osmanlılar Döneminde Bursa'da Yaptırılan Hastaneler," *U.Ü. Fen-Edebiyat Fakültesi Sosyal Bilimler Dergisi* 11, no. 9 (Feb. 2010): 241-52. The complex serves as an ophthalmology hospital today.

[42] Although Rıfkı Melûl Meriç posits that this *külliye* was designed by the palace architect Hayreddin, as Semavi Eyice states this is contested. On popular sources Hayreddin is often credited as the architect of the complex. See Semavi Eyice, "Hayreddin, Mimar," in *TDV İslam Ansikolpedisi vol. 17*, eds. Bekir Topaloğlu, İsmail E. Erünsal, Ahmet Özel (Istanbul: İSAM, 1998), 55-56.

[43] Nuran Yıldırım, *Sultan II. Bayezid Edirne Darüşşifası* (Abdi İbrahim, 2015); Nalan Nişikli, "Yerli turistlerin geleneksel tıp uygulamalarına yönelik algıları: Edirne Sultan II. Bayezid Darüşşifası" (MA thesis, Kırklareli University, 2019); Hilal Kurtça, "15-19. yüzyıllar arasında Osmanlı'da ve İngiltere'de akıl hastalarına tedavi sunan iki hastanenin karşılaştırılması: Edirne Sultan II. Bayezid Darüşşifası ve Londra Bethlem Hastanesi" (MA thesis, Marmara University, 2020). This complex was repurposed by the Trakya University as a museum of health and medicine in 1997.

[44] Miri Shefer, "Charity and Hospitality: Hospitals in the Ottoman Empire in the Early Modern Period," in *Poverty and Charity in Middle Eastern Contexts*, eds. Michael Bonner, Mine Ener, and Amy Singer (Albany, NY: State University of New York Press, 2003), 122.

[45] Ibid.

[46] Ibid., 125, 127.

[47] J.P. Goubert concludes that early modern European hospitals' founders expected a return in the form of gratitude, legitimacy, honoraria, or a ticket to Heaven for their charitable acts. See J.P. Goubert, "Twenty Years On: Problems of Historical Methodology in the History of Health," in *Problems and Methods in the History of Medicine*, eds. Roy Porter and Andrew Wear (London: Routledge, 1987), 43. For further information on studies concerning hospital patronage in early modern Europe see for example Margaret Pelling, "Healing the sick poor: Social policy and disability in Norwich, 1550-1640," *Medical History* 29,

The recipients of medical care at the early modern Ottoman hospitals were not merely the poor and the needy; there were also wealthy patients seeking treatment particularly at Istanbul hospitals as understood from court records which indicated that some of the people who died in these hospitals left behind estates.[48] However, in most cases the well-to-do Ottomans hired physicians and were treated in the privacy of their homes.[49] For instance, Evliya Çelebi (circa 1611-1685) wrote that private physicians and surgeons were summoned to the household of his patron Melek Ahmet Paşa where the Paşa's ailment of the neck was treated, resulting in recovery within two months.[50] Nina Ergin argues that the formal and functional characteristics of the early modern Ottoman *darüşşifa*s evidenced that travellers were also among the primary users of early modern Ottoman hospitals.[51] Ergin explains that the hospitals commissioned by the Ottoman elite patrons between 1400 and 1700 represented a unified typology in terms of design, functional units, and formal characteristics such as an exterior wall which left the impression of a forbidden space, limited number of entrances and windows, a row or rows of covered enclosures, mostly used as patient rooms, surrounding a central courtyard (sometimes multiple courtyards as in the example of *Süleymaniye Darüşşifası*) which featured water elements such as pools or water fountains, and a colonnaded portico covered with domes as a mediatory passageway between the courtyard and the interiors of the rooms.[52] Most Ottoman *darüşşifa*s had square or rectangular arrangements for their courtyards and outer perimeters, while the more complex multifunctional complexes which incorporated healthcare institutions such as the *Darüşşifa* of Bayezid II in Edirne and the *Haseki Sultan Darüşşifası* (1550) in Istanbul had polygonal compositions.[53]

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no. 2 (Apr. 1985): 115-137; Sandra Cavallo, *Charity and Power in Early Modern Italy: Benefactors and Their Motives in Turin, 1541-1789* (Cambridge University Press, 1995). In many cases, the patrons and founders of early modern charitable institutions were imperial women. For more information, see Lucienne Thys-Şenocak, *Ottoman Women Builders: The Architectural Patronage of Hadice Turhan Sultan* (Ashgate, 2007).

[48] Shefer, "Charity and Hospitality," 128-29. For specific examples of such records see also Said Öztürk, *Askeri Kassama ait Onyedinci Asır İstanbul Tereke Defterleri* (Istanbul: Osmanlı Araştırmaları Vakfı, 1995), 135-7, 301, 310-1, 327, 330, 360, 369, 377, 442, 462, 466.

[49] Shefer, "Charity and Hospitality," 128-29.

[50] Evliya Çelebi, *The Intimate Life of an Ottoman Statesman: Melek Ahmed Pasha (1588-1662) as Portrayed in in Evliya Çelebi's Book of Travels*, trans. Robert Dankoff (Albany: State University of New York Press, 1991), 207-14. For other examples of private medical care, see in the same volume pp. 99-104, 108-10, 231, 263-4; Shefer, "Charity and Hospitality," 128-29.

[51] Nina Ergin, "Healing by Design? An Experiential Approach to Early Modern Ottoman Hospital Architecture," *Turkish Historical Review* 6, no. 1 (Mar. 2015): 6.

[52] Ibid., 7-10.

[53] Gönül Cantay, "Darüşşifalar," in *Mimarbaşı Koca Sinan, Yaşadığı Çağ ve Eserleri* (Türk Tarih Kurumu, 1988), 355-68.

Gönül Cantay views the sixteenth century as a turning point in terms of hospital architecture in the Ottoman Empire. She noted that the development of new *darüşşifa* and *külliye* (complex incorporating buildings such as a library, soup kitchen, hospital, mosque, schools…etc.) all over the Empire was a response to the Ottoman population's growing healthcare and educational needs.[54] While these structures inherited elements such as the *iwan* from Seljuk architecture, the innovative aspects of Ottoman hospitals between the fifteenth and seventeenth centuries were found in functional design details such as the social service annexes built close to each other forming a chain resembling a block[55] and the need to construct buildings that suited their locales and urban fabric as well as their founding patrons' requirements.[56] These characteristics of the Ottoman *darüşşifa* persisted in the seventeenth century as well. The *Darüşşifa* of Sultan Ahmed I (r. 1603-1617), completed after its patron's death in 1621, was the only known *darüşşifa* newly built in Istanbul in the seventeenth century.[57] Although no longer extant, this structure most likely followed a typical square or rectangular plan like many of its precedents as per Süheyl Ünver's surveys on the site.[58]

1.4 Spaces of Healthcare in the Eighteenth, Nineteenth, and Twentieth Centuries

Guenter B. Risse underlines that the attitude towards hospital building within the British philanthropic movement in the eighteenth century was a mercantilist endeavor and a widely accepted social contract as John Bellers (1654-1725), a Quaker who in 1714 professed, "it is as much the duty of the poor to labor when they are able as it is for the rich to help them when they are sick."[59] While this view persisted throughout the eighteenth century in Europe, physicians and architects started to question how hospitals could be improved. The Scottish physician John Pringle (1707-1784) in his *Observations on the Diseases of the Army*, originally published in 1752, addressed problems associated with hospital ventilation and sanitation, and the importance of appropriate drainage, latrines, and selection of building site with regards to military field hospitals.[60] These

[54] Cantay, "Darüşşifalar," 355.
[55] Ibid., 356.
[56] Ergin, "Healing by Design?" 12-13.
[57] Sanayi-i Nefise Mektebi (Academy of Fine Arts) was built on the site in 1883. "Sultan Ahmed Darüşşifası," *Hipokratist*, accessed Mar. 2, 2024, https://hipokratist.com/sultan-ahmed-darussifasi/.
[58] Nuran Yıldırım, "Klasik Dönemde İstanbul Darüşşifaları," in *Antik Çağdan 21. Yüzyıla Büyük İstanbul Tarihi vol. 4*, ed. Coşkun Yılmaz (Istanbul: İBB Kültür, 2015), 145.
[59] Risse, *Mending Bodies, Saving Souls*, 233.
[60] John Pringle, *Observations on the Diseases of the Army* (Philadelphia: Fry and Kammerer Printers, 1812), available via the National Library of Medicine Digital Collections, accessed Feb. 12, 2024, https://collections.nlm.nih.gov/catalog/nlm:nlmuid-2567047R-bk. For further information about Pringle,

points would continue to be important factors in healthcare architecture in Europe, North America, and other geographies of the world including the Ottoman Empire until the mid-twentieth century and beyond.

Prototypical pavilion plan hospitals emphasizing ventilation, light, and sanitation started to appear in Britain in the mid-eighteenth century. However their rise to prominence would occur about a century later in the aftermath of the Crimean War with the efforts of Florence Nightingale (1820-1910).[61] In the nineteenth century, early advocates of this typology in Britain, such as Thomas Southwood Smith, John Roberton, and the editor of the British architectural journal *The Builder*, George Godwin based their recommendations on the example of the French surgeon Jacques-René Tenon's (1724-1816) unrealized plan for the reconstruction of the Hôtel Dieu in Paris which was destroyed in a fire in 1772.[62] When the Academy of Sciences in France commissioned Tenon in response to the challenges of the hospital reconstruction project, one of his objectives in surveying various Paris hospitals was to determine the links between pathological phenomena and sanitary conditions in the built environment. In his *Memoirs on Paris Hospitals* (1788), Tenon defined the hospital as a measure of civilization.[63] Almost two centuries later Michel Foucault would scrutinize Tenon's findings. Foucault notes that treatises authored by figures like Tenon and the English philanthropist John Howard were 'fact-finding missions' allegedly with the purpose of 'hospital reform' which tasked authority figures with socio-medical competency, rather than architectural know-how, to produce "functional descriptions of the medico-spatial organizations of the hospital."[64]

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see Sydney Selwyn, "Sir John Pringle: Hospital reformer, moral philosopher and pioneer of antiseptics," *Medical History* 10, no. 3 (Jul. 1966): 266-74.

[61] Adrian Forty argues that the Royal Naval Hospital in Stonehouse, Plymouth built between 1758 and 1765 was the first example of a hospital building designed based on medical ideas. However, this perspective follows a narrow view of medicine and ignores geographies outside of Europe. See Adrian Forty, "The Modern Hospital in England and France: The Social and Medical Uses of Architecture," in *Buildings and Society*, ed. Anthony D. King (London: Routledge, 1980), 66.

[62] Jeremy Taylor, *The Architect and the Pavilion Plan Hospital: Dialogue and Design Creativity in England, 1850-1914* (London and New York: Leicester University Press, 1997), 5; Angela Burke, "Towards a New Hospital Architecture: An Exploration of the Relationship between the Hospital Space and Technology" (PhD diss., University of East London, 2014), 111.

[63] Jacques-René Tenon, *Mémoires sur les hôpitaux de Paris* (Paris: Ph.-D. Pierres, 1788); Louis S. Greenbaum, "'Measure of Civilization': The Hospital Thought of Jacques Tenon on the Eve of the French Revolution," *Bulletin of The History of Medicine* 49, No. 1 (1975): 43–56.

[64] Michel Foucault, "The Incorporation of the Hospital into Modern Technology," (lecture delivered in Spanish in Oct. 1974, trans. Edgar Knowlton Jr., William J. King, and Stuart Elden) in *Space, Knowledge and Power: Foucault and Geography*, eds. Jeremy W. Crampton and Stuart Elden (Ashgate, 2007), 143.

The hospital reforms implemented in Europe after the Crimean War (1853-1856) changed the public image of hospitals dramatically; they went from being 'gateways to death'[65] or 'abodes of sorrow'[66] to pathways for healing.[67] By the end of the nineteenth century, Ottomans abandoned the *darüşşifa* typology and started building hospitals modelled after European pavilion plan structures as in the example of Hamidiye *Etfal* (Children's) Hospital built in 1899.[68] At the same time, Europeans were in the process of importing the pavilion plan along with various forms of healthcare architecture such as quarantine facilities and the Nurses' Home typology to other geographies. For instance, the standardization of quarantine regulations across Europe following the first International Sanitary Conference in Paris in 1851 led to the signing of bilateral agreements between the Ottoman Empire and European powers giving the latter the authority to appoint physicians to inspect quarantine regulations on Ottoman territories.[69] With considerable support of the local elites, the mid-nineteenth century gave birth to the establishment of several hospitals and quarantine centers particularly serving seafarers arriving at Ottoman ports.[70] In reference to nineteenth century quarantine regulations imposed on the Ottoman Empire, John Chircop writes:

> The setting up of lazaretti and quarantine systems in Ottoman and other city ports around the Mediterranean was presented as an act of European 'enlightenment' and of colonial 'benevolence' and considered by the native elites as instruments of 'modernisation' for their countries.[71]

However, as this thesis explains, the establishment of healthcare institutions by European powers in the Ottoman Empire had a more complex history that cannot be defined simply by colonial 'benevolence' since land acquisition and construction processes as well as the licensing of medical practices were heavily regulated by the Ottoman authorities.

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[65] Bill Bynum, "The Art of Medicine: The McKeown Thesis," *The Lancet* 371, no. 9613 (Feb. 2008): 644.
[66] Joseph Wilde, *The Hospital: A Poem, in Three Books* (Stevenson, Matchett, and Stevenson, 1810), 8. See also W. B. Howie, "Consumer Reaction: A Patient's View of Hospital Life in 1809," *British Medical Journal* 3, no. 5879 (Sep. 1973): 534-536; Risse, *Mending Bodies, Saving Souls*, 232.
[67] Uğurgül Tunç, "Lessons from the Crimean War: How hospitals were transformed by Florence Nightingale and others," *Infectious Diseases and Clinical Microbiology* 1, no. 2 (Oct. 2019): 117.
[68] Bolak, "Hastanelerimiz," 68; Yıldırım Yavuz, "Batılılaşma Döneminde Osmanlı Sağlık Kuruluşları," *ODTÜ Mimarlık Fakültesi Dergisi* 8, no. 2 (1988): 129.
[69] Emine Melek Atabek, *1851'de Paris'te toplanan I. Uluslararası Sağlık Konferansı ve Türkler* (Istanbul: Istanbul Üniversitesi Cerrahpaşa Tıp Fakültesi Yayınları, 1974); John Chircop, "Quarantine, Sanitisation, Colonialism and the Construction of the 'Contagious Arab' in the Mediterranean, 1830s–1900," in *Mediterranean Quarantines, 1750-1914: Space, Identity, and Power*, eds. John Chircop and Francisco Javier Martinez (Manchester, UK: Manchester University Press, 2018), 199-231; Tunç, "Lessons from the Crimean War," 112.
[70] Chircop, "Quarantine, Sanitisation, Colonialism," 199-231.
[71] Ibid., 215.

Europeans, and eventually Americans, launched hospital building programs in the Ottoman Empire and elsewhere around the world in the nineteenth and early twentieth centuries with a belief that they were promoting 'enlightenment' in these geographies through benevolent acts. In line with the hospital's acclaimed history as a Christian invention, European and North American medical missionaries of the nineteenth and early twentieth centuries travelled to far corners of the world to establish hospitals. Many of them came to Anatolia during the decline of the Ottoman Empire. While Europeans and Americans were competing to gain prominence on the Ottoman lands in the late nineteenth and early twentieth centuries, as this thesis discusses, Ottoman decisionmakers and later the founders of the Turkish Republic were able to impose rules and regulations which limited the level of agency any foreign power could enjoy in the Ottoman Empire.

1.5 The Nurses' Home as an Architectural Typology

One of the healthcare structures this dissertation explores is a Nurses' Home built between 1949 and 1950. The examples of this typology were rather rare in the Ottoman Empire and later in the Turkish Republic, and its presence in this geography has not been studied in detail.[72] The Nurses' Home was a building typology that was popularized alongside the pavilion plan hospital. Florence Nightingale advocated for better accommodations in nurse training schools to attract the educated upper middle or middle-class women to the nursing profession, to elevate the public image of the nurse, and to ensure efficiency.[73] In other words, the pavilion plan hospital had to provide trained nurses with better conditions than what unreformed hospitals offered to working-class nurses, which Martha Vicinus likens to the living quarters of domestic workers:

> No nurse could expect a room of her own; she had a cot in some corner, in or near her ward or possibly in an attic dormitory. Nurses were expected to purchase and prepare their own food in their wards, along with the special diets of the patients. Bad as reformers claimed conditions to be, they were no worse than those of a maid of all work, who toiled similarly long hours and slept on a pallet in the kitchen.[74]

According to architectural historian Karen Kingsley, Nightingale's fundamental principles of nursing shaped the architecture of the Nurses' Home. These included the appointment of 'one female head' to lead, discipline, and protect the other nurses and

[72] A forthcoming publication by Uğurgül Tunç and Lucienne Thys-Şenocak also explores this subject. See Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[73] Karen Kingsley, "The Architecture of Nursing," in *Images of Nurses: Perspectives from History, Art, and Literature*, ed. Anne Hudson Jones (Philadelphia: University of Pennsylvania Press, 1989), 65.
[74] Martha Vicinus, *Independent Women: Work & Community for Single Women, 1850-1920* (Chicago and London: The University of Chicago Press, 1985), 86.

probationers, which found its architectural expression in the separate quarters for the matron of the house.[75] Second, aspiring nurses received training in both theory and practice, thus as the typology evolved, the Nurses' Home started featuring various learning spaces such as classrooms, lecture halls, demonstration rooms, and laboratories.[76]

The first purpose-built Nightingale-style Nurses' Home in London (known as the Nightingale Training School and Home for Nurses), completed in 1871 to provide students with thirty-eight single rooms for enhanced privacy and a lecture room in its basement for theoretical teaching, was according to Kingsley proof that the 'architectural precedent' of the nurses' residences or the 'home' was the convent: its dining hall resembled the refectory, the sitting room resembled the parlors of convents, and the sleeping quarters were reminiscent of a dormitory while the proximity but physical separation of the matron was very much like the position of the abbess in the convent, there was also a small space set aside for intellectual endeavors as was the case in monastic cloisters.[77] In many ways, Nightingale nurses also had a lot in common with Protestant missionaries trying to disseminate their faith by inviting others to join them in the profession. They studied not only to become nurses, but also to train future probationers who would then establish branches of Nightingale schools in far corners of the world as in the example of Lucy Osburn (1836-1891) who journeyed to Australia in 1867 with this goal.[78]

Significant publications on hospital management and construction written in the decades following the establishment of the first Nightingale training school at St. Thomas's Hospital in London in 1860, such as the 1883 volume *Hospital Construction and Management* by hospital architect Henry Saxon Snell (1831-1904) and British physician Frederic John Mouat (1816-1897) emphasized the importance of nursing in the

[75] Kingsley, "Architecture of Nursing," 65.
[76] Ibid., 70; Annmarie Adams, "Rooms of their Own: The Nurses' Residences at Montreal's Royal Victoria Hospital," *Material Culture Review* 40, no. 1 (Jun. 1994): 31; Annmarie Adams, *Medicine by Design: The Architect and the Modern Hospital, 1893-1943* (Minneapolis and London: University of Minnesota Press, 2008), 75; Julie Willis, Philip Goad, and Cameron Logan, *Architecture and the Modern Hospital: Nosokomeion to Hygeia* (London and New York: Routledge, 2019), 81.
[77] Kingsley, "Architecture of Nursing," 65.
[78] Lucy Ridgely Seymer, "One Hundred Years Ago…," *The American Journal of Nursing* 60, no. 5 (May 1960): 660. The first known example of a nurse training program established by an alumna of St. Thomas's was at the Brownlow Hill Infirmary in Liverpool in 1865.

modern hospital.[79] The changing attitude of the medical establishment and the willingness to grant some autonomy to the nurse was apparent in the twentieth-century publications on medicine, healthcare, and hospital architecture. In 1909, Scottish physician Donald James MacKintosh (1862-1947) emphasized that a well-equipped Nurses' Home was necessary for any hospital to attract 'a high type of woman.'[80] The Nurses' Home, according to MacKintosh, had to feature amenities such as public rooms for relaxation, entertainment, and receiving guests in addition to a lecture room, a library or writing room, an 'attractive' dining room with "small tables suitable for not more than six and probably only for four" adjoining a service pantry connected to the kitchen through a food elevator, a well-ventilated room for the service staff, a box room for trunks, a sewing or linen room, simply furnished single occupancy bedrooms with ventilated closets and a radiator, a bath for every six or eight bedrooms, a wash basin for every four bedrooms, and a water closet for every ten bedrooms, and a sick room to accommodate several beds with its own kitchen and lavatory for the times when nurses themselves got sick and needed to isolate.[81]

Leading hospital architects of the early twentieth century such as Edward Fletcher Stevens (1860-1946) regarded the Nurses' Home as a requirement for any major hospital. Stevens wrote, both in the first and two revised editions of his seminal work *The American Hospital of the Twentieth Century* in 1918, 1921, and 1928 respectively, about what he referred to as the 'nurses' residences.' He emphasized that these buildings had to be near the hospital building but detached from it to ensure that the sounds of nurses' entertainment would not disturb the patients, and to facilitate the nurse's wellbeing.[82] Stevens advocated for single occupancy bedrooms and argued that the bedrooms had to be small enough to accommodate only a single bed, closet, dresser, and study desk to ensure that there would not be any room for double occupancy in the future as this would

[79] Although these authors regarded nursing as essential, their tone evidenced that nurses were often viewed as inferior in the world of medicine dominated by male physicians. See for instance, Frederic J. Mouat and Henry Saxon Snell, *Hospital Construction and Management* (London: J. & A. Churchill & Co., 1883), 13.
[80] Donald James MacKintosh, *Construction, Equipment and Management of a General Hospital* (Edinburgh and Glasgow: William Hodge & Company, 1909), 127.
[81] Ibid., 127-34.
[82] Edward Fletcher Stevens, *The American Hospital of the Twentieth Century*, second edition (New York: The Architectural Record Company, 1921), 276. Also mentioned in Adams, *Medicine by Design*, 79. The Goldmark Report of 1923 also highlighted the need for the detached Nurses' Home to be a structure detached but close to the hospital building. See Josephine Goldmark et al., *Nursing and Nursing Education in the United States: Report of the Committee for the Study of Nursing Education, and Report of a Survey by Josephine Goldmark* (New York: The Macmillan Company, 1923), 444.

clash with the idea of privacy.[83] In many cases, however, nursing schools had to offer double occupancy in rooms designed to accommodate a single nurse, which they justified in their promotional material by emphasizing the benefits of having roommates.[84]

Stevens argued that the building's design was to function as a recruitment tool and attract the right kind of student:

> The more attractive and homelike this building can be made and the more alluring it can be made to the young woman who is taking up nursing, the better will be the class of women who will come to it and, in the end, the better will be the care that the patient will receive.[85]

He emphasized this point further in a 1922 article published in *The Modern Hospital*:

> Coming from the care of patients, the nurse upon entering the home should step into a different atmosphere. There should be nothing to remind her of sickness. The colors selected for the walls and ceilings of the rooms should be different from those of the hospital. While plain details of finish make the care of the home less irksome, there should be enough detail to give interest; the entrance, at least should possess some architectural merit.[86]

The domestic feeling and family atmosphere that the architecture of the Nurses' Home hoped to replicate was evident in its nomenclature as well. For instance, the section of the building reserved for the matron's accommodations was often marked as 'House Mother' on architectural plans, which was also the case for Sedad Hakkı Eldem's plans for the ABSN Nurses' Home prepared in the English language.[87]

Among the amenities a Nurses' Home needed to offer its residents Stevens listed a homelike and refined living room, several reception rooms where the nurses could accept guests and meet with friends, a sitting or study room on each floor, and a kitchen

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[83] Stevens, *American Hospital* (1921), 280. The 1923 *Report for the Study of Nursing Education in the United States*, also known as the Goldmark Report echoed Stevens' views and confirmed that single occupancy bedrooms were ideal even though none of the twenty-two training schools studied for the Report was able to offer single rooms to all its students. See Goldmark et al., *Nursing and Nursing Education*, 443. See also Kingsley, "Architecture of Nursing," 75-76. In 1909, MacKintosh recommended the ideal size of a nurse's room as 10x12 feet. See MacKintosh, *Construction, Equipment & Management*, 127. In 1910 nurse Agnes Ward, the Superintendent of the Metropolitan Training School in Blackwell's Island, New York, wrote an article for *The American Journal of Nursing* prescribing a room of 9x14.5 feet that would not permit a second bed. See Agnes Ward, "Suggestions for what is Required in Building a Nurses' Home," *The American Journal of Nursing* 10, no. 6 (Mar. 1910): 400.

[84] For instance, Sister M. Laurentine (n.d.) of the St. Francis Hospital in Pittsburgh, Pennsylvania wrote in 1930 "many girls like a roommate and are happier than if they room alone." Sister M. Laurentine, "A Nurses' Home That Promises to Be a Home in Its Truest Sense," *The Modern Hospital* 34, no. 3 (Mar. 1930): 93.

[85] Stevens, *American Hospital* (1921), 276.

[86] Edward Fletcher Stevens, "The Nurses' Residence," *The Modern Hospital* 18, no. 4 (Jan-Jun. 1922): 322-23.

[87] ABHO Collection, Suna Kıraç Library, Koç University; Sedad Hakkı Eldem, "Amiral Bristol Hastahanesi Paviyonu," *Arkitekt* 243-244 (Mar.-Apr. 1952): 52. See also the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."

for the preparation of refreshments for evening parties and gatherings.[88] The building also had to feature a well-equipped classroom for demonstration to facilitate nurses' training.[89]

As the significance of the nurses' labor became more apparent, studies focusing on how to maximize their time and energy started to appear. This trend was in line with the management theories of the early twentieth century which aimed to increase industrial labor efficiency particularly in factories, and the principles of Taylorism popularized after Frederick Winslow Taylor's (1856-1915) influential 1911 publication *The Principles of Scientific Management*.[90] Taylorist approaches treated hospital labor not as work related to healthcare provision, but as a form of manual labor much like factory work.[91] As Taylorism began to fall out of grace in the 1930s during the Great Depression, it famously became the subject of satirical comedy in Charlie Chaplin's (1889-1977) 1936 movie *Modern Times*.[92] However, as David Theodore explains the influence of scientific management theories and attempts to maximize nurses' labor had already made its way into the architecture of the hospital by that time and labor efficiency studies objectifying nurses continued to reappear in later decades.[93]

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[88] Stevens, *American Hospital* (1921), 276-92.
[89] Ibid., 280.
[90] Frederick Winslow Taylor, *The Principles of Scientific Management* (New York and London: Harper & Brothers, 1911). David Theodore writes extensively about the Taylorist approaches to hospital design which focused on maximizing nurses' labor. See David Theodore, "'The Fattest Possible Nurse': Architecture, Computers, and Post-war Nursing," in *Daily Life in Hospital: Theory and Practice from Medieval to the Modern*, eds. Laurinda Abreu and Sally Sheard (Bern: Peter Lang AG, 2013), 273-98.
[91] For instance, in 1913, W. Gilman Thompson (1856-1927), a physician who attached pedometers to nurses, published one of the earlies examples of time-motion studies which aimed to quantify nurses' efficiency based on their bodily movements and to find out how to optimize the output of their labor. See, W. Gilman Thompson, "Efficiency in Nursing," *JAMA* 61, no. 24 (Dec. 1913): 2146-9. Similar studies followed and among the researchers conducting them were nurses as well, such as Bea W. Graves who in 1916 published "Saving the Steps of Pupil Nurses" in The American Journal of Nursing. Bea W. Graves, "Saving the Steps of Pupil Nurses," *The American Journal of Nursing* 17, no. 1, (Oct. 1916): 33-6.
[92] Charlie Chaplin, dir., *Modern Times* (Los Angeles, CA: Charlie Chaplin Productions, 1936), motion picture.
[93] Theodore, "'The Fattest Possible Nurse'," 273-98. *Studies in the Function and Design of Hospitals*, initiated in 1949 by the Nuffield Provincial Hospitals Trust (NPHT) in the U.K., and published in 1955, included several time-motion studies that collected data on nurses' movements. Nuffield Provincial Hospitals Trust, *Studies in the Function and Design of Hospitals* (Oxford: Oxford University Press, 1955). A similar study conducted in the U.S. was the Yale-New Haven Hospital Traffic Index of 1958, which aimed to better understand how hospital architecture could increase nurses' efficiency. See J. D. Thompson and G. Goldin, *The Hospital: A Social and Architectural History* (New Haven and London: Yale University Press, 1975), 282. On scientific management theories' influence on hospital design see Edward T. Morman, ed., *Efficiency, scientific management, and hospital standardization: an anthology of sources* (New York: Garland, 1989). Also to note, physicians such as Charles F. Wilinsky (n.d.) argued that "proper hospital planning" could conserve the nurses' energy and increase efficiency. Charles F. Wilinksy, "Conserving Nurses' Energy," *Modern Hospital* 54, no. 6 (Jun. 1940): 72-74; Willis, Goad, and Logan, *Architecture and the Modern Hospital*, 79.

Despite publications and studies[94] recommending the establishment of separate structures outside the hospital building for nurses, many major hospitals in the twentieth century continued to offer accommodations within the hospital buildings either temporarily, while planning to raise additional funds and eventually build a Nurses' Home, or permanently in hospital buildings that had designated areas that would meet not only the accommodation needs and educational requirements of the nurses but also provide some spaces for recreation and relaxation. The British Seamen's Hospital in Istanbul, which offered sleeping quarters for nurses on its third floor and had some additional areas on the ground floor designated for the nurses' use, was an example of the latter as I discuss in Chapter 2.

Nursing schools had to compete with other professional schools and university campuses as women gained access to a wider array of career options in the twentieth century.[95] Provision of amenities such as athletic facilities ranging from tennis courts to bowling alleys and other recreational spaces such as roof gardens, sun rooms, tea rooms, stages for theatrical performances, and lounges increasingly gained importance for nursing schools in the United States in the 1920s as availability of nurses became vital for hospitals.[96] By the 1930s, particularly in the United States, the architecture of the Nurses' Home started to resemble that of hotels which usually adopted U, H, an E-shaped plans to ensure sunlight exposure to all rooms and to incorporate features such as interior courtyards.[97] As I explain in Chapter 3, to compete with other nursing schools in Turkey, the ABSN Nurses' Home in Istanbul designed by Sedad Hakkı Eldem also had to offer nursing students many amenities and luxuries.

By the mid-1940s, the nursing profession in Turkey rose to prominence and the term '*hemşire*,' meaning 'sister' evoking the title '*Schwester*' that German nurses practicing in Turkey used, began to replace '*hastabakıcı*' (caretaker of the sick) to signify

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[94] A major study on the subject in Canada was George Weir's influential 1932 publication titled *Survey of Nursing Education in Canada* which also recommended the separation nurses' residences from hospitals to make room for "privacy, rest, quiet, and retirement for study and for cultural recreation." For more information, see George Moir Weir, *Survey of Nursing Education in Canada* (Toronto: University of Toronto Press, 1932). Weir's work was also cited in John Murray Gibbon and Mary S. Mathewson, *Three Centuries of Canadian Nursing* (Toronto: MacMillan Company of Canada,1947), 376; Adams, *Medicine by Design*, 78.

[95] Kingsley, "Architecture of Nursing," 76-78.

[96] Ibid. See also the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."

[97] Loretta Robinson, "Nurses' Home of the Philadelphia General Hospital," *The American Journal of Nursing* 20, no. 3 (Dec. 1919): 198; Kingsley, "Architecture of Nursing," 82.

the nurse.[98] This government-recognized shift was apparent in the classification of healthcare workers in parliamentary records of December 26, 1945: physicians and pharmacists were in the top tier, *hemşire*s (nurses) were in the second or intermediary tier, and the *hastabakıcı*s, a term now signifying orderlies, were the low-level laborers in the third tier.[99] The Turkish Grand National Assembly (*Türkiye Büyük Millet Meclisi*, TBMM) budget meetings of December 26, 1945 were revealing both in terms of the admiration for German nursing practices; Mebrure Aksoley (1902-1984), a Member of the TBMM representing Ankara, spoke of the time she spent with women's nursing units in Germany in 1939,[100] and the regard there for professional nursing as a 'woman's profession.'[101] The need to establish new nursing schools and to provide better conditions for nurses in order to attract young women to the profession were among points of discussion at the TBMM. For instance, Esat Oktay (1885-1972), a physician and Member of the TBMM representing the Kars province, posed the question "Can the nurse marry or not?" to his colleagues as he argued that working conditions of nurses required them to be on the hospital ground six days a week and that this would make the profession rather unattractive for young women since it would be difficult for them to have a family life and raise children at the same time.[102] As I discuss in Chapter 3, the ABSN Nurses' Home was designed to offer comfort and convenience to overworked nurses.

The architecture of the Nurses' Home evolved with the changing times, and recreational and social facilities became more pronounced in these buildings in the 1950s and they started offering a deinstitutionalized environment in a manner similar to women's clubs of the time.[103] Furthermore, the nursing profession was opening to men

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[98] For instance, in his memoirs Derviş Manizade of Cerrahpaşa Hospital and Faculty of Medicine referred to nurses in German as "Schwester." See Derviş Manizade, *Cerrahpaşa Hastanesi Tarihi ve Anılarım* (Istanbul: Istanbul University, 1997), 20, 24-25.

[99] *TBMM Tutanak Dergisi* (Journal of the registers of the Turkish Parliament), 19th gathering, 26.12.1945, Session 2, Period: VII, vol. 20, Meeting: 3, 462. See also Gülhan Seyhun, "İkinci Dünya Savaşı Döneminde (1939-1945) Türkiye'de Hemşirelik Mesleğinin Gelişiminin Meclis Bütçe Görüşmeleri Sırasında Milletvekillerinin Görüşleri Üzerinden Değerlendirilmesi," *Türkiye Klinikleri Tıp Etiği-Hukuku Tarihi Dergisi* 26, no. 1 (April 2018): 40.

[100] *TBMM Tutanak Dergisi* (Journal of the registers of the Turkish Parliament), 19th gathering, 26.12.1945, Session 2, Period: VII, vol. 20, Meeting: 3, 445.

[101] As per the report prepared by Margaret Varley of the Rockefeller Foundation in 1948, there were 350 male nurses working in Turkey at the time as opposed to 277 professionally trained nurses, 79 assistant nurses, and 1,292 midwives all of whom were women. The male nurses mentioned in the report would most likely be in the *hastabakıcı* (caretaker or orderly) category. RF records, Staff - International - Varley, Margaret L., 1948; RF records, general correspondence, RG 2, 1947-1951, General Correspondence, Subgrp 1948; International, Series 1948/100. See also Yıldırım, *Savaşlardan Modern Hastanelere*, 294.

[102] *TBMM Tutanak Dergisi* (Journal of the registers of the Turkish Parliament), 19th gathering, 26.12.1945, Session 2, Period: VII, vol. 20, Meeting: 3, p. 463. See also Seyhun, "İkinci Dünya Savaşı Döneminde Türkiye'de Hemşirelik,"40.

[103] Kingsley, "Architecture of Nursing," 84.

in the mid-1950s in the United States, which would eventually problematize the Nurses' Home as an architectural typology providing accommodations only to women.[104] By the 1960s, nursing schools were merging with universities in the United States and their architecture was becoming indistinguishable from other buildings on campuses.[105] In Turkey, Ege University in Izmir started offering the first undergraduate-level degree in nursing in 1955, and the ABSN obtained a vocational high school status offering a four-year degree program in 1957 with the approval of the Ministry of Education.[106] The 1960s witnessed the launch of several undergraduate degree programs in nursing in Turkey such as the School of Nursing of the newly-established Hacettepe University in Ankara, which received support from the Rockefeller Foundation, and the Florence Nightingale School of Nursing of Istanbul University.[107] Vocational schools offering degrees in nursing co-existed alongside the university programs in Turkey until 1996 when the Turkish government started requiring anyone wishing to become a nurse to acquire a minimum of an undergraduate level degree in nursing either from a university or a specialized higher education institute (*Yüksek Okul*).[108]

As I explain in Chapter 3, the ABSN Nurses' Home was first modified to meet the evolving needs of the nursing profession in Turkey, and it was eventually demolished in 1999 along with W. Stuart Thompson's hospital building to make room for a large hospital complex. The CHI complex in Ankara was shut down in 2011 and the buildings designed by Theodor Jost and Robert Oerley remain abandoned to this day in 2024 despite plans to repurpose at least one of the structures into a museum.[109] Of the four case studies analyzed in this thesis, the British Seamen's Hospital building designed by Charles Holden and H. Percy Adams is the only one which remains in use and continues to serve

[104] While male nurses were common in many other parts of the world such as India, in the U.S. the 1955 revision of the Army-Navy Nurses Act of 1947 allowed men into military nursing units. In the U.K., The Nurses' Registration Law of 1919 mandated a supplementary register for male nurses. For more information, see "The Nurses Registration Act," accessed Jan. 29, 2024, https://navigator.health.org.uk/theme/nurses-registration-act.

[105] Kingsley, "The Architecture of Nursing," 85.

[106] The ABSN is today the School of Nursing of Koç University. For more information, see "Tarihçemiz," Koç Üniversitesi Hemşirelik Fakültesi, accessed Jan. 29, 2024, https://nursing.ku.edu.tr/hakkimizda/tarihcemiz/.

[107] RF records, projects, SG 1.2, series 805, box 3, folders 24, 25, 26, 27, 28; RF records, Photographs, series 100-1000, Box 167, Folder 3237.

[108] For more information, see Şule Ergöl, "Türkiye'de Yükseköğretimde Hemşirelik Eğitimi," *Yükseköğretim ve Bilim Dergisi* 1, no. 3 (Dec. 2011): 152-5; Yıldırım, *Savaşlardan Modern Hastanelere*, 314-20.

[109] Mehmet Emin Yılmaz and Hasan Fevzi Çügen, "Hıfzıssıhha Enstitüsü Kimyahane ve Bakteriyoloji Binasından Sağlık Müzesi ve Kütüphanesi'ne," *Mimarlık* 361 (Sep.-Oct. 2011): 32-36.

as a hospital. Each one of the buildings studied in this thesis were built with the promise to facilitate the medical trends and scientific advancements of the times in which they were built while serving the political aspirations of their patrons. As this thesis explores the social, political, and medical meanings of the built environment of healthcare, it also questions to what degree the architecture of these buildings was shaped by contemporary politics, economics, and diplomacy.

Chapter 2

EMPIRES, ARCHITECTS, HOSPITALS

2.1 Introduction

In the nineteenth century the Ottoman Empire's status as a dominant world power was diminishing, while the British Empire's power peaked with its colonies around the world. Although the British never officially ruled over the Ottomans, much like other European powers, they enjoyed a great deal of authority over Ottoman lands. This chapter begins with historical background information on British-Ottoman relations, then offers a survey of Istanbul's architectural landscape in the nineteenth and early twentieth centuries and introduces the Galata district, which became the site where British presence was most visible in the Ottoman capital. The section titled "Health of the British Sailors" will question why Britain invested in the health of sailors and explore what kind of hospitals they commissioned in Britain and elsewhere in the world to take care of them when needed and offer a sociopolitical history of how the British Seamen's Hospital in Istanbul came into existence. The subsequent section will provide a survey of British architectural styles in the nineteenth and early twentieth centuries and discuss which architectural trends might have influenced the design of the British Seamen's Hospital in Istanbul before introducing the two architects, Charles Holden (1875-1960) and H. Percy Adams (1865-1930), who were involved in the design and planning of the British Seamen's Hospital in Istanbul. It will then analyze the British Seamen's Hospital building in Istanbul built between 1903 and 1904.

Academic literature about the British Seamen's Hospital in Istanbul is very limited. Nursu Büyükhelvacıoğlu's 1994 Master of Architecture thesis, "Beyoğlu Hastanesi'nin Restorasyon Projesi" (The Restoration Project of the Beyoğlu Hospital), focuses on the restoration of the building.[110] Eitan Karol's 2007 book *Charles Holden,* based on his doctoral dissertation, mentions the British Seamen's Hospital among Holden's early works,[111] and Nuran Yıldırım's 2008 publication A Tour *of the History of Medicine in Istanbul* features a brief section dedicated to the British Seamen's Hospital.[112] Art historian Elain Harwood talks about this hospital building in her lecture

[110] Büyükhelvacıoğlu, "Beyoğlu Hastanesi'nin Restorasyon Projesi"
[111] Karol, *Charles Holden*.
[112] Yıldırım, *Tour of the History of Medicine in Istanbul*, 80-83.

dated March 30, 2023 for the British Architectural Library titled "Charles Holden, an Architect of Many Styles and Subtle Forms."[113] The building also appears in popular publications such as *Hürriyet Magazin*[114] and *Cornucopia*.[115] The goal of this chapter is to offer a multifaceted understanding of the British Seamen's Hospital in Istanbul and to contextualize its physical and symbolic existence using the building itself along with archival documents and drawings found at the Royal Institute of British Architects, the National Archives of the United Kingdom, and the Ottoman Archives. Architectural journals such as *The Builder* and *The Building News*, and individual memoirs have also served as important sources of information in this research. This chapter discusses patronage, choice of location and financing of the British Seamen's Hospital in the Galata district of Istanbul, its function, iconographic meaning, and architectural style.

2.2 Historical Background: A Tale of Two Empires

2.2.1 British-Ottoman Relations in the Nineteenth Century and the Eastern Question

In 1853, it was rumored that Russian Tzar Nicholas I (r. 1825-1855) referred to the Ottoman Empire as 'the sick man of Europe,'[116] and this epithet was represented in nineteenth-century caricatures depicting the Ottoman sultan in his sickbed with Britain and France by his side trying to keep him alive.[117] The decline of the Ottoman Empire by the nineteenth century created a power vacuum that the major empires of Europe were eager to fill, which led to a competition involving Britain, France, Russia, and the German-speaking Prussia and Austria. The so-called 'Eastern question' was among the nineteenth century's most significant political and territorial conundrums to shape Europe, and arguably even the world, for years to come. According to some historians, it was this atmosphere of competition among European countries for control over the

[113] Elain Harwood, "Charles Holden, an Architect of Many Styles and Subtle Forms," lecture for the British Architectural Library Trust, Mar. 30, 2023, accessed Feb. 12, 2024, https://www.youtube.com/watch?v=bxbWw5HwT4o.
[114] Osman Balcıgil, "Şimdiki Beyoğlu Hastanesi'nin asıl adı İngiliz Bahriye Hastanesi'dir. Kuledibi'ne Saplanmış Centilmen Neşteri," *Hürriyet Magazin* 7, 12, Feb. 12, 1989.
[115] Malika Browne, "Seafarers' Sanctuary," *Cornucopia* 51, Summer 2014, 64-5.
[116] Guy Sorman, "Turkey: The Sick Man of Europe," *City Journal*, June 13, 2023, accessed Feb. 11, 2024, https://www.city-journal.org/article/turkey-the-sick-man-of-europe. Nicholas I is believed to have described the Ottoman Empire as "the sick man of Europe" in 1853.
[117] See for example "Décomposition d'un Empire," *Le Grelot*, Feb. 21, 1897, 1.

Ottoman Empire that kept the empire functioning and viable for an additional century.[118] On the other hand, some sociologists argue that the same environment created a multicentric world order that strengthened European imperialism and expanded colonialism around the world.[119] As Erik Jan Zürcher writes the 'inter-imperialist struggle' enabled the Ottomans to play the European powers against each other in the nineteenth century[120] and as a result, this period witnessed a fluidity of alliances and constantly shifting power dynamics in the region.[121] Although a multifaceted analysis of the geopolitics of this period is beyond the scope of this thesis, a thorough understanding of the British foreign policy of the time with regards to its territorial interests in the Balkans and the Near East is necessary to contextualize British building activity in the Ottoman Empire throughout the nineteenth century and the early twentieth century.

Trade relations between the Ottoman and British empires commenced in the sixteenth century with British trade in the northern Mediterranean as evidenced by permit requests to engage in trade on Ottoman shores submitted to the Ottoman authorities by British merchants.[122] Britain had initially obtained capitulations in the Ottoman Empire in 1580 and founded the 'Turkey Company' on September 11, 1581 under the patronage

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[118] Frank Edgar Bailey, *British Policy and the Turkish Reform Movement: A Study in Anglo-Turkish Relations, 1826-1853* (Cambridge, MA: Harvard University Press, 1942), 115; Erik Jan Zürcher, *Turkey: A Modern History* (London and New York: I.B. Tauris, 1993), 81.

[119] Immanuel Wallerstein, *The Modern World-System II: Mercantilism and the Consolidation of the European World-Economy, 1600–1750* (Boston: Academic Press, 1980); Immanuel Wallerstein, *The Modern World-System III: The Second Era of Great Expansion of the Capitalist World Economy, 1730–1840s* (Boston: Academic Press, 1989); Terry Boswell, "Colonial empires and the capitalist world-economy: A time series analysis of colonization, 1640–1960," *American Sociological Review* 54, no. 2 (1989): 180–196; Terry Boswell, "Hegemony and bifurcation points in world history," *Journal of World-Systems Research* 1, no. 15 (1995): 1–63; Julian Go, "Capital, Containment, and Competition: The Dynamics of British Imperialism, 1730–1939," *Social Science History* 38, no. 1–2 (Spring/Summer 2014): 43–69.

[120] Zürcher, *Turkey*, 81.

[121] For instance, The Ottoman Empire formed an alliance with its long-standing enemy Russia to suppress the advance of Mehmet Ali Paşa, the governor of Egypt whose autonomy consistently grew in the region, by signing the Treaty of *Hünkar İskelesi* in 1833, which worried Britain. Stanford J. Shaw and Ezel Kural Shaw, *History of the Ottoman Empire vol. II* (Cambridge: Cambridge University Press, 1972), 32-35. Earlier in the century, the Concert of Europe which began with the Congress of Vienna (1814-1815) in hopes to promote diplomacy over war and to maintain the balance of power in Europe, did not prevent Britain's conflicts with France, Russia, and later on with other rising powers such as Prussia. These European powers aligned or fought against one and another throughout the century as their interests demanded. Stanislas Jeannesson, "The Concert of Europe," *Digital Encyclopedia of European History*, 2020, accessed Oct. 20, 2023, https://ehne.fr/en/encyclopedia/themes/europe-europeans-and-world/organizing-international-system/concert-europe.

[122] Anthony Jenkinson was one of the first British merchants to communicate with the Ottoman authorities in the mid-sixteenth century. Edward Osborne and Richard Staper were among the first British business leaders to send representatives to Istanbul in the 1570s. For more information, see Mübahat S. Kütükoğlu, *Balta Limanı'na Giden Yol: Osmanlı-İngiliz İktisâdi Münâsebetleri (1580-1850)* (Ankara: Türk Tarih Kurumu, 2022).

of twelve British merchants.[123] After merging with the Venice Company in 1592, this company adopted the name 'Levant Company.' [124] The Ottoman Empire granted further concessions to Britain in 1601 and 1675.[125] The Baltalimanı Trade Treaty of 1838 between Britain and the Ottoman Empire during the reign of Mahmud II (r. 1808-1839) was a turning point in the relationship between the two empires which led to an increase in the number of British merchant ships frequenting Istanbul in the 1840s.[126] By the mid-nineteenth century,[127] the low customs duties turned the Ottoman Empire into an ideal source of cheap raw materials and food as well as a market for British products.[128] Prior to the signing of the Baltalimanı Trade Treaty in 1838, the presence of British architecture in the Ottoman capital of Istanbul was limited to projects such as the new Ottoman arsenal on the banks of the Golden Horn, designed in 1834 by the British architect William Barlow, from the firm of Maudsley and Field Co.[129] By the end of the century, Britain's architectural presence in the Ottoman capital would increase significantly.

The relations between the Ottoman Empire and Britain reached new heights during the former's period of reorganization known as *Tanzimat* (1839-1876) under the reigns of Abdülmecid I (r. 1839-1861) and his successor Abdülaziz (r. 1861-1876), with the latter becoming the first Ottoman sultan to visit London in the summer of 1867. Prior to the Crimean War (1853-1856), approximately 2,000 British sailors visited Istanbul

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[123] Önder Kocatürk, *Osmanlı-İngiliz İlişkilerinin Dönüm Noktası (1911-1914): İlişkilerin Bozulması ve İlk Krizler (cilt 1)* (Istanbul: Boğaziçi Yayınları, 2011), 13; Mustafa Kaan Sağ, "Osmanlı Başkenti İstanbul'da Britanya Kökenli Misyoner Okulları ve İskoç bir Yapı Ustası: Nicholson Burness" (PhD diss., Istanbul Technical University, 2017), 10.

[124] Kocatürk, *Osmanlı-İngiliz İlişkileri*, 13; Sağ, "Osmanlı Başkenti İstanbul'da," 10.

[125] M. Epstein, *The Early History of the Levant Company* (London: George Routledge & Sons Limited, 1908), 40; Akdes Nimet Kurat, *Türk-İngiliz Münasebetlerinin Başlangıcı ve Gelişmesi (1553-1610)* (Ankara: Türk Tarih Kurumu, 1953), 90; Mübahat S. Kütükoğlu, *Osmanlı-İngiliz Münasebetleri I (1580-1838)* (Ankara: Türk Kültürünü Araştırma Enstitüsü, 1974): 34; Halil Esin Avcı, "Türk-İngiliz İlişkilerinde Ermeni Faktörü" (PhD diss., Istanbul University, 2010), 5; Sağ, "Osmanlı Başkenti İstanbul'da," 10.

[126] Mark Crinson, *Empire Building: Orientalism and Victorian Architecture* (London and New York: Routledge, 1993), 126.

[127] Earlier in the nineteenth century, the Ottoman Empire under the rule of Selim III (r. 1789-1807) aligned with the British against the Napoleonic France upon the French invasion of the Ottoman-ruled Egypt in 1798. Kamil Çolak, "Mısır'ın Fransızlar Tarafından İşgali ve Tahliyesi (1798-1801)," *SAÜ Fen Edebiyat Dergisi* 2 (2008): 142-143. However, after the Russian invasion of the Ottoman territories in Wallachia and Moldovia in 1806, the British navy sailed to the Dardanelles in 1807 and engaged in an unsuccessful attempt to attack Istanbul. The National Archives (U.K.), ADM 51/1642. For more information on the Anglo-Turkish War of 1807-1809, see John Holland Rose, *The Indecisiveness of Modern War and Other Essays* (London: George Bell and Sons, 1927), 157-179; Fatih Yeşil, "İstanbul Önlerinde Bir İngiliz Filosu: Uluslararası Bir Krizin Siyasi ve Askerî Anatomisi," in *Nizâm-ı Kadîm'den Nizâm-ı Cedîd'e III. Selim ve Dönemi*, ed. S. Kenan (Istanbul: ISAM, 2010), 391-493.

[128] Bailey, *British Policy*; Shaw and Shaw, *History of the Ottoman Empire*, 134; Sadiye Sena Dinçyürek, "A "Compassionate" Episode in Anglo-Ottoman History: British Relief to '93 Refugees (1877-78)" (MA thesis, Bilkent University, 2010), 8.

[129] *Architectural Magazine*, 1, 1834, 208; Crinson, *Empire Building*, 126.

annually.[130] The rapprochement between the two empires peaked with the outbreak of the Crimean War that united Britain, France, and the Ottoman Empire against a common enemy: Russia. Works of art of this time, such as Louis Émile Pinel de Grandchamp's 1855 painting *Triple Alliance* which was presented to Sultan Abdülmecid I, eloquently portrayed the alliance between the three nations.[131]

2.2.2 The Crimean War

The Crimean War was one of the defining moments of the nineteenth century's so-called Eastern question that materialized the competition between Russia and the European powers of Britain and France to dominate the Near East during the decline of the Ottoman Empire.[132] The Russian threat against British interests in the region became more evident in 1853 with the Russian occupation of the Danube Principalities under Ottoman rule.

Russia's *casus belli* became the Catholic, and therefore French, threat to Orthodox privileges in Palestine[133] combined with accusations that Muslim Ottoman armies from Asia were mistreating the Christians in Ottoman Europe, which the French and English language press strongly refuted. For instance, an article in the *New York Times* began with the following statement:

> We will now examine the accusation that the provinces of Turkey are again invaded by barbarians from her Asiatic provinces. Some newspapers have asserted this. Why? In order to discredit the holy cause of Turkey, and alarm the Christians of both East and West on the subject of their dearest interests, and by this shameful means succeed in withdrawing them from this great cause, if not in making them its enemies.

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[130] *The Building News,* Apr. 3, 1857, 332; Crinson, *Empire Building*, 256.

[131] Orhan Aral, "Footprints and memories of Crimean War in Istanbul, Paris, London and Turin," Nov. 25, 2018, accessed Nov. 6, 2023, https://thecrimeanwar.com/yazi/the-painting-of-louis-emile-pinel-de-grandchamp.

[132] Shaw and Shaw, *History of the Ottoman Empire*, 134; Dinçyürek, ""Compassionate" Episode in Anglo-Ottoman History," 8. For more information about the Crimean War see: Ali Fuat Türkgeldi, *Mesail-i Mühimme-i Siyasiyye V.I* (Ankara: Türk Tarih Kurumu Basımevi, 1987); Orlando Figes, *Crimea: The Last Crusade* (London: Allen Hale, 2010); Clive Ponting, *The Crimean War: The Truth Behind the Myth* (New York: Random House, 2011); Orlando Figes, *The Crimean War* (New York: Metropolitan Books, 2014); Canan Badem, *Kırım Savaşı ve Osmanlılar* (Istanbul: Türkiye İş Bankası Kültür Yayınları, 2017). See also S.F. Kissin, *War and the Marxists: Socialist Theory and Practice in Capitalist Wars, vol. I (1848-1919)* (Routledge, 2019).

[133] Russia regarded itself as the protector of the Orthodox Christian subjects of the Ottoman Empire and claimed this right by virtue with the Treaty of Küçük Kaynarca in 1774; yet the Ottoman Empire had recognized France as the protector of the Christian minorities since 1535. Donald C. Blaisdell, *European Financial Control in the Ottoman Empire* (New York: Columbia University Press, 1929), 24-25. Russia often provoked or supported uprisings in Orthodox Christian majority territories of the Ottoman dominion and the revolutions of 1848 presented an opportune moment for Russia. Convinced that neither France nor Britain would come to the Ottoman Empire's aid, Russia was confident that its occupation of the Danube Principalities would succeed without any opposition. However, the Ottoman armies initially crossed the Danube in October of 1853 and confronted the occupying Russian forces in the Principalities without an official declaration of war. Shaw and Shaw, *History of the Ottoman Empire*, 138.

> In a few words, we will expose the stupidity (pardon the only word that can express our thoughts) of this accusation.[134]

The breaking point that became the catalyst for Anglo-French involvement in the conflict was Russia's destruction of the Ottoman fleet in Sinop on November 30, 1853 following the blockade of this coastal Ottoman town in the Black Sea region – an event that the British and French newspapers reported as an atrocity.[135] This ultimately shaped the public opinion in favor of the declaration of war against Russia on March 28, 1854.[136] The Crimean War was in many ways the first 'modern' war thanks to the use of mass media of the time as a propaganda instrument to garner public support and for being the first war to be broadcasted to the masses from the frontlines with the presence of embedded journalists and photographers.[137]

Although the Crimean Peninsula was one of the main battle grounds for the British and French armies, there were fronts all over the Baltic region and on the Ottoman mainland. Many of the injured and sick soldiers and officers received treatment in Istanbul. The best known of the hospitals set up for the use of the British army during this time was within the Selimiye Barracks in Üsküdar[138] where Florence Nightingale served as a nurse.[139] The Crimean War claimed approximately half a million lives, many of whom were lost to infectious diseases. In 1899, surgeon Lieutenant-Colonel Ed. M. Wrench (n.d.), a physician of the British forces in Balaclava, wrote an article for the *British Medical Journal* about his memories of the Crimean War and described diseases as the 'most deadly enemy' of the soldiers.[140] Wrench reminded the readers that the human loss of this war proved to the British that medical services had to be improved during times of peace so that they could function properly in times of war:

> The Crimean campaign taught a lesson that I trust will never be forgotten by the nation, that unless the medical department of the army is made efficient, and supplied with its proper complement of officers and ambulance during peace, it cannot be expected to do its duty efficiently during war.[141]

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[134] The *New York Times* published the translation of an article in defense of the Turkish armies on December 2, 1853, which had originally appeared in *Journal de Constantinople* on Oct. 19, 1853 ("The Savage Hordes of Turkey: Defence of the Character of the Turkish Army," *New York Times*, Dec. 2, 1853, 5).

[135] The event was reported in local newspapers as well in Britain with sympathy towards the Ottoman Empire. For instance, the *Yorkshire Gazette* wrote about the event as "the disaster at Sinope" ("Russia and Turkey," *Yorkshire Gazette*, December 24, 1853, 2. The American press adopted a similar attitude.

[136] Shaw and Shaw, *History of the Ottoman Empire*, 138; Figes, *Crimean War*, 137; Dinçyürek, ""Compassionate" Episode in Anglo-Ottoman History," 8. See also Figes, *Crimea*.

[137] Tunç, "Lessons from the Crimean War," 110-18. See also Yakup Bektaş, "The Crimean War as a Technological Enterprise," *Notes and Records of the Royal Society of London* 71, no. 3 (2017): 233–62.

[138] Appears as 'Scutari' in English sources.

[139] Tunç, "Lessons from the Crimean War," 110-8.

[140] Ed. M. Wrench, "The Lessons of the Crimean War," *The British Medical Journal* 2, no. 2012 (Jul. 22, 1899): 205-208.

[141] Ibid., 208.

Wrench also described the dire and deadly conditions which the sick and wounded soldiers had to endure as they went from Balaclava to Üsküdar for better medical care:

> I am happy to say I handed them all alive to the care of the surgeon in charge of the sick wharf at the head of Balaclava Harbour, and there my responsibility ended. But alas! That was not the end of my poor patients' sufferings, for, from the scarcity of boats, it is not unlikely that many of them lay for several hours on the wharf before they could be put on board the ships that were to convey them to Scutari. The ships were often sailing ships, devoid of all convenience for the sick; the voyage was tedious and the mortality great, and it is well known that 10 percent of those embarked were thrown overboard before the vessels arrived at Scutari. Nor were the dangers then over, for the great hospital was infested with typhoid, and hence many finished their journey beneath the grand cypress trees in the beautiful cemetery overlooking the Bosphorus.[142]

Healthcare practitioners of the time such as Nightingale and Wrench propagated the miasma theory of disease, also referred to as the 'filth theory of disease', which claimed that foul-smelling poisonous vapor carried suspended decaying matter ultimately making people sick.[143] Sanitation became an important aspect of public health in the fight against diseases with the belief that cleanliness could contain or eliminate miasma. The sanitary movement had originated in England essentially as an urban planning approach to public health in the 1830s and 1840s with the impact of Edwin Chadwick's (1800-1890) 1842 publication *Report on the Sanitary Condition of the Labouring Population of Great Britain* that documented the environments in which populations most heavily affected by the typhus outbreak of 1838 lived.[144] This led to the introduction of the Public Health Act in Britain in 1848.[145] The convening of the First International Sanitary Conference in Paris with the participation of twelve countries (The Ottoman Empire, France, England, Spain, Austria, The Kingdom of the Two Sicilies, The Vatican, Portugal, Sardinia, Greece, Russia) also occurred during this period in 1851 as a response to the cholera outbreak in Europe and resulted in the approval of further quarantine regulations in the Ottoman Empire as well as bilateral agreements allowing the appointment of foreign physicians to review the public health conditions in the Ottoman Empire.[146]

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[142] Ibid., 206.

[143] Tunç, "Lessons from the Crimean War," 112. Miasma theory of disease remained the norm until the germ theory of disease was commonly accepted in the 1880s.

[144] At the request of the principal secretary of the British Home Department, a supplementary report was published in 1843. Edwin Chadwick, *Report on the Sanitary Condition of the Labouring Population of Great Britain: A supplementary report on the results of a special inquiry into the practice of interment towns.* (London: W. Clowes and Sons, 1843).

[145] Richard W. Hayes, "The Aesthetic Interior as Incubator of Health and Well-Being," *Architectural History* 60 (Nov. 17, 2017): 277-301.

[146] BOA, İ.HR. 94/4596, H-07-04-1269 (Jan. 18, 1853); BOA, HR.MKT. 54/100, H-07-04-1269 (Jan. 18, 1853). The Ottoman Empire was blamed for the spread of cholera in Europe. The Ottoman delegation, on

During the Crimean War, Istanbul became a medical hub where physicians and nurses from all over Europe exchanged ideas particularly with regards to the control of infectious diseases such as cholera and typhus. The overcrowding of the hospitals in the city with sick soldiers arriving from the fronts deteriorated the overall public health conditions. Military records and witness accounts of individuals such as Marie de Melfort (1825-1907, the niece of the French ambassador in Istanbul Edouard-Antoine Thouvenel, she was later known as Baroness Durand de Fontmagne upon her marriage), Sir Adolphus Slade (1804-1877, British advisor to the Ottoman navy, also known as '*Müşavir Paşa'*), and Somerset Gough-Calthorpe of the British army (1831-1912, Seventh Baron Calthorpe) indicate that Istanbul became a typhus-stricken city by the early months of 1856 claiming the lives of hundreds of people per day.[147]

Peter Pincoffs (1816-1872), a Dutch physician serving with the British medical unit, was one of the leaders of the international medical community in Istanbul. In 1857, Pincoffs published a book titled *Experiences of a Civilian in Eastern Military Hospitals* which included a map displaying the military hospitals in Istanbul during the Crimean War (Figure 2.1).[148] While the larger hospitals, such as the barrack hospital in Üsküdar, mainly served regular troops, high-ranking British officers received medical care in well-ventilated spacious mansions converted into makeshift healthcare facilities. Pincoffs described the location reserved for the British navy in the seaside Tarabya[149] district of Istanbul as "two buildings of which the so-called Palace is the best." [150] The structure Pincoffs referred to as 'Palace' was indeed a wooden *köşk*[151] in Tarabya which belonged to Sultan Abdülmecid I. Until 1856, along with two additional buildings in its vicinity, this repurposed hospital could accommodate approximately 300 patients.[152]

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the other hand, blamed India claiming that the disease entered the Ottoman Empire with Indian pilgrims coming to Mecca. Atabek, *1851'de Paris'te*; Tunç, "Lessons from the Crimean War," 112.

[147] Somerset Calthrope, *Letters from Head-Quarters; or the Realities of the War in the Crimea. By an Officer on the Staff* (London: John Murray, 1856); Adolphus Slade, *Turkey and the Crimean War: A Narrative of Historical Events* (London: Smith, Elder, and Co., 1867); La Baronne Durand de Fontmagne, *Un Séjour à l'Ambassade de France à Constantinople sous le Second Empire* (Paris: Librairie Plon, Plon-Nourrit et Cie., 1902).

[148] Peter Pincoffs, *Experiences of a Civilian in Eastern Military Hospitals with Observations on the English, French and Other Medical Departments and the Organisation of Military Medical Schools and Hospitals* (London and Edinburgh: Williams and Norgate, 1857), n.p.

[149] Appears as 'Therapia' in English sources.

[150] Pincoffs, *Experiences of a Civilian*, 10.

[151] An Ottoman residential typology. Although the building that housed the British naval hospital during the Crimean War no longer exists, this uniquely Ottoman typology continues to embellish several historic neighborhoods on the shores of the Bosphorus strait. For general information on the *yalı* and *köşk* typologies see Adolf Max Vogt and Radka Donnell, *Le Corbusier, the Noble Savage: Toward an Archaeology of Modernism* (The MIT Press, 1998), 46-77.

[152] Aral, "Footprints and Memories of Crimean War"; Tunç, "Lessons from the Crimean War," 111-12.

The seaside district of Tarabya already housed the summer residence of the British consulate in a *yalı*, a seaside *köşk* (mansion), on property that Sultan Abdülmecid I gifted to Queen Victoria on the occasion of her twenty-eighth birthday on May 24, 1847.[153] This resort-like part of Istanbul was popular among the wives of high ranking British officers and it also became the site of a British cemetery during the Crimean War which included a memorial stone that read "To the memory of the officers and men of the Royal Navy and marines buried at Therapia, erected by their countrywomen AD 1853." [154]

The Crimean War ended with the signing of the Treaty of Paris on March 30, 1856. Although Russia had to end its occupation of Ottoman territories, this war resulted in tremendous economic consequences for the Ottoman Empire. In 1854, the Ottoman Empire had to borrow money from British bankers in the amount of three million British pounds and this war debt later led to further borrowing from foreign entities eventually becoming an instrument of leverage to assert power and influence over the Ottoman Empire.[155]

From an architectural point of view, the Crimean War was a defining moment for the hospital typology. Upon her return to Britain, Florence Nightingale published her *Notes on Hospitals* (1863)[156] and *Notes on Nursing* (1859),[157] both of which impacted the design of hospitals in the years to come. The former had a direct influence on the work

[153] Aral, "Footprints and memories of Crimean War." Sultan Mahmud II had previously allocated a property in Tarabya for the use of the British Ambassador Sir Robert Gordon (1791-1847) in Istanbul in 1829 but the British government later returned this property due to ownership disputes. There were also some plans to build a summer residence for the British ambassador in Tarabya prior to 1847. Mark Bertram "Room for diplomacy: Tarabya – before 1866," accessed Nov. 10, 2023, https://roomfordiplomacy.com/tarabya/.

[154] Yolande Whittall, *Haidar Pasa cemetery listings*, Levantine Heritage Foundation, Jun. 2008; Aral, "Footprints and memories of Crimean War." The cross that topped this memorial is no longer extant. Along with the British gravestones on the site, it was later transferred to the British cemetery in Haydarpaşa where a plaque commemorating Florence Nightingale also stood. In 2008 Yolande Whittall compiled a comprehensive list of British memorials and gravestones at Haydarpaşa. Whittall is a descendant of the British merchant Charlton Whittall (1791-1867) who initially came to Izmir (Smyrna) as a representative of the trade company Breed & Co. in 1809 and settled in Bornova with other family members. The Whittall family later founded the JW Whittall & Co. of Constantinople. Hugh Whittall, *The Whittalls of Turkey 1809-1973* (Istanbul: Hugh Whittall, 1973); Yolande Whittall, "The Whittalls in Winter: Leaves from a Family Album," *Cornucopia* 19, 1999, 102-4; Fatma Tanış and Klaske Havik, "Spatial Stories of İzmir," *in_bo* 1, no. 15 (2020): 56-68.

[155] For detailed information on Ottoman foreign debt in the mid-nineteenth century, see Blaisdell, *European Financial Control*; Ahmet Tamil Tunçel and Murat Yıldırım, "1854-1874 Döneminde Osmanlı Devleti'nin Dış Borçlanması: Kaç Milyar Dolar Osmanlı Devleti'nin İflasına Neden Oldu?" *Trakya Üniversitesi Sosyal Bilimler Dergisi* 16, no. 1 (Jun. 2014): 1-26.

[156] The first edition appeared in 1858 as *Notes on Hospitals: Being Two Papers Read before the National Association for the Promotion of Social Science, at Liverpool* (October 1858) and the second edition was published in 1859. It was its revised third edition in 1863 which became influential. See Florence Nightingale, *Notes on Hospitals* (London: Longman, 1863).

[157] Florence Nightingale, *Notes on Nursing: What it is and What it is Not* (London: Harrison, 1859).

of architects as it provided guidance on the ideal design for hospitals, while the latter publication indirectly formulized the spatial requirements of nursing education and practice which I explore further in Chapter 3. Architect Henry Currey (1820-1900) followed Nightingale's recommendations in his design for the new facilities of the St. Thomas's Hospital in London, built between 1868 and 1871.[158]

Although the pavilion plan was an innovation of the eighteenth century, it only gained traction after the Crimean War and the publication of Nightingale's *Notes on Hospitals*. Nightingale was not the first person to come up with the idea of the pavilion plan hospital design. Neither was she the only person to realize the importance of separating patients according to their symptoms. According to the memoirs of Marie de Melfort, during the Crimean War it was the French physician Gaspard Scrive (1815-1861) who initially put forward the idea of separating patients according to their symptoms.[159]

Despite Nightingale's portrayal as a revolutionary figure of hospital architecture, what became a catalyst in increasing the British Government's funding for healthcare facilities was the shift in public opinion about the importance of hospital care as a reaction to newspaper reports regarding loss of life in dire hospital conditions during the Crimean War. The pavilion plan became the golden standard in hospital architecture by the end of the nineteenth century and its examples started appearing across Europe and North America. It also became an architectural typology Britain exported to other geographies in its sphere of influence and its colonies such as Singapore.[160]

The pavilion plan emphasized elements such as ventilation, light, and separation of patients according to their symptoms and its earlier advocates in Britain included the physician and sanitary reformer Thomas Southwood Smith (1788-1861), Scottish surgeon John Roberton (1797-1876), and the editor of the British architectural journal *The Builder*, George Godwin (1813-1888).[161] Some of the purpose-built British naval hospitals of the eighteenth century included the nascent design elements of the pavilion plan.

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[158] Forty, "Modern Hospital," 78-84; Taylor, *Architect and the Pavilion Plan*, 1-9.
[159] de Fontmagne, *Séjour à l'Ambassade de France.*
[160] Jiat-Hwee Chang, *A Genealogy of Tropical Architecture: Colonial Networks, Nature and Technoscience* (Routledge, 2016), 94-128.
[161] Anthony King, "Hospital Planning: Revised Thoughts on the Origin of the Pavilion Principle in England," *Medical History* 10, no. 4 (Oct. 1966): 360-73; Tunç, "Lessons from the Crimean War," 117.

2.2.3 British-Ottoman Relations in the Late Nineteenth Century

Until the end of the 1870s, advocating for the territorial integrity of the Ottoman Empire remained an essential tenet of British foreign policy. Besides the Russian threat to British interests in the region, the Ottoman Empire's status as a market and supplier of cheap raw materials and food for Britain, and its geographical position as a passageway to British colonies in Asia mainly through Egypt shaped this diplomatic strategy.[162] As an empire that dominated territories beyond its mainland, Britain also feared that desire for national independence in Ottoman-controlled territories could inspire similar sentiments in British dominions. British politicians were also wary of the notion of pan-Islamism, which was a matter of concern since it required Muslims under British rule to remain loyal to the Ottoman sultan, who was also the Khalif.[163]

The opening of the Suez Canal in 1869 shifted Britain's focus from the Ottoman Empire to Egypt, which officially became a *Khedivate*, and was no longer under direct Ottoman rule but functioned as an autonomous tributary state of the Ottoman Empire, in 1867.[164] After the Russo-Turkish War of 1877-1878, the relations between the Ottoman Empire and Britain began to deteriorate as the power dynamics in Europe shifted yet again. William Ewart Gladstone (1809-1898), leader of the Liberal opposition in Britain, utilized a demonizing rhetoric towards Turks.[165] He described the 'Turkish race' as an 'anti-human specimen' in his widely read 1876 publication *Bulgarian Horrors and the Question of the East*:

> Let me endeavour very briefly to sketch, in the rudest outline, what the Turkish race was and what it is. It is not a question of Mahometanism simply, but of Mahometanism compounded with the peculiar character of a race. They are not the mild Mahometans of India, nor the chivalrous Saladins of Syria, nor the cultured Moors of Spain. They were upon the whole, from the black day when they first entered Europe, the one great anti-human specimen of humanity.[166]

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[162] Shaw and Shaw, *History of the Ottoman Empire*, 134; Crinson, *Empire Building*, 229; Önder Kocatürk, *Balkanlar'dan Ortadoğu'ya Osmanlı İngiliz İlişkileri (1908-1910)* (Istanbul: IQ Kültür Sanat Yayınları, 2009), 15; Dinçyürek, ""Compassionate" Episode in Anglo-Ottoman History," 8; Sağ, "Osmanlı Başkenti İstanbul'da," 17.

[163] Zürcher, *Turkey*, 81.

[164] Ibid., 71. For more information on the history of the Suez Canal, see Hubert Bonin, *History of the Suez Canal Company 1858-2008: Between Controversy and Utility* (Geneva: Librarie Droz, 2010). For more information on the developing autonomy of Egypt, see Shaw and Shaw, *History of the Ottoman Empire*, 144-46.

[165] Marvin Swartz, *Politics of British Foreign Policy in the Era of Disraeli and Gladstone* (London: Macmillan, 1985), 43-44; Zürcher, *Turkey*, 72; Sağ, "Osmanlı Başkenti İstanbul'da," 18-19.

[166] William Ewart Gladstone, *Bulgarian Horrors and the Question of the East* (London: John Murray, 1876), 12-13.

This attitude towards the Turks, while not new, was in stark contrast to the former British foreign policy which had persisted since the Crimean War. The Liberals, led by Gladstone, won the 1868 elections in the United Kingdom replacing the Conservative government of Benjamin Disraeli (1804-1881) and with that, the integrity of the Ottoman Empire lost its prominent position as a foreign policy priority for the British Empire while individual Turcophiles continued to support the Ottoman Empire in its conflicts with Russia.

When yet another Russo-Turkish War broke out in 1877, Disraeli was again the Prime Minister in Britain. Although Britain did not directly engage in the battles of the Russo-Turkish War of 1877-1878 (known as '*93 Harbi*' or the 'War of '93' in Turkish), British diplomats, physicians, nurses, and volunteers were involved in relief efforts in Ottoman lands throughout this period. This war created an influx of refugees from the Russian-occupied Ottoman territories particularly to Edirne (Adrianople), Filibe (Philippopolis, present day Plovdiv in Bulgaria), and Pazarcık (also known as Tatar Pazarcık, located in present day Bulgaria).[167] British philanthropic initiatives of the Stafford House Committee, the British National Society for Aid to the Sick and Wounded, and Lady Strangford's Fund offered support for the treatment of the Ottoman combatants and the civilians affected by the war.[168] British women played a particularly important leadership role in these activities. For instance, in an effort to organize aid for the war refugees in Istanbul Baroness Angela Georgina Burdett-Coutts established the Turkish Compassionate Fund (known in Ottoman Turkish as the *Sermâye-i Şefkatî Osmaniye*) in August 1877.[169] During the Russo-Turkish War of 1877-1878, British organizations also

[167] The National Archives (U.K.), FO 424/66; letter from Layard to Derby (Jan. 16, 1878) in FO 78/2776, no. 70; Dinçyürek, ""Compassionate" Episode in Anglo-Ottoman History," 54. See also Edmund Collier, *Cassell's Illustrated History of the Russo-Turkish War, vol. 1* (London, Paris, New York: Cassell & Company Limited, 1885); Stanford J. Shaw, "The Population of Istanbul in the Nineteenth Century," *International Journal of Middle East Studies* 10, no. 2 (May 1979): 276.

[168] Collier, *Cassell's Illustrated History*, 365-68; Dinçyürek, ""Compassionate" Episode in Anglo-Ottoman History," 65-66.

[169] H. Mainwaring Dunstan and W. Burdett-Coutts, *The Turkish Compassionate Fund: An Account for Its Origin, Working and Results,* (London: Remington and Co., 1883), 18; Cariclee Zacaroff, "'The Turkish Compassionate' Fund," in *The Congress of Women: Held in the Woman's Building, World's Columbian Exposition, Chicago, USA, 1893*, ed. Mary Kavanaugh Oldham Eagle (Chicago, IL: Monarch Book Company, 1894), 618-622; Dinçyürek, ""Compassionate" Episode in Anglo Ottoman History," 66; Ufuk Erdem, "Abdülhamid Dönemi İstanbul'unda bir İngiliz Yardım Derneği: 'Sermâye-i Şefkatî Osmaniye' (1877-1878)," proceedings of the Sultan Abdulhamid Symposium in Thessaloniki (Feb. 20-21, 2014) (Ankara: Türk Tarih Kurumu), 219-32.

collaborated with the Ottoman Red Crescent (*Hilal-i Ahmer*) which had been established in 1868.[170]

2.2.4 The Ottoman Foreign Debt

According to American political scientist and bureaucrat Donald C. Blaisdell the terms of the contract of June 27, 1855 between the Ottoman government and the British and French governments for a loan of five million pounds "contained the seed of the idea of foreign control."[171] The Ottoman Empire had been in a foreign debt crisis since the end of the Crimean War, and it defaulted in 1875. The expenses of the Russo-Turkish War of 1877-1878 added a further burden on the Ottoman economy and by the end of the war, it became apparent to European markets that the Ottoman Empire was essentially bankrupt. This led to repayment negotiations and finally on December 20,1881 to the establishment of an institution named *Düyûn-u Umumiye* (Ottoman Public Debt Administration) following the Decree of *Muharrem*, the official declaration of bankruptcy, of October 15, 1881.[172] Under the direction of a European council, *Düyûn-u Umumiye* was in charge of collecting taxes on consumer goods such as salt, tobacco, and silk products in the Ottoman Empire, and ensuring that the taxes collected were used in the repayment of both foreign and domestic debt. In subsequent years it also assumed the responsibility of collecting further Ottoman revenues towards the payment of European bank loans granted for building railroads, construction projects, and other industrial enterprises Sultan Abdulhamid II (r. 1876-1909) spearheaded.

According to Blaisdell, *Düyûn-u Umumiye* "functioned as the colleague of modern European capitalistic society intent on the economic exploitation of the Ottoman Empire. […] a well-ordered, capable, and powerful minor partner of the more energetic instruments of western economic penetration."[173] The European council in charge of directing the *Düyûn-u Umumiye* exercised a considerable degree of authority, even to the point of transforming into 'a zealous and active partisan' in the name of the creditor institutions.[174] Present-day revisionist historians such as Ahmet Şimşirgil, while attempting to elevate the status of Abdulhamid II in Ottoman history, argue that the

[170] Collier, *Cassell's Illustrated History*, 367-68.
[171] Blaisdell, *European Financial Control*, 28. For a transcript of discussions in the U.K. Parliament regarding this contract see "The Turkish Loan," HC Deb 23 July 1855, vol. 139, cols 1283-313, accessed Dec. 10, 2023, https://api.parliament.uk/historic-hansard/commons/1855/jul/23/the-turkish-loan.
[172] Blaisdell, *European Financial Control*, 90-108; Zürcher, *Turkey*, 84-85
[173] Blaisdell, *European Financial Control*, 3
[174] Ibid.

Düyûn-u Umumiye had a positive influence because of the financial discipline it promoted.[175] However, throughout its existence (1881-1923) European officials regarded this institution as an 'agent' of their interests and the likes of Sir Edward Grey (1862-1933), who became the British Foreign Secretary in 1905, overtly referred to it as such.[176]

Late nineteenth and early twentieth-century British building activity in the Ottoman lands reflected Britain's imperialistic vision of itself. However the realization of British ambitions often clashed with rules and regulations imposed by the Ottoman authorities.[177] According to Margarita Díaz-Abreu, the Ottoman Empire's need to form alliances with major powers provided Britain with the opportunity to include Ottoman lands in its expansionist goals in the second half of the nineteenth century.[178] Although the Ottomans had the agency to impose rules and regulations on activities of Britain, France, and Germany on most of its territories, the Ottoman Empire was prone to economic exploitation of European powers in its final decades and was impacted increasingly by ideological and cultural currents originating from Europe.[179] However, this relationship was different from the situation in colonized geographies like India where Britain imposed its imperialist aspirations via direct military and political intervention. Except for Cyprus, where the Ottoman Empire agreed to British rule in exchange for support against Russia, Britain could not exercise its political authority on Ottoman territories and had to adhere to the rules and regulations imposed by the Ottomans. Nevertheless, in 1882 Britain invaded Egypt as the relationship between the two empires deteriorated.[180] The Ottoman response to the threat of British expansion in

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[175] Ahmet Şimşirgil, *Kayı: II. Abdülhamid Han (10. cilt)* (Istanbul: Timaş Yayınları, 2018).
[176] Blaisdell, *European Financial Control*, 5-6.
[177] Mark Crinson uses the term 'informal imperialism' to explain this phenomenon. Crinson writes "the practice of informal imperialism [was] made to seem a benevolent or inevitable force through ideological constructs of alliance, identity, philanthropic reform, or modernization," and that architecture played a role in this process "both as a functional material object and as representation." Crinson, *Empire Building*, 229-30. Archaeologist Margarita Díaz-Abreu defines 'informal imperialism' as "a situation in which a powerful nation manages to establish dominant control in a territory over which it does not have sovereignty" after British economic historian Charles Ryle Fay. Charles Ryle Fay, *Cambridge History of the British Empire, vol. 2* (Cambridge: Cambridge University Press, 1940), 399; Margarita Díaz-Abreu, *A World History of Nineteenth Century Archaeology: Nationalism, Colonialism, and the Past* (New York: Oxford University Press, 2007), 99. Christine M. Philliou, on the other hand, defines the French control over *Düyûn-u Umumiye* as a 'semicolonial relationship.' See Christine M. Philliou, *Turkey: A Past Against History* (Oakland, CA: University of California Press, 2021), 41.
[178] Díaz-Abreu, *World History of Nineteenth Century Archaeology*, 99-130.
[179] Ibid., 209.
[180] Zürcher, *Turkey*, 75; Selim Deringil, *The Well-Protected Domains: Ideology and the Legitimation of Power in the Ottoman Empire 1876-1909* (London and New York: I.B. Taurus, 1998), 113; Díaz-Abreu, *World History of Nineteenth Century Archaeology*, 100; Murat Gül, *The Emergence of Modern Istanbul: Transformation and Modernisation of a City* (London and New York: I.B. Tauris, 2009), 55; Sağ, "Osmanlı Başkenti İstanbul'da," 20.

the Mediterranean and the Near East was to form an alliance with Germany which ultimately shaped the final days of the Ottoman Empire and the early years of the Turkish Republic, particularly in the realms of military, education, and architecture.

2.3 Istanbul in the Nineteenth Century

2.3.1 Architecture

During the *Tanzimat* (Reorganization) period (1839-1876), which began with the announcement of the *Gülhane Hatt-ı Hümayunu* (The Noble Edict of Gülhane) on November 3, 1839, the *Osmanlıcılık*[181] (Ottomanism) ideology steered official government policy in an attempt to unite all Ottomans under one national identity and to guarantee their loyalty to the Empire with reforms such as the abolition of *cizye* (taxation system which applied to the non-Muslim subjects of the Empire)[182] and standardization of education and justice systems. During this period, Ottoman bureaucrats believed that the establishment of European-style institutions could halt the disintegration of the Ottoman Empire. Ottomanism, in its essence, promoted cosmopolitanism, or in the words of Selim Deringil a type of 'imperial supranationalism,' as opposed to ethnic nationalism.[183]

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[181] Several nineteenth century Ottoman intellectuals regarded the separatist rebellions inspired by the idea of ethnic nationalism born out of the French Revolution of 1789 as an existential threat to the Ottoman Empire, and this fear became particularly evident with the realization of Greek independence in 1830. To counter the ideas that inflamed the dissolution of the Empire, Ottoman intellectuals embraced nationalism and liberalism in the form of *Osmanlıcılık* (Ottomanism), an ideology which promoted the notion of *hürriyet* (liberty) and civic nationalism and regarded all subjects of the Empire, regardless of religion or ethnicity, equal citizens of the *vatan* (homeland) under the protection of a constitution they wished to instate. For more information on the Young Ottomans see, Şerif Mardin, *Jön Türklerin Siyasi Fikirleri, 1895-1908* (Istanbul: Türkiye İş Bankası Kültür Yayınları, 1964 (first edition), Istanbul: İletişim Yayınları, 2019 (twenty second edition)), 33-35; Zürcher, *Turkey*, 67-70; Deringil, *Well-Protected Domains*, 46; Selim Deringil, *The Ottomans, the Turks and World Power Politics* (Istanbul: The Isis Press, 2010), 138-39, 178-80; Phillíou, *Turkey*, 24.

[182] *Cizye* was not collected after 1855 and it was officially abolished with *Islahat Fermanı* (the Reform Edict) of 1856. From that point on, non-Muslims, who were exempt from military service, had to pay *bedel-i askeriye* tax (introduced in 1856). The taxation system was not truly egalitarian until military service became mandatory for all male citizens of the Ottoman Empire during the *İkinci Meşrutiyet* (Second Constitutional) Era (1908-1920). Ufuk Gülsoy, "Osmanlı Gayrimüslümlerinin Askerlikten Muâfiyet Vergisi: Bedel-i Askeriye (1855-1909)," *İstanbul Üniversitesi Edebiyat Fakültesi Tarih Dergisi* 37 (2002): 93-118.

[183] Deringil, *Well-Protected Domains*, 46. For more information on cosmopolitanism in the Ottoman context see Derryl MacLean and Sikeena Karmali Ahmed (eds.), *Cosmopolitanisms in Muslim Contexts: Perspectives from the Past* (Edinburgh University Press, 2012); Edhem Eldem, "Istanbul as a Cosmopolitan City: Myths and Realities," in *A Companion to Diaspora Studies*, eds. Ato Quayson and Girish Daswani (Wiley Blackwell, 2013), 212-30; Ulrike Freitag and Nora Lafi (eds.), *Urban Governance under the Ottomans: Between Cosmopolitanism and Conflict* (Routledge, 2014); E. Atilla Aytekin, "Beyond Conflict and Coexistence: Cosmopolitanism in Inter-Communal Relations in Late Ottoman Cities," *Southeast European and Black Sea Studies* 22, no. 4 (2022): 587-608. For more information on forestry in the

Istanbul's increasing urban population, labyrinthine street patterns in densely populated neighborhoods, and the widespread use of processed timber as a construction material in residential buildings frequently led to devastating fires in the nineteenth century. Ottoman bureaucrats advocated that replacing timber with masonry could solve this problem.[184] One of these bureaucrats was Mustafa Reşid Paşa (1800-1858) who served as the *Hariciye Nazırı* (Foreign Affairs Minister) and *Sadrazam* (highest ranking official in Ottoman administration) to Sultan Abdülmecid I and had previously worked as a diplomat in Paris and London. Somewhat of an Anglophile in his views regarding urban planning and architecture, he believed that the French-style multi-storied apartment blocks, which started appearing in Istanbul, were not suitable for a Muslim society, and advocated for the adoption of detached houses in separate lots like the ones in England.[185] During his years as a diplomat in London, Mustafa Reşid Paşa critiqued the trend to use timber excessively in Istanbul by calling this technique 'nothing to be desired,' and noted that besides being a fire hazard, the use of timber in the long-run would be costlier than adobe since, even when built well, a timber structure could only last fifty to sixty years.[186]

During the *Tanzimat* era, the Ottoman government provided scholarships to Ottoman students so that they could acquire the required knowledge at European institutions such as the *École des Beaux-Arts* in Paris[187] that would facilitate the

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Ottoman Empire, see Selçuk Dursun, "Forest and the State: History of Forestry and Forest Administration in the Ottoman Empire" (PhD diss., Sabancı University, 2007).

[184] M. Cavid Baysun, "Mustafa Reşid Paşa'nın Siyasî Yazıları," *Tarih Dergisi* 11, no. 15 (Sep. 1960): 124-7; Gül, *Emergence of Modern Istanbul*, 26. Declaring timber as the villain of the nineteenth century Istanbul's urban landscape was not necessarily an attack on the local building traditions. The excessive use of processed timber as construction material was indeed a modern phenomenon of the early nineteenth century when wood veneer on lath and plaster replaced the traditional *hımış* (adobe structures with half-timber nogged framing and plaster veneer) structures typical of Anatolian and Balkan architecture. Uğur Tanyeli, "İstanbul Mimarisinde Radikal Değişim Evresi: VIII. ve XIX. Yüzyıllar," in *Antik Çağdan 21. Yüzyıla Büyük İstanbul Tarihi Ansikolpedisi vol. 8,* ed. Coşkun Yılmaz (Istanbul: İBB Kültür, 2015), 351.

[185] Gül, *Emergence of Modern Istanbul*, 26.

[186] M. Cavid Baysun's transcription of the quote from its original Ottoman: "*vâkı'â ahşab bina heves edecek şey olmıyarak faraza yanmasa ve her ne kadar metin yapılsa bile nihâyet elli altmış sene zarfında müşrif-i hraâb ola-geldiği müsellem*" See Baysun, "Mustafa Reşid Paşa," 124. Timber was particularly important for the Ottoman military, and it was always in high demand. Although forest products were a significant source of revenue for the Ottoman Empire, liberalization of trade in the last decades of the nineteenth century and mass marketization of forest products led to a need for imported timber to meet the domestic demand. See Dursun, "Forest and the State," 82-83. According to Uğur Tanyeli, by the early nineteenth century processed timber had already become the most accessible and affordable building material in Istanbul. Tanyeli, "İstanbul Mimarisinde Radikal Değişim," 351.

[187] In the case of painting, Ottoman students also preferred the *Académie Julian*. Inspired by *L'École militaire égyptienne* founded in Paris in 1845, Paris *Mekteb-i Osmani* (The Ottoman School of Paris) was founded in 1857 with the goal of training future bureaucrats and military officers; however, painting was among the courses offered here and some of the students, such as Şeker Ahmet Paşa, later chose art as a career. For more information, see Mustafa Cezar, *Sanatta Batı'ya Açılış ve Osman Hamdi* vols. I and II. (Istanbul: Mas Matbaa, 1995).

introduction of European-style buildings and start a new era of architectural transformation in Istanbul.[188] Moreover, European architects were working in the city, and at times were invited by the Ottoman sultan to build new structures.[189] Modifications in architectural typologies to create buildings compatible with European ways of living even applied to mosques. As Selim Deringil explains, "The classical Ottoman mosque was altered to suit the ceremonial protocol of European usage with the addition of a two-story structure to the main building to serve as ceremonial public space to give a more secular character to the buildings."[190] The alterations in Ottoman architecture, as in the example of the increasing size of the sultan's prayer loge in mosques, accommodated the changing public image of the sultan.[191] Aptullah Kuran elaborates that architecture "emerged as a vehicle of pomp and circumstance" as early as the late eighteenth century.[192]

The European-educated Ottoman architects of this period of transformation included the new generation of the Balyan family (Nigoğos Balyan (1826-1858), Sarkis Balyan (1835-1899), Agop Balyan (1837-1875), Simon Balyan (1846-1894), Levon Balyan (1855-1925)),[193] Ahmet Kemalettin (known as Mimar[194] Kemalettin, Kemalettin the Architect, 1870-1927),[195] Giulio Mongeri (1875-1951), Delfo Seminati, Giorgio Domenico Stampa, and Vedad Bey (Tek, 1873-1942).[196] Among the numerous foreign

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[188] Gözde Çelik, ed., *Geç Osmanlı Döneminde Sanat, Mimarlık ve Kültür Karşılaşmaları* (Istanbul: Türkiye İş Bankası Kültür Yayınları, 2018).

[189] For examples, see Miyuki Aoki, "Léon Parvillée: Osmanlı Modernleşmesinin Eşiğinde Bir Fransız Sanatçı" (PhD diss., Istanbul Technical University, 2002); Paolo Girardelli, "Italian Architects in an Ottoman Context: Perspectives and Assessments," *İstanbul Araştırmaları Yıllığı* 1 (2011): 101-22; Ilona Baytar and Jale Beşkonaklı, eds., *Sultan Abdülmecid'in Bir Mimarı: William James Smith* (Istanbul: Kültür A.Ş., 2016). See also Zeki Sönmez, "Sanayi-i Nefise Kurulurken Türkiye'de Mimarlık Ortamı," *Hürriyet Gösteri Sanat Edebiyat Dergisi* 119 (Oct. 1990): 29.

[190] Deringil, *Well-Protected Domains*, 23.

[191] Ibid.

[192] Aptullah Kuran, "The Evolution of the Sultan's Pavillion in Ottoman Imperial Mosques," *Islamic Art* 4 (1990-1991): 284.

[193] Members of the Balyan family had been court architects since the eighteenth century. For more information on the Balyan family, see Afife Batur, "19. Yüzyıl Osmanlı Mimarlığında Etkin Bir İsim: Balyanlar," in *Armenian Architects of Istanbul in the Era of Westernization*, ed. Hasan Kuruyazıcı (Istanbul: Hrant Dink Foundation Publications, 2016); Büke Uras, *Balyanlar: Osmanlı Mimarlığı ve Balyan Arşivi* (Istanbul: Korpus, 2021).

[194] '*Mimar*' means 'architect' in Turkish, and the title was often used as part of architects' names such as Mimar Sinan and Mimar Kemalettin.

[195] Alternate spelling of his name is 'Kemaleddin.' Afife Batur, *Mimar Kemaleddin Yapıları Rehberi* (Istanbul: TMMOB Mimarlar Odası Istanbul Büyükkent Şubesi Yayınları, 2008); Yıldırım Yavuz, *İmparatorluktan Cumhuiryete Mimar Kemalettin, 1870-1927* (Ankara: TMMOB Mimarlar Odası Yayınları, 2009); Ali Cengizkan, ed., *Mimar Kemalettin ve Çağı: Mimarlık, Toplumsal Yaşam, Politika* (Ankara: TMMOB Mimarlar Odası Yayınları, 2017).

[196] Throughout this thesis some surnames will appear in parentheses to imply that the individual mentioned took that name after the Surname Law of 1934 in Turkey. The Turkish Parliament (TBMM) enacted the

architects who worked in Istanbul in the nineteenth century were the Swiss brothers Gaspare (1809-1883) and Giuseppe Fossati (1822-1891), French Léon Parvillée (1830-1885),[197] Italian architects Raimondo D'Aronco (1857-1932), Giovanni Battista Barborini (1820-1891),[198] and Pierre (Pietro) Montani (also known as 'Montani Efendi,' n.d.),[199] and Prussian (German) August Jasmund (1859-1911). A sense of revivalism was present in the works of both the foreign and local architects working in the Ottoman capital in the mid-nineteenth century.[200] For instance, the buildings that were constructed along the panoramic waterway of the Bosphorus strait, such as the Dolmabahçe Palace (b. 1843-1855) and the Great Mosque of Sultan Abdülmecid I (also known as *Ortaköy Camii*, b. 1854-1856) designed by Garabet Amira Balyan and his son Nigoğos Balyan, the first member of the Balyan family to study architecture in Europe, incorporated neoclassical and neo-Baroque elements.

Many architectural historians such as Yıldırım Yavuz, Turgut Saner, and Bilge Ar argue that the Balyans followed an approach similar to foreign architects by borrowing Moorish decorative elements. This interpretation categorized the Çırağan Palace (b. 1863-1872) and Beylerbeyi Palace (b. 1863-1865), both designed by the brothers Sarkis and Agop Balyan, as 'Orientalist' structures which copied Western-European understandings of Islamic architecture that mostly relied on superficial observations and descriptions of the Alhambra in Spain.[201] European architects of the time acquired much of their second-hand information about the Alhambra, and other 'distant' traditions of decoration for that matter, from the work of Owen Jones (1809-1874), a British architect and designer and

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Surname Law on June 21, 1934, which was implemented on January 2, 1935. For more information, see Sabit Dokuyan, "Soyadı Kanunu ve Kanunun Uygulanma Süreci," *Tarih İncelemeleri Dergisi* 31, no. 1 (2016):129-66. Istanbul-born architect Alexandre Vallaury (also known as Alessandro Valeri or Alessandro Vallauri, 1850-1921), whose citizenship remained a subject of contention in historiography, could arguably be in this list of Ottoman architects. For more information, see Seda Kula Say, "Beaux Arts Kökenli Bir Mimar Olarak Alexandre Vallaury'nin Meslek Pratiği ve Eğitimciliği Açısından Kariyerinin İrdelenmesi" (PhD diss., Istanbul University, 2014).

[197] Mustafa Cezar writes that Parvillée was of Swiss origin. Mustafa Cezar, *XIX. Yüzyıl Beyoğlusu* (Istanbul: Akbank, 1991), 187. However, both Zeynep Çelik and the detailed work of Miyuki Aoki define him as French. See Zeynep Çelik, *Displaying the Orient: Architecture of Islam at Nineteenth-Century World's Fairs* (University of California Press, 1992), 96; Aoki, "Léon Parvillée"

[198] Victoria Zvyagintseva, "Giovanni Battista Barborini" (MA thesis, Marmara University, 2018).

[199] For the work of Italian architects in Istanbul see, Girardelli, "Italian Architects," 101-22. There is no verifiable information regarding Montani's years of birth and death.

[200] Sönmez, "Sanayi-i Nefise Kurulurken," 29.

[201] Turgut Saner, "19. Yüzyıl Eklektisizminde Elhamra'nın Payı," in Proceedings of the *Osman Hamdi Bey ve Dönemi* Symposium, Dec. 17-18, 1992, ed. Zeynep Rona (Istanbul: Tarih Vakfı, 1993), 134-45; Turgut Saner and Bilge Ar, "Beylerbeyi Sarayı Dekorasyonunda Owen Jones'un Yayınlarından Uyarlanmış Elhamra Desenleri," *Milli Saraylar Mimarlık Dergisi* 17 (2019): 123-37; Yıldırım Yavuz, "Son Dönem Osmanlı ve Çağdaş Türk Mimarlığında 'Orientalist' Yaklaşımlar," Çukurova Üniversitesi Türkoloji Araştırmaları Merkezi, accessed Oct. 20, 2023, https://turkoloji.cu.edu.tr/GENEL/34.php.

the author of *The Grammar of Ornament*, first published in 1856,[202] and other similar publications which appeared after it. Yıldırım Yavuz argues that an Orientalist approach akin to the European trends of the time emerged in the Ottoman Empire particularly with the encouragement of Sultan Abdülaziz, who visited the *Exposition universelle* of 1867 in Paris and expressed his appreciation of the Ottoman pavilions designed by Léon Pavillée, which introduced Ottoman architectural patterns to European audiences through a romanticized portrayal infused with historicism.[203] Local Ottoman architects like the Balyans, however, did not solely rely on pattern books as they incorporated not only Moorish elements but represented the characteristics of the cosmopolitan Ottoman geography that they originated from. In this regard, Ussama Makdisi differentiates Ottoman Orientalism from European Orientalism and argues that this sense of eclecticism was an inescapable and essential component of Ottoman modernity.[204]

The Ottomans created their own pattern books such as the *Usul-i Mimari-i Osmani* (The Fundamentals of Ottoman Architecture) which a group of born and naturalized Ottoman intellectuals, artists, and architects prepared for the Vienna World's Fair in 1873 under the supervision of İbrahim Edhem Paşa (1818-1893).[205] *Usul-i Mimari-i Osmani* was an attempt to historicize and codify Ottoman architecture in order to render it a universally valid and unique tradition and to counter the European interpretations which dismissively regarded the Ottoman style as a melange of Arabic, Persian, and Byzantine elements.[206] This project was akin to the idea of Augustus Pugin (1812-1852) and John

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[202] Owen Jones, *Grammar of Ornament* (London: Day and Son, 1856); Crinson, *Empire Building*, 15-71; Saner and Ar, "Beylerbeyi Sarayı Dekorasyonu," 123-37.

[203] Yavuz, "Son Dönem Osmanlı." Parvillée had moved to the Ottoman Empire in 1855 and worked on restoration projects in Bursa, the old capital of the Ottomans between 1326 and 1453. He later contributed to the literature available on architectural and decorative patterns of the Ottoman lands by publishing in Paris the *Architecture et décoration Turques au XVe siècle* (Turkish architecture and decoration in the fifteenth century) in 1874. Léon Parvillée, *Architecture et décoration Turques au XVe siècle* (Paris: A. Morel et Cie., 1874); Beatrice St. Laurent, "Léon Parvillée, His Role as a Restorer of Bursa's Monuments and His Contribution to the Exposition Universelle of 1867," in *L'Empire Ottoman; la République de Turquie et de la France*, eds. Hâmit Batu and Jean-Louis Bacqué-Grammont (Istanbul and Paris: Éditions ISIS, 1986), 247-82; Aoki, "Léon Parvillée." For more information on Ottoman pavilions in nineteenth-century World's Fairs see Çelik, *Displaying the Orient*, 96-110.

[204] Ussama Makdisi, "Ottoman Orientalism," *American Historical Review* 107, no. 3 (Jun. 2022): 769.

[205] Marie de Launay and Pietro Montani, eds., *Usul-i Mimari-i Osmani* (Istanbul, 1873); Ahmet Ersoy, "Architecture and the Search for Ottoman Origins in the *Tanzimat* period," *Muqarnas* 24 (2007): 117-39. İbrahim Edhem Paşa was an Ottoman bureaucrat and diplomat who held various key roles within the Ottoman Empire during the reigns of Abdülaziz and Abdulhamid II. He was also an ancestor of the architect Sedad Hakkı Eldem (1908-1988) who designed the Admiral Bristol School of Nursing Nurses' Home. For more information, see Edhem Eldem, "Sedad Hakkı Eldem Olumnaz, Doğulur (Mu?): Bir Aile ve Gençlik Hikâyesi, 1830-1930," in *Sedad Hakkı Eldem (vol. I): Gençlik Yılları,* eds. Edhem Eldem, Bülent Tanju, Uğur Tanyeli (Istanbul: Osmanlı Bankası Arşiv ve Araştırma Merkezi, 2008), 10-41.

[206] Ersoy, "Architecture and the Search for Ottoman Origins," 122.

Ruskin's (1819-1900) search for sources of architectural inspiration in the Gothic as an opposition to neoclassicism in Britain.[207]

Borrowed money paid for the grand architectural projects of the *Tanzimat* era. The Ottoman government had been indebted to foreign creditors since 1854 mainly to rebuild its navy, modernize its army, and to cover its costs during the Crimean War (1853-1856). The dire economic conditions and further disintegration of the Empire gave rise to new ideas of Turkish nationalism that started to differ from the pluralistic *Osmanlıcılık* of the 1840s.[208] To suppress the dissident voices, in 1865 the Ottoman government introduced a press law imposing censorship rules.[209] Many of the intellectuals found refuge across Europe and started publishing political newspapers to critique the Istanbul government. These publications usually made their way into Istanbul thanks to the presence of the British and French post offices in Galata.[210] The word 'Turk' was the umbrella term Europeans used to refer to Muslims in the Balkans and Anatolia at this time regardless of ethnic background, and this terminological divide appeared even on late *Tanzimat*-era Ottoman banknotes which included Ottoman, Armenian, French, Arabic, and Greek texts with the word 'Turk' replacing 'Ottoman' only on the French translation, a sign that the Ottomans were starting to embrace the Turkish identity instilled on them by Europe (Figure 2.2). The Young Ottomans in Europe became The Young Turks, or *Les Jeunes Turcs* in French. [211]

In 1876, after the deposal of Abdülaziz and Murat V's three-month reign (r. May 30, 1876 - August 31, 1876), Abdulhamid II ascended the throne with a promise to the Young Ottomans that the Ottoman Empire would transition into a constitutional monarchy. The First Constitutional Era (*Birinci Meşrutiyet*) began on December 23, 1876 with the signing of the constitution prepared by the Young Ottomans society and two elections followed in 1877. However, this experiment was rather short-lived as

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[207] Ibid.
[208] Deringil, *Ottomans*, 165-69.
[209] Zürcher, *Turkey*, 69.
[210] Particularly the ideas of Namık Kemal (1840-1888), who wrote in *Hürriyet* established in London in 1868, played a significant role. Philliou, *Turkey*, 41; Murat Turna, "Hürriyet Gazetesi'nde (1868-1870) Osmanlı Devleti'nin Temel Meseleleri," *AKRA Kültür Sanat ve Edebiyat Dergisi* 11, no. 29 (Jan. 2023): 71-93.
[211] The group backing the new form of Turkish nationalism started to organize under the name *Yeni Osmanlılar* (The New Ottomans) and subsequently as *Genç Osmanlılar* (The Young Ottomans) in the late 1860s, the movement's translation to English and French appeared as The Young Turks or *Les Jeunes Turcs*. Zürcher, *Turkey*, 69-70. Historian Şükrü Hanioğlu attributes the first known instance of the term 'Young Turks' to the Scottish author Charles Macfarlane in 1829. Şükrü Hanioğlu, "Jön Türkler," *İslam Ansiklopedisi, vol. 23* (Istanbul: Diyanet Vakfı Yayınları, 2001), 584.

Abdulhamid II dismantled the Ottoman Parliament of elected representatives on February 14, 1878, under the pretext of the war with Russia which began in April 1877.[212]

While the Young Ottomans and the *Usul-i Mimari-i Osmani* inspired an Ottomanist revival in architecture in the 1870s and continued to appear in buildings commissioned under Abdulhamid II's rule despite the blow that the Young Ottomans received, Islamic historicism also gained a new-found ideological meaning in Istanbul during this time since the sultan pushed an Islamist agenda as a reaction to both the demands of the liberal elite to reinstate the constitution and European imperialism's desire to dominate the Ottoman lands.[213] *Sanayi-i Nefise Mektebi* (The School of Fine Arts), modelled after the *École des Beaux-Arts* in Paris, was established under the patronage of Abdulhamid II in 1883, and the stylistic repertoires of European architects hired to teach there, such as Alexandre Vallaury, included Islamic historicism favored by the sultan.[214]

On the international stage, Abdulhamid II presented himself as the 'Protector of the Islamic World' to gain some leverage particularly when dealing with Britain and France, a move which arguably planted the seeds of political Islam that would flourish in twenty-first century Turkey.[215] Meanwhile, the Ottoman Empire grew closer to the recently unified Germany of Kaiser Wilhelm II (r. 1888-1918),[216] who supported the idea of pan-Islamism and openly expressed this sentiment in a speech delivered in Damascus during his official state visit to the Ottoman Empire in 1898: "Both his Majesty the Sultan and the 300 million Muslims around the world, to whom he is the Khalifat, should know that the German Emperor is their best friend."[217] One of the architectural representations of this rapprochement appeared in the form of a fountain designed by Max Spitta (1842-1902) with the incorporation of neo-Byzantine elements such as a circular arch, which was typical of the German revivalist *Rundbogenstyl* movement of the nineteenth century, and constructed in Germany under the supervision of Conrad Scheele to be assembled on

[212] Zürcher, *Turkey*, 70-77.
[213] Gül, *Emergence of Modern Istanbul*, 55-56.
[214] Ibid., 57.
[215] For instance, Şükrü Altın argues that Recep Tayyip Erdoğan followed in the footsteps of Abdulhamid II as a "Protector of the Crescent." See Şükrü Altın, *Hilâl'in İki Muhafızı: II. Abdulhamid – R. Tayyip Erdoğan* (Istanbul: Hayat Yayınları, 2018).
[216] Gül, *Emergence of Modern Istanbul*, 56.
[217] İlber Ortaylı, *Osmanlı İmparatorluğunda Alman nüfuzu* (Istanbul: Kaynak Yayınları, 1983): 67; Zürcher, *Turkey*, 82.

the Sultanahmet Square in Istanbul as a gift to commemorate Kaiser's historic state trip (Figure 2.3).[218]

The amalgamation of a wide range of historicist and revivalist styles and the addition of Art Nouveau to the architectural landscape of Istanbul, particularly with the works of Raimondo D'Aronco during the reign of Abdulhamid II, gave the Ottoman capital an eclectic look just like many other cities around the world at this time. The nineteenth century introduced Istanbul to an extended telegraph and railway network connecting it to both Europe and the rest of the Ottoman Empire. Also in the nineteenth century, the city witnessed the increasing popularity of apartment buildings as a new form of urban dwelling to meet the needs of its increasing population particularly after the arrival of refugees fleeing from the Balkan territories the Ottomans lost in battle. Other architectural typologies that started appearing in the Ottoman capital by the late nineteenth century included European-style hotels to accommodate the foreigners frequenting the city, technical schools to improve its workforce, and pavilion plan hospitals to combat the spread of infectious diseases. In 1889, the *Şehremâneti* (the municipal administration) of Istanbul commissioned the local architect Patrokli Kompanaki (n.d.) to design a 200-bed capacity pavilion-style women's hospital featuring twelve pavilions, a surgical suite in par with European standards, a two-story section for hospital staff, and an additional pavilion for the destitute (Figures 2.4-2.5).[219] This pavilion plan hospital was to be the new location of the *Haseki Darüşşifası* (Haseki Women's Hospital), originally designed by Mimar Sinan (Sinan the Architect) and constructed circa 1550. The new facilities became partially open in 1891 and were fully operational in 1893, but had to be evacuated in 1894 after incurring damages in the earthquake of July 10, 1894, and it remained closed until the completion of repairs in 1913.[220] Perhaps because of its closure soon after completion, some architectural

[218] Gül, *Emergence of Modern Istanbul*, 56; Ceren Göğüş and Zeynep Kuban, "German Traces in Ottoman Istanbul: The Kaiser Wilhelm Fountain," *A | Z ITU Journal of the Faculty of Architecture* 12, no. 2 (Jul. 2015): 119-29.

[219] Istanbul University Library, Yıldız Albums, 90833. Osman Nuri Ergin, *Mecelle-i Umûr-ı Belediye, vol. 4* (Istanbul: Arşak Garoyan Matbaası, 1915), 361-2; Macit Koldaş, "Kadın Şefkatinin Sembolü: Haseki Darüşşifası," *The Medical Bulletin of Haseki Training and Research Hospital* (Mar. 2011): 2; Nil Sarı and Ahmet Zeki İzgöer, "Osmanlılarda Kadınlara Mahsus Hastane, Klinik, Koğuş ve Doğumhanelerin Gelişimi," in *İmparatorluğun Son Asrında Osmanlılar (Kurumlar-İnsanlar-Kaynaklar)*, eds. Fatih Bozkurt and Burhan Çağlar (Istanbul: Kronik Kitap, 2021), 223. See also the official website of the Haseki Hospital, accessed Mar. 7, 2024, https://hasekieah.saglik.gov.tr/EN-853136/history.html. Records and information about Kompanaki's life and times could not be found.

[220] In 1843, it was renamed as Haseki Sultan Kadın Darüşşifası (Haseki Sultan Women's Hospital) and Haseki Zindanı (Haseki Prison) since the complex started serving as a women's prison as well which included two hospital wards with a total of 30 patient-capacity reserved for sick inmates, most of whom

historians dismiss Kompanaki's design and referred to Hamidiye *Etfal* (Children's) Hospital, which was built in 1899, as the first pavilion plan hospital of the Ottoman Empire instead.[221] Hamidiye *Etfal* (Children's) Hospital was designed by Franz Niebermann[222] and was one of the most remarkable products of Abdulhamid II's reign in terms of healthcare architecture (Figure 2.6). Throughout the nineteenth century, many European architects and builders found employment in the Ottoman court, and Niebermann was not an exception. For instance, in the 1840s Sultan Abdülmecid I commissioned the British architect William James Smith (1807-1884) for several healthcare-related projects as I will discuss further later in this chapter.

The term *İstibdat* (regime of oppression) characterized the period between the years 1878 and 1908 because of the autocratic rule of Abdulhamid II driven by his fear of conspiracies and plots against him. Four students at the *Askerî Tıbbiye* (Military Medical College) started an opposition movement in 1889, which led to the formation of the *İttihat ve Terakki Cemiyeti* (The Committee of Union and Progress) by the mid-1890s thanks to the efforts of dissidents who managed to escape to Europe, and in 1895 the group's branch in France embraced the name *Les Jeunes Turcs*.[223] With fears that his fate would be similar to that of his deposed and mysteriously deceased uncle Abdülaziz, Abdulhamid II became particularly suspicious of the military officers and medical students, which halted the construction of a new medical school in Haydarpaşa co-

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were involved in sex work prior to their imprisonment. The hospital later operated under the jurisdiction of the 'Şehremâneti' which was formed in 1855. In 1880, the hospital was relocated from its original sixteenth century complex to the facilities of the Women's Prison in Sultanahmet following administrative changes. In 1884, the *Şehremâneti* purchased a residential konak (The Konak of Moralı Ali Şefik Bey) and repurposed it as a 100-bed capacity facility for the Haseki Hospital. The repurposed building was demolished in 1889 since the building was not able to meet the demands of the time. The *Şehremâneti* purchased a neighboring plot in the same year and commissioned the new pavilion plan facilities to be built here. For more information, see Süheyl Ünver, *400. Yıl Dönümü Dolayısıyla Haseki Hastanesi Tarihçesi: 1539-1939* (Istanbul: I.U. Tıp Tarihi Enstitüsü, 1939); Nimet Taşkıran, *Hasekinin Kitabı* (Istanbul: Haseki Hastanesi Kalkındırma Derneği, 1972); Doğan Kuban, "Haseki Külliyesi," in *Dünden Bugüne İstanbul Ansiklopedisi* vol. 3, eds. İlhan Tekeli and Semavi Eyice (Istanbul: Türkiye Ekonomik ve Toplumsal Tarih Vakfı, 1993), 4-6; Sema Doğan, "Haseki Külliyesi," in *TDV İslâm Ansiklopedisi, vol*. 16, eds. Bekir Topaloğlu, İsmail E. Erünsal, Ahmet Özel (Istanbul: İSAM, 1997), 370-2; Feryal Saylıgil Gündüz, "Osmanlı Devleti'nde Kadınlara Hizmet İçin Açılan Hastane ve Klinikler" (MA thesis, Istanbul University, 1999), 23-62.

[221] Yavuz, "Batılılaşma Döneminde Osmanlı Sağlık Kuruluşları," 128. Nuran Yıldırım writes that Hamidiye Etfal was indeed the second pavilion style hospital in the Ottoman Empire after the Haseki Nisa (Women's) Hospital designed by Patrokli Kompanaki. See Nuran Yıldırım, *Hastane Tarihimizde Bir Kutup Yıldızı: Hamidiye Etfal Hastanesi* (Istanbul: Ajansfa, 2010), 127.

[222] While there are no detailed records of Niebermann's life and times, Yıldırım Yavuz writes that Niebermann was not a trained architect, but a carpenter at the Court of Abdulhamid II. Engineer Nâzım Paşa contributed significantly to the realization of the project. For more information see, Bolak, "Hastanelerimiz," 68; Yavuz, "Batılılaşma Döneminde Osmanlı Sağlık Kuruluşları," 129.

[223] Zürcher, *Turkey*, 86-87

designed by Alexandre Vallaury and Raimondo D'Aronco.[224] Censorship rules were expanded in 1891 and dissidents found themselves either exiled or in jail. In the 1890s and 1900s, there were also prohibitions on the sale and possession of foreign publications in the Ottoman Empire such as the London-based *Times* newspaper.[225] The prohibitions applied to foreigners as well. For instance, in September 1893 a copy of Dante Alighieri's *Inferno* which arrived in the Ottoman Empire for the British Seamen's Hospital was not let through the customs because it was banned in the country.[226] Furthermore, as per Ottoman state records, in the early 1900s Ottoman authorities monitored the private correspondence of British individuals to ensure that they were not involved in suspicious activities.[227]

Despite being an authoritarian, Abdulhamid II spearheaded the expansion of communication and railway networks, and commissioned the construction of numerous train stations, schools, and hospitals across the Ottoman Empire.[228] Among the schools he founded was the *Hendese-i Mülkiye* civil engineering college (1883), which resumed the mission to create a generation of Muslim engineers. In the earlier decades of the nineteenth century, Ottoman architects and engineers often came from Christian (Armenian, Greek, Levantine) backgrounds whereas Muslim elites usually preferred careers in the military or governmental administration.[229] Among the students of the *Hendese-i Mülkiye* was Ahmet Kemalettin, who entered the school in 1887 and developed a particular interest in the architectural design courses of August Jasmund. Yıldırım Yavuz writes that the political atmosphere in Istanbul and the rise of Turkish nationalism during young Kemalettin's years as a student must have impacted his approach to architecture as much as the influence of Jasmund, under whom he worked as an assistant upon his graduation from *Hendese-i Mülkiye* in 1891.[230] Yavuz also speculates that the probability of Kemalettin being involved as a student in Jasmund's highly praised Sirkeci train station project, which became operational in 1890, was quite high.[231] The symmetry,

[224] Yavuz, "Batılılaşma Döneminde Osmanlı Sağlık Kuruluşları," 131-32.
[225] BOA, DH.MKT. 865/98, H-16-04-1322 (Jun. 30, 1904)
[226] BOA, MF.MKT. 182/16, H-19-03-1311 (Sep. 30, 1893)
[227] BOA, ZB. 338/20, R-07-1321 (Dec. 20, 1905)
[228] For a comprehensive catalogue of hospitals built during the reign of Abdulhamid II see, Nil Sarı, Ahmet Zeki İzgöer, and Ramazan Tuğ, *Hospitals Founded and Improved during the Reign of Sultan Abdulhamid II in the Light of Documents from the Prime Minister's Ottoman Archives* (Istanbul: Nobel Tıp Kitabevleri, 2014).
[229] Yıldırım Yavuz, "Mimar Kemalettin Bey, 1870-1927," *ODTÜ Mimarlık Fakültesi Dergisi* 7, no. 1 (Spring 1981): 56.
[230] Ibid., 57-58.
[231] Ibid., 58.

spatial hierarchy, and eclecticism of Jasmund's design reflected the Beaux-Arts composition trends merged with Islamic historicism.[232] For instance, the Sirkeci train station featured rows of Moorish-inspired fenestration nodding to North Africa and the Alhambra of Islamic Andalusia (Figure 2.7). The advertisement posters for the Orient Express, which transported passengers from Paris to the Sirkeci train station in Istanbul, also highlighted Moorish architectural elements (Figure 2.8). The German government had originally sent Jasmund to Istanbul in 1888 to carry out a survey of Ottoman architecture, but he remained in the city until 1911 and undertook local commissions and teaching positions.[233]

In 1895, Mimar Kemalettin travelled to Berlin with the scholarship the Ottoman government provided to further his architectural education and returned to the Ottoman Empire in 1900 after completing his studies at the Charlottenburg *Technische Hochschule* and working for several German architectural firms.[234] Upon his return, he designed two *türbe*s (monumental tombs) in the Fatih district of Istanbul: the *türbe* of Ahmed Cevad Paşa (b. 1900) and the *türbe* of Gazi Osman Paşa (b. 1900) (Figures 2.9-2.10). While these domed structures alluded to Ottoman architecture to a certain degree, they were essentially neoclassical in style featuring pedimented gates with columns. When Abdulhamid II decided to commission a hospital in Berlin as a gift circa 1902, Kemalettin prepared plans for the Berlin Hamidiye Hospital and presented them to the sultan (Figure 2.11).[235] The elevations for two sets of drawings for this unrealized project featured Orientalist and neoclassical façades. The floor plans displayed that Kemalettin demonstrated an understanding of the Nightingale-ward system and the latest trend to cater to wealthier patients since the building was to have two six-bed wards, one for male and one for female patients, and two private rooms. The foreword accompanying the floor plans Kemalettin presented to the sultan in a green silk cover confirmed both his interest in the latest developments in healthcare architecture and an eagerness to display symbols of Ottoman culture in the building's design:

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[232] Gül, *Emergence of Modern Istanbul*, 57.
[233] Yavuz, "Mimar Kemalettin," 57; Mehmet Yavuz, "Mimar August Jasmund Hakkında Bilmediklerimiz," *Sanat Tarihi Dergisi* 13, no. 1 (Apr. 2004): 181-205.
[234] Yavuz, "Mimar Kemalettin," 59.
[235] Nuran Yıldırım, "Birinci Ulusal Mimarlık Akımının İlk Örneklerinden Kemaleddin Bey'in Berlin Hamidiye Hastanesi Keşif Defteri ve Planları," *Toplumsal Tarih* 188 (Aug. 2009): 2-9; Nuran Yıldırım, *14. Yüzyıldan Cumhuriyet'e Hastalıklar, Hastaneler, Kurumlar: Sağlık Tarihi Yazıları* I (Istanbul: Tarih Vakfı Yurt Yayınları, 2014), 362-75.

> The façade will be organized in a colorful fashion using stones of Hereke in various colors. The entirety of the building will be in accordance with scientific construction principles and the Berlin Building Ministry regulations. The interior ornaments will be composed of simplicity, elegance, and sincerity without compromising the profession of Ottoman architecture. The pavilion type building where the patient wards are situated will be organized and built according to the latest developments, and it will be completed as the perfect example of a hospital of the time. The interiors will feature materials required to accommodate medical discoveries.[236]

Interestingly, Kemalettin used the term *mimari-i Osmani* implying that he regarded the style of his work and the work of his contemporaries, including that of his teacher August Jasmund, as drawing from Ottoman rather than Islamic-revivalist architecture. One of the main motivations of the nineteenth century Ottoman elite in commissioning publications such as the *Usul-i Mimari-i Osmani* or Ottoman pavilions that displayed modern interpretations of local building traditions at the Worlds' Fairs of Paris (1867) and Vienna (1873) was to counter the Orientalist and superficial stereotypes of Islamic architecture imagined by Europeans.[237] As Ussama Makdisi puts it:

> Ottoman reformers felt compelled to respond to what they saw as European misrepresentations of the Islamic East. Islam in this vein served to signify the empire's modern historical and cultural difference from the West in an era of otherwise rampant westernization.[238]

Moreover, as Zeynep Çelik explains Ottoman architecture had an influence on European architecture:

> […] the Ottoman buildings at the 1867 fair themselves affected European architectural thought. If they heralded a new theoretical viewpoint from which the Ottoman architectural heritage could be assessed and recycled, they also revised European architects' and architectural critics' stereotypes of Islamic architecture as a merely sensuous play of decorative devices.[239]

Another up-and-coming Ottoman architect at the turn of the century was the *École des Beaux-Arts* graduate Vedat Bey, the son of the *vali* (governor, local administrator) of the Kastamonu province at the time, and he designed the *Kastamonu Hükümet Konağı* (The Town Hall of Kastamonu) in his twenties. Vedat did not supervise the implementation of the project which was built in 1901, but ensured that his design would result in a building that displayed characteristics of local building traditions such as overhanging eaves (Figure 2.12).[240] Both Kemalettin and Vedat possibly consulted with *Usul-i Mimari-i Osmani* in their work.[241] Vedat particularly relied on such sources and

[236] Yıldırım, "Birinci Ulusal Mimarlık," 5; Yıldırım, *14. Yüzyıldan Cumhuriyet'e Hastalıklar*, 365-66.
[237] Çelik, *Displaying the Orient*, 96; Makdisi, "Ottoman Orientalism," 769.
[238] Makdisi, "Ottoman Orientalism," 769.
[239] Çelik, *Displaying the Orient*, 96.
[240] Süha Özkan, "Mimar Vedat Tek (1873-1942)," *Mimarlık* 11-12 (Nov. 1973): 49.
[241] Uğur Tuztaşı, "İdeal Osmanlı Üslûbu Arayışında Üç Mimar: Montani Efendi, Kemâlettin Bey ve Vedat Bey," *MSGSÜ Sosyal Bilimler* 98, no. 2 (2010): 98-107.

looked for inspiration in Ottoman and Seljuk architecture since these were not sufficiently covered in the *École des Beaux-Arts* curriculum.[242]

In July 1908, the revolutionary activities of the Young Turk officers in the Ottoman army forced Abdulhamid II to reinstate the constitution and reestablish the parliamentary monarchy system marking the beginning of the *İkinci Meşrutiyet* (Second Constitutional) era (1908-1920).[243] *Meclis-i Umûmî* (the Ottoman Parliament) deposed Abdulhamid II and replaced him with his brother Mehmed V in 1909. Turkish architectural historians poignantly mark that year as the beginning of the *Birinci Ulusal Mimarlık* (First National Architecture) movement with the first example of this new era being Vedat's Grand Post Office building in Sirkeci which was opened in 1909 (Figure 2.13).[244] In reality, Kemalettin's later designs such as the Edirne Train Station, built in 1914 in the Karaağaç district of the Edirne province, continued to reference his teacher Jasmund's design for the Sirkeci train station in Istanbul.[245] In the final three decades of the Ottoman Empire, the architectural repertoire of state-commissioned structures was mostly composed of buildings which were essentially European in terms of their design. The buildings classified as representatives of the First National Architecture movement were also European-style structures even though they differed in their approach to historicism by incorporating decorative elements found in Seljuk and classical Ottoman architecture presented in sources such as the *Usul-i Mimari-i Osmani*.

When H. Percy Adams (1865-1930), the architect commissioned to design the British Seamen's Hospital in Istanbul, visited the city in the summer of 1901, he must have seen a wide range of architectural styles from Byzantine to Ottoman, from neoclassical to Art Nouveau, neo-Baroque and even George Edmund Street's (1824-1881) representation of the British neo-Gothic in the Crimean Memorial Church (b. 1858-1868). He might have also seen recently completed or ongoing construction projects, many which were designed by European or European-trained architects mostly with an Orientalist approach, a style he was probably already familiar with through examples in

[242] Özkan, "Mimar Vedat Tek," 47.
[243] The liberal reforms of the Committee of Union and Progress, such as the integration of women into the public life, raised eyebrows among the Islamist factions in the Ottoman society which resulted in a revolt calling for the restoration of the Islamic Shariat law in April 1909. This event is known as the *31 Mart Vakası* (The Incident of March 31). Zürcher, *Turkey*, 96-97.
[244] Sibel Bozdoğan, *Modernism and Nation Building: Turkish Architectural Culture in the Early Republic* (Seattle, WA and London: University of Washington Press, 2001); Aydan Balamir, "Mimarlık ve Kimlik Terimleri I: Türkiye'de Modern Yapı Kültürünün Bir Profili," *Mimarlık* 313 (Sep.-Oct. 2003): 19-25.
[245] Yavuz, "Mimar Kemalettin," 58.

Britain such as the Brighton West bandstand (b. 1884) designed by Philip Lockwood (1821-1908). The newer Istanbul structures Adams saw most likely included August Jasmund's Sirkeci Train Station which had opened in 1890, and the works of Alexandre Vallaury (1850-1921) such as the *Müze-i Hümâyûn* (Imperial Museum of Archaeology) which had opened in 1891, offices of the *Düyûn-u Umumiye* (Public Debt Administration) built in 1897, the Pera Palace Hotel which had opened in 1895, and the ongoing construction of the *Tıbbiye Mektebi* (Medical School) building which had started in 1894 (opened in 1903).[246]

Since the founders of the First National Architecture movement Mimar Kemalettin and Vedat Tek were still up-and-coming architects working either on projects outside Istanbul as Vedat did with the Kastamonu Townhall, or on smaller projects such as the two neoclassical/Ottomanist *türbe*s that Kemalettin designed in the Fatih district of Istanbul, it was not likely that Adams saw any of their work during his visit. One building that somewhat resembled the final design of the central-towered British Seamen's Hospital in Istanbul at the time of Adams' visit was the Ottoman Naval Hospital building in the Kasımpaşa district of Istanbul designed more than half a century ago by the fellow British architect William James Smith (Figure 2.14).[247] The main motivation of H. Percy Adams' visit to Istanbul in early June of 1901 was probably to see the topography of the site, its surroundings, and to talk business with the Hospital Committee rather than to explore the local architecture.

2.3.2 The Galata District

The spatial manifestation of European powers in the Ottoman Empire was perhaps most evident in the Galata district of Istanbul where many of the creditor bankers, the patrons of *Düyûn-u Umumiye*, resided and had offices. Although French influence was still the

[246] Also in the early 1900s, there were some proposals which would change Istanbul's cityscape such as Parisian architect Joseph Antoine Bouvard's (1840-1920) plans to transform the Bayezid Square and French engineer Ferdinand Joseph Arnodin's (1845-1924) illustrations for bridges that would connect the European and Anatolian sections of the city. Arnodin produced illustrations to connect the Sarayburnu and Üsküdar. There was also another bridge which Zeynep Çelik attributes to Arnodin that connected Kandilli and Rumelihisarı. However, it stylistically resembled the work of Jasmund as Murat Gül explains. While Bouvard never visited Istanbul, Arnodin most probably did not either. All of these proposed projects remained unrealized. For more information on these unrealized projects see Zeynep Çelik, "Bouvard's Boulevards: Beaux-Arts Planning in Istanbul," Journal of the Society of Architectural Historians 43, no. 4 (Dec. 1984): 341-55; Zeynep Çelik, *The Remaking of Istanbul: Portrait of an Ottoman City in the Nineteenth Century* (Berkeley and Los Angeles: University of California Pres, 1993), 107-25; Gül, *Emergence of Modern Istanbul*, 58-63.

[247] For a detailed analysis of the Naval Hospital building in Kasımpaşa see Seda Kula Say, "Kasımpaşa Bahriye Hastanesi Binaları," in in *Sultan Abdülmecid'in Bir Mimarı: William James Smith,* eds. Ilona Baytar and Jale Beşkonaklı (Istanbul: Kültür A.Ş., 2016), 85-97.

most visible European presence in the city by the mid-nineteenth century, British land acquisition and building activity gradually increased in Istanbul throughout the nineteenth century particularly after the Baltalimanı Trade Treaty of 1838 and the Crimean War (1853-1856).

After 1838, the British Government acquired more property in the Ottoman Empire to accommodate the needs of British commerce in Ottoman ports. Galata, the section to the north of the Golden Horn, was where the Levant Company owned property and oversaw the establishment of the British consular offices for commerce and other associated activities until it was superseded in 1825 by the British Government and replaced by the Foreign Office.[248] The dissolution of the Levant Company in 1825 was a move to promote a free trade policy and to empower the official governmental authorities as representatives of Britain in the Near East by dismantling the authority of merchant representatives of the Levant Company whose interests could at times be at odds with those of Britain's foreign policy.[249]

Galata was essentially Istanbul's European quarter in the nineteenth century. This densely populated settlement of thirty-seven hectares enclosed within fifteenth-century walls was also home to some of the local non-Muslims.[250] Galata Tower, the district's highest point, was the most significant landmark embellishing Galata's tight street network which did not have any principal avenues.[251] In the late 1830s, when the Anglo-Turkish relations were improving, Galata did not boast any monumental structures, apart from the Galata Tower, unlike the eastern half of the Istanbul peninsula where structures such as Hagia Sophia and the Topkapı Palace stood. Üsküdar neighborhood, the city's other residential district on the eastern side of the Bosphorus, was not as densely populated as the settlements in Galata, yet it featured grand building complexes such as the *külliye* of Mihrimah Sultana built in the 1540s by Sinan the Architect. Buildings in Galata were mostly utilitarian in nature by the early nineteenth century and did not necessarily assert any signs of power.[252] Even though Britain's presence in the Ottoman

[248] Lucia Patrizio Gunning and Despina Vlami, "Continuity and Change in the British Diplomatic Service in the Levant: The 'Levantine' Question and the Lure of Antiquities," *Journal of the History of Collections* 36, no. 1 (Mar. 2024): 55-68.
[249] Despina Vlami, *Trading with the Ottomans: The Levant Company in the Middle East* (London: I.B. Tauris, 2014), 43-84.
[250] Shaw, "Population of Istanbul," 268; Çelik, *Remaking of Istanbul*, 38.
[251] Çelik, *Remaking of Istanbul*, 9.
[252] Ibid.

Empire became more apparent by the 1860s, there was no visible architectural representation of British influence in the Ottoman capital.

The 1885 census of the Ottoman Empire showed that 47% of the population of the Sixth District of Istanbul which included Galata, Pera, and Tophane consisted of foreign nationals.[253] This area became attractive for the wealthy Muslim Ottoman subjects as well in the second half of the nineteenth century. The availability of conveniences such as paved streets, gas lighting, and improved sewage facilities following the district's selection for a pilot urban development project in the aftermath of the Crimean War attracted Muslim Ottomans to this part of town.[254] The number of English, French, and Italian citizens residing in Istanbul increased during the Crimean War and to respond to their demands for amenities found in other European cities, the Ottoman Government established an institution called the *şehremaneti* following the French model of *préfecture de la ville*.[255] The government selected the *şehremini* (*préfet*) along with twelve members of the city council which included representatives of each *millet* (ethnic/religious group) and reputable guild members.[256] When this city council proved unsuccessful in less than a year, the Ottoman government formed the *İntizam-ı Şehir Komisyonu* (Commission for the Order of the City) on May 9, 1855.[257] Unlike the multi-ethnic city council, members of this commission were selected based on experience and comprise of both Ottoman and foreign nationals who had been residing in the city for a long time but were familiar with European methods of city administration.[258] This commission was able to establish a system to regulate the street network and divided the city into fourteen districts; Galata,

[253] Shaw, "Population of Istanbul," 38.
[254] Steven Rosenthal, "Foreigners and Municipal Reform in Istanbul: 1855-1865," *International Journal of Middle East Studies* 11, no. 2 (Apr. 1980): 241-42; Çelik, *Remaking of Istanbul*, 38-39.
[255] Çelik, *Remaking of Istanbul*, 44.
[256] "Şehremaneti Nizamname Lahiyası" (1854), articles 3 and 4; see also İlber Ortaylı, *Tanzimattan Sonra Mahalli İdareler (1840-1878)* (Türkiye ve Orta Doğu Amme İdaresi Enstitüsü, 1974), 111; Çelik, *Remaking of Istanbul*, 44.
[257] The city council failed mostly due to lack of knowledge and experience. For more information, see Steven T. Rosenthal, *The Politics of Dependency: Urban Reform in Istanbul* (Praeger, 1980); Ortaylı, *Tanzimattan Sonra Mahalli İdareler*; Çelik, *Remaking of Istanbul*; Nilay Özlü, "A Modernization Utopia: Galata and Pera during the Late Ottoman Era," *AURUM Journal of Engineering Systems and Architecture* 3, no. 1 (2019): 113-27.
[258] Osman Nuri Ergin, *Mecelle-i Umur-i Belediyye, vol. 1* (Matbaa-i Osmaniye, 1922 – reprint Istanbul: IBB Kültür AŞ Yayınları, 1995), 1378; Rosenthal, *Politics of Dependency*; Rosenthal, "Foreigners and Municipal Reform in Istanbul," 227-45; Çelik, *Remaking of Istanbul*; Özlü, "Modernization Utopia," 113-27.

the Sixth District,[259] became the model area.[260] An 1857 report explaining the reason behind the designation of the Sixth District as the model area was published in the official state newspaper of the Ottoman Empire, *Takvim-i Vekayi*:

> Since to begin all things in the above-mentioned districts [meaning the thirteen districts except Galata] would be sophistry and unworthy, and since the Sixth District contains much valuable real estate and many fine buildings, and since the majority of those owning property or residing there have seen such things in other countries and understand their value, the reform program will be inaugurated in the Sixth District.[261]

The Sixth District functioned almost autonomously between 1855 and 1877,[262] which gave rise to a socio-political organization that granted ambassadors some of the powers and authority enjoyed by colonial governors. In his travel journals dated 1857-1858, Nassau William Senior (1790-1864) described how a Turk might have viewed the effects of this system on the architecture of Galata:

> The creature of the capitulations. The foreign ambassadors reign there. You have the streets in which you cannot walk, houses jammed together without a plan, and a population which is la creme de la canaille. [...] It shows what is gained by withdrawing people from their natural rulers.[263]

Nassau William Senior also reported a European's views on the reason why diplomats lived in the district as "the desire to domineer" and "to inhabit a place in which they can insult the Turks."[264] Galata housed the British compound in Istanbul as well. British edifices here included an embassy building built between 1842 and 1854, a hospital for sailors which initially started being built in 1846, a consular prison, a chapel on embassy grounds, all designed by William James Smith.

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[259] While Zeynep Çelik writes that this area was labelled as the Sixth District because it fell into the sixth order in a clockwise configuration, Osman Nuri Ergin argues that this title was a symbolic gesture inspired by the *sixième arrondissement* in Paris which was very popular among Ottomans at the time. Ergin, *Mecelle, vol. 1*, 167.

[260] Ibid., 1378; Osman Nuri Ergin, *İstanbul Şehreminleri, 1855-1928* (Istanbul, 1929 – reprint İşaret Yayınları, 2007), 27. See also Çelik, *Remaking of Istanbul*.

[261] Ergin, *Mecelle, vol. 1*, 1314; translated in Rosenthal, *Politics of Dependency*, 51; translation also appears in Çelik, *Remaking of Istanbul*, 45.

[262] The municipal administration model expanded to other districts of Istanbul in 1868. The number of districts increased to twenty in 1877 with a new law called the *Dersaadet Belediye Kanunu* precisely to imitate Paris. This law reinforced building codes, regularized roads and quays, and standardized the construction of water and sewage lines. It also gathered the administration of all districts under the *şehremaneti* and deprived the Sixth District of its autonomous status. In 1878, the organizational structure changed again, and the city was now divided into ten districts and remained so until 1908. See Ergin, *Mecelle, vol. 1*, 1446, 1482; Osman Nuri Ergin, *Türkiyede Şehirciliğin Tarihî İnkişafı* (Istanbul: Cumhuriyet Gazete ve Matbaası, 1936), 129; Çelik, *Remaking of Istanbul*, 57-58.

[263] Nassau W. Senior, *A Journal Kept in Turkey and Greece in the Autumn of 1857 and the Beginning of 1858* (New York: Arno Press (reprint), 1977): 72-3. Also cited by Crinson, *Empire Building*, 137.

[264] Nassau W. Senior, *Journal Kept in Turkey and Greece*, 72-73.

Certain parts of Galata were famous for its brothels and like hospitals, the number of brothels increased in the second half of the nineteenth century particularly during and after the Crimean War.[265] Venereal diseases, particularly syphilis known in Turkish as '*frengi*' meaning 'French' in Ottoman Turkish in association with the Ottoman view of Western society as morally corrupt and sexually promiscuous, became a major public health problem in the years following the Crimean War.[266] The Ottoman Government officially recognized venereal diseases as a public health problem, formed a committee to address it, and in 1883 a hospital with the particular purpose of treating sex-workers was established in the district with the name 'The Women's Hospital of the Sixth District' (*Beyoğlu Nisa Hastanesi*/*Emraz-ı Zühreviye Hastanesi*).[267]

2.4 Health of the British Sailors

2.4.1 British Hospitals for Sailors

By the mid-nineteenth century, sailors had gained an unfortunate reputation as vectors of disease.[268] Since the eighteenth century, the Royal Navy of Britain had been paying attention to the health of its sailors and carefully constructed naval hospitals began to appear as early as the 1740s in British territories. The ideas synonymous with pavilion plan hospitals were already present in these eighteenth-century buildings. For instance, the covered verandas at the ground level of the Royal Naval Hospital in Gibraltar, built between 1741 and 1746, functioned as outdoor corridors enabling the isolation of wards when needed.[269] Royal Naval Hospital in Stonehouse, Plymouth designed by the master

[265] Malte Fuhrmann, "'Western Perversions' at the Threshold of Felicity: The European Prostitutes of Galata (1870-1915)," *History and Anthropology* 21, no. 2 (Jun. 2010): 159-72; Mark David Wyers, "Selling Sex in Istanbul," in *Selling Sex in the City: A Global History of Prostitution, 1600s-2000s*, eds. edited by Magaly Rodríguez García, Lex Heerma van Voss, Elise van Nederveen Meerkerk (Leiden and Boston: Brill, 2017), 285.

[266] Nuran Yıldırım, "Tanzimat'tan Cumhuriyet'e Koruyucu Sağlık Uygulamaları," *Tanzimat'tan Cumhuriyet'e Türkiye Ansiklopedisi* 5 (Istanbul: İletişim Yayınları, 1985): 1327-331; Fatma Bulut, "Osmanlı'dan Cumhuriyet'e Tehlikeli Bir Miras: 'Frengi'," *Tarih Okulu* 3 (Spring 2009): 109-23.

[267] Yıldırım, "Tanzimat'tan Cumhuriyet'e Koruyucu Sağlık," 1327-331; Bulut, "Osmanlı'dan Cumhuriyet'e Tehlikeli Bir Miras," 109-23. This hospital continues to exist today serving the same purpose. It changed names several times with varying degrees of political correctness and functioned as an HIV testing center during the AIDS epidemic of the 1980s and early 1990s.

[268] Manikarnika Dutta, "Cholera, British Seamen and Maritime Anxieties in Calcutta, c. 1830s-1890s," *Medical History* 65, no. 4 (2021): 313-29.

[269] Emmakate MacQueen Buchanan, "An Enlightened Age: Building the Naval Hospitals," *International Journal of Surgery* 3, no.3 (2005): 223.

mason and builder Alexander Rovehead circa 1745-1746 and constructed between 1758 and 1765 became the first British hospital built in separate pavilions.[270]

While the Royal Navy provided healthcare services to its seafaring naval infantry, merchant sailors did not receive the same level of care and attention.[271] The creation of the Committee for the Relief of Distressed (Destitute) Seamen in 1818 as a response to public sympathy towards out-of-work mendicant sailors on the streets of London led to the establishment of the Seamen's Hospital Society on March 8, 1821.[272] The Royal Navy was supportive of this charitable organization and leased its first hospital ship, the 50-gun HMS *Grampus*[273] and later granted the use of HMS *Dreadnought* as a floating hospital for merchant sailors.[274] The Seamen's Hospital Society was also involved in the establishment of land hospitals including the Dreadnought Hospital which was established as the Society's flagship hospital in newly acquired buildings in Greenwich on April 13, 1870[275] and in 1877, the Dreadnought School for Nurses was founded.[276]

According to the records of the Seamen's Hospital Society infectious diseases which spread widely among sailors between 1821 and 1870 included ague, typhus, dysentery, enteric fever, epidemic cholera, tuberculosis, syphilis, and gonorrhea.[277] Smallpox was prevalent ashore during this time; however, this was not the case among sailors.[278] Scurvy was still common among merchant sailors (the Mercantile Marine) even though it had disappeared in the Royal Navy by the early nineteenth century. This was mostly due to poor lime and lemon juice storage conditions on merchant vessels.[279] Eradication of scurvy did not occur until the introduction of the Mercantile Maritime

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[270] Howard Montagu Colvin, *A Biographical Dictionary of British Architects 1600-1840* (London: J. Murray, 1978), 707 (In Colvin's dictionary the entry for Rovehead is under Rouchead); Christine Stevenson, *Medicine and Magnificence: British Hospital and Asylum Architecture 1660-1885* (New Haven, CT: Yale University Press, 2000), 184; Buchanan, "Enlightened Age," 226; Ann-Marie Akehurst, "The Hospital de La Isla Del Rey, Minorca: Britain's Island Hospital," *Architectural History* 53 (2010): 153.
[271] Gordon Charles Cook, "The Seamen's Hospital Society: a progenitor of the tropical institutions," *Postgrad Med J.* 75, no. 890 (Dec. 1999): 715.
[272] Gordon Charles Cook, "Committee for the Relief of Distressed Seamen: Correspondence from the Admiralty in 1818-19," *Postgrad Med J*. 83, no. 975 (Jan. 2007): 54.
[273] Today the Seamen's Hospital Society is known as the Seafarers Hospital Society and HMS *Grampus* appears on its logo.
[274] Gordon Charles Cook, *From the Greenwich Hulks to Old St Pancras: a history of tropical disease in London* (Athlone Press, 1992), 338; Cook, "Seamen's Hospital Society," 715.
[275] Eric Goldsmith and A.G. McBride, "Dreadnought Seamen's Hospital," *British Medical Journal* 1, no. 6024 (Jun. 1976): 1512.
[276] Ibid.; Cook, "Seamen's Hospital Society," 716.
[277] Cook, "Seamen's Hospital Society," 715.
[278] Goldsmith and McBride, "Dreadnought Seamen's Hospital," 1511.
[279] Cook, "Seamen's Hospital Society," 716.

Amendment Act of 1867 which required the inspection and testing of lime juice on merchant ships.[280]

The British Seamen's Hospitals at foreign ports predated the Seamen's Hospital Society and they mainly served active sailors who fell ill while on duty. In other words, they were not necessarily charitable organizations but had a function similar to the Roman *valetudinaria* that aimed to minimize loss of labor capital due to sickness and injury.

2.4.2 British Hospitals for Merchant Sailors in the Ottoman Empire

The roots of the British hospitals for merchant sailors in the Ottoman Empire went back to the 1730s and the city of Izmir (Smyrna) where a British Seamen's Hospital was established by the Levant Company. When the Levant Company was replaced in 1825 by the British Foreign Office, the site of this hospital in Izmir was transferred to the British government.[281] The U.K. parliament approved the establishment of a hospital in Istanbul for sailors working on British merchant ships in 1842, and following this decision a rented house in Galata served as a make-shift hospital for over a decade.[282] Financing these two sailors' hospitals in Izmir and Istanbul remained a concern for different factions of the British government throughout their existence. For instance, the British Consul General covered the cost of rent for the house in Istanbul from the year it was founded in 1842, but the British Treasury did not issue a reimbursement until 1854.[283] Debates, objections, and delays to the commissioning of a purpose-built hospital in Istanbul continued for many years. The earliest document indicating plans to build a British Seamen's Hospital in Istanbul was a memorandum from November 26, 1845, by Sammuel McGuffog (n.d.-1856), the British physician who settled in Istanbul and worked at the make-shift British Seamen's Hospital.[284] McGuffog explained the conditions at the hospital in his appeal for a new building:

> Hospital clothing has never been purchased, and I have always endeavoured to manage with the smallest possible quality of bedding and bed clothes for this reason. The house we occupy as a

[280] Ibid.; Gordon Charles Cook, "Harry Leach, MRCP (1836-1879): control of scurvy in the British Mercantile Marine, and first Port Medical Officer to the City of London," *Journal of Medical Biography* 8, no. 3 (2000): 133-39.
[281] The National Archives (U.K.), FO 369/5781
[282] Ibid.
[283] Ibid.
[284] The National Archives (U.K.), Work 10/42/1

> hospital is entirely constructed of wood, consequently it is continually exposed to the risk of fire, and the probable destruction of the entire property.[285]

Maintenance costs and the increasing rent of the repurposed building motivated the Foreign Office to approve the commissioning of a new building for the British Seamen's Hospital, but the project did not become a priority. McGuffog died in Istanbul on June 15, 1856[286] before the completion in 1857 of the new hospital. [287]

A report in the *Shipping Gazette* dated February 29, 1896 demonstrated that the expenses of the two British hospitals in the Ottoman Empire were a subject of debate in the House of Commons and costs associated with building new facilities particularly became a point of discussion.[288] Not everyone favored the system of taxation to provide funding for the two British hospitals in the Ottoman Empire. The 1896 report cited that the remarks of Mr. Curzon, a member of the Committee of Supply on the Supplementary Estimates of the House of Commons:

> That system prevailed up to 1870, when a change was introduced. In that year for the first time the balances were paid into the home Exchequer, and from that time up to 1894 the expenditure on the hospitals appeared annually in the Estimates of the House. The dues were similarly paid yearly into the Exchequer, and after that date the cost of the hospitals formed a part of the sum taken for the Consular Vote. That system gave rise to much complaint. Mercantile bodies, hon. Members, and other gentlemen connected with shipping frequently complained of the character and amount of the dues levied, and it accordingly had been decided to revert to the old system of a separate hospital fund, which it was believed would cause less friction, and the expenses of the hospitals would, as originally, be met from the dues levied on our vessels at Constantinople and Smyrna.[289]

Committees composed of British citizens residing in Izmir and Istanbul administered the two British Hospitals in the Ottoman Empire, and the Auditor-General and Controller-General audited their accounts annually for the approval of the Secretary of State.[290] In 1894-1895 the U.K. Parliament voted for and approved the purchase of a new site for the British Seamen's Hospital in Izmir for a sum of £1,785, which was covered by the funds accumulated from dues levied on British shipping.[291] The deeds of this newly purchased site belonged to the Consulate in Istanbul unlike the site of the previous British Seamen's Hospital building in Izmir which had been built on the Levant Company's land.[292]

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[285] Ibid.
[286] The Royal College of Physicians, "Inspiring Physicians," accessed Aug. 12, 2022, https://history.rcplondon.ac.uk/inspiring-physicians/samuel-mcguffog.
[287] The National Archives (U.K.), FO 369/5781
[288] The National Archives (U.K.), MT 9/553
[289] Ibid.
[290] Ibid.
[291] The National Archives (U.K.), FO 369/44. (Office of Works correspondence dated June 8, 1906)
[292] Ibid.

The occasionally revised 'General Rules' documents of the British Seamen's Hospitals in Istanbul and Izmir were initially similar. The 'General Rules' established in 1869 granted full authority to the Surgeon Superintendent, which particularly in the case of Istanbul, caused problems amongst the British community in the city and even led to obstructions in land acquisitions and building projects.[293] Consequently, the articles concerning the managing bodies of the British Seamen's Hospital in Istanbul were modified. The first article of the 17-article document titled "General Rules for the Management of the British Seamen's Hospital at Constantinople" approved by the Secretary of State for Foreign Affairs on July 22, 1897, listed the following as members of the Committee in charge of management of the hospital:

> The Secretary of Her Majesty's Embassy, Chairman.
>
> Her Majesty's Consul, Vice-Chairmen.
>
> The Physician of Her Majesty's Embassy, or some other person to be named by the Chairman, with the approval of Her Majesty's Ambassador.
>
> Three members, British subjects, representing shipping interests, to be elected by the British Chamber of Commerce of Turkey. [294]

The first article of the document titled "General Rules for the Management of the British Seamen's Hospital at Smyrna" was also approved on July 22, 1897, and listed the following as managing Committee members of the hospital in Izmir:

> The Consul (or Acting Consul), Chairman.
>
> The Vice-Consul (or Acting Vice-Consul, Vice Chairman
>
> Two members, British subjects, to be elected by the British shipping community to represent their interests.[295]

While article 5 of the British Seamen's Hospital in Istanbul 'General Rules' of 1897 appointed the Head Surgeon as the Executive officer of the Hospital Committee, this was essentially a consultative and administrative role. As per article 4, the decisions taken by the Committee were subject to a voting procedure and as per article 3 the Head Surgeon did not have a vote:

> The Head Surgeon of the Hospital shall have a seat on the Board as a consultative extra member of the Committee, but without a vote. No decision affecting the internal administration, the

[293] The National Archives (U.K.), MT 9/478
[294] The National Archives (U.K.), AO 30/48; FO 881/6934
[295] The National Archives (U.K.), AO 30/48; FO 881/6934

> disciplinary and sanitary service of the Hospital, shall be taken by the Committee, unless the Head Surgeon shall have had an opportunity of discussing the matter under consideration.[296]

Furthermore, as per article 6 the Hospital Committee reserved the right to dismiss hospital staff if needed which enshrined the Committee's authority over the workforce at the British Seamen's Hospital in Istanbul:

> The Committee may, as occasion requires, augment or diminish the staff of the Hospital. It may create or abolish posts. It may appoint or remove any officer or member of the general staff of the Hospital, without exception, fix his or her salary and conditions of engagement, frame regulations and issue orders for the guidance of the staff. All such orders and regulations shall be communicated in writing to the Head Surgeon, shall be countersigned by him, and through him served on such members of the Hospital staff as may be affected thereby, and all the rules relating to the wellbeing of the patients, the custody of their property, and matters of general interest shall be posted in a conspicuous place within the Hospital building.[297]

Article 7 of the 1897 'General Rules' detailed the sources of funding for the British Seamen's Hospitals in Istanbul and Izmir, and clarified that the dues levied on British merchant ships were not the only sources of income for them but that the hospitals were able to generate income thanks to payments received from paying patients and sales of medication:

> The Hospital is maintained by funds provided by dues on British shipping. The funds are divided into a) a capital amount invested in British Consols in the name of the Chief Clerk of the Foreign Office and of the Assistant Paymaster-General for the time being as trustees; and b) the current revenue derived from the interest received from the capital fund, from the dues levied on British shipping visiting [the city where the hospital is located], and from paying patients, sales of medicines, &c.
>
> The dues on shipping shall be collected as heretofore at Her Majesty's Consulate, and shall be banked temporarily at [the city where the hospital is located].
>
> At the end of each quarter the surplus, if any, of dues over expenditure shall be accounted for by Her Majesty's Consul in his account with the Secretary of State; similarly any deficit shall be met by a charge in the same account.
>
> The surplus of dues, as well as the interest accruing on the capital fund, shall be credited to the Hospital account at the office of Her Majesty's Paymaster-General, and shall be operated on by the Chief Clerk of the Foreign Office for the time being.[298]

The admission of sick sailors to the hospital was administered by the Shipping Department of the British Consulate as per article 13, and as per article 15 the admission of patients who were not sailors required an order signed by the Consul and, provided there was room, their eligibility to receive treatment at the Hospital was subject to special regulations to be framed by the Committee:

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[296] The National Archives (U.K.), AO 30/48; FO 881/6934
[297] The National Archives (U.K.), AO 30/48; FO 881/6934
[298] The National Archives (U.K.), AO 30/48; FO 881/6934

> Article 13: The admission of patients, being seamen, shall be made upon the order of the officer in charge of the Shipping Department of Her Majesty's Consulate, and Returns shall be made to this officer by the Head Surgeon, as they occur, of the discharges from hospital or of deaths.
>
> […]
>
> Article 15: Persons not seamen may be admitted to the Hospital on an order signed by the Consul, subject to the special regulations to be framed by the Committee.[299]

2.4.3 Building the British Seamen's Hospital in Galata

In the mid-1840s, the availability of land left from the Levant Company[300] and the European demographics of Galata must have played a role in the decision to build the new British Seamen's Hospital edifice in this area. Furthermore, the available plot was near the Sailors' Home, a lodging establishment for sailors managed by a committee of British subjects in Istanbul. Improvement of amenities such as water, gas, and sewage management that came with the autonomous governance that the Sixth District enjoyed after the Crimean War must have made this location even more attractive for institutions such as the British Seamen's Hospital.

The first purpose-built facilities of the British Seamen's Hospital in Istanbul were not completed until 1857 despite the motivation to construct a proper hospital as early as 1845 and availability of land. In 1846, about a year after his appointment as the British Consul General in Istanbul, Abraham Carleton Cumberbatch, ordered the British embassy architect William James Smith to design a hospital building in compliance with the requirements that British Seamen's Hospital physician Sammuel McGuffog specified in a memorandum of November 26, 1845:[301]

1. Two large wards, to contain each 12 beds
2. Two small wards for the reception of particular cases, such as typhus, smallpox
3. An operation room
4. A surgeon's room
5. A laboratory
6. Hospital keeper's room
7. Hospital keeper's store room
8. Hospital clothing store room
9. Kitchen and servants room
10. Wash-house

[299] The National Archives (U.K.), AO 30/48; FO 881/6934; MT 9/478
[300] Like in Izmir, the Levant Company's properties in the Ottoman capital were handed over to the British Government in 1825 when the Company superseded.
[301] The National Archives (U.K.), Work 10/42/1

11. Cisterns and well[302]

William James Smith had started his career working for the Office of Works in Britain in 1830 as an architectural assistant and assistant surveyor and was appointed to Istanbul in 1841 in response to the Foreign Office's call for a competent architect who could rebuild the ambassadorial residence which burned down in a fire in 1831.[303] During his time in Istanbul he accepted several Ottoman commissions from high profile patrons such as Sultan Abdülmecid I, which included medical school and hospital buildings. One of these projects was a building complex for the *Mekteb-i Tıbbiye-i Şahâne* (Imperial School of Medicine) initiated in 1846 which was to encompass both a school for 300 students and a 200-patient teaching clinic, as well as a pharmacy, laboratories, a morgue, service sections, a mosque, a clock tower, two pools, and an Imperial Chamber.[304] However with a decision dated October 5, 1848, a little longer than a year after the stone laying ceremony in the presence of Sultan Abdülmecid I on February 24, 1847, the building complex was designated to house the Mecidiye Barracks instead.[305] Known today as *Taşkışla,* the building was opened in 1851.[306] Smith was commissioned to design two other healthcare-related projects in Istanbul for the Ottoman State: a military hospital in Gümüşsuyu in 1847 and the building for a hospital for the Ottoman Navy in Kasımpaşa in 1848.[307] The latter shared a similar fate with the Taşkışla building. When opened in 1850, it was to become the new premises of the high school (*idâdî*) section of the *Mekteb-i Bahriyye-i Şâhâne* (Imperial Naval Academy).[308] While these buildings were not designed in the pavilion typology, they were compatible with the ideas propagated by followers of the sanitary movement in Britain where Smith was from and they displayed

[302] Ibid., Sammuel McGuffog's memorandum, November 26, 1845.
[303] The National Archives (U.K.), Work 10/42/2; see also Crinson, *Empire Building*; Ayşegül Ağır, Afife Batur, V. Gül Cehphanecigil, Seda Kula Say, Mine Topçubaşı Çilingiroğlu, A. Hilal Uğurlu, "An English Architect in the 19th Century Istanbul: William James Smith and Taşkışla," *ITU A-Z* 12, no. 2 (2015): 94.
[304] Afife Batur, "Mecidiye Kışla-i Hümâyûnu / Taşkışla," in *Sultan Abdülmecid'in Bir Mimarı: William James Smith,* eds. Ilona Baytar and Jale Beşkonaklı (Istanbul: Kültür A.Ş., 2016), 130-36.
[305] Ibid., 130.
[306] Taşkışla was later repurposed as the building of the Istanbul Technical University's Faculty of Architecture and continues to serve that purpose today in 2024.
[307] Ağır et al., "An English Architect," 93, 95-96, 98, 101; Say, "Kasımpaşa Bahriye Hastanesi Binaları," 85-97; Seda Kula Say, "Gümüşsuyu Askeri Hastanesi," in *Sultan Abdülmecid'in Bir Mimarı: William James Smith,* eds. Ilona Baytar and Jale Beşkonaklı (Istanbul: Kültür A.Ş., 2016), 106-21.
[308] Emin Yakıtal, "Bahriye Mektebi," *TDV İslâm Ansiklopedisi, vol. 4*, edited by Bekir Topaloğlu and Ahmet Özel (Istanbul: Diyanet Vakfı Yayınları, 1991), 511; Mustafa Şanal and Timur Demir, "Heybeliada Bahriye Mektebi ve Türk Eğitim Tarihindeki Yeri," *Belleten* 76, no. 275 (Apr. 2012): 167-206; Ağır et al., "An English Architect," 96; Say, "Kasımpaşa Bahriye Hastanesi Binaları," 85-97. Upon his return to Britain, Smith worked on several repurposing projects across Britain, including the conversion of a mental hospital, Bredford Lunatic Asylum, which closed in 1860, and repurposed as a weapons factory. The National Archives (U.K.), T 1/640 1A: 20465.

nascent design elements of pavilion plan hospitals such as high ceilings, airy corridors, and wide windows that let ample amount of sunlight in.

Smith's 1846 proposal for the British Seamen's Hospital in Istanbul conceptualized the hospital building as a two-story neo-classical structure with a nine-bay façade and a flat roof on an entablature composed of a simple grouping of an architrave, frieze, and cornice (Figure 2.15). The floor plans attached to Smith's 1846 correspondence with the Consul General Abraham Carleton Cumberbatch displayed the ground floor of the hospital building housing the rooms for the surgeon and the hospital keeper on both sides of the vestibule, a laboratory accessible through the surgeon's room, two bathrooms, a wash house, a scullery, a kitchen, a dormitory, a storeroom, and a clothes room where hospital clothing would be made available (Figure 2.16). The first floor was to house two wards, two smaller fever wards, and an operation room fulfilling the requirements included in Samuel McGuffog's memorandum of 1845 (Figure 2.17).[309] As the requirement of fever wards suggested, before the popularization of the pavilion plan and the publications of Florence Nightingale there was already an inclination to separate people with certain symptoms from the other patients. However, building activity to realize Smith's 1846 proposal was never initiated even after the destruction of McGuffog's house and consular property including St. Helena's Chapel and McGuffog's house during a fire in 1847.[310]

In addition to his duties as an architect, Smith was in charge of the search for appropriate sites for British construction projects in Istanbul.[311] In a letter dated January 6, 1849, he suggested that the readily available site in Galata with the purchase of adjoining plot would be large enough to build a group of buildings to accommodate an edifice for the consular offices, a courthouse, a prison, and a forty-bed capacity hospital building for the British Seamen's Hospital.[312] In 1850, Smith submitted his plans for the site in Galata which included buildings to serve these four functions and responded to new needs and conditions in the aftermath of the 1847 fire.[313] While he added a third floor

[309] The National Archives (U.K.), Work 10/42/1
[310] Ibid. British building projects in the Ottoman Empire usually took many years to complete. St. Helena's Chapel was quickly rebuilt in 1856, almost ten years after the fire, with the availability of leftover British army materials from the war and employment of British sappers and miners stationed in Istanbul. Crinson, *Empire Building*, 230.
[311] The National Archives (U.K.), Work 10/42/1
[312] Ibid.
[313] Ibid.

to one of the proposed elevations for the British Seamen's Hospital in the 1849-1850 drawings, the floor plans, and section of the proposed building from this period displayed a two-story structure (Figures 2.18-2.19). These updated proposals for the British Seamen's Hospital revealed dramatic changes in the proposed building in comparison to the 1846 drawings. The 1849-1850 versions lacked the ornamental neoclassical elements such as the colonnaded fenestration included in the 1846 proposal. The two alternative elevations in the new proposals, one for a two-story hospital building and the other for a three-story version, both had exposed chimneys rising through three gable roofs and an unadorned three-bay façade. Smith prepared simpler elevations for the other buildings at the site in Galata with some neoclassical details such as the entablature visible underneath the hip roof of the building proposed for the consular offices (Figure 2.20). A possible explanation for this change in Smith's designs for British buildings in Istanbul could be a memorandum he received earlier from the British officials stating the ambassadorial residence should not "decorate the Turkish capital or attract the attention of passengers going through the Bosphorus" but should "provide the necessary comfort for the residence of Her Majesty's ambassador."[314]

Although it appeared less ornate on the exterior, the 1850 floor plans for the two-story version of the British Seamen's Hospital featured a more sophisticated interior organization when compared to the earlier iteration from 1846 (Figures 2.21-2.22). The ground floor in the 1850 proposal consisted of a hall, surgery, dispensary, bathroom, sitting room, dormitory, wash house, scullery, kitchen, matron's room, storeroom, clothes room, and hospital keeper's room as well as two water closets accessible through the dispensary and the common corridor area connecting different rooms on this floor. The first floor had an operation room, two fever wards, and three larger wards as opposed to the two wards in the 1846 proposal. The first-floor plan also had four water closets accessible through the wards.[315] The increase in number of wards could be both due to the need to separate patients according to their symptoms, and to increased demand for hospital services from sailors arriving in the city.

One of the primary reasons behind the delays in implementing the plans for the new British Seamen's Hospital in Istanbul was possibly the lengthy budget negotiations between the Office of Works in London, the British Foreign Office employees in Istanbul,

[314] The National Archives (U.K.), Work 10/1; see also Ağır et al., "An English Architect," 95.
[315] The National Archives (U.K.), Work 10/42/1

and those who oversaw and carried out the projects on site. Budgeting issues indeed appeared to be an impediment for almost all British building activity in the Ottoman Empire. Other reasons for delays were the shortages of labor and materials due to the simultaneous execution of multiple building projects for massive structures in Istanbul, including that of the Dolmabahçe Palace, during the reign of Abdülmecid I (1823-1861).[316] This affected all construction work in the city. For instance, the project for which Smith was initially employed in Istanbul in 1841, the British ambassadorial residence, was completed a decade later in 1851 and two decades after the fire of 1831 which had burned down the previous residence. The fact that Smith was busy with multiple projects at the same time in Istanbul probably also contributed to these delays.[317]

When asked about his activities in the Ottoman Empire, Smith justified the local commissions he undertook as "a humble source of aiding for the advancement of civilization" and that he was trying to be "useful in a barbarous country struggling to civilize itself" claiming that he was not receiving any payment for these side projects, but he was in fact receiving a monthly payment from the Palace.[318] Foreign architects like Smith were pleased to receive lucrative local commissions. For the diplomats in the Ottoman Empire, the employment of their architects by the Sultan was indeed a source of pride. For instance, in 1846 the British ambassador Stratford Canning (1786-1880) must have felt rather offended when Smith received a less prestigious award than the one granted to the Fossati brothers, architects of the Russian embassy in Istanbul. He successfully took action to ensure that his countryman received the same degree of accolades as the Fossati brothers.[319] Occurrences such as the Ottoman sultan's complaints to the British officials about Smith and the British ambassador's interest in the recognition of his countryman's success in the Ottoman Empire indicates that the relationship between the two countries was more complex than the 'informal imperialism' model

[316] Ağır et al., "An English Architect," 95.
[317] Archival documents suggest that both British and Ottoman patrons were discontent with Smith's work due to the frequent delays and his tendency to exceed budget allocations. Finally, in 1852, he was recalled to Britain following a letter sent by Ottoman Government officials to the British Embassy in Istanbul requesting that Smith would be warned about the delays he caused by neglecting his duties in the equestrian school building project for the Military College commissioned by the Sultan in 1849. BOA, A.}MKT. MHM. 22/86, H-22-08-1266 (Jul. 3, 1850); BOA, HR.MKT 37/19, H-07-12-1266 (Oct. 14, 1850); BOA, C..MF.. 144/7187, H-29-12-1266 (Nov. 5, 1850). See also Ağır et al., "An English Architect," 93-101.
[318] The National Archives (U.K.), Work 10/5/1054-6; BOA, İ..MVL., 119/2976, H-21-05-1264 (Apr. 25, 1848). See also Canan Hamzaoğlu, "İstanbul'da Yabancı Bir Mimar: William James Smith" (MArch thesis, Istanbul Technical University, 1996); Esma İgüs, "A British Touch on Ottoman Tanzimat: Architect William James Smith," *Journal of Ottoman Legacy Studies* 2, no. 3 (Jul. 2015): 66-87.
[319] İgüs, "British Touch on Ottoman Tanzimat," 72.

which authors such as Mark Crinson and Margarita Díaz-Abreu put forward to explain the Ottoman position in the late nineteenth and early twentieth centuries.[320] Charles Ryle Fay defines 'informal imperialism' as the domination of a powerful nation in a territory it did not officially govern,[321] which was not necessarily the case in the Ottoman Empire since the sultan and Ottoman officials had the agency to regulate the activities, including the building projects, of foreign powers on Ottoman lands. The Cyprus Convention of 1878 was an exception when the Ottoman Empire had to give up its sovereignty over Cyprus and accept the British protectorate over the island in exchange for Britain's military support against the Russian threat.[322]

Despite efforts to execute Smith's 1850 plans immediately on the available plot in Galata, there were delays until 1854, at which point Britain became one of the belligerents in the Crimean War and new construction priorities emerged along with quicker hospital building methods such as the availability of prefabricated structures like the Erenköy (Renkioi) Hospital designed by Isambard Kingdom Brunel in Britain and shipped to Çanakkale in the Ottoman Empire where it was set up in 1856 to meet the urgent need for spaces to treat wounded and sick soldiers.[323] When Smith moved back to Britain in 1856, Henry Pulman (1835-1869) replaced him as architect for British projects in Istanbul and under his supervision, the first purpose-built facilities of the British Seamen's Hospital in Istanbul were finally operational in 1857. The project followed Smith's 1850 floor plans as understood from correspondence and Pulman's notes on the subject.[324]

Pulman's 1858 drawing of the site displayed the now completed prison and hospital buildings and indicated an additional plot adjacent to the Sailors' Home as 'ground to be purchased' (Figure 2.23).[325] Like all British Office of Works architects, part of Pulman's role included acting as an agent in service of the expansion of the British colony in Galata since Britain's presence in the Ottoman capital kept increasing. For instance, in 1859 he facilitated the purchase of the property belonging to a woman named

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[320] Crinson, *Empire Building*; Díaz-Abreu, *World History of Nineteenth Century Archaeology*.
[321] Fay, *Cambridge History of the British Empire*, 399; Díaz-Abreu, *World History of Nineteenth Century Archaeology*, 99.
[322] Zürcher, *Turkey*, 75; Deringil, *Well-Protected Domains*, 113; Díaz-Abreu, *World History of Nineteenth Century Archaeology*, 100; Gül, *Emergence of Modern Istanbul*, 55; Sağ, "Osmanlı Başkenti İstanbul'da," 20.
[323] Bektaş, "Crimean War as a Technological Enterprise," 233–62.
[324] The National Archives (U.K.), FO 369/5781. As there are no extant renderings of the finished building, it is hard to tell what the completed building looked like or whether Pulman added his own architectural touches in the final year of construction.
[325] The National Archives (U.K.), Work 10/42/1

Mrs. Mandella for a sum of £3,700 to accommodate the shipping offices of the British consulate.[326] At times, the British government offices' interests in a specific plot of land in Istanbul could clash with the purchasing goals of other British entities such as the Sailors' Home. As Pulman's letter to the Secretary of the Sailors' Home dated September 3, 1861 suggested, the Committee of the Sailors' Home had an interest in purchasing a piece of land which the British Government wanted to own for its building projects and in November 1861, the Committee of the Sailors' Home agreed to resell the plot in question to the British Government.[327] At this point, there was a need to separate certain sections of the hospital from the main building and Pulman prepared proposals for two extensions addressing these requests (Figure 2.24). The drawings dated September 13, 1861 were for a building to house a washhouse, bathhouse, two water closets, and a mortuary and another one to house a laundry, drying terrace, men's sleeping room, and a laboratory.[328] Although the pavilion plan was still not the norm by the early 1860s, the experiences during the Crimean War must have inspired the Hospital Committee to further separate patients according to their symptoms, carrying certain functions out of the main hospital building which could open up more space for additional wards and avoid the crowding of wards. Although cholera was not as prevalent among sailors in comparison to other diseases such as ague, typhus, and dysentery, the cholera pandemic of 1846-1860 must have been a contributing factor to these additional precautions. After successfully completing the unfinished projects initiated by William James Smith, Henry Pulman was transferred to Tehran. Soon after his move there, he died in 1869 of typhus at the age of thirty-four.[329] In later renditions of the site plan from the 1890s a single building marked as 'kitchen' occupied the area Pulman had designated as the two extensions for the British Seamen's Hospital in Istanbul (Figure 2.25).[330]

In the aftermath of yet another fire in Istanbul in 1870, the British Treasury appointed an engineer, William Crossman (1830-1901), to inspect the British property in Istanbul. Crossman's reports indicated that the British Seamen's Hospital lacked sufficient ventilation because it was "not constructed on a pavilion plan."[331] At this point,

[326] The National Archives (U.K.), Work 10/44/5
[327] The National Archives (U.K.), Work 10/43/2
[328] Ibid.
[329] The National Archives (U.K.), FO 60/395
[330] The National Archives (U.K.), Work 10/43/3
[331] The National Archives (U.K.), Work 10/44/6

the pavilion plan was becoming the golden standard in hospital design.[332] One of the most eminent examples of the typology, St. Thomas's Hospital in London designed by Henry Currey following Florence Nightingale's recommendations, built between 1868-1871, was about to be completed. Crossman had a conversation with John Patterson, then the Surgeon Superintendent of the British Seamen's Hospital in Istanbul and advised him along with other British officials in Istanbul, that they needed to make arrangements in order to "bring [the building] more in accordance with the hospital requirements of the present day."[333]

The commissioning of a pavilion plan building for the British Seamen's Hospital did not happen for three decades after Crossman's report. Besides the usual reasons concerning budget, authorizations from the Ottoman government, and coordination between different British offices, John Patterson's personality probably played a role in this delay. As the Surgeon Superintendent, Patterson enjoyed full decision-making autonomy over the British Seamen's Hospital in Istanbul and used this authority to block the acquisition of further land in the vicinity of the British compound in Galata in the early 1890s. Henry Fawcett, who served as a judge at the British Consular Court and the British Consul General in Istanbul at the this time, described Patterson's attitude towards other employees as "temper and tyrannical conduct" and noted that he discharged patients before being fully convalescent, and had a hostile relationship with the Sailors' Home Committee.[334]

A revision to the General Rules document in 1893 added an article which granted authority to a Visiting Committee to exercise supervision and control over managerial matters while the Surgeon Superintendent's role as manager continued.[335] Finally in 1897, further updates eliminated the Surgeon Superintendent's authority, and initiatives to rebuild the British Seamen's Hospital recommended in William Crossman's 1870 report finally began in the late 1890s.[336]

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[332] Forty, "Modern Hospital," 32-50; Taylor, *Architect and the Pavilion Plan*.
[333] The National Archives (U.K.), Work 10/44/6
[334] Patterson particularly blocked the purchase of a piece of land in front of the Consulate for the hospital – an incident referred to as "the latest instances" in Fawcett's letter. The National Archives (U.K.), MT 9/478 (Judge Henry Fawcett to Sir Clare Ford, May 3, 1892).
[335] The National Archives (U.K.), MT 9/478
[336] The National Archives (U.K.), Work 10/44/6

2.4.4 Rebuilding the British Seamen's Hospital in Galata

The Hospital Committee wished to acquire additional land in Galata following the decision to rebuild the British Seamen's Hospital in 1894.[337] The Hospital Committee was chaired by either the First Secretary of the Embassy or some other Secretary of the Embassy appointed by the British Embassy, and its members included the British Consul General, the Embassy Physician, the Physician of the Embassy Stationnaire, and two delegates who acted as representatives of British shipping companies active in the Ottoman Empire.[338] The shipping delegates were elected by the British Chamber of Commerce in consultation with the British shipping agents residing in the Ottoman Empire who were British subjects.[339] The British Chamber of Commerce of Turkey prepared rebuilding proposals and supported their argument for the necessity to establish new hospital facilities in Istanbul in a document dated January 4, 1895. They outlined the first and foremost advantage of this project as "A hospital will be erected which will not be a discredit to the British name, in view especially of the fact that other foreign nations, which have not half the interests we have in this country, have erected or are erecting fine hospitals on the most modern principles."[340] This statement reflected the imperialist aspirations of Britain, along with other competing European powers, and confirmed that medicine and architecture allied here as symbols of the British desire for a greater presence in the Ottoman capital. The Foreign Office approved the Board of Trade's request for the purchase of a new site for the British Seamen's Hospital on August 20, 1896.[341]

Herbert Willis (n.d.), the Office of Works architect and surveyor for the British Foreign Office in Istanbul at the time, initially prepared the earliest proposals for a new building for the British Seamen's Hospital in Istanbul in consultation with a physician named McClean of St. Thomas' Hospital in London and presented them to the Hospital Committee in 1900.[342] With an approved budget of £5,125 Willis' plans incorporated the consular offices and prison into spaces which adjoined the premises of the hospital and required the purchase of a neighboring site he referred to as the "mosque yard." However the Ottoman sultan did not allow the sale of this plot and on December 13, 1900 Willis

[337] The National Archives (U.K.), FO 78/4680 and The National Archives (U.K.), FO 369/5781
[338] The National Archives (U.K.), MT 9/478
[339] Ibid.
[340] The National Archives, (U.K.), FO 78/4680
[341] The National Archives (U.K.), MT 9/553
[342] The National Archives (U.K.), Work 10/42/4

informed the Hospital Committee that he had to discard his initial plans under these circumstances: "the set of plans which I had prepared and which Dr. McClean of St. Thomas' describes as providing a perfect little town hospital are rendered useless."[343] Willis was now going to prepare new plans, and the suggestion to share the updated versions with H. Percy Adams for consultation and approval arose around this time in late 1900.

There were other attempts to purchase a suitably large plot of land in Galata which failed because of the owner's refusal to sell the property in addition to the difficulties experienced while trying to obtain permission from the Ottoman authorities to build on a new and suitable site.[344] The British Consul Harry Charles Augustus Eyres' idea of demolishing all British buildings on the plot in Galata, and building the new and improved British Seamen's Hospital on it started gaining popularity and the Hospital Committee approved this solution on January 15, 1901.[345]

The Hospital Committee now required Willis to consult with an architect who was a hospital specialist. The memorandum prepared following the Hospital Committee meeting on January 15, 1901 confirmed the British and North American vision of hospital architecture as a specialized field:

> Desiring, however, to proceed on lines approved by the highest English authority on Hospital buildings, the Committee has caused these plans to be forwarded by Mr. Willis to Her Majesty's Office of Works for submission to Mr. Percy Adams, an acknowledged authority in this particular line. Mr. Adams is to have full power to bring the plans into harmony with the best modern knowledge on the subject.[346]

Unlike previous British projects in Istanbul which sometimes took decades to complete, the Hospital Committee was determined to have the new hospital building ready within two years. In the meantime they decided to rent the British Post Office building across the street from the British Seamen's Hospital and use that as a temporary location to treat sailors in need of medical care.[347] This plan required some rearrangement of other British institutions on the compound: the prison, courthouse and the Consular offices, would move to the consular residence and Consul Eyres would rent a dwelling with the assignment of an annual home allowance of £150 despite the rather unwilling attitude of Nicholas R. O'Conor (1843-1908), the British Ambassador in the Ottoman

[343] Ibid.
[344] The National Archives (U.K.), MT 9/690
[345] The National Archives (U.K.), Work 10/42/4
[346] Ibid.
[347] Ibid.

Empire at the time.[348] Willis prepared floor plans to accommodate the repurposing of the residential building.

The agreement required the Hospital Committee to purchase the property owned by the British government in Galata for a sum that would be sufficient to pay for new premises for the consular offices, the courthouse, and the prison. Negotiations about how much this amount would be continued until the summer of 1901 causing delays in the project.[349] The price, which started at a little over £3,000, kept increasing. Finally in the summer of 1901, after a period of negotiation, the Hospital Committee agreed to pay £6,253 for the existing consular offices, courthouse, and prison buildings. In April 1902, this sum finally increased to £7,380 when the Treasury decided on the purchase of the property of the *Société Ottomane de Change et des Valeurs* which recently went on sale.[350] To avoid further complications and local taxes, the Hospital Committee was also advised not to seek the title deeds of the property on the British compound in Galata for which they ended up paying a hefty sum.[351]

Money was not the only issue that led to disputes between the British Government offices and the Hospital Committee in Istanbul. The Hospital Committee, which included representatives of British businesses with interests in the Ottoman Empire, formed a 'building sub-committee' to oversee the construction of the new hospital building on the ground in Galata. Under the impression that the site acquisition from the British Government was finalized, the sub-committee brought Percy Adams from Britain to Istanbul in early June of 1901 'at considerable expense' and commissioned him to prepare plans as soon as possible for a fee of approximately £1,000, which was five percent of the estimated value of the commissioned hospital building.[352] However, in August 1901, the Office of Works imposed further restrictions on the sale of the property owned by the British Government on that site: 1) The new building had to be set back ten feet from the Consul's house building, and 2) The facing of the side of the new hospital opposite the

[348] Ibid.
[349] Ibid.
[350] Ibid. – this iconic building designed by Alexandre Vallaury and completed in 1880 housed the British Consular Offices until the 1940s. For more information about this building see Alkım Doğan Kılıç, "Vallauri'nin Klasisist Cepheleri" (MArch thesis, Istanbul Technical University, 2006), 33-35.
[351] The National Archives (U.K.), Work 10/42/4
[352] Ibid.

Consul's house building had to be covered with white glazed bricks.[353] The sub-committee responded to the Office of Works on August 17, 1901:

> With regard to the first restriction the sub-committee beg to point out that its acceptance would necessitate the remodelling of the whole of the plans, this would also entail the loss of at least six months for beginning the building as the winter months are fast approaching; taking also in consideration the loss of ground for these ten feet for building purpose the sub-committee estimate that the loss sustained all round to the new Hospital fund by this restriction can honestly be estimated at £500.
>
> With regard to the second restriction the sub-committee beg respectfully to ask His Majesty's Office of Works to reconsider their decision as its acceptance cannot be recommended for the following reasons.
>
> All buildings in Oriental countries are placed in close contiguity for the purpose of obtaining shade. If the Hospital buildings be placed at a distance from the Consulate the sun will strike on the Hospital and the reflexion from white glazed bricks would render the room on that side of the Consulate insupportably hot. If white glazed bricks be required for purposes of light they are a superfluity as the atmospheric conditions prevailing in this country are totally different from those obtaining in London and even under present conditions (i.e. close contiguity and colour washed walls) there is no lack of light in the Consul's house.
>
> It is also very unfair to the architect entrusted with the plans to impose upon him the restriction of having one of the sides of the building covered with these bricks; it would entirely hamper him in his design and would impair the architectural homogeneity of the building.[354]

The sub-committee's argument concerning building requirements imposed by the climate of 'Oriental countries' as a defense against the Office of Works' restrictions reflected a generalized description of building practices in Istanbul since constructing structures in contiguity was not necessarily customary in Istanbul where a variety of detached and attached building types co-existed.

At this point, the transfer of the British Seamen's Hospital to the British Post Office building across the street was already completed and the Hospital Committee was paying rent to the British Government for using these premises.[355] The demolition, however, could not take place until the transfer of the existing government buildings were finalized.[356] In light of these developments, the Hospital Committee requested Percy Adams "to put a stop to their elaboration owing to the intimation being conveyed to the sub-committee that His Majesty's Office of Works is imposing […] restrictions on the sale of the Consular and prison premises."[357] The tension between the representatives of the British government offices, particularly the Treasury and the Office of Works, and the shipping delegates on the Hospital Committee was a symptom of the dynamics of

[353] Ibid.
[354] Ibid.
[355] The National Archives (U.K.), MT 9/690
[356] Ibid.
[357] The National Archives (U.K.), Work 10/42/4

British imperialism in which the center made decisions for a distant actor. This was the case in all types of projects, and especially during wartime. On one hand, there were the state rulers' interests concerning political power and on the other, there were the interests of the British merchants engaged in commerce in the Ottoman Empire. While these forces were collaborating in the new imperial project, they were also putting pressure on each other regarding how to conduct business.[358]

Finally, in April 1902, the Treasury imposed a new scheme on the Hospital Committee for the provision of the British Government property in Galata and increased the price of the property on the plot in Galata to £7,380, from the amount of £6,253 agreed upon in summer of 1901, which would pay for the purchase of the *Société Ottomane de Change et des Valeurs* building. The updated conditions also required the Hospital Committee to accommodate satisfactory premises for the prison, to cover the transfer costs of the consular offices and to be in charge of all necessary cleaning and painting of their new location.[359] The new scheme also mandated that the Consul Eyres would retain the residence in the British compound instead of receiving an allowance of £150.[360]

Following the purchase of the *Société Ottomane de Change et des Valeurs* in July 1902, Willis undertook some renovation work and the consular offices transferred there on September 1.[361] The Hospital Committee provided a strip of land for the prison as per the Treasury's requirements. Willis designed and oversaw the prison building project adjacent to the new facilities of the British Seamen's Hospital which was under construction that time (Figure 2.26). Willis made use of materials salvaged from the demolished buildings to cut building costs and the prison was ready for occupation by the end of 1902.[362] The Secretary of the Hospital Committee received the title deed of the Consular property in Galata in 1903 and construction work to realize Adams' plan on the Galata plot continued throughout 1903 and 1904.[363] According to Michel Foucault, the prison and the hospital were two institutions which epitomized modernity by keeping their occupants under constant surveillance, or the illusion of it, through spatial

[358] Go, "Capital, Containment, and Competition," 43–69.
[359] The National Archives (U.K.), Work 10/42/4
[360] Ibid.
[361] Ibid.
[362] Ibid., Memorandum dated June 21, 1902.
[363] Ibid.

organization.[364] In Galata, the two were to exist side by side, categorize and spatially separate their inmates.

2.5 Influences, Inspirations, and Architects

2.5.1 Late Nineteenth-Early Twentieth Century British Architecture

In the mid-nineteenth century, the body of work on Islamic architecture available to British designers and architects was growing.[365] Both H. Percy Adams and Charles Holden were probably familiar with the celebrated pattern book of Owen Jones, *The Grammar of Ornament*, first published in 1856.[366] Jones dedicated six pages of his seminal work to Turkish ornament, and although he regarded the Turkish style as an inferior mélange of Arab, Persian, Byzantine, Roman, and Renaissance styles and stated that the Turkish pavilions at the Great Exhibition of 1851 in the Crystal Palace were "the least perfect of all the Mohammadan exhibiting nations,"[367] perhaps as a nod to the Anglo-Ottoman political alliance during the Crimean War (1853-1856), he started the section by drawing parallels between Turkish and British styles:

> The architecture of the Turks, as seen at Constantinople, is in all its structural features mainly based upon the early Byzantine monuments; their system of ornamentation, however is a modification of the Arabian, bearing about the same relation to this style as Elizabethan ornament does to Italian Renaissance.[368]

He also noted that Turks were among "the first of the Mohammadan races" to adopt European architectural styles.[369] The rapprochement during the Crimean War led to Britain's commissioning of an Anglican church in Istanbul on a plot that Sultan

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[364] Michel Foucault, *Naissance de la clinique: Une archéologie du regard médical*, (Paris: Presses Universitaires de France, 1963); Foucault, "Incorporation of the Hospital"; Michel Foucault, *Surveiller et punir: Naissance de la prison* (Paris: Gallimard, 1975).

[365] Architectural drawings of the Mosque of Sultan Hassan included in *La Description de l'Égypte* published in 1809 following Napoleon's campaign in Egypt and Syria between 1798 and 1801, the event which according to Edward Said marked the beginning of Orientalism as a scholarly discipline. Edward W. Said, *Orientalism* (New York: Pantheon Book, 1978); Crinson, *Empire Building*, 29. While working as an engineer for the Egyptian government to repair the mosques in the 1830s, English artist and architect Frederick Catherwood became one of the first Europeans to produce a map and panoramic drawings of Palestine using a *camera lucida*. See Crinson, *Empire Building*, 26-28. The British Orientalist Edward William Lane, who lived in Egypt between 1825 and 1828, published *An Account of the Manners and Customs of the Modern Egyptians* in 1836 to better acquaint his compatriots "with the domiciliated classes of one of the most interesting nations of the world." Lane's illustrations offered more insight into contemporary Islamic society with descriptions of Islamic decorum and how one moved through the mosque. Crinson, *Empire Building*, 28.

[366] Jones, *Grammar of Ornament*; Crinson, *Empire Building*, 15-71; Saner and Ar, "Beylerbeyi Sarayı Dekorasyonu," 123-37.

[367] Jones, *Grammar of Ornament*, 62.

[368] Ibid., 61.

[369] Ibid., 61-62.

Abdülmecid I donated in Beyoğlu at the edge of the European enclaves in Galata.[370] Lord Stratford de Radcliffe (1786-1880), the British ambassador at the time, would imply in *The Times* newspaper on November 1, 1858 that the construction of this church in the Turkish quarters was imposed by Britain and that the land it stood on was acquired through requisition.[371] Besides acting as a symbol of the alliance between the Ottoman and British Empires, according to Mark Crinson, this memorial monument also symbolized "the wider proselytizing role of Anglicanism in the Ottoman Empire."[372] Therefore, unlike the predominantly neoclassical buildings William James Smith and other Office of Works architects designed for the British institutions in Istanbul, the Anglican church building commemorating the Crimean War had to represent Britishness in a pronounced manner while incorporating local elements.[373] William Burges' winning design reflected the Victorian Gothic revivalist vision and it even appeared in A.J.B. Baresford Hope's 1861 publication *The English Cathedral of the Nineteenth Century*.[374] However, as the project got delayed Burges deviated from his initial drawings and by the early 1860s, and frustrations related to workforce and project finances coupled with his no-longer-British-appearing drawings, led to his termination and the hiring of the runner-up of the competition: George Edmund Street.[375] When finished, the English Gothic revival church featured some decorative elements superficially borrowed from Byzantine architecture[376] perhaps inspired by John Ruskin's *The Stones of Venice* published in 1851, which acknowledged the Byzantine origins of Venetian structures.[377]

In the eighteenth and nineteenth centuries British architects embraced Palladian and neoclassical architecture, elements of which were apparent in buildings William James Smith had designed in Istanbul. Simultaneously, Mughal-inspired buildings such

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[370] Unlike most of the British buildings in Istanbul designed by the architects employed at the British Office of Works in Istanbul, Britain decided to open an international competition for the Crimean Memorial Church. Judges, who had vested interests in the state, church, and military, were in favor of choosing a design reflecting the Victorian Gothic revival style inspired by the work of Augustus Pugin and John Ruskin rather than attempting to create an 'English Byzantine' architecture which they thought could offend the local Greek Orthodox community. Among the jury members, A.J.B. Baresford Hope was particularly committed to Gothic as "the universal emanation of the mind of Christian Europe," *Saturday Review*, 1 (1856): 234-36; Crinson, *Empire Building*, 139-40.
[371] Crinson, *Empire Building*, 125, 250-51.
[372] Ibid., 125. Crinson writes that this project gave rise to contradictions between the members of the British community in Istanbul who would actively use the church, and official representatives in Britain of both church and state, as was the case with most British projects overseas.
[373] Ibid., 125.
[374] Ibid., 146.
[375] Ibid., 147-58.
[376] Ibid., 85.
[377] John Ruskin, *The Stones of Venice* (London: Smith, Elder and Co., 1851).

as the Sezincote House in Gloucestershire designed by Samuel Pepys Cockerell (b. 1805) and the Royal Pavilion in Brighton designed by John Nash (b.1787-1823) were also present in Britain. By the late nineteenth century Orientalist public structures such as the Brighton West bandstand designed by Philip Lockwood (b. 1884) started embellishing British resort towns. After the watershed moment when the Conservative Party leader Benjamin Disraeli's speech at the Crystal Palace on June 24, 1872 outlined the principles of 'New Imperialism' and declared Britain's commitment to the maintenance of the 'Empire of England,'[378] the essentially functionalist ideas of Pugin and Ruskin that highlighted humility, a quality embedded in Gothic revivalist architecture, stood in contrast with the grandeur of this new imperialistic worldview. By the 1880s, the Gothic revival lost its appeal and a search for a British architectural vocabulary started among late Victorian architects of Britain who turned to English classicism, particularly to the works of Sir Christopher Wren and Inigo Jones.[379]

Scottish architect John McKean Brydon (1840-1901) was one of the most passionate proponents of the new imperialist commitment to create a uniquely majestic British imperial architecture.[380] In terms of healthcare architecture, his 1881 design for the St. Peter's Hospital on Henrietta Street in Covent Garden, London was exemplary of the style which later became Edwardian Baroque revival (Figure 2.27). This architectural style was the choice of leading British architects of the late nineteenth and early twentieth centuries, including Aston Webb (1849-1930) and Reginal Bloomfield (1856-1942) among others, particularly for institutional, civic, and corporate buildings.[381] Edwardian Baroque revival was primarily concerned with scale, rather than detail, and to create the effect of greatness.[382]

The drawing for the rejected entry submitted by the firm of H. Percy Adams to the competition for the Royal Infirmary in Glasgow published in *The Building News* in 1901 displayed elements of the emerging architectural vocabulary of the Edwardian Baroque revival with a turret at its center (Figure 2.28). As with Brydon's 1881 design

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[378] Jonathan Allen Underwood, "From empire to Empire: Benjamin Disraeli and the Formalization of the British Imperial Social Structure," MA thesis (North Carolina State University, 2006), 12.
[379] G. Alex Bremner, *Building Greater Britain: Architecture, Imperialism, and the Edwardian Baroque Revival, 1885-1920* (London: Paul Mellon Centre for British Architecture, 2023).
[380] Brydon also designed Queen Anne style buildings and hospitals inspired by middle-class domestic architecture such as the New Hospital for Women. For more information, see Annmarie Adams, *Architecture in the Family Way: Doctors, Houses, and Women, 1870-1900* (Montreal & Kingston: McGill-Queen's University Press, 1996), 158-60.
[381] Bremner, *Building Greater Britain*, 123-46.
[382] Ibid.

for St. Peter's Hospital in Covent Garden, the cupola or the turret were very common features of institutional buildings designed to support this new imperialist vision. The central tower alluded to Christopher Wren's Chelsea Hospital, built between 1686 and 1892, and it also appeared in buildings of the 1880s which were not necessarily imperialistic in appearance such as Edward Boardman and Thomas Henry Wyatt's Norfolk and Norwich Hospital (Figures 2.29-2.30).

By the end of the nineteenth century, architects on two opposite ends of Europe, Britain and Ottoman Istanbul, were searching for architectural representations of their imperial and national identities by looking at the past. Like the Ottoman *Usul-i Mimari-i Osmani,* several publications attempting to canonize the British classicism of the earlier centuries started to emerge.[383] As it was the latest stylistic trend in British architecture at the time, H. Percy Adams and Charles Holden probably had a few such resources on the work of seventeenth century British architects in their office when they received the commission to design the British Seamen's Hospital in Istanbul. William John Lofties' 1893 publication *Inigo Johns and Wren – Or the Rise and Decline of Modern Architecture in England* particularly provided information about several hospital buildings such as Wren's designs for the Chelsea Hospital from 1682 and the Greenwich Hospital for sailors built in 1695.[384]

Alfred Waterhouse's (1830-1905) 1897 design for the University College Hospital, similar to the British Seamen's Hospital in Galata in terms of massing, featured a conical turret. Unlike his contemporaries, Waterhouse defined his stylistic intention to allude to the Gothic in a speech he delivered to the members of the Architectural Association during their visit to his recently completed University College Hospital in London in 1905:

> Colour in peculiar combination enters into the design of the hospital throughout. For the exterior, red terra-cotta enrichments in almost every conceivable place, relieved with a few buff bands, red machine-made facing bricks, and green slate roofs are used… The terra-cotta enrichments appear to fulfil structural purposes, and although reconciled to hospital necessities, have a character

[383] Ibid. As Alex Bremner explains; Edwardian Baroque was not necessarily a consistent approach to architecture in an academic sense. However, there were attempts to codify English classicism through detailed surveys of the English Renaissance particularly by revisiting the works of English architects Sir Christopher Wren and Inigo Johns. These included *Inigo Johns and Wren – Or the Rise and Decline of Modern Architecture in England* by William John Lofties (1893), *Architecture of Renaissance in England* by John Alfred Gotch (1894), *A History of Renaissance Architecture in England 1500-1800* by Reginald Blomfield (1897), *Later Renaissance Architecture in England* by John Belcher and Mervyn Edmund Macartney (1898-1901), and *Some Architectural Works of Inigo Jones* by H. Inigo Triggs and Henry Tanner (1901).

[384] William John Lofties, *Inigo Johns and Wren – Or the Rise and Decline of Modern Architecture in England* (New York: MacMillan and Co., 1893), 161-7.

> difficult to describe, but the effect suggests a last flicker of the dying embers of the Gothic revival as applied to secular works.[385]

Early twentieth century British architects preferred the relatively expensive Portland stone for their buildings' façades,[386] but probably this was not a good choice for Waterhouse who favored economic yet durable materials, like terracotta and red brick.[387] The interiors featured heavy-duty and easy-to-manage materials like terrazzo, wood blocks, and glazed bricks and a touch of marble for the outpatient entrance.[388] As a Victorian, Waterhouse was adamant about keeping Gothic alive and remained true to prioritizing function over form in this project, which was built at the same time as the British Seamen's Hospital in Istanbul. The choice of materials for the British Seamen's Hospital in Istanbul, on the other hand, was consistent with the imperial vision of the time such as Trieste stone, a high-quality durable and weather-resistant limestone like Portland stone. The building was roofed with Marseilles tiles and copper-covered turrets, the floors were marble in the corridors and teak in the wards, the entrance featured green marble walls. The frames of the windows and the doors featured emerald-green tiles matching the ones covering the furnaces (Figures 2.31-2.32). While green tiles were common at this time in British healthcare facilities, not just in hospitals and mental institutions, but also in spas and public pools like the Victoria Baths in Manchester designed by Henry Price (b. 1903-1906), the choice of green could also be related to the now-dated work of Owen Jones. In the section titled "Turkish Ornament," Jones wrote:

> One great feature of Turkish ornament is the predominance of green and black; and, in fact, in the modern decoration of Cairo the same thing is observed. Green is much more prominent than in ancient examples where blue is chiefly used.[389]

At a final construction cost of £30,000 to complete, six times the amount the Hospital Committee approved of in 1900,[390] the British Seamen's Hospital was relatively luxurious for a hospital and featured many areas covered in expensive material such as marble when compared to its contemporaries in Britain. Built under the supervision of James Herbert Willis, the Office of Works site architect stationed in Istanbul, the

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[385] Taylor, *Architect and the Pavilion Plan*, 25.
[386] Bremner, *Building Greater Britain*, 2, 50, 65, 249.
[387] As Jeremy Taylor writes budget-sensitive hospital projects were prone to becoming potential targets of criticism on the grounds of extravagancy. Taylor, *The Architect and the Pavilion Plan*, 26.
[388] "Cruciform Building, UCH," accessed Mar. 10, 2024, https://mpgqs.com/projects/cruciform-building-uch/.
[389] Jones, *Grammar of Ornament*, 63.
[390] The Royal Institute of British Architects (RIBA) Collections, PA1457/AHP[247](1-20). According to Eitan Karol, the total cost was even more than this amount at £40,000. See Karol, *Charles Holden*, 109.

materials brought into the city were exempted from customs duties with Abdulhamid II's permission.[391]

For buildings like the University College Hospital in London or the British Seamen's Hospital in Istanbul, architects had to invent a unique pavilion plan to fit a diagonal layout on a constricted urban site. While cruciform and Y-shaped designs enabled architects to address the ventilation and sunlight exposure needs of the wards stacked on top of each other, for plots of this kind English surgeon John Marshall (1818-1891) advocated for the circular pavilion ward (Figure 2.33).[392] The British Seamen's Hospital in Istanbul used a circular plan for its core area rather than for the wards. The rectangular wards in the three radiating wings of the Y-shaped building featuring a lower service block allowed maximum space, let natural light into each ward, and promoted vertical stack ventilation and circulation of fresh air between each wing. Cruciform or Y-shaped hospital buildings with a vertical organization of pavilion style wards appeared in other hospitals in Britain and elsewhere in the world in the early twentieth century as a solution to limited availability of space in urban settings. For instance, one of the buildings of the Eastern District Hospital in Glasgow (later renamed as Duke Street Hospital) designed by Alfred Hessell Tiltman (1854-1910) and built between 1901 and 1904 was a winged structure with three pavilion blocks and a central staircase (Figure 2.34).[393] In 1901, in Barcelona, Spain Catalan architect Lluís Domènech i Montaner (1850-1923), who later became a pioneer of Catalan modernism, designed a similarly winged layout for Hospital de la Santa Creu i Sant Pau, built between 1901 and 1930.

By the early twentieth century after the reign of King Edward VII began in 1901, imposing Edwardian Baroque revival buildings became the symbols of Greater Britain's imperialistic ambitions magnifying Britain's powerful status. These structures projected superiority and the cohesiveness of Britannic rule across the dominions of the Empire.[394] Much like the Ottoman intellectuals who developed the notion of *Osmanlıcılık* to hold all inhabitants of their disintegrating Empire together under the concepts of *vatan* (homeland) and *hürriyet* (liberty), practitioners of Edwardian Baroque revival aimed to

[391] RIBA Collections, PA1457/AHP[247](1-20)
[392] Jeremy Taylor, "Circular Hospital Wards: Professor John Marshall's Concept and Its Exploration by the Architectural Profession in the 1880s," *Medical History* 32 (1988): 426-48; Jeremy Taylor, *Architect and the Pavilion Plan*, 26. Examples of hospitals with circular wards included the Miller Hospital at Greenwich, St. Giles Hospital in Southwark, and the Great Northern Central Hospital in London.
[393] *The Building News*, Jul-Dec. 1901, 316-7; Harriet Richardson Blakeman, "Glasgow," accessed Mar. 10, 2024, https://historic-hospitals.com/gazetteer/glasgow/.
[394] Bremner, *Building Greater Britain*, 79-122.

maintain the greatness of the British Empire through architectural projects which solidified the concept of imperialism and attempted to unify all imperial subjects in different corners of the world by exposing them to prominent British buildings. Despite its seemingly continuous dominant status, the sentiments of liberalism and ethnic nationalism were also causes of concern and anxiety for Britain in its colonies. American independence in 1776 was one of the first indications that British imperialism's decline had begun. Additionally, the rise of potential competitors such as Russia and Prussia (Germany after 1871), and the emergence of its former colony, the United States of America as a powerful republic, were all potential threats to British domination of the world order. A sense of national doubt brought with it the need to develop organized planning, ideological clarity, assurance of power, and assertion of prestige, and this extended to architectural projects.[395] The grandeur of Edwardian Baroque revival, particularly in Britain's colonies, was an attempt to convey power, superiority, and confidence, and was in a sense a display to compensate for the languishing cohesiveness of the British commonwealth.[396]

In the early twentieth century, the once-celebrated British Gothic Revival became a liability for the British imperialists, and the Edwardian Baroque revival began to replace it. This was a new architectural vocabulary coinciding with Disraeli's vision of the 'Empire of England,' as articulated in his aforementioned speech in 1872. The prominent appearance of the British Seamen's Hospital in Istanbul diverged from the other more modest British buildings in the compound in Galata. Its central turret overshadowed the rooftops of the Galata district, where other European powers also owned property, and ensured that the English flag on top of it greeted those arriving the city by sea, inviting a challenging contrast to the Ottoman flag on top of the Galata Tower, as depicted in a "Salut de Constantinople" postcard of the 1900s (Figure 2.35).[397] The Royal Institute of British Architects' (RIBA) record for the British Seamen's Hospital in Galata emphasized the imposing effect of its tower by defining the building as "dominated by its twelve-sided buttressed tower."[398] Regardless of their symbolic meaning within the new imperialist architectural vocabulary, central towers had been staples of naval hospitals

[395] Ibid., 43-77
[396] Ibid., 123-46. Bremner uses the term 'Grand Manner' to define the monumental Edwardian Baroque revival structures built in the British colonies.
[397] For more information on "Salut de Constantinople" postcards, see Sait Beydeş and Bahadır Taşkın, S*alut de Constantinople (İstanbul'dan Selam)* (Istanbul: Korpus, 2014).
[398] RIBA Collections, PA1457/AHP[247](1-20)

since they served as observation and communication spaces and the British Seamen's Hospital was not an exception in this regard. The tower later featured a time ball, a spherical device that dropped at a predetermined moment of the day to make it easy for the incoming ships to adjust their chronometers. The installation of this highly visible time piece also served a Westernizing purpose by helping with the standardization of time in the Ottoman Empire according to Greenwich conventions.[399]

Interestingly, the earliest watercolor drawings for the British Seamen's Hospital in the RIBA archives did not feature a tower and reflected a rather historicist structure (Figure 2.36).[400] The twenty-six-year-old Charles Holden's correspondence with the site architect James Herbert Willis in 1901 confirmed his active role as chief designer in the project when he indicated that he aimed to give it 'an appropriate character,' through Byzantine references, particularly to Hagia Sophia, such as a central dome and, as evidenced in the preliminary drawings, by alluding to Islamic architecture in the form of a polychrome treatment for the entrance.[401] Holden's intention to historicize was also apparent in the romanticized background of this drawing which featured shadows of minarets. The awning protecting the roof terraces featured red and white stripes repeating the stone-and-brick stripe pattern of the cupolaed towers on both sides of the frontal elevation and the buttresses. However, an inscription on the drawing explained that the awning was not a realistic element: "In designing the elevation it should be remembered that on the flat roofs tents cannot be used a permanent red tile roof on pillars should be provided."[402] The *Usul-i Mimari-i Osmani* included drawings by Eugène Maillard (n.d.) of this sort of striped masonry which could be applied to arched fenestration and doorways (Figure 2.37),[403] and Edward William Lane (1801-1876) also highlighted the presence of alternating courses of red-and-white masonry achieved with the use of red ochre and limewash in Egyptian domestic architecture in his 1836 publication *An Account of the Manners and Customs of the Modern Egyptians*, a book which was very popular in Britain.[404] Lane described the roof of a typical Egyptian structure as flat, covered with

[399] Ekmeleddin İhsanoğlu and Feza Günergun, "Osmanlı Türkiyesinde 'Alaturka Saat'ten 'Alafranga Saat'e Geçiş," *X. Ulusal Astronomi Kongresi*, Istanbul, Sep. 2-6 1996 (Istanbul: 1996), 434-41.
[400] RIBA Collections, PA1457/AHP[247](1-20)
[401] RIBA Collections, PA1457/AHP[247](1-20). Charles Holden might have had access to Charles Félix Marie Texier, *L'Architecture byzantine ou recueil de monuments des premiers temps du christianisme en Orient* (London: Day, 1864).
[402] RIBA Collections, PA1457/AHP[247](1-20)
[403] de Launay and Montani, *Usul*, plate 16.
[404] Edward William Lane, *An account of the manners and customs of the modern Egyptians* (fifth edition) (London: John Murray, 1871), 7.

plaster coating, and generally void of any parapet,[405] similar to the roof of the preliminary watercolor drawing of the British Seamen's Hospital in Istanbul dated to 1901 (Figure 2.38).

When completed, the tiled roof covering almost resembled the pergola-like *çardak* element typical of Anatolian residential architecture. However, in 1901 neither Adams nor Holden were probably aware of this feature since it was not yet possible to speak of any attempts for the codification of residential and vernacular Ottoman architecture. It was likely that the inspiration for the roof was from Lane's book or from other Orientalist sources available at that time such as Guillaume-Abel Blouet's *Expédition scientifique de la Morée* (1831-1838), Auguste Salzmann's *Jérusalem* (1856), or Melchior de Vogue's *Syrie centrale: Architecture civile et religieuse du Ier au VIIe siècle* (1865-1877).[406] It was common for British architects working in the Ottoman Empire to consider indigenous methods to address climatic challenges.[407] Originally published in 1905, G.A.T. Middleton's *Modern Buildings, Their Construction and Equipment* featured the British Seamen's Hospital in Istanbul as an example of best practices on how to construct a hospital on a restricted site, and the accompanying text explained that the unusual design of the rooftop on the fourth floor of the building was an adaptation to the relatively warmer climatic conditions of Istanbul:

> […] different from anything which would be found in a cooler country, consisting of flats over the large ward blocks, which are themselves roofed over but open on almost all sides, thus providing large airing balconies sheltered from the sun. […] By adoption of the large open-roofed balconies, advantage is taken of the climate to give patients the greatest possible amount of fresh air.[408]

Preliminary elevation and perspective drawings of the building, now with the inclusion of a spire replacing the central dome, featured sketches suggesting that Holden was trying to familiarize himself with elements of Islamic architecture such as minarets.[409] Two years before the completion of the building, *The Building News* published some drawings for the British Seamen's Hospital in Istanbul with credit to H.

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[405] Ibid.

[406] Guillaume-Abel Blouet, *Expédition scientifique de la Morée* (3 volumes) (Paris: Librarie de Firmin Didot Frères, 1831-8)*;* Auguste Salzmann, *Jérusalem: Études et reproductions photographiques de la Ville Sainte depuis l'époque judaïque jusqu'à nos jours* (Paris: Gide et Baudry, 1856); Melchior de Vogue, *Syrie centrale: Architecture civile et religieuse du Ier au VIIe siècle* (Paris: J. Baudry, 1865-1877). See also, Crinson, *Empire Building*, 95; Andrea Merli, "A New Art in an Ancient Land: Palestine through the lens of early European photographers," *Jerusalem Quarterly* 50 (2012): 23-36.

[407] Crinson, *Empire Building*, 228.

[408] Middleton, *Modern Buildings, vol. 3*, 40.

[409] RIBA Collections, PA1457/AHP[247](1-20)

Percy Adams (Figure 2.39).[410] The published elevation of the project might have alluded to the mid-sixteenth century Süleymaniye Mosque in Istanbul designed by Mimar Sinan, which was one of the buildings featured in *Usul-i Mimari-i Osmani*.[411] By the twentieth century, the Süleymaniye Mosque was relatively familiar to European architects as evidenced by articles referencing and comparing it to buildings such as the Westminster Cathedral in periodicals such as *The Building News*.[412] When completed, the British Seamen's Hospital building in Istanbul featured red tiled hipped roofs embellished with copper domes, turrets and chimney stacks of pale stone decorated with brick courses, which resonated to some extent with Mimar Sinan's domed complex, visible just across the Golden Horn.[413]

2.5.2 Charles Holden (1875-1960), The Designer

Charles Holden's correspondence with James Herbert Willis regarding matters such as an order for 8,500 tiles from J.C. Edwards, and Holden's instructions on how to lay them effectively 'to give a deep shadow' confirmed that Holden was not only the chief designer but also held a supervisory role in the project. Holden's letters to Willis contained sketches of details such as how to arrange the light in the operating room signaling that he was quite knowledgeable about the design of surgical suites, which was one of H. Percy Adams' areas of expertise (Figure 2.40).[414] Not only did Holden claim any credit for the British Seamen's Hospital in Istanbul, he later listed it as one of H. Percy Adams' notable works in the obituary he wrote for him in the *Journal of the Royal Institute of British Architects* on April 26, 1930.[415] However, the inscription on a panoramic sketch by Charles Holden depicting the Galata Tower and the British Seamen's Hospital, which

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[410] During that period, it was common practice for owners of architectural firms to take credit for the work of designers and architects working in their office. See Nikolaus Pevsner, "Charles Holden's Early Works," in *Edwardian Architecture and its Origins*, ed. Alastair Service (London: The Architectural Press Limited, 1975), 388.

[411] de Launay and Montani, *Usul*, plate 3. Drawings of the Süleymaniye Mosque in *Usul-i Mimari-i Osmani* were by Pietro Montani. Additionally, The Royal Institute of British Architects has some drawings of Ottoman architecture prepared for Texier by a local draughtsman circa 1830s; among these are watercolor drawings of the Süleymaniye Mosque and the *türbe* of Sultan Süleyman, both works by *Mimar* Sinan. Reference numbers: RIBA21385 - SC64/TEX[46]4; RIBA21386 - SC64/TEX[46]3; RIBA21387 - SC64/TEX[46]23; RIBA21388 - SC64/TEX[46]24.

[412] James Cubitt, "Some points in the new Westminster Cathedral," *The Building News*, Jun. 3, 1904, 788.

[413] RIBA Collections, PA1457/AHP[247](1-20)

[414] Ibid., Letter dated Feb. 16, 1903 from Holden to Willis.

[415] Charles Holden, "The Late H. Percy Adams," *The Journal of the Royal Institute of British Architects* 37 (April 26, 1930): 431.

he drew on September 8, 1957 from the deck of a cruise ship, read "Constantinople Seamen's Hospital, Designed May 1901," suggesting that it was his design which had been the inspiration for the building. Holden also implied that he had already had an idea about how to proceed with the project before H. Percy Adams' visit to Istanbul in June 1901.[416]

Charles Holden joined the office of H. Percy Adams in 1899, at the age of twenty-four, and shortly after he was in charge of producing elevations and plans even though his name never appeared on published drawings until he became a partner in 1907.[417] H. Percy Adams was at the time well-known as a hospital architect and a master planner. In 1899 Adams co-designed the Royal Victoria Infirmary in Newcastle upon Tyne, built between 1899 and 1906, with William Lister Newcombe, which was probably a learning experience for Holden. This ponderous building had some elements of the Queen Anne style of the time and boasted a central tower.[418] Holden's first major work for the office of H. Percy Adams was the cruciform design of the Belgrave Hospital for Children in Kennington, London in 1899.[419] Attributed only to Adams in architectural periodicals such as *The Building News* and *The Builder*, (Figure 2.41) this building was inspired by the Arts and Crafts movement and specifically alluded to the work of British architects Philip Webb and Henry Wilson.[420] On October 2, 1903, *The Building News* praised the Belgrave Children Hospital's plan for being a respectable and innovative example:

> The new Belgrave Hospital for Children, Kennington, has a good plan of pavilions placed with axes at right angles to each other. Each ward is disconnected from the main building by means of a lobby or bridge. Any doubtful case is isolated. A good type of ward for special cases of treatment is the main feature to notice; and, in the second place, the principle of disposing the separate pavilions on the ground, so as to insure ample sunlight and air. The special rules drawn up by the management of the particular hospital will, of course, be the best guide to the architect. Copying in a case of this sort would be suicidal. We can imagine an architect taking the general scheme of a hospital with radial or other distribution of blocks, and applying it to another site having a different position as regards aspect. The idea would be simply absurd; but he can examine the principle of its design — the way the ward windows face, the direction of the separate pavilions, and the plan of each ward. He must study the design analytically, so as to discover its principle before he thinks of adapting any portion to another site. There has been a 'great deal of indiscriminate copying of buildings, in which often the least useful or desirable parts are copied, while the real solution of the problem is left out.[421]

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[416] RIBA Collections, [PB611/AHP[342]]
[417] Karol, *Charles Holden*; Elain Harwood, "Charles Holden."
[418] Karol, *Charles Holden*; Harwood, "Charles Holden."
[419] H. Percy Adams wrote that the design was from 1898, a year before Charles Holden started working for him. H. Percy Adams, "English Hospital Planning," *Journal of Royal Institute of British Architects* 36, no. 15 (June 15, 1929): 576. The hospital opened in 1903, but its construction continued in stages and was not completed in full until 1929.
[420] Harwood, "Charles Holden."
[421] *The Building News*, "Standard Plans," Oct. 2, 1903, 433-34.

The layout of the Y-shaped British Seamen's Hospital in Istanbul was similarly innovative as it ensured sunlight exposure and air circulation in the wards that were stacked on top of each other in the radiating wings of the building.

Originally from Bolton, Lancashire, Charles Holden became an architect after experiencing several hardships, such as the death of his mother at a young age and the bankruptcy of his father which forced him to quit school and start working in various jobs.[422] In 1892, Holden's brother-in-law, who was a land surveyor, arranged for him to start an apprenticeship with the Manchester architect Edward William Leeson.[423] During his four-year apprenticeship, Holden attended classes at the School of Art and the Technical College in Manchester,[424] and surrounded himself with a group of artists and authors such as Francis Dodd (1874-1949), Muirhead Bone (1876-1953), and James William Wallace (1853-1926).[425] He became increasingly interested in the work of the American poet and essayist Walt Whitman (1819-1892) and joined the meetings of the informal literary society known as the Eagle Street College in his hometown of Bolton where he returned in 1896 to work in the office of the architect Jonathan Simpson before moving to London in 1897.[426] In London Holden first worked with the renowned Arts and Crafts designer and architect Charles Robert Ashbee (1863-1942) before joining the office of H. Percy Adams in 1899 ostensibly for financial reasons as he needed to support his partner Margaret (Macdonald) Steadman (1865-1954),[427] a nurse and midwife who was separated from her abusive husband, and her son. Fiona MacCarthy has interpreted that Holden's decision to leave Ashbee's office was more likely motivated by 'a clash of ideas or personality.'[428] Several years later in 1906, Ashbee's wife Janet Elizabeth

[422] For more information on Holden's youth and training as an architect see, Karol, *Charles Holden*, 23-84.
[423] Karol, *Charles Holden*, 49.
[424] Ibid.; Eitan Karol, "Naked and Unashamed: Charles Holden in Bloomsbury," *Past and Future* 4 (Autumn/Winter, 2008): 6-7; Harwood, "Charles Holden"; "Holden, Charles Henry 1875-1960," Biographical Dictionary of British and Irish Architects 1800-1950, accessed Oct. 5, 2023, https://architecture.arthistoryresearch.net/architects/holden-charles-henry.
[425] Karol, *Charles Holden*, 23-84. For a portrait of Holden by Francis Dodd, see National Portrait Gallery, Primary Collection, NPG 4173, accessed Feb. 12, 2024, https://www.npg.org.uk/collections/search/portrait/mw03185/Charles-Holden?LinkID=mp02222&role=sit&rNo=2.
[426] Karol, *Charles Holden*, 32; Harwood, "Charles Holden."
[427] Fiona MacCarthy, *The Simple Life: C.R. Ashbee in the Cotswolds* (London: Faber & Faber, 1981), 146-7. For more information on the relationship between Charles and Margaret Holden see, Karol, *Charles Holden*, 46-48. Although they never officially married, Holden introduced Margaret as his wife and people around them referred to her as Mrs. Margaret Holden.
[428] MacCarthy, *Simple Life*, 146.

(Forbes) Ashbee (1877-1961),[429] while staying with Charles Holden and his partner Margaret in their house in Codicote, Hertfordshire, wrote in her diary about what a great talent Holden was and how she felt H. Percy Adams was taking advantage of him, even though Holden did not seem to mind:

> […] wonderful great ivory elevations rose on paper beneath his hand: we looked to great things. […] Ever since then [joining the office of H. Percy Adams] he has ghosted for him; and under Adams' name these same strange stately palaces are rising all about, under the title of hospitals, sanatoria, libraries, and town halls. He goes his quiet way and feels glad his buildings are put up under anyone's name: "people will know someday" – he comments.[430]

Holden remained an admirer of Walt Whitman, particularly of his poem *Laws for Creations*, as well as the work of Henry David Thoreau (1817-1862), Ralph Waldo Emerson (1803-1882), and Edward Carpenter (1844-1929).[431] He found architectural inspiration in the writings of these poets and authors, which he expressed in an anonymous essay titled "If Whitman Had Been an Architect" published in the American periodical *Architectural Review* in June, 1905:

> Often I hear of the glory of the architecture of ancient Greece; of the proud Romans; of sombre Egypt; the praise of the vast Byzantium and the lofty Middle Ages, too, I hear.
> But of the glory of the architecture of the Modern I never hear.
> Come, you Modern Buildings, come! Throw off your mantle of deceits; your cornices, pilasters, mouldings, swags, scrolls: behind them all, behind your dignified proportions, your picturesque groupings, your arts and crafty prettinesses and exaggerated techniques; behind and beyond them all hides the one I love.
> O you Modern, I can see how sadly you have been misunderstood.
> O you I love, do not hide yourself from me, I know you and love you: you shall be free: the pure air of heaven shall be yours.
> O! I see how subtly you have hid from the gaze of those who sought you after studio methods. But I know that you are not to be found by studio methods.
> The Academy and the Universities do not hold you in their formulas, and I see you laughingly evade the younger cult who seek to find you in craftsmanship.
> I know your haunts.
> I see you lurking behind the bricklayer laying his bricks.
> I know the ring of the trowel striking the brick is to you the most exquisite music, and I know that you think the bricklayer the most perfect of musicians.
> The labourer, carrying his hod full of mortar or bricks, his quid and his oath are dearer to you than the architect in his office or the sculptor in his studio.
> I see you love that derrick and steam crane every bit as much as you love the Parthenon.
> O! I know that you laugh at me just the same, and evade me just the same.
> I know that I do not hold you any more than the rest; but I do not want to hold you; I know that the only way to hold you is to leave you free.
> See, I laugh at my own work, too; I am not afraid to confess that I can lie and deceive just as much as any.
> But I do not deceive myself, – I know you are not *there*.
> I know your haunts.
> Along the city on the 'bus, from Charing Cross to the Bank.

[429] C.R. Ashbee admittedly married Janet as a cover for his homosexuality in 1898. Robin Stummer, "Felicity Ashbee: Memoirist of the Arts and Crafts Era," obituary for C.R. Ashbee's daughter published in the *Independent* on August 9, 2008.
[430] MacCarthy, *Simple Life*, 146.
[431] Ibid.

> What do you think of yourself in this varied clothing? – But down a little side street, maybe in the grime of the slums, back of St. Mary's, I see you smiling grimly, naked—but happy—and free!
> O! I love you, dear heart, but I will leave you free.
> You shall be as naked as you choose.[432]

Holden saw roughness, simplicity, and honesty in Whitman. Yet, as he eloquently expressed in "If Whitman had been an architect," he was pretending and producing what the clients expected of him. While drawing his Orientalist and grandiose elevations for the British Seamen's Hospital in Istanbul in 1901, Holden was probably in a conundrum, as he articulated in the aforementioned passage. However, as years progressed the signs of Holden's yearning for simplicity and modernism became gradually more apparent in his buildings. For instance, despite being a larger project commissioned by the King himself, Holden's 1903 design for the King Edward VII Sanatorium, which Holden designed in 1903, with its simple brick work and use of local materials differed from the British Seamen's Hospital in Istanbul.[433]

The year after designing the British Seamen's Hospital in Istanbul, Holden's entry won the national architectural competition for the Bristol Central Library to be built on a plot next to the fourteenth century Norman/Gothic Bristol Cathedral. While the façade of Holden's design was harmonious with its neighboring building, the reference library, for which he also designed the furniture, had a grand neoclassical look.[434] Holden used green mosaics for the arched vaults of the entrance hall of the Bristol Central Library and for its walls he chose the same green marble he used in the entrance hall of the British Seamen's Hospital in Istanbul (Figures 2.42-2.43). Although this was not a hospital commission, the published plans were still signed with the name H. Percy Adams, F.R.I.B.A. as the architect of the project.[435]

The 127-129 High Holborn (Norwich House) in London designed by Holden and built between 1903 and 1905 featured a tower that looked very similar to the one topping Holden's design for Istanbul (Figure 2.44).[436] The tower of the West Ham Hospital, built

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[432] Charles Holden (Signed with the pseudonym B.), "If Whitman Had Been an Architect," *Architectural Review* (June 1905): 258. Also mentioned in Karol, *Charles Holden*, 4-5, 167, 173; Harwood, "Charles Holden." Holden did not publish much under his name. During his time in Manchester, he submitted some designs to *The Building News*' designing competitions with the pseudonym 'The Owl' as an homage to his habit of staying awake and working until very late hours at night. For more information, see Karol, *Charles Holden*, 57-59.
[433] Harwood, "Charles Holden."
[434] Ibid.
[435] Karol, *Charles Holden*, 149-54.
[436] Harwood, "Charles Holden."

between 1906 and 1907, also had a similar form (Figure 2.45). Built between 1906 and 1908, the British Medical Association Headquarters on a tight site in the Strand, London[437] was another one of Holden's buildings with some likeness to the British Seamen's Hospital in Istanbul. Nikolaus Pevsner defines Holden's work before 1914 as "vigorously free neo-Mannerist" buildings.[438] However, even the preliminary drawings for the Istanbul commission, did not fit into Pevsner's description of Holden's early work. The British Seamen's Hospital in Istanbul, when completed, displayed both local influences and hinted towards Holden's "passion for elimination"[439] and simplicity of the modern.

Holden received the title Associate of the Royal Institute of British Architects (A.R.I.B.A.) in 1906 and became a partner in H. Percy Adams' firm in 1907 after which he was able to publish his works using his own name.[440] The influence of Islamic architecture was apparent in Holden's 1908 design for the new surgical pavilions of the Bristol Royal Infirmary, which featured a domed structure on its façade (Figure 2.46). This was one of the first projects published with Holden's name; he was recognized as the second architect of the building after Adams.[441] Holden certainly learned a great deal from H. Percy Adams' planning principles which influenced his overall approach to architecture. According to architectural historian Eitan Karol, three qualities of Holden's work were inspired by post-Crimean War hospital architecture: "the logic of functional planning; the provision of light and air; and the spine of the pavilion-type hospital."[442] Adams recognized Holden's talent; the two did not argue about the division of labor in the firm. There was a spirit of teamwork in the architectural firm of H. Percy Adams even before it became officially known as Adams and Holden in 1907.[443]

Inspired by his spouse, Margaret (Macdonald) Steadman, Holden started attending Quaker meetings in his thirties, which probably had an influence on the simplicity and humility of his later designs.[444] During World War I, he served in the ambulance service, and then the Imperial War Graves Commission and designed sixty-

[437] In this building, he incorporated controversial sculptures by the American sculptor Jacob Epstein and according to Eitan Karol, the two formed a "Whitmanic collaboration." See Karol, "Naked and Unashamed," 6.
[438] Pevsner, "Charles Holden's Early Works," 386, see also 390-91.
[439] Karol, *Charles Holden*, 113.
[440] Biographical Dictionary, "Holden."
[441] Harwood, "Charles Holden."
[442] Karol, *Charles Holden*, 92.
[443] Ibid., 92-93.
[444] Ibid.; David Burnell, "A Quaker and the Underground," *The Friend* 169, no. 4 (Jan. 28, 2011): 10-13.

four cemeteries, including the Passchendaele New British Cemetery in Belgium, a monumental structure defined by its ultimate simplicity.[445] With the exception of the Memorial Gateway at Clifton College in Bristol (b. 1919-1923), which had a neo-Gothic appearance, perhaps referring to his earlier design of the Bristol Central Library that matched the town's fourteenth-century cathedral, after World War I Holden's modernist aspirations became clearly visible.[446] He appreciated the work of American architects Louis Sullivan (1856-1924) and Frank Lloyd Wright (1867-1959), the latter was a friend of his former boss Charles Robert Ashbee, as well as the skyscrapers of Manhattan. Holden's designs for the 55 Broadway London Transport Authority Headquarters (b. 1925-1929) in London and the Senate House of the University of London (b. 1931-1937) were evidence of his appreciation for Art Deco skyscrapers.[447] These two buildings also alluded to a utopic drawing for a colossal fourteen-story cruciform hospital by the British architect Arthur Baresford Pite (1861-1934) published in *The Builder* on June 11, 1904 with the title "A City Tower of Healing" (Figure 2.47).[448] Pite prepared this drawing after reading a letter by J.Y.W. Macalister (n.d.), the librarian of the Royal Medical and Chirurgical Society, in the *Times* about his visit to New York, where he unexpectedly found the skyscrapers rather ingenious and charming. Pite proposed replacing the old buildings of St. Bartholomew's Hospital in London with his "tower of healing,"[449] and wrote in *The Builder*: "A "sky-scraper" would solve the problem of providing an increase of hospital accommodation in a crowded city upon a limited site by a building of exceptional height."[450] Although designed three years prior to Pite's drawing, Holden's Y-shaped British Seamen's Hospital in Istanbul with its radiating wings was in many ways a prototype of this idea.

Between the 1920s and 1940s, Holden collaborated with the London transport administrator Frank Pick (1878-1941)[451] to design London's underground stations. One

[445] Harwood, "Charles Holden." According to Hardwood, the Passchendaele New British Cemetery linked the Arts and Crafts movement with modernism.
[446] Karol, *Charles Holden*, 231-33; Harwood, "Charles Holden."
[447] Karol, "Naked and Unashamed," 7. Only a portion of his plans for the Senate House was actually built.
[448] Arthur Baresford Pite, "A City Tower of Healing," *The Builder* 86 (June 11, 1904): 636-37. See also A. Delbert Evans and L.G. Redmond Howard, *The Romance of the British Voluntary Hospital Movement* (London: Hutchinson & Co., 1930).
[449] Evans and Howard, *Romance of the British Voluntary Hospital.*
[450] Pite, "City Tower of Healing," 636.
[451] Pick became the Chief Executive Officer and Vice-Chairman of the London Passenger Transport Board in 1933 when it was established. For more information see "Frank C Pick, 1878-1941," London Transport Museum, accessed May 29, 2024, https://www.ltmuseum.co.uk/collections/collections-online/people/item/2001-26251.

of the station entrances he remodeled was the Clapham Common Underground station (1922-1924), which brought the domes of the British Seamen's Hospital in Istanbul to the streets of London (Figure 2.48).

In 1921, Charles Holden received the F.R.I.B.A. title,[452] and by the late 1920s, he was no longer engaged in hospital design with the exception of St. Luke's Hospital (b. 1927-1939) in the British colony of Malta.[453] This was an imposing structure with a central tower that resembled Pite's tower of healing, and at the same time a reminder of Britain's presence as a colonial power in Malta. St. Luke's Hospital punctuated Pietà's skyline similar to how the British Seamen's Hospital altered Galata's vista.

The architectural firm of Adams and Holden became known as Adams, Holden and Pearson after Lionel Godfrey Pearson (1879-1953), Holden's friend from Manchester, joined as a junior partner in 1913. This name remained unchanged even after H. Percy Adams' passing in 1930 since his son, Percy Webster Adams (1900-1962), had also became a partner in 1925.[454] Pearson continued to work on hospital commissions for the firm, however, unlike Holden he built in the outdated nineteenth-century architectural traditions as was evident in his designs for Torbay Hospital (b. 1925-1927) and Westminster Hospital (b. 1939).[455]

In 1931, the Royal Institute of British Architects awarded Charles Holden the London Architecture Medal for his design of 55 Broadway, the office building that housed the headquarters of the Underground Railways Company of London, which became iconic as London's tallest building upon its completion in 1929.[456] Architects like Charles Holden and Charles Rennie Mackintosh (1868-1928) were in search of British modernisms,[457] and although not well-known in Britain, Holden's 1901 design for the British Seamen's Hospital could be considered a precursor to what became the height of British modernism in the 1930s. For instance, the Bank of Ireland Building in Belfast (b.

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[452] Biographical Dictionary, "Holden."
[453] Karol, *Charles Holden*; Harwood, "Charles Holden."
[454] Percy Webster Adams joined the firm in 1922. See Karol, *Charles Holden*, 92-93.
[455] For a photograph of Torbay Hospital, see "Torbay Hospital, Torquay, Devon, seen from the entrance court," RIBA23637, accessed Feb. 12, 2024, https://www.ribapix.com/Torbay-Hospital-Torquay-Devon-seen-from-the-entrance-court_RIBA23637.
[456] Ted Ruddock, "Charles Holden and the Issue of High Buildings in London," *Construction History* 12 (1996): 83.
[457] Mackintosh's Glasgow School of Art (b. 1899-1909) was among the inspirations for Holden's design for the Bristol Central Library which was completed in 1906. Pevsner considers Holden's small underground stations on the Piccadilly Line built between 1930-1932 to be the first examples of Continental modernism in Britain. See Pevsner, "Charles Holden's Early Works," 387-88.

1929-1930) designed by Joseph Vincent Downes (1891-1967), one of the most celebrated works of architecture associated with British modernism, resembled Holden's British Seamen's Hospital in Istanbul with its tower and massing.[458]

In his obituary for Charles Holden, British industrial designer Christian Barman (1898-1980) wrote in 1960:

> Holden's place in the history of English architecture is a curious one. It is unlikely that he will be remembered as a pioneer in the sense that Mackintosh and Voysey are today. He gave a great deal to the world, but what he gave is perhaps less important than what he resisted and saved us from. During a period which littered our towns with the chewed fag-ends of the Victorian stylistic revivals he seemed to many of us to stand alone, a pillar of honesty, integrity and common sense. The list of seven buildings that gained the R.I.B.A. bronze medal before it was awarded to his Underground headquarters gives a pretty clear picture of the kind of environment against which that gentle, soft-voiced, gold-spectacled figure held out in uncompromising revolt.[459]

Throughout his life, Holden remained very modest; even after all his successes he continued to live in a relatively small Arts and Crafts-inspired cottage with a garden in Harmer Green, Hertfordshire near London that he had designed in his youth.[460] In an obituary written for Holden by a partner in his firm in *The Architect and Building News*, he was described as a humble man who admired simplicity:

> […] he was not a gregarious man nor a socially ambitious one, and he was content with his circle of old friends. […] This simplicity, allied to a real contempt for pretentiousness, seems to me to be reflected in the directness and fitness for purpose of his works. It is good that he passed peacefully on in the house he loved, full of years and achievement and honours of the kind he valued most.[461]

Even though the hospitals he designed abroad might have served imperialist aims, Holden demonstrated that he did not approve of symbols of imperialism by rejecting knighthood twice. He received the Royal Institute of British Architects' Royal Gold Medal in 1936, two honorary doctorates from the Universities of Manchester and London, and declined the RIBA presidency. In March 1942, he eloquently summarized his outlook on life in a letter to architectural theorist Hope Bagenal (1888-1979), written from the quarters that the London University provided for him following the bombing of his London office in Torrington Square:

> It comes simply to this: that I was born in an industrial age: that I was urged by a passion for building and for service: and that I have an invincible belief in the power of the human soul, the God in man, to rise above, and master, ugliness and desolating conditions. I must exercise this

[458] For more information on the Bank of Ireland Building, see "Bank of Ireland, Belfast," *Modernist Britain*, accessed Mar. 13, 2024, https://www.modernistbritain.co.uk/post/building/Bank+of+Ireland+Building/.
[459] Christian Barman, "Charles Henry Holden," *R.I.B.A. Journal* (Aug. 1960): 384.
[460] "Dr. Charles Holden," (obituary) *The Architect and Building News*, May 11, 1960, 592; Karol, *Charles Holden*, 6. For a photograph of Holden's house in Harmer Green, see RIBA61794, accessed Mar. 13, 2024, https://www.ribapix.com/Holdens-first-home-at-Harmer-Green-Welwyn-Hertfordshire_RIBA61794.
[461] "Dr. Charles Holden," 592.

> passion even in the industrial age into which I was born. It is the profit motive in Industrialism which is the foul thing. […] But there is still beauty in the soul of man and I am content to work in the service of *that* and to give him such beauty and order as lies within my capacity.[462]

2.5.3 H. Percy Adams (1865-1930), The Planner

H. Percy Adams was ten years older than Charles Holden and the two came from very different backgrounds. Adams let Holden handle the design processes right after he joined his firm in recognition of the talent of this young architect. As an expert in hospital planning, he focused on designing the technical details and interior elements of the hospital commissions the firm received until his death in 1930 while Holden was responsible for the stylistic elements.[463] After Adams' passing, this role became responsibility of Lionel Godfrey Pearson and Adams' son Percy Webster Adams.[464] In the early twentieth century, Adams was among the leading hospital architects in the United Kingdom and his work became representative of English hospital planning. Many of his projects were known around the world as they appeared in architectural magazines such as the American *The Brickbuilder*, which became the *Architectural Forum* in 1916.[465]

Adams was the son of Webster Adams (1841-1900), a surgeon practicing both in Ipswich in the county of Suffolk, and London. Compared to Holden, H. Percy Adams had a comfortable childhood and youth. He studied at Epsom College until 1879, briefly lived in Essex, then trained under Brightwen Binyon (1846-1905) on his way to becoming an architect. After winning the RIBA drawing prize in 1888 he started working in the office of Stephen Salter (1825-1896), the architect of the Royal College of Surgeons.[466] In 1890 he entered the Royal Academy Schools and following Stephen Salter's death, he became a partner in the firm renaming it as 'Salter and Adams.' He earned the title F.R.I.B.A. (Fellow of the Royal Institute of British Architects) in 1896 and won the Royal Institute

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[462] Hope Begenal, "Charles Henry Holden," (obituary) *R.I.B.A. Journal* (Aug. 1960): 383.
[463] Karol, *Charles Holden*, 92.
[464] Ibid. Percy Webster Adams assisted Pearson for the most part. Pearson, like Adams, specialized in hospital planning and published papers about on the subject. See for example, Lionel Godfrey Pearson, "The Planning of a Small Hospital," *Architecture* (Jan. 1929): 7-8; Lionel Godfrey Pearson, "Light and Air in the Modern Hospital," *Architect's Journal* (Nov. 16, 1932): 609-22.
[465] See for example, R. Randal Phillips, "The Work of An English Hospital Architect, H. Percy Adams," *The Brickbuilder* 13, no. 7 (Jul. 1904): 139-43.
[466] For examples of Salter's work see "Salter, Stephen, 1825-1896," The Wellcome Collection, accessed May 24, 2024, https://wellcomecollection.org/concepts/zndxjs7e. Not to be confused with two other nineteenth-century architects named Stephen Salter: Stephen Salter's father Stephen Salter (1801-n.d.) and Oxford-based architect Stephen Salter (1862-1952).

of British Architects' Donaldson Medal that year and the Godwin Bursary Medal in 1897.[467]

Adams read two papers on hospital architecture titled "Cottage Hospitals" (March 14, 1921) and "English Hospital Planning" (May 27, 1929) before the Royal Institute of British Architects, both which were published in the *Journal of R.I.BA.*[468] Adams had very specific, and to a certain degree conservative, ideas about hospital planning. In his 1929 paper, while acknowledging the need to adapt to technological advances, such as the inclusion of X-ray departments for radiographic and fluoroscopic services, he believed that hospital design reached its peak with the advent of the pavilion plan following the Crimean War:

> The Crimea War, 1856, was probably the cause of a great revolution in hospital planning; but the Great War of 1914-18 does not seem to have had much influence upon hospital planning except, perhaps, in the way of endeavouring to reduce areas and cheapen the buildings.[469]

Adams often referenced the nineteenth-century works of Henry Charles Burdett (1847-1920)[470] and the 1909 publication of Scottish physician Donald James MacKintosh (1862-1947).[471] However, Adams did not mention one of the most influential books on hospital architecture in 1929, Edward Fletcher Stevens' *The American Hospital of the Twentieth Century*,[472] and critiqued the American approach to planning because of its failure to pay attention to design layouts that maximized light and air in every part of the building, and for relying on artificial ventilation in vertically planned buildings.[473] He was, on the other hand, an advocate of the vertical plan, where the individual wards of the hospital were stacked on top of one another, since this spatial arrangement was

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[467] "Adams, Harry Percy 1865-1930," Biographical Dictionary of British and Irish Architects 1800-1950, accessed Oct. 5, 2023, https://architecture.arthistoryresearch.net/architects/adams-harry-percy; "Harry Percy Adams," Architects of Greater Manchester 1800-1940, accessed Oct. 5, 2023, https://manchestervictorianarchitects.org.uk/architects/harrry-percy-adams. Adams was born "Harry Percy Adams," but known professionally as "H. Percy Adams" and registered in the Royal Academy as "Henry Percy Adams."

[468] H. Percy Adams, "Cottage Hospitals," *Journal of the Royal Institute of British Architects* 28, no. 10 (Mar. 19, 1921): 273-95; Adams, "English Hospital Planning" (June 15, 1929): 575-605; H. Percy Adams, "English Hospital Planning," *Journal of Royal Institute of British Architects* 36, no. 16 (June 29, 1929): 628-55.

[469] Adams, "English Hospital Planning" (June 15, 1929): 576.

[470] See for example, Henry Charles Burdett, *The Cottage Hospital* (London: J&A Churchill, 1877); Henry Charles Burdett, *Pay Hospitals and Paying Wards Around the World* (London: J&A Churchill, 1879); Henry Charles Burdett, *Hospitals and Asylums of the World* (London: J&A Churchill, 1891). For further information about Burdett, see Gordon Charles Cook, "Henry Charles Burdett (1847-1920): Outstanding Hospital Administrator, Successful Secretary of the Seamen's Hospital Society, and Notable Philanthropist," *Journal of Medical Biography* 9, no. 4 (2001): 195-207.

[471] MacKintosh, *Construction, Equipment and Management*.

[472] Stevens, *American Hospital* (1921).

[473] Adams, "English Hospital Planning" (June 15, 1929): 579.

believed to reduce costs and maximize efficiency by eliminating the long hospital corridors, which were necessary in the horizontal layout for pavilion plan hospitals. He wrote:

> These [long] corridors cost a lot to build and to maintain, and there seems no logical reason why ward pavilions should not be more than three storeys in height if properly planned, so that the air from a lower ward is not connected to the ward above by staircases or lifts, and so long as the ward pavilions are sufficiently far from any other building that light and air are not impeded.[474]

Although the vertical plan could seem difficult to extend and become problematic in terms of fire escapes, he thought it provided the advantages of:

> 1. The ease of administration.
> 2. The concentration of all plumbing, heating, lighting and drainage.
> 3. Purer air and better aspect for patients.
> 4. Less initial cost and upkeep.[475]

The British Seamen's Hospital in Istanbul followed most, but not all, of the principles of the ideal vertical plan hospital that Adams promoted in his 1929 paper.

> The administration block is usually central with a main arterial corridor running east and west, the wards at right angles axially north and south with cross ventilating windows on either side, the out-patient and casualty departments easily accessible from the street and the dispensary and electrical departments available for both in and out patients.
> The kitchen department should be accessible to tradesmen and centrally placed for serving patients and staff.
> The nurses' home should be away from, but easily accessible to the hospital, with its own gardens and tennis courts.
> The boiler house should be at a low level of the site, and as central as possible. This allows of the sectionising of the blocks so that one part can be shut off without affecting the rest; this position also reduces the size of the mains and gives better control. The chimney shaft should be away from any prevailing wind.[476]

Adams defined the ideal hospital site as "high ground sloping gently from north to south or south-east, and sheltered by trees on rising ground […] away from noise and dirt, have good roads on the northern side, a subsoil of chalk, rock, or gravel, and adequate facilities for water, gas, and drainage."[477] Towards the end of his life, he predicted that city hospitals, like the British Seamen's Hospital in Istanbul, would become a thing of the past in the future as large hospitals would move outside the crowded cities, and the only healthcare facilities left in urban settings would be central clearing stations to serve casualties in case of emergencies, and out-patient departments.[478] H. Percy Adams believed that the architectural transformation of the hospital was not necessarily

[474] Ibid., 581.
[475] Ibid.
[476] Ibid.
[477] H. Percy Adams, "Hospital Planning," *The British Journal of Radiology* 3, no. 27 (Mar. 1930): 127.
[478] Ibid.

connected to the advancements and revelations in medicine in the early twentieth century but rather related to the availability of new techniques in plumbing and ventilation.[479]

2.6 Inside the British Seamen's Hospital in Istanbul

In the British Seamen's Hospital, the administrative units comprising the entrance hall, waiting hall, porter, and office were concentrated at the center of the two blocks facing east on the ground floor (Figure 2.49). H. Percy Adams wrote that the waiting hall in this section of British hospitals often featured a refreshment buffet and a drinking fountain so that patients and their loved ones could enjoy some food and beverages as they waited.[480] For the most part, the layout of the building in Istanbul was consistent with the planning principles of H. Percy Adams such as the grouping of the administrative functions on the ground floor and the use double-fronted stoves as heating elements in sailors' wards; however, instead of a separate Nurses' Home, the third floor of the building functioned as living quarters for the nurses (Figure 2.50). The circular core of the Y-shaped building featured an elevator in addition to the principal staircase. The three ward blocks radiating from the building's circular core connected to the central block with low lobbies which had open space above them to promote air circulation and to ensure that each block could be isolated when needed and function as quarantine stations. There was also an isolation room in the basement level of the south block which was accessible from the attendant's room right behind it. Belgrave Hospital for Children in London, designed in the office of H. Percy Adams two-three years before the British Seamen's Hospital in Istanbul, also featured a similar layout.[481] Indeed, Eitan Karol calls the British Seamen's Hospital in Istanbul "the Belgrave in the East."[482]

The basement of the south block featured a dedicated ambulance entrance for easy access from the street level. The dispensary for outpatients was on the ground floor and was also directly accessible through the street. The gas purifier unit was next to the ambulance entrance.

As mentioned earlier, circular wards were one of the options for hospitals on sites restricted by minimal space, and the advantage they presented was the ease of ventilation

[479] See for example Adams, "English Hospital Planning" (June 15, 1929): 575-605; Adams, "English Hospital Planning" (June 29, 1929): 628-55.
[480] Adams, "English Hospital Planning" (June 29, 1929): 632.
[481] Adams, "English Hospital Planning" (June 15, 1929): 576.
[482] Karol, *Charles Holden*, 113.

through a central aspirator.[483] However, H. Percy Adams preferred rectangular wards since they were less costly to build, and unlike the circular wards, they did not create a large empty space in the center. Additionally, Adams believed that patients felt better in rectangular wards.[484] In his 1929 paper, he gave the examples of the Belgrave Hospital for Children and Waterhouse's University College Hospital as "excellent plans" for restricted urban sites.[485] Perhaps because it was not technically in Britain he did not include the British Seamen's Hospital in Istanbul in this list even though G.A.T. Middleton praised it in his *Modern Buildings, Their Construction and Equipment* as the perfect example for a hospital built on an urban site with limited space.[486]

2.6.1 Heating and Ventilation

As in all pavilion plan hospitals, ventilation was a priority in the planning of the British Seamen's Hospital in Istanbul. From materials used, to the dimensions and locations of windows, ventilation determined many details in the building. This was typical of the early twentieth century British hospitals. Designed by William Henman (1846-1917) and Thomas Cooper (1847-n.d.) and built between 1901 and 1903, the Belfast Hospital which relied solely on a mechanical plenum ventilation system was a rare exception in this regard and its wards did not feature any side windows. The heating of the patient wards of the British Seamen's Hospital in Istanbul relied on Shorland brand double-fronted Manchester stoves with descending smoke flues elegantly covered in green tiles (Figure 2.32).[487] These coal stoves were expensive to construct but were quite trendy at the time and gave "a very cheerful appearance to the ward" and also served a social function since patients often sat around them.[488] The coal storage and the boiler house were in the basement of the building's west block.

A large window accompanied each bed in the vertically ventilated patient wards of the British Seamen's Hospital in Istanbul. The north and south blocks also featured east-facing balconies with a window opening to the balcony behind each bed. Besides providing air circulation, these narrow balconies enabled easy and frequent cleaning of windows from the outside.[489] The transcript of the discussion session that followed H.

[483] "Hospital Construction and Management," *The Builder,* Jul. 5, 1884, 2.
[484] Adams, "English Hospital Planning" (June 15, 1929): 576.
[485] Ibid.
[486] Middleton, *Modern Buildings, vol. 3,* 40-49.
[487] *The Building News,* Apr. 22, 1904, 580.
[488] Adams, "English Hospital Planning" (June 15, 1929): 586-88.
[489] Ibid., 598.

Percy Adams' 1929 paper for the Royal Institute of British Architects revealed that physicians did not necessarily regard the provision of balconies as a positive feature in hospitals. For instance, Sir Holbort Waring (1866-1953), a surgeon at the St. Bartholomew's Hospital in London, said that hospitals in cities like London were better without balconies:

> [Balconies] take considerable light away from the wards; they interfere with ventilation, and they connive at the accumulation of a considerable amount of dust, which cannot be kept out of hospital wards. When we are treating chronic cases, in patients who can get up, it is a different matter. When, however, a hospital will be used especially for acute cases and only for a limited time by each patient, I do not think the provision of balconies is an advantage.[490]

Every section of the hospital had specific ventilation needs. As per H. Percy Adams' hospital planning principles the administration unit relied on cross-ventilation with windows on both sides, the store room for patient's clothes featured tubular iron divisions, the bathrooms were separated from the wards by cross-ventilated lobbies to block foul air from entering other areas, and ventilation in the operating theatre occurred via a vacuum system which admitted fresh air through cotton wool filters (Figure 2.51).[491]

2.6.2 Sanitation and Drainage

The British characteristics of the British Seamen's Hospital were perhaps most apparent in the placement of sanitary facilities in projecting towers at the edge of each block (Figure 2.52). By the late 1920s these sanitary annexes, commonly known as 'sanitary towers,' went out-of-fashion and architects mostly regarded them as an unnecessary expense that took up space which could otherwise serve as balconies.[492] Particularly in the United States, by the 1920s, architects were abandoning the idea of the sanitary tower, as this often required patients and staff to take long walks to get to the bathroom. Rather, the architects began to make plumbing available in almost every unit. Building technologies responded to the changing ideas of the time in which the miasma theory of disease was being replaced by the newer germ theory of disease.[493] Regardless of the latest trends, even in the late 1920s Adams continued to believe that there had to be a cross-ventilated lobby separating the wards from the sanitary facilities, and he was critical of American hospital planning which often situated bathrooms, sink rooms, and water

[490] Sir Holbort Waring, "Discussion after "English Hospital Planning"," *Journal of Royal Institute of British Architects* 36, no. 16 (June 29, 1929): 654-55.
[491] Adams, "English Hospital Planning" (June 15, 1929): 575-605.
[492] William Alfred Pite, "Discussion after "English Hospital Planning"," *Journal of Royal Institute of British Architects* 36, no. 16 (June 29, 1929): 652.
[493] Jeanne Kisacky, *Rise of the Modern Hospital: An Architectural History of Health and Healing, 1870-1940* (Pittsburgh, PA: University of Pittsburgh Press, 2017), 242.

closets right next to the wards without much of a division as in the example of Josiah B. Thomas Hospital in Peabody, Massachusetts designed by Kendall, Taylor & Stevens and built in 1907 (Figure 2.53). In 1929 H. Percy Adams wrote:

> Thirty years ago they were almost always placed at the end of the ward away from the entrance or (especially in large wards of Poor Law Institutions) off the centre of the ward; they were invariably entered by way of a lobby supposed to be cross ventilated by having windows on either side. The last few years these sanitary adjuncts seem to have got to the other or entrance end of the ward in order to be under better control and not to obstruct the sun and air from the ward, also to simplify the plumbing, heating and drainage and to be available for the small subsidiary wards as well as the general ward. Another recent innovation is to omit the projection of these blocks beyond the general wall face and, by lowering the height of the w.c.'s and sink rooms, ventilating the lobby over them; not, I think altogether satisfactory. I do not think there can be any hard and fast rule as to where the sanitary adjuncts should be placed, and there is much to be said for the old-fashioned towers at the ends of the wards with a large balcony between for patients. I hope we shall not follow American planning as to the sanitary arrangements, for, however up to date the fittings may be, I am convinced that a ventilated lobby between them and the ward is an advantage.[494]

The sanitary tower arrangement was a persistent feature in hospital designs produced at the office of H. Percy Adams. For instance, the new extension of the Victoria Hospital in Folkestone, which was built between 1900 and 1902, featured an arrangement similar to that of the British Seamen's Hospital in Istanbul (Figure 2.54).[495] Sanitary towers or annexes continued until the early 1930s as staple features of British hospitals, which separated them from their American counterparts.[496] William Alfred Pite's (1860-1949) King's College Hospital in London (1909), Edwin Hall (1851-1923) and John Brooke's (1853-1914) Manchester Royal Infirmary (1909), and Henry Saxon Snell's (1831-1904) Royal Victoria Hospital in Montreal, Canada (1893) all boasted sanitary towers.[497] The pavilion plan and its specific features such as the sanitary tower and the open ward became fundamental elements of Britain's architectural heritage, and architects like Percy Adams persisted on keeping the tradition alive.[498]

Hospitals built between the mid-nineteenth to early twentieth centuries were reflections of the beliefs about miasma theory of disease in every aspect. With the belief that bad air or 'miasma' was the main cause of disease, a hospital architect's main objective was to keep bad air out. Sanitary towers were among the solutions that British architects developed for this purpose. Henry Saxon Snell wrote in *Hospital Construction and Management* published in 1883:

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[494] Adams, "English Hospital Planning" (June 15, 1929): 592.
[495] *The Hospital*, Apr. 19, 1902, 51.
[496] Adams, "English Hospital Planning" (June 15, 1929): 575-605; John Wilson, "Hospital Planning," *Journal of the Royal Sanitary Institute* 52, no. 3 (1931): 98-102.
[497] Adams, *Medicine by Design*, 27.
[498] Jonathan Hughes, "The "Matchbox on a Muffin: The Design of Hospitals in the Early NHS," *Medical History* 44, no. 1 (2000): 26-27.

> As it is always desirable that water-closets, baths, and lavatories should be placed in contiguity to all wards occupied by the acute sick, too much care cannot be bestowed upon the endeavour so to construct these offices that the chance of any foul air entering from them into the wards shall be reduced to a minimum: and to this end it has in all modern buildings been deemed advisable to separate the two by a lobby, having opposite windows for cross ventilation. If these windows properly perform the functions allotted to them, it is clearly desirable that they should be as far distant as possible from any of the ward windows, otherwise the fouled air would, when the wind sets in certain directions, be blown into the wards through these adjoining windows, when open; and, to avoid this, it is, therefore always better to place these offices directly at the ends of the wards, as has been done in this [St. George's Union Infirmary] and the St. Marylebone Infirmary, rather than, as is usual, at the sides.
> Arrangements are seldom made for the warming of these lobbies and water-closets, and, in consequence, air is drawn through them into the wards, whereas, when they are heated to a higher temperature than the wards, the passage of the air is, as it should be, in an opposite direction.[499]

According to Snell and his followers, the ideal position of the sanitary tower was to the ward's east[500] as was the case for the wards in the north and south wings of the British Seamen's Hospital in Istanbul.

Architectural historian Annmarie Adams writes that sanitary towers were a source of pride for British hospital planning.[501] In a review of Frederic J. Mouat and Henry Saxon Snell's *Hospital Construction and Management* published in *The Builder* European and American hospitals were regarded as inferior to their British counterparts on the basis of their sanitary arrangements:

> Although the Continental architects have in some matters bettered the instruction they have received from us, and we have much to learn from their latest works, they in turn are still far behind us in all sanitary arrangements, and even the new model Hospital at Baltimore, the result of an examination of the best modern hospitals of Europe, is far from perfect in this respect.[502]

In the British Seamen's Hospitals, the layout of the sanitary units provided clues about gender divisions of the time. The sanitary facilities on the ground floor of the south wing facing east slightly differed by featuring two water closets instead of one since this block had to provide separate sanitary conveniences for men and women that were easily accessible from the waiting hall (Figure 2.55). The remaining sanitary towers in the building had one water closet each since the wards and the nurses' dining and living areas were designed as single sex spaces. Male and female patients stayed in separate wards and reflected the fact that nursing was considered a profession only for women at the time. The west-facing service areas on the ground floor featured multiple water closets,

[499] Mouat and Snell, *Hospital Construction*, 224-25.
[500] Adams, *Medicine by Design*, 27.
[501] Ibid.
[502] "Hospital Construction and Management," *The Builder*, Jul. 5, 1884, 2. Also cited in Adams, *Medicine by Design*, 27

and unlike the sanitary units of the wards, a cross-ventilated lobby did not separate these from other enclosed spaces (Figure 2.56).

The comments H. Percy Adams received following his 1929 paper confirmed that sanitary towers were no longer favored by physicians or architects by the late 1920s. William Alfred Pite, the brother of Arthur Baresford Pite who had proposed the aforementioned tower of healing in 1904 (Figure 2.47), commented in a critical tone:

> I am very glad to hear Mr. Adams speak about the old sanitary towers; he seems to have some sympathy with their position at the end of the ward. But I think we have been among the pioneers in removing these annexes from this position to the administrative end, which, within the last few years, has been growing to such an extraordinary extent. It is cheaper, it is better, and it is in a far more central position; and it frees the end of the ward for the purposes of the balconies.[503]

Sir Holburt Waring added:

> The sanitary tower I have looked upon as something of the past. In the hospitals I have been connected with I have favoured bringing the sanitary accommodation near the central portion of each block, and within it; one can, I think, by this method of construction, get better results, and certainly the places can be kept much cleaner than when there is cross-ventilation and a separate tower.[504]

One of the first British architects to abandon the sanitary tower was Keith Young (1848-1929), as evidenced in his design for the Chelsea Hospital for Women (b. 1914-1916) in London. This hospital featured sanitary units incorporated within the main building which were separated from the wards by the principal corridor.[505] In his 1921 paper titled "Cottage Hospitals," H. Percy Adams acknowledged the advancements in plumbing technology and that, with the changing times, cross-ventilated lobby separation system for sanitary areas was becoming increasingly redundant:

> The sanitary annexes, containing the sink room and w.c., have in most recent hospital work been disconnected from the wards by what are called cross-ventilated lobbies. In these days of modern sanitation these are hardly necessary as in the old days of indifferent plumbing; in the new plans just issued by the Ministry of Health for model maternity hospitals, and also in the recently erected hospital in connection with housing schemes, and in the new Chelsea Hospital, by no less an expert than Mr. Keith Young, the sanitary annexes are no longer disconnected from the wards by cross-ventilation.[506]

The carefully planned drainage system of the British Seamen's Hospital was complete with rectangular manhole covers produced by John Jones of Chelsea, London.[507] Iron drains were laid in straight lines between inspection manholes with open

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[503] Pite, "Discussion," 652.
[504] Waring, "Discussion," 654.
[505] Harriet Richardson Blakeman, "Greater London," *Historic Hospitals*, accessed Mar. 17, 2024, https://historic-hospitals.com/english-hospitals-rchme-survey/greater-london/.
[506] Adams, "Cottage Hospitals," 275-76
[507] RIBA Collections, PA1457/AHP[247](1-20)

glazed channels and they were plunged from top to bottom. Inside the drains, there were heavy cast iron pipes sealed with blue lead-caulked joints. H. Percy Adams preferred iron pipes to lead pipes due to their durability and resistance to water damage.[508] There was a cistern room situated at the end of the west block on the third floor for water storage purposes.

2.6.3 Life in the British Seamen's Hospital in Istanbul

The British Seamen's Hospital in Istanbul had separate areas for physicians and surgeons, nurses, patients, and the service staff. The planning of the building reflected the hierarchical relationship between these individuals. The building provided areas for rest and relaxation for everyone, but for the service staff these spaces were in separate sections tucked away in the back of the building. Design decisions considered the convenience of nurses in efforts to ease their workload, while the head surgeon was oftentimes actively involved in the decision-making process, particularly with regards to the details of the surgical units. The priority, however, was the comfort and well-being of the patients – particularly those who paid for their hospital stays.

The Medical Staff

The house surgeon enjoyed the most comfortable living arrangements with a large section of the ground floor in the south block functioning as surgeon's quarters almost like a private apartment (Figure 2.57). The rooms at the house surgeon's disposal included a bedroom with a private bathroom, a private sitting room, and a separate room which probably functioned as an office or study.

The nurses, on the other hand, lived on the third floor where there were six single-occupancy bedrooms in both the north and south blocks, with the matron nurse occupying the largest room in the south block (Figure 2.50). The largest room on the third floor of the north block was the nurses' sitting room. There was a 'box room' between the north and south blocks on the third floor probably to store the nurses' trunks. The matron nurse had a storeroom all to herself on the ground floor in the north block (Figure 2.58). The communal dining room of the nurses was also on the ground floor with a pantry adjacent to it. Immediately outside each sanitary tower on the third floor near the window were wash basins produced by Doulton & Co. Limited in Lambeth, London. Next to the basin were the stairs that accessed what was indicated on the published floor plans as the "roof

[508] Adams, "English Hospital Planning" (June 29, 1929): 652.

floor" where the nurses could have some fresh air in the *çardak*-like balconies or enjoy some quiet time in the small enclosures on each side of the balcony facing east – probably a much-welcomed feature for the overworked nurses (Figure 2.59). Easing the nurses' workload was one of hospital architects' priorities in the early twentieth century. Although the idea of scientific management would not reach its peak until the 1910s, during the construction of the British Seamen's Hospital in Istanbul theories about labor efficiency were just developing in manufacturing industries in the United States.[509] For hospital architecture, decisions about the placement, shape, and even the size of features such as door handles, took into consideration the nurses' needs and habits to ensure that they could open the doors in the hospital easily while carrying items. For instance, according to H. Percy Adams door handles had to be oval, and not round.[510]

Like the balconies on the roof floor (the fourth floor) of the British Seamen's Hospital in Istanbul, the small enclosures with curved windows marked as 'shelter' on the floor plan, alluded to some elements found in local architecture (Figure 2.60). While the nurses had direct access to these areas through their living spaces, the roof floor was also accessible via the main staircase and the lift, meaning they were most likely not reserved exclusively for nurses and convalescent patients could probably come here as well at times.

The roof and the central tower featured open galleries surrounding the lift and the central staircase. The central tower of the building was topped with a cupola and a flag post above it. The sixth floor was located inside the tower and only accessible via a narrow staircase. It also featured small galleries which functioned mainly as observation spaces. The ships arriving at the port of Galata could be seen from here, but this area could also have served those who just wanted to enjoy the panorama of the city.

The Patients

The British Seamen's Hospital provided its patients with plenty of areas for socializing such as day rooms on the first and second floors where the patients could sit and relax (Figures 2.61-2.62). The availability of several areas for rest and relaxation were not typical in British hospital planning, and in this regard the British Seamen's Hospital in

[509] Jonathan M. Woodham, *Twentieth Century Design* (London and New York: Oxford University Press, 1997), 12.
[510] Adams, "English Hospital Planning" (June 15, 1929): 592; Adams, "English Hospital Planning" (June 29, 1929): 655.

Istanbul could be considered as a rather luxurious hospital building for its time.[511] Following H. Percy Adams' planning principles, the wards had high ceilings and the corridors connecting them featured low ceilings with open-air spaces above them to prevent air stagnation near the wards.[512]

The Paying Patients

Well-to-do British expatriates living in Istanbul, among them wealthy merchants, government officers, judges, and ambassadors, were potential patients of the hospital. The Hospital Committee correspondence and memoranda related to this new building indicated that it was now desired, and rather suitable, to admit paying patients who were not sailors.[513] In its previous facilities, admission of patients who were not sailors was subject to the special regulations framed by the Hospital Committee, and these patients then could only receive services at the British Seamen's Hospital in Istanbul on the Consul's orders.[514] The north and south blocks on the first floor of the new hospital building reflected the changing outlook of the Hospital Committee by catering solely to paying patients and provided them with comfort and privacy during their stays in private rooms, each with its own fireplace. The first floor of the north and south blocks featured four single occupancy patient rooms each, a total of eight, labelled as 'single ward' on the floor plan (Figure 2.63). G.A.T. Middleton in 1905 highlighted the attention to detail in these private rooms:

> […] for in such a city as Constantinople the European population, other than sailors, requiring hospital treatment would be such as to demand attention in separate rooms rather than large wards. Each of these wards has a separate fireplace, and the way in which these have been provided is worth a good deal of attention.[515]

However, the patients staying in the private rooms also had to share the bathroom, sink room, and water closet situated in the sanitary tower on each block. Both blocks featuring the private rooms had a separate linen storage unit and a day room, the matron's room was in the central area between the day rooms (Figure 2.61). Each block also had an east-facing balcony stretching along the day room and the cross-ventilated lobby leading to the sanitary tower. The south block on this floor had a kitchen in the service of the patients

[511] In his 1929 paper, Adams described day rooms as a luxury, but a very advantageous one. See Adams, "English Hospital Planning" (June 15, 1929): 596.
[512] Ibid., 581.
[513] The National Archives (U.K.), Work 10/42/4
[514] The National Archives (U.K.), AO 30/48; FO 881/6934
[515] Middleton, *Modern Buildings, vol. 3,* 40.

staying on the first floor. Ward kitchens were a common feature in British hospitals[516] and continued to be so for decades. H. Percy Adams defined the ideal ward kitchen as:

> […] not less than 16 feet by 14 feet with sink and hard wood, hinged, grooved, draining boards and plate rack over, a small heating stove (usually gas or electric) for minor cooking operations, a hot water boiler, a dresser. The work done in ward kitchens varies, usually only washing-up and heating up beef tea and milk, but in some cases even boiling potatoes for the wards is done here.[517]

Sometimes ward kitchens also featured a well-ventilated larder where patients could store their private food instead of storage units provided in bed lockers.[518]

Unlike the Nightingale wards which placed the nurse in a central location and kept the inmates under her gaze, the first floor housed an enclosed nurse's room in the north block rather than a nurses' station for watching over all patients. A nurse and the matron were always nearby on the first floor, ready to intervene if needed, without invading the patients' privacy. While the sailors received healthcare in a setting resembling Jeremy Bentham's panopticon, the paying patients were not necessarily treated as docile bodies, and they were not monitored under the same sort of surveillance.

The Sailors

The second floor of the building was entirely dedicated to serve sailors with a ward for eight patients situated on each block (Figure 2.64). Each ward provided patients with sufficient ventilation and plenty of daylight exposure through a window behind each bed, and also featured a nurses' station at its center in line with Nightingale principles. The north and south blocks on the second floor had one single-bed ward each to maximize revenues for the Hospital Committee and perhaps to be used as isolation rooms if these were needed for sailors staying in the multiple-occupancy rooms. A day room, intended for the use of convalescent patients, was located in the area between the north and south blocks. As mentioned earlier, the patients staying in the sailors' wards on the second floor probably convened around the green-tiled stoves as well from time to time. The green tile pattern was repeated around the frames of the doors and windows adding some color to the wards (Figures 2.31-2.32). H. Percy Adams believed that some color added cheerfulness to the hospital environment and was in favor of using light colors on the walls, not necessarily white, but hues such as a reddish tint.[519] For instance, when

[516] MacKintosh wrote about ward kitchens as a standard feature of the British hospital. MacKintosh, *Construction, Equipment*, 23, 30-31.
[517] Adams, "English Hospital Planning" (June 15, 1929): 593.
[518] Ibid.
[519] Adams, "English Hospital Planning" (June 29, 1929): 629. Attendees at Percy Adams' RIBA lecture such as surgeon Holburt Waring also favored the use of bright colors in hospitals. See Waring,

diagnostic departments started including X-ray equipment, he argued against painting the walls black and advocated using blinds instead to keep the room dark only when needed.[520] Other British hospital architects of the time shared this feeling. Irish architect Ernest Elcock (1878-1944) related to H. Percy Adams his experimentation with coloring ward walls in a tangerine orange shade:

> I would like architects to consider the colouring of the wards. It is depressing to lie in bed all day and look at white ceilings. So we have coloured walls with a tangerine orange shade, which we experimented with a long time. It is darker at the dado, and passes up and goes to the ceiling as a fairly warm colour. Everybody is satisfied with the effect, and patients enjoy the change from white.[521]

Each block on the second floor had a sanitary tower featuring a sink room, a bathroom, and a water closet connected to the wards through a cross-ventilated lobby. Similar to the organization on the first floor, the wards in the north and south blocks of the second floor also had east-facing balconies stretching along the single-bed wards and the cross-ventilated lobby connected to the sanitary tower. The south block and the west block both had a kitchen on site. There was one linen store in the north block and an additional storage space in the west block on this floor. Carefully planned details in patient wards reflected Ernest Elcock's words to H. Percy Adams: "Above all, Mr. Adams has shown that the person to be considered is, first of all, the patient, and secondly the patient, and thirdly the patient."[522]

The Service Staff

The protrusion at the end of the west block on the ground floor mostly housed areas for service personnel including bedrooms, a laundry room and linen storage, a bathroom, water closets, and a servants' hall. Tucked away in the back of the building, this section was far from the public face of the British Seamen's Hospital in Istanbul. The new building of the British Consular Prison, designed by Herbert Willis, was adjacent to the service staff's quarters. The service personnel's living spaces connected to a small courtyard via two separate staircases; one was closer to the bedrooms, and the other accessible through the servants' hall. This section of the building was also adjacent to the hospital's mortuary which was close to the courtyard and had direct access to the alley

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"Discussion," 653-54. For a brief history of use of color in British hospitals see, Victoria Bates, "Cold White of Day: White, colour, and materiality in the twentieth-century British Hospital," Twentieth Century British History 34, no. 1 (Mar. 2023): 1-37.

[520] Adams, "English Hospital Planning," (June 29, 1929): 629.

[521] Ernest Elcock, "Discussion after "English Hospital Planning", *Journal of Royal Institute of British Architects* 36, no. 16 (June 29, 1929): 653.

[522] Ibid.

behind the hospital so that the dead body could be removed from the hospital without being seen. H. Percy Adams believed that the postmortem department of hospitals had to be hidden "well out of sight of the wards," and that they needed to have an adjoining viewing room which could also function as a small chapel.[523] The mortuary of the British Seamen's Hospital in Istanbul featured five slabs upon which to place the dead and easily remove them when loading then into a hearse.

The food-related service areas such as the servery where the food was served, cook's store, kitchen, scullery, and two larders were also in the west block on the ground floor. The servery had direct connection to the service elevator; it also had immediate access to the principal staircase and the main lift through an internal lobby. A veranda above the courtyard, accessible both through the service area and the servants' hall in the living quarters of the service staff, was also located here. About the arrangement of this part of the building, G.A.T. Middleton wrote:

> […] the planning is well worthy of a good deal of careful study, showing, as it does, how essential requirements can be met under difficult circumstances; for everything is provided here that is necessary for proper service [...] In fact, upon a restricted site there is a great deal always to be said for a radial arrangement such as is here resorted to.[524]

The space available in the service staff's quarters was very limited and did not leave much room for rest and relaxation areas. The hospital's design kept the workers behind the hospital building along with the dead and neighboring the prison right next door. The veranda did not have any spectacular view and it was a rather dark and gloomy place, and the courtyard's main function was to serve as a laundry yard.

2.6.4 Laundry

The separation of clean and dirty spheres was an important task for the late nineteenth and early twentieth century healthcare institutions. With cross-ventilated lobbies architects attempted to separate the clean air from the dirty air. However, the subject of this process extended beyond air and included objects, and even people. The design of laundry facilities also reflected this notion of separating the clean from the dirty. One of the most dramatic examples of dirty-clean separation of goods in the Ottoman Empire occurred in the Klazomen Quarantine facilities (b. 1865) located on an isolated island in Urla, Izmir, which featured rail tracks to carry, without any contact, the dirty belongings of people arriving at the institution since these items were considered to be potential

[523] Adams, "English Hospital Planning" (June 29, 1929): 633.
[524] Middleton, *Modern Buildings, vol. 3,* 48.

vectors of disease.[525] Although the British Seamen's Hospital did not have a system of this sort, the building had a fairly large area dedicated to laundry facilities. Every enclosure in the basement of the west block, except the mortuary, had a laundry-related function: a washhouse and an ironing-room directly accessible through the service staff's quarters via a staircase, a linen storage unit, an area for dirty linen collection, a boiler house, coal storage, workshop, and adjacent to the mortuary a room divided into two spaces marked as 'infected' and 'disinfected' which had a 'disinfector' between them (Figure 2.65).

Smaller hospitals of 150 beds or less did not necessarily feature on-site laundry facilities and relied on outside laundries, but this was not easy to supervise. The British Seamen's Hospital in Istanbul utilized inhouse steam-powered laundry machines brought from England. The ironing room featured a large ironing press and drying equipment manufactured by W. Summerscales & Sons, Ltd. Engineers of Keighley using metals from the Phoenix Foundry, also located in Keighley. This company designed and produced steam-powered systems both for domestic and institutional use, particularly for hospitals. They prepared elaborate and detailed plans for the laundry facilities of hospitals, as in the example of an 1898 proposal the company planned for the new building of the North Wales Hospital, a mental institution in Britain (Figure 2.66).[526] While the more than 200-patient capacity of the North Wales Hospital required a complete laundry plant, the 34-bed[527] British Seamen's Hospital could probably survive with a more modest laundry facility resembling the ones planned for the small hospitals in rural areas of Britain which were known as cottage hospitals. When they chose to have on-site facilities, smaller hospitals often featured a much simpler laundry unit as was the

[525] Ebru Yılmaz, "A Discussion on the Spatial Representation of the Ottoman Modernization: Urla Quarantine Building," *Online Journal of Art and Design* 8, no. 4 (Oct. 2020): 1-24; Gonca Z. Tuncbilek, "Quarantine(d) Space: Urla-Izmir (Smyrna) Island," *Space and Culture* 23, no. 3 (2020): 246-252. For more information on quarantine facilities in the Ottoman Empire see Chircop, "Quarantine, Sanitisation, Colonialism," 199-231; Sam White, "Rethinking Disease in Ottoman History," *International Journal of Middle East Studies* 42, no. 4 (2010): 549–67; Birsen Bulmuş, *Plague, Quarantines and Geopolitics in the Ottoman Empire* (Edinburgh University Press, 2012); Nükhet Varlık, *Plague and Empire in the Early Modern Mediterranean World: The Ottoman Experience, 1347–1600* (Cambridge University Press, 2015); Sevda Ağır, "Osmanlı'da Karantina Uygulama Süreçleri ve Tepkiler" (MA thesis, Hacettepe University, 2020).

[526] Lindsey Sutton, "The Plans of the North Wales Hospital," accessed Mar. 18, 2024, https://denbighshirearchives.wordpress.com/2018/08/07/the-plans-of-the-north-wales-hospital/.

[527] In R.I.B.A. records the British Seamen's Hospital in Istanbul appears as a hospital providing 50 beds for patients. However, the floor plans also found in the R.I.B.A. archives suggest that the hospital had 34 beds. RIBA Collections, PA1457/AHP[247](1-20)

case in the 15-bed Crewkerne Cottage Hospital in Somerset, England, which was designed by Young and Hall Architects and built in 1903 (Figure 2.67).

Other components of the laundry facility in the British Seamen's Hospital in Istanbul, namely the coal storage, boiler house, and the workshop were in the main section of the west block in the basement of the British Seamen's Hospital in Istanbul. As required, the laundry facilities were connected to the central boiler house via a bridge. Directly accessible through the workshop was a second lift used as a service elevator that went up to the ground floor and the first and second floors where the operating theatre and patient wards were located. An elaborate laundry facility of this sort could cost somewhere between twelve to fifteen percent or even more of the entire construction budget. For instance, £517 of the £4,325 construction budget of the Y-shaped 20-bed Warde Aldam Cottage Hospital in South Elmsall, Pontefract in West Yorkshire, designed by E. Holdsworth Walker (n.d.) and built in 1911, was for its detached laundry and mortuary building.[528]

The laundry facilities of British hospitals, no matter how large or small, were ideally detached from the main hospital buildings, which was not the case for the British Seamen's Hospital in Istanbul due to lack of space at the site. As per H. Percy Adams' efficient hospital planning principles, it featured a laundry yard which was the first arrival point of the dirty items. There was a separate room for the collection of foul linens. Members of the service staff brought the dirty items to the laundry yard using the service lift unlike the American hospitals which featured glass-lined metal shoots through which dirty linen made its way to the basement.[529] Staff would then take the foul or infected items to the 'infected' room to treat them in steeping tanks. The next step was sorting the items into bins and taking them to the wash house, then the dryer, and on to the ironing room. Each ward unit had its own compartment in the delivery area where items waited for airing purposes. After the entire process, the service staff had to take the items to the service lift and place the linens in the linen rooms which were heated by hot water coils and featured cupboards with additional areas reserved for sewing and mending.[530] Laundry was a woman's job in the late nineteenth and early twentieth centuries and since the British Seamen's Hospital's completion predated the invention of detergent in 1907,

[528] Adams, "Cottage Hospitals," 290.
[529] Adams, "English Hospital Planning" (June 29, 1929): 641.
[530] Ibid.

laundry work relied on potassium hydroxide or caustic soda made of lye, which could cause poisoning or burn the skin and eyes, and could be dangerous in many other ways as it required standing up for long hours in poorly ventilated rooms and constant exposure to steam from the irons as well as chemicals.[531] In Britain, laundry work was often an occupation for older women and widows who did not have any other means of income,[532] it was also a popular line of work among women in Istanbul in the nineteenth and early twentieth centuries.[533] While women in need launched laundry businesses as entrepreneurs at times with help from their community, this was not the case for those who worked in establishments such as the British Seamen's Hospital in Istanbul where steam-powered laundry facilities functioned as machine-driven networks in which machinery had a certain level of agency over the human actors operating them.

2.6.5 The Surgical Department

By the early twentieth century, surgical theatres were replaced with smaller and less publicly visible surgical suites and moved from the easily accessible edges of hospitals to upper floors.[534] Located on the first floor of the west block, the surgical department of the British Seamen's Hospital reflected this transformation. The first floor of the hospital building, which also featured the single-occupancy wards looked similar in its planning to that of the second floor in the north and south blocks. However, the plan for this floor differed from that of the second floor, particularly because the outer wall of the section where the first-floor operating room was situated was supported by a girder ensuring that it extended past the floors above to provide sufficient light at the operating table (Figure 2.68).[535] Electricity had been available in Galata since 1889 and by the early twentieth century its use in medical facilities was quite common. In fact, electric-powered devices for hospitals were passing through the Ottoman customs frequently towards the end of the nineteenth century.[536] Despite the advantages and flexibility of artificial light in the

[531] Lucy A. E. Deane, "Laundry Workers," in *Dangerous Trades: The Historical, Social and Legal Aspects of Industrial Occupations as Affecting Health by a Number of Experts*, ed. Thomas Oliver (London: John Murray, 1902), 663-72; Patricia E. Malcolmson, "Laundresses and the Laundry Trade in Victorian England," *Victorian Studies* 24, no. 4 (Summer 1981): 439-62.

[532] Patricia E. Malcolmson, *English Laundresses: A Social History, 1850-1930* (University of Illinois Press, 1986).

[533] Laundry work was even included in the curriculum of girls' occupational schools in the Ottoman Empire in the early twentieth century. See Mustafa Ergün, *İkinci Meşrutiyet Devrinde Eğitim Hareketleri 1908-1914* (Ankara: Ocak Yayınları, 1996), 344-45.

[534] Annmarie Adams, "Surgery and Architecture: Spaces for Operating," in *The Palgrave Handbook of the History of Surgery*, ed. Thomas Schilich (London: Palgrave Macmillan, 2018), 270.

[535] Middleton, *Modern Buildings, vol. 3,* 40.

[536] The first electricity plant in Istanbul was established in 1888. Between the 1850s and 1890s, the most widespread method of lighting in Istanbul were gas-powered systems. For more information see Vahdettin

operating room, architects and surgeons often continued to prefer natural light well into the 1920s as evidenced in Edward Fletcher Stevens' third edition of *The American Hospital of the Twentieth Century* which recommended large vertical windows and North-facing skylights in surgical suites.[537]

The surgical department of the British Seamen's Hospital in Istanbul featured a dressings store, an anesthetic room, a recovery ward, an operating room, and an attached scullery. For less complicated emergencies, there was an additional smaller surgery room located on the ground floor next to the head surgeon's living quarters, similar to the organization of British cottage hospitals, which often did not even feature a surgical room but had large bathrooms that could double as emergency operating rooms when needed.[538]

The British Seamen's Hospital's operating room on the first floor was more compact in comparison to the nineteenth-century surgical theatres, which featured seating areas to accommodate viewers and medical students. Although viewing galleries continued to exist in the twentieth century, since the British Seamen's Hospital in Istanbul did not have an educational mission, the design of its surgical department did not provide direct access to individuals who wanted to view an operation in progress. Annmarie Adams writes that the tradition of accommodating viewers probably continued in the early twentieth century with the provision of mobile seating or by making use of the outer edges of the room, as period photographs suggest.[539] H. Percy Adams regarded the stepped viewing galleries "practically useless" by the 1920s, even for teaching hospitals, since this sort of arrangement only allowed a few students to really see the operation. He thought, with the advancement of teaching methodology in medicine, allowing only a few spectators to the operating room sufficed and he achieved this by including a raised platform with a separate access point for visitors or students at the north end or lighting area of the operating theatres of larger hospitals.[540] At the British Seamen's Hospital in Istanbul, there was no visitor entrance to the operating room; patients requiring surgery, as well as medical and service staff of the hospital, could not directly enter the area where surgeries took place. They first had to enter the hall in the surgical department via a cross-ventilated lobby which opened to the central circular section of the building. The

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Engin and Ufuk Gülsoy, "İstanbul'un Aydınlatmasında Elektrik Dönemi," *Antik Çağdan 21. Yüzyıla Büyük İstanbul Tarihi Ansikolpedisi vol. 9*, ed. Coşkun Yılmaz, (Istanbul: İBB Kültür 2015), 373-95.

[537] Stevens, *American Hospital* (1921), 106. See also Adams, "Surgery and Architecture," 271.

[538] Adams, "Cottage Hospitals," 276.

[539] Adams, "Surgery and Architecture," 270.

[540] Adams, "English Hospital Planning" (June 15, 1929): 598.

anesthetic room was the only space that provided direct access to both the operating room and the recovery ward. The fenestration of the anesthetic room was planned opposite its entrance doors to ensure that the light did not disturb the patients' eyes while lying with their back to the window.[541]

H. Percy Adams was a master of operating room design and formulated his ideal surgical department in consultation with Joseph Lister (1827-1912). Adams emphasized the role surgeons played in the design and development of surgical departments of hospitals in his 1929 paper:

> An operating theatre should be at least 18 feet wide if there are students (this Lord Lister himself told me) and perhaps a minimum of 22 feet long. A usual plan is to have the theatres with due north light and the entrance at the south end, and on one side, a room for washing up the bowls, instruments, etc., and on the other a room for the sterilisers, with an anaesthetising room adjacent to the theatre, also a room for the surgeons to change, fitted with lavatory and perhaps a bath; a sister's room and an instrument room. […] Operating theatres very largely owe much of their design to the surgeons under whose instructions they are built, they being naturally well informed in matters of detail, and each seems to have his own ideas. 1 have designed over 100 operating theatres, and no two arc quite alike as to the plan and details of fittings. My suggestion for a theatre is that it should be not less than 22 feet by 18 feet and 14 feet high, with vertical north window 12 feet wide with centre fixed light and casements on either side 2 feet wide, and with centre-hung fanlights over them, and, above the vertical light, a sloping fixed light at an angle of 45 degrees; the cill of the window 4 feet from the floor (and if a platform for students is placed in front of the window then 6 feet from the platform). The glazing should be of satin-faced plate glass set in light iron or bronze frames with rounded corners with as few projections as possible, and where funds are ample, double glazing is of advantage.[542]

H. Percy Adams preferred resistant materials for the walls and ceilings of the operating room such as a marble composition known as Biancola, hard cement finished with a dull polish, or hard plaster with enamel paint which would be in a color other than white.[543] For the floors, he favoured Biancola or a mix of rubber and Biancola.[544] As for heating, radiators were the architect's choice for the surgical department.[545]

2.6.6 From 1914 to Today

After the Ottoman Empire officially entered World War I in October 1914 alongside Germany the Ottoman government seized the British and French properties in Istanbul in November 1914, and briefly arrested British subjects, mainly missionaries, before ordering them to leave the country. The British Seamen's Hospital in Istanbul operated under the American Red Cross (ARC) during World War I,[546] which remained the only

[541] Ibid., 605.
[542] Ibid., 598.
[543] Ibid.
[544] Ibid.
[545] Ibid.
[546] Yale University Library Collection, Bdc1 F93, Reports and Accounts 1918-1919, "Friends Work at Constantinople," 2-4; The National Archives (U.K.), T1/117788. The American Red Cross had been active

neutral branch of the International Red Cross in the Ottoman Empire until the United States became involved in the war on April 1, 1917.[547] While the Ottoman Red Crescent and the German Red Cross worked primarily on the frontlines and the battle ground, the ARC was in charge of providing healthcare services throughout the Ottoman Empire.[548] The American Embassy and the Ottoman authorities made an agreement to put the ARC in charge of the French and British hospitals in Istanbul as of November 16, 1914 for the treatment of wounded Ottoman soldiers.[549] When the Ottomans removed the capitulations granted to Britain in 1915, the British subjects had to leave Istanbul.[550] Ann Mary Burgess (1861-1943), a British nurse, Quaker and philanthropist, and her assistant Ann H. Harris (n.d.), refused to leave Istanbul, and stayed in the British Seamen's Hospital where they aided the ARC staff in the treatment of wounded Ottoman soldiers in the hospital.[551] During World War I, some of the British physicians of the British Seamen's Hospital in Istanbul wanted to pursue their work; however, the Ottoman authorities rejected the American Embassy's pleas to reinstate them in the hospital.[552]

After World War I ended, during the Allied occupation of Istanbul,[553] the out-patient department of the British Seamen's Hospital offered services to patients in case

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in the Ottoman Empire as early as 1896 when Clara Barton and her colleagues carried out a five-month relief campaign in Istanbul for the Armenians the Hamidian massacres in Eastern Anatolia. See "Red Cross Timeline," accessed Mar. 16, 2024, https://www.redcross.org/about-us/who-we-are/history/significant-dates.html. The American Red Cross also assisted Muslim refugees of the Balkan Wars arriving in Izmir in March and April of 1913. See Cenk Demir, "Amerikan Board'un İzmir'deki Faaliyetleri ve İzmir Uluslararası Kolej" (PhD diss., Erciyes University, 2014), 299. For more information on the activities of the American Red Cross in the Ottoman Empire see, Demir, *Osmanlı'da Amerikan Kızılhaçı*. British and American healthcare workers often collaborated in the Ottoman Empire. This camaraderie continued in the aftermath of World War I as well. For instance, the American Women's Hospitals staff included two British nurses.

[547] Demir, *Osmanlı'da Amerikan Kızılhaçı*, 217.

[548] Ibid.

[549] Ibid., 218-19.

[550] Yale University Library Collection, Bdc1 F93, Reports and Accounts 1918-1919, "Friends Work at Constantinople," 4.

[551] Yale University Library Collection, Bdc1 F93, Reports and Accounts 1918-1919, "Friends Work at Constantinople," 2-4. See also Michelle Tusan, "The Business of Relief Work: A Victorian Quaker in Constantinople and Her Circle," *Victorian Studies* 51, no. 4 (Summer 2009): 647; Sağ, "Osmanlı Başkenti İstanbul'da," 243-44.

[552] BOA, DH.EUM. 5. Şb. 29/21, H-16-12-1334 (Oct. 14, 1916)

[553] The Ottoman Empire signed the Armistice of Mudros on October 30, 1918 and the Allied war ships anchored on the shores of Istanbul on November 13, 1918 despite having guaranteed to the Ottoman officials that the city would not be occupied. The Allies claimed that this was a precaution to ensure that the Ottomans met the Armistice terms. The occupation of Istanbul took a harsh turn in March 1920 when British soldiers stormed the Ottoman Parliament and arrested several MPs after the Parliament unanimously refused to ratify the Treaty of Sèvres, which imposed harsh conditions and ultimately partitioned Anatolia. The occupation marked the beginning of the period known as *milli mücadele* (national struggle). For more information about the *milli mücadele* period and the Turkish War of Independence: Mustafa Kemal (Atatürk), *Nutuk* (Ankara, 1927); Halide Edib (Adıvar), *The Turkish Ordeal* (London: John Murray, 1928); Kemal H. Karpat, *Kısa Türkiye Tarihi* (Istanbul: Timaş Yayınları, 2012).

of emergencies. For instance, in the aftermath of a tram accident in Karaköy in November, 1919 the wounded received treatment at hospitals in the area including the British Seamen's Hospital, the French Hospital, and the Austrian Sankt Georg Hospital.[554] On January 1, 1921, a group of Greek doctors rented the building for three years at £4,500 per annum, and their lease was renewed at a reduced rate each year until the end of 1930.[555] British seamen continued to receive services at the British Seamen's Hospitals in Istanbul for a flat rate of ten shillings per day and destitute British subjects were treated for free. However, the consortium of Greek doctors running the hospital did not admit patients suffering from infectious diseases and mental to the British Seamen's Hospital in Istanbul.[556] As the Lausanne Residence Convention of 1923 was due to expire on August 6, 1931, the British Foreign Office feared that the Turkish state could take over the hospital buildings in Istanbul and Izmir after this date and initiated diplomatic talks regarding this matter and the fate of British trade in Turkey in early 1930.[557] On March 1, 1930, the United Kingdom and the Turkish Republic signed the Treaty of Commerce and Navigation in Ankara.[558] In a letter to Sir George Clerk (1874-1951), British Ambassador in Turkey at the time, Turkish diplomat Zekâi Bey (Apaydın, 1884-1947) expressed that the British schools and hospitals in Istanbul and Izmir could continue their activities on the condition that they abided by the Turkish laws and regulations:

> With reference to the clauses of the Treaty of Commerce and Navigation signed by us this day, I have the honor to assure you, in reply to your Excellency's letter of to-day's date, that the three British schools at Constantinople and the two British hospitals, one at Constantinople and one at Smyrna, may, subject to compliance with the laws, regulations and decrees of the country, continue their activity according to the terms of the letter of his Excellency Ismet Paşa annexed to the Lausanne Residence Convention of the 24th July, 1923, and that after the 6th August, 1931, the date of the expiry of that letter, they will not be less favorably treated in any respect than similar institutions of any other country in Turkey.[559]

While the Turkish government acknowledged the British ownership of these properties, they had to pay property taxes to remain operational.[560] By 1933 the British hospitals in Turkey started to become a financial burden for the British Foreign Office. Furthermore,

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[554] BOA, DH.EUM.AYŞ. 26/41, H-20-02-1338 (Nov. 14, 1919)
[555] The National Archives (U.K.), FO 369/5781 (Nov. 30, 1920); AO 30/48; FO 781/32. In 1928, the annual rent for the building became £700 and remained so until December 1930. The British Seamen's Hospital in Izmir was rented to the *Ospedale di Sant' Antonio* and operated by a group of Italian physicians with a similar arrangement.
[556] The National Archives (U.K.), AO 30/48
[557] The National Archives (U.K.), FO 781/32
[558] "United Kingdom-Turkey: Treaty of Commerce and Navigation. Signed at Angora March 1, 1930; Ratifications Exchanged at Angora, September 3, 1930," *The American Journal of International Law* 27, no. 2 (1933): 95–115.
[559] Ibid., 111-12.
[560] The National Archives (U.K.), FO 781/32

while the hospital in Izmir was no longer used by British sailors as it used to be, the rent for the hospital in Istanbul continued to drop and became £650 per year in 1932.[561] By the end of 1933, the British Embassy in Ankara formulated a plan to operate the British Seamen's Hospital in Istanbul as an independent institution with a British matron nurse and a local physician, and put the hospital property in Izmir on sale.[562] Following a series of negotiations, the Turkish Red Crescent bought the hospital in Izmir in 1935 for a sum of £6,000,[563] and the one in Istanbul along with the Sailors' Home in 1937 for a sum of 99,500 Turkish Liras.[564] The British Foreign Office invested the proceeds from these sales and used the interest accumulated from the investments to cover the medical and hospital expenses of destitute British subjects in Turkey in the 1930s and 1940s.[565] A portion of the funds accumulated after the sale of the hospital in Istanbul was used to repair the British Cemetery in Istanbul.[566] In the aftermath of World War II, the proceeds of the sales of these properties became a point of discussion between the British Foreign Office, Board of Trade, and the Merchant Navy Welfare Board. In 1953 the British Charity Commission approved the establishment of the 'Istanbul and Smyrna Hospitals Fund' and appointed the representatives of these three bodies as trustees.[567] Several British-founded hospitals such as the British Hospital in Port Said and St. John's Ophthalmic Hospital in Jerusalem as well as British individuals in need of assistance in the Middle East received aid through this fund until September 30, 1965.[568]

Today, the structure which was originally built by Henry Pulman in 1860 as the consular offices building, is incorporated into what was formerly the British Seamen's Hospital building in Galata, and serves as the administrative block of the complex. It is now known as the Prof. Dr. N. Reşat Belger Beyoğlu Ophthalmic Education and Research Hospital. The building's history remains a mystery to the staff working at the present-day hospital with several misconceptions about its past such as the widespread idea that it was built during the Crimean War.[569] The building designed by Charles Holden is a unique

[561] The National Archives (U.K.), AO 30/48; FO 195/2510
[562] The National Archives (U.K.), FO 781/32
[563] The National Archives (U.K.), T 161/681
[564] The National Archives (U.K.), FO 195/2517
[565] The National Archives (U.K.), FO 369/5781
[566] The National Archives (U.K.), FO 195/2517
[567] The National Archives (U.K.), FO 369/5781
[568] The National Archives (U.K.), FO 369/513; FO 369/5780
[569] Interviews with the current staff of the Prof. Dr. N. Reşat Belger Beyoğlu Ophthalmic Education and Research Hospital (the present-day occupants of the BSH building designed by Holden and Adams), March 1, 2022. Koç University IRB approval number: 2021.099.IRB3.060.

example of British architecture in Istanbul and its exceptional contours serve as the logo of the Prof. Dr. N. Reşat Belger Beyoğlu Ophthalmic Education and Research Hospital which presently uses the building (Figure 2.69).

Hospital buildings designed decades after the British Seamen's Hospital continued to adopt the Y-shape, such as the Henrotin Hospital in Chicago designed by the architectural firm of Holabird and Root in consultation with architects Robert Carl Berlin (1853-1937) and Percy Swern (1887-1947) in 1935.[570] Charles Holden and H. Percy Adams' main motivation for designing the British Seamen's Hospital building in Istanbul as a Y-shaped structure was to address ventilation and sunlight exposure needs in a vertical arrangement which the pavilion plan demanded in the early twentieth century. Even though the new renditions of the Y-shape plan moved away from the pavilion plan and the Nightingale ward system, this spatial organization allowed all patient rooms to have windows, connected blocks and departments adjacent to each other, and helped ease the overall workflow. It is possible to come across the Y-shape plan in more recent hospitals as well such as the Al Jazeera Hospital in Abu Dhabi, United Arab Emirates designed by the architectural firm of Polensky and Zöllner, built in 1978.[571] Architects looking at the pavilion plan for inspiration to build hospitals which prioritize elements of nature such as greenery and use of timber as building material also prefer modifications of the Y-shape or the cruciform plan. For instance, the New North Zealand Hospital in Hillerød, Denmark designed by C.F. Møller Architects in collaboration with Cubo Arkitekter, which is due to become operational in 2025, is a good example of this approach and it will most likely serve as a prototype for many future hospitals.[572]

2.7 Concluding Remarks

The Daily Graphic dated January 5, 1905 featured an illustration of the newly built British Seamen's Hospital in Istanbul (Figure 2.70).[573] Accompanying the image was a paragraph announcing the opening of the new facilities by Lady Susan Townley (1868-1953), author and wife of the British Chargé d'Affaires in Istanbul, Walter Beaupré Townley (1863-

[570] Veronica Miller, "Henrotin Blends Beauty and Service," *The Modern Hospital* 44, no. 5 (May 1935): 47-52.
[571] Büyükhelvacıoğlu, "Beyoğlu Hastanesi'nin Restorasyon Projesi."
[572] For more information see "416 New North Zealand Hospital," accessed May 24, 2024, https://www.herzogdemeuron.com/projects/416-new-north-zealand-hospital/.
[573] The original of this watercolor illustration is now part of the Adams Holden & Pearson collection at the Royal Institute of British Architects. RIBA Collections, AHP\1\15\1

1945), in the presence of the Grand Vizier and members of the Diplomatic Corps.[574] This building with its adventurous massing and pyramidal silhouette was a demonstration of the latest technology from Edwardian Britain such as multiple elevators, machine-powered laundry facilities, a gas purifier, and a time ball. During the construction stage in 1903 the installation of a wireless communication device in the building even managed to raise some suspicion among Ottoman officials.[575] With its stately appearance and imposing central tower, the British Seamen's Hospital in Istanbul was similar to the Edwardian buildings designed by British architects in Britain and elsewhere in the world in the early twentieth century. However, unlike the monumental Baroque-revival structures of this period, such as the Marshall & Sons building in Mumbai, India designed by Charles Frederick Stevens (b. 1905) or the Union Buildings in Pretoria, South Africa designed by Herbert Baker (b. 1910-1913), which exhibited and legitimized Britain's colonial presence,[576] the British Seamen's Hospital in Istanbul had to be constructed in accordance with the rules and regulations mandated by the Ottoman authorities as detailed in this chapter. It had to be a Y-shaped building because of the constricted plot of land that Britain was allowed to acquire, and the patrons had to get approval for many facets of the project from the sultan's government.

Britain and the Ottoman Empire had competing visions of British presence in the Near East in the early twentieth century. While the former wanted to expand its influence, the latter was trying to maintain its dominance in the region with British support.[577] Regardless of their intentions architects like Holden and Adams became facilitators of Britain's vision of itself as an imperial power as outlined in Disraeli's 1872 speech. Despite Holden's desire to design simple modern structures, he complied with

[574] "British Hospital at Constantinople," *Daily Graphic*, Jan. 20, 1905.
[575] BOA, Y..PRK.AZJ. 47/50, H-29-12-1320 (Mar. 29, 1903)
[576] Bremner, *Building Greater Britain*, 123-46.
[577] Britain wanted to assert influence in the region by creating a Protestant presence through evangelical missionary activities of the London Society for the Promotion of Christianity Amongst the Jews, which was commonly referred to as the "Jews Society." The activities of the Jews Society were combined with efforts to appeal to the biblical notions of ancient Jewish heritage in the Near East as a means to encourage the Jewish population of Britain to move to Palestine. Protestant missionaries from Britain participated in British building activity by building hospitals, schools, and churches particularly in Palestine, an Ottoman territory which came under British control in 1918. British building activity in Jerusalem played a key role in Britain's colonial project in the Ottoman-controlled Near East. Britain first appointed a consul to Jerusalem in 1838 and by 1849 the first Anglican church of Jerusalem, a project the British architect James Wood Johns initially started in 1842 which Matthew Habershon later took over, was completed as a chapel of the British consular compound. Mayir Vereté, "Why was a British Consulate established in Jerusalem?" *The English Historical Review* 85, no. 335 (Apr. 1970): 316-45; Crinson, *Empire Building*, 3, 198-226; Sağ, "Osmanlı Başkenti İstanbul'da," 14.

what the clients requested and created a majestic building. The tower of the British Seamen's Hospital in Istanbul transformed the building into the most significant of all structures in the British compound in Galata (Figure 2.71). However, the construction history of the building was full of disagreements, competition, and confrontation between the delegates of the British shipping interests on the Hospital Committee and the British Treasury and the Office of Works. The sea merchant patrons of the British Seamen's Hospital in Istanbul had to pay a hefty sum to the British Treasury for the property in Galata, but in the end, they were able to get a state-of-the-art hospital built in Istanbul to protect the health of their labor capital. At the end of the day, 'Great Britain' owed a major portion of its greatness to sea trade, and British merchants were able to exercise a certain level of authority over British government officials as long as they could pay the price.

When compared to the hospital buildings Holden designed in Britain around the same years, the British Seamen's Hospital in Istanbul stood out. In Britain, in his early years Holden experimented with nonconformist styles in commissions which were not hospitals such as the Bristol Central Library, 127-129 High Holborn (Norwich House), and the British Medical Association Headquarters. Perhaps because the British Seamen's Hospital commission was not located in Britain, Holden had more liberty to integrate unorthodox elements into the design. He incorporated harbingers of what would later become his signature Art Deco style in the 1920s and 1930s. Art Deco elements in architecture which particularly became popular after the 1925 *Exposition des arts décoratifs et industriels modernes* in Paris, were based on the idea of promoting a harmonious relationship between buildings and their environments.[578] More than two decades before this approach became a pronounced tendency in architecture, Holden designed the British Seamen's Hospital in Istanbul with the intention to give it "an appropriate character" suitable for its surroundings.[579] *The Architectural Review* also noticed Holden's subtle turns hinting towards modernism in the early twentieth century and defined the "scraped, but by no means barren, classicism" expressed in the early work of the architectural firm of H. Percy Adams as precursors "to prepare public and patrons for the simplicities of surface and complex novelties of plan that came in with full

[578] Annmarie Adams, "Art Deco Medicine," in *The Routledge Companion to Art Deco* Bridget Elliot and Michael Windover eds. (London: Routledge, 2019), 162.
[579] RIBA Collections, PA1457/AHP[247](1-20)

modernism after 1930."[580] However, labelling Holden's design for the British Seamen's Hospital in Istanbul as an Art Deco or modernist structure would be an overstatement.

Sailors working on British ships came from different ethnic, national, and religious backgrounds and they had to go through various health checks to qualify for employment. Their physical wellbeing was part of the sea merchant's capital and the raison d'être of overseas British hospitals for sailors was the protection of labor capital. Other foreign hospitals in or near Galata also had a similar mission to serve sailors working on their countries' merchant ships.[581] The sea merchant patrons of the British Seamen's Hospital in Istanbul had to pay a hefty sum to the British Treasury for the property in Galata, but in the end, they were able to get a state-of-the-art hospital built in Istanbul to protect the health of their labor capital. The pathway leading to the main entrance of the building featured naval and medical symbols, which communicated the building's purpose: to provide sailors with healthcare services (Figure 2.72). When the alliance between Britain and the Ottoman Empire came to an end during World War I, the British Seamen's Hospital was handed over to the ARC, and the Ottomans transformed the building into a hospital for sick and wounded Ottoman soldiers entrusted to the care of American healthcare workers. This was only the beginning of years of collaboration to come between the Turks and the Americans in the field of healthcare. As the Ottoman Empire became the Turkish Republic, it fostered friendly relations with the United States. The partnership between the two nations gave birth to many healthcare-related projects which differed both architecturally and institutionally from the British Seamen's Hospital in Istanbul.[582]

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[580] "Obituary - Charles Holden," *The Architectural Review* (Jun. 1, 1960): 371.

[581] The Austro-Hungarian Hospital founded in 1836 and the Italian Hospital founded in 1838 particularly served this purpose. Yıldırım, *Tour of the History of Medicine in Istanbul*, 55, 58.

[582] Although the presence of the United States in the Ottoman Empire difference from that of Britain during this time, the United States embarked on colonial ventures elsewhere in the world. For instance, the United States' colonization of the Philippines in 1898 had similar characteristics with British colonialism. American strategists such as Alfred Thayer Mahan believed that the U.S. had to follow Britain's path in building a strong navy in order to become a dominant world power. See Alfred Thayer Mahan, *The Influence of Sea Power upon History, 1660-1783* (Boston: Little, Brown and Company, 1890) and *The Influence of Sea Power upon the French Revolution and Empire, 1793-1812* (Boston: Little, Brown and Company, 1892). American missionaries also learned from their British counterparts.

Chapter 3

REPUBLICS, ARCHITECTS, HEALTHCARE BUILDINGS

3.1 Introduction

While the Ottoman Empire was entering its final stages by the end of the nineteenth century, American Protestant medical missionary work in Anatolia was starting to gain prominence resulting in the establishment of several hospitals across the Empire's territories. Some of these hospitals continued to exist following the proclamation of the Turkish Republic in 1923, which brought with it new approaches to healthcare and architecture in line with the vision of the Republic's founders and the international alliances they started forming, including their improved relationship with the United States.

This chapter begins with an exploration of the work of American Protestant missionaries operating in the late Ottoman Empire and builds on the vast scholarship on American missionary activities in Anatolia including the publications by İdris Yücel, Brian Johnson, Uygur Kocabaşoğlu, and Özgür Yıldız.[583] The subsequent sections provide information about American medical work in Istanbul before World War I and the American efforts to establish a hospital, nursing school, and a medical school for women in the city. It then looks at how the United States and North American organizations such as the Near East Relief provided medical services in the Ottoman Empire during World War I and its aftermath.

The following section explores the Turkish-American relations during the early years of the Turkish Republic and the contributions of the Rockefeller Foundation in the late 1920s and early 1930s when the founders of the new Republic were commissioning the construction of modernist buildings designed by Austrian architects that would house healthcare-related institutions such as the *Hıfzıssıhha* (Central Hygiene) Institute in

[583] Uygur Kocabaşoğlu, *Anadolu'daki Amerika* (Istanbul: Arba Press, 1989); Erdal Açıkses, *Amerikalıların Harput'taki Misyonerlik Faaliyetleri* (Ankara: Türk Tarih Kurumu, 2003); Gülbadi Alan, *Amerikan Board'un Merzifon'daki Faaliyetleri ve Anadolu Koleji*, (Ankara: Türk Tarih Kurumu, 2008); Mithat Aydın, *Bulgarlar ve Ermeniler Arasında Amerikan Misyonerleri* (Istanbul: Yeditepe Yayınevi, 2008); Mehmet Ali Doğan, "American Board of Commissioners for Foreign Missions (ABCFM) and "Nominal Christians": Elias Riggs (1810-1910) and American Missionary Activities in the Ottoman Empire" (PhD diss., University of Utah, 2013); İdris Yücel, "Anadolu'daki Amerikan Hastaneleri ve Tıbbi Misyonerlik (1880-1930)" (PhD diss., Hacettepe University, 2013); Özgür Yıldız, *Anadolu'da Amerikan Misyonerleri* (Istanbul: Yeditepe Yayınevi, 2015); İdris Yücel, *Anadolu'da Amerikan Misyonerliği ve Misyon Hastaneleri (1880-1934)* (Ankara: Türk Tarih Kurumu, 2017).

Ankara. This section expands on the existing academic literature about the development, architecture, and urbanization of Ankara as the capital of the Turkish Republic such as publications by Bernd Nicolai, Ali Cengizkan, Müge Cengizkan, Leyla Alpagut, Zeynep Kezer, and Sibel Bozdoğan.[584] It outlines what modernist architecture meant for the newly founded Turkish Republic and how a search for local modernisms began.[585]

The section titled "The American Hospital in Istanbul during the Early Republican Era" explores the development of the American Hospital and investigates the several architectural plans and proposals prepared for this institution. It then examines the modernist design of W. Stuart Thompson for the American Hospital building in the Nişantaşı district of Istanbul, which became operational in 1939. The following section titled "The Admiral Bristol School of Nursing Nurses' Home" introduces the Nurses' Home typology informed by the work of Karen Kingsley, Martha Vicinus, Annmarie Adams, and Julie Willis, and it provides an analysis of the Nurses' Home building in Istanbul which was completed in 1950 and designed by Sedad Hakkı Eldem (1908-1988), a renowned Turkish architect, for the American-founded Admiral Bristol School of Nursing.[586] Publications about the American Hospital in Istanbul and its School of Nursing, which became known as the Admiral Bristol School of Nursing in 1945 do not offer an analysis of its architecture, and institutional histories are limited to a volume on the American Hospital in Istanbul by the hospital's previous directors, Warren H. Winkler (1928-2019) and George D. Rountree (1937-2023), and a book about the Admiral Bristol School of Nursing by the school's former principal Gülsevim Çeviker (1935-).[587] Nuran Yıldırım also briefly mentions the school in her volume on the history of nursing in

[584] Bozdoğan, *Modernism and Nation Building*, 159-60; Cengizkan, *Modernin Saati*; Burcu Doğramacı, "Architektur, Politik, Kulturtransfer. Deutschsprachige Architekten, Stadtplaner und Bildhauer als Gestalter der türkischen Hauptstadt Ankara," in *Die Türkei und Europa*, Gabriele Clemens ed. (Hamburg: LIT, 2007); Arnold Reisman, "The Modernization of Turkey by Austrian Refugees, 1933-1945," *Modern Austrian Literature* 41, no. 2 (2008): 57-9; Nicolai, *Modern ve Sürgün*; Leyla Alpagut and Achim Wagner, eds., *Das Werden einer Hauptstadt: Spuren deutschsprachiger Architekten in Ankara* (Ankara: Goethe Institute, 2011); Zeynep Kezer, *Building Modern Turkey: State, Space, and Ideology in the Early Republic* (University of Pittsburgh Press, 2015); Ali Cengizkan and N. Müge Cengizkan, eds., *The Construction of a New City: Ankara, 1923-1933* (Istanbul: Koç University Press, 2022).

[585] Among the academic works that explored this subject are Celal Esat (Arseven), *Yeni Mimari* (İstanbul: Agâh Sabri Kitaphanesi, 1931); Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı*; Renata Holod and Ahmet Evin, eds., *Modern Turkish Architecture* (Philadelphia: University of Pennsylvania Press, 1984); Bozdoğan, *Modernism and Nation Building*, 159-60; Cengizkan, *Modernin Saati*; Kezer, *Building Modern Turkey*.

[586] Vicinus, *Independent Women*, 85-120; Kingsley, "The Architecture of Nursing," 63-94; Adams, "Rooms of their Own," 29-41; Adams, *Medicine by Design*.

[587] Çeviker, *Amiral Bristol Hemşirelik Okulu*; Winkler and Rountree, *Amerikan Hastanesi*. See also the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."

Turkey.[588] Additionally, Cenk Demir's 2022 publication *Osmanlı'da Amerikan Kızılhaçı* (The American Red Cross in the Ottoman Empire) includes sections focusing on the American Hospital in Istanbul and the Admiral Bristol School of Nursing with regards to how these institutions related to the American Red Cross.[589] Some of the information and ideas presented in this chapter with regards to the American Hospital in Istanbul, American College for Girls, and the Admiral Bristol School of Nursing also appear in a forthcoming publication by Lucienne Thys-Şenocak and myself titled "American Healthcare Architecture in Istanbul in the Early Twentieth Century: The American Hospital, the Medical School of the American College for Girls, and the Admiral Bristol School of Nursing Nurses' Home."[590]

This chapter offers new perspectives on the collaborations between Turkey and the United States with regards to building the healthcare infrastructure of the newly founded Turkish Republic by using sources found at Harvard Divinity School Library, Harvard Medical School Francis A. Countway Library of Medicine, Dumbarton Oaks Library and Archives, Columbia University Avery Architectural and Fine Arts Library, Columbia University Rare Books and Manuscripts Library, Drexel University College of Medicine Legacy Center Repository, Rockefeller Archive Center, Library of Congress (United States), Goethe Institute Ankara, Vehbi Koç Ankara Studies Research Center, Koç University Suna Kıraç Library, Koç University Health Sciences Library, SALT Research Library and Archive, American Research Institute in Turkey Istanbul Center Library, Turkish State Archives, and Archives of the Ankara Municipality as well as articles from the archives of periodicals such as the *New York Times*, *Arkitekt*, *Wiener Bilder*, and *Cumhuriyet*. To provide perspectives on the lived experiences within the buildings discussed in this chapter, the chapter also refers to the interviews I conducted with two former students as part of this research.[591]

[588] Yıldırım, *Savaşlardan Modern Hastanelere*.
[589] Demir, *Osmanlı'da Amerikan Kızılhaçı*, 312-22, 333-40.
[590] Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[591] Koç University IRB approval number: 2021.099.IRB3.060.

3.2 Protestant Medical Missionaries

3.2.1 The Medical Work of the American Board of Commissioners for Foreign Missions

American missionary organizations learned from their British counterparts how to create spheres of influence particularly through education and healthcare services.[592] While British missionaries mainly focused on Palestine in the Ottoman territories, their American counterparts carried out building activities in Anatolia as well as Bulgaria and Lebanon, which were also in the Ottoman domain until the early twentieth century.[593]

Although Americans, like their British counterparts, initially launched missionary expeditions to the Ottoman realm mainly out of an interest in the Biblical 'Holy Lands,' their exploratory missions in more central regions of the Ottoman Empire had preceded the American missionary involvement in what was then the provincial regions of the Ottoman Empire such as the city of Antep. In January 1820, Levi Parsons (1792-1822) and Pliny Fisk (1792-1825) of the American Board of Commissioners for Foreign Missions (ABCFM) arrived in Izmir to focus on learning the local languages before heading to Jerusalem, Beirut, and Damascus to gain a better understanding of the region.[594] Parsons and Fisk's mission was cut short upon their deaths in 1822 and 1825 respectively. Isaac Bird (1793-1876) and William Goodell (1792-1867) replaced them in 1823 with operations in Beirut under the name 'The Palestine Mission,' but due to local

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[592] This was also related to the missionaries' failure to attract Muslims and Christians of other denominations to Protestantism in the Ottoman Empire. They eventually started focusing on Armenian communities. This strategy of the American Board of Foreign Missions (ABCFM) is discussed widely in late Ottoman historiography and the histories of Protestant missionary activities. See for example, Anderson, *History of the American Foreign Missions*; Kocabaşoğlu, *Anadolu'daki Amerika*, 76; Leavy, *Looking for the Armenians*; Açıkses, *Amerikalıların Harput'taki Misyonerlik Faaliyetleri*, 36-42; Alan, *Amerikan Board'un Merzifon'daki Faaliyetleri*, 86; Aydın, *Bulgarlar ve Ermeniler*; Doğan, "American Board of Commissioners"; Yıldız, *Anadolu'da Amerikan Misyonerleri*; Yücel, *Anadolu'da Amerikan Misyonerliği*. There was a similar attitude towards Protestant missionaries in regions like Punjab and Kashmir, for more information see Ebrahimi, *Emotion, Mission, Architecture*, 3.

[593] Bulgaria gained its independence in 1908 and Lebanon remained an Ottoman territory until the end of World War I in 1918. For more information see Aydın, *Bulgarlar ve Ermeniler*; Christopher L. Miller, "American Missionaries and the Formation of Modern Bulgarian National Consciousness," *East European Quarterly* 45, no. 3-4 (Sep.-Dec. 2017): 163-84; Habib Badr, "American Protestant Missionary Beginnings in Beirut and Istanbul: Policy, Politics, Practice, and Response," in *New Faith in Ancient Lands: Western Missions in the Middle East in the Nineteenth and Early Twentieth Centuries*, ed. Helen Murre-van den Berg (Brill, 2006), 211-39.

[594] For more information on Parsons and Fisk see "Parsons, Levi (1792-1822): American Missionary to the Near East," accessed May 24, 2024, https://www.bu.edu/missiology/missionary-biography/n-o-p-q/parsons-levi-1792-1822/; "Fisk, Pliny (1792-1825): Pioneer of the Near East Mission of the American Board of Commissioners for Foreign Missions (ABCFM)," Boston University School of Theology, History of Missiology – Biographies, accessed May 24, 2024, https://www.bu.edu/missiology/missionary-biography/e-f/fisk-pliny-1792-1825/.

resistance they retreated to Malta.[595] Throughout the 1820s, the ABCFM continued its activities in the Ottoman territories without a permanent office. In 1829, its Secretary General Rufus Anderson (1796-1880) paid a visit to the Empire launching the initiative towards the establishment of an ABCFM station in Istanbul, then the Empire's capital.[596] Finally in 1831, the ABCFM's Istanbul station became operational under the leadership of William Goodell.[597]

In its early years, the ABCFM missionaries in the Ottoman Empire relied on the support of British diplomats[598] since the United States did not have any official diplomatic presence in the Ottoman Empire until 1831.[599] In the 1830s, the ABCFM activities started gaining a medical character.[600] When the ABCFM missionaries arrived in Anatolia, they initially did not find acceptance either among the Muslim population or with the

[595] The ABCFM made several unsuccessful attempts to establish a base in Beirut with the help of British diplomats. The main resistance to Protestant missionaries in Beirut came from local Catholic groups. Yücel, *Anadolu'da Amerikan Misyonerliği*, 26-27.

[596] For more information on Anderson see "Anderson, Rufus (1796-1880): American Congregational Administrator and Theorist of Foreign Missions," Boston University School of Theology, History of Missiology – Biographies, accessed May 24, 2024, https://www.bu.edu/missiology/missionary-biography/a-c/anderson-rufus-1796-1880/.

[597] Strong, *Story of the American Board*, 80-107; Yücel, *Anadolu'da Amerikan Misyonerliği*, 28-29.

[598] However, the relationship between American missionaries and British diplomats was not always amicable. During what Jeremy Salt calls the "planting" phase (1810-1850) of the ABCFM project, two missionaries and their wives were assigned to Ceylon and India. Upon their arrival in Calcutta in 1812, they faced the opposition of the representatives of the East India Company and the Governor General ordered them to leave, some American missionaries were also arrested by the British when the Anglo-American War of 1812 broke out. The rapprochement between the ABCFM missionaries and British diplomats did not begin until 1814. See Salt, "Trouble Wherever They Went," 287-313.

[599] Maritime trade to the Ottoman Empire, particularly to the Port of Smyrna (İzmir) from the New England region began in the early 1780s. While the United States President John Adams (1735-1826, Presidency 1797-1801) made attempts to appoint a representative to the Sublime Port (Babıâli) in 1799, these plans were not realized. The first trade treaty between the United States and the Ottoman Empire was signed on May 7, 1830, during the Presidency of Andrew Jackson (1767-1845, Presidency 1829-1837) and the reign of Abdülaziz. The first American *chargé d'affaires* to Istanbul was appointed in 1831 following this treaty. The Ottoman Empire openly supported the North during the American Civil War (1861-1865) and the Ottoman Embassy in Washington, DC was established in 1867. By the 1870s, there was considerable arms trade between the two nations. The American representation in Istanbul formally became an embassy in 1906. For further information on Ottoman-US relations, see Akdes Nimet Kurat, "Türkiye ve Amerika Birleşik Devletleri Arasındaki Münasebetlere Ait Arşiv Vesikalıkları," *Ankara Üniversitesi Tarih Araştırmaları Dergisi* 5, no. 8, (May 1967): 282-373; Çağrı Erhan, *Türk Amerikan İlişkilerinin Tarihsel Kökenleri*, (Istanbul: İmge Kitabevi Yayınları, 2001); Kadir Kasalak, "Birinci Dünya Savaşı Yıllarında Osmanlı ABD İlişkileri," *Ankara Üniversitesi Türk İnkılap Tarihi Enstitüsü Atatürk Yolu Dergisi* 14, no. 55 (Fall 2014): 108-124; Yücel, *Anadolu'da Amerikan Misyonerliği*, 43; Hakan Özoğlu, *Amerikalı Diplomat Amiral Bristol'ın Gözlemleri: Osmanlı'nın Çöküşü – Cumhuriyet'in Kuruluşu (1919-1927)* (Istanbul: Yapı Kredi Yayınları, 2022), 10.

[600] The first medical missionary of the ABCFM was Peter Parker who went to China in 1834. Although William E. Strong noted that Parker was "the first distinctively medical missionary ever sent to the field by any American or English-speaking society," (Strong, *Story of the American Board*, 109) the British missionary organization Church Missionary Society (CMS) had sent its first medical missionary Henry Graham to the field five years earlier in 1829. Cadbury Research Library, University of Birmingham (Henry Graham papers, C A 1 O106).

Armenian Apostolic Church.[601] By the mid-nineteenth century, offering local populations certain amenities, mainly in the form of education and healthcare services, became a vessel for missionary societies to find acceptance in non-Protestant lands.[602]

Missionaries and colonials did not regard Protestantism just as a religion, but as a means to 'becoming civilized' as evidenced in the correspondence and records of missionaries of the time.[603] They also viewed appropriate approaches to medicine and healthcare as an intricate element of Christianity. For instance, in a letter announcing his arrival in Istanbul published in the October 1831 issue of the *Missionary Herald*, the American missionary William Goodell wrote:

> Before we cast anchor, we were visited by the health officer, a Turk, who immediately compelled us to feel, that the Turks were abandoning their notions of fate, and were introducing the customs of more civilized and of Christian nations, by subjecting us to several days' quarantine, in consequence of our having touched at Smyrna. This quarantine we are now passing up the Bosphorus, at the distance of a mile and a half or two miles from Galata.[604]

Azariah Smith's (1817-1851) arrival in Antep in 1847 with a *firman* (official sultanic decree) to practice medicine was a turning point in the history of American medical missionaries in Anatolia. A graduate of Yale Medical School, he soon found acceptance among Muslims and Armenians alike and spearheaded the establishment of several missionary clinics across Anatolia at a time when cholera outbreaks were becoming prevalent particularly in rural areas.[605]

Typical of the mid-nineteenth century medical missionary, Azariah Smith set up a clinic and dispensary in his home where he accepted patients between noon and 3:30PM. To qualify for medical services free of charge patients needed to present a 'certificate of poverty' signed by the local authorities. At that time, the ABCFM required its medical missionaries to prioritize preaching and lecturing about Protestantism over medical work.[606] Prioritization of medical services among missionary societies and the

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[601] For instance, in 1847 the ABCFM missionary Rev. Thomas Johnston's appointment to Antep was met with Armenian protests which led to his expulsion from the city under a shower of stones less than three months after his arrival. Brian Johnson, *Şifahane "The House of Healing": A Brief Account of Gaziantep's American Hospital and Associated Historical Institutions* (Gaziantep: SEV Amerikan Hastanesi, 2008), 3, 8.
[602] Ibid.; Yücel, "Anadolu'daki Amerikan Hastaneleri"; Yücel, *Anadolu'da Amerikan Misyonerliği*.
[603] See for example "Extracts of a letter from Mr. Goodell," *The Missionary Herald*, vol. 27, no. 10, Oct. 1831; E.D.G. Prime, *Forty Years in the Turkish Empire: Memories of Rev. William Goodell* (New York: Robert Carter and Brothers, 1876).
[604] "Extracts of a letter from Mr. Goodall," *The Missionary Herald*, vol. 27, no. 10, Oct. 1831.
[605] Johnson, *Şifahane*, 3.
[606] Ibid., 4.

establishment of repurposed or purpose-built missionary hospitals would not begin until the 1870s.

David Hardiman notes that until the 1870s unqualified missionaries were also involved in medical work with the belief that they were following in the footsteps of Jesus and the Apostles who were both healers and preachers simultaneously.[607] As the medical profession became more regulated in the late nineteenth century, a demarcation between theological and medical careers became inevitable.[608] The changing character and background of the medical missionary also altered the ways in which medical missionaries offered healthcare services to local populations. While the late-nineteenth-century medical missionaries had some knowledge of the Bible, their primary training was in medicine.[609] This was probably why the construction of purpose-built mission hospitals came after the emergence of this new understanding of the medical missionary. As David Hardiman writes:

> Until the later years of the nineteenth century, most medical missionaries practised from their own houses or in rented buildings that had not been built with this purpose in mind and which were often poorly suited to the task. Patients were preached to as they waited to be treated by the mission doctors. […] As biomedical work grew in sophistication, the emphasis gradually shifted towards the construction of purpose-built hospitals – which required much planning, organisation and extensive fund-raising. The great advantage of hospitals – from the missionary point of view – was that patients were confined and thus amenable to preaching and other 'Christian' influences.[610]

Like the ABCFM, the British Church Missionary Society (CMS) founded hospitals in geographies such as Egypt, Palestine, Iran, and China. The work of architectural historian Sara Honarmand Ebrahimi regarding the mission hospitals established by the CMS in Iran and British India confirm that not only the CMS, but almost all Protestant medical missionaries included those affiliated with the ABCFM, the London Missionary Society (LMS), the Society for the Propagation of the Gospel (SPG), the Christian Missions in Many Lands (CMML), and the Germany-based Sudan Pionier Mission (SPM) followed a "step-by-step establishment pattern" in the building process of mission hospitals.[611]

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[607] David Hardiman, ed., *Healing Bodies, Saving Souls: Medical Missions in Asia and Africa* (New York: Rodopi, 2006), 15.
[608] Ibid. Hardiman notes that the medical profession was not regulated in Britain before the Medical Act of 1858, therefore anyone could call themselves a physician until then.
[609] Ibid.
[610] Ibid., 16-17; see also Ebrahimi, *Emotion, Mission, Architecture*, 36.
[611] Ebrahimi, *Emotion, Mission, Architecture*, 35.

In the latter part of the nineteenth century, the delays in purpose-built mission hospital construction projects, and the necessity to resort to make-shift solutions, were in part due to limited financial resources rather than a lack of motivation. In academic literature, authors such as Michael Jennings and Karen Vallgårda discuss the Protestant missionaries' limited access to material sources in the African and Indian contexts.[612] The establishment of purpose-built Protestant mission hospitals in the Ottoman realm was also delayed partially due to financial constraints since missionaries relied heavily on donations, most which they had to personally solicit for hospital and school building projects.

Sara Honarmand Ebrahimi points out that in the case of Iran, medical itineration tours and the establishment of dispensaries as precursors or complementary service-providers of larger purpose-built hospitals helped build trust and friendship between the missionaries and local populations.[613] İdris Yücel also argues that missionaries might have deployed a step-by-step building pattern in the Ottoman realm to test the waters with smaller and less costly architectural ventures such as make-shift dispensaries where they could assess the demand in different communities before investing funds to build larger hospital buildings.[614] Much like the experience of the CMS missionaries in Iran, the ABCFM missionaries were able to establish trust and build strong links with local communities through more intimate domestic settings, in-house visits, or small dispensaries. The CMS highlighted the advantages of these less stately solutions in an 1891 report: "the medical missionary must not be content with a central hospital, but by branch dispensaries or itineration must try to reach the outlying populations."[615] As Ebrahimi points out these precursor medical practices played an important role as instruments of emotional set-up. Ebrahimi writes:

> These practices provided social settings for interaction and, through interaction, for perception and sensation between the missionaries and the local people. They allowed a more profound means of communicating with people. They also widened the area under a medical mission's influence,

[612] Jennings argues that financial constraints were the main obstacle for the Anglican missionaries of the Universities' Mission to Central Africa (UMCA) in Tanganyika (modern-day Tanzania). See Jennings, "Missionary Medicine in Colonial Tanganyika," 44. Vallgårda makes a similar argument regarding Danish missionaries in India. See Vallgårda, "Were Christian Missionaries Colonizers?" 874.
[613] Ebrahimi, *Emotion, Mission, Architecture*, 35. See also A friend of Iran, *Dawdson: The Doctor: G. E. Dodson of Iran* (London: The Highway Press, 1940), 35.
[614] Yücel, "Anadolu'daki Amerikan Hastaneleri," 119.
[615] "Itinerating Medical Work: Why we do it, and how," *The Church Missionary Gleaner* 18, no. 213 (1891): 135. Also cited in Ebrahimi, *Emotion, Mission, Architecture*, 35.

> providing missionaries with opportunities to engage with people from the cities themselves and the surrounding villages and other towns further afield.[616]

The ABCFM missionaries working in the Ottoman Empire were able to solicit donations from wealthy patrons and drew on their personal connections in the United States for larger building projects. The ABCFM also received donations from Britain, particularly in the early nineteenth century, facilitated by the British diplomats appointed to the Ottoman Empire. Local populations in the Ottoman Empire supported the ABCFM as well with in-kind donations and financial contributions.[617] The ABCFM hospitals charged patients who could afford it fees for the services rendered, and they obtained some funding from the ABCFM headquarters in the United States, mostly in the form of staff salaries. While the lack of financial resources might have played a role in slowing down the actual construction of the ABCFM hospitals in the Ottoman Empire, this was not the only factor that caused delays. First, there was added value and sensory/emotional benefits to not having large central hospitals in the earlier days of medical missionary activities, as demonstrated in the aforementioned example of Azariah Smith's experience in Antep; he was able to introduce himself as a physician to the local communities in a domestic setting. Second, in the Ottoman case, missionaries deliberately carried out the establishment processes of mission hospitals gradually so as not to draw the attention and potential hostility of government officials. Particularly during the thirty-year *İstibdat* period,[618] which started in February 1878 with Abdulhamid II's dismissal of the Ottoman parliament and ended with the Young Turk Revolution of July 1908, it became increasingly difficult for missionaries to carry out medical work legally and openly in the Ottoman Empire.[619] Foreign nationals were required to get authorization to practice medicine in the Ottoman Empire by passing the equivalency exams in Ottoman Turkish, which could be done with the help of a translator certified by their country's consular offices. As of 1888, the exam could also be written in French. Ottoman citizens who studied medicine abroad and the graduates of the American medical schools located in the Ottoman Beirut (established in 1867) and Antep (established in 1876) also had to pass this test to start practicing medicine in the Ottoman Empire. Furthermore, foreign nationals were not authorized to establish private hospitals or work for municipal

[616] Ebrahimi, *Emotion, Mission, Architecture*, 35.
[617] Yücel, "Anadolu'daki Amerikan Hastaneleri," 121.
[618] In historiography and popular culture this period has been characterized as oppressive, tyrannical, and autocratic. See Chapter 2 for more information.
[619] Yücel, *Anadolu'da Amerikan Misyonerliği*, 151-53.

healthcare institutions as they pleased in the Ottoman Empire.[620] During the Second Constitutional period (1908-1920), these rules were somewhat relaxed as understood from authorization given to foreign physicians to practice medicine and establish hospitals such as the American William Schauffler Dodd (1860-1928) who received an authorization to establish a hospital in Konya.[621]

Despite the existence of limiting rules and regulations, the ABCFM missionaries were able to establish multiple hospitals all over Anatolia, either by disguising the locations they repurposed as domestic dwellings or by building purpose-built structures with the assistance or intervention of American diplomats. At times, local authorities also cooperated or turned a blind eye to medical missionary activities in order to enable the provision of healthcare services for the residents they were governing.[622] The easiest way for medical missionaries to 'set up shop' in the Ottoman Empire without being noticed was to organize a portion of the mission station facilities as simple infirmary-like dispensaries or use their own residential spaces. If officials suspected anything, the medical missionary could dispute the claims by saying that the visitors were guests rather than patients.[623]

In the second half of the nineteenth century two matters highlighted in the descriptions provided by medical missionaries in Asia Minor became major catalysts in the plans to start a medical school and hospital in Antep: the scarcity of healthcare professionals who had received training in modern 'Western' medicine, and the observation that the Ottoman health officials appointed to that region lacked the required medical knowledge.[624] The Ottoman Empire's first Western-style modern medical school had been established in 1829 in Istanbul and the Empire's reserve of physicians trained locally or abroad in the latest medical techniques mostly worked in the western coastal regions of the Ottoman lands leading to a deficit of medical services in the remote eastern

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[620] See for example BOA, Y..PRK.UM. 34/35, H-24-07-1313 (Jan. 10, 1896); BOA, DH.MKT. 1560/60, H-26-02-1306 (Nov. 1, 1888). See also Yücel, *Anadolu'da Amerikan Misyonerliği*, 151-53.

[621] BOA, DH.İD. 117/67, H-14-06-1330 (May 31, 1912). See also Yücel, *Anadolu'da Amerikan Misyonerliği*, 151-53. William Schauffler Dodd was born in Izmir on Dec. 27, 1860, as the son of American missionaries Edward Mills Dodd (1824-1865) and Lydia Harris (Babbit) Dodd (1827-1923). More information about William Schauffler Dodd's life and times can be found in the biography written and privately printed by his son Edward Mills Dodd (1887-1967). See Edward Mills Dodd, *The Beloved Physician: An Intimate Life of William Schauffler Dodd* (Privately Printed, 1931).

[622] This was particularly the case in Adana and Kayseri. Yücel, *Anadolu'da Amerikan Misyonerliği*, 154-58.

[623] Ibid.

[624] İdris Yücel, "An Overview of Religious Medicine in the Near East," *Journal for the Study of Religions and Ideologies* 14, no. 40 (Spring 2015): 49.

provinces. To fill this gap, the ABCFM missionaries concentrated their medical efforts in the eastern parts of Anatolia. The foundation of the hospital in Antep named 'Azariah Smith Memorial Hospital' after the American medical missionary who had died in Antep in 1852 was followed by the establishment of ABCFM outpatient clinics, dispensaries, and hospitals in varying sizes and patient capacities in Mardin (1885), Merzifon (c. 1895-1897), Kayseri (1897), Van (1899), Harput (1903), Sivas (1903), Adana (1904), Erzurum (1904), Diyarbakır (1908), and Konya (1911).[625]

In the 1890s, during the pogroms against Armenians in Eastern Anatolia, the Ottoman authorities became particularly cynical of the ABCFM missionaries, and the Istanbul government started intimidating the local officials regarding their lenient attitude towards the missionaries. They also slowed down medical degree equivalency approval processes for foreign-educated physicians, tried to prevent missionaries' medical tours from town to town across the Ottoman Empire, and initiated investigations about the missionaries involved with Armenian communities.[626] In addition to such measures, Abdulhamid II launched hospital building projects and attempted to strengthen the municipal healthcare systems to ensure that local populations would not need to resort to mission hospitals.[627]

3.2.2 An American Medical Missionary in Anatolia: Thomas Spees Carrington (1868-1940)

Although the first ABCFM station in Istanbul had been formed in 1831,[628] the establishment of a short-lived American hospital in the city did not occur until 1905. This first American hospital in Istanbul was the fruit of Thomas Spees Carrington's labor, a medical missionary of the ABCFM who had previously overseen the American Hospital in Merzifon[629] in 1897.[630] Carrington started his hospital in this town in the Black Sea

[625] Ibid., 52.
[626] However, these measures did not stop medical missionaries' activities. For instance, Kayseri and Van hospitals were ordered to be shut down, but they continued to operate. American diplomats also intervened when unauthorized hospitals were ordered to shut down. Yücel, *Anadolu'da Amerikan Misyonerliği*, 159, 165-8.
[627] Ibid., 159.
[628] Yücel, "Anadolu'daki Amerikan Hastaneleri," 25, 28; Yücel, *Anadolu'da Amerikan Misyonerliği*; Doğan, "American Board of Commissioners," 51.
[629] Referred to as 'Marsovan' in American archival sources.
[630] "American Medical Work in Turkey: What Is Being Done to Meet the Needs, Facts Especially Relating to the Hospital and Training School for Nurses in Constantinople," (New York, 1905): 11 (Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University). According to Nil Sarı, a nurse named J. N. Hoyland (n.d.) initially started the hospital in Merzifon circa 1895-1896 in a rented house near the American college in this town. See Nil Sarı, "Merzifon Amerikan Misyoner Hastanesi," in *I. Amasya Araştırmaları Sempozyumu (Amasya, 13-15 Haziran 2007)*

region of the Ottoman Empire in a local house as a five-room clinic[631] and by 1904 it grew into a larger establishment with three substantial buildings, a modern operating room, beds to accommodate forty patients, and a large out-patient unit which received thousands of patients annually.[632] It was here that Carrington established a nurse training program which would later serve as a model for other ABCFM hospitals in Anatolia. Like other missionary hospitals, Carrington's establishment in Merzifon did not have legal authorization and in 1906, when Carrington was in Istanbul, it came under more scrutiny by Ottoman authorities. At this point the facilities in Merzifon had reached a hundred-bed capacity and also had a pharmacy section.[633]

In a talk he delivered at a fundraising reception in New York on March 26, 1908 hosted by New York socialite Helen Miller Gould (1868-1938), who would later become the first woman vice-president of the American Bible Society in 1918, Carrington told the story of how he was able to recruit his first local nursing student in Anatolia around 1899-1900 and how he launched the nurse training program at his hospital in Merzifon which other American hospitals in Anatolia also started to apply.[634]According to a *New York Times* article published on July 30, 1905, Carrington's first nursing student was a young Armenian woman named Lusaper, who continued her training despite her family's strong opposition.[635] Carrington's nursing school held graduating exercises after three years of training and upon completion participants received a diploma, after which they could work at the American hospitals in the region.[636]

In his talks, Carrington provided details about the initial setting of the hospital he established in Merzifon. Descriptions of these intimate medical settings of missionary physicians offer insights into how these precursory spaces functioned and helped build

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Bildirileri, Amasya Valiliği Yay., I. Kitap, ed. Yavuz Bayram (Amasya, 2007), 586-608. About the hospital in Merzifon, see also Alan, *Amerikan Board'un Merzifon'daki Faaliyetleri*; Doğan, "American Board of Commissioners"; Kocabaşoğlu, *Anadolu'daki Amerika*; Yıldız, *Anadolu'da Amerikan Misyonerleri*; Yücel, *Anadolu'da Amerikan Misyonerliği*.

631 Thomas Spees Carrington, "Medical Work in Turkey: Can Conditions in Oriental Countries Be Changed?" (1908), 5-6 (HathiTrust, accessed Mar. 31, 2023, https://catalog.hathitrust.org/Record/102484403).

632 "American Medical Work in Turkey," 11.

633 BOA, DH.MKT. 1131/15, H-11-10-1324 (Nov. 28, 1906). Also cited in Yücel, *Anadolu'da Amerikan Misyonerliği*, 62. In 1911, a hundred and twenty-bed capacity new hospital facilities were built. Sarı, "Merzifon Amerikan Misyoner Hastanesi," 587. Undated site plans found in the SALT archives suggest that by the 1930s, despite several setbacks and interruptions, the hospital eventually reached two-hundred-bed capacity (SALT American Board collection, ABANEM063001-008).

634 Carrington, "Medical Work in Turkey."

635 "The Need for Trained Nurses in Turkey," *New York Times*, July 30, 1905, 28.

636 Carrington, "Medical Work in Turkey."

trust in the process of forging emotional communities prior to the establishment of large-scale hospitals.[637] Carrington reminisced in 1908 about his earlier experiences in Merzifon:

> I was sent to Turkey in 1897 to build a hospital at Marsovan in Asia Minor for the mission stationed at that point. During the first year after my arrival, while constructing the new hospital, for temporary use, we rented a native house of five rooms, furnished it with eight mattresses spread on the floor and a few dishes. An old kitchen table did duty in the operating room, flanked by a number of tine kerosene oil cans which used as sterilizers. Still, under such conditions, in eight months, ninety major operations were performed.[638]

Carrington was particularly adamant about setting up a system that would lead the way to supplying the Ottoman Empire with trained nurses and he highlighted this goal in his campaign to finance the American Hospital and Training School for Nurses in Istanbul. The 1904-1905 brochure inviting donations exclaimed the need for nurses in the Empire:

> […] Dr. Carrington hit upon the plan for supplying native trained nurses who should be thoroughly educated and competent to instruct their own people. Six years ago the first training school was opened in his hospital at Marsovan, and it has been a success from its inception. But its capacity is very small. The demand for nurses now is enormous All the hospitals could use them. The schools want them and the opening for private nursing is practically unlimited. Under such pressure, with a whole nation calling for trained nurses, the new hospital and training school to be erected in Constantinople seems imperative.[639]

John G. A. Leishman (1857-1924), who at the time was the United States Minister to the Ottoman Empire,[640] confirmed Carrington's conviction about the need for nurses in Ottoman lands in a letter to him on August 7, 1905:

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[637] Barbara Rosenwein introduces the term 'emotional communities' to highlight the social nature of emotions. Karen Vall*g*årda defines this term to explain social formations which capture the dynamic power of emotions, mobilize, and regulate individuals' emotional conducts, and help forge communities. See Barbara H. Rosenwein, "Worrying about Emotions in History," *The American Historical Review* 107, no. 3 (Jun. 2002): 821-45; Karen A. A. Vall*g*årda, "Tying Children to God with Love: Danish Mission, Childhood, and Emotions in Colonial South India," *Journal of Religious History* 39, no. 4 (Dec. 2015): 601. William Reddy uses the term 'emotional regimes' in reference to broader concepts to explain the politics of emotions. William M. Reddy, *The Navigation of Feeling: A Framework for the History of Emotions* (Cambridge University Press, 2001). See also Rob Boddice, *The Science of Sympathy: Morality, Evolution, and Victorian Civilization* (University of Illinois Press, 2016), 13-16; Ebrahimi, *Emotion, Mission, Architecture*, 10-15. Scholarly publications which explore the precursory role of mission dispensaries and medical itineration tours include Michelle Renshaw, "Family-Centred Care in American Hospitals in Late-Qing China," in Graham Mooney and Jonathan Reinarz, eds., *Permeable Walls: Historical Perspectives on Hospital and Asylum Visiting* (Amsterdam and New York: Rodopi, 2009): 57; John R. Stanley, "Professionalising the Rural Medical Mission in Weixian, 1890–1925," in David Hardiman, ed., *Healing Bodies, Saving Souls: Medical Missions in Asia and Africa* (Amsterdam: Rodopi, 2006), 123; David Hardiman, "Christian Therapy: Medical Missionaries and the Adivasis of Western India, 1880–1930," in Hardiman, *Healing Bodies, Saving Souls*, 154; Samir Boulos, *European Evangelicals in Egypt (1900–1956): Cultural Entanglements and Missionary Spaces* (Leiden and Boston: Brill, 2016), 178.

[638] Carrington, "Medical Work in Turkey," 5-6.

[639] "American Medical Work in Turkey," 5.

[640] At the time the highest-level representative of the United States in the Ottoman Empire. He later became the first United States Ambassador to the Ottoman Empire in 1906.

> I am quite of the opinion that no greater humanitarian or philanthropic enterprise could be undertaken than the establishment of a training school for nurses, as the customs of the country render the nurse in most cases a more important factor in the family than the doctor, and while there are many doctors, a nurse of any kind is rare and a good one almost impossible to find […][641]

A survey of Carrington's work and writings during his time in the Ottoman Empire signaled that the individual medical missionary's 'mission' shifted away from the ABCFM's objective to spread Protestantism and focused almost entirely on public health promotion and the provision of healthcare services to local communities. Carrington's extant papers made only a few faith-related references and did not particularly mention any involvement in Bible-preaching activities. Instead, his writing provided detailed information about unsanitary living conditions in rural Anatolia and advised on how widespread improvement of nursing education could elevate the medical services in the Ottoman Empire. Carrington also provided advice to local government officials on environmental health and sanitation issues such as protecting water supplies from infection.[642]

Carrington's Medical Work in Istanbul

Whenever he was in the United States, Carrington organized fundraising events, gave talks, and produced publications to promote his work in the Ottoman Empire. In the years 1904-1905, while Carrington was in the United States and on leave from his duties at the hospital in Merzifon, he started raising funds to execute his plans to establish a substantial American hospital and school of nursing in Istanbul. Upon his return to the Ottoman Empire in 1906 he was able to start a hospital in the Empire's capital by repurposing a rented building.[643] He conceptualized the new hospital in Istanbul as a dual institution officially named 'The American Hospital and Training School for Nurses at

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[641] "American Medical Work in Turkey," 9.

[642] Carrington, "Medical Work in Turkey."

[643] An undated report by Mary Mills Patrick (MMP) of the American College for Girls in Istanbul noted that the establishment of Carrington's institution in Istanbul occurred circa 1904-1905 (MMP report, Admiral Bristol Hospital 1920-1959, American Research Institute in Turkey (ARIT) library, 362.11 ARC). However, as per the ABCFM records it seems that Carrington filed his application with the ABCFM to establish a hospital in Istanbul in March 1905 (ABCFM Papers, Reel 619, no. 419, Houghton Library, Harvard University) and that the plans were not realized until 1906 upon Carrington's return to the Ottoman Empire in May 1906 following a fundraising trip to the United States. See Yücel, "Anadolu'daki Amerikan Hastaneleri," 281-86; Yücel *Anadolu'da Amerikan Misyonerliği*, 279-83. According to Yücel, in 1906 Carrington repurposed a rented two-story residential building in Eminönü near the ABCFM headquarters and had new medical equipment shipped from London and New York with the funds he had raised during his trip to the United States in 1905. (ABCFM Papers, Reel 617, no. 611, Houghton Library, Harvard University), see İdris Yücel, "Anadolu'daki Amerikan Hastaneleri," 283; Yücel, *Anadolu'da Amerikan Misyonerliği*, 280-1. However, in Carrington's fundraising material, it was noted in 1905 that "the hospital will be started at once in a large, rented house near the American College for Girls in Scutari" (See "American Medical Work in Turkey," 7).

Constantinople,' which was incorporated in New York state in 1905 and had an office in New York City. Its Board of Directors included several legal professionals and theology scholars, as well as New York-physician Burton James Lee (n.d.) and notable American missionaries and ministers with William Ives Washburn (n.d.), a New York attorney, as their President.[644] The purpose of the hospital was "to furnish free medical and surgical treatment to the Turkish poor and to supply the Empire with trained nurses."[645]

The promotional material Carrington prepared to solicit donations from his wealthy connections in the United States highlighted that the hospital and nurse training school in Istanbul were independent organizations not affiliated with any specific missionary society. His fundraising pamphlets included architectural drawings for an extensive 'up-to-date' pavilion style hospital and nurse training school building designed by Alfred Dwight Foster (A.D.F.) Hamlin (1855-1926), [646] a professor of architecture at Columbia University in New York and the son of Cyrus Hamlin (1811-1900), who had co-founded the American Robert College alongside Christopher Robert (1802-1878) in 1863 in the Bebek district of Istanbul with Protestant missionary backing.[647] Born and raised in Istanbul, A.D.F. Hamlin studied architecture at the *École de Beaux-Arts* in Paris like many of the new generation of Ottoman architects. He worked briefly at the prestigious New York-based architectural firm of McKim, Mead and White, which had designed landmark buildings in Manhattan in the late nineteenth and early twentieth centuries such as several pavilions of the Bellevue Hospital and the Pennsylvania Station.[648] In the last decades of the nineteenth century, Hamlin designed Anderson, Washburn, and Albert Long Hall buildings for the Robert College campus.[649] Although he did not specialize in hospital architecture, his 1910 publication *Modern School Houses*

[644] "American Medical Work in Turkey."
[645] Ibid., 3.
[646] Ibid.
[647] For more information on Robert College see, May N. Fincancı, *The Story of Robert College: Old and New* (Istanbul: Redhouse Press, 2001); John Freely, *A History of Robert College* (Istanbul: Yapı Kredi Yayınları, 2009); Keith M. Greenwood, *Robert College: The American Founders* (Istanbul, Boğaziçi University Press, 2010); Cem Akaş, ed., *The Anatomy of a Tradition: 150 years at Robert College, 1863-2013* (Istanbul: Istanbul Research Institute, 2013).
[648] Leland M. Roth, *McKim, Mead & White, Architects* (New York: Harper and Row, 1983); Mosette Broderick, *Triumvirate: McKim, Mead & White: Art, Architecture, Scandal, and Class in America's Gilded Age* (New York: Knopf, 2010); Kisacky, *Rise of the Modern Hospital*, 207.
[649] Aptullah Kuran, "Kolej'in Mimari Tarihi," *RC Quarterly* 5, no. 13 (Spring 1995): 8-10; Zeynep Çelik, "The Campus, the City and the Empire: The Early Architecture of Robert College and the American College for Girls," in *The Anatomy of a Tradition: 150 years at Robert College, 1863-2013* ed. Cem Akaş (Istanbul: Istanbul Research Institute, 2013), 211-36.

demonstrated that he had expertise in specific aspects of sanitation and ventilation that large public buildings required.[650]

An Unrealized Plan

Unlike H. Percy Adams and Charles Holden, the architects of the British Seamen's Hospital in Istanbul, A.D.F. Hamlin had considerable exposure to Ottoman architecture as evidenced by his drawings found in the Avery Architectural and Fine Arts Library at Columbia University (Figure 3.1).[651] He might have also personally known Ottoman architects of the time such as Mimar Kemalettin and fellow *École de Beaux-Arts* graduate Vedat (Tek). Kemalettin had prepared his unrealized plans for the Berlin Hamidiye Hospital[652] only a few years before Hamlin's plans for Carrington's American Hospital and Nurse Training School in Istanbul. After Abdulhamid II was deposed in 1909, Kemalettin became the lead architect of the *Evkaf Nezareti* (Ministry of Foundations) in the Ottoman Empire and was in charge of designing the new facilities of the *Gureba* Hospital in Istanbul.[653] His drawings from 1910-1911 for this project resembled Hamlin's unrealized 1904-1905 elevations for the American Hospital and Nurse Training School in Istanbul with its Beaux Arts appearance, particularly evident in its fenestration and roofing (Figures 3.2-3.3).

A.D.F. Hamlin's drawings for Carrington's project in Istanbul displayed a 200-bed capacity multi-pavilion complex with a three-story central administrative pavilion flanked by four two-story pavilions housing four wards each (Figure 3.4). Although floor plans corresponding to Hamlin's elevations for the hospital have not surfaced so far, the descriptions in Carrington's fundraising pamphlets informed the potential donors that each ward was to accommodate eight patients and also feature four private rooms.[654] While the axiality and symmetry of the structures Hamlin envisioned for the American Hospital and Nurse Training School in Istanbul revealed his Beaux-Arts training, the

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[650] A.D.F. Hamlin, *Modern School Houses: Being a Series of Authoritative Articles on Planning, Sanitation, Heating and Ventilation* (New York, NY: Swetland Publishing Company, 1910).
[651] Several of Hamlin's drawings of buildings in the Ottoman Empire are preserved in the Avery Library archives at Columbia University where he taught architecture. See A.D.F. Hamlin Collection, Travel Sketches: Foreign, boxes 3, 5, and 6.
[652] Yıldırım, "Birinci Ulusal Mimarlık," 2-9; Yıldırım, *14. Yüzyıldan Cumhuriyet'e Hastalıklar*, 362-75. See also Chapter 2 of this dissertation.
[653] Yavuz, "Batılılaşma Döneminde Osmanlı Sağlık Kuruluşları," 123-42; Nuran Yıldırım, "Bezmiâlem Valide Vakıf Gureba Hastanesi," in *Vakıf Kuran Kadınlar*, ed. Fahameddin Başar (Ankara: Vakıflar Genel Müdürlüğü, 2019), 201-39; Nuran Yıldırım, *Tıphâne-i Âmire ve Mekteb-i Tıbbiye-i Şahane'den İstanbul Tıp Fakültesi'ne* (Istanbul: Betim, 2019). *Gureba* can be translated as "destitute."
[654] "American Medical Work in Turkey," 7.

neoclassical façade of the central administrative block's entrance and the overhanging eaves of the pavilions alluded to late nineteenth century eclecticism, which Hamlin had applied to his earlier work for the buildings of the Robert College campus.[655]

Carrington's plan was to build the hospital following Hamlin's renditions in phases for a total cost of US $100,000. The first stage of this process would be the completion of the administrative block and two ward pavilions for a cost of US $40,000.[656] This way they would be able to start operations to provide accommodations for sixty-four patients and admit fifty nursing students for a full training class.[657] Like the British Seamen's Hospital in Istanbul, the nurses were not allocated a separate Nurses' Home but part of the administrative block was to function as nurses' quarters. The classrooms and bedrooms for fifty student nurses, an American superintendent-nurse, and two American-trained nurse assistants would be located within the administrative block along with offices, a kitchen, and an operating department.[658] Since Carrington did not want to wait for the construction's completion to start the hospital and nursing school, they would start offering services right away in a large rented house near the American College for Girls in the Üsküdar (Scutari) district on the Asian side of Istanbul.[659] The nursing students were to take their required science courses with the higher classes of the American College for Girls on their campus.[660]

Between 1906 and 1908, Carrington and his assistant provided healthcare services for the ABCFM missionaries stationed in Istanbul and the students and staff of the American schools in the city.[661] Carrington was able to establish a short-lived clinic in rented quarters during this time and experienced several setbacks until his return to the United States in 1908.[662] Among Carrington's misfortunes in Istanbul were lack of finances, difficulty in finding and obtaining authorization to rent a suitable building, and

[655] Çelik, "Campus, the City and the Empire," 211-36. See also the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[656] "American Medical Work in Turkey," 7.
[657] Ibid.
[658] Ibid.
[659] Ibid.
[660] Ibid.
[661] İdris Yücel, "Anadolu'daki Amerikan Hastaneleri," 284.
[662] According to İdris Yücel, Carrington's clinic ceased operations in March 1909. İdris Yücel, "Anadolu'daki Amerikan Hastaneleri," 284 (ABCFM Papers, Reel 619, no. 478, Houghton Library, Harvard University). However, Carrington's papers at the Harvard Divinity School Library Archives suggest that he was back in the United States in 1908. See Carrington, "Medical Work in Turkey."

a fire that destroyed the newly purchased medical equipment.[663] Mary Mills Patrick (1850-1940), president of the American College for Girls (ACG) in Istanbul, would later recall Carrington's initiative:

> In 1904-1905 Dr. Thomas Carrington established a hospital in Stamboul, functioning under a committee in the United States. He was well prepared for such an undertaking and his hospital was apparently successful. In 1908, when I was in New York City raising funds for the college, Dr. Carrington was there as well, working for the hospital. As medical work had always been one of the aims of our institution, we planned to unite our two projects.
> Our present college organization had just been achieved. When the first trustee meeting under our new charter was held on March 20, 1908, the proposition was officially made to unite Dr. Carrington's work with that of the college. Dr. Borden Parker Bowne was then president of our Board of Trustees. The motion to adopt the plan of adding Dr. Carrington's medical work to the program of our college was promoted by an influential group, among whom Mrs. Henry Villard was a leader. During a few moments of excited discussion, the success of the project seemed assured. It was not sanctioned, however, by Dr. Bowne. He, as an experienced educator, disapproved of adding the burden of medical work to our college budget at that preliminary stage of both lines of education, and the motion was not carried. Soon afterward Carrington's medical work came to an end, and his hospital was closed.[664]

Mills Patrick of the ACG was determined to start a medical school for girls in Istanbul, and she would realize this dream about a decade after the closure of Carrington's clinic in Istanbul.

3.3 World War I and Its Aftermath

World War I broke out in Europe in July 1914 and the Ottoman Empire became one of the belligerents of this multinational war by the end of October 1914 as an ally of Germany.[665] Within the six months after the Ottoman Empire engaged in World War I, the Ottoman army started taking control of the ABCFM schools and hospitals across Anatolia.[666] As a protective measure, the ABCFM declared that their hospitals were running under the American Red Cross (ARC).[667] Consequently, the Ottoman government abolished the capitulations for the European powers on the opposite side of the conflict and in 1915 British and French healthcare workers had to cease their operations in the Ottoman Empire. Since the United States was not yet involved in the war, this did not apply to the American physicians and nurses.[668] The World War I era

[663] İdris Yücel, "Anadolu'daki Amerikan Hastaneleri," 283 (ABCFM Papers, Reel 617, nos. 611, 612, 613 and Reel 619, no. 478, Houghton Library, Harvard University).
[664] MMP report
[665] Kemal H. Karpat, "The Entry of the Ottoman Empire into World War I," *Belleten* 68, no. 253 (Dec. 2004): 687-734.
[666] Demir, *Osmanlı'da Amerikan Kızılhaçı*, 218.
[667] Ibid.
[668] BOA, DH.EUM. 5. Şb., 29/21, H-16-12-1334 (Oct. 14, 1916)

was difficult for the ABCFM missionaries since their funding started to dwindle.[669] When the United States entered the conflict in April 1917, the Ottoman army took over the ABCFM hospitals in Harput, Talas (Kayseri), Antep, and Konya to be used as military hospitals.[670] The American missionaries and diplomatic delegations stationed in the Ottoman territories refused to leave the Empire and several of them died of disease due to lack of access to medical care.[671]

3.3.1 The Near East Relief

In 1915, news regarding hardships in the Near East and atrocities against minority populations of Anatolia started disseminating in the United States, and American political and business elites of the time established an organization called the American Committee for Armenian and Syrian Relief (ACASR). While it was not an explicitly missionary society, the ACASR had close links with the ABCFM missionaries as its founding members and its board included some of the major financiers of the ABCFM activities. One of these names was Cleveland Hoadley Dodge (1860-1926), a wealthy industrialist who from 1909 to 1926 served as the Chairman of the Board of Trustees of Robert College. James Levi Barton (1855-1936), a missionary who was the corresponding secretary of the ABCFM, was the Chairman of the ACASR to oversee the organization's activities on the ground.[672] The United States Congress officially recognized the ACASR as the 'Near East Relief' (NER) in 1919,[673] and following the end of World War I, the ABCFM appointed a total of seventy-two missionaries to Anatolia to resume their work in Kayseri, Harput, Bursa, Adana, Maraş, Antep, Mardin, Merzifon, Sivas, and Trabzon as NER representatives.[674] The ABCFM was also in charge of creating the NER literature such as the 1920 *Hand Book for Near East Relief*. Although the NER came to be

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[669] Henry Harrison Riggs referred to this period as the ABCFM's "period of disaster." Yücel, "Anadolu'daki Amerikan Hastaneleri," 294. According to the papers of Henry Harrison Riggs, the ABCFM had 168 members of its staff in Asia Minor prior to 1914. This number decreased to 120 in the aftermath of World War I. The number of ABCFM stations in the Near East decreased from seventeen to ten during this time. İdris Yücel, "A Missionary Society at the Crossroads: American Missionaries on the Eve of the Turkish Republic," *Cumhuriyet Tarihi Araştırmaları Dergisi* 8, no. 15 (Spring 2012): 56.

[670] Yücel, "Missionary Society at the Crossroads," 55-56.

[671] Ibid., 56.

[672] *The Near East Relief Hand Book* (New York, NY: Near East Relief, 1920) (SALT Research, Near East Relief Archives, accessed Mar. 18, 2023, https://archives.saltresearch.org/handle/123456789/44978. See also Geo. L. Richards, *The Medical Work of the Near East Relief: A Review of Its Accomplishments in Asia Minor and the Caucuses during 1919-1920* (New York, NY: Near East Relief, 1923).

[673] "Our History," Near East Foundation, accessed Mar. 14, 2024, https://neareast.org/our-history/. See also Davide Rodogno, "The Near East Relief and the American Board Commissions for Foreign Missions: Humanitarian Partnership and Divorce in the Near East (1918–1929)," *British Journal of Middle Eastern Studies* (Jul. 6, 2023): 1-20.

[674] Yücel, "Missionary Society at the Crossroads," 56.

considered as one of the earliest examples of non-denominational aid agencies in popular culture and was praised as a precursor to present-day humanitarian relief organizations, in reality, the NER initially operated as a rebranded version of the ABCFM in Anatolia in the aftermath of World War I.

The changing demographics of Anatolia following the deportation of Armenians, the biggest target population of the ABCFM missionaries in Asia Minor, to southern provinces of the Ottoman Empire in 1915 forced the ABCFM to alter its strategies in the Ottoman territories during and after World War I. The ABCFM had to return to its original goal of spreading Christianity among Muslims and in 1921 an ABCFM group gathered in Istanbul under the name 'the Muslim Work Committee' to formulate new methods for what came to be known as the 'Muslim Mission' to evangelize Muslim populations of Anatolia.[675] The missionary operations targeting Muslims needed to occur covertly through education and healthcare institutions; this new strategy required missionaries to familiarize themselves with the Qur'an and Islam.[676] For instance, in order put the parents' minds at ease, American schools were to feature a small mosque and ensure that Friday prayers would be permitted for students enrolling there.[677]

The NER offered services in healthcare, initiated industrial projects, and established orphanages where they cared for Armenian orphans and destitute Armenians who were able to return to their places of origin after the Ottoman decree of December 18, 1918 which authorized the Armenians' right the return.[678] The NER operated nine hospitals and twenty-two clinics across Anatolia with a total capacity of 525 beds.[679] The NER's healthcare-related activities continued until 1924. In Istanbul, the NER established a trachoma hospital with donations from the Foreign Missions of the Methodist Episcopalian Church (MEFB) in 1920[680] and a ninety-bed children's tuberculosis hospital

[675] ABCFM Papers 16.9.1., vol. 1, *Report on Work for Moslems* (Aug. 1921) (Houghton Library, Harvard University); James Levi Barton, *Status and Outlook of Missionary Work in Turkey. A Review of Conditions in the Near East* (Boston, MA: ABCFM, 1924). For more information, see Yücel, "Missionary Society at the Crossroads," 59-61; Rodogno, "Near East Relief," 1-20.
[676] Yücel, "Missionary Society at the Crossroads," 51-68.
[677] Ibid., 60.
[678] For more information, see Taner Akçam, *A Shameful Act: The Armenian Genocide and the Question of Turkish Responsibility* (New York: Metropolitan Books, 2006); Hacer Çelik, "Ermeni Tehciri ve Tehcirden Dönen Ermeniler'in İskân Sorunu," *Çağdaş Türkiye Tarihi Araştırmaları Dergisi* 7, no. 16 (Jun. 2008): 143-163; Abdülmecit Tuğrul, "Amerikan Yakın Doğu Heyeti ve Türkiye'deki Faaliyetleri (1915-1930)" (PhD diss., Istanbul University, 2022), 237-38.
[679] For a comprehensive list of the NER's healthcare-related activities in Anatolia, see Tuğrul, "Amerikan Yakın Doğu Heyeti," 208-36.
[680] Ibid., 234-35.

in a well-constructed, well-supplied and highly sufficient building in the Yedikule district of Istanbul, probably within or near the Balıklı Greek Hospital.[681] Here, several young local women were trained to care for tuberculosis patients.[682] Donations from Canada paid for the equipment for the latter project.[683] Canadians also participated in the NER activities and established three NER-affiliated hospitals in the Ottoman Empire in the aftermath of World War I in Istanbul, Izmir, and Van.[684]

3.3.2 American Women's Hospital Service

The ABCFM was not the only American organization that functioned as part of the NER in the Ottoman Empire during the occupation years. Founded in 1919, the American Women's Hospitals (AWH) was able to organize and deploy women physicians and nurses on the ground in Europe and Asia Minor in the aftermath of World War I under the NER banner.[685] In 1939, the founding president of the Medical Women's International Association, Esther Pohl Lovejoy (1869-1967) wrote a book titled *Women Physicians and Surgeons: National and International Organizations* on the occasion of the twentieth anniversary of the AWH. In the chapter about the AWH activities in Istanbul, Lovejoy wrote:

> Constantinople, occupied by the Allies from 1920 to 1923, was swamped with refugees. The last stand of the White Russians was made on the shores of the Black Sea, and after the defeat of their forces in 1920 they fled by thousands to Constantinople. At that same time and for the next two years, following the victories of Kemalist forces in Asia Minor, Turkish subjects of Greek and Armenian blood likewise fled to Constantinople. That city was already crowded with refugees when the flood of Christian outcasts came down the Bosphorus from Black Sea ports in the winter of 1922-23.[686]

Pohl Lovejoy noted that between 1923[687] and 1928 the forty-bed AWH dispensary in Istanbul consisted of two wards they rented in the 1000-bed facilities of the Balıklı Greek Hospital, an institution originally founded in 1753. Its capacity decreased to one ward of

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[681] Clara D. Noyes, "Department of Red Cross Nursing," *The American Journal of Nursing* 21, no. 10 (Jul. 1921): 717-18. See also Tuğrul, "Amerikan Yakın Doğu Heyeti," 235-36. The building was originally commissioned by an Ottoman Greek merchant as a tuberculosis hospital for the Greek community in Istanbul. The NER used the building for two years in exchange for paying the cost of repairs.
[682] Noyes, "Department of Red Cross Nursing," 717-18.
[683] "Succor for the Stricken Armenians," *The Globe*, Dec. 30, 1920, 8.
[684] Evren Altınkaş, "Canadians in the Turkish War of Independence," Military Lecture Series at the Guelph Civil Museum (Feb. 16, 2023).
[685] The correspondence of the AWH from Istanbul and Izmit were written with a letterhead that read "Near East Relief – Ismid Unit" or "Near East Relief – Stamboul, Constantinople". The AWH, like the ABCFM, was operating under the flag of the Near East Relief in the aftermath of World War I (AWH Records, folder: Near East c. 1919-1922, acc144, b14f112, Drexel Legacy Center Archives, Drexel University).
[686] Esther Pohl Lovejoy, *Women Physicians and Surgeons: National and International Organizations* (Livingston, NY: The Livingston Press, 1939), 138.
[687] According to Caris E. Mills' call for donations, the AWH service at the Balıklı Greek Hospital began in February 1924. (AWH Records, a144p-b07f12, Drexel Legacy Center Archives, Drexel University).

twenty-five beds in later years and the AWH dispensary functioned there until 1934 (Figure 3.5).[688] An expression of appreciation signed by the Bishop of Pera stated that the AWH continued to provide the Balıklı Greek Hospital of Istanbul with much needed support even after 1934 as the Istanbul chapter of the AWH directed the donations they received to this hospital which was on the verge of shutting down after the AWH dispensary's closure.[689]

The AWH also founded a hospital in İzmit in 1920-1921 (Figure 3.6).[690] In a letter dated May 9, 1921 the director of this hospital, Mabel E. Elliot (1881-1968), informed Esther Pohl Lovejoy on the condition of the hospital building when the AWH took over:

> The hospital which we are now taking over was a Turkish hospital, then a British barracks, then a Greek barracks. It was as near a wreck as any thing could be and still be revived. I have had between fifty-five and sixty-five men working here for two weeks and we are just beginning to see daylight. Every drain stopped with filth, every pipe broken and destroyed, etc, etc.[691]

Caris E. Mills (n.d.), an editor of *The Near East Relief* bulletin who worked with the Commission for Destitute Women and Children, created a series of photographs and texts calling for donations to support the Balıklı Rum Hospital after the closure of the AWH dispensary. Mills served as the representative of the AWH in Istanbul in exchange for the rent of her home.[692] The AWH was closely in touch with the local community;[693] both Mills and Pohl Lovejoy's papers indicated that the AWH collaborated with philanthropic Turkish women particularly to run a milk station in Istanbul where they distributed fresh sterilized milk on a daily basis to two hundred infants in need (Figure 3.7).[694] Mills also reported about developments concerning women's rights such as the day when Turkish women earned the right to vote in municipal elections in 1930:

> The Turkish women have gained the right to vote in the municipal elections and sit upon committees concerning the affairs of the town. They are making up a program of furthering the interest of the child and mother. Help them help themselves![695]

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[688] AWH Records, a144p-b07f12, Drexel Legacy Center Archives, Drexel University.
[689] Lovejoy, *Women Physicians and Surgeons*, 141.
[690] Photographs of the AWH Hospital in Izmit, AWH Records, acc144-b07f11, Drexel Legacy Center Archives, Drexel University.
[691] Mabel E. Elliot, letter to Esther Pohl Lovejoy, May 9, 1921. (AWH Records, acc144-b14f112, Drexel Legacy Center Archives, Drexel University).
[692] Lovejoy, *Women Physicians and Surgeons*, 141.
[693] The AWH also worked with Jean Weinberg, the renowned photographer who was later to be awarded with the distinction of 'first photojournalist of the Turkish Republic' by Mustafa Kemal. For more information about Jean Weinberg, see Savaş Arslan, "Fotoğrafçı Jean Weinberg Hakkında Yeni Bulgular," *Sinecine* 10, no. 1 (Spring 2020): 149-60.
[694] AWH Records, a144p-b07f12, Drexel Legacy Center Archives, Drexel University; Lovejoy, *Women Physicians and Surgeons*, 141.
[695] AWH Records, a144p-b07f12, Drexel Legacy Center Archives, Drexel University.

The AWH had a feminist mission and they engaged in activities to elevate local women such as creating job opportunities for them in healthcare services. For instance, in collaboration with the AWH, the Balıklı Greek Hospital (where the AWH continued to pay for the beds of twenty Russian refugees) hired orphan girls to train them in the nursing profession.[696] The AWH also ran a free ward for children in the American Hospital in Istanbul, which was established in 1920, starting from 1928.[697]

3.3.3 The American Red Cross

Unlike other American organizations providing healthcare services in the Ottoman realm and later the Turkish Republic under the NER banner, the American Red Cross (ARC) ran its operations independently but in close collaboration with the NER.[698] The ARC had established an office in Istanbul in 1911, and was active in the Ottoman territories during World War I until the United States' became involved in the war alongside Britain and France.[699] In 1914, the ARC was put in charge of the British and French hospitals in Istanbul as well as the ABCFM hospitals across Anatolia to provide healthcare services to sick and wounded Ottoman soldiers as per an agreement between the Ottoman authorities and the American Embassy.[700]

The activities of ARC in Istanbul and across Anatolia were interrupted in 1917 when the diplomatic relations between the Ottoman Empire and the United States came to a halt because of the American involvement in World War I.[701] After the war, the ARC resumed its operations in Istanbul in January 1920 with 194 members.[702] The reports of nurse Clara Dutton Noyes (1869-1936), Director of the ARC Department of Nursing after World War I, provided information about the activities of American physicians and nurses stationed in Anatolia as part of the ARC and the NER. She mentioned that an American physician named 'Dr. Graves' and nurse Frances McQuaide (n.d.) established at least six 'Child Welfare Stations' in various poor areas of Istanbul. A group of at least ten young local women of Greek and Armenian descent received training from the ARC nurses to serve as assistants in the smaller children's clinics.[703]

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[696] Ibid.
[697] Lovejoy, *Women Physicians and Surgeons*, 141.
[698] Publications such as the *Near East Relief* bulletin provide evidence that the two groups also socialized together. For instance, they had ARC vs NER baseball games. See *Near East Relief*, May 22, 1921, 4.
[699] Demir, *Osmanlı'da Amerikan Kızılhaçı*, 290.
[700] Ibid., 217-19.
[701] Ibid., 290.
[702] Ibid.
[703] Noyes, "Department of Red Cross Nursing," 717-18.

Besides the goal to deliver aid to Armenians, the American healthcare organizations particularly in Istanbul increased their activities in response to the influx of Russian refugees to the city, which had begun in the aftermath of the Bolshevik Revolution in 1917 and intensified in 1919-1920.[704] The sudden increase in Istanbul's population amplified the need for healthcare resources in the city. There were 332 ARC members stationed in the Ottoman Empire by 1921 to respond to this urgency.[705] In many ways, the activities of the ARC and NER in the aftermath of World War I gave birth to a new understanding of humanitarian aid, particularly in the form of medical services.[706] Although the ARC closed its Istanbul office in 1924, it continued to collaborate with the Turkish Red Crescent in time of need such as the Erzurum-Pasinler earthquake on September 13, 1924, which claimed the lives of 212 people and left 25,000 people homeless.[707] This form of humanitarianism would later conflate with diplomacy and eventually become instrumental for the rapprochement between the Turkish Republic and the United States.

3.3.4 The Medical School of the American College for Girls[708]

Established in 1871 by American Protestant missionaries, the American College for Girls' (ACG) initial location in Istanbul was in the Gedikpaşa neighborhood where the school operated under the name "Home School" prior to relocating to Üsküdar on the Asian side

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[704] American aid organizations stationed in Istanbul started to focus on this matter particularly after the arrival of 17,000 Russian refugees to the city in October and November of 1920. American expatriates and Americans at home both expressed concern about this situation in various publications. See for example, "Who Will Help Russian Refugees if the American Red Cross Leaves Constantinople?" *Near East Relief*, Oct. 1, 1921, 2-3; "Constantinople's Russians," *New York Times*, Apr. 23, 1922, 105. See also Bilge Ar, "İşgal İstanbul'unun Kentsel Dönüşümünü Beyaz Ruslar Üzerinden Okumak," *Yıllık: Annual of Istanbul Studies* 1 (Dec. 2019): 104-5; Demir, *Osmanlı'da Amerikan Kızılhaçı*, 340-460. During this time, besides the AWH, ABCFM, and ARC, the YMCA and YWCA also focused on relief work to assist Russian refugees in Istanbul. There was another American organization named the 'Commitee for the Rescue and Education of Russian Children,' which was later renamed as the 'Committee for the Education of Russian Youth in Exile' that offered scholarships to gifted young Russian refugees. For more information, see R. E. Bowers, "The Origins of the Russian Student Fund," *The Russian Review* 16, no. 3 (1957): 45–52; Tomás Irish, "Educating Those Who Matter: Thomas Whittemore, Russian Refugees and the Transnational Organization of Elite Humanitarianism after the First World War," *European Review of History: Revue Européenne d'histoire* 28, no. 3 (2021): 441-62. See also Alyona Savchuk, "Istanbul's Russian History is Fast Fading into Distant Memory," *Platform 24*, Sep. 28, 2015, https://platform24.org/en/articles/istanbul-s-russian-history-is-fast-fading-into-distant-memory/.

[705] Demir, *Osmanlı'da Amerikan Kızılhaçı*, 290.

[706] Keith David Watenpaugh, *Bread from Stones: The Middle East and the Making of Modern Humanitarianism* (Berkeley: University of California Press, 2015); Chris Gratien, "The Sick Mandate of Europe: Local and Global Humanitarianism in French Cilicia, 1918-1922," *Journal of the Ottoman and Turkish Studies Association* 3, no. 1 (May 2016): 165-90.

[707] Demir, *Osmanlı'da Amerikan Kızılhaçı*, 475.

[708] This section is based on research conducted for a forthcoming publication. See Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."

of Istanbul in 1874. Mary Mills Patrick (1850-1940), who became the President of the American College for Girls in 1890,[709] formed an alliance with Thomas Spees Carrington and presented an official proposal to the ACG Board of Trustees on March 20, 1908.[710] As mentioned above, this early attempt was unfruitful at the time due to the Board president Borden Parker Bowne's objection. However, Mills Patrick's plans came to fruition a decade later during the Allied occupation of Istanbul in the aftermath of World War I (1918-1923).

After a devastating fire on the ACG's Üsküdar campus in 1905, Mary Mills Patrick decided to move the campus to the Arnavutköy village on the European side of Bosphorus where a large plot of land became available which could also accommodate a medical school for women. [711] The ACG's Committee on Medical Education located in New York City held their first meeting less than a month before the occupation of Istanbul began and they regarded the ending of the war as an opportunity to initiate a project to offer medical education to women and a nurse training program. The report of this meeting dated October 22, 1918 stated:

> In view of the great need for the medical education of women and the training of nurses, the college has for a long time entertained a very lively interest in the establishment of such a department. This subject has been in abeyance because of the war, but at the present moment, such rapid changes are taking place in the Near East that it has been thought advisable to begin making plans for action, to be taken as soon as the way to Turkey is open, which unless all signs fail, will be very shortly.[712]

A donation of US $100,000 from William Bingham II (1879-1955) in memory of his late mother (Mary Payne Bingham, 1854-1898) brought the ACG and Mary Mills Patrick one step closer to establishing a medical school for women in Istanbul. Alden R. Hoover (1877-1940) of the Medical Committee prepared a report on November 14, 1919 outlining how this donation could help finance not only a women's medical school but be the starting point of an "American Medical Center" in Istanbul comprising of a 300-bed pavilion style hospital connected to several clinics around the city to help fight epidemics. [713] While a medical school for women and a "nurse training school as part of the medical

[709] For a comprehensive biography of Mary Mills Patrick see Carolyn McCue Goffman, *Mary Mills Patrick's cosmopolitan mission and the Constantinople Women's College* (Lenham: Lexington Books, 2020).
[710] MMP report
[711] The move was completed in 1914. Columbia University Rare Books and Manuscripts Library (RBML), ACG collection finding aid, 3. For a general history of the ACG see Fincancı, *Story of Robert College.*
[712] ACG Archives Box 16A, folder 27, Columbia University RBML.
[713] Clinics would also be established in various parts of Istanbul, including Galata, Üsküdar, and Istanbul proper and these would serve as "feeders" to the future hospital. All these facilities would be used to provide

department" were the primary focus of Hoover's report, for the hospital he suggested that the construction process could begin with the "essential working units of a hospital": a surgical pavilion and a medical pavilion, and other pavilions, namely administration and laboratory, eye-ear-nose-throat, obstetrical and gynecological, children's pavilion, and a residence for nurses, which the document referred to as the "Nurses' Home," would follow afterwards.[714]

William Bingham II's donation enabled the ACG Board to commission Charles Allerton Coolidge (1858-1936), one of the architects of the Boston-based architectural firm of Shepley, Rutan, and Coolidge, which designed the rest of the ACG buildings in Arnavutköy in 1911.[715] The firm was now known as Coolidge and Shattuck, and as architectural historian Katherine Carroll points out, one of the previous firms of Coolidge, H.H. Richardson, Shepley, Rutan and Coolidge (1886-1915), had been the "premier architectural firm for American medical schools in the early twentieth century."[716] Mary Mills Patrick was able to utilize her connections in the United States to ensure that the ACG buildings were of the highest standard. For instance, one of Coolidge's former partners, architect Charles Hercules Rutan (1851-1914), had served as the treasurer and trustee of the ACG. Although Rutan had passed away in 1914, this connection must have played a role in the selection of an architectural firm for the ACG's medical school building.

The construction of the Mary Payne Bingham Medical Building, which would house the ACG medical school, continued between 1920 and 1921. Also in the early 1920s, Coolidge and Shattuck designed the Boston Lying-in Hospital which earned them

practical instruction in medicine and nursing to women in the College. See the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."

[714] ACG Archives box 16A, folder 31, Columbia University RBML. This report demonstrates that the committee was aware of the Nurses' Home typology.

[715] ACG Archives box 14-O-4, Columbia University RBML; ACG Archives box 14-O-5, Columbia University RBML; ACG Archives box 16A, folder 31, Columbia University RBML.

[716] Katherine L. Carroll, *Building Schools, Making Doctors: Architecture and the Modern American Physician* (Pittsburgh, PA: University of Pittsburgh Press, 2022), 72, 137. After the architectural firm of HH Richardson, Shepley, Rutan, and Coolidge which was active between 1886 and 1915, the architectural firm was called Coolidge and Shattuck (1915-1924) and then Coolidge, Shepley, Bulfinch and Abbott (1924-1952). All together these firms built seven medical schools in the U.S., including the medical school at Harvard University, Johns Hopkins Medical school, and the Western Reserve University School of Medicine, the latter in 1924, the same year that the medical school opened on the ACG Arnavutköy campus was being constructed.

the first Harleston Parker Medal awarded by the Boston Society of Architects upon its completion in 1923.[717]

The Mary Payne Bingham Medical Building featured four laboratories to accommodate the courses in anatomy, biology, chemistry, pathology, and physiology. Although the Committee members initially envisioned an elaborate anatomy lab complete with a sophisticated cooling system for human and animal cadaver storage in the basement of the building,[718] the architects Coolidge and Shattuck proposed reducing these ambitious plans by half and downgraded to a less sophisticated cooling system since the ACG budget did not leave much room for such technology (Figure 3.8).[719] This situation echoed the condition of women's medical schools in the United States. For instance, although Women's Medical College of Pennsylvania determinedly offered more laboratory courses than most medical schools in the United States in the 1880s and 1890s, the school's new building program in the 1920s faced financial challenges imposing spatial cuts and forced the faculty members to focus more on teaching than research.[720] As Katherine Carroll noted, due to insufficient funding laboratories in women's medical schools could not develop as amply as the research facilities in medical schools for men,[721] which ultimately limited the resources available for scientific discovery and prevented the women's medical schools from gaining a competitive edge.[722]

Shortly after the official opening of the ACG medical school in the spring of 1923,[723] the Turkish government ratified the *Tevhîd-i Tedrîsât Kanunu* (The Law of

[717] Now known as the Brigham and Women's Hospital. For more information, see Keith N. Morgan, "Brigham and Women's Hospital (Boston Lying-in Hospital) and Vanderbilt Hall," *SAH Archipedia*, accessed Mar. 15, 2024, https://sah-archipedia.org/buildings/MA-01-FL20; "Boston Lying-in Hospital," *American Institute of Architects (AIA)*, accessed Mar. 15, 2024, https://aia.stqry.app/en/story/20095.
[718] "Eyes toward the West," ACG Archives box 33, folder 017, Columbia University RBML.
[719] ACG Archives box 16A, folder 29, Columbia University RBML. Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[720] Carroll, *Building Schools*, 159, 161-2.
[721] Ibid.
[722] For more information on women's medical education in the U.S., see Regina Morantz-Sanchez, *Sympathy and Science: Women Physicians in American Medicine* (New York, NY: Oxford University Press, 1985); Ruth J. Abram, *Send Us a Lady Physician: Women Doctors in America, 1835-1920* (New York, NY: W.W. Norton & Company, 1986); Olivia Campbell, *Women in White Coats: How the First Women Doctors Changed the World of Medicine* (New York, NY: Park Row, 2021)
[723] Medical courses were offered prior to this date as some of the students were close to completing the course requirements by the time the school shut down. These students were provided with scholarships to complete their medical education abroad, while most of the students were admitted to the state-run medical school, *Istanbul Darülfünunu Tıp Fakültesi* (Istanbul University Faculty of Medicine), in Istanbul. See MMP report. While Ottoman women had access to midwifery education at the *Mekteb-i Tıbbiye* (School of Medicine) in Istanbul starting from 1842 and to nursing courses at the Kadırga Hospital starting from 1912, those who wanted to become physicians had to study abroad prior to the establishment of the ARC's medical school. For more information on midwifery and nursing education in the Ottoman Empire see,

Unification of Education, March 3, 1924) which imposed several rules and regulations to standardize and nationalize education in the newly-founded Turkish Republic.[724] This impacted medical education as well and the ACG's medical school had to shut down in July 1924.[725] The Mary Payne Bingham Medical Building, which cost a total of US $250,000 when completed, would serve other functions in the ACG's future.

3.3.5 The Establishment of the American Hospital in Çarşıkapı, Istanbul

On November 8, 1919 Admiral Mark Lambert Bristol (1868-1939), The American High Commissioner to the Ottoman Empire, and later the Turkish Republic from 1919 to 1927, and the Commander of the U.S. Naval Forces in the Eastern Mediterranean, gathered the representatives of American institutions in Turkey, including the Board of American Foreign Missions, the Constantinople College for Girls, the American Red Cross and the American Near Eastern Relief Committee, to reinvigorate the dream to establish a state-of-the art American Hospital and Nursing School in Istanbul.[726] The committee in charge of this endeavor chose Admiral Bristol to lead the project since he was the highest ranking American official in the city at the time. During the meeting on November 8, 1919, Admiral Bristol was able to secure a commitment from each representative that they would participate and contribute what they could to create a hospital which would serve members of the American expatriate community, American tourists, and anyone else who needed medical assistance regardless of religion, ethnicity, gender, or nationality.[727] Following Thomas Spees Carrington's vision, the new American Hospital in Istanbul would also have a training school for nurses where they could receive training and reside.

Hatice Nil Sarı, "Osmanlı Sağlık Hayatında Kadının Yerine Kısa Bir Bakış," in *Sağlık Alanında Türk Kadını: Cumhuriyet'in ve Tıp Fakültesi'ne Kız Öğrenci Kabulünün 75. Yılı,* ed. Nuran Yıldırım (İstanbul: Novartis Yayınları, 1998), 451-65; İnci Hot, "Ebelik ve Hemşirelik Eğitiminde İlk İsim Besim Ömer Akalın (1862-1940)," in *Türk Tıp Eğitiminin Önemli Adımları*, eds. Hüsrev Hatemi and Ayten Altıntaş (Istanbul: CSA Global Publishing, 2006), 174-77; Gülhan Balsoy, *The Politics of Reproduction in Ottoman Society, 1838-1900* (London: Pickering & Chatto, 2013); Yıldırım, *Savaşlardan Modern Hastanelere*; Gökçen Beyinli, *Elleri Tılsımlı: Modern Türkiye'de Ebelik* (Ankara: Ayizi Kitap, 2014); Gülhan Erkaya Balsoy, *Kahraman Doktor İhtiyar Acuzeye Karşı: Geç Osmanlı Doğum Politikaları* (Istanbul: Can Sanat Yayınları, 2015); Nazike Duruk, "An Effective Leader in the Foundation of Modern Nursing: Professor Besim Ömer Akalın," *Dokuz Eylül Üniversitesi Hemşirelik Fakültesi Elektronik Dergisi,* 12, no. 3 (July 2019): 215-217. In 1928, the cohort of women graduates of the from *Istanbul Darülfünunu Tıp Fakültesi* (Istanbul University Faculty of Medicine) became the first women physicians who had been educated in Turkey. See Nuran Yıldırım, Yıldırım, *Tıphâne-i Âmire*, 146.

[724] *Tevhîd-i Tedrîsât Kanunu*, No: 430 (March 3, 1924).

[725] ACG Archives box 16A, folder 32, Columbia University RBML.

[726] Winkler and Rountree, *Amerikan Hastanesi*, 13-14.

[727] Lorrin A. Shepard, "The American Hospital of Istanbul: A Project for Peace Through Service," *World Affairs* 97, no. 4 (1934): 217–18.

The *New York Times* announced the establishment of the American Hospital in Istanbul on August 8, 1920:

> Americans in Constantinople have established a hospital designed eventually to be the nucleus of an important American medical centre in the Near East. Admiral Bristol, the American High Commissioner, is Chairman of the hospital's Board of Directors, which includes G. B. Ravendahl, the American Commissioner, and President of the American Chamber of Commerce; Major G. Claflin Davis, Director of the American Red Cross in the Near East; Colonel James P. Coombs, Director of the American Committee for Relief in the Near East; Dr. Mary Mills Patrik, President of the Constantinople College for Women; Dr. W. W. Peet, representing the various American missionary boards, and Mrs. Huntington, representing Robert College.
>
> Equipment for the new hospital, which will have 100 beds, will be supplied by the American Red Cross. The personnel will be supplied by the American Red Cross and the American Committee for Relief in the Near East, both of which have many doctors and nurses working in Turkey among war refugees of various nationalities.
>
> Dr. A. R. Hoover, who has lived for many years in Turkey, will be director of the hospital, and Dr. Elfie Richards Graff, formerly physician to Vassar College and a member of the Wellesley Unit of the American Committee for Relief in the Near East, will be his assistant. Ms. Anna E. Rothrock of Glenside, Pa., will be superintendent of nurses, and her assistants will be Miss A. Estelle Sutton of Detroit, Miss Roberta K. Sharpe of New York, and Miss Mary E. Coughlin of Acton Center, Mass.
>
> Constantinople College for Women will open a school for nurses in connection with the hospital, and within a year will open a woman's medical college for women of the Balkan States. Admission to the schools will be open to women of all nationalities and religions. The Rockefeller Foundation has promised to send a board of inspection to Constantinople and the hospital board hopes to get the assistance of that organization in a general improvement of health and medical conditions in the Near East.
>
> The need for a hospital for English-speaking patients is very urgent. American firms are opening branches in Constantinople every week. This has become a great rendezvous for the American navy. The Young Men's Christian Association and Young Women's Christian Association have large organizations, in addition to many relief and missionary bodies which are constantly in need of hospital space for their personnel.
>
> Under the direction of the Constantinople Unit of the American Committee for Relief in the Near East an open-air hospital for tuberculous children also has been established on the shore of the Bosphorus a few miles north of Constantinople under the direction of Dr. Elfie Richards Graff. It has fifty beds and is designed as a model institution which the Americans hope to get the Turkish, Greek, Armenian and Jewish communities to duplicate.[728]

This announcement indicated that this new American institution was indeed the product of a collaboration between several American organizations located in the Ottoman Empire during the occupation of Istanbul by British, French, Italian, Greek, American, and Japanese forces in the aftermath of World War I, which lasted from November 13, 1918 to October 6, 1923.[729]

Until October 1923, the American Hospital in Istanbul along with its nurse training school operated in a rented three-story *konak* (residential wooden structure) near

[728] "Medical Centre in Turkey: Americans in Constantinople Establish Hospital as Nucleus" report dated July 2, published in the *New York Times* on August 8, 1920, 80.
[729] Nur Bilge Criss, *Istanbul Under Allied Occupation, 1918-1923* (Brill, 1999).

the Merzifonlu Kara Mustafa Paşa Mosque on Divanyolu Avenue in the Çarşıkapı neighborhood. Jacques Pervititch marked the hospital building as "*Dispensaire Americain*" (American Dispensary) in the Gedikpaşa-Kumkapı district insurance map he prepared in 1922 (Figure 3.9) and added notes about some of the properties of the building: *vieux konak* (old konak), *tout bois* (entirely wooden), *couvert tuiles* (covered roof tiles). Regarded as a dispensary rather than a 'hospital' at the time, this new healthcare institution followed a similar pattern of establishment to that of the ABCFM mission hospitals which had also started out as dispensaries. The hospital's first medical director Alden R. Hoover wrote in an article published in the *Orient* on October 4, 1921 that the Çarşıkapı location provided sufficient space for the hospital and the nurse training school. He provided additional information about the repurposed interiors of the *konak* and indicated that there were private rooms as well as small and large wards, and clinic and dispensary rooms, as well as a maternity ward and a ten-bed ward for children under the age of five. In these early years, the out-patient department was available three days a week.[730] About the nursing school, Hoover wrote:

> The Hospital has a school for Nurses where young women of education and culture will be received for the 26 month course (…) There is a classroom equipped with adequate and proper facilities for class instruction. Special instruction will be given in dietetic; and practical experience will be given in the Hospital Diet Kitchen. Practical nursing, in all branches of the work, will be given in the hospital. An attractive living room and comfortable sleeping rooms are provided. A library will be added later.[731]

Nurse Clara Dutton Noyes of the ARC reported on the location and student body of this new American institution in an article in *The American Journal of Nursing* in 1922:

> […] The location alone is one to conjure up all sorts of romantic allusions, for the school and hospital are temporarily housed in the former harem of a Turkish Pasha in historic old Stamboul. Here are assembled one of the most heterogenous assemblages of pupil nurses ever gathered together: Moslem and Christians, among them Turks, Greeks, Bulgarians, Armenians and Russians. As might be expected from such an unusual assortment of nationalities, many unusual problems are presented. The psychology of the various racial types is essentially peculiar.[732]

Dutton Noyes noted that the ARC played an important role in the establishment of the hospital and nursing school. ARC nurses oversaw the nursing department and nurse training, while the ACG faculty taught the chemistry, bacteriology, anatomy, and physiology courses.[733] The ARC nurses also played an important role in the repurposing

[730] Alden R. Hoover, "American Hospital, Constantinople," *The Orient* 8, no. 40 (Oct 4, 1920): 381. The article in *The Orient* is signed as "A.R.H." which are the initials of Alden R. Hoover.
[731] Ibid.
[732] Clara D. Noyes, "The Schools of Nursing in the Old World," *American Journal of Nursing* 22, no. 11 (Aug. 1922): 914.
[733] Ibid., 915.

of the building, which was initially in a bad shape and in need of repairs. By 1922, the completion of the building's steam-fitting significantly improved the laundry facilities and the diet kitchen by providing these sections with hot water.[734] At the Çarşıkapı location, nurses had to engage in menial labor such as doing the laundry chores.[735]

The curriculum of the American Hospital's nursing school coincided with the requirements of the League of Nursing Education in America, which provided the students with a well-rounded theoretical background in a 26-month program.[736] The ARC Nursing Supervisor Sophie C. Nelson (n.d.) inspected the school in April 1921 and her report began with the following praises "I have never seen a smoother running place."[737] The only weakness she noted was that the clinical education was not as sophisticated despite all efforts of the staff to provide the first cohort of twenty-two student nurses[738] with excellent training. The ARC nurses of the American Hospital and their students had to do home visits in the afternoons after clinical work in the mornings.[739] In its early years, the hospital received mostly obstetrical cases and out-patients. The ARC helped the hospital establish a maternity ward, which almost entirely provided services to Russian refugee mothers. The ARC nursing department was hoping to actively collaborate with the Turkish Red Crescent and, as Clara Dutton Noyes' observations evidenced there was reason to be hopeful about the prospects of such collaboration:

> [T]he American Red Cross is the only neutral agency of its kind in the country and the Turks, inclined to suspect propaganda, proselyting and ulterior motives in the activities of many charitable organizations, have accorded to our Red Cross a measure of confidence and discipleship that is one of the most sincere tributes ever paid to any organization.[740]

As mentioned previously, the ABCFM was changing its strategy during this time to run its operations covertly as part of their so-called Muslim Mission.[741] By not associating with the ABCFM agenda to proselytize among Muslims and acting independently, the ARC nurses were able to build trust among the local population and establish a long-lasting nursing school in Istanbul.

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[734] Ibid.
[735] Ibid.
[736] Hoover, "American Hospital, Constantinople," 381; Noyes, "Schools of Nursing," 916.
[737] Noyes, "Schools of Nursing," 916.
[738] Ibid. Noyes noted that this number later dropped to twenty.
[739] Ibid.
[740] Ibid., 917.
[741] *Report on Work for Moslems*; Barton, *Status and Outlook of Missionary Work*; For more information, see Yücel, "Missionary Society at the Crossroads," 59-61.

Two wards of the eighty-bed capacity of the Çarşıkapı location of the American Hospital in Istanbul exclusively serviced the sailors of the U.S. Navy, and the private rooms were always busy with paying patients.[742] One of the American patients who received services at the American Hospital in Istanbul was Mary Lavinia van Beuren (1871-1951) from Newport, Rhode Island, the daughter of John Dustin Archbold (1848-1916), one of the first owners of an oil refining enterprise in the United States whose small oil business had been acquired by John D. Rockefeller's Standard Oil Company. Archbold had passed away in 1916 but he had been a close associate of Rockefeller's.[743] Upon her discharge, van Beuren awarded the Bulgarian student nurse who cared for her during her stay with a generous scholarship to enable her to pursue her studies in the United States.[744] This incident was not the first time the American Hospital interacted with someone affiliated with the Rockefellers; indeed the local Hospital Committee included officials of the Standard Oil Company stationed in the region as well as several representatives other American business interests involved in the Near East.[745] Medical missionaries of the ABCFM had been in correspondence with representatives of the Rockefeller Foundation (RF) throughout World War I and provided them with information about public health conditions in Anatolia in their reports.[746] Founded in New York on May 14, 1913, the RF had a particular interest in promoting public health and public health nursing. As mentioned in the *New York Times* article announcing the opening of the American Hospital in Istanbul in 1920, the RF was in touch with the hospital's board of directors from the beginning and promised to send its inspectors to Istanbul for evaluation purposes.[747]

Admiral Mark Lambert Bristol met with the RF representatives in 1922 to request support for the American healthcare institutions he helped to establish in Istanbul: the ARC medical school, the American Hospital and its nursing school.[748] However, Admiral Bristol's appeals did not prove to be fruitful. During his meeting with Victor George

[742] Hoover, "American Hospital, Constantinople," 381.
[743] For more information, see Austin Leigh Moore, *John D. Archbold and the Early Development of Standard Oil* (New York: Macmillan, 1930); Ralph W. Hidy and Muriel E. Hidy, *History of Standard Oil Company, 1882-1911* (Stratford, NH: Ayer Company Publishers, 1955); Daniel Yergin, *The Prize: The Epic Quest for Oil, Money, and Power* (New York: Simon & Schuster, 1991); Ron Chernow, *Titan: The Life of John D. Rockefeller, Sr.* (London: Warner Books, 1998).
[744] Noyes, "Schools of Nursing," 915.
[745] Ibid., 914.
[746] RF records, RG5, series 1.2, box 17, folder 277
[747] "Medical Centre in Turkey," 80.
[748] RF records, RG5, 805, box 148, folder 1942.

Heiser (1873-1972), the RF International Health Board director for the East at the time, it became clear that these three American projects were not the type of healthcare initiatives the RF was interested in supporting.[749] As the 1920s progressed and the Ottoman Empire became the Republic of Turkey, the RF chose to partner with the new Turkish government in Ankara in the development of their capital as a modern city with state-of-the-art healthcare facilities. While the RF provided fellowship opportunities to the graduates of the American Hospital's nursing school, they provided the Red Crescent School of Nursing with more extensive support.[750] This school was established as the Turkish Republic's first national school of nursing in 1925 in a repurposed *konak* in Istanbul donated to the Turkish Red Crescent Society by the nationalist novelist Halide Edib (Adıvar, 1884-1964).[751]

3.3.6 The American Position during the Turkish National Struggle (1919-1923)

Mustafa Kemal (Atatürk, 1881-1938),[752] the Ottoman military officer appointed to the coastal Black Sea town of Samsun to carry out the management and inspection of the Sèvres protocol, did exactly the opposite of what the Istanbul government expected of him, and upon his arrival at his post on May 19, 1919 he started organizing meetings to gather delegates of the Anatolian resistance movement against the occupation and consequently resigned from the Ottoman army to lead the national resistance in Anatolia.[753] Mustafa Kemal's activities caught the attention of both the British and American officers stationed in the Ottoman Empire. The two powers adopted different approaches to the new developments in Anatolia. The American position was in contrast to that of the British desire to partition Anatolia along with the rest of the Ottoman

[749] RF records, RG5, 805, box 148, folder 1942. According to Heiser's diary entry dated August 1, 1922, he explained to Bristol that the American medical projects in Istanbul were not in line with the RF policy which focused on providing aid to hospitals connected to medical schools. He also mentioned that providing emergency medical services was the job of the ARC and NER, which the RF did not necessarily want to engage in. For an institutional history of the American Hospital see Winkler and Rountree, *Amerikan Hastanesi*. For an institutional history of the American Hospital's School of Nursing see Çeviker, *Amiral Bristol Hemşirelik Okulu*.

[750] RF records, field offices, RG 6, series 1, box 37, folder 457.

[751] For more information on Halide Edib (Adıvar)'s involvement in and contributions to the nursing profession, see Yıldırım, *Savaşlardan Modern Hastanelere*, 132-33.

[752] Mustafa Kemal Atatürk's year of birth is a subject of contention. See Necdet Sakaoğlu, "Mustafa Kemal'in gerçek doğum tarihi: 4 Ocak 1879," *Tarih*, May 2021, accessed May 15, 2024, https://tarihdergi.com/mustafa-kemalin-gercek-dogum-tarihi-4-ocak-1879/

[753] The Allies, particularly Britain, required the disarmament of the Ottoman Empire. However, intelligence reports from Anatolia suggested that there was resistance movement against the occupation and Armistice conditions. In response, the Istanbul government assigned high ranking military officers to ensure that the Allies' requirements were met, and resistance was subdued. For more information about the *milli mücadele* period and the Turkish War of Independence: Atatürk, *Nutuk*; Adıvar, *Turkish Ordeal*; Karpat, *Kısa Türkiye Tarihi*.

Empire. The United States acted as an intermediary between the Allies and the Ottoman Empire during the Paris Peace Conference (1919-1920), and the British side also started to favor an American mandate in the region. Since the Americans never engaged in active warfare in the Ottoman territories in the Near East, in Anatolia there was a relatively positive view of Americans. During the occupation years, there were even some supporters of an American mandate among local intellectuals, particularly in Istanbul.[754]

Although there was an arrest warrant against Mustafa Kemal, the American military officer Major General James G. Harbord (1866-1947) met with him in Sivas on October 20, 1919 accompanied by a Turkish member of the Robert College faculty who acted as the translator during this meeting.[755] Soon after, American newspapers such as the *New York Times* started taking an interest in the resistance movement in Anatolia and potential American business interests, including concessions to develop pipelines,[756] access to mineral resources, and railway construction contracts, played a crucial role in shaping the United States' position towards the new nation-state-in-the-making in Anatolia.

Mustafa Kemal relocated to Ankara, a malaria-stricken small town in Central Anatolia, on December 27, 1919. This town in the central lands of Anatolia had efficient railway connections to the rest of the country and was one of the rare spots that was not under foreign occupation. When the Ottoman Parliament shut down on March 18, 1920 after the British soldiers stormed it and arrested several members of the parliament, those who were able to escape joined Mustafa Kemal[757] in Ankara to form a new Parliament called the *Büyük Millet Meclisi* (Grand National Assembly) on April 23, 1920, along with

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[754] Selçuk Akalın, "Milli Mücadele Dönemi Türk basınında tarihsel bir tartışma: Manda mı? Himaye mi? Bağımsızlık mı?" (MA thesis, Osmangazi University, 2004), 45-6, 51. See also Atatürk, *Nutuk*.

[755] Fethi Tevetoğlu, "Mustafa Kemal - General Harbord Görüşmesi Tanık ve Tercümanı: Prof. Hulûsi Y. Hüseyin (Pektaş)," *Atatürk Araştırma Merkezi Dergisi* 4, no. 10 (Nov. 1987): 197-208.

[756] At the time the Americans assumed that Turkey would regain the oil rich Mosul and Kirkuk regions. However, these regions came under British mandate in 1920; although most Turkish demands were granted with the signing of the Lausanne Peace Treaty in July 1923 with support from the Americans, Britain declined to return these regions to Turkey. For more information, see Nevin Çoşar and Sevtap Demirci, "The Mosul Question and the Turkish Republic: Before and After the Frontier Treaty, 1926," *The Turkish Yearbook* 35 (2004): 43-59.

[757] After his resignation from the Ottoman Army, Mustafa Kemal was also elected as a Member of the Ottoman Parliament from the Erzurum province in the last Ottoman election held in 1919. However, due to the arrest warrant against him, he remained in Anatolia and did not go to Istanbul to join the parliament as an MP in January 1920. See Alaattin Uca, "Mustafa Kemal Paşa'nın Erzurum Mebusluğu," in *Milli Mücadele'nin 100. Yılı: Mustafa Kemal Paşa'nın Anadolu'ya Geçişi ve Kongreler Dönemi* conference proceedings (Apr. 24-26 2018, Erzurum), eds. Rahmi Deniz Özbay and Zehra Aslan (Ankara: Atatürk Araştırma Merkezi Yayınları, 2021), 543-94.

additional elected representatives from Anatolian provinces.[758] At this point, it became clear to Americans that a new state was about to be born with Ankara as its center.

The United States supported the Ankara government in its demands during peace negotiations with Britain and other Allied occupation forces. The Ottoman-American Development Company, a corporation founded by the American admiral Colby Mitchell Chester (1844-1932), played a crucial role in the days leading to the signing of the Lausanne Peace Treaty in July 1923.[759] Since resorting to foreign capital had been the beginning of the end for the Ottoman Empire, the Ankara government did not want to repeat this mistake and was initially hesitant to make a deal with the Americans, but they eventually agreed to the Chester concessions to guarantee the U.S. backing in peace talks.[760] Besides, founding a modern state was a costly undertaking which required not only financial resources but also expertise in multiple fields, which Americans were able and willing to provide. When Ankara faced a major housing problem as its population grew dramatically with the presence of the new bureaucratic class in town, the Ottoman-American Development Company proposed in 1923 to deliver prefabricated shelter units to meet the needs.[761] Although the Chester proposal to develop the new Turkish Republic never materialized and was officially abandoned, this rapprochement fostered a relationship between the Americans and the Ankara government which contributed to the welcoming attitude shown towards the RF in Turkey.

3.4 The Early Republican Period (1923-1950)

The Ankara government deposed the sultanate on November 1, 1922 and the new Anatolian state officially became the Republic of Turkey on October 29, 1923 with an announcement at the Grand National Assembly in Ankara.[762] Ankara had been declared the new capital a few days earlier on October 13, 1923, which led to parliamentary discussions about how to transform this provincial town into a modern city.[763] The Ankara

[758] For more information about the *milli mücadele* (national struggle) period and the Turkish War of Independence see, Atatürk, *Nutuk*; Adıvar, *Turkish Ordeal*; Karpat, *Kısa Türkiye Tarihi*.
[759] Ali Cengizkan, *Ankara'nın İlk Planı: 1924-1925 Lörcher Planı* (Ankara: Arkadaş, 2004), 29.
[760] Kemal Karpat, *Turkey's Politics* (Princeton: Princeton University Press, 1959), 85.
[761] Cengizkan, *Ankara'nın İlk Planı*, 29.
[762] Ibid., 15. However, the office of the Khalifat remained active until March 3, 1924 in order to appease the religious sentiments of the population. According to Ali Cengizkan, until the abolition of the Khalifat, Turkey had a dual identity. Cengizkan posits that the real watershed moment that broke the Republic's ties to the Ottoman Empire was the abolition of the Khalifat rather than the proclamation of the Turkish Republic.
[763] Ibid.

government's modernizing agenda accentuated the inclusion of women in public life, public health promotion along with the image of the healthy ideal citizen, and modern architecture that corresponded to these values of the new nation state. Ankara almost served as a blank canvas that was ready to showcase the Republic's new architectural language. Many healthcare and medicine-related buildings built between the 1920s and 1950, with their intended missions and modernist architecture, were expressions of how the founders of the Turkish Republic envisioned their creation.

The ruling elite of the new Republic were the intellectuals and military leaders of the old regime who deposed the Ottoman sultan after successfully defeating the occupying armies in Anatolia. As mentioned in Chapter 2, the late Ottoman Empire had been strategically growing closer with Germany since the reign of Abdulhamid II. The founders of the Republic were born and educated in an era when Germany was the Ottomans' closest ally, a bond which resulted in extensive cultural exchange. Institutions such as the army and the university system in the final decades of the Ottoman Empire were modelled upon German examples. German and Swiss universities became popular choices for Ottoman students who wished to study abroad in fields such as engineering and medicine.[764] Additionally, German generals like Colmar von der Goltz (1843-1916) taught at Ottoman military colleges and even led factions of the Ottoman army at times.[765] Many of the Ottoman military officers who founded the Republic had served under German generals during World War I, therefore it was probably no coincidence that the decision makers of the Turkish Republic in the 1920s and 1930s had a penchant for German architecture and preferred German-speaking architects and urban planners from Austria, Germany, and Switzerland for their projects rather than Americans despite the rapprochement with the United States. The Ankara government invited architects such as Ernst Egli (1893-1974), Bruno Taut (1880-1938), Clemens Holzmeister (1886-1983), Robert Oerley (1876-1945), and Theodor Jost (n.d.) to help develop the Turkish Republic's new capital in the *Yeni Mimari* (New Architecture) style, which was a Turkish term used to signify modernist architecture.[766]

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[764] Uğurgül Tunç, "Osmanlı Modernleşmesinde Eğitim, Sanat ve Kadın: İnas Sanayi-i Nefise Mekteb-i Âlisi Örneği" (MA thesis, Istanbul Technical University, 2018), 65.

[765] For more information, see Salih Kış, *Osmanlı Ordusunda Alman Ekolü: Von der Goltz Paşa (1883-1895)* (Konya: Palet Yayınları, 2017).

[766] The term was arguably coined by Celal Esat (Arseven) in the early 1930s to signify modernist architecture. See Arseven, *Yeni Mimari*; Bozdoğan, *Modernism and Nation Building*, 159-60; Cengizkan, *Modernin Saati*; Reisman, "Modernization of Turkey," 57-59; Nicolai, *Modern ve Sürgün*; Alpagut and

3.4.1 Rebuilding Ankara

The first reports and plans to urbanize Ankara as a modern capital in 1924 were the work of German architect Carl Cristoph Lörcher (1884-1966).[767] Lörcher's proposals envisioned Ankara with large avenues and train stations, monumental institutional buildings, public parks, and a dedicated section for healthcare establishments.[768] The older sections of the provincial town would become the periphery upon completion of such modernizing plans, while the new infrastructure would transform into the national center, and come to be known as the *Yenişehir* (The New City). When it became clear that Ankara was going to outgrow Lörcher's plans faster than expected, Hermann Jansen (1869-1945), a German architect and urban planner, prepared updated plans for Ankara between 1928 and 1932.[769] Due to copyright disputes, Jansen's version altered several sections of the *Yenişehir* and *Sıhhiye*.[770] The latter was the part of Ankara dedicated to healthcare institutions and it was one of the areas that changed dramatically in Jansen's plans.[771] *Sıhhiye*, meaning 'place of health/hygiene,' housed the modernist structures designed by the Austrian architects Theodor Jost and Robert Oerley for the Ministry of Health/Hygiene, *Hıfzıssıhha* (Central Hygiene) Institute, and the *Numune* Hospital, which were built in the late 1920s and early 1930s [772]

While the architects of these healthcare-related buildings were from Austria, there was significant collaboration between the healthcare establishments of the Turkish Republic and American institutions. Besides the aforementioned collaboration between the ARC and the Turkish Red Crescent, charitable organizations such as the Rockefeller Foundation (RF) funded healthcare projects in the Turkish Republic. The RF particularly supported the Central Hygiene Institute (CHI) project both financially and in terms of know-how with regards to public health. In 1927, Selskar Michael Gunn (1883-1944) of

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Wagner, *Werden einer Hauptstadt*; Kezer, *Building Modern Turkey*; Cengizkan and Cengizkan, *Construction of a New City*.

[767] Ali Cengizkan, "Ankara 1924 Lörcher Planı Raporu," *Belleten* 67, no. 248 (Apr. 2003): 153-92; Cengizkan, *Ankara'nın İlk Planı*.

[768] Cengizkan, "Ankara 1924 Lörcher Planı Raporu," 153-92; Cengizkan, *Ankara'nın İlk Planı*.

[769] For more information, see Hermann Jansen, *Ankara İmâr Planı* (Istanbul: Alaeddin Kıral Basımevi, 1937); H. Çağatay Keskinok, Irmak Yavuz Özgür, H. Eren Efeoğlu, *Jansen ve Ankara: Planlar-Yazışmalar* (Ankara: Koç Üniversitesi, 2023).

[770] Cengizkan, *Modernin Saati*, 53-54.

[771] Ibid., 54.

[772] About the Hıfzıssıhha Institute, see Küçük, *Filantrokapitalizm*; Uğurgül Tunç, "Hıfzıssıhha Institute in Ankara: Building the Healthy Citizen of a Young Republic," forthcoming Rockefeller Archive Center (RAC) research report. About the Numune Hospital, see Mehmet Şener, "Contractors and Contractorship: An Analysis of Public Building Constructions in Early Republican Turkey" (PhD diss., Middle East Technical University, 2013); Altay, *Atatürk Döneminde Numune Hastaneleri*.

the RF received a plan of the *Yenişehir* prepared by Ahmet Rushti (n.d.), who worked for the Ministry of Health/Hygiene as a graphical representation expert in charge of visualizing data and preparing maps.[773] Gunn shared that plan with Frederick F. Russell (1870-1960), a US army physician who served after his military career as the director of the RF's International Health Board (Figure 3.10).[774] The plan drawn by Rushti displayed the buildings of the Ministry of Health/Hygiene designed by Jost and built between 1926 and 1927, as well as a single structure on the plot reserved for the CHI.[775] The CHI building shown on the plan was the Bacteriology and Chemistry building of the complex designed by Theodor Jost. Jost was also the architect of the Ministry of Health/Hygiene building, which was of particular importance for the formation of the new architectural vocabulary of the Turkish Republic (Figure 3.11). Theodor Jost originally designed the main ministry building as the *Hudud ve Sevahil-i Sıhhiye Umum Müdiriyyeti* (Directorate of Border and Coastline Health/Hygiene), which later became the *Sıhhiye ve Muavenet-i İçtimaiye Vekaleti* (Ministry of Health/Hygiene and Social Assistance). It was this structure that gave the *Sıhhiye* district its name.[776]

According to architectural historian Bernd Nicolai, Jost's design for this structure was an extension of the revolutionary Viennese architecture of the 1910s rather than a representation of the unadorned modernism associated with Germany's Bauhaus or the *Weisse Moderne*.[777] In this regard, the healthcare architecture of early Republican Ankara was distinctly Austrian, and particularly Viennese, rather than German. As one of the first examples of international modernist architecture in Turkey,[778] Turkish newspapers announced its completion with great pride and celebrated the building's resemblance to contemporary structures in Europe at the time:

> […] the Ministry building is truly the most modern (*asri*) edifice of Ankara. It resembles the latest and most modern buildings of Europe. At the same time, the fact that it was built in *Yenişehir* has added value. As part of the architectural righteous cause/struggle (*dava*) of our Ankara, we have established the principle of building magnificent and monumental buildings in *Yenişehir* and on the Gazi Avenue, which comprises the backbone of *Yenişehir.* By bringing this (principle) to fruition for the first time, the Ministry of Health has served for the *dava* to develop *Yenişehir*.[779]

[773] RF, maps and flat files, 1/805, drawer B 4, folder 3. Included in correspondence from Selskar M. Gunn to Frederick F. Russell, Aug. 24, 1927.
[774] Ibid.
[775] This complex included the apartments for the Ministry of Health/Hygiene employees. For more information, see Cengizkan, *Modernin Saati*, 73-75.
[776] Cengizkan, *Modernin Saati*, 73-74.
[777] Nicolai, *Modern ve Sürgün*, 27.
[778] Alpagut and Wagner, *Werden Einer Hauptstadt*, 304-5.
[779] *Hakimiyet-i Milliye*, July 4, 1927. Also cited in Nicolai, *Modern ve Sürgün*, 28.

The apparent enthusiasm for modernist architecture and the use of the word *dava* (righteous cause/struggle) to define the goal to transform the new Turkey's architecture was an essential component of the modernization project of the Republic. The striking contrasts between the imposing brick-and-concrete buildings of *Yenişehir* and the traditional dwellings of Ankara's old settlements were reflections of the national struggle to move away from being a weak Empire to developing into a strong Republic. The correspondence and reports of the RF representatives also mentioned these sentiments. For instance, Selskar Michael Gunn observed that the passionate initiative to develop Ankara into a modern capital dramatically diverged from the past attitudes of the Istanbul government:

> The Turks in the past have been famous for their inertia, but their present activity, which is almost feverish, in attempting to make Angora a modern city, pushing the railroads far into Asia Minor and developing educational and judicial systems, would seem to give the lie, at least in part, to the charge of inertia.[780]

The systematically planned organizational structure of *Yenişehir* was to be exemplary for the entire country and to convey the message that the city of Ankara left its chaotic provincial Ottoman past behind and gave birth to a modern capital embellished with monumental structures. The significance of structures, such as the new Ministry of Health facilities, must have captured the RF representatives' attention as well since their reports and correspondence included construction phase photographs from 1927 to 1929 documenting the systematic development of the *Sıhhiye* section of the new capital.[781]

3.4.2 Healthcare Architecture in the New Republic

By 1925, there were numerous hospitals, dispensaries, clinics, and public health-related establishments such as laboratories scattered across Anatolia, many of which the Turkish Republic had inherited from the Ottoman Empire.[782] The Turkish Ministry of Health/Hygiene was planning to establish fifty examination and nursing stations by 1929.[783] In 1927, Frederick F. Russell of the RF recommended the establishment of "county health units" across Anatolia as a remedy for the lack of organization in the Turkish Republic's healthcare system, and suggested to start by selecting a rural area as a pilot region before applying a district health system to the entire country.[784] The Turkish

[780] RF records, projects, SG 1.1, series 805, box 1, folder 1 – (Gunn to Russell, Sep. 14, 1926).
[781] RF records, photographs, series 805, box 167, folder 3243; RF records, IHB/IHD records, RG 5 (FA115), subseries 3_700, box 234, folder 2863.
[782] RF, maps and flat files, 1/805, drawer B 4, folder 4.
[783] Ibid.
[784] RF records, projects, SG 1.1, 805, box 1, folder 9 – Letter from Russell to Gunn (June 23, 1927).

Ministry of Health/Hygiene shared with the RF two maps prepared by Ahmet Rushti displaying the extant healthcare infrastructure across the country (Figure 3.12) and the projected expansion of healthcare facilities by 1929 (Figure 3.13).[785]

The first newly built hospital of the Turkish Republic was the Zonguldak *Memleket* (Homeland) Hospital attributed to Mimar Kemalettin and completed in 1923; it mainly served coal mine workers in the region (Figure 3.14).[786] Following the deposition of Abdulhamid II in 1909, the Young Turk government had rebranded the *Hamidiye* (Hamidian) hospitals and smaller healthcare units across Anatolia as *Memleket* (Homeland) hospitals.[787] While the founders of the Republic, many who had been associated with the Young Turks' *İttihat ve Terakki* (Union and Progress) party, continued to use this name for both old and newly built smaller hospitals,[788] they also established larger high-capacity hospitals to serve as examples for future projects. These were called *Numune* (Examplary/Model) hospitals. Like the *Memleket* hospitals, most of the *Numune* hospitals utilized buildings inherited from the Ottoman Empire usually by renovating the larger Ottoman-era *Gureba* hospitals to coincide with the hospital trends of the time.[789] With the growing prevalence of the germ theory of disease and rising land values especially in crowded cities of Europe, UK, and North America where available building plots were highly limited, by the 1930s the block plan, which gathered all functions and departments of the hospital under one roof in a multi-story building, had

[785] RF, maps and flat files, 1/805, drawer B 4, folder 4; RF, maps and flat files, 1/805, drawer B 4,, folder 3.
[786] Yuvacan Atmaca and Ufuk Demirgüç, "Türkiye Tasarım Kronolojisi: Sağlık," 3. Istanbul Tasarım Bienali, Nov. 2016; Selin Nevrim, "Design Evolution of Healthcare Buildings: City Hospitals as a New Building Typology in Turkey" (MArch thesis, Middle East Technical University, 2020), 72.
[787] Atmaca and Demirgüç, "Türkiye Tasarım Kronolojisi."
[788] Some of the newly built hospitals were projects which were left unfinished by the Ottoman Empire, such as the Kayseri *Memleket* Hospital, the construction of which had begun in 1884, but was not finished until 1924. See Kayseri Devlet Hastanesi, accessed Mar. 24, 2024, https://kayserieah.saglik.gov.tr/yazdir?9614422A3454CFD1EA011F0E3E79A957#:~:text=Kayseri'de%20ilk%20defa%20kurumsal,1910%20y%C4%B1l%C4%B1nda%20bitirilerek%20hizmete%20a%C3%A7%C4%B1labilmi%C5%9Ftir.
[789] Zehra Tonbul and Özgün Forta, *Tarihi Hastaneler: Gurebâ Hastaneleri'nden Memleket Hastaneleri'ne İlk Sivil Hastaneler* (Istanbul: Novartis Kültür Yayınları, 2009): 212-15; Atmaca and Demirgüç, "Türkiye Tasarım Kronolojisi"; Altay, *Atatürk Döneminde Numune Hastaneleri*; Mehmet Şener and Emre Kishali, "Conserving Modern Architectural Heritage: Review on First Numune Hospitals of Turkey," *International Journal of Architecture and Planning* 8, no. 1 (Jun. 2019): 88-111; Nevrim, "Design Evolution of Healthcare Buildings."

largely replaced the pavilion plan in urban areas.[790] The new hospitals of the Turkish Republic reflected this development.[791]

The Ankara government preferred to commission major construction projects for healthcare-related institutions in Ankara.[792] For instance, the country's only medical school at the time, which had been inherited from the Ottoman Empire, was in Istanbul, and no new teaching or research hospital was established there. Instead, the Ottoman-built facilities of the *Mekteb-i Tıbbiye-i Şahane* (Imperial School of Medicine) originally co-designed by Raimondo D'Aronco and Alexander Vallaury in 1894 and opened in 1903 went under a sixteen-month renovation between 1934 and 1936 to become the Haydarpaşa Numune Hospital.[793]

Ankara Numune Hospital also began in an Ottoman-era Gureba hospital but expanded with additional buildings in 1927 and 1933. While the 1927 extension was a modest building consisting of ten private rooms, an X-ray unit, laboratory spaces, and laundry facilities with an external water tank,[794] the İsmet Paşa Pavilion built between 1929 and 1933 was a 300-bed hospital building designed by Robert Oerley (Figures 3.15-3.16), who was also in charge of designing the Central Hygiene Institute complex. The Grand National Assembly of Turkey (Turkish parliament, *Türkiye Büyük Millet Meclisi*, TBMM) approved the budget to build a grand building for the Ankara Numune Hospital on May 7, 1928[795] following Ömer Vasfi's (1889-1969) exploratory trip to Germany in 1927.[796] The Vienna-based construction firm Redlih und Berger won the tender for the project and the local developer was Vehbi Koç (1901-1996).[797] This latter extension

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[790] According to Annmarie Adams, the transition to the block plan was a gradual process and the pavilion plan hospitals lived on within the high-rise urban hospitals of the 1920s. See Annmarie Adams, "Modernism and Medicine: The Hospitals of Stevens and Lee, 1916-1932," *Journal of the Society of Architectural Historians* 58, no. 1 (Mar. 1999), 51-2. See also Nevrim, "Design Evolution of Healthcare Buildings," 38-39.

[791] Bolak, "Hastanelerimiz"; Atmaca and Demirgüç, "Türkiye Tasarım Kronolojisi: Sağlık"; Nevrim, "Design Evolution of Healthcare Buildings."

[792] This was the case for almost all major government-sponsored projects regarding architecture and urban planning. Gönül Tankut interpreted that this led to animosity among Istanbulites, particularly directed at Ankara's planner Jansen in newspaper articles. See Gönül Tankut, *Bir Başkentin İmarı (1929-1939)* (Ankara: Ortadoğu Teknik Üniversitesi, 1990), 100.

[793] For more information see Haydarpaşa Numune Eğitim ve Araştırma Hastanesi, "Tarihçe," accessed Mar. 24, 2024, https://haydarpasanumuneah.saglik.gov.tr/TR,85393/tarihce.html. See also Yavuz, "Batılılaşma Döneminde Osmanlı Sağlık Kuruluşları," 131-36; Yıldırım, *Tıphâne-i Âmire*, 57-78.

[794] *Hakimiyet-i Milliye*, May 19, 1927.

[795] TBMM Z.C., Term III, vol. 4 (May 7, 1928): 8-9, 62-3.

[796] Ömer Vasfi was later excluded from the building committee. *40. Yıl Münasebetiyle Ankara Numune Hastanesi* (Ankara: Yeni Desen Matbaası, 1965), 8, 15-16; Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı*, 211. See also, Doğramacı, "Architektur, Politik, Kulturtransfer," 95–125.

[797] Vehbi Koç, *Hayat Hikayem*, 4th edition (Istanbul: Apa Ofset Basım Evi, 1983), 48-50.

opened along with the Central Hygiene Institute complex, which the Turkish newspapers announced as the "greatest achievement of the Republic."[798] By the late 1930s, the Ankara government started investing more resources into new hospital building projects.[799]

During the 1920s and 1930s, foreign architects from German-speaking countries worked on the design of almost all major government-funded construction projects in Ankara, including those related to healthcare architecture.[800] By the late 1920s, the Swiss-Austrian architect Ernst Egli famously criticized the work of Turkish architects, such as Mimar Kemalettin and Vedat Tek, who built using the First National Architecture style, for not being 'modern.'[801] Many ongoing projects, such as Kemalettin's *Gazi İlk Muallim Mektebi* (Gazi Teachers' College) which was reassigned to Egli in 1927, were taken away from Turkish architects and handed over to foreign architects by the Turkish government.[802] In the 1930s, Turkish architects started publishing articles to voice their grievances about this attitude of the new Republic's ministries, particularly the Ministry of Education and the Ministry of Health/Hygiene, and the Ankara municipality in the journal *Mimar* ('Architect') which later became known as *Arkitekt*, a play on the word '*Architekt*' meaning 'architect' in German, in 1935.[803] The Istanbul municipality differed from the Ministry of Health/Hygiene by rewarding the project for building the surgical pavilion of the Cerrahpaşa Hospital in Istanbul to Ahmet Sabri (Oran, 1905-1972), a local architect, in 1935.[804] However, this project remained incomplete for many years and was

[798] "Cumhuriyetin Büyük Eseri: Ankara Numune Hastanesi'nin İsmet Paşa Pavyonu ve Sıhhat Enstitüsü Dün Açıldı," *Hâkimiyet-i Milliye*, Nov. 1, 1933, 1. See also Altay, *Atatürk Döneminde Numune Hastaneleri*.
[799] See for example parliamentary records on budgetary decisions, TBMM Z.C., Term V, vol. 25 (May 23, 1938): 33-34.
[800] Buildings such as Arif Hikmet Koyunoğlu's (1888-1982) State Art and Sculpture Museum in Ankara (b. 1927-1930) and the Ottoman Bank building in Ankara by Giulio Mongeri (b. 1926) were rare exceptions designed by local architects during this period. See Hasan Kuruyazıcı, *Osmanlı'dan Cumhuriyet'e Bir Mimar: Arif Hikmet Koyunoğlu* (Istanbul: Yapı Kredi Yayınları, 2008); Damla Çinici, "Başkent Ankara'nın İnşasında Etkin Bir Mimar: Giulio Mongeri ve Yaşam Öyküsü," *Ankara Araştırmaları Dergisi* 3, no. 1 (Jun. 2015): 13-41.
[801] Yıldırım Yavuz, "Yeni Bulguların Işığında Mimar Kemalettin ve Yapıtları," *Mimar Kemalettin ve Çağı*, ed. Ali Cengizkan (Ankara: TMMOB Mimarlar Odası, 2009), 140.
[802] Umut Şumnu, "Sıradanın Sıradışılığı: Mimar Halim ve İçöz Apartmanı," *SOLFASOL* 48 (2016): 18-19. Kemalettin suffered from a cerebral haemorrhage shortly after being criticized by Egli and having his project taken away from him. Turkish scholars such as Yıldırım Yavuz and Umut Şumnu posit that Kemalettin died because of the emotional toll of this experience.
[803] See for example, Mimar Abidin, "Memlekette Türk mimarının yarınki vaz'iyeti," *Mimar* 29 (May 1933): 129-30. Although it is not verifiable at this point in time, the author of this piece ('Architect' Abidin) might be Abidin Mortaş.
[804] Ahmet Sabri (Oran), "Cerrahpaşa Hastanesi Hariciye Paviyonu," *Arkitekt* 57 (Sep. 1935): 259-60.

reassigned in 1941 to Leyla Turgut (1910-1988), one of the Turkish Republic's first woman architects; it was finally completed in 1943.[805]

As a result of the Ankara government's favoritism of foreign architects for large state commissions, Turkish architects turned to working for private clients, among them physicians who commissioned residential structures and apartment buildings which incorporated areas for private practice.[806] An example of these small-scale projects was the *Röntgen Apartmanı* (The X-Ray Apartment Building) designed by Zeki Selah Sayar (1905-2001). Completed in 1933, this building housed the home and office of Saadet Gören (n.d.) and it attracted some attention in the media not only as a modernist structure, but also because Gören was a woman physician, the ideal representation of the face of modern Turkey.[807] Architectural historian Sibel Bozdoğan interprets the juxtaposition of Gören's image with that of the modernist building she commissioned as an attempt to "gender the modern" by associating modernist architecture of the Turkish Republic with a new generation of women healthcare professionals.[808]

According to municipal records, more than 6,000 new residential buildings were built in Istanbul between 1928 and 1934.[809] Among these were several buildings commissioned by physicians, which were referred to as '*tabip evi*' (physician's house) and featured spaces such as waiting areas for patients and examination rooms. The physician's house became a local typology as Turkish architects started incorporating elements of healthcare architecture into these buildings which served as both residences and offices of physicians. Although they did not have that much of an opportunity to design major hospital projects in the 1930s, local architects in Turkey had an interest in

[805] Bolak, "Hastanelerimiz"; Ayşe Ceren Bilge and Zeren Önsel Atala, "İstanbul Cerrahpaşa Tıp Fakültesi Cerrahi Kliniği," *Türkiye Mimarlığında Modernizmin Yeni Açılımları* (Antalya: Akdeniz Üniversitesi, 2013).
[806] See the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[807] See the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul." Saadet Gören was one of the first women radiologists of the Turkish Republic.
[808] Hikmet Feridun (Es), "Bayan Saadet: Apartıman Yaptıran Kadın Doktor," *Yedigün*, Aug. 1935, accessed Jan. 29, 2024, https://www.herumutortakarar.com/rontgen-apartmani/; Bozdoğan, *Modernism and Nation Building*, 84-85. Images of educated and professional women were also highlighted in the magazine *La Turquie Kemaliste* published in French aiming to promote the modern Turkish Republic's new image abroad. See for example *La Turquie Kemaliste* (Feb. 1939), SALT Research, accessed Feb. 11, 2024, https://archives.saltresearch.org/handle/123456789/82351. For more information, see Hüseyin Kalemli, "*La Turquie Kemaliste* Dergisi," *Atatürk Ansiklopedisi*, accessed Feb. 11, 2024, https://ataturkansiklopedisi.gov.tr/bilgi/la-turquie-kemaliste-dergisi/.
[809] "İstanbul'da Yapılar 1928-1934 (Belediye İstatistiğinden)," *Arkitekt* 53 (May, 1935): 153-54.

healthcare architecture.[810] They likely regarded these homes with the private offices of physicians as a typology where they could apply architectural elements related to space, light, and ventilation associated with hospital architecture. For instance, architect Seyfettin Erkan (also known as Seyfi Nesih and Seyfi Arkan, 1903-1966) defined the house he designed for İhsan Sami (Garan, n.d.) as a modern building "considerate of the needs of a physician" (Figure 3.17).[811] Abidin Mortaş's (1904-1963) design for the houses of two physicians named Ziya and Zeki included one floor with a dedicated entrance hall suitable for accepting patients and the design followed the physicians' instructions to ensure that the buildings had an optimum level of ventilation and sunlight.[812]

3.4.3 Rockefeller Foundation and the Hıfzıssıhha (Central Hygiene) Institute

In December 1923, soon after the proclamation of the Turkish Republic, Selskar Michael Gunn, a public health expert who directed the RF's International Health Division (IHD) operations in Europe, and Frederick F. Russell, the director of the IHD, had met with Adnan Bey (Adıvar, 1882-1955), who served as the Minister of Health of the Ankara government between 1920 and 1921, upon Adnan's request.[813] Following his appointment as the Minister of Health in 1924, Refik (Saydam, 1881-1942) corresponded with the RF.[814] During this time, the RF had the goal of controlling the spread of communicable diseases world-wide and was providing funding for public health projects. Refik's letter to the RF placed a specific emphasis on malaria and syphilis, which he defined as 'social evils':[815]

> The Minister of Health would accept in Turkey, nevertheless with gratitude, all material and scientific assistance, which might be granted in connection with the fight against malaria and syphilis and other social evils.[816]

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[810] *Mimar*, and later *Arkitekt* featured at least seventeen articles about hospital architecture between 1930 and 1947.
[811] Seyfettin Erkan, "Dr. İhsan Sami Evi," *Mimar* 48 (Dec. 1934): 335.
[812] Abidin Mortaş, "Dr. Ziya ve Dr. Zeki kira evleri," *Arkitekt* 58 (Oct. 1935): 281.
[813] RF records, projects, SG 1.1, series 805, box 1, folder 1 – Ralph K. Collins' report on public health in Turkey (1926). According to Refik Saydam's correspondence with the RF in later years, the RF had been in contact with Turkey earlier in 1919 and 1921. RF records, RG5, 805, box 207, folder 2652.
[814] Refik Saydam became the Prime Minister of Turkey in 1939 and remained in office until his death in 1942. For more information about Saydam see, Cem Hakan Başaran, "Refik Saydam: A Pioneer in the Fight Against Infectious Diseases," *Infectious Diseases and Clinical Microbiology* 3 (Dec. 2021): 173-76. Many of the healthcare and medicine-related institutions in Turkey which received support from the RF were spearheaded by physicians such as Refik Saydam and İhsan Doğramacı (1915-2010) who were prominent figures in Turkey. Doğramacı became the President of the Council of Higher Education of Turkey (*Yükseköğretim Kurulu*, YÖK) which was established in 1981 following a military coup in Turkey on September 12, 1980. Saydam and Doğramacı were central figures in RF's decision-making processes with regards to which projects to support in Turkey. For a biography of Doğramacı see Faik Çelik, "Prof. Dr. İhsan Doğramacı (1915-2010)," Yükseköğretim Dergisi 1, no. 1 (Jun. 1, 2011): 51-53.
[815] RF records, RG5, 805, box 207, folder 2652.
[816] Ibid.

This first official request for aid from the RF by the Turkish Ministry of Health/Hygiene in April 1924[817] was a welcomed development for Russell and Gunn, and work towards stationing an RF representative in Turkey; and the preparation of a preliminary public health survey in Turkey soon followed.[818] The RF initially provided support for public health demonstration projects which were localized health programs mostly administered by public health nurses who canvassed selected neighborhoods to understand the community's needs and made sure that the members of the community were aware of the services available at their local health centers[819] and nurse training programs,[820] including curriculum development at the Turkish Red Crescent School of Nursing in Istanbul.[821]

One of the first major healthcare-related projects to receive RF support in Turkey was the *Hıfzıssıhha* (Central Hygiene) Institute that had been established in Ankara in 1928. Ralph K. Collins (n.d.), who had been the RF's IHD representative in Turkey since 1926, wrote to George K. Strode (1886-1958), one of the program officers of the RF, early in 1928 to inform him that the Turkish Ministry of Health/Hygiene had plans to establish a new medical school in Ankara and that the first phase of this project would be to start a service school to train the ministry employees.[822] Collins mentioned that the goal was to follow the example of the recently established RF-funded public health school in Zagreb under the leadership of Andrija Štampar (1888-1958), whose work had been a major influence on Selskar Michael Gunn, the IHD's director of operations in Europe.[823] In May 1928, the Turkish Parliament ratified the law establishing the Central Hygiene Institute (CHI) which would meet the new Republic's public health needs such as serum and vaccine production, diagnostic laboratory services, and public health staff training

[817] Ibid., (Refik to Gunn, April 1924)
[818] Ibid.
[819] The RF was supporting public health demonstration projects in New York City, particularly in East Harlem which began in 1922, and wanted to establish this system in other parts of the world. For more information about the RF involvement in public health demonstration projects in New York City see, Patricia D'Antonio, *Nursing with a Message: Public Health Demonstration Projects in New York City* (Rutgers University Press, 2017), 35-56.
[820] RF records, SG 1.1, 805, box 1, folder 5
[821] RF records, field offices, RG 6, series 1, box 37, folder 457
[822] RF records, RG 2, 805, box 12, folder 101 (Collins to Strode, Jan. 22, 1928). Strode became the director of the IHD in 1944. Collins first arrived in Turkey in February 1926 and prepared an extensive report titled "Public Health in Turkey" after staying in the country for several months. See Kenneth W. Rose, "The Rockefeller Foundation's Fellowship Program in Turkey, 1925-1983," RAC research report, 2008, 7.
[823] RF records, RG 2, 805, box 12, folder 101 (Collins to Strode, Jan. 22, 1928). For more information on the public health school in Zagreb see, School of Public Health "Andrija Štampar" – School History, accessed Nov. 2, 2023, https://www.snz.unizg.hr/en/about/school-history/. Refik (Saydam) envisioned the creation of such an institution in 1925 when he brought forward the importance of preventive medicine as the Minister of Health/Hygiene. See *Dr. Refik Saydam 1881-1942: Ölümünün 40. Yılı Anısına* (Ankara: Sağlık ve Sosyal Yardım Bakanlığı Yayınları, 1982), 56-57; Küçük, *Filantrokapitalizm*, 105.

for the next twenty-five years.[824] When the public health school of the CHI was established in 1936, RF's Ralph K. Collins was appointed as its first dean.[825]

Along with the *Memleket* and *Gureba* hospitals, mentioned in section 3.4.2 of this dissertation, the Turkish Republic had inherited several public health establishments from the Ottoman Empire. These included laboratories, serum and vaccine production facilities, bacteriology institutes, and veterinary medicine centers.[826] Pre-existing facilities, mainly four laboratories in Istanbul, Sivas, Erzurum, and Izmir, would support the Central Hygiene Institute in Ankara as part of a national system for public health research and diagnosis.[827] Although the Ministry of Health/Hygiene was unable to provide the RF's Ralph K. Collins with detailed information about their proposal during his trip to Ankara in January 1928, he was impressed by the malaria prevention work conducted there at the time.[828] The initial RF support of US $80,000 for this project was for the procurement and installation of equipment rather than to cover building costs.[829]

In November 1928, Collins and Strode met with İsmet Paşa (İnönü, 1884-1973), the Prime Minister of Turkey at the time. İsmet Paşa emphasized that public health was an essential part of the country's economy and noted that provision of healthcare services was "one of the methods by which the government can get in direct control with the people."[830] Public health was central to the Turkish Republic's founders' goals since there was a dire need for population growth, and they wanted the new generation to become the seeds of a healthy society. It was clear to RF representatives that the Turkish Republic

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[824] *Türkiye Cumhuriyeti Merkez Hıfzısıhha Müessesesi Hakkında Kanun* (no: 1267), *Resmî Gazete* 899, May 27, 1928, 210; RF records, projects, SG1.2, box 1, folder 5. See also, Küçük, *Filantrokapitalizm*, 105. I should note that an establishment named "*Hıfzıssıhha Müessesesi*" pre-existed in Istanbul under the leadership of Refik who resigned from that post in October, 1927 (BCA, 30-11-10, box 35, folder 28, file 11 (Oct. 27, 1927)), and the first draft law towards the establishment of the CHI in Ankara was dated Feb. 13, 1927 (BCA, 30-18-1-1, box 23, folder 9, file 9 (Feb. 13, 1927)).

[825] Rose, "Rockefeller Foundation's Fellowship Program," 8.

[826] The public health and healthcare establishments the Turkish Republic had inherited from the Ottoman Empire included a vaccine production facility founded in Istanbul in 1892 (*Telkihhane*), the *Bakteriyolojihane-i Şahane* (Imperial Bacteriology, renamed as the *Bakteriyolojihane-i Osmani* in 1911) founded in 1893, the *Kimyahane* (chemistry lab) founded in 1894, the *Daülkelp Ameliyathanesi* (Rabies Treatment Institution) founded in 1897, a serum production facility in Erzincan founded in 1911 (*Erzincan Serum Darülistihzarı*), bacteriology centers in İzmir and Sivas founded in 1916 and 1917 respectively, and veterinary medicine centers such as the *Bakteriyolojihane-i Baytari* (Veterinary Bacteriology Institution) founded in 1901 and the Pendik Veterinary Control Institute founded in 1913. For more information, see Meryem Bulut, "Refik Saydam Hıfzıssıhha Merkezi Başkanlığı, 1928-2017" (MA thesis, Hacettepe University, 2021), 14-6.

[827] Ibid., 105.

[828] RF records, RG2, 805, box 12, folder 101

[829] RF records, projects, SG 1.2, box 1, folder 5

[830] RF records, RG2, 805, box 12, folder 101.

was going through an incredible transformation, and they communicated this observation in their reports. For instance, Strode wrote:

> One cannot visit Turkey for the first time without carrying away the impression that the whole country has undergone a profound awakening. New ideals and new aims have been adopted and put into effect which challenge the admiration of the West.[831]

3.4.4 The Bacteriology and Chemistry Building by Theodor Jost

The Turkish Ministry of Health/Hygiene initiated its plans to build a public health institute in Ankara in 1927.[832] The first product of these plans was the Bacteriology and Chemistry building designed by Theodor Jost (n.d.),[833] the architect of the Ministry of Health/Hygiene facilities, built between 1926 and 1927. Jost's Art Deco design for the Bacteriology and Chemistry building of the Central Hygiene Institute (CHI) had a symmetrical façade with a semi-spherical central block and two rectangular blocks connected to the central block (Figure 3.18).[834] The building's semi-spherical façade featured a relief sculpture depicting Hygeia by the Austrian sculptor Wilhelm Frass, who subsequently competed in the 1936 Berlin Olympics' art events as a sculptor representing Austria.[835] This selection of an allegorical female figure for the central panel of the building's façade resonated with the new Republic's vision to promote women as allies of science and progress. As Kıvanç Kılınç notes, this sculptural relief was one of many carefully selected female figures embellishing the new capital of the Turkish Republic.[836] Moreover, depictions of Hygeia had made previous appearances on medical and health related architecture in Europe. Hygeia appeared in a relief by Emilius Bourgonjon (1841-1927), holding the rod of Asklepios at the *Laboratorium voor Hygiene* building built in 1883 in Groningen, Netherlands.[837] Hygeia was also the central figure in Gustav Klimt's

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[831] Ibid.
[832] RF, IHB/IHD records, RG 5, Series 3-700, box 234, folder 2862.
[833] Archive of the Ankara Municipality, vol. 5, letter from Jensen to Oerley dated October 10, 1928. See also Nicolai, *Modern ve Sürgün*, 27-33.
[834] Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı*, 209.
[835] Nicolai, *Modern ve Sürgün*, 29. Zühal Özcan posited that the technique used in this relief was reminiscent of the work of American sculptor Sidney Biehler Waugh. See Zühal Özcan, "Art Deco as a Frustrated Style and Reflections from Ankara – Turkey," *GRID* 1, no. 1 (2018): 94. About Wilhelm Frass and his participation in the 1936 Berlin Olympics see, "Wilhelm Frass," Olympedia, accessed Feb. 12, 2024, https://www.olympedia.org/athletes/920017.
[836] Kıvanç Kılınç, "The Central Institute of Hygiene: Modernism and Gender in Early Republican Turkey," RAC research report, 2010.
[837] Kunst Groningen, "Hygieia," accessed Oct. 26, 2023, https://www.kunstpuntgroningen.nl/kunst-op-straat/hygieia-2/.

(1862-1918) *Medicine*, one of the ceiling paintings he created for the University of Vienna in 1901.[838] As per construction phase photographs of the Bacteriology and Chemistry building in Ankara, the Hygeia relief was completed before many other details of the building, proving that it was probably more than a mere decorative detail or an afterthought, but a priority for the building's patrons (Figure 3.19).[839]

How natural light entered the interiors of the Bacteriology and Chemistry building was one of its essential features since the requirements for natural light changed depending on the different functions of each section of the building. Although the installation of window shutters produced by the Stuttgart-based C. Leins & Co and imported from Germany[840] were incomplete at the time, Ralph K. Collins' notes accompanying the construction photos taken on January 19, 1928 emphasized the building's relationship to natural light:

> The building is decidedly modernistic in style. The allegorical figure represents Science in the battle against Disease. The laboratories are exceptionally well lighted. The sections of Bacteriology, Chemistry and propaganda are to be housed in this building. There is a well-equipped hall for lecturing, etc.[841]

Each laboratory in the building served specific functions which required distinct installation requirements. The 2009-2010 restoration plans for the building prepared by architects Mehmet Emin Yılmaz and Hasan Fevzi Çügen revealed some of the technical aspects of the original design of 1928.[842] The lowest floor was designed as a basement with fenestration above the ground which housed the diphtheria and bacterial vaccine preparation and research laboratories. These spaces had see-through partitions which were used as separators to allow flexible spatial arrangement which were innovative features at that time.[843]

Although the construction phase of the building was completed in February 1928, shortages of electricity, water, and gas shortages in Ankara led to several setbacks. The Ankara municipality was struggling to meet the demands of the rapidly expanding city.[844]

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[838] Tina Marlowe-Storkovich, "'Medicine' by Gustav Klimt." *Artibus et Historiae*, vol. 24, no. 47 (2003): 231-52. Rubert Edwards, "*Medicine* – Gustav Klimt – painted in Vienna 1894-1901," *Factum Arte*, 2017. *Medicine*, along with Klimt's *Philosophy* and *Jurisprudence* painted in the same series, was destroyed in 1945 by the Nazi troops.
[839] RF records, photographs, series 805, box 167, folder 3243
[840] Yılmaz and Çügen, "Hıfzıssıhha Enstitüsü," 32-36.
[841] RF records, photographs, series 805, box 167, folder 3243
[842] See Yılmaz and Çügen, "Hıfzıssıhha Enstitüsü," 32-36.
[843] Cengizkan, *Modernin Saati*, 75; Yılmaz and Çügen, "Hıfzıssıhha Enstitüsü," 32-36.
[844] Cengizkan, *Modernin Saati*, 75-76.

The tender for the construction of the Ankara Electricity and Gas Factory, which would increase production capacity of these essential amenities, was still not finalized when the Bacteriology and Chemistry building was built.[845] Nevertheless, soon after the completion of the building in February 1928, the Division of Chemistry opened. However, there were some complications regarding the equipment installations in the Division of Bacteriology, with which the RF's International Health Division (IHD) offered assistance.[846] As early as 1929, the Central Hygiene Institute (CHI) became the 'technical arm' of the Ministry of Health/Hygiene as it carried out the inspections of locally manufactured or imported chemical and pharmaceutical substances before they became eligible for nationwide distribution.[847] This building also functioned as the center for the production of health propaganda material in line with the new Republic's goals to boost population growth and create a healthy society. When completed, the building's entrance featured a plaque indicating that the installation and purchase of the equipment in the Bacteriology and Chemistry building was made possible thanks to the U.S. $80,000 provided by the RF.

Jost's Bacteriology and Chemistry Building of the CHI became one of the most iconic structures of Ankara by the late 1930s. For instance, when the Austrian weekly *Wiener Bilder* published an article about Ankara on November 20, 1938, ten days after the death of Mustafa Kemal Atatürk, the piece featured the façade of the Bacteriology and Chemistry Building displaying the Art Deco main gate and the Hygeia relief by Wilhelm Frass (Figure 3.20).[848]

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[845] Ibid. Built between 1928 and 1933, the buildings of the Ankara Electricity and Gas Factory were designed by the German architect Werner Issel. For more information see, Goethe Institute, "Tarihi Elektrik ve Havagazı Fabrikası," accessed Mar. 26, 2024, https://www.goethe.de/ins/tr/ank/prj/urs/geb/ind/gas/trindex.htm. See also, Mehmet Karayaman, "Ankara Elektrik Türk Anonim Şirketi Tarihçesi (1929-1939)," *Osmanlı Bilimi Araştırmaları* 16, no. 1 (2014): 50-72.

[846] RF, IHB/IHD records, RG 5, Series 3-700, box 234, folder 2862 (1929 Annual Report)

[847] Ibid.

[848] *Wiener Bilder* 47, Nov. 20, 1938, 12-13 (*Österreichische Nationalbibliothek*, ANNO *Zeitungen*). In the 1930s, nationalists in Germany and Austria expressed their admiration for the Turkish Republic and its founder, Mustafa Kemal, in popular publications such as *Wiener Bilder*. For more information, see Stefan Ihrig, *Atatürk in the Nazi Imagination* (Cambridge, MA: The Belknap Press of Harvard University Press, 2014). The Bacteriology and Chemistry building, along with other buildings of the CHI complex, was also featured in a Soviet produced documentary *Ankara: The Heart of Turkey* directed by Sergei Yutkevich. See Sergei Yutkevich, dir., *Ankara: The Heart of Turkey* (1934), motion picture.

3.4.5 The Hıfzıssıhha Buildings Designed by Robert Oerley (1876-1945)

Robert Oerley (1876-1945), also from Austria, was subsequently commissioned to design the rest of the Central Hygiene Institute (CHI) buildings. Oerley had been serving as the vice president of the *Zentralvereinigung der Architekten Österreichs* (Central Association of Austrian Architects) since 1915 and was a more experienced architect compared to Jost.[849] When he took over the project, Oerley made it clear to his colleagues that he did not take Jost's work seriously. For instance, he wrote to Hermann Jansen: "The responsible party for the appearance of the building is the young Viennese architect Theodor Jost who regards building design as a fad and a joke."[850] On the other hand, Oerley praised the floor plans of Jost's building while noting that the interior planning was indeed the work of the skillful master builder Bruno Bauer (n.d.), rather than of Jost himself.[851]

During George K. Strode's visit to Ankara in late 1928, the floor plans and construction budget for the remaining buildings of the CHI were ready.[852] The project included four buildings for the use of what Strode referred to as the 'Service School,' and a separate hospital building. Since Ralph K. Collins' visit in January 1928, there had been a lot of progress along with major changes to the plans. In 1928, Robert Oerley replaced Theodor Jost as the architect of the CHI project, and Hermann Jansen (1869-1945) replaced Carl Cristoph Lörcher (1884-1966) as the city planner of Ankara's *Yenişehir* (New City).

Oerley arrived in Ankara upon a decision in April 1928 by the Cabinet of Ministers and Mustafa Kemal's official invitation asking him to execute the necessary surveys for the CHI and the Numune Hospital projects in Ankara.[853] He was among the most prominent architects in Vienna during the interwar years[854] and had previous experience designing healthcare-related buildings in urban settings such as the Luithlen

[849] Eve Blau, *The Architecture of Red Vienna, 1919-1934* (Cambridge, MA and London, UK: MIT Press, 1999), 273.
[850] Archives of the Ankara Municipality, Hermann Jansen papers vol. 5, 1928-1931, Oerley to Jansen, Aug. 8, 1928. See also Nicolai, *Modern ve Sürgün*, 29; Cengizkan, *Modernin Saati*, 75.
[851] Archives of the Ankara Municipality, Hermann Jansen papers vol. 5, 1928-1931, Oerley to Jansen, Aug. 8, 1928. See also Nicolai, *Modern ve Sürgün*, 29.
[852] RF records, RG2, 805, box 12, folder 101.
[853] BCA, 30-18-1-1, box 28, folder 22, file 20 (Apr. 15, 1928).
[854] Blau, *Architecture of Red Vienna,* 273; Cengizkan, *Modernin Saati*, 71.

Sanatorium in Vienna, built between 1907 and 1908.[855] His formal education was in painting and drawing, in addition to his training in cabinetmaking at his father's workshop which inspired him to become an architect.[856] Oerley acquired his license to work as a master-builder, and subsequently as an architect through a non-academic route, became a member of the Vienna Secession in 1907, and remained so until 1939. He was among the founders of the Austrian *Werkbund*, which encouraged and celebrated the collaboration between the arts, crafts, and industry.[857]

Besides his role as the architect of the new healthcare infrastructure of Ankara and the *Başmimar* (Lead Architect) of *Ankara İmar Müdürlüğü* (the Ankara Directorate of Reconstruction),[858] Oerley collaborated with Jansen, who was based in Berlin, in the planning of the Yenişehir. The exchange of letters between the two from 1928 to 1931 indicated that Oerley's involvement in the new urban plan for Ankara went beyond simple tasks which Jansen was unable to carry out from afar, and Oerley indeed provided guidance to Jansen about cultural aspects of Turkey.[859] Furthermore, the Turkish Cabinet of Ministers' decision related to the new plan of Ankara signed on April 30, 1930 had the names of both Jansen and Oerley, indicating that their collaboration was officially recognized as a partnership.[860] According to Ali Cengizkan, Oerley had an influential role in the architectural projects in Ankara during the time he was there (1928 -1933), and along with Ernst Egli (1893-1974) and Clemens Holzmeister (1886-1983), he participated in invitation-only competitions, including the one for the second headquarters of the *Emlak ve Eytam Bankası* (The Bank of Housing and Orphans) which would later house the Central Bank of Turkey.[861] In Ankara, besides the CHI structures and the Numune Hospital, Oerley designed the buildings of the General Directorate of the Red Crescent

[855] Sevim Ateş, "Robert Oerley'in İstanbul'da Bilinmeyen Bir Yapısı: Tuzla İçmeleri Kaplıca Oteli," *Mimarlık* 361 (Sep.-Oct. 2011): 24-31; Sevim Ateş Can, "Robert Oerley and Tuzla Mineral Springs," *METU JFA* 31, no. 1 (Jan. 2014): 1-19.
[856] Blau, *Architecture of Red Vienna,* 273; Cengizkan, *Modernin Saati,* 71.
[857] A.S. Levetus, "The Austrian Werkbund Exhibition in Vienna," *The American Magazine of Art* 21, no. 10 (Oct. 1930): 581-7; Blau, *Architecture of Red Vienna*, 273; Anna Stuhlpfarrer, "The Austrian Werkbund," *Werkbundsiedlung Wien*, accessed Dec. 27, 2023, https://www.werkbundsiedlung-wien.at/en/background/the-austrian-werkbund.
[858] Cengizkan, *Modernin Saati*, 72; Ateş, "Robert Oerley'in İstanbul'da Bilinmeyen Bir Yapısı," 24-31.
[859] Tankut, *Bir Başkentin İmarı*, 102-4; Cengizkan, *Modernin Saati*, 73.
[860] BCA, 30-18-1-2, box 10, folder 26, file 5 (Apr. 30, 1930). See also Cengizkan, *Modernin Saati*, 73.
[861] The project was awarded to Holzmeister. Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı*, 253-54; Murat Güvenç and Oğuz Işık, *Emlak Bankası 1926-1998* (Istanbul: Emlak Bankası, 1999), 38-41; Cengizkan, *Modernin Saati*, 73.

(b. 1928-1930), *Ulus Hali* (the Vegetable Market of Ulus) in 1930,[862] and smaller residential projects such as the Urgancı Abidin Bey Apartmanı (b. 1932).[863] He designed buildings elsewhere in Turkey as well, such as a thermal spa hotel in the Tuzla district of Istanbul (b. 1930)[864] and the *Gazi Köşk* built for Mustafa Kemal in the spa town of Yalova outside of Istanbul in 1929 (Figure 3.21).[865] Although on a smaller scale, the façade of the residential structure in Yalova alluded to the serum production facilities and the school building of the Central Hygiene Institute (Figures 3.22-3.23). According to Eve Blau, perhaps due to his background in cabinetmaking, Oerley's mastery was apparent in these small scale projects since in Vienna he had specialized in single-family dwellings and suburban villas for which he designed exquisite interiors as well as furniture, despite having built a few large factories prior to World War I.[866] On the other hand, the social housing units, or the *Gemeindebauten,* Oerley had designed for the Vienna Municipality displayed not only his mastery in planning but also his ingenuity in creating structures that fit into narrow and awkwardly-shaped plots.[867]

The final developments and the concrete steps taken to complete the CHI must have pleased the RF representatives since following his visit to Ankara in November 1928, Strode wrote:

> Much study and care have been devoted to the problem and an effort made to meet the requirements of Turkey during the next twenty-five years. The Government, realizing that it must keep the needs of the future clearly before it, has been rather liberal with the Ministry of Health in its building program. In fact, it has voted a special credit of two million pounds Turkish, to inaugurate the construction of the Institute and the hospital. The diagnostic laboratory, which is a unit of the group, is now completed. The other units comprise the school, vaccine and serum section, rabies section, stable and two dormitories. […] The aid given by the I.H.D. has been very much appreciated, not alone for its financial help but even more for the moral support which it brings, and he (Ismet Paşa) hopes to see, each year, an increasing interest on our part.[868]

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[862] Ateş, "Robert Oerley'in İstanbul'da Bilinmeyen Bir Yapısı," 24-31. Ali Cengizkan suspects that the kiosk in the *Atatürk Orman Çiftliği* (The Forest Farm of Atatürk) in Ankara was probably the work of Oerley as well. See Cengizkan, *Modernin Saati*, 72.

[863] Koç University Library, Sivil Mimari Bellek Ankara 1930-1980 Yapı Envanteri, SMB254

[864] Oerley prepared the plans for the Tuzla Spa Hotel project in 1930. However, the exact dates of construction are unknown. See Can, "Robert Oerley and Tuzla," 6.

[865] Cengizkan, *Modernin Saati*, 72; Ateş, "Robert Oerley'in İstanbul'da Bilinmeyen Bir Yapısı." According to Gönül Tankut, Jansen made attempts to work on the urban planning of Istanbul's Taksim Square as well. However, local Turkish architects were opposed to this idea. See Tankut, *Bir Başkentin İmarı*, 80-82. The website of the Turkish Ministry of Culture and Tourism attributes the Gazi Köşk (today known as Atatürk Köşkü) to Sedad Hakkı Eldem. See "Termal Atatürk Köşkü," accessed Mar. 26, 2024, https://yalova.ktb.gov.tr/TR-131402/termal-ataturk-kosku.html. However, this information is incorrect as Eldem was training abroad as a recently graduated architect in 1929 when this building was built.

[866] Blau, *Architecture of Red Vienna,* 273. For examples of furniture designed Oerley, see "Robert Oerley," Jugendstil Wien, accessed Feb. 17, 2024, https://jugendstilwien.at/architekt/robert-oerley.

[867] Blau, *Architecture of Red Vienna*, 273.

[868] RF records, RG2, 805, box 12, folder 101.

The relationship between the RF and the Turkish Ministry of Health/Hygiene was getting stronger in 1929. For instance, the Turkish Minister of Health/Hygiene Refik (Saydam, 1881-1942) along with Asım (Arar, 1890-1955), the General Secretary of the Red Crescent and the General Manager of Health Affairs of the Health/Hygiene Ministry, went on a 47-day tour of the United States and Canada as guests of the RF between May 21 and July 7, 1929 to visit several public health schools, hospitals, and local health departments.[869] This trip inspired further public health-related projects such as the Etimesgut[870] *İçtimai Hıfzıssıhha Numune Dispanseri* (Model Social Dispensary for Public Health) established in Ankara in 1930-1931 in a purpose-built structure without any assistance from the RF's International Health Division.[871] Later in the 1930s, the RF continued to provide assistance to public health initiatives and medical projects in Turkey, including fellowships for healthcare professionals. It also supported the establishment of public health centers such as the Edirnekapı Health Center in the Fatih district of Istanbul founded in 1934-1935 inside the remodeled sixteenth-century *Semiz Ali Paşa Medresesi* (The Madrassa of Semiz Ali Paşa) designed by Mimar Sinan (Figures 3.24-3.25).[872] This clinic was a joint project between the Ministry of Health/Hygiene and the Istanbul Municipality, and it provided essential medical services in dentistry, ophthalmology, laryngology, gynecology, obstetrics, and pediatrics with a full staff of specialized physicians and nurses.[873] The repurposed fifteen-chamber building also had an X-ray room for diagnostics, as well as a daycare center and a conference room (Figure 3.26).[874]

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[869] RF records, SG 1.1, 805, box 1, folder 12.

[870] Etimesgut ppears as "Etimesut" in RF records. See for example, RF records, RG5, 3_700, box 242, folder 2925.

[871] RF records, field offices, RG2, 711, box 20, folder 1437. By 1940, the dispensary flourished and was led by a former Rockefeller fellowship recipient, Cemal Or (his name appears shortened as Cemal Or in the RF records; his full name was Mehmet Cemalettin Or). The RF provided the Etimesgut Dispensary with financial support in 1937 by allocating US $56,700 for it (RF Annual Report, 1937: 455). About the dispensary in Etimesgut, see also Fatma Acar, *Hemşirelik ve Ziyaretçi Hemşirelik Tekniği* (Istanbul: Kader Basımevi, 1950), 15; Erdem Aydın, *Türkiye'de Sağlık Teşkilatlanması Tarihi* (Ankara: Naturel Kitap Yayıncılık, 2002), 42-3; Derya Çini Şimşek, "Türkiye'de kurulan ilk köy tipi sıhhat merkezi: Etimesgut Numune Sağlık Merkezi," *Sosyal Bilimler Dergisi* 5, no. 30 (Nov. 2018): 139-152; Küçük, *Filantrokapitalizm*, 109. For more information about Mehmet Cemalettin Or, see Mehmet Cemil Uğurlu, "Türkiye'de Öncü Bir Toplum Hekimi Dr. Mehmet Cemalettin Or," *Ankara Üniversitesi Tıp Fakültesi Mecmuası* 47, no. 1 (1994): 3-49.

[872] RF records, field offices, Paris, record group: 6.1 (FA395), series 01, box 36, folder 451; RF records, IHB/IHD records, RG5 (FA115), box 240, folder 2898.

[873] RF records, field offices, Paris, record group: 6.1 (FA395), series 01, box 36, folder 451; RF records, IHB/IHD records, RG5 (FA115), box 240, folder 2898. Aziz Küçük also mentions that the RF supported the Edirnekapı Health Center. However, he relies mainly on George K. Strode's 1930 reports which recommended the foundation of a health center to serve as a model and the RF Annual Report from 1936, which did not provide any specific information. See also Küçük, *Filantrokapitalizm*, 109-10.

[874] RF records, IHB/IHD records, RG5 (FA115), box 240, folder 2898.

In 1929, the RF approved additional funding of US $200,000 for the construction of the three new buildings of the CHI[875] upon the Turkish Ministry of Health/Hygiene's official request.[876] When completed, the CHI complex included five structures: the Bacteriology and Chemistry Building, the Vaccine-Serum Institute, the Public Health School, stables, and residences (Figure 3.27). According to architects Ali Cengizkan and Müge Cengizkan, the residences had a striking resemblance to the Hanusch-Hof residential complex in Vienna, which was designed by Oerley and built between 1923 and 1925.[877]

Oerley was also in charge of the design of the 300-bed Numune Hospital, which was being constructed at the same time as the CHI buildings in 1929.[878] The 1929 RF reports mentioned the significance of this hospital particularly in terms of its future contribution to medical education and described this institution as a "commendable addition to the facilities offered in Angora for the training of medical personnel."[879]

According to the Turkish Ministry of Health's estimates in 1929, the construction and installation costs of the CHI would amount to 4,079,336.55 Turkish Liras, more than half of which (2,400,000 Turkish Liras) the Ministry already had; the plan was to pay the remainder over a three-year period.[880] This meant that the RF's financial contribution of US $200,000 in 1929 covered only about twelve percent of the total cost of construction as per that period's exchange rate. However, the support RF provided in terms of know-how, facilitation in the procurement of supplies and equipment, and provision of experts to lead the CHI had more value than direct funding.

By the spring of 1929, construction work for the serum and vaccine production building and the living quarters of the staff and students of the CHI had begun.[881] These three structures had their roofs installed and work on their interiors was underway by the end of 1929.[882] Despite being incomplete they managed to impress the RF representatives. Ralph K. Collins wrote in his annual report on Turkey at the end of 1929: "All three buildings are considerably larger than the original unit and the ensemble makes a very

[875] RF, IHB/IHD records, RG 5, Series 3-700, box 234, folder 2862.
[876] RF records, projects, SG1.2, box 1, folder 5.
[877] Cengizkan and Cengizkan, *Construction of a New City*, 557.
[878] RF, IHB/IHD records, RG 5, Series 3-700, box 234, folder 2862.
[879] Ibid.
[880] Ibid.
[881] Ibid.
[882] Ibid.

imposing impression even at this early date."[883] Oerley's 1929 site plan featured a T-shaped serum and vaccine production building, an E-shaped School of Hygiene building, an L-shaped dormitory with "Casino-Club" and "apartments" penciled in, an additional block marked as dormitory, a rabies institute, and stables.[884]

Serum and Vaccine Production Building

The Serum and Vaccine Production Building mainly housed laboratories and sterile rooms on its ground floor, first floor, and second floor whereas its basement was where packaging and storage took place (Figure 3.28). The basement had a refrigerated unit besides the rooms for storage and packaging of the vaccines and serums produced in the building.[885] This T-shaped building was to serve as the main building of the CHI and although it appeared in the RF records as a serum and vaccine production facility, its primary purpose was to focus on serum production.[886] This building, along with Jost's vaccine production building, and the School of Hygiene building were situated on the three corners of a courtyard, whereas the housing units and the stables stood behind this trio (Figure 3.27).[887]

School of Hygiene Building

The School of Hygiene Building was the service school where public health professionals working for the Ministry of Health/Hygiene were trained. The formation of the building's unique E-shaped plan had a central octagonal block connecting the two wings of the structure (Figure 3.29). This gave the building's front and rear façades distinctively different looks (Figures 3.22, 3.30).[888] In its basement it had a depot, a centrifuge and refrigerated room, a room to keep the small animals used for experimentation, a coal storage room, an engine room to heat the building, and the sleeping quarters of the orderlies (Figure 3.31).[889]

The main educational areas, i.e. a lecture hall, an amphitheater, and two teaching laboratories, which the students could use for research purposes, were on the ground floor. The library and three rooms designated as museum spaces were also on the ground floor, signaling that the medical museum was still an essential component of medical education

[883] Ibid.
[884] RF, 1/805, Drawer B 4, folder 4.
[885] RF, 1/805, Drawer B 4, folder 3.
[886] Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı*, 209.
[887] Ibid.
[888] Ibid., 176-77.
[889] RF, 1/805, Drawer B 4, folder 4.

in the late 1920s and that these types of collections continued to be relevant for teaching purposes at schools focusing on epidemiology and public health in the 1930s.[890] This floor had office spaces and lavatories as well. Oerley's ground floor plan featured an area marked simply as a "room" without any specification, which might have functioned as a meeting space or recreational area (Figure 3.32).[891]

The first floor of the School of Hygiene Building housed seven laboratories as well as ancillary units for the laboratories, such as spaces reserved for cultures and a laboratory oven (*étuve*). Oerley's unpublished plans from August 1928 displayed that two of the laboratories on this floor would have adjacent terraces on the northwest and southwest corners of the building. However, this idea was later abandoned. The administrative units, such as the office spaces of the director and secretaries of the school, and the accounting department were concentrated in the middle block of the first floor of the E-shaped building. This floor had two units featuring water closets and rooms with sinks which were separated from each other, probably for hygienic reasons. It also had several unidentified rooms surrounding the laboratories, which might have functioned as spaces for socialization, meeting rooms to discuss findings, or storage spaces (Figure 3.33).[892]

Oerley's unpublished drawings for the School of Hygiene building dated August 1928 featured a second floor, which would mainly house areas for recreational activities and socializing such as a dining hall with a coat check area next to it as well as a separate hall with a large west-facing terrace spacious enough to accommodate social functions specifically on warm days adjacent to it. Repeating the abandoned pattern on the first floor, there would be two smaller terraces, but their adjacent units on this floor would be generic rooms which would not be assigned to any specific purpose, rather than specialized laboratory spaces. There would also be areas such as a tearoom, a kitchen, and a cleaning area. Here one of the lavatory units would have three areas marked as

[890] For more information on medical museums and their use in medical education, see Jonathan Reinarz, "The Age of Museum Medicine: The Rise and Fall of the Medical Museum at Birmingham's School of Medicine," *Social History of Medicine* 18, no. 3 (Dec. 2005): 419-437; Samuel JMM Alberti and Elizabeth Hallam (eds), *Medical Museums: Past, Present, Future* (London: The Royal College of Surgeons, 2013); Annmarie Adams, "Designing the Medical Museum," in *Healing Spaces, Modern Architecture, and the Body*, eds. Sarah Schrank and Didem Ekici (London and New York: Routledge, 2017), 171-85; Uğurgül Tunç, "Museums of Medicine and Health: Curating Public Health," *Infectious Diseases and Clinical Microbiology* 5, no. 1 (Mar. 2023): 69-81.
[891] RF, 1/805, Drawer B 4, folder 4.
[892] RF, 1/805, Drawer B 4, folder 3.

"bath," (*bain*) which would probably serve as shower rooms where the students arriving from the first-floor laboratories could wash before joining a social function or supper in the dining hall. While this floor would not feature any laboratory spaces, it would have one lecture hall and an office along with ten miscellaneous rooms, one which would be significantly larger in size than the others and would feature a balcony facing east (Figure 3.34).[893] The second floor was later eliminated and the completed building featured only one balcony on the front façade (Figures 3.22, 3.30, 3.35-3.36).

On the exterior façades of the School of Hygiene building, Oerley made references to the Numune Hospital and the Red Crescent buildings by choosing the same style of iron railings on the front of the building (Figures 3.22, 3.37).[894] On the roof of the building, Oerley repeated the triangular skylights in the housing unit and the main unit (serum production building) he had designed for the CHI (Figure 3.38).[895]

During the opening ceremony of the CHI complex on November 2, 1936, the Minister of Health/Hygiene Refik Saydam thanked the RF for their contributions:

> I have yet another duty as the School of Hygiene of Turkey opens. That is to state that the existence of this institution is closely linked with the Rockefeller Foundation, which is highly regarded around the world, and gratefully remind that besides the US $280,000 the Foundation has donated for the construction and establishment of the Central Institute of Hygiene, they have given us our lovely friend Dr. Collins […] Before concluding my acknowledgments of the Rockefeller Foundation, I have to recall the names of Dr. Russell, Dr. Gunn, Dr. Sawyer, and Dr. Strode who have provided us with moral support as great friends over the years.[896]

As Saydam mentioned, the expertise, fellowships, funds and mediation for the purchase of scientific and technical equipment, and overall "moral support" had significant value for the Ankara government and the Ministry of Health/Hygiene in these early years of the Turkish Republic. While the intellectual life, art, culture, and architecture of the newly founded Turkish Republic was under heavy German and Austrian influence, through RF support, the new generation was becoming increasingly exposed to American influence. This was also apparent in Istanbul where the American Hospital and School of Nursing, which had been founded in 1920, continued to flourish and gain popularity in the early years of the Turkish Republic.

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[893] RF, 1/805, Drawer B 4, folder 4
[894] Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı*, 176.
[895] Ibid.
[896] Sadık Gören and Mustafa Görsel, *Türkiye Cumhuriyeti Sağlık ve Sosyal Yardım Bakanlığı Hıfzıssıhha Okulu 25inci Yıldönümü (2 Kasım 1936-2 Kasım 1961) Tarihçe ve Çalışmaları* (Ankara: Ankara Basım ve Ciltevi, 1961), 59; Küçük, *Filantrokapitalizm*, 107.

3.5 The American Hospital in Istanbul during the Early Republican Era

3.5.1 The German Hospital Building (1923-1928)

After the occupation of Istanbul ended in October 1923, healthcare spaces previously utilized by the British troops became available. The German Hospital's buildings in Taksim, about 1.6 kilometers away from the British Seamen's Hospital in Galata, were among the structures vacated by the evacuation of foreign troops in the city (Figure 3.39). In October 1923 the American Hospital seized this opportunity and signed a five-year lease to move into the German Hospital facilities, which they were able to rent for a reasonable price.[897]

Although the British troops left the German Hospital complex in bad shape and in need of repair, this change of location was much welcome since the new site was considered to be fire proof, unlike the *konak* in Çarşıkapı[898] and it had plenty of space and six up-to-date buildings with a central heating system, electric lights, running hot and cold water in the bathrooms and the operating rooms.[899] The four-story high 200-bed capacity main hospital building had a view of the Bosphorus and the Marmara Sea, and multiple operating rooms, bathrooms, as well as areas for socializing such as sitting rooms, as explained in an ACG report from 1923.[900] Besides the main hospital building, the complex had a Nurses' Home, an isolation building where patients displaying signs of infectious diseases could be quarantined, a diagnostics building which housed laboratories with proper equipment, a separate dispensary used as the outpatient department, a laundry building, and an engine house.[901]

While the German Hospital building complex already had a Nurses' Home with dormitory-style accommodations, complete with bathrooms and sitting rooms for the nurses,[902] the Hospital Committee decided to repurpose a smaller wooden annex for the use of the fifty-four student nurses enrolled in the American Hospital's School of Nursing and the nurses who trained them in the profession (Figures 3.40-3.41).[903] This wooden

[897] Monthly Bulletin No. 21, Constantinople Chapter, American Red Cross, Nov.- Dec. 1923, 1 (Library of Congress, Washington, DC).
[898] Ibid.
[899] "Reports on the Medical Department of the Constantinople Medical College together with Reports on the American Hospital, Constantinople and the School for Nurses", December 15, 1923, New York - ACG Archives box 16A, folder 31, Columbia University RBML; LoC, Monthly Bulletin No. 21, 1.
[900] Columbia RBML, "Reports on the Medical Department."
[901] Ibid.; LoC, Monthly Bulletin No. 21, 1.
[902] Columbia RBML, "Reports on the Medical Department"; LoC, Monthly Bulletin No. 21, 1.
[903] LoC, Monthly Bulletin No. 21, 1-2.

building's basement provided accommodation for servants who worked for the Hospital and the School of Nursing.[904]

Since the new facilities were far larger than the needs of the American Hospital, they used only two floors of the main hospital building to provide services for an average of sixty patients daily.[905] Although the American Hospital in Istanbul was a private institution, the medical staff set aside ten beds to provide services free of charge to patients in need,[906] and they had a good relationship with the local medical community as well as the Turkish Red Crescent. When a group of American expatriate women referred to as "Ladies of the Home Service," Junior Red Cross, and the Public Health Service Committee held a reception to celebrate the completion of the transfer of the American Hospital and School of Nursing to the facilities of the German Hospital in early November of 1923, among the invitees were prominent Turkish physicians, officers of the Turkish Red Crescent, and Turkish officials alongside American expatriates and diplomats in Istanbul.[907]

During this time, much like the ARC and other American organizations active in Turkey, the ABCFM missionaries were keen on maintaining a good relationship with the Muslim population and to ally themselves with the Ankara government and act carefully not to provoke the new regime in Turkey. Moreover, the great population exchange between Greece and Turkey (*mübadele*), which began on January 30, 1923, further cemented the idea that the ABCFM had no option but to proselytize primarily among the Muslim populations to continue their presence in Anatolia. The missionaries also viewed the commitment of the new Turkish Republic to a secular system as an opportunity for their cause and would facilitate their so-called 'Muslim Mission.'[908] The newsletters of the ABCFM's Bible House in Istanbul from the 1920s indicated that the missionaries

[904] Ibid.
[905] Ibid., 2.
[906] Ibid. Since 1922, the American Hospital's School of Nursing additionally had been sending a nursing student once a week to a free clinic in Topkapı initiated by a Turkish physician named Galib Hakkı Bey (n.d.). "The American Hospital and School of Nursing in Istanbul (Constantinople)," ARIT, Istanbul Center Library, Digital Library for International Research Archive, item no. 11299, accessed Feb. 12, 2024, http://www.dlir.org/archive/items/show/11299; "The American Hospital and School of Nursing in Istanbul (Constantinople)," Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School (HDS) Library, Harvard University.
[907] LoC, Monthly Bulletin No. 21, 2.
[908] *Report on Work for Moslems*, 1; Yücel, "Missionary Society at the Crossroads," 60.

were becoming increasingly knowledgeable about the local customs, traditions, and Islam in general, and learning to speak Turkish.[909]

Even though the ARC was in charge of its School of Nursing, the American Hospital maintained close ties with the ABCFM and Luther R. Fowle (1886-1973) of the ABCFM remained on the Board of Managers as the Treasurer. Moreover, in June 1927 Lorrin Andrews Shepard (1890-1983), the son of Fred D. A. Shepard (1855-1915) of the ABCFM Hospital in Antep, was appointed medical director of the American Hospital in Istanbul. Less than a year after his appointment, following a meeting at the American Embassy on February 22, 1928, the Executive Committee ordered the American Hospital and School of Nursing to be shut down unless they could raise a sufficient amount of funding until March 1, 1928.[910] Also during this time, the American community in Turkey was preoccupied with the closure of the American Girls School in Bursa on January 31, 1928 following the alleged conversion of four Muslim students to Protestantism under the influence of their American teachers. Lyman MacCallum (n.d.) of the ABCFM wrote in his newsletters dated February 6 and February 14, 1928 about the distress caused by this event and the trials that followed, and later reported that the Turkish authorities put other American institutions under investigation as well.[911] These current events might have contributed to the harsh attitude of the Committee towards the American Hospital's administration, but thanks to the fundraising efforts of the ABCFM, and Luther R. Fowle in particular, the Hospital and its School of Nursing remained operational.[912] However, despite raising a total of US $15,735[913] in a matter of one week and surviving a financial crisis, the troubles of the American Hospital were not over yet since its lease on the

[909] See for example the Bible House newsletter dated March 20, 1928, which began with some remarks about the *Kadir Gecesi* (the Night of Power), i.e. the most important night of Ramadan, and announced the closure of the American schools during the Muslim holidays. In his newsletters, Charles T. Riggs (1871-1953) also had a critical tone towards foreigners who did not make an effort to learn the local customs or understand Turkey. Riggs also criticized publications which wrote misinformed news stories about Turkey, and he followed the latest developments in Ankara closely. See for example, Charles T. Riggs, "Dear Friends: Volume I: Number 165-216," (Bible House newsletters Mar. 20, 1928, Oct. 2, 1928, Oct. 16, 1928, and Nov. 13, 1928), ARIT, Istanbul Center Library.

[910] Lorrin A. Shepard, "The American Hospital of Constantinople: A Brief Report for the Year 1928," HDS Library, BMS 1136, 9; "The American Hospital of Constantinople," ARIT, Istanbul Center Library, Digital Library for International Research Archive, item no. 11256, accessed Feb. 12, 2024, http://www.dlir.org/archive/items/show/11256.

[911] F. Lyman MacCallum, "Dear Friends: Volume I: Number 165-216," (Bible House newsletters, Feb. 6, 14, 21, 1928), ARIT, Istanbul Center Library. For more information on the Bursa affair, see İdris Yücel, "Yabancı Okullar ve Kültürel Milliyetçilik: Bursa Amerikan Kız Koleji Tanassur Hadisesi (1928)", *Belleten* 80, no. 287 (2016): 307-28.

[912] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople."

[913] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople." US $5,000 of this amount was appropriated by the ABCFM and the rest was raised thanks to Fowle's campaign.

German Hospital complex was about to expire in September 1928, and adamant to reopen the German Hospital, the owners denied all requests to extend the lease.[914]

3.5.2 An Apartment Building on Teşvikiye Avenue (1928-1939)

When their lease at the German Hospital complex ended in 1928, the American Hospital and School of Nursing relocated to their new address at 91 Teşvikiye Avenue in the Nişantaşı neighborhood of Istanbul,[915] an area Lorrin Shepard described as "an attractive residential section".[916] On October 25, 1928, the transfer of the American Hospital and School of Nursing to the new premises was complete without any interruptions to hospital services (Figures 3.42-3.43).[917] Repurposing this five-story residential building as a hospital was rather costly in terms of time and money invested. However American businesses in Turkey were supportive of this move. For instance, the Standard Oil Company provided its trucks for the relocation, and J. P. Morgan personally provided additional funds.[918]

Lorrin Shepard regarded the new building as an improvement due to its easily manageable size: it was easier to clean, heat and cheaper to supply with water and electricity.[919] However, the smaller size made life more difficult for the nurses, cooks, and administrative staff. Twenty-seven student and graduate nurses had to share an apartment in a nearby building.[920] Despite the savings on water and electricity, in reality the new building ended up costing more since its rent was three-and-a-half times higher than the rent for the buildings of the German Hospital, which were three times larger. [921]

The new premises could accommodate sixty nine patients with eleven private rooms, twelve beds in semi-private rooms, twenty-four beds in adult wards, eight beds in

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[914] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople."
[915] Charles T. Riggs, "Dear Friends: Volume I: Number 165-216," (Bible House newsletter dated Nov. 6, 1928); ARIT, Istanbul Center Library; ARIT, Admiral Bristol Hospital 1920-1959 (ARIT Library, 362.11 ARC).
[916] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople."
[917] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople."
[918] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople."
[919] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople." Charles T. Riggs also mentioned the ease of heating this building in his newsletter dated Nov. 6, 1928. Charles T. Riggs, "Dear Friends: Volume I: Number 165-216," (Bible House newsletter Nov. 6, 1928), ARIT, Istanbul Center Library.
[920] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople"; Winkler and Rountree, *Amerikan Hastanesi*, 29. See also "Amiral Bristol Hemşirelik Okulu," Vehbi Koç Vakfı (VKV) Ansiklopedisi, accessed Jan. 29, 2024, https://ansiklopedi.vkv.org.tr/Kategoriler/Kurumlar/Vehbi-Koc-Kurumlari-Vakfi/Amiral-Bristol-Hemsirelik-Okulu.
[921] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople."

children's wards, and a nursery suitable for fourteen infants.[922] It was in this building that the AWH of New York, represented by Caris E. Mills (n.d.) in Turkey, started providing funds to support the cost of six beds to offer free treatment for children from poor households.[923] In his report for the year 1928, Lorrin Shepard noted that the new building was only to serve as a temporary solution and that the Hospital and Nursing School's two urgent needs were a purpose-built building of their own and a permanent organization in the United States to supply funds to meet the annual deficit of the Hospital.[924] The fundraising material from the early 1930s did not sound as optimistic about the benefits of operating a hospital in a repurposed apartment building:

> The hospital at present is inadequately housed. The cramped, rented quarters seriously decrease its usefulness. Noise is so easily transmitted from one part of the building to another that one patient can disturb everyone in the building. The entire out-patient work is crowded into one room intended originally for a dining room. The number of private rooms is insufficient to meet the demand. The wards are much too crowded. The Superintendent's office, the office of the School of Nursing, and all of other administrative offices are compelled to occupy the same room. To keep up nursing standards in a building with so little space is impossible; the effort to do so places tremendous strain upon the entire staff. A new building is absolutely essential to the continued existence of the institution.[925]

At that point, there were already new plans for a three-story, sixty to seventy-bed capacity Beaux-Arts-style building prepared by the Boston-based architectural firm of Kendall and Taylor. Lorrin Shepard referred to this proposal in his annual report for the term between July 1927 and June 1928:

> Thanks to the interest taken in our problem by the well-known Hospital architects, Kendall, Taylor, and Co. of Boston, we already have in hand the preliminary plans for a building which would exactly meet our needs. It would accommodate 70 patients and the entire nursing staff, including pupils. According to preliminary estimates made by a reliable local contractor, and a study of land prices made by the Managers, the building, with land enough for ample grounds around it, will cost between US $65,000 and US $75,000. Thanks to the generosity of Mr. J. P. Morgan, who became interested in the Hospital through Mr. Grew, as well as that of Mr. Grew himself and one other friend, we already have over US $8,000 in a building fund.[926]

Since the move from the German Hospital depleted the funds donated by J. P. Morgan (1837-1913) and Joseph Grew (1880-1965), then the American Ambassador to Turkey, the American Hospital had to launch a new fundraising campaign from scratch

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[922] Charles T. Riggs, "Dear Friends: Volume I: Number 165-216," (Bible House newsletter Nov. 6, 1928); ARIT, Istanbul Center Library; ARIT, Admiral Bristol Hospital 1920-1959 (ARIT Library, 362.11 ARC).
[923] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople"; Lovejoy, *Women Physicians and Surgeons*, 141.
[924] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople."
[925] ARIT, "American Hospital and School of Nursing in Istanbul (Constantinople)"; HDS, "American Hospital and School of Nursing in Istanbul (Constantinople)."
[926] Lorrin A. Shepard, "Annual Report: American Hospital of Constantinople, July 1, 1927-June 30, 1928," Harvard Divinity School Library, BMS 1136, 9.

which included the drawings of the Kendall and Taylor proposal as promotional material.[927] Fundraising pamphlets from the early 1930s featured a drawing of the proposed building and highlighted the drawings of the Kendall and Taylor proposal to attract potential donors in the United States (Figure 3.44).[928] Despite all efforts, the Wall Street crash in 1929 and the period of Great Depression that followed affected the flow of donations from the United States. Although the initial lease on the apartment building on Teşvikiye Avenue, also known as the Bedrettin Bey *Apartmanı*, was for a two-year period,[929] the American Hospital and School of Nursing stayed at this location for over a decade.

3.5.3 Kendall and Taylor Proposal (c. 1928)

Although the signature on the drawings read "Kendall-Taylor Architects – Boston," Henry Hubbard Kendall (1855-1943) was the senior partner responsible for the project since Bertrand Eugene Taylor (1856-1909) had passed away in 1909.[930] The late partner Taylor had contributed to the literature available on hospital architecture by conducting a survey of small hospitals across the United States in 1903 which catalogued design details and by publishing in 1903 and 1904 a series of articles titled "Hospital Planning" in *The Brickbuilder*, an American magazine on architecture and construction.[931] One of the previous partners of the firm was the renowned hospital architect Edward Fletcher Stevens (1860-1946), the author of *The American Hospital of the Twentieth Century* first published in 1918.[932] Kendall, who served as the President of the American Institute of

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[927] During the move from the German Hospital to the apartment building on Teşvikiye Avenue, the American Hospital had to use the U.S. $8,000 to cover their immediate expenses. To secure the building on Teşvikiye Avenue, they also had to pay a whole year's rent in advance. See ARIT, "American Hospital and School of Nursing in Istanbul (Constantinople)"; HDS, "American Hospital and School of Nursing in Istanbul (Constantinople)." See also the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."

[928] ARIT, "American Hospital and School of Nursing in Istanbul (Constantinople)"; ARIT, Admiral Bristol Hospital 1920-1959 (362.11 ARC); Harvard Divinity School Library, Pamphlets, Folio RA 990.T8, Z91, Admiral Bristol Hospital, Istanbul; See also Winkler and Rountree, *Amerikan Hastanesi*, 33-49. Although the annual report for 1928 also mentioned that there were plans ready at hand, it did not feature any drawings. See Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople.".

[929] Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople."

[930] Catherine W. Bishir, "Taylor, Bertrand E.," *North Carolina Architects and Builders: A Biographical Dictionary* (The North Caroline State University Libraries, 2015), accessed Jan. 29, 2024, https://ncarchitects.lib.ncsu.edu/people/P000569.

[931] After 1916, *The Brickbuilder* was known as the *Architectural Forum*. Bertrand E. Taylor, "Hospital Planning," *The Brickbuilder* (1903): 250-254; *The Brickbuilder* (1904): 24-33, 46-53, 68-73, 90-99, 112-115, 134-138. See also Kisacky, *Rise of the Modern Hospital*, 173-74.

[932] Stevens, *American Hospital* (1921). Partnerships with Stevens included the firms of Kendall & Stevens (1890-1895); Kendall, Taylor, and Stevens (1895-1909); and Kendall, Stevens, and Lee (1909-1912) with Frederick Clare Lee as the junior partner. For more information see, "Edward F. Stevens, Noted Architect, 85," (obituary) *New York Times*, Mar. 1, 1946, 22; Adams, "Modernism and Medicine," 42; "Stevens &

Architects (AIA) between 1920 and 1922,[933] might have consulted with both Taylor's and Stevens' work while preparing the new plans for the American Hospital in Istanbul in 1928.

The Boston-based architectural firm of Kendall and Taylor had designed several healthcare structures in the greater Boston area such as the City Hospital of Boston, the Corey Hill Hospital, Massachusetts Homeopathic Hospital, the State Hospital for Epileptics, and the Boston Hospital Relief Station in Haymarket Square, as well as hospitals outside of Massachusetts including the New Hampshire Hospital for the Insane at Westboro and the celebrated new facilities of the Watts Hospital (known as Watts Hospital II) in Durham, North Carolina circa 1908.[934]

The floor plans that Kendall and Taylor proposed featured four wards for adults with a total of 28-bed capacity, a 10-cot children's ward, two maternity wards, and 31 beds in private single-occupancy, and semi-private double-occupancy rooms available for wealthier patients who were willing to pay higher prices for more comfort and privacy (Figures 3.45-3.47).[935] While the reduction in the number of beds available in shared wards reflected the planning trends of the time which responded to the increasing number of upper middle and upper class patients, the proposal did not feature a separate Nurses' Home, which Stevens regarded as a requirement for any major hospital.[936] Although a pamphlet from circa 1930 stated that an entire floor of the new building was to be dedicated for the use of the American Hospital's School of Nursing,[937] the floor plans included in fundraising pamphlets distributed in the early 1930s only featured some areas scattered throughout the hospital for nurse training purposes such as two classrooms and a shared staff and nurses' dining room on the ground floor, an office space on the first floor, and a nurses' dressing room on the second floor (Figures 3.45-3.48).[938] While the plans did not incorporate any sleeping areas for the nurses, there were several dedicated

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Lee," McGill Digital Library, accessed Feb. 12, 2024, https://digital.library.mcgill.ca/hospitals/biotxt/bio06.htm.

[933] R. Randall Vosbeck, Tony P. Wrenn, and Andrew Brodie Smith, *A Legacy of Leadership: The Presidents of the American Institute of Architects, 1857-2007* (Washington, DC: The American Institute of Architects, 2006), 55.

[934] Ibid.; Catherine W. Bishir, "Kendall and Taylor," *North Carolina Architects and Builders: A Biographical Dictionary* (The North Caroline State University Libraries, 2015), accessed Jan. 29, 2024, https://ncarchitects.lib.ncsu.edu/people/P000504.

[935] ARIT, Admiral Bristol Hospital 1920-1959 (362.11 ARC)

[936] Stevens, *American Hospital* (1921), 276-92.

[937] ARIT, "American Hospital and School of Nursing in Istanbul (Constantinople)"; HDS, "American Hospital and School of Nursing in Istanbul (Constantinople)."

[938] ARIT, Admiral Bristol Hospital 1920-1959 (362.11 ARC)

rest and relaxation spaces for physicians such as two bedrooms and a library/sitting room on the first floor (Figure 3.45).[939] It is therefore likely that the nurses were expected to be accommodated in a building separated from the hospital itself.

One of the pamphlets written between 1928 and 1931 introduced an additional campaign for the Florence Nightingale Fund which aimed to raise US $150,000 to provide the School of Nursing with "a nurses' residence and scholarships for twenty student nurses."[940] Such fundraising initiatives presented the project as a 'memorial hospital' and an instrument serving American objectives in the Middle East, and posited that the contributors would be paying "tribute in an appropriate manner to this host of silent witnesses of American idealism."[941]

3.5.4 Raising Funds for a New Building

Although the United States suffered from the Great Depression, the American expatriates residing in Istanbul were able to contribute more than US $50,000 for the purpose-built American Hospital project by 1930; however, the new building's estimated cost including equipment was US $200,000. The American Hospital aimed to raise an additional US $300,000 for its endowment.[942] In 1930, a statement by the American community in Istanbul announced the approval of a series of measures to ensure that they could raise the necessary funds needed for a new hospital building. These included the formation of a Board of Trustees in the United States which could pledge US $15,000 per annum between 1930 and 1935 to cover the hospital's annual operating deficit, an amount regularly covered by the American community in Istanbul since they regarded the hospital as a means of health insurance in the city where they were residing.[943] The statement also mentioned that US $50,000 could suffice to start the construction of a new building and that its completion would require US $75,000.[944] Unlike the previous grand plans for the American Hospital in Istanbul, the Kendall and Taylor proposal featured a modest hospital of less than 100-bed capacity. Since Kendall's late partner, Taylor had famously

[939] Ibid.
[940] Ibid.
[941] Ibid. See also the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[942] ARIT, "American Hospital and School of Nursing in Istanbul (Constantinople)"; HDS, "The American Hospital and School of Nursing in Istanbul (Constantinople)."
[943] "A Statement by the American Community in Constantinople," Admiral Bristol Hospital (Istanbul, Turkey), Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University.
[944] Ibid.

surveyed small American hospitals in 1903, the Board of Managers might have preferred the Boston-based firm with the hopes to maximize their available resources.

On January 24, 1930 the American Hospital's Board of Managers presented a statement regarding their relationship with the Turkish government, mentioning that the Minister of Health/Hygiene Refik visited the American Hospital in Istanbul in the autumn of 1929, following his trip to the United States and Canada, during which Lorrin Shepard and a member of the Board of Managers discussed the prospect of building a new hospital.[945] Refik's (Saydam) favorable view was indeed a step forward in the project since the permission of the government was required to acquire land and erect new hospital buildings. This motivated the Board of Managers to finalize the purchase of a 6,400 square-meter plot of land in the Nişantaşı district, not too far from the American Hospital's repurposed apartment building on Teşvikiye Avenue, for a sum of US $6,000 on October 11, 1930.[946]

By the summer of 1931, Luther R. Fowle persuaded William Bingham II, who had donated generously in 1919 for the ACG Medical School project more than a decade earlier, to provide a US $300,000 endowment for the American Hospital.[947] On June 17, 1931, about a week after Lorrin Shepard's announcement of this gift, the Turkish government recognized the American Hospital as an entity with the right to own land and construct buildings.[948]

3.5.5 A Purpose-built Hospital in Nişantaşı

While the Board of Managers made significant progress with the hospital project by the summer of 1931, they abandoned the Kendall and Taylor plans which proposed a building with Neoclassical exteriors. This decision might have been influenced by the Ankara government's selection of modernist architecture for the new construction projects in Ankara. What Turkish newspapers of the time referred to as the "architectural *dava*"[949] of the Republic had produced modernist structures all over Turkey since the mid-1920s.

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[945] "Relations with the Turkish Government, January 1930," Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University.
[946] Winkler and Rountree, *Amerikan Hastanesi*, 54.
[947] Ibid.
[948] The authorization certificate numbered 11.311 featured the signatures of Mustafa Kemal (President), İsmet (Prime Minister), Tevfik Rüştü (Foreign Affairs Minister), and Refik (Minister of Health/Hygiene). The purchase of the new site was also announced in the *New York Times*. See "American Hospital Gets Istanbul Site," *New York Times*, Oct. 25, 1931, 56. See also Winkler and Rountree, *Amerikan Hastanesi*, 55.
[949] "Dava" meaning righteous cause/struggle. See for example *Hakimiyet-i Milliye*, July 4, 1927.

This was in line with the changing face of architecture in Europe and North America, or the so-called Western world, which the new Turkey had to be a part of following the vision of its founders.[950]

By the early 1930s, the unadorned modernist architectural vocabulary of Alvar Aalto's (1898-1976) Paimio Sanatorium built in Finland in 1929 was becoming increasingly common across Europe and the United States. As Beatriz Colomina writes, buildings themselves started to resemble "medical images," or X-rays, "with transparent glass walls revealing the inner secrets of the structures."[951] The lack of ornamentation in modernist architecture was also a result of hygienist views that regarded decoration as hosts harboring dirt, dust, and even germs.[952] In light of changing trends in architecture, the Board of Managers commissioned an American architect named W. Stuart Thompson (1890-1968) in 1934 who produced a new set of plans for a modernist hospital building to be erected on the plot that the American Hospital owned in Nişantaşı since 1930.

W. Stuart Thompson (1890-1968)[953]

Thompson was a graduate of Columbia University in New York City and early on in his career, he worked as a fellow at the American School of Classical Studies at Athens (ASCSA) between 1912 and 1915.[954] Throughout his career, he maintained close ties to Greece[955] and although the building he later designed for Istanbul had a modernist look, some of Thompson's work in Greece, particularly in the 1920s, included Beaux-Arts inspired Neoclassical elements, not too different from the earlier proposals for the American Hospital. For instance, the Gennadius Library of the ASCSA,[956] which he had

[950] Bozdoğan, *Modernism and Nation Building*; Kezer, *Building Modern Turkey*; Cengizkan and Cengizkan, *Construction of a New City*.
[951] Beatriz Colomina, *X-Ray Architecture* (Zürich: Lars Müller Publishers, 2019), 16. See also, Willis, Goad, and Logan, *Architecture and the Modern Hospital*, 18.
[952] Paul Overy, *Light, Air and Openness: Modern Architecture between the Wars* (London: Thames & Hudson, 2008), 68-69.
[953] For information on W. Stuart Thompson see also the forthcoming publication Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[954] Kostis Kourelis, "Corinth Architects 06: W. Stuart Thompson," *Objects-Building-Situations: Musings on Architecture and Archaeology by Kostis Kourelis*, March 26, 2013, accessed Mar. 14, 2023, http://kourelis.blogspot.com/2013/03/corinth-architects-06-w-stuart-thompson.html.
[955] Thompson was also commissioned to work on projects for the Greek diaspora in the United States, such as the Greek Orthodox Church of the Archangels in Stamford, Connecticut, which he modelled after the Holy Apostles in the Agora in Athens. Greek Orthodox Church of The Archangels. Dedication, June 14, 1959. Stamford, Connecticut: Greek Orthodox Church of The Archangels; 1959. See also Jim Golding, "Connecticut Church Emphasizes Spiritual Renewal and Christian Education," accessed Apr. 1, 2024, https://www.goarch.org/-/connecticut-church-emphasizes-spiritual-renewal-and-christian-education.
[956] This project was financed by the Carnegie Corporation. "Istanbul Hospital to Get New Home," *New York Times*, July 17, 1938, 9.

co-designed with fellow American architect John Vredenburgh Van Pelt (1874-1962), and the ASCSA's residential Loring Hall[957] had Neoclassical touches reminiscent of the earlier Neoclassical proposals for the American Hospital in Istanbul by Hamlin and Kendall and Taylor.

Thompson's later work, such as the Mytilene Museum in Lesvos, Greece, designed circa 1932 and completed in 1934, displayed influences of unadorned international modernist architecture (Figure 3.49). However, he simultaneously designed another museum project in Greece, namely the Archaeological Museum of Ancient Corinth also completed in 1934, and modelled after a Byzantine monastery (Figure 3.50).[958] As architectural historian Kostis Kourelis notes, Thompson's work was "interestingly poised between modernism and historicism."[959] It was his modernist work, however, which received recognition in the United States, particularly in Manhattan, New York, where he was a partner of the architectural firm of Thompson and Churchill.[960] The work of Thompson and Churchill was included in the Museum of Modern Art (MoMA)'s landmark architectural exhibition "Modern Architecture: International Exhibition" between February 9 and March 23, 1932 alongside the most celebrated architects of that time such as Mies van der Rohe (1886-1969), Philip Johnson (1906-2005), and Le Corbusier (1887-1965).[961] Thompson's successful partnership with Henry Stern Churchill (1893-1962) produced many urban structures in Manhattan including a six-story Bauhaus-inspired building on Lexington Avenue and 57th Street built in 1931, which MoMA showcased in the 1932 exhibition (Figure 3.51).[962] Thompson's partner Churchill,

[957] Natalia Vogeikoff-Brogan, ""The Best Laid Plans… Often Go Awry": A Tale of Two Museums," From the Archivist's Notebook: Essays Inspired by Archival Research in Athens Greece, Feb. 1, 2016, accessed Mar. 14, 2023, https://nataliavogeikoff.com/2016/02/01/the-best-laid-plans-often-go-awry-a-tale-of-two-museums/#more-2056.

[958] "W. Stuart Thompson, Architect, 78, Dead; Did Work in Greece," (obituary) *New York Times*, Apr. 3, 1968, 52. For more information on these two museum projects Thompson undertook in Greece, see Vogeikoff-Brogan, ""Best Laid Plans"." According to Kostis Kourelis, Thompson also prepared an unrealized plan for the Benaki Museum. See Kourelis, "Corinth Architects 06."

[959] Kourelis, "Corinth Architects 06."

[960] Ibid. Thompson had partnerships with other architects as well, such as John Travlos and Phelps Barnum.

[961] An office building on Lexington Avenue and 57th Street in New York (b. 1931) which Thompson and Churchill designed was showcased at the exhibition. For the exhibition catalogue, see "Modern Architecture: International Exhibition (Feb. 9-Mar. 23, 1932, MoMA)," accessed Mar. 19, 2023, https://www.moma.org/calendar/exhibitions/2044. In 1939, The work of Thompson and Churchill was included in another iconic MoMA exhibition celebrating architecture titled "Three Centuries of American Architecture," which featured the work of renowned architects of the twentieth century such as Frank Lloyd Wright and Walter Gropius. For more information, see "Three Centuries of American Architecture (Feb. 15-Mar. 15, 1939, MoMA)," accessed Mar. 19, 2023, https://www.moma.org/calendar/exhibitions/2093.

[962] Christopher Gray, "A Ghost with an Impressive Résumé," *New York Times*, Jun. 9, 2013, 9. The building was torn down in 1987, ironically to build a high rise with some Neoclassical elements in its place. The firm's other work in the state of New York included the academic buildings of Finch College in Manhattan,

was not only an architect but also a renowned city planner who authored *The City is the People* and *Germantown: A Planning Study*, and taught at Columbia University.[963] Churchill was the principal architect behind several of the firm's high profile projects in New York such as the Lowell Hotel.[964] When many costly construction projects in Manhattan, including the 40-story Battery Tower[965] of Thompson and Churchill which began in 1929, were abandoned, Thompson focused on his work in the Mediterranean.[966]

In 1930, before taking on the aforementioned museum projects in Greece, Thompson undertook a project in Turkey, for a 40-bed children's hospital in memory of the Ottoman-born American tobacco merchant Morris Şinasi (1855-1928, Morris Schinasi in American sources), built in his hometown of Manisa, near Izmir, as requested in his will.[967] Laurette Ben Rubi Şinasi (1885-1958), who commissioned the Morris Şinasi Memorial Hospital (Figure 3.52) in her late husband's name, was among the sponsors of the American Hospital in Istanbul as well,[968] and this connection might have played a significant role in Thompson's appointment to design the new facilities of the American Hospital in Istanbul.

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the State Tower Building in Syracuse, the Sterling-Winthrop research plant in Rensselaer. They also worked on projects elsewhere in the United States, such as the Connecticut State Airport in Stamford and the Crucible Steel Building in Chicago. See also, Christopher Gray, "Ghost Buildings of 1929," *New York Times*, Apr. 23, 2009, accessed Mar. 14, 2023, https://www.nytimes.com/2009/04/26/realestate/26scapes.html.

[963] Henry S. Churchill, *The City is the People* (New York: Reynal & Hitchcock, 1945); Henry S. Churchill, *Germantown: A Planning Study* (The Philadelphia City Planning Commission, 1956). For the papers of Churchill see Henry S. Churchill papers, 1929-1962, Collection number: 2347, Division of Rare and Manuscript Collections, Cornell University.

[964] "The Lowell, New York," accessed Mar. 14, 2023, https://www.frette.com/en_US/featured-hotel?fid=us-new-york-the-lowell-new-york.

[965] "Housing Unit Named Battery Tower," *New York Times*, May 25, 1929, 13; Gray, "Ghost Buildings of 1929."

[966] Besides the financial downturn in the United States, there might have been several motivations which attracted Thompson to Greece. For instance, his wife Gladys Slade was teaching archaeology at Swarthmore College in the United States, which probably had an influence on his intellectual environment and informed his interest in taking on projects in Greece and Turkey. According to Kourelis, Thompson also took advantage of the availability of cheap labor in Turkey and hired Turkish workers for projects in Greece. For more information, see Kourelis, "Corinth Architects 06."

[967] "Starts Turkish Hospital," *New York Times*, May 20, 1930, 3; Naim Güleryüz, "Morris Schinasi and the Manisa Children's Hospital," *Turk of America Magazine*, Jul. 13, 2008, accessed May 23, 2024, https://www.tpfund.org/2011/02/25/an-inspiring-philanthropist-morris-schinasi/; Kourelis, "Corinth Architects 06"; Devin E. Naar, ""Turkinos" beyond the Empire: Ottoman Jews in America, 1893 to 1924," *The Jewish Quarterly Review* 105, no. 2 (Spring 2015): 174-205; Melike Karaosmanoğlu, "Manisa'dan New York'a Moris Şinasi'nin Hikayesi," *Avlaremoz*, Dec. 13, 2022, accessed Mar. 14, 2023, https://www.avlaremoz.com/2022/12/13/manisadan-new-yorka-moris-sinasinin-hikayesi-melike-karaosmanoglu/.

[968] ARIT, Admiral Bristol Hospital 1920-1959 (362.11 ARC)

Known in the United States as a country house architect for wealthy clients,[969] Thompson was well-connected and able to use his connections to find work. The inclusion of his name in the 1932 MoMA exhibition, particularly with a Bauhaus-inspired building reminiscent of the modernist structures German-speaking architects were constructing in Turkey at the time,[970] might have been among the factors that made him an ideal candidate who could deliver a modernist structure in line with the architectural vision of the founders of the Republic of Turkey and the many new modernist structures appearing in Istanbul in the 1920s and 1930s. This way, the American Hospital's Board of Managers would avoid any potential conflicts or criticism had they pursued the project with the earlier Kendall and Taylor proposal, which they had already presented and discussed with the Turkish Minister of Health/Hygiene Refik during his visit to the American Hospital in Istanbul in 1929.[971] In other words, concerning his commissioning for this project, Thompson was the right American architect present at the right place, at the right time, doing the right thing. As Lorrin Shepard emphasized after the completion of the building, Thompson's plans complied with government regulations of the time and secured the future of the American Hospital and its School of Nursing in Istanbul:

> The completion of the new building marks a turning point in the history of the hospital and school of nursing. Up to this point the future of the institution was never entirely secure, because without a building which fully complied with the government rules and regulations regarding hospitals, there was always the danger that the work might be interrupted. With a fine new building of its own, which complies in every respect with these regulations, the hospital can look forward to the future with confidence.[972]

American Hospital in Istanbul Designed by W. Stuart Thompson (b. 1938-1939)

The fundraising material of the American Hospital in Istanbul from the year 1935 distributed to potential American donors during Lorrin Shepard's visit to the United States featured Thompson's floor plans and drawings from June and July of 1934 (Figure

[969] Thompson's wide repertoire also included restoration and reconstruction work such as the reconstruction of the Stoa of Attalos in Athens and the 1940 restoration of Thomas Jefferson's Poplar Forest home, built in 1806 originally. "W. Stuart Thompson, Architect, 78, Dead," (obituary); Anne Carter Lee, "Poplar Forest," *SAH Archipedia*, eds. Gabrielle Esperdy and Karen Kingsley, Charlottesville: UVaP, 2012, accessed Aug. 10, 2023, http://sah-archipedia.org/buildings/VA-02-BD26. See also Anne Carter Lee, *Buildings of Virginia: Valley, Piedmont, Southside, and Southwest* (Charlottesville and London: University of Virginia Press, 2015).

[970] An announcement about the 1932 MoMA exhibition, translated from a news story published in the German *Deutsche Bauzeitung* in 1931, also appeared in *Mimar* in January 1932. "New York'ta Beynelmilel Mimari Sergi," *Mimar* 13 (Jan. 1932): 32.

[971] HDS, "Relations with the Turkish Government."

[972] Lorrin A. Shepard, "Annual Report: The American Hospital of Istanbul, 1939," Harvard Divinity School Library, BMS 1136, 9.

3.53).[973] This proposal was for a 61-bed capacity three-story hospital and featured twenty bassinets or baskets for newborns. In the planning of the new hospital building, Richard N. Pierson (n.d.), a member of the board of directors in New York, was involved as an advisor to ensure that the new structure would follow the latest trends in the United States.[974] Between 1930 and 1938, among the corporate donors to the fund to construct a new building for the American Hospital in Istanbul were the Socony-Vacuum Oil Company and several tobacco companies including Liggett & Myers, American Tobacco, and R.J. Reynolds (Appendix A).

The total patient capacity in Thompson's plans decreased when compared to the Kendall and Taylor proposal which had planned for wards of up to eight patients. The shared wards in Thompson's plans did not include more than four beds signaling that the American Hospital in Istanbul was now ready to cater to patients who were willing to pay a little extra for increased comfort and privacy. Unlike the simple single-occupancy patient rooms in the Kendall and Taylor floor plans, which did not offer any additional features besides a private sleeping area, the 1934 proposal featured a total of twenty-three single occupancy rooms with varying sizes and amenities. Some of these private rooms featured roomy closets and ensuite water closet and bathroom units; some even enjoyed direct access to the balconies on the west and east corners of the building.

The T-shaped building was situated on the Nişantaşı plot in a very similar manner to Kendall and Taylor's proposal from 1928. While the surgical department occupied the northeast section of the second floor in the Kendall and Taylor plans, Thompson's proposal placed the surgical department also on the northeast, but now on the third floor of the building in an area which Kendall and Taylor had designated as a terrace in their proposal. While only the third floor of the 1928 proposal featured open spaces in the form of three terraces, Thompson provided the building with a total of five rectangular balconies, three on the second floor and two on the third floor.

The first floor was technically the ground floor of the building and the northeast section of the first floor functioned as the hospital's outpatient department with four treatment rooms, two therapy rooms, and an isolation room as well as diagnostic units such as the radiographic department. The hospital's main entrance was on the south-

[973] "The American Hospital of Istanbul: A Project Needing Completion" Folio RA 990.T8, Z91, Harvard Divinity School Library; Admiral Bristol Hospital 1920-1959, ARIT library, 362.11 ARC.
[974] "Istanbul Hospital to Get New Home," 9.

facing side of the building, and adjacent to it was a waiting alcove and a separate waiting room next to the library which featured an archive of patient files (Figure 3.54). Two examination rooms on this floor each had ensuite water closets, a feature that became increasingly available in other sections as well. One of the most significant features in this building signaling the changing nature of the American Hospital in Istanbul was the addition of two rooms reserved for the interns, meaning that this institution was now ready to offer medical training. There was direct access from one intern room to the other, but only one of these rooms had a water closet. Next to the intern rooms was a consultation room and the laboratory. While the interns and the medical examination units were on the west side of the first floor, the east section of the floor was reserved for the School of Nursing featuring three classrooms, three offices, a dining hall, and a diet kitchen. While the American Hospital and its School of Nursing were still at the Teşvikiye Avenue location, the nurses and nursing students had to relocate to a wooden house near the Nişantaşı plot owned by the American Hospital.[975] Since Thompson's proposal did not incorporate any living and sleeping quarters for the School of Nursing, students and senior nurses had to use the same dilapidated building even after a conflagration in 1939;[976] that building continued to function as the nurses' residence well into the 1940s despite being a serious fire hazard, wasteful of fuel, and overall inadequate as per Lorrin Shepard's reports.[977]

The building's entire second floor and the east and west sections of the third floor were reserved for private and semi-private dual occupancy rooms as well as four shared wards featuring four beds each (Figure 3.55). This floor also had a diet kitchen, two utility rooms, and a linen closet. The delivery room was on the west side of this floor and both the west and east sections were marked as the 'Maternity Ward' on Thompson's floor plans and offered accommodations for twenty patients in six private rooms, three dual

[975] The building is referred to as the 'Nurses' Residence' in Lorrin A. Shepard's reports in years preceding the construction of the hospital building designed by W. Stuart Thompson. See for example, Lorrin A. Shepard, "Annual Report: The American Hospital of Istanbul, 1938," Harvard Divinity School Library, BMS 1136, 9.
[976] Winkler and Rountree, *Amerikan Hastanesi*, 62-63.
[977] As per Winkler and Rountree's history of the American Hospital, the Ministry of Education declared this building a hazardous structure in May of 1944 and while it allowed education to continue for the time being it required the evacuation of the building by September (Winkler and Rountree, *Amerikan Hastanesi*, 81). However, Shepard's annual report for 1944 did not contain any information regarding this situation. See Lorrin A. Shepard, "Annual Report: The American Hospital of Istanbul, 1944," Harvard Divinity School Library, BMS 1136, 9. Furthermore, as per Luther R. Fowle's newsletter dated July 9, 1949, the old wooden structure continued to function as the Nurses' Home until its demolition in the summer of 1949. See Luther R. Fowle, American Board Mission newsletter dated July 9, 1949, ARIT, Istanbul Center Library.

occupancy rooms, and two four-bed wards. The nursery was situated in the central area of the floor facing south. The generous space allocated to the 'Maternity Ward' was a testament to the hospital's increasing popularity for natal services among Istanbul's local elites as well as American expatriates giving birth in the city. Not surprisingly, fundraising material from the 1930s also highlighted natal services offered at the American Hospital in Istanbul. The northeast section of the floor was the area reserved for male patients featuring six single-occupancy rooms and two wards for four patients.

The third floor's west and east sections functioned as a tuberculosis department, with its west side reserved for women (Figure 3.56). In addition to the standard diet kitchen, this floor featured a tuberculosis kitchen to meet the specific nutritional needs of patients suffering from TB. The surgical department on the northeast section of the floor had the main operating room and the septic operating room as well as areas for sterilization, anesthetics, and an instruments room. The increasing involvement of nurses in the operating room was evident in the floor plans by the addition of a sizeable room marked as 'Nurses' Work Room' within the surgical department. The first two rooms facing each other in this department were the dressing rooms for physicians and nurses. All the separate sections of the department could be accessed through the operating lobby in the center of the floor.

A 1935 pamphlet referred to Thompson's proposal as "a project needing completion,"[978] and the project continued to remain on hold until 1938 due to financial setbacks and bureaucratic obstacles.[979] This promotional material offered dedications to potential donors in exchange for specific amounts of funding they could provide to complete certain units. Costs were not limited to construction, but included equipment purchases and other expenses to furnish the new building.[980] Although Warren H. Winkler and George D. Rountree's (1937-2023) history of the American Hospital in Istanbul dated the beginning of the construction as May 17, 1938,[981] as per the Bible House newsletters

[978] HDS, "American Hospital of Istanbul: A Project Needing Completion"; Admiral Bristol Hospital 1920-1959, ARIT library - 362.11 ARC.
[979] HDS, "American Hospital of Istanbul: A Project Needing Completion"; Admiral Bristol Hospital 1920-1959, ARIT library - 362.11 ARC.
[980] Shepard, "American Hospital of Istanbul, 1939." In the annual report for 1939, Shepard invited donors to contribute further towards the purchase of further equipment and necessities of the new building.
[981] Winkler and Rountree both served as the general director of the American Hospital in Istanbul during 1967-1990 and 1992-1999/2001-2006 respectively. Winkler and Rountree, *Amerikan Hastanesi,* 61. See also "Winkler, Warren H.," VKV Ansiklopedisi, accessed Jan. 29, 2024, https://encyclopedia.vkv.org.tr/Categories/People/Executives/Winkler,-Warren-H; "Rountree, George

from 1938, the work to lay the building's foundation did not commence until Thompson's arrival in late July of 1938.[982] The *New York Times* also announced Thompson's departure from New York for Istanbul on the Italian liner Conte Savoia[983] and the commencement of the construction:

> Under the supervision of a New York architect, scores of native Turkish workmen will soon be starting the construction in Istanbul, Turkey, of a new building to house the American Hospital of that capital city.[984] The hospital, to cost US $200,000, will be of reinforced concrete, completely American in construction and lay out, and modern in its elaborate equipment.
> The new structure is made possible by contributions from American and other foreign residents in Istanbul, from friends of the hospital in this country and chiefly from large American oil and tobacco companies with wide interests in the Near East. Originally planned for 1934, construction was deferred until sufficient funds were raised.[985]

Lorrin Shepard noted that Thompson made the final arrangements for the building in August 1938 and that the construction work really began in early October 1938.[986] According to Shepard's report, by the end of 1938 concrete was being poured and the brick work of the outer walls had started.[987] Thompson's presence on site was an indication that he was not only the designer, but also oversaw the execution of his plans for the new hospital building. In his 1938 report, Lorrin Shepard praised Thompson's planning of the project and his hands-on dedication to it:

> The construction of the new building has gone steadily forward, and already one can glimpse the final effect, though a vast amount remains to be done. Those of us who have watched the progress closely have marveled at the thoroughness and detail of architect Thompson's planning and incessant watchfulness and care with which his representatives, Mr. Kidd and Mr. Reeves, are seeing that his plans are fully carried out. […] The building and the way it is being built have already impressed contractors and workmen as well as many influential people, both lay and professional, who have visited the [site]. We are assured of a first-class building, capable of long years of service, with a minimum of waste in operation and of expense for maintenance.[988]

Shepard also noted that the hospital staff enjoyed visiting the construction site whenever they could:

D(enton)," VKV Ansiklopedisi, accessed Jan. 29, 2024, https://encyclopedia.vkv.org.tr/Categories/People/Executives/Rountree,-George-D(enton).

[982] Charles T. Riggs, "Dear Friends: Volume III: Number 674-725," (Bible House newsletter dated July 30, 1938), ARIT, Istanbul Center Library.

[983] "Istanbul Hospital to Get New Home," 9.

[984] The *New York Times* mistakenly referred to Istanbul as the Turkish capital on multiple occasions.

[985] "Istanbul Hospital to get New Home," 9. This article included some misguided information such as referring to the location of the new building as Pera and to Istanbul as the capital of Turkey. It also mentioned that the American Hospital in Istanbul was founded in 1890.

[986] Shepard, "American Hospital of Istanbul, 1938."

[987] Ibid.

[988] Ibid.

> […] almost every minute that could be spared […] was spent in going over to the new building, watching masons, plumbers, plasterers, carpenters, glaziers, and painters, and talking with the construction superintendent.[989]

Thompson visited Istanbul multiple times to supervise and inspect the project, and in his absence his assistant Lyman Kidd (n.d.), who remained in the city until the completion of all the finishing touches and the move to the new building, oversaw the work.[990] The building was completed relatively fast, and it was ready for use by September 1939.[991] The hospital moved to the new building along with its patients on September 27, 1939 although there were still a few weeks of work left on the lower floors of the building.[992] This concrete structure with its unadorned façade void of ornamentation reflected elements of the new Turkish Republic and the post-World War I modernist projects frequently seen in Europe and North America (Figure 3.57).[993]

The official opening ceremony of the new building was on November 4, 1939, which began with the singing of the Turkish national anthem in the attendance of approximately two hundred guests in the quarters reserved for the School of Nursing, which could turn into a large assembly room by removing the partitions between the separate areas.[994] Among the invitees were American diplomats, expatriates, and business people as well as notable Turkish officials such as Lütfi Kırdar (1887-1961), a physician who was the Governor and Mayor of Istanbul at the time, and prominent figures of the medical profession in Turkey, as well as expatriates from other countries who had a guided tour of the new building in small groups.[995] A week later, on November 11, there was an additional housewarming party for the American and British members of the expatriate community residing in town.[996]

Despite having retired from his role as the United States High Commissioner to Turkey in 1927, Admiral Mark Lambert Bristol remained as the President of the Board

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[989] Shepard, "American Hospital of Istanbul, 1939."
[990] Ibid. Shepard mentioned that Thompson's last visit to Istanbul was in January of 1939.
[991] Ibid.
[992] Ibid.
[993] Lack of ornamentation was typical of the modernist architecture of the post-World War I era, and it was very much related to ideas of hygiene and cleanliness which regarded over-decoration as an enemy of hygiene. See Overy, *Light, Air and Openness*, 68-69.
[994] "Yeni Amerikan Hastanesi Cumartesi Akşamı Merasimle Açıldı," *Akşam*, Nov. 8, 1939, 3; Charles T. Riggs, Bible House newsletter dated Nov. 18, 1939, ARIT, Istanbul Center Library; Shepard, "American Hospital of Istanbul, 1939." In his annual report, Shepard marked the date of the official opening reception as November 14, 1939, but this was probably a typo. Newspaper archives, such as *Akşam*, also confirm that the opening ceremony was held on November 4.
[995] *Akşam*, "Yeni Amerikan Hastanesi," 3; Charles T. Riggs, Bible House newsletter dated Nov. 18, 1939; Shepard, "American Hospital of Istanbul, 1939."
[996] Charles T. Riggs, Bible House newsletter dated Nov. 18, 1939.

of Directors of the American Hospital in Istanbul and continued to support the institution actively as newspaper articles of the time[997] and his correspondence regarding the hospital's finances in 1938 in preparation for the construction of the new building suggested.[998] Since he passed away on May 13, 1939, a few months prior to the completion of the new building, he could not see this dream realized. Admiral Bristol was well-liked in Turkey and the headlines announcing his passing commemorated him as "a friend of the Turks" on the first page of daily newspapers.[999] In November 1945 as Turkish-American relations were beginning to enter a new phase in the shadow of Turkish fears of Soviet expansion,[1000] the American Hospital in Istanbul and its School of Nursing were renamed as the Admiral Bristol Hospital and School of Nursing honoring the late Admiral with a ceremony.[1001] In its final year before the name change the building designed by Thompson underwent some new improvements such as the alteration of the chimney connections to decrease excessive heat from the main kitchen, and roofing of the terrace behind the surgical department to prevent the rain leaking into patient rooms and to create additional storage and resting space for physicians and nurses.[1002] The purchase of new X-ray equipment and soundproofing material for the building also occurred in 1944.[1003]

3.6 The Admiral Bristol School of Nursing Nurses' Home

Provision of better conditions to attract qualified candidates became a concern for the American Hospital in the 1930s, and ultimately, by the late 1940s, part of the solution to this problem would be to turn to an earlier architectural typology which had helped attract young women of the U.K., Europe, and the U.S. to the nursing profession in the past: the Nurses' Home. However, in the late 1930s, particularly when its School of Nursing was

[997] For instance, "Istanbul Hospital to Get New Home," 9.
[998] Admiral Bristol Hospital 1920-1959, ARIT library - 362.11 ARC. See also Shepard, "American Hospital of Istanbul, 1939."
[999] See for example, "Bir Türk Dostunun Acı Kaybı," *Ulus*, May 16, 1939, 1; "Kıymetli Bir Dostumuzu Kaybettik," *Cumhuriyet*, May 17, 1939, 1.
[1000] In September of 1945, the U.S. Embassy in Ankara issued a report regarding Turkish efforts to establish closer ties with the U.S. to prevent Russian influence in the region and on its own population (NARA711.67/9-1945). For more information on the significance of 1945 in terms Turkish-American and Turkish-Russian relations see Metin Toker, *Türkiye Üzerinde 1945 Kâbusu* (Ankara: Akis, 1971). See also Tuba Ünlü Bilgiç, "The Roots of Anti-Americanism in Turkey, 1945-1960," *Bilig* 72 (Winter 2015): 251-80.
[1001] "Amerikan Hastanesindeki Dünkü Merasim," *Akşam*, Nov. 18, 1945, 1; "Amiral Bristol Hastanesi," *Vakit*, Nov. 19, 1945, 3.
[1002] Shepard, "American Hospital of Istanbul, 1944."
[1003] Ibid.

unable to recruit any students at all in 1938, the directors hoped that the opening of the new hospital building in the following year would help to promote the school:

> Unfortunately, we were unable to admit a new class of pupil nurses for lack of a sufficient number of qualified candidates. The school adheres to its standard of requiring a middle school diploma for admission. The new social order in Turkey has created so many attractive openings in business and in government departments for educated girls, that those who wish to go into nursing are few. The profession of nursing has not yet captured the imagination of the more cultured Turkish women. Greater efforts will be made this year to secure a good entering class. We feel sure that the new hospital building with its attractive classrooms and the general interest aroused by its completion will result in a larger group of young women desiring to come into the school. The number of pupils on Jan. 1, 1939 was 7.[1004]

In 1939, the admission of five new students to the school was better than the previous year but the American Hospital still had to employ graduate nurses in the absence of a satisfactory number of trainees:

> The modern arrangement and the many conveniences of the new building have made it possible to carry on the nursing work more satisfactorily than ever before. The increased capacity of the building and the fact that our total number of pupils is still considerably less than we desire, makes it necessary to employ a rather large number of graduate nurses. We believe that as the attractiveness of the new hospital becomes better known, there will be less difficulty in securing suitable candidates for the school.[1005]

During this time, the American Hospital's School of Nursing was also at a disadvantage as it had to compete with the Red Crescent School of Nursing, which received the support of both the Turkish government and the RF. The graduates of the American Hospital School of Nursing needed to complete a supplementary course at the Red Crescent School and successfully pass the government-required examinations in order to fully qualify as a nurse in the Republic of Turkey.[1006]

When founded in 1925, the Red Crescent School of Nursing was housed in a residential *köşk* in Istanbul much like the beginnings of the American Hospital and its School of Nursing. Hazel A. Goff (1892-1973), an American nurse, helped reorganize the

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[1004] Shepard, "American Hospital of Istanbul, 1938."
[1005] Shepard, "American Hospital of Istanbul, 1939."
[1006] Lorrin A. Shepard, "Annual Report: The American Hospital of Istanbul, 1938 – Supplementary Report, Jan. 1-June 29, 1939 " Harvard Divinity School Library, BMS 1136, 9. In an article she wrote for the *American Journal of Nursing*, Asuman Türer of the Red Crescent School of Nursing explained that the American Hospital's School of Nursing was only recognized by the Ministry of Education, and not the Ministry of Health, and that its graduates had to complete an additional three-month course to prepare for the required state examinations and to become eligible for appointment in public institutions in Turkey. However, they were not required to complete a period of compulsory service unlike the Red Crescent School of Nursing graduates. For this reason, many of the American Hospital School of Nursing graduates either continued to work at the American Hospital or went into private practice in Turkey or abroad. Many of them also found opportunities to pursue postgraduate studies in the United States and elsewhere thanks to fellowships and financial assistance provided by organizations such as the Rockefeller Foundation, the League of Red Cross Societies, and the Turkish Red Crescent. See Asuman Türer, "The Red Crescent School in Istanbul: Turkish Nurses Are Making Every Effort to Expand and Improve Their Professional Schools in Order to Meet Their Country's Needs," *The American Journal of Nursing* 48, no. 5 (May 1948): 299.

Red Crescent School of Nursing and establish a Nurses' Home in 1936.[1007] In the 1940s, the number of nursing schools in Turkey rose to six, with the establishment of four new schools: the Turkish Army's school of nursing founded in 1940 in Ankara to train nurses for military hospitals, the specialized *Verem Savaşı* (TB Battle) Nursing School established in 1943 in Istanbul with a focus on the treatment of tuberculosis patients in sanatoria,[1008] and two nursing schools established by the Ministry of Health in 1946.[1009]

While the American Hospital, which was renamed as the Admiral Bristol Hospital in 1945, enjoyed its brand-new building, the nurses and nursing students were still residing in the wooden building which Lorrin Shepard referred to as the "Nurses' Residence" in his earlier reports.[1010] As this building became uninhabitable by 1945, in his list of "important hospital needs still outstanding," Lorrin Shepard reserved the top spot for "a modern fireproof nurses' residence"[1011] and throughout the 1940s the annual reports of the institution continued to emphasize the urgent need for a new building for the Admiral Bristol School of Nursing (ABSN) which would provide both training and accommodations for nurses.[1012] In 1945, the campaign to raise US $150,000 for a new building for the ABSN started to accelerate as Lorrin Shepard noted in his report:

> We have high hopes that the effort to raise funds for a new nurses' residence will be completely successful, and that before long our school will have a building comparable to our beautiful hospital building, with comfortable accommodations for our entire nursing staff and more convenient classroom and laboratory facilities.[1013]

Given all the difficulties concerning recruitment of new students, a dedicated building of its own had become an urgent need for the American Hospital's School of Nursing by the 1940s. Once the new building of the hospital became a reality, fundraising efforts could finally focus on the commissioning of a new Nurses' Home. Lorrin Shepard's annual report for 1945 indicated that preliminary plans for the new ABSN Nurses' Home were ready and had been sent to the United States for inspection and

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[1007] Türer, "Red Crescent School in Istanbul," 298.
[1008] Ibid., 299. Asuman Türer placed the school specializing on TB nursing in a different category on its own. For more information about the TB Battle School of Nursing see Fatih Artvinli, "Verem Savaşı Hemşire Okulu, Erenköy Sanatoryumu ve Dispanserler: Muazzez Yazıcıoğlu ile bir sözlü tarih çalışması," *Yeni Tıp Tarihi Araştırmaları* 23 (2017): 57-89. This school was initially established in a *köşk* in 1943, it then moved into the top floor of one of the pavilions of the Erenköy sanatorium building in 1944, and finally moved into its purpose-built facilities by the end of 1950.
[1009] Türer, "Red Crescent School in Istanbul," 298-99.
[1010] Shepard, "American Hospital of Istanbul, 1938."
[1011] Shepard, "American Hospital of Istanbul, 1944."
[1012] Annual reports of the American Hospital/Admiral Bristol Hospital and School of Nursing in Istanbul, Harvard Divinity School Library, BMS 1136, 9.
[1013] Lorrin A. Shepard, "Annual Report: The American Hospital of Istanbul, 1945," Harvard Divinity School Library, BMS 1136, 9.

approval.[1014] The site of the new building would be where the old wooden building which previously functioned as the Nurses' Home stood. The construction could not commence despite all preparations since fundraising efforts did not proceed fast enough, and finally in the summer of 1949 the demolition of the wooden structure began to make room for the new Nurses' Home.[1015]

Lorrin Shepard repeatedly expressed that the nurses and nursing students lived in crammed living conditions,[1016] that the success of the ABSN depended on the completion of the Nurses' Home, and that the hospital had to offer the nurses and students better living conditions:

> We hope that before the next commencement the new building, on which the future usefulness and development of the School so greatly depend, will be on its way to completion. When the building is finished and equipped, the School will be in a position to make a truly significant contribution to Nursing Education in Turkey. The situation is more hopeful now than for some years past.[1017]

The necessary funds were raised with contributions of individuals and businesses such as Standard Commercial Tobacco Company and U.S. Steel Export Corporation (Appendix B). The construction work began by the end of September 1949[1018] and proceeded rapidly from thereafter:

> Nineteen-forty-nine will be remembered in the annals of the Hospital for the beginning of the new classroom-residence building for the School of Nursing. After many discouraging delays, wreckers began the demolition of the old wooden house in July. Workmen poured the first concrete for the foundations on September twenty-second. Progress was rapid during October and November when favorable weather prevailed. Exactly ninety-five years after Florence Nightingale began her historic nursing service at Scutari, just across the Bosphorus, Ambassador Wadsworth laid the cornerstone of our new building on November fifth. An enthusiastic group of Americans and other supporters of the Hospital witnessed the ceremony. The middle of December marked the completion of reinforced concrete work and most of the brick laying, and New Year's Eve the roof frame was finished. We fully expect to move in before classes start on September first 1950.[1019]

[1014] Ibid.
[1015] Fowle, American Board Mission newsletter dated July 9, 1949; Lorrin A. Shepard, "The Admiral Bristol Hospital Istanbul: Annual Report, 1949," Harvard Divinity School Library, BMS 1136, 9.
[1016] Shepard, "Annual Report, 1949." In the 1949 report Shepard wrote "Students and graduates and teachers showed a fine spirit of cooperation in spite of crowded living conditions."
[1017] Lorrin A. Shepard, "The Admiral Bristol Hospital Istanbul: Annual Report, 1948," Harvard Divinity School Library, BMS 1136, 9.
[1018] There was an announcement announcing the groundbreaking ceremony in the Turkish newspaper *Cumhuriyet* on Nov. 5, 1949. See "Amiral Bristol Hemşire Okulunun Temel Atma Töreni," *Cumhuriyet*, November 5, 1949, 2.
[1019] Shepard, "Annual Report, 1949."

Since the finishing touches and the installation of equipment took longer than expected classes at the ABSN could not begin until October 1, 1950.[1020]

3.6.1 Sedad Hakkı Eldem (1908-1988)

The architect of the ABSN Nurses' Home project was Sedad Hakkı Eldem (1908-1988), a well-known Turkish architect,[1021] recommended to Lorrin Shepard by Robert Van Nice (1910-1994), an American architect who had been in Istanbul since 1937 to carry out a survey of the Hagia Sophia under the sponsorship of William Emerson (1873-1957), the Dean of Architecture at the Massachusetts Institute of Technology (MIT).[1022]

In 1939 Eldem had written an article for *Arkitekt* about American hotel rooms,[1023] and in the same year he designed the Turkish Pavilion at the New York World's Fair which might have played a role in his selection for the job as Lorrin Shepard brought this up while promoting the ABSN project (Figure 3.58).[1024] The design Eldem had produced for the ABSN resembled an earlier building of his for a thermal spa hotel in Yalova, a resort town near Istanbul (Figures 3.59-3.60).[1025] This allusion might have been an effort to highlight the tendency in the United States in the 1920s and 1930s to create Nurses' Homes which resembled hotels and provided multiple amenities, comfort, and security for young female nurses in training.[1026] Regardless of the specific source of inspiration for this building typology, the driving force behind many of Eldem's works was his passion for the domestic architecture of Turkey.

Born in Istanbul in 1908, Eldem was a descendant of influential Ottoman intellectuals and statesmen from the upper echelons of society.[1027] As the son of a diplomat, he completed his primary and secondary education in Geneva, Switzerland and

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[1020] "The Admiral Bristol Hospital – Istanbul – Annual Report, 1950," RBF records, RG3, subgroups 1 and 2, box 78, folder 529.

[1021] As per a retrospective of Eldem's work published in 1983, he prepared drawings for the building as early as 1943 with the help of Turgut Cansever, his assistant at the time. *Sedad Hakkı Eldem*, 106-7.

[1022] Dumbarton Oaks, Robert Van Nice papers, MS.BZ.012, box 5, folder 51.

[1023] Sedat Eldem, "Amerikan Otel Odaları ve Tefriş Hususiyetleri," *Arkitekt* 103-104 (Jul. 8, 1939): 183-87.

[1024] Sedat Hakkı Eldem, "1939 New York Sergisinde Türk Pavyon Projesi," *Arkitekt* 103-104 (Jul. 8, 1939): 153-55; Lorrin A. Shepard, "The Admiral Bristol Hospital Istanbul: Annual Report, 1947," Harvard Divinity School Library, BMS 1136, 9. For other images of the pavilion Eldem designed see Royal Institute of British Architects, RIBA88705, accessed Feb. 1 , 2024, https://www.ribapix.com/1939-Worlds-Fair-Queens-New-York-the-Turkish-Pavilion-with-an-orchestra-playing_RIBA88705; RIBA88706, accessed Feb. 1, 2024, https://www.ribapix.com/1939-Worlds-Fair-Queens-New-York-the-Turkish-Pavilion-with-an-orchestra-playing_RIBA88706.

[1025] Sedat Hakkı Eldem, "Yalova Termal Oteli," *Arkitekt* 87 (Mar. 1938): 67-81; Bozdoğan, "Modernity in Tradition," 53; *Sedad Hakkı Eldem*, 40-41.

[1026] Kingsley, "The Architecture of Nursing," 82-83.

[1027] For more information on Eldem's family see Eldem, "Sedad Hakkı Eldem Olunmaz, Doğulur," 10-41.

Munich, Germany.[1028] He started studying architecture at the *Sanâyi-i Nefîse Mektebi* (Academy of Fine Arts) in Istanbul in 1924 and graduated at the top of his class in 1928, after which he pursued training in France, Germany, and Britain on a three-year fellowship before returning to Turkey in 1930.[1029] Architectural historian Sibel Bozdoğan explains that it was Eldem's own "in-between status" which inspired him to formulate conceptual explorations of the Turkish house within the modernist discourse.[1030] As a young architect in Turkey, Eldem assisted Giulio Mongeri (1875-1951), one of the most renowned architects of the First National Architecture, and he witnessed the rebuilding of Ankara as the Turkish Republic's modern capital under the Jansen plan in the early 1930s.[1031] The architectural style Eldem and his contemporaries, such as Emin Onat (1908-1961), developed in Turkey would later be termed the *İkinci Ulusal Mimari* (Second National Architecture) reflecting both a continuation of, and a differentiation from, the movement the previous generation of local architects such as Mimar Kemalettin, Vedat Tek, and Giulio Mongeri had started in the late Ottoman Empire.[1032]

Besides being a practicing architect, Eldem pursued a career in academia and had a profound interest in architectural history. His passion for the domestic architecture of Turkey, which began during his formative years as a student when he produced drawings and watercolor sketches of Anatolian country houses,[1033] (Figure 3.61) developed into a deep commitment to reinterpret the Turkish house in modern terms – or as Sibel Bozdoğan writes, Eldem aimed to rebuild the Turkish house "in the language of epoch-making material: reinforced concrete."[1034] However, in his own words Eldem was opposed to the over-use of concrete and advocated that Turkish architects had to refer to

[1028] Üstün Alsaç, "Sedad Hakkı Eldem," *Eczacıbaşı Sanat Ansiklopedisi* vol. 1 (Istanbul: YEM, 1997), 512.
[1029] Bozdoğan, "Modernity in Tradition," 26; Alsaç, "Sedad Hakkı Eldem," 512; Uğur Tanyeli, "Genç Sedad Hakkı Eldem: Kültürlerarası Bir Kimlik İnşası, 1908-1930," in *Sedad Hakkı Eldem (vol. I): Gençlik Yılları* eds. Edhem Eldem, Bülent Tanju, Uğur Tanyeli (Istanbul: Osmanlı Bankası Arşiv ve Araştırma Merkezi, 2008), 42-131.
[1030] Bozdoğan, "Modernity in Tradition," 26.
[1031] Alsaç, "Sedad Hakkı Eldem," 512. For more information on Mongeri's work in Ankara see Çinici, "Başkent Ankara'nın İnşasında," 13-41.
[1032] Sibel Bozdoğan, "The Turkish Home Reappraised," in *Sedad Eldem: Architect in Turkey*, eds., Sibel Bozdoğan, Suha Özkan, and Engin Yenal (New York, NY: Media Pte LTD, 1987), 44.
[1033] Sedad Hakkı Eldem, "Son 120 Sene İçinde Türk Mimarisinde Millilik ve Rejyonalizm Araştırmaları," Proceedings of the *Mimaride Türk Milli Üslubu* Seminar (İstanbul: Kültür ve Turizm Bakanlığı Eski Eserler ve Müzeler Genel Müdürlüğü, 1984), 57. Eldem wrote that he was in love with the Turkish house as a student and took trips across Anatolia every summer to observe and document its architecture, treating Anatolian towns as open-air museums. He also noted that, in his youth, he despised various functional aspects of modernist architecture and was strongly opposed to international cubism as well as the Neo-Turkish movement which emphasized domes and arches.
[1034] Bozdoğan, "Turkish Home Reappraised," 44.

the uses of traditional materials such as stone in their native geography and explore methods of combining stone with concrete.[1035] *Mimar* published a series of Eldem's drawings in 1931 with the heading "Evlerimizin İçi" (The Interiors of Our Houses) arguing that it was the Turkish architect's responsibility to deliver projects which reflected Turkish customs and way of living while incorporating modern-day amenities to enhance living standards.[1036] Eldem's publication titled *Türk Evi Plan Tipleri* (Turkish House Plan Types) historicized the development of domestic architecture in Turkey and codified the main elements of different types of floor plans which the traditional Turkish houses adopted.[1037] He wrote about the history and development of different varieties of Turkish dwellings, such as the *köşk, kasır,* and *yalı*.[1038] He was eager to introduce the Turkish house as an architectural typology to the English-speaking world as well, and his friend Robert Van Nice contacted the Bollingen Foundation on his behalf to see if they would be interested in publishing and disseminating Eldem's work in English in the United States.[1039] According to Eldem, the traditional Turkish house typology was compatible with the necessities of the twentieth century life as it provided "ample windows and light, free plan, the emphasis on comfort over ostentatious display, conformity to the nature of materials, generous supply of terraces, garden and courtyard intimately linking the house with nature."[1040]

While Eldem's designs for institutional public buildings evoked the domestic architecture of Turkey on the outside for the most part, such as the Istanbul University Faculty of Arts building which he codesigned with Emin Onat (b. 1952) or the offices of the *Sosyal Sigortalar Kurumu* (Social Insurance Institution) in the Fatih district of Istanbul (b. 1962-1964), he was able to incorporate some of the fundamental principles of the interior organization of the Turkish house in his designs for the mansions of Turkey's elite families. According to Eldem, individual enclosures inside the Turkish

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[1035] Eldem, "Son 120 Sene İçinde Türk Mimarisi," 59.
[1036] "Evlerimizin içi," *Mimar* 7 (Jul. 1931): 233-236.
[1037] Sedad Hakkı Eldem, *Türk Evi Plan Tipleri* (Istanbul: Pulhan Matbaası, 1954).
[1038] Sedad Hakkı Eldem, *Köşkler ve Kasırlar I* (Istanbul: Devlet Güzel Sanatlar Akademisi, 1968); Sedad Hakkı Eldem, *Köşkler ve Kasırlar II* (Istanbul: Devlet Güzel Sanatlar Akademisi, 1974); Sedad Hakkı Eldem, *Türk Evi: Osmanlı Dönemi I* (Istanbul: TAÇ Vakfı, 1984); Sedad Hakkı Eldem, *Türk Evi: Osmanlı Dönemi II* (Istanbul: TAÇ Vakfı, 1987); Sedad Hakkı Eldem *Boğaziçi Yalıları I: Rumeli Yakası*/*The Yalıs of the Bosphorus: European Side* and *Boğaziçi Yalıları II: Anadolu Yakası/The Yalıs of the Bosphorus: Anatolian Side* (published posthumously in Turkish and English, trans. Robert Bragner) (Istanbul: Vehbi Koç Foundation, 1993). Eldem also published a volume about Turkish gardens, Sedad Hakkı Eldem, *Türk Bahçeleri* (Istanbul: Kültür Bakanlığı, 1976).
[1039] Dumbarton Oaks, Robert Van Nice papers, MS.BZ.012, box 5 (Van Nice to Barrett, Mar. 8, 1948).
[1040] Bozdoğan, *Modernism and Nation Building*, 261.

house historically represented a *hane* (household) rather than a room, and each *hane* was to be home to a nuclear family unit. The extended family resided together in the same building, which was the Turkish house, and all the *hane*s within the building opened to a common area called *sofa* (Figure 3.62).[1041] Eldem grouped the Turkish house plans into different types, in relation to the position and shape of their *sofa* which he regarded as the most distinctive feature of the Turkish house.[1042] For instance, the house he designed in the Nişantaşı district of Istanbul for the household of Ahmet Ağaoğlu (1869-1939) in 1936 as a two-story building was organized to offer apartment-like dwellings for multiple nuclear families. It was exemplary of how Eldem envisioned the Turkish house in a modernist sense (Figure 3.63).[1043] Eldem argued that the Turkish house was originally meant to be a single floor raised from the ground, standing on pilotis; but this ground area later evolved into an enclosure housing additional functional units.[1044] The Ağaoğlu House was a reflection of this vision with a ground floor and a floor rising above it. While Eldem designated the central connection area as the *sofa* on his floor plans, in practice the living room on the first floor was where communal gatherings took place (Figure 3.64). Architectural historian İnci Aslanoğlu defined the Ağaoğlu House as "a combination of the traditional house type with the "*kübik*" (cubist) architecture of the period."[1045] The amalgamation of local elements with modernist touches must have felt particularly interesting to foreign guests of the house. John Marshall (1903-1980) of the RF attended a cocktail party there in 1948 when it was the residence of lawyer Süreyya Ağaoğlu (1903-1989) who had inherited the house from her father.[1046] Marshall described the house as "a remarkably fine structure in modern style with rooms grouped around an oval drawing room." [1047] Eldem was a guest at this event as well, and he was able to impress and make connections with the American expatriates in such social gatherings. Marshall would write about Eldem to his friend Reverend Otis P. Rice (n.d.), Chaplain of the St. Luke's Hospital in New York when Eldem was there for a surgical operation in 1951:

[1041] Eldem, *Türk Evi Plan Tipleri*, 15-16.
[1042] Ibid. The four main categories were the house with no *sofa*, house with an external *sofa*, house with an interior *sofa*, house with a central *sofa*.
[1043] Sedad Hakkı Eldem, "Maçkada Prof. A. A. evi," Arkitekt 94-95 (Oct. 1938): 277-86; Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı*, 334; Bozdoğan, "Turkish Home Reappraised," 46-48.
[1044] Eldem, *Türk Evi Plan Tipleri*, 12-14.
[1045] Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı*, 334; Bozdoğan, "Turkish Home Reappraised," 46.
[1046] RF records, RG2, 1948/805, box 431, folder 2901.
[1047] Ibid.

> I suspect that you would find it of considerable interest to talk with him, particularly if you were to bring the conversation round to the subject that I am sure is of interest to him, namely, the role and development of Islamic thinking in Turkey.[1048]

Eldem theorized about Islam's potential to act as an apolitical instrument in the preservation of cultural heritage and identity through his studies of examples of the Turkish house typology in Bosnia-Herzegovina where being Muslim evolved into signifying Turkishness rather than ethnic origin.[1049]

After the completion of the ABSN Nurses' Home building, Eldem worked on the design of the Hilton Hotel in Istanbul with Gordon Bunshaft (1909-1990) of Skidmore, Owings and Merrill (SOM).[1050] Nathaniel Alexander Owings (1903-1984) of the firm wrote about the project in his memoirs with praises for Eldem:

> Sedad Eldem, our associate, a resident of Istanbul, master of five languages, proved that the legendary toughness of the Turks extended to the character and fiber of their architects Sedad Eldem is famous for having defeated Bunshaft on his own ground, maintaining the supremacy of rich, lush, romantic Turkish architecture over Bun's more classic international predilections. The resulting building is considered by both Sedad and Gordon as a satisfactory compromise between two worlds of culture.[1051]

Annabel Jane Wharton argues that the collaboration between the two architects was rather tense, but the contributions of a local architect were necessary to please the host country of Turkey, at the time an indispensable ally of the United States.[1052] The late 1940s and early 1950s, which marked the beginnings of the Cold War era, was a significant period in terms of the relationship between Turkey and the United States. Due to its proximity to the USSR, Turkey's strategic importance gained new meanings for American interests. Just like the decision to hire Thompson for the American Hospital project was not a mere coincidence, the commissioning of a Turkish architect, namely Sedad Hakkı Eldem, for American projects in the Cold War years, such as the ABSN Nurses' Home and the Hilton Hotel buildings in Istanbul were shaped by the political climate of the time.

[1048] RF records, RG2, 1951/805, box 548, folder 3654 (Marshall to Rice, May 31, 1951).

[1049] Eldem, *Türk Evi: Osmanlı Dönemi I*, 40. Eldem argued that the Muslim communities in Bosnia-Herzegovina were able to keep their Turkish identity, and consequently their traditional architecture, not because of their ethnic origins but because of their devotion to Islam even after leaving the Ottoman Empire. According to Eldem, since Turkishness was conflated with being Muslim in the Balkans, Islam played a unifying role among many ethnicities. Eldem wrote that, regardless of their ethnic origins, Muslim communities in Bosna-Herzegovina embraced Turkishness while they were under Ottoman rule.

[1050] Nathaniel Alexander Owings, *The Spaces in Between: An Architect's Journey* (Boston: Houghton Mifflin, 1973), 104. Also cited in Annabel Jane Wharton, *Building the Cold War: Hilton International Hotels and Modern Architecture* (Chicago, IL: University of Chicago Press, 2001), 19.

[1051] Wharton, *Building the Cold War*, 21.

[1052] Ibid., 13-40; Begüm Adalet, *Hotels and Highways: The Construction of Modernization Theory in Cold War Turkey* (Stanford, CA: Stanford University Press, 2018), 161.

In Turkey, the establishment of opposition parties in the years 1945-1946 marked the beginning of a shift away from single-party politics dominated by the *Cumhuriyet Halk Partisi* (Republican People's Party, CHP) under the leadership of İsmet İnönü who inherited the role of President after Mustafa Kemal Atatürk's death in November 1938.[1053] According to Begüm Adalet, the election on May 14, 1950 which brought the *Demokrat Parti* (Democrat Party, DP) government of Adnan Menderes (1899-1961) to power, was the turning point that crystalized Turkey's status as the model American ally and the archetype of modernization theory as envisioned in the United States.[1054] The links between the two countries continued to get stronger, and in 1952, a few years after its formation in 1949, Turkey joined the North Atlantic Treaty Organization (NATO). According to Adalet, projects such as the Hilton Hotel in Istanbul, co-financed by the *Emekli Sandığı* (Pension Fund of Turkey) and the Economic Cooperation Administration of the U.S. government, was among the weapons of the Cold War at the cultural front with its self-consciously hybrid funding and mix of Turkish-American modernist aesthetics for its architecture.[1055] In many ways, the ABSN Nurses' Home, built just before the Hilton Hotel, and the presence of institutions such as the American Hospital in Istanbul, also served as elements of Cold War diplomacy in those years.

The developing alliance between the United States and Turkey did not please every segment of the Turkish society. For some this relationship was reminiscent of a colonial one rather than a military partnership formalized through NATO.[1056] In a sense, the late 1940s and early 1950s also planted the seeds of anti-American sentiments in Turkey, which would surface in 1960 when a military coup toppled the DP government of Menderes.[1057] Regardless of the nature of the relationship between the two countries, Eldem, himself a member of the Turkish elite, was among the facilitators promoting and imposing the visual, spatial, and cultural representations of the American presence in Turkey through architecture, even when it incorporated local Turkish elements. This phenomenon was comparable to the position of the local elites and the mediators who

[1053] Zürcher, *Turkey*, 209-18; Philliou, *Turkey*, 187-96. There had been previous attempts to establish opposition parties encouraged by Mustafa Kemal Atatürk. However, these failed. See Zürcher, *Turkey*, 168-69.
[1054] Adalet, *Hotels and Highways*, 7.
[1055] Ibid., 160-62.
[1056] Bilgiç, "Roots of Anti-Americanism in Turkey," 260-62. For instance, the deployment of 4,500 troops to Korea with a cabinet decision without consulting with the parliament became a subject of tension regarding NATO membership.
[1057] Ibid., 251-280.

negotiated the lines and spaces between the local and the foreign in India under British rule. Jyoti Hosagrahar elaborates:

> On the one hand was a whirlwind of economic and political change, on the other were inherited ways of living and building, hierarchy, status, and allegiances that continued to structure daily life. Mediating between them were European officials and Western-educated Indian elites aspiring for the benefits of what they believed was 'universal' 'science' and 'reason'. These included self-serving officials exploiting existing hierarchies and allegiances for their own profit, mid-level bureaucrats and administrators, as well as subversive inhabitants.[1058]

Eldem's position as a European-educated local elite informing American patrons about the native customs and helping them navigate the terrain did not necessarily reflect a holistic and genuine representation of Turkish society, or the local architecture for that matter. For instance, in the case of the Hilton Hotel project, Eldem's design could not escape from the romanticized and Orientalist visions of the so-called East, something accentuated at the main entrance of the building which showcased a marquee alluding to a flying carpet (Figure 3.65).[1059] However, defining Eldem's involvement in American projects as the work of what Gayatri Chakravorty Spivak calls a "native informant"[1060] for the American patrons "interested in the voice of the Other,"[1061] would be inappropriate. This type of categorization of the local elites informed by subaltern studies and post-colonial scholarship does not accurately explain the late Ottoman and Turkish experience since, unlike India, neither the Ottoman Empire nor the Turkish Republic experienced a period of colonization. Further, Eldem's status in the architectural historiography of Turkey as a champion of Turkish modernist architecture also needs to be further scrutinized by architectural historians and investigated for the nuances that characterize his mediating role between Turkey and 'the West.'

3.6.2 A Turkish-American Nurses' Home Designed by Sedad Hakkı Eldem (b. 1949-1950)[1062]

The Exteriors

The proposal Eldem produced for the ABSN Nurses' Home alluded to the Turkish house like his other work, and as previously mentioned it resembled his design for the Yalova Thermal Hotel built between 1934 and 1937. As mentioned earlier in Chapter 1, to make

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[1058] Jyoti Hosagrahar, *Indigenous Modernities: Negotiating Architecture and Urbanism* (London and New York: Routledge, 2005), 189.
[1059] Wharton, *Building the Cold War*, 24.
[1060] Gayatri Chakravorty Spivak, "Can the Subaltern Speak?" *Marxism and the Interpretation of Culture*, eds. Cary Nelson and Lawrence Grossberg (London: Macmillan, 1988), 26.
[1061] Ibid.
[1062] See Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."

the Nurses' Home a more attractive environment for aspiring nurses and to assure their families that their daughters would be safe, there had been a need in Britain, United States, and Canada to allude in the design of this building typology to the middle-class house,[1063] and subsequently to hotels and women's clubs with changing times,[1064] to make the Nurses' Home a more attractive environment both for the students and their families. However, Eldem's decision to implement elements of vernacular architecture of Turkey to the exteriors of the ABSN Nurses' Home was representative of his signature style, or the *Millî Mimari* (National Architecture) as he called it. The building featured projecting balconies with wide eaves on the upper floors, rows of windows with unadorned frames, and a reference to the ground level of the Turkish house through the rusticated stone covering the outer walls of the two lower floors of the building.

Eldem regarded materials, terraces, gardens, and courtyards as opportunities to link the interiors with elements of nature outside the house, in line with the main tenets of the Turkish house typology. In the case of the ABSN Nurses' Home, he achieved this goal not only through terraces and balconies, but also with the careful preservation of pine trees on the plot, a point he emphasized in an article he wrote for *Arkitekt* about the building in 1952 (Figure 3.66).[1065] Eldem had carried out scholarly research on Turkish gardens in the 1930s and 1940s, and published his findings in a volume titled *Türk Bahçeleri* (Turkish Gardens) in 1976 in which he criticized the destruction of gardens and green spaces in Istanbul.[1066] Furthermore, Eldem regarded '*doğaya saygı*' (respect to nature) as one of the main tenets of Turkish architecture.[1067] While Eldem's decision to situate the ABSN Nurses' Home within an oasis of nature in an otherwise urban setting was in relation to his views on the Turkish house, architects in Europe and North America chose similarly green settings for the Nurses' Home typology due to a belief that women needed protection from the menaces of the city life.[1068] Annmarie Adams writes that the locations of women's colleges in the nineteenth century were often in the periphery away from the 'less natural' industrialized and chaotic urban centers of power because of a

[1063] Vicinus, *Independent Women*, 85-120; Adams, "Rooms of their Own," 29-41; Adams, *Medicine by Design.*
[1064] Kingsley, "Architecture of Nursing," 82-84.
[1065] Eldem, "Amiral Bristol Hastahanesi Paviyonu," 54.
[1066] Eldem, *Türk Bahçeleri*.
[1067] Eldem, "Son 120 Sene İçinde Türk Mimarisi," 57.
[1068] Adams, "Rooms of their Own," 32; Adams, *Medicine by Design*, 78. For nineteenth-century literature on the relationship between nature and women's health, see Pye Henry Chavasse, *Advice to a Wife*, 12th ed. (London: Churchill, 1887), 17, 19-22.

long-established belief that there was a connection between women's wellbeing and wilderness or rural life.[1069] This logic applied to the Nurses' Home typology as well. For instance, the site chosen for the Royal Victoria Hospital's Nurses' Home in Montreal designed by Edward Maxwell (1867-1923) and William Sutherland Maxwell (1874-1952) in 1906 was beside the big hospital complex designed by Henry Saxon Snell (1831-1904) but, in an area featuring trees relatively untouched by rapid urbanization (Figure 3.67).[1070] However, rather than an intention to situate the ABSN Nurses' Home among wilderness to provide a protective shield for women from the city life, the trees surrounding the ABSN Nurses' Home served as symbols of Eldem's regionalism since *Pinus brutia*, commonly referred to as the Turkish pine, was considered to be a reflection of national character and endurance as an evergreen.[1071] Furthermore, pine trees enjoyed a long-standing association with health benefits in the Mediterranean as Pliny the Elder recorded in his *Natural History* circa CE 77-79:

> It is well known that woods consisting only of those trees from which pitch and resin are scraped off are very beneficial to consumptives, or to those who cannot convalesce after a long illness, and that the air in districts so planted is more health-giving than a sea-voyage to Egypt, or than draughts of milk from cattle that have grazed along summer pastures in the mountains.[1072]

Pine forests became the sites of sanatoria in the European context particularly in Germany,[1073] a country which extensively informed the architecture of the Turkish Republic in its formative years. It was not a coincidence that other healthcare-related

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[1069] Adams, "Rooms of their Own," 32; Adams, *Medicine by Design*, 78. Ideas about women and nature played a significant role on the suburbanization process in North America. For more information, see Gwendolyn Wright, *Moralism and the Model Home: Domestic Architecture and Cultural Conflict in Chicago, 1873-1913* (Chicago: University of Chicago Press, 1980); Annmarie Adams, "The Eichler Home: Intention and Experience in Postwar Suburbia," in *Gender, Class, and Sheler: Perspectives in Vernacular Architecture* vol. 5, eds. Elizabeth Cromley and Carter L. Hudgins (Knoxville: The University of Tennessee Press, 1995), 164-78.

[1070] Adams, "Rooms of their Own," 32; Adams, *Medicine by Design*, 78.

[1071] Trees have also enjoyed significant symbolic meanings in Turkish mythologies. For instance, the foundation myth of the Ottoman Empire was linked to a dream that Osman I (r. 1299-1323/4), founder of the Ottoman *Beylik* (Principality) had about a tree emerging from his navel. This dream was interpreted as a prophecy foretelling the expansion of the Ottoman Empire like a tree spreading out its branches. For more information on the mythological significance of trees in Turkish culture see, Şeyda Büyükcan Sayılır, "Türklerin Ağaç ile Mitolojik ve Tarihî Bağları üzerine bir Değerlendirme," *Genel Türk Tarihi Araştırmaları Dergisi* 3, no. 6 (Jul. 2021): 187-98. For more information about the foundation and expansion of the Ottoman Empire see, Caroline Finkel, *Osman's Dream: The History of the Ottoman Empire* (Basic Books, 2006).

[1072] Pliny, *Natural History* (Book 24, Section 19), trans. W. H. S. Jones (Cambridge, MA: Harvard University Press, 1956), 24-5. Also cited from Bostock's translation (John Bostock and H. T. Riley, *The Natural History of Pliny* (London: Henry G. Bohn, 1855) in Clare Hickman, "Pine Fresh: The Cultural and Medical Context of Pine Scent in Relation to Health—from the Forest to the Home," *Medical Humanities* 48 (2022): 106.

[1073] Eva Eylers, "Planning the Nation: The Sanatorium Movement in Germany," *The Journal of Architecture* 19, no. 5 (Oct. 2014): 667-92; Hickman, "Pine Fresh," 107.

institutions built in Turkey around the same years as the ABSN Nurses' Home, such as the Kirazlıyayla Sanatorium (b. 1949) designed by Emin Onat (1908-1961) and Leman Tomsu (1913-1988), stood among pine trees (Figure 3.68). As Clare Hickman argues, the smell of pine would later evolve into signifying cleanliness in the twentieth century as it became a popular scent for cleaning products.[1074]

While Eldem advocated for regionalism and use of local materials in construction, in the 1930s and 1940s Turkish architects were struggling to find building materials and skilled labor to produce modernist structures and they raised this issue in *Arkitekt*.[1075] In the 1952 article Eldem wrote about the ABSN Nurses' Home for the *Arkitekt*, as a reflection of this problem, he specifically pointed out that the window frames of the building were imported from the U.S. rather than sourced locally.[1076] Lorrin Shepard's annual reports indicated that the ABSN took pride in its American character in terms of nursing standards and methods of education;[1077] this probably applied to the Nurses' Home as Eldem's plans and drawings were sent to the United States for approval,[1078] which could explain the shipment of ready-made fixtures for the building directly from there. While the metal window frames came from the U.S., the linoleum for the floors of the building was imported from the U.K.; the installation of both began by the end of May 1950.[1079]

The plans Eldem published in the 1952 *Arkitekt* article featured English annotations signifying that the patrons of the building were Americans,[1080] and the nomenclature used on these plans differed from their unpublished Turkish versions prepared for the planning of specific features, such as systems related to electricity and plumbing, and emergency precautions such as the implementation of a bomb shelter.[1081] Both published and unpublished plans prepared in English specified the building as a

[1074] Hickman, "Pine Fresh," 104-13.
[1075] See for example Nizamettin Hüsnü, "Modern Mimaride Malzeme ve İşçilik," *Mimar* 33-34 (Sep.-Oct. 1933): 321.
[1076] Eldem, "Amiral Bristol Hastahanesi Paviyonu," 54.
[1077] Shepard wrote "American methods have been taught and American standards maintained." Lorrin A. Shepard, "Brief Report for the Year 1928"; ARIT, "American Hospital of Constantinople."
[1078] Shepard, "American Hospital of Istanbul, 1945."
[1079] American Board Mission newsletter dated May 27, 1950. Luther R. Fowle, "Dear Friends: Volume IV: Number 216-259," ARIT, Istanbul Center Library.
[1080] Eldem, "Amiral Bristol Hastahanesi Paviyonu," 52-55.
[1081] ABHO 02, dra01, dra02, dra03, dra04. Koç University Suna Kıraç Library, Admiral Bristol School of Nursing Collection (1920-1999).

Nurses' Home,[1082] while the Turkish versions referred to the building as "*Amiral Bristol Hastanesi Hastabakıcı Okulu*," using the term "*hastabakıcı*," which, as discussed in Chapter 1, was becoming outdated in the mid-1940s in Turkey to signify a nurse.[1083] Eldem's use of English terminology implied that he was aware of the Nurses' Home typology and its applications in the English-speaking world. However, he chose to use the rather antiquated term 'pavilion' for the ABSN Nurses' Home in the title of his article in *Arkitekt* "Amiral Bristol Hastahanesi Paviyonu" (The Pavilion of the Admiral Bristol Hospital).[1084] In the same issue, Eldem also published an article about the ongoing Hilton Hotel project, for which he chose an even more ambiguous title: "*Turistik Otel*" (Touristic Hotel).[1085] The article he wrote about the Hilton did not even mention the involvement of Gordon Bunshaft, and attributed the hotel project only to SOM and himself.[1086] Eldem believed that architecture had to strive for timelessness rather than follow trends, and he argued in a later seminar paper that Bunshaft's work was problematic because it remained fashionable merely for a short period of time.[1087] Eldem mentioned that Bunshaft indeed returned to Turkey to visit with him in 1984 and to look for inspirations in the architecture of Anatolia.[1088] Eldem's outspoken promotion of his own architectural creations is evident in a drawing he included in his 1952 article about the ABSN Nurses' Home which displayed Eldem's design overshadowing the receding modernist American Hospital building designed by Thompson about a decade earlier (Figure 3.69).[1089] While Eldem expressed his approval of the work of some European and American architects such as Auguste Perret (1874-1954), Le Corbusier (1887-1965), and Frank Lloyd Wright (1867-1959), he wrote that observing and studying their work only made him appreciate the beauty and the greatness of the meaning of the Turkish house on a global scale.[1090]

[1082] Eldem, "Amiral Bristol Hastahanesi Paviyonu," 52-55. Unpublished plans dated October 15, 1949 also referred to the building as a Nurses' Home. ABHO 01, dra01, dra02, dra03, dra04. Koç University Suna Kıraç Library, Admiral Bristol School of Nursing Collection (1920-1999). Many of these plans will be published in a forthcoming publication by Uğurgül Tunç and Lucienne Thys-Şenocak. See, Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[1083] ABHO 02, dra01, dra02, dra03, dra04. Koç University Suna Kıraç Library, Admiral Bristol School of Nursing Collection (1920-1999).
[1084] Eldem, "Amiral Bristol Hastahanesi Paviyonu," 51.
[1085] Ibid., 56-63.
[1086] Ibid., 56.
[1087] Eldem, "Son 120 Sene İçinde Türk Mimarisi," 59. Eldem wrote that Bunshaft's Lever House in Manhattan (b. 1951-1952) had quickly become passé.
[1088] Ibid., 59.
[1089] Eldem, "Amiral Bristol Hastahanesi Paviyonu," 55. See also the forthcoming publication, Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[1090] Eldem, "Son 120 Sene İçinde Türk Mimarisi," 57.

Eldem's criticism extended to the previous generation of Turkish architects as he claimed that the Yalova Thermal Hotel (b. 1934-1937), from which the ABSN Nurses' Home borrowed ideas, was the first masterpiece of the "*Millî Mimari Hareketi*" (The National Architecture Movement) in an attitude dismissing earlier efforts to create a national architecture by late Ottoman and early Republican era architects such as Mimar Kemalettin, Vedat Tek, and his own mentor Giulio Mongeri.[1091] He regarded the first attempts to create a national architecture in the 1860s as the result of Western influence.[1092] According to Eldem, the work of Kemalettin and Mongeri were praiseworthy but failed attempts to revitalize Turkish architecture since they could not go beyond reinterpreting classical Ottoman architecture, and subsequently their work was defeated by Viennese cubism in the early Turkish Republican period.[1093] Eldem refrained from using the terms 'First National' and 'Second National' movements to refer to Turkish architecture;[1094] instead he used the term "*Millî Mimari Hareketi*" (The National Architecture Movement), which he suggested was started by him in 1934.[1095] On the other hand, he had great admiration for the Japanese approach to modernist architecture and believed that Turkish architects had to adopt a similar attitude in incorporating tradition into modernist structures.[1096]

The Interiors

Lorrin Shepard expressed his optimism in the annual report for 1947 in reference to the plans Eldem delivered:

> All through the year a great deal of time and thought has gone into planning for the new Nurses' Residence building, the need for which has been increasingly felt ever since 1939 when the new hospital building was completed and occupied. A building committee was appointed by the Board of Managers at their first meeting of the year under the chairmanship of Mr. Vinton D. Tompkins of the Socony Vacuum Oil Co. It was decided to secure the services of Prof. Sedat[1097] Hakkı Eldem, one of the best known Turkish architects, who planned the Turkish pavilion for the New York World's Fair, and he has designed a very attractive four story building. There will be adequate teaching facilities on the ground floor, with classroom, demonstration room, laboratory, diet kitchen and library. On the other floors there will be comfortable living quarters for 34 pupil nurses, 18 graduates and 3 American nurses. A large recreation room on the top floor, and a sun terrace will provide facilities for good use of leisure.[1098]

[1091] Ibid., 58.
[1092] Ibid., 54.
[1093] Ibid., 55.
[1094] Ibid., 57.
[1095] Ibid., 58.
[1096] Ibid.
[1097] On this occasion Shepard used this alternate spelling of the name. Eldem's name was spelled this way in some of his *Arkitekt* articles as well.
[1098] Shepard, "Annual Report, 1947."

Eldem referred to the ground floor of the ABSN Nurses' Home building as a school, the upper floors as a dormitory, and the top floor as a recreational area and private apartments of the head nurse in his 1952 article in *Arkitekt*.[1099] In his 1950 annual report, Lorrin Shepard expressed that the building exceeded their expectations in every way and provided "a complete teaching unit, bedrooms for thirty-four students, sixteen graduates, three nurse directors and a building supervisor, sitting rooms for students and graduates, an infirmary and a large recreation room with stage."[1100] The building's basement featured areas such as the laundry facilities and the service staff's quarters. The concentration of spaces related to the menial task of laundry in the basement along with the staff responsible for washing and cleaning signaled that the students' primary devotion was to train in the nursing profession (Figure 3.70).

The ground floor of the building featured instructional spaces such as a classroom, laboratory, diet kitchen, and demonstration room where students practiced their nursing skills (Figures 3.71-3.74). These were in line with the Nurses' Home architecture, not only in Europe and North America, but also in other geographies which adopted the typology such as Japan. Furthermore, they displayed similarities with instructional spaces in other women-only schools. For instance, a room similar in function to the diet kitchen was a feature included in the İsmet Paşa Girls' Institute in Ankara, a vocational school designed by Ernst Egli and built between 1930 and 1934.[1101] In this case, this space functioned as an '*aşçılık atölyesi*' (cooking atelier) not to teach about nutrition in a medical sense but primarily to train the students so that they could gain cooking skills for

[1099] Eldem, "Amiral Bristol Hastahanesi Paviyonu," 51, 54.
[1100] "The Admiral Bristol Hospital – Istanbul – Annual Report, 1950," RBF records, RG3, subgroups 1 and 2, box 78, folder 529.
[1101] İsmet Paşa Girls' Institute, situated near the Ankara Girls' School, was also designed by Egli and built between 1930 and 1931. Unlike the İsmet Paşa Girls' Institute, the Ankara Girls' High School focused primarily on intellectual and scientific pursuits and encouraged its students to pursue higher education upon graduation. Besides the cooking atelier, the İsmet Paşa Girls' Institute featured an atelier for instruction on childcare. In 1969, the İsmet Paşa Girl's Institute was renamed as Zübeyde Hanım Girls' Institute after Mustafa Kemal Atatürk's mother. For more information about the architecture of these two schools see, Aslanoğlu, *Erken Cumhuriyet Dönemi Mimarlığı*, 172-73; Bozdoğan, *Modernism and Nation Building*, 85-86; Leyla Alpagut, "Erken Cumhuriyet Döneminde Kızların Eğitimi için Ankara'da İki Önemli Yapı: İsmet Paşa Kız Enstitüsü ve Kız Lisesi," *Mimarlık* 351 (Jan.-Feb., 2010): 73-8; Oya Atalay Franck, *Politika ve Mimarlık: Ernst Egli ve Türkiye'de Modernliğin Arayışı (1927-1940)* (Ankara: TMMOB Mimarlar Odası, 2015), 75-85; Kezer, *Building Modern Turkey*, 212-20; Pelin Öngören, "Women's Education through the Lens of Visibility: Ankara İsmet Paşa Girls' Institute in the 1930s," in *Spaces / Times / Peoples: Domesticity, Dwelling and Architectural History*. December 12–13, 2013 METU Faculty of Architecture, Kubbealtı Hall. Graduate Program in Architectural History, Department of Architecture, Middle East Technical University / Symposium Papers, ed. Lale Özgenel, (Ankara, METU Faculty of Architecture, 2016), 54; Kıvanç Kılınç, "İsmet Paşa Kız Enstitüsü," and "Ankara Kız Lisesi," in *Ernst A. Egli: Türkiye'ye Katkılar – Yerel Yorumlar, Eğitimde Program, Pratiğin Muhasebesi,* eds. Ali Cengizkan, Selda Bancı, N. Müge Cengizkan (Ankara: TMMOB Mimarlar Odası, 2017), 197-213.

a possible future career as cooks.[1102] These instructional kitchens, which helped students learn about nutrition and cooking, varied in shape and size to accommodate different numbers of students. The one at St. Luke's Hospital's School of Nursing, founded in 1920, like the ABSN by American missionaries in Tokyo, Japan, resembled a laboratory with all students sharing one long counter (Figure 3.75).[1103] The İsmet Paşa Girls' Institute's version divided the space into compact kitchenette units reminiscent of Margerete Schütte-Lihotzky's (1897-2000) design of the Frankfurt Kitchen, which she had developed in 1926 for a social housing project designed by Ernst May (1886-1970) in Frankfurt, Germany (Figure 3.76).[1104] Schütte-Lihotzky, like Egli, was born in Vienna and in 1937 she moved to Turkey along with many other dissidents exiled from German-speaking countries who were escaping the National Socialist Party rule.[1105] The influence of Schütte-Lihotzky's kitchen concept was evident in the design and spatial organization of the kitchenettes in the cooking atelier of the İsmet Paşa Girls' Institute. The ABSN's diet kitchen was smaller in size in comparison to these two examples and had a rather homelike feel to it consistent with both Eldem's passion about domestic architecture and the Nurses' Home's goal to provide a home-like environment (Figure 3.77). In keeping with the allusion to the family home, the label chosen for the head nurse's room on the English version of the ground floor was "House Mother,"[1106] whereas in the Turkish version a more institutional-sounding term, "*okul şefi*" meaning "the master of the school" appeared (Figures 3.78-3.79).[1107] The ground floor also had a library, a sitting room for graduate nurses, a students' reception room, a room for the private duty nurses, and four single-occupancy bedrooms to accommodate graduate nurses.

The first and second floors housed what Eldem called the "*yurd*" (student dormitory) sections of the building (Figures 3.80-3.82).[1108] The first floor featured four single-occupancy bedrooms reserved for graduate nurses; these rooms were grouped in

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[1102] Franck, *Politika ve Mimarlık*, 78; Kılınç, "İsmet Paşa Kız Enstitüsü," and "Ankara Kız Lisesi," 199.
[1103] "A College of Nursing: St. Luke's International Medical Center, Tokyo," *The American Journal of Nursing* 33, no. 10 (Oct. 1933): 932.
[1104] Karen Melching, "Frankfurt Kitchen: Patina Follows Function," *Conservation Journal* 53 (Summer 2006), accessed Mar. 11, 2024, http://www.vam.ac.uk/content/journals/conservation-journal/issue-53/frankfurt-kitchen-patina-follows-function/.
[1105] Reisman, "Modernization of Turkey," 57-59; Nicolai, *Modern ve Sürgün*. In 1938, while working for the Turkish Ministry of Education, Lihotzky proposed an extension for Egli's Ankara Girls' High School building; however, her plans remained unrealized. See Alpagut, "Erken Cumhuriyet Döneminde Kızların Eğitimi," 73-78.
[1106] Eldem, "Amiral Bristol Hastahanesi Paviyonu," 52.
[1107] ABHO 05, dra 02, Koç University Suna Kıraç Library, Admiral Bristol School of Nursing Collection.
[1108] Eldem, "Amiral Bristol Hastahanesi Paviyonu," 51.

pairs with each group sharing an ensuite wash basin and water closet unit. There were shared bathrooms and water closet units for the nine double-occupancy bedrooms on this floor. On one side of the second floor, there were ten single-occupancy bedrooms for the graduate nurses grouped in pairs just like the arrangement on the first floor with each pair of rooms sharing an ensuite sanitary unit. On the other side, there were ten single-occupancy rooms for senior nursing students, which did not feature internal sanitary units. This floor featured shared bathroom and water closet units like the first floor as well as a laundry room, a linen closet, and a storage room for trunks. The organization of these two 'dormitory' floors clearly reflected the hierarchical structure at the ABSN demonstrating that the students and graduate nurses enjoyed additional privacy and amenities as they moved up the ladder in their training and practice of the nursing profession.

The third floor provided students with a recreational space featuring a stage where they could perform theatrical performances (Figures 3.83-3.84). This floor featured three bedrooms resembling studio apartment units with their private bathrooms and sitting rooms. These units were the private quarters of the senior instructors and shared trunk storage, a guest room, a kitchen, a laundry facility, and a dressing room (Figure 3.85). The floor had a second communal kitchen adjacent to the recreational space which the students could use. The projecting balconies got wider on each floor and on the third floor they merged into a terrace which wrapped around the entire floor to provide the best views of the city from the ABSN Nurses' Home.

In the years 1951-1952, Lorrin Shepard was hoping that Turkish society would appreciate his hospital's efforts to train nurses in a safe and efficient building upon the completion of the ABSN Nurses' Home building:

> The facilities provided by the New building have made the work of instruction easier and more effective. Our great hope and desire is that the building be fully occupied and utilized. The fulfillment of the hope depends on a greatly increased awareness on the part of the Turkish people of the importance of nursing as a profession, and a willingness to have their girls become nurses.[1109]

In 1952, fifteen students enrolled in the ABSN, which at the time was one of the largest classes of the school's history.[1110]

[1109] Lorrin A. Shepard, "The Admiral Bristol Hospital Istanbul: Annual Report, 1951," Harvard Divinity School Library, BMS 1136, 9.
[1110] Lorrin A. Shepard, "The Admiral Bristol Hospital Istanbul: Annual Report, 1952," Harvard Divinity School Library, BMS 1136, 9.

The Lived Experience

While Eldem's design for the ABSN Nurses' Home was initially for a detached structure, probably at the request of patrons and administrators, it became attached to the Admiral Bristol Hospital via an enclosed bridge which provided nurses and students quick access between their living quarters and place of work.[1111] While this modification maximized labor in line with scientific management theories, the narrative of the nurses who lived and studied in the ABSN Nurses' Home in the 1970s suggested the presence of direct physical connection to the hospital building improved their sensory and lived experiences of the space as they referred to the bridge as "*gönül köprüsü*" (bridge of the heart), a Turkish term signifying an affectionate connection (Figure 3.86).[1112] This clearly demonstrated that the ways in which its inhabitants interacted with the ABSN building allowed them to engage in placemaking practices which produced a lived space that carried intangible qualities and evoked emotions beyond the tangible conceived and perceived spaces that Eldem and the patrons of the ABSN had envisioned.[1113]

Although smaller in scale when compared to the amenities nursing schools of hospitals in New York provided,[1114] the ABSN Nurses' Home included facilities which enabled nursing students to engage in athletic activities such as volleyball and basketball (Figures 3.87-3.89).[1115] Besides the availability of athletic facilities, our interviews with former inhabitants of the building revealed that the ABSN Nurses' Home provided the students with amenities which were considered luxurious in other schools in Turkey at that time. These included the way they dined in the building with high quality meals served on porcelain tableware and the presence of staff to wash their laundry.[1116] Most students of the ABSN came from modest backgrounds and working-class families and

[1111] Winkler and Rountree, *Amerikan Hastanesi*, 92.
[1112] Interviews with Ayşe Pişkin (Feb. 21, 2023) and Ülkü Deniz Özsu (Feb. 28, 2023). Koç University IRB approval number: 2021.099.IRB3.060.
[1113] For more information on Lefebvre's spatial triad of conceived, perceived, and lived spaces see, Henri Lefebvre, *La production de l'espace* (Paris: Anthropos, 1974).
[1114] Willis, Goad, and Logan, *Architecture and the Modern Hospital*, 64-87.
[1115] ABHO 01_07, phg 21, 22, 23, ABHO Collection, Suna Kıraç Library, Koç University. Interviews with Ayşe Pişkin (Feb. 21, 2023) and Ülkü Deniz Özsu (Feb. 28, 2023). Koç University IRB approval number: 2021.099.IRB3.060. In its early years, the Young Women's Christian Association (YWCA) of America was in charge of the recreation classes at the school. For more information, see Lydia W. Anderson, "Report on the School for Nurses," Jun. 15, 1923, 13-4 (ACG Archives box 16A, folder 31, Columbia University RBML). See also Rifat N. Bali, "A Short History of Young Women's Christian Association (YWCA) Activities in Turkey," in *A Bridge between Cultures: Studies on Ottoman and Republican Turkey in Memory of Ali İhsan Bagis,* ed. Sinan Kuneralp (Piscataway, NJ: Gorgias Press, 2010), 193-250.
[1116] Interviews with Ayşe Pişkin (Feb. 21, 2023) and Ülkü Deniz Özsu (Feb. 28, 2023). Koç University IRB approval number: 2021.099.IRB3.060.

were recipients of scholarships from various American organizations. Some of the students entered the ABSN as young as 14 years of age and remained there as nurses after the completion of their training. Eldem's design facilitated the patrons' and instructors' goal to provide the students with a supervised and protected environment. Former students mentioned that the medical director would greet them as soon as they arrived in the hospital building through the bridge connecting it to the ABSN Nurses' Home, and he would quickly inspect them to ensure that they were ready for their shift, in top shape and dressed in their spotless uniforms.[1117]

3.7 The Admiral Bristol (American) Hospital and School of Nursing after 1950

After the new Nurses' Home was built in 1950, Lorrin Shepard focused on raising funds to improve the hospital building designed by W. Stuart Thompson by extending the top floor of the building.[1118] This new addition would house ten beds for patients undergoing surgical treatment of pulmonary tuberculosis, a small laboratory for blood tests, and living quarters for six interns (Figure 3.90).[1119] By June 1951, half of the U.S. $10,000 needed for this project was already pledged, and Shepard contacted the Rockefeller Brothers Fund (RBF) in New York and requested the remaining amount to realize the plan to extend the hospital building.[1120] In March 1952 the RBF provided the Admiral Bristol Hospital with a gift of US $5,000 to realize the project to extend the building designed by Thompson.[1121] The new extension was ready for use in October 1953 (Figure 3.91).[1122] Thompson's building continued to be altered in subsequent years as new buildings were added to the Admiral Bristol Hospital complex. One of the new structures built on the plot was the Barclay Acheson building built between 1972 and 1973 adjacent to the main hospital building designed by Thompson.[1123] With funds provided by the United States Agency for International Development (USAID) two additional stories were added to Thompson's building to connect it to the Barclay Acheson building (Figure 3.92).[1124] Throughout the 1970s and 1980s, the USAID remained a consistent donor to the Admiral

[1117] Ibid.
[1118] RBF records, RG3, subgroups 1 and 2, box 78, folder 529.
[1119] Ibid.
[1120] Ibid.
[1121] Ibid.
[1122] Winkler and Rountree, *Amerikan Hastanesi*, 99.
[1123] Ibid., 139.
[1124] Ibid., 137.

Bristol Hospital and School of Nursing.[1125] In 1983, with funds provided by the USAID further extensions which include an entrance hall, a café, a physiotherapy department, additional laboratories, and a laundry area were added to the hospital building designed by Thompson (Figure 3.93).[1126]

Like the hospital building, the ABSN Nurses' Home continued to improve soon after its opening with added features in 1952 such as the instalment of fluorescent lighting in the classroom and the library, and soundproofing.[1127] By the 1960s, the enrolment numbers would far exceed that of 1952 and at that time students who had family nearby were no longer required to live in the Nurses' Home, which made it possible for the ABSN to accept more students.[1128] As the nursing profession evolved, so did the ABSN Nurses' Home building designed by Eldem to make room for spaces such as computer and audiovisual labs, dedicated areas and features to respond to the increased need for documentation and computerization,[1129] and offices for accounting and other administrative tasks. These came at the expense of student rooms, recreation areas, and now outdated features such as the diet kitchen (Figures 3.94-3.95).[1130] At that point, Eldem's building functionally transformed into an educational building and lost its residential characteristics that made it a Nurses' Home. In 1950 the ABSN Nurses' Home had opened its doors with the intension to provide housing, training, and recreation spaces for young unmarried women, and to facilitate the development of its inhabitants' personalities in a certain manner. As Turkish society changed, and particularly the role of women in that society, the spatial needs in buildings like the ABSN were changing as well.

By the 1990s, the increasing numbers of nursing programs in Turkish universities mitigated the value of hospital training schools such as the ABSN. The Vehbi Koç Foundation (VKV) acquired the Admiral Bristol Hospital in 1995 along with the ABSN after which the school temporarily moved into a nearby building as the remodeling project of Eldem's ABSN building and other facilities of the hospital complex began under the

[1125] Ibid., 151-95.
[1126] Ibid., 173.
[1127] Shepard, "Annual Report, 1952."
[1128] Interviews with Ayşe Pişkin (Feb. 21, 2023) and Ülkü Deniz Özsu (Feb. 28, 2023). Koç University IRB approval number: 2021.099.IRB3.060.
[1129] On the subject of computerization in hospitals and healthcare institutions see David Michael Theodore, "Towards a New Hospital Architecture: Architecture, Medicine, and Computation, 1960-1975" (PhD diss., Harvard University, 2014).
[1130] ABHO 07, dra02. Koç University Suna Kıraç Library, Admiral Bristol School of Nursing Collection (1920-1999).

supervision of architect Can Çakmakçıoğlu (1950-).[1131] In February 1999 the ABSN became a part of Koç University as its Faculty of Nursing granting undergraduate and graduate degrees to students of all genders.[1132] In the same year, both due to concerns about earthquake resistance following the Marmara earthquake of August 17, 1999 and to rebuild the hospital with a design resembling a shopping mall in line with the latest trends in international hospital architecture, the structures designed by Sedad Hakkı Eldem and W. Stuart Thompson were demolished along with the newer buildings on the plot.[1133]

3.8 Concluding Remarks

Establishing hospitals and supporting healthcare-related institutions was part of the United States' diplomatic agenda in the early twentieth century. During the period between World War I and World War II, organizations such as the RF played an important role in the strengthening of Turkish-American relations through projects such as the CHI.

Unlike the British presence in the Ottoman Empire, the presence of the U.S. in Turkey functioned as a partnership with the Turkish government through ventures such as the American Hospital and its School of Nursing as these projects aimed to provide services to the people of Turkey as well as the expatriate community of US citizens. As the Cold War became a reality of the post-World War II world, Turkey's strategic importance for the United States reached a new high and the new building of the ABSN, completed on the eve of Turkey's entry into NATO, became a concrete expression of the changing nature of the relationship between the two countries, particularly with the hiring of Sedad Hakkı Eldem.

While the Turkish Republic was keen on providing its citizens with free healthcare in the 1920s and 1930s, the American Hospital was also providing limited pro bono services with the help of the AWH. However, this institution eventually became a symbol of commercialization of the healthcare sector as it catered to the elites of Turkish society

[1131] Interviews with Can Çakmakçıoğlu (Mar. 7 and 9, 2022); Interviews with Ayşe Pişkin (Feb. 21, 2023). Koç University IRB approval number: 2021.099.IRB3.060.
[1132] "Amiral Bristol Hemşirelik Okulu," VKV Ansiklopedisi, accessed Jan. 29, 2024, https://ansiklopedi.vkv.org.tr/Kategoriler/Kurumlar/Vehbi-Koc-Kurumlari-Vakfi/Amiral-Bristol-Hemsirelik-Okulu.
[1133] Building records of the American Hospital; "Amerikan Hastanesi'nin yeni blokları açıldı," *Milliyet*, June 30, 2007, accessed Jan. 29, 2024, https://www.milliyet.com.tr/pembenar/amerikan-hastanesinin-yeni-bloklari-acildi-204199.

particularly as a place to give birth. Similarly, Robert College and the American College for Girls in Arnavutköy became the school of choice for a sector of the Turkish elite, contributing to the creation of an American-educated ruling class.[1134]

The 1950s in Istanbul was a period when the demolition of cultural heritage sites accelerated,[1135] and it was also during this time that American establishments such as the Hilton Hotel introduced Istanbulites to new amenities and promoted an American way of living and leisurely consumption particularly among the elites in spaces co-designed by Eldem and Bunshaft.[1136] In the 1970s and 1980s, to meet the demand for private healthcare in Istanbul, the Admiral Bristol Hospital, formerly known as the American Hospital, added new buildings to its plot at the expense of pine trees which Sedad Hakkı Eldem had adamantly preserved in the late 1940s.[1137] By the 1990s the private health sector in Turkey grew significantly and in the 2000s hospitals in Turkey, as in many parts of the world, started to look like shopping malls and upscale hotels. The American Hospital in Istanbul, with its new mall-style hospital complex built between 1999 and 2007 by the Turkish architect Fahrettin Ayanlar (1944-2015),[1138] now offered rooms which included luxury features for client-patients like separate reception areas in their private rooms where they could greet their guests and offer them gift bags and an assortment of snacks.[1139]

[1134] These schools produced two prime ministers, Bülent Ecevit (Robert College) and Tansu Çiller (American College for Girls, later Robert College for her undergraduate degree). Ecevit was also a recipient of an RF fellowship along with many other decision makers of Turkey such as Deniz Baykal who served as the Deputy Prime Minister and Foreign Minister of the Turkish Republic. Ahmet Kahraman, *Hayaletler Prensi* (Istanbul: V Yayınları, 1990); Faruk Bildirici, *Maskeli Leydi: Tekmili Birden* (Ankara: Ümit Yayıncılık, 1998); Mustafa Çolak, *Bülent Ecevit: Karaoğlan* (Istanbul: İletişim, 2016).

[1135] See for example Barış Ertem, "İstanbul İmarındaki Tarihi Eser Kaybının Tarih ve Turizm Açısından İncelenmesi: Karaköy-Kabataş Bölgesi," *ODTÜ Sosyal Bilimler Enstitüsü Sosyal Bilimler Araştırmaları Dergisi* 2, no. 4 (Dec. 2011): 61-79; Işıl Tuna, "1950-1960 Yılları Arasında İstanbul'da Kentleşme ve İmar Faaliyetlerine Genel Bakış," *MSGSÜ Sosyal Bilimler Dergisi* 3, no. 20 (2019): 393-409; İlker Bayram and Selma Göktürk Çetinkaya, "Menderes Hükümeti Döneminde Vatan ve Millet Caddeleri Yapılırken Yıkılan Camiler," *Bartın Üniversitesi İktisadi ve İdari Bilimler Fakültesi Dergisi* 13, no. 26 (2022): 149-74.

[1136] Adalet, *Hotels and Highways*, 162.

[1137] Besides the Barclay Acheson building (1973), a ten-story polyclinic building was built on the plot for a total cost of US $5,200,000 in 1988. Winkler and Rountree, *Amerikan Hastanesi*, 189-93.

[1138] "Ayanlar, (Ramazan) Fahrettin," VKV Ansiklopedisi, accessed Feb. 1, 2024, https://encyclopedia.vkv.org.tr/Categories/People/Other/Ayanlar,-(Ramazan)-Fahrettin. On mall-style hospital architecture, see Annmarie Adams, "Canadian hospital architecture: How we got here," *Canadian Medical Association Journal* 188, no. 5 (Mar. 2015): 370-71.

[1139] Interview with a person who gave birth at the American Hospital in the 2000s (Sep. 23, 2021); Interviews with the current staff of the American Hospital (Mar. 16, 2022); Interviews with Erdinç Kadıoğlu (Mar. 30 and Apr. 3, 2024). Koç University IRB approval number: 2021.099.IRB3.060. The new complex encompasses eight blocks which were built in phases over an eight-year period between 1999 and 2007.

This chapter examined healthcare institutions founded or supported by American individuals and organizations in Turkey. The buildings associated with the case studies I analyzed in this chapter are either demolished or have been abandoned today in 2024, and the institutions which continue to exist in newer buildings like the American Hospital and the ABSN, known today as the Koç University School of Nursing, are no longer governed by a board in the United States. With their diverse histories, the CHI complex, American Hospital, and the ABSN, form an important component of the complex and cosmopolitan foundational years of the Turkish Republic and its experiences with healthcare architecture.

Chapter 4

CONCLUSION

This dissertation presented an architectural history of healthcare institutions during a period of transition from the final years of the Ottoman Empire through the foundational years of the Turkish Republic. The structures analyzed here were predominantly established by, or with the support of foreigners in the Ottoman Empire, which later became the Turkish Republic. As mentioned throughout this thesis, Ottoman and Turkish patrons and architects were also engaged and heavily invested in the act of establishing, designing, and building hospitals and other healthcare institutions during this time. Many of the late Ottoman hospital projects built by the Ottoman state or other 'local' patrons have been studied in academic publications, and some are examined here as well.[1140] However, healthcare institutions founded and built in the geographies of the late Ottoman Empire and the early Turkish Republic, by or with foreign entities have not been sufficiently researched. This PhD thesis, along with a forthcoming article coauthored with Lucienne Thys-Şenocak about some of the American supported healthcare projects in the late Ottoman/early Turkish Republic eras,[1141] help to fill this gap by explaining why and how foreign powers of Britain and the United States became involved in building healthcare institutions at this time in this region.

The information discovered about both the patronage and design processes of the physical spaces of the healthcare institutions discussed in this thesis problematizes previous arguments about the nature of foreign architectural patronage in the Ottoman Empire. As an example, Mark Crinson, in his 1993 publication *Empire Building: Orientalism and Victorian Architecture,* proposes the idea of 'informal imperialism' as a way to think about the power and patronage dynamics embedded in architectural projects of the time.[1142] Implicit in this notion of 'informal imperialism' is an assumption that, if applied to the buildings studied in this thesis, the negotiations and actions of the British and Americans for their healthcare projects were somehow unofficial, and uncontrolled

[1140] Some of these publications are Yavuz, "Batılılaşma Döneminde Osmanlı Sağlık Kuruluşları," 123-42; Tonbul and Forta, *Tarihi Hastaneler,* 212-15; Atmaca and Demirgüç, "Türkiye Tasarım Kronolojisi: Sağlık"; Altay, *Atatürk Döneminde Numune Hastaneleri*; Şener and Kishali, "Conserving Modern Architectural Heritage," 88-111; Nevrim, "Design Evolution of Healthcare Buildings."
[1141] Tunç and Thys-Şenocak, "American Healthcare Architecture in Istanbul."
[1142] Crinson, *Empire Building.*

by the Ottoman state. It assumes that the Ottoman state lacked agency to dictate how these foreign healthcare projects and their buildings developed. However, archival sources used in this thesis suggest that both Britain and the United States had to abide by myriad Ottoman, and later Turkish rules and regulations when they wanted to establish these institutions or embark on architectural projects related to healthcare in the Ottoman Empire. For instance, the British Seamen's Hospital had to be built on a limited space after the other structures of the British compound in Galata were demolished since the Ottoman authorities did not approve the British patrons' request to purchase further land.

Additionally, the training and practice of medicine were strictly regulated in both the Ottoman Empire and the Turkish Republic as evidenced by the hardships foreign or foreign-educated physicians experienced when they wanted to offer healthcare services in the Ottoman Empire. At times the obstacles were insurmountable, as was the case of the ACG School of Medicine which had to shut down after the Law of Unification of Education in the Turkish Republic was passed. From the research conducted to write the biographies of the buildings in this thesis, it is clear that the administrative structures of the late Ottoman state, and then the Turkish Republic, continued to exercise agency and control over foreign healthcare projects in both a formal and official manner. This process cannot therefore be accurately described as 'informal imperialism.'

As this thesis has demonstrated, in the case of the foreign healthcare projects examined here, the motivating factors for commissioning these late nineteenth and early twentieth-century projects were not purely altruistic, apolitical, or non-partisan. The establishments examined here, and their architectural products were intended to serve as instruments that could help their patrons assert political, economic, and diplomatic power. However, this period of architectural history in the Ottoman Empire and early Turkish Republic cannot be explained adequately using post-colonial theory, such as that proposed by Edward Said, Rana Kabbani, and Gayatri Chakravorty Spivak.[1143]

The Ottoman state was engaged in diverse practices of architectural patronage in the late nineteenth and early twentieth centuries. It created healthcare buildings which were intended to promote the beneficence of the sultan and his family, as well as the power of the Ottoman state. Moreover, the Ottoman state itself engaged in colonializing

[1143] Said, *Orientalism*; Edward W. Said, *Culture and Imperialism* (New York: Knopf, 1993); Rana Kabbani, *Europe's Myths of Orient: Devise and Rule* (London: Pandora, 1986); Spivak, "Can the Subaltern Speak?"

actions in its own provincial territories, and even exported some of its healthcare architecture to Europe. Hence, the traditional categories and theoretical models positing a strict divide between the colonized and colonizer that have characterized some post-colonial scholarship lack the nuances and complexities needed to understand the late Ottoman/early Republican political, architectural, and healthcare landscape at this time.

Certainly, the British built the British Seamen's Hospital in Istanbul as a symbol of its imperial interests and aspirations. Yet Sultan Abdulhamid II also built hospitals in Ottoman lands to display his might and munificence to his subjects in the same years. Additionally, the Ottoman sultan commissioned healthcare architecture outside of the Empire to advertise his political presence in Europe, moving beyond the Empire's borders. For instance, he had plans prepared by the late Ottoman era architect Mimar Kemalettin to build a hospital in Berlin and call it the Berlin '*Hamidiye*' (Hamidian) Hospital (Figure 2.11). The Ottoman sultan also employed members of the British architectural cadre in Istanbul to build the empire's hospitals, as was the case of the Ottoman hospital buildings such as the military hospital in Gümüşsuyu and the Ottoman Naval Hospital in Kasımpaşa designed by William James Smith (Figure 2.14).

Built between 1903 and 1950, the buildings examined in this thesis showcase the transformations in healthcare institutions, their functions, and what they meant to those who built and used them. As works of architecture they tell the personal stories of the architects who designed them, and also serve as evidence of the stylistic and typological repertoire for healthcare architecture at this time in these different regions of the world. The British Seamen's Hospital in Istanbul, designed by Charles Holden and H. Percy Adams was built between 1903 and 1904 as a vertical pavilion plan hospital which included private wards, as well as accommodations for nurses. By the time W. Stuart Thompson designed his proposals for the American Hospital in Istanbul in the 1930s, the vertical pavilions of the British Seamen's Hospital in the city had become outdated. While Theodor Jost and Robert Oerley were working on the CHI buildings in late 1920s and early 1930s in Ankara, hospitals and other healthcare institutions were promoted as places for the healthcare and wellbeing of the citizens of a new nation. As such the design of the CHI complex was intended to impact and regulate the health of the entire population of the Turkish Republic.

If the healthcare institutions examined in this thesis are interpreted from a Foucauldian perspective, we can consider the larger shifts in healthcare and its architecture as part of the rise of the modern state and its 'governmental rationality,' which regarded the "health and wellbeing of the population in general as one of the essential objectives of political power."[1144] For instance, regarding the CHI complex in Ankara, during a meeting with the RF representatives in November 1928, İsmet Paşa (İnönü) defined the provision of healthcare services of the newly established Turkish Republic to its citizens as "one of the methods by which the government can get in direct control with the people."[1145] However, the direct equation between political power, patronage and the architecture of the buildings is not so simple. The buildings designed by Jost and Oerley might have been built to reflect the political rhetoric of their patrons, but their architecture was not necessarily a factor in controlling the people through healthcare. The activities of the scientists and public health specialists working for the CHI helped eradicate infectious diseases and increase life expectancy in the Turkish Republic. However, this important work did not take place solely in the CHI buildings designed by Jost and Oerley. The diagnostic and treatment facilities inherited from the Ottoman Empire, which differed in architectural style, continued to be used in the early years of the Turkish Republic, along with the newly built healthcare buildings designed by Europeans.

Preliminary findings about the 'user experience' of some of the other healthcare buildings investigated here, such as the ABSN Nurses' Home, are also indicative of a more complex phenomenon and warrant further research. Sedad Hakkı Eldem's ABSN Nurses' Home stands as testimony to a transitional period in women's history, and the construction of this type of architecture in Istanbul in middle of the twentieth century took on a different meaning when compared to earlier versions of Nurses Homes in the U.K. or North America. Interpreting Eldem's ABSN Nurses' Home as an oppressive structure designed to control the lives of its female inhabitants would fail to consider the admiration that the young women who lived and studied in that building had for that building. They pointed out that living in the ABSN was liberating as it provided a space for young women

[1144] Chang, *Genealogy of Tropical Architecture*, 96.
[1145] RF Records, RG2, 805, box 12, folder 101.

to live and to work in Istanbul and gave them a chance to earn an income and reside in less restricted environments, when compared to their family homes.[1146]

There is no doubt that for the United States, as an emerging superpower in the early twentieth century, hospital building activities and the establishment of healthcare institutions around the world certainly allowed the country to expand its influence abroad. The American Hospital building designed by W. Stuart Thompson and built in 1939 resembled the modernist buildings which were emerging throughout the Turkish Republic, many of these built by German-speaking architects employed by the state. The style selected for the American Hospital could hardly be considered as representative or identified as exclusively American. The modernist vocabulary Thompson used for that building was prevalent in Turkey prior to its construction and was used for a wide range of building types in many other parts of the world.

Although the exteriors and general appearance of these buildings were not the main focus of discussion for their American patrons or financiers, as understood from correspondence and archival reports, particularly for the American Hospital and the ABSN Nurses' Home, the planning of the interiors of these hospitals and healthcare buildings were subject to the approval of American experts. For instance, W. Stuart Thompson consulted with Richard N. Pierson, a physician based in New York, while designing the American Hospital in Istanbul to ensure that the hospital was built in accordance with American standards of the time.[1147] In a similar manner, Eldem's preliminary floor plans for the ABSN Nurses' Home were sent to the United States for inspection and approval.[1148] While the exteriors of these buildings might be read as political or diplomatic symbols, their interiors were carefully planned to serve the contemporary healthcare needs which their respective eras demanded.

The modernist CHI complex in Ankara was a different case as the RF was not involved in any of the architectural decisions for the buildings in the complex designed by Theodor Jost and Robert Oerley. Rather it was the new government and president of the Turkish Republic who appointed two Austrian architects to this project and decided on the modernist style of the buildings. That modernist aesthetic was in keeping with the

[1146] Interviews with Ayşe Pişkin (Feb. 21, 2023) and Ülkü Deniz Özsu (Feb. 28, 2023). Koç University IRB approval number: 2021.099.IRB3.060.
[1147] "Istanbul Hospital to get new home," 9.
[1148] Shepard, "American Hospital of Istanbul, 1945."

plan of the Republican leaders to create a new European style capital for Turkey in central Anatolia. A similar modernist look was chosen for the Ankara healthcare project, but for quite different reasons: to display the medical and scientific achievements of the Turkish Republic and to be the modernist face of a health-conscious population the Republican leaders wanted to create. The latest work of architecture examined in this thesis, ABSN Nurses' Home designed by the Turkish architect Sedad Hakkı Eldem in the 1940s and built between 1949 and 1950, also employed a modernist aesthetic but sought out the traditional Turkish home as a way to localize the modern.

None of the healthcare buildings studied here have continued to serve in their original capacity. The British Seamen's Hospital is the closest to its original iteration as it still functions as a hospital but is no longer British and is a Turkish hospital that focuses on ophthalmology. However, in recent there have been some talks about repurposing the building designed by Charles Holden and H. Percy Adams as a hotel.[1149] The building went through several modifications in the years 2014-2016 which were carried out by the Istanbul-based architectural firm YD Mimarlık; and it was connected to the newer buildings of the Prof. N. Reşat Belger Beyoğlu Ophthalmic Education and Research Hospital with the addition of an enclosed bridge.[1150] The CHI buildings in Ankara, which once represented the newly founded Turkish Republic's modernist vision of itself as a public health provider, have been abandoned since 2011.[1151] Although there were restoration plans prepared by architects Mehmet Emin Yılmaz and Fevzi Çügen in 2010 to repurpose Jost's CHI building as a museum, these were never realized.[1152] In the wake of the COVID-19 pandemic, the Turkish Ministry of Health announced in 2021 that the CHI would reopen by the end of 2022 under the name '*Aşı ve Biyoteknoloji Üssü*' (Base for Vaccine and Biotechnology), but in new facilities which were planned to be built in Ankara.[1153] In early 2022, the first phase of the project to build a new complex was

[1149] Interviews with the current staff of the Prof. Dr. N. Reşat Belger Beyoğlu Ophthalmic Education and Research Hospital (the present-day occupants of the BSH building designed by Holden and Adams), March 1, 2022. Koç University IRB approval number: 2021.099.IRB3.060.
[1150] YD Mimarlık, "Reşat Belger Göz Hastanesi," accessed May 29, 2024, https://www.yd.com.tr/resat-belger-goz-hastanesi.html.
[1151] Doruk Çakar, "Hıfzıssıhha Tarih Oluyor," *Akşam*, Aug. 26, 2011, accessed May 29, 2024, https://www.aksam.com.tr/guncel/hifzisihha-tarih-oluyor--63803h/haber-63803.
[1152] Yılmaz and Çügen, "Hıfzıssıhha Enstitüsü," 32-6.
[1153] Burcu Çalık Göçümlü, "Türkiye'nin 'Aşı ve Biyoteknoloji Üssü' 2022 Yılı Sonunda Hizmete Alınacak," *Anadolu Ajansı*, Dec. 31, 2021, accessed May 29, 2024, https://web.archive.org/web/20211231085329/https://www.aa.com.tr/tr/saglik/turkiyenin-asi-ve-biyoteknoloji-ussu-2022-yili-sonunda-hizmete-alinacak-/2462019#.

awarded to YDA *İnşaat*, a local construction firm.[1154] As of April 2024, the project remains under construction.[1155] The new complex is being built on a different site and today in 2024 the buildings of the CHI complex designed by Thedor Jost and Robert Oerley remain abandoned. On the other hand, the buildings of the American Hospital complex, including W. Stuart Thompson's hospital building and Sedad Hakkı Eldem's Nurses' Home, in the Nişantaşı neighborhood of Istanbul were demolished in 1999 to make room for a mall-style hospital complex to accommodate the institution now known as the Vehbi Koç Foundation American Hospital (*VKV Amerikan Hastanesi*). This new hospital was designed by Fahrettin Ayanlar. Koç University School of Nursing (KUSON), the successor of the ABSN, is today located within the Koç University Hospital (KUH) in the Topkapı district of Istanbul, about ten kilometers away from the Nişantaşı neighborhood. As of 2024, the KUH, KUSON, and Koç University School of Medicine (KUSOM) started offering nurses, as well as nursing and medical students dormitory-style furnished single-occupancy rooms with private bathrooms in a newly-built residential complex situated right next to the Koç University Hospital building in Topkapı, Istanbul.[1156] Although this recent development does not necessarily imply a return of the Nurses' Home typology, it suggests that a similar typology might emerge in response to the accommodation needs of healthcare workers, a phenomenon which became particularly evident during the COVID-19 pandemic.[1157] The fact that Koç University has recently commissioned new facilities to accommodate the residential needs of nurses and students of KUH, KUSON, and KUSOM is evidence that the ideas and functionality of buildings such as Sedad Hakkı Eldem's ABSN Nurses' Home are still valid, even though the building itself might no longer exist.

The lifespan of the healthcare structures examined in this thesis were rather short. They were modified, demolished, replaced, or abandoned partly due to the belief that

[1154] Pınar Demircan, "Türkiye Aşı ve Biyoteknoloji Üssü'nün İlk Etabını YDA İnşaat Yapacak!," *Emlak Kulisi*, Mar. 3, 2022, accessed May 29, 2024, https://emlakkulisi.com.tr/turkiye-asi-ve-biyoteknoloji-ussunun-ilk-etabini-yda-insaat-yapacak/696443.
[1155] "Türkiye Aşı Üretim Üssü Olacak: Geri Sayım Başladı! Hıfzıssıhha'yla Yüzde Sekseni Yerlileşecek," *Yeni Şafak*, Apr. 25, 2024, accessed May 29, 2024, https://www.yenisafak.com/hayat/turkiye-asi-uretim-ussu-olacak-geri-sayim-basladi-hifzissihhayla-yuzde-86si-yerlilesecek-4616970.
[1156] Prior to the completion of this new building complex, nurses and nursing students were offered shared accommodations in nearby residential buildings. A small fee is deducted from the nurses' salaries if they wish to live in this new building. Interviews with KUH staff, May 27, 2024. Koç University IRB approval number: 2021.099.IRB3.060
[1157] See forthcoming publication Uğurgül Tunç, "Housing Solutions for Healthcare Workers: The Heritage of the Nurses' Home and Its Potential for Healthcare Architecture of the Future," *Built Heritage*, special issue: Twentieth-Century Built Heritage of Health: Challenges and Opportunities (Dec. 2024).

these early twentieth-century buildings could no longer accommodate the needs of twenty-first-century medicine. However, architects designing the healthcare buildings of the future can learn from these buildings. The late nineteenth and early-twentieth century healthcare structures prioritized elements such as ventilation and light, provided healthcare workers with easy access to the hospital spaces, offered green spaces right outside their doorsteps, and considered the recreational needs of their occupants. Particularly during the COVID-19 pandemic, it became apparent that these factors, which started to disappear in the second half of the twentieth century, are indeed essential needs regardless of the advancements in medicine.[1158] The innovations that happened in healthcare architecture, particularly in the late nineteenth and early twentieth centuries, offer valuable sources of inspiration for architects of today and tomorrow. The case studies examined in this thesis exemplify ideas such as the pavilion plan hospital, the Nurses' Home, and public health complexes, which were formulated as architectural solutions to complex healthcare-related problems. Regardless of how they looked on the outside, or the political motivations behind their establishment, the interiors of the buildings analyzed here were carefully planned by architects not just to accommodate medical tasks or the latest technology, but also to ensure the comfort and well-being of their diverse users. Although the problems they were trying to address never fully disappeared, these structures, which were once built with the promise to heal not just individuals but entire societies, faded away by the late twentieth century. In the absence of extant examples, detailed research on the history of healthcare architecture, such as this dissertation, can provide insights into how architecture once served as a response to healthcare emergencies, and guide architects as they try to formulate or reformulate architectural solutions to healthcare problems of the present day. Furthermore, this thesis elaborated on the collaboration and exchange of information between architects and healthcare professionals as well as the international mobility of the individuals involved in various healthcare projects, a point that can also function as a source of inspiration for the present and the future.

[1158] Sarah Zhang, "We're Just Rediscovering a 19th-Century Pandemic Strategy," *The Atlantic*, Feb. 22, 2021, accessed May 29, 2024, https://www.theatlantic.com/health/archive/2021/02/bad-air/618106/.

FIGURES

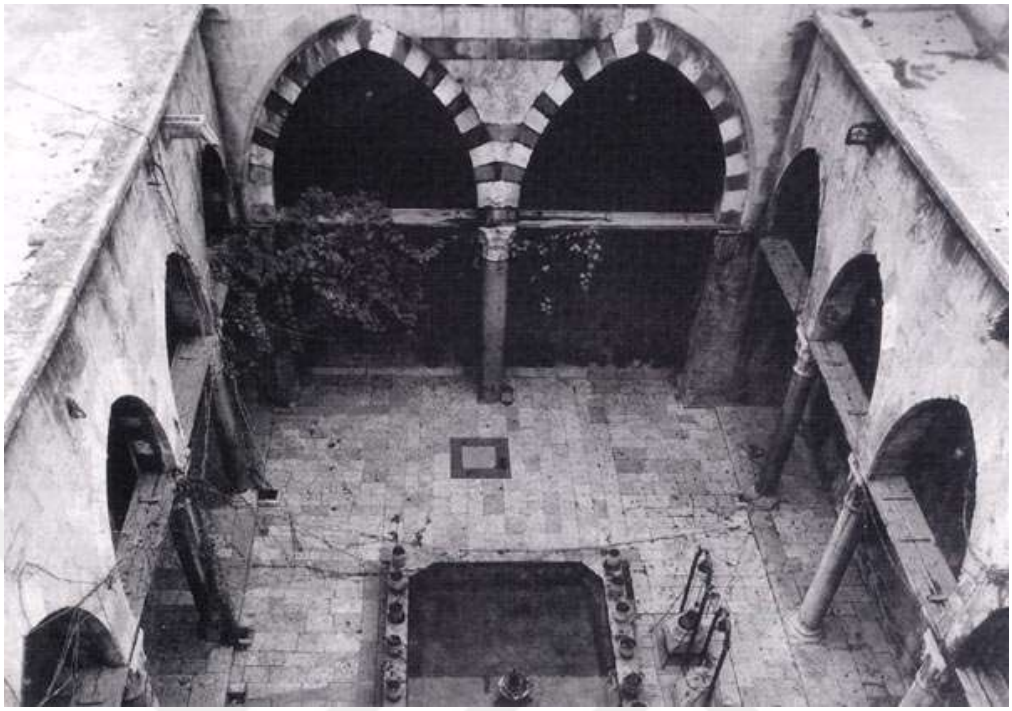

Figure 1.1: *Main courtyard,* Arghun al-Kamili *Bimaristan* in Aleppo
Photo by Yasser Tabbaa, Source: Yasser Tabbaa, "Rationality and Belief in The Medieval Islamic Hospital" (1998), Fondation Max van Berchem, Gen*ève,* https://maxvanberchem.org/fr/activites-scientifiques/projets/architecture/14-architecture/132-rationality-and-belief-in-the-medieval-islamic-hospital.

Figure 1.2: Divriği Mosque and *Darüşşifa*
Source: Ülgen Family Collection, Salt Research, TASUH3838.

Figure 1.3: The *Külliye* of Bayezid II in Edirne
Source: Türkiye Kültür Portalı, https://www.kulturportali.gov.tr/turkiye/edirne/gezilecekyer/iibeyazid-kulliyesi-saglik-muzesi.

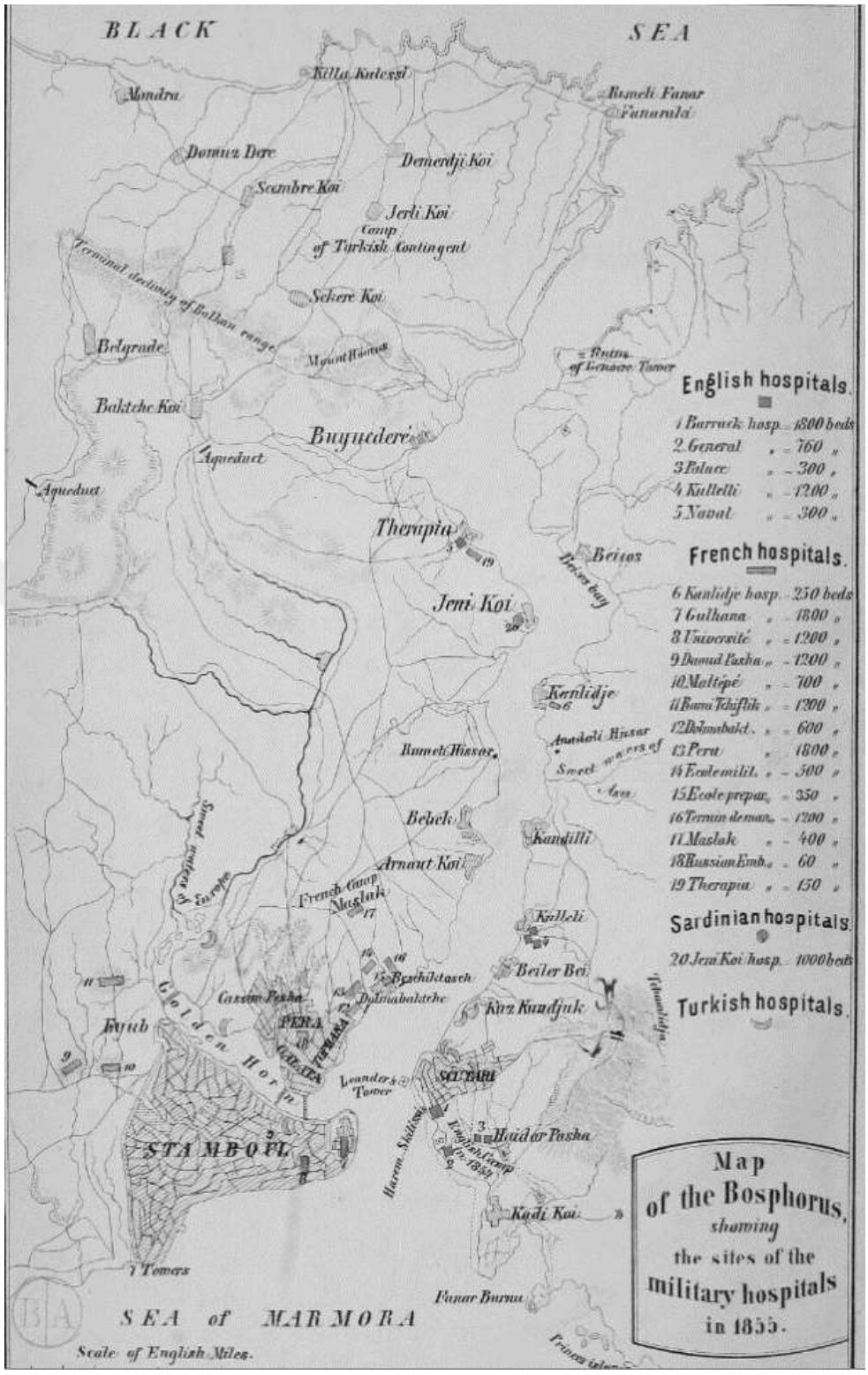

Figure 2.1: Peter Pincoffs' map of hospitals in Istanbul during the Crimean War
Lithography by J.H. Klahr, Dresden.
Source: Pincoffs, *Experiences of a Civilian*, n.p.

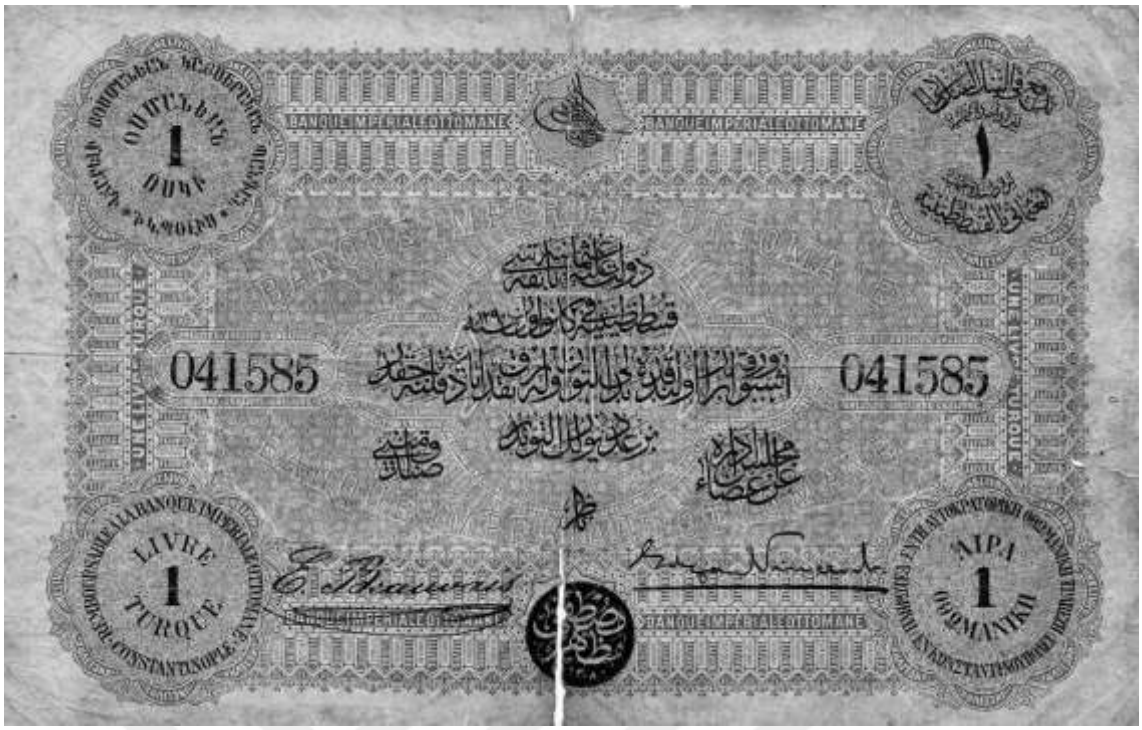

Figure 2.2: 1 lira note sealed by Mustafa Mazhar and signed by Beauvais and Vincent
Issue date: 1875-01-01.
Source: Salt Research, EMBBII013.

Figure 2.3: Postcard featuring the German Fountain (Istanbul)
Source: Salt Research, TASUH7136.

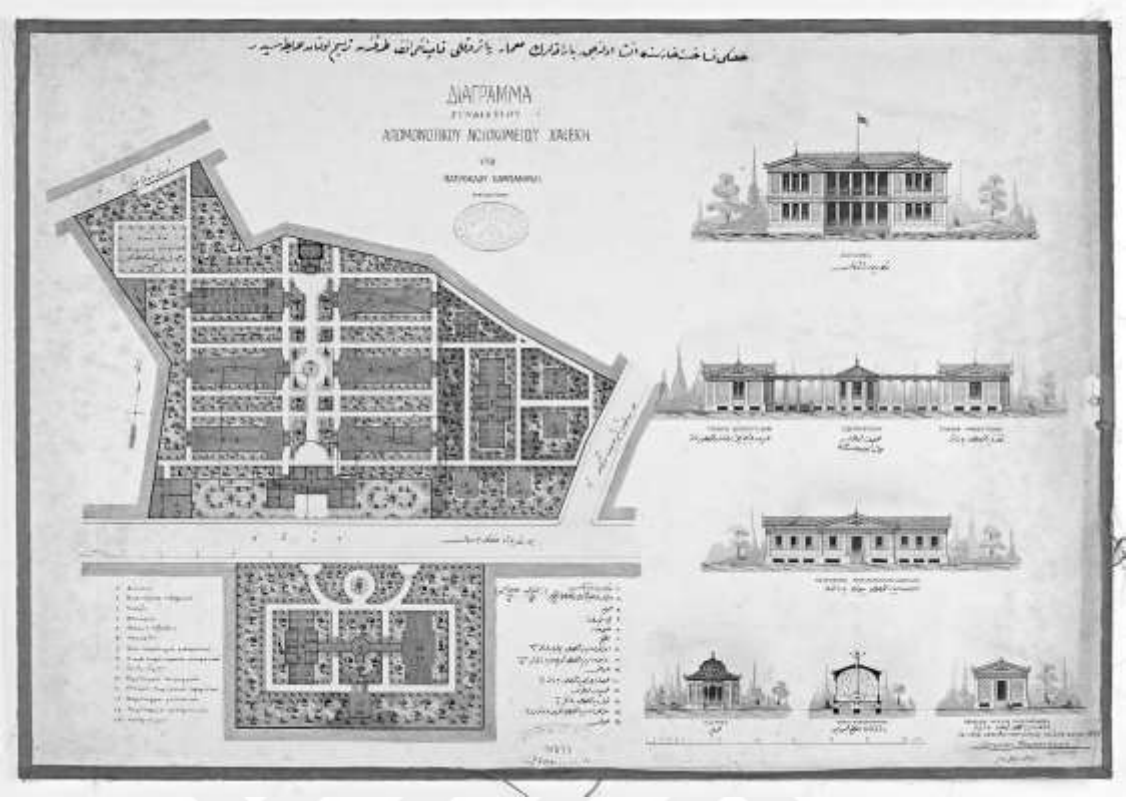

Figure 2.4: Patrokli Kompanaki, Architectural drawings and site plans for the Haseki Hospital, circa 1889
Source: Yıldız Palace Album 90833, Istanbul University Library

Figure 2.5: Ward at the Haseki Hospital
Source: Yıldız Palace Album 90833, Istanbul University Library

Figure 2.6: Bird's eye view of the Hamidiye Etfal (Children's) Hospital by Engineer Mahmud Şukri, June 5, 1899
Source: Salt Research, AHISTSISL009.

Figure 2.7: Interior, Sirkeci Train Station
Source: Sena Durmaz, "Avrupa'nın İlk Durağı: Sirkeci Garı," Yerel Kimlik (Jul.-Aug.-Sep. 2019): 59.

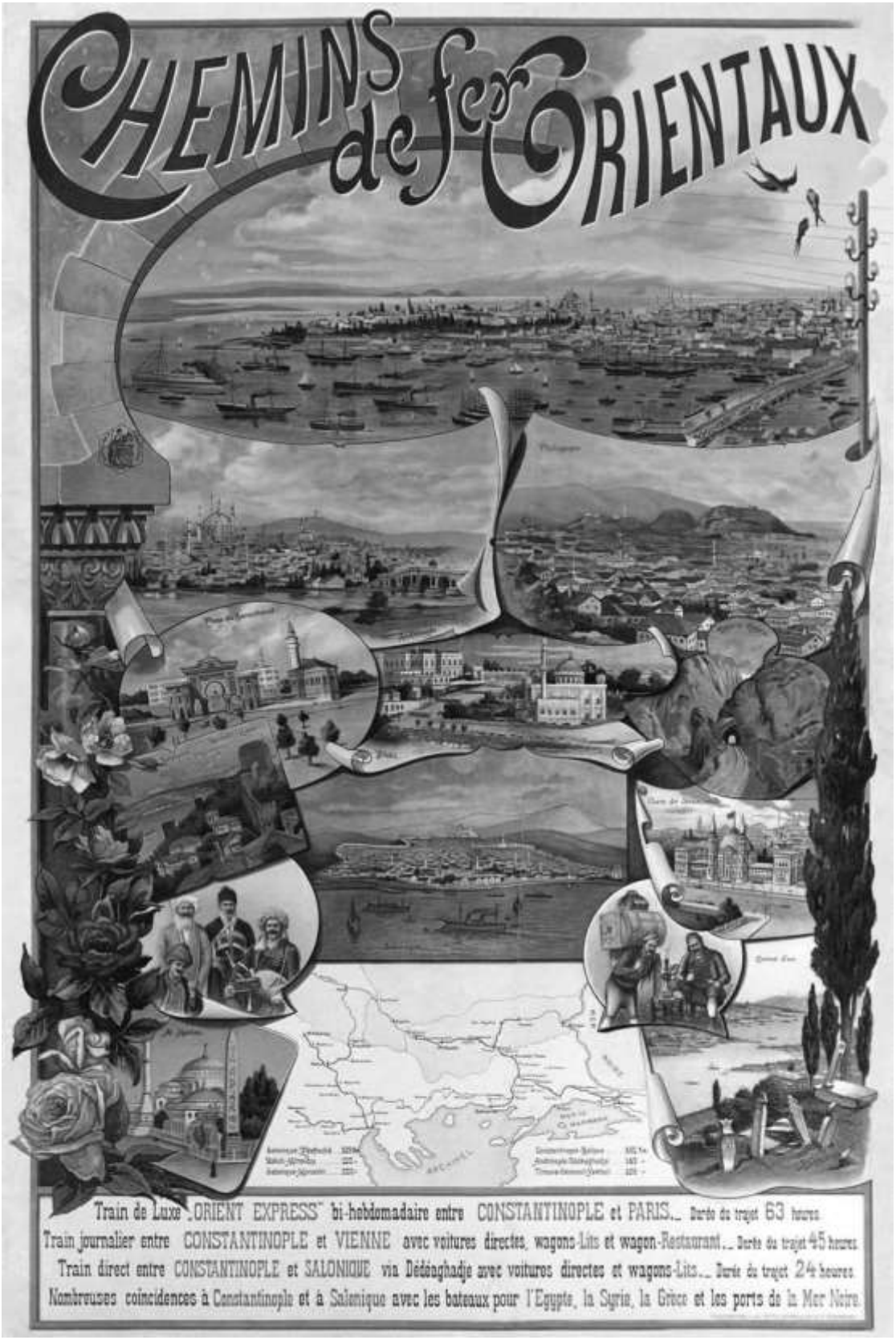

Figure 2.8: Advertisement poster, 1898
Source: Galerie123, Z116200.

Figure 2.9: The *Türbe* (Tomb) of Ahmed Cevad Paşa
Source: Salt Research, TASUH8496.

Figure 2.10: The *Türbe* (Tomb) of Gazi Osman Paşa
Source: Salt Research, TASUH5761.

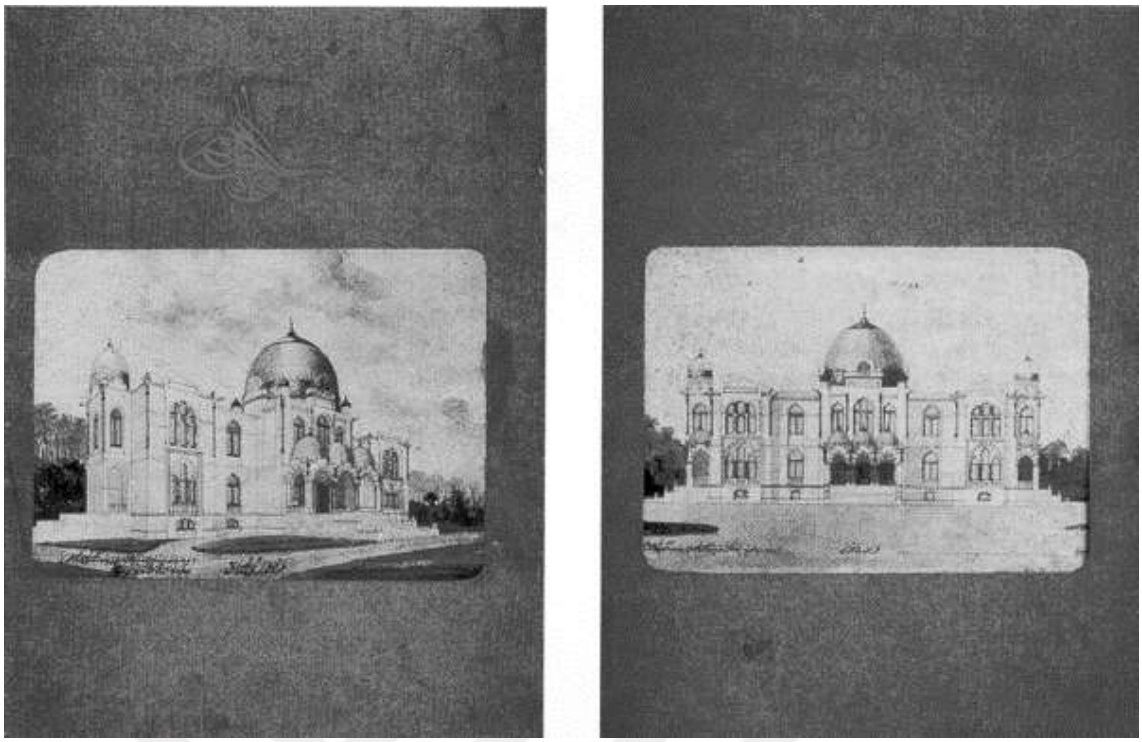

Figure 2.11: Mimar Kemalettin's drawings for the Berlin Hamidiye Hospital
Source: Yıldırım, "Birinci Ulusal Mimarlık," 2.

Figure 2.12: *Kastamonu Hükümet Konağı* designed by Vedat (Tek)
Source: Türkiye Kültür Portalı, https://www.kulturportali.gov.tr/turkiye/kastamonu/gezilecekyer/kastamonu-hukumet-konagi.

Figure 2.13: Postcard displaying the post office building in Sirkeci designed by Vedat (Tek)
Source: Salt Research, AHISTEMIN011.


Figure 2.14: A view of Kasımpaşa with the tower of the Ottoman Naval Hospital building in the background
Photograph by Basile Kargopoulo, 1884.
Source: Salt Research, AHTUR0121.

Figure 2.15: William James Smith's 1846 proposal for the British Seamen's Hospital (BSH) in Istanbul
Source: The National Archives (U.K.), Work/10/42/1

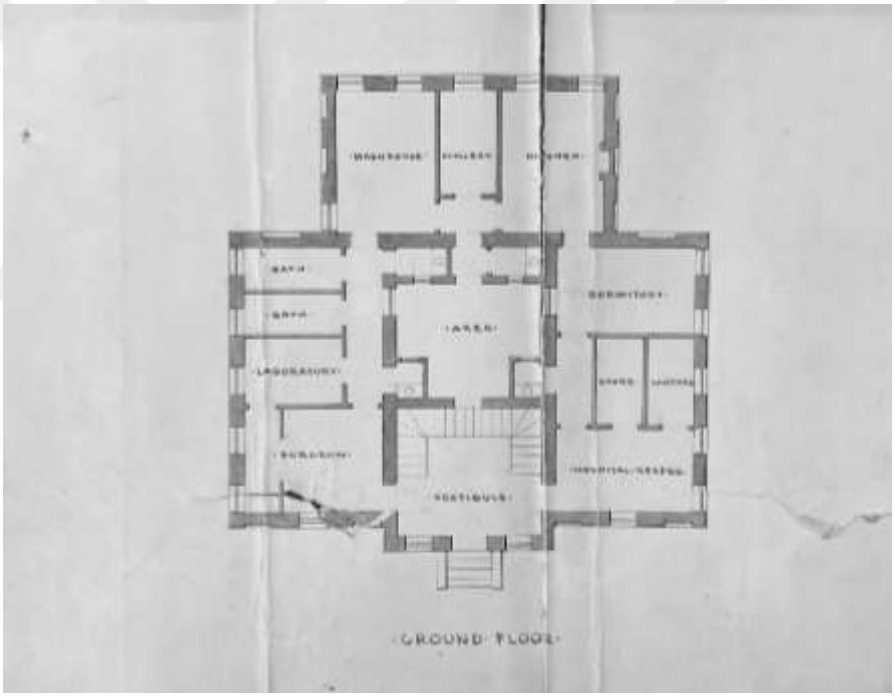

Figure 2.16: Ground floor plan (William James Smith's 1846 Proposal for the BSH Istanbul)
Source: The National Archives (U.K.), Work/10/42/1

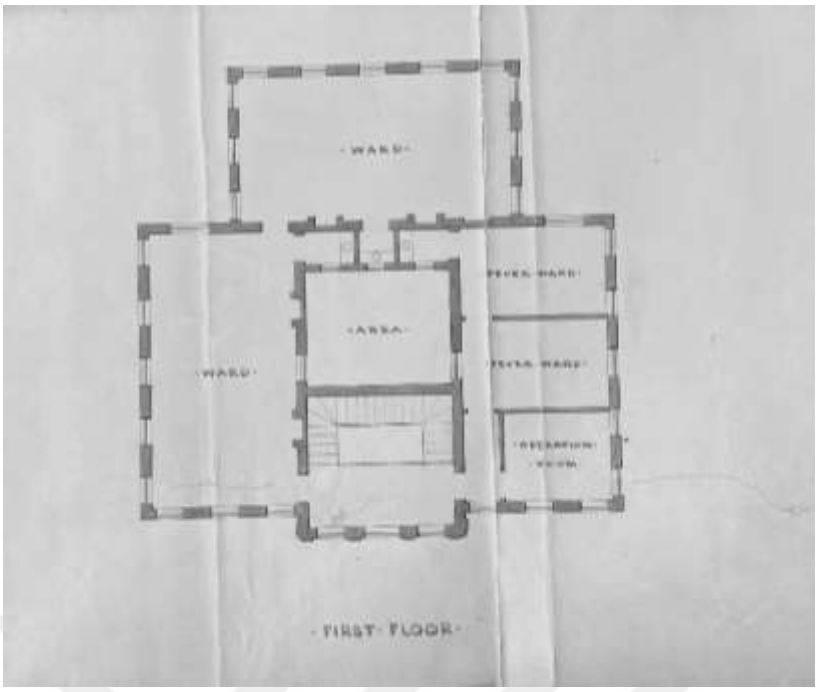

Figure 2.17: First floor plan (William James Smith's 1846 Proposal for the BSH Istanbul)
Source: The National Archives (U.K.), Work 10/42/1

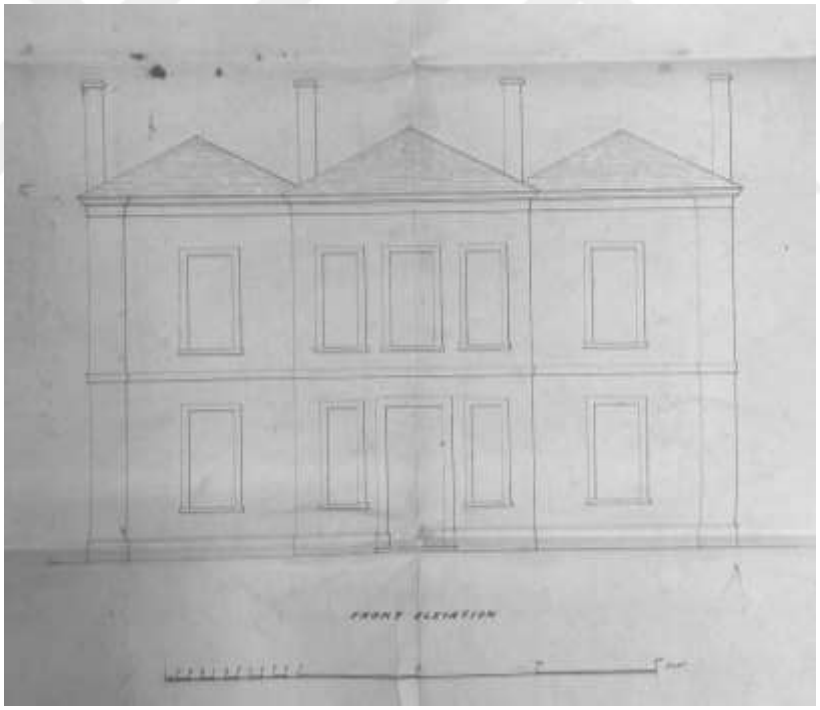

Figure 2.18: 1849-1850 Two-story elevation for the BSH Istanbul by William James Smith
Source: The National Archives (U.K.), Work 10/42/1

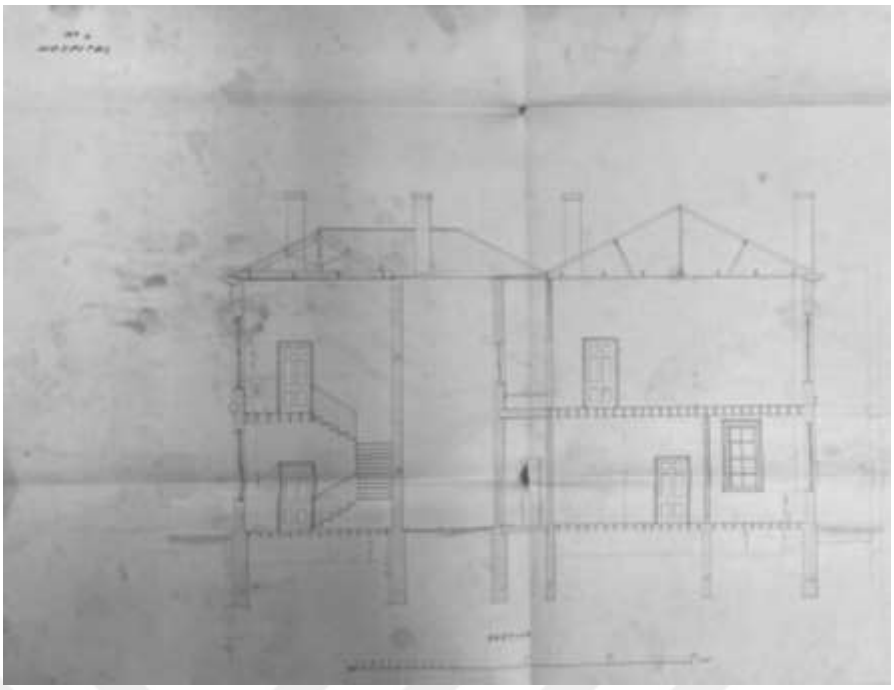

Figure 2.19: 1849-1850 Section for the BSH Istanbul by William James Smith
Source: The National Archives (U.K.), Work/10/42/1

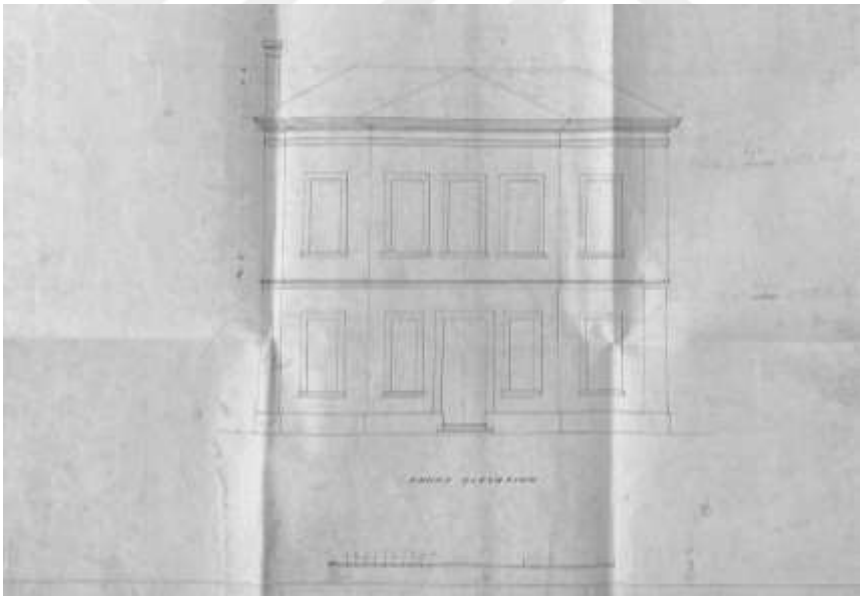

Figure 2.20: 1849-1850 Elevation for the British Consular Offices in Istanbul by William James Smith
Source: The National Archives (U.K.), Work/10/42/1

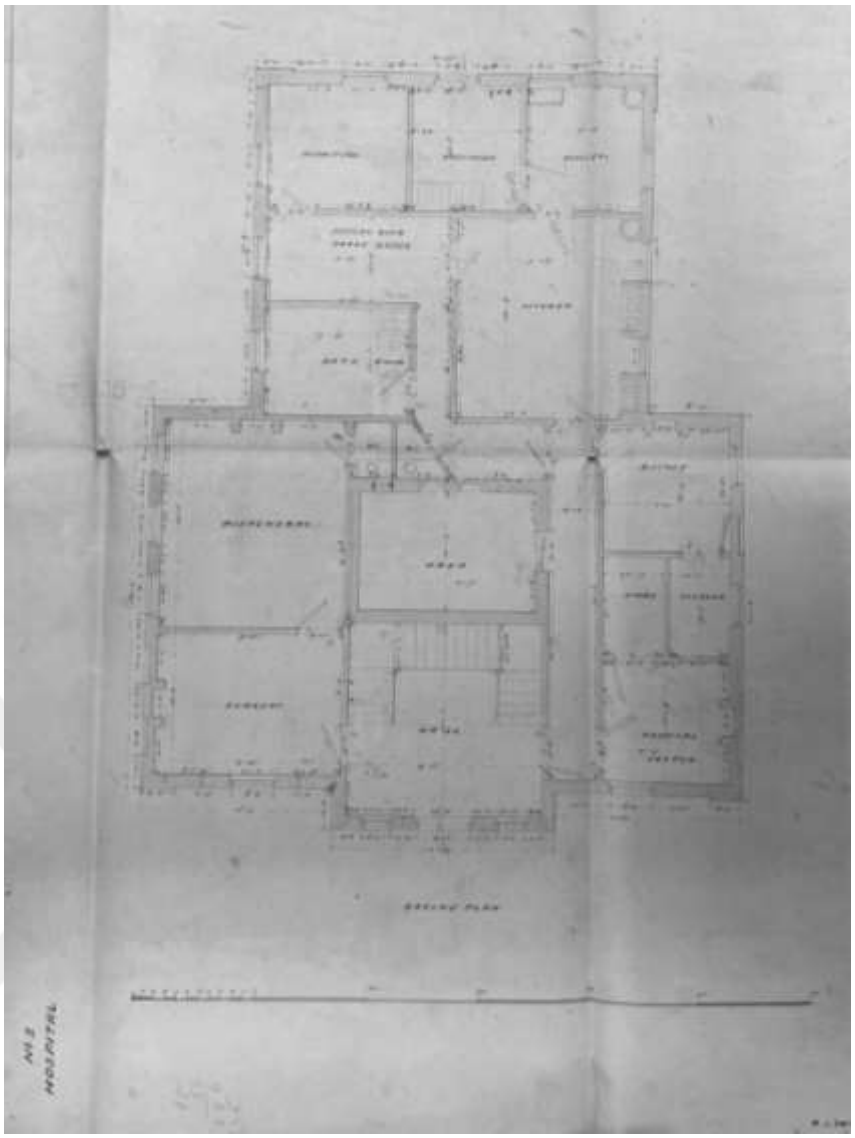

Figure 2.21: 1849-1850 Ground floor plan for the BSH Istanbul by William James Smith
Source: The National Archives (U.K.), Work/10/42/1

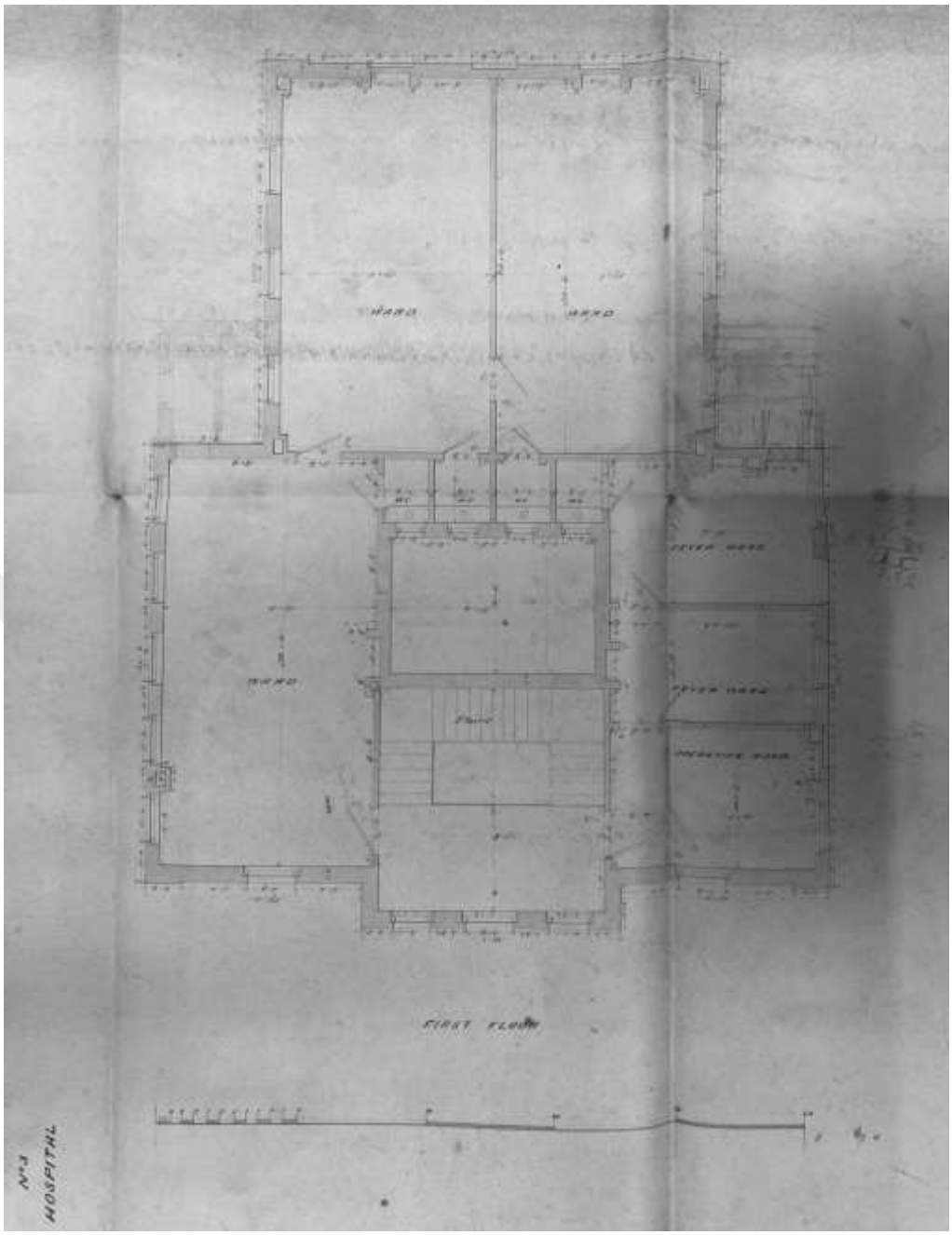

Figure 2.22: 1849-1850 First floor plan for the BSH Istanbul by William James Smith
Source: The National Archives (U.K.), Work/10/42/1

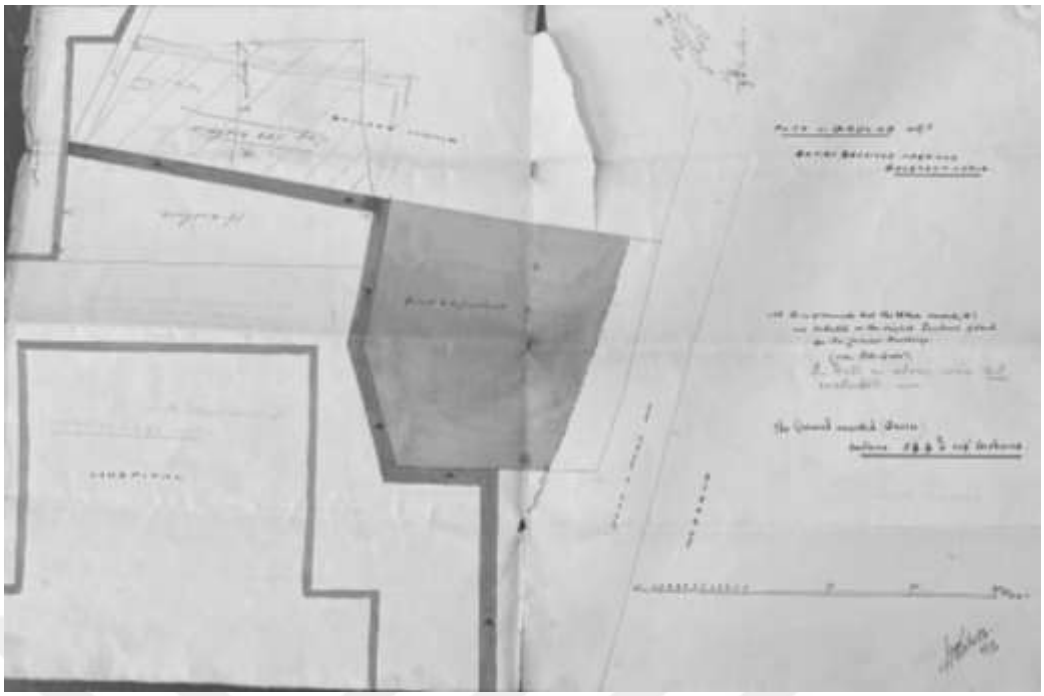

Figure 2.23: Henry Pulman's 1858 site plan displaying the ground to be purchased near the BSH Istanbul
Source: The National Archives (U.K.), Work/10/42/1

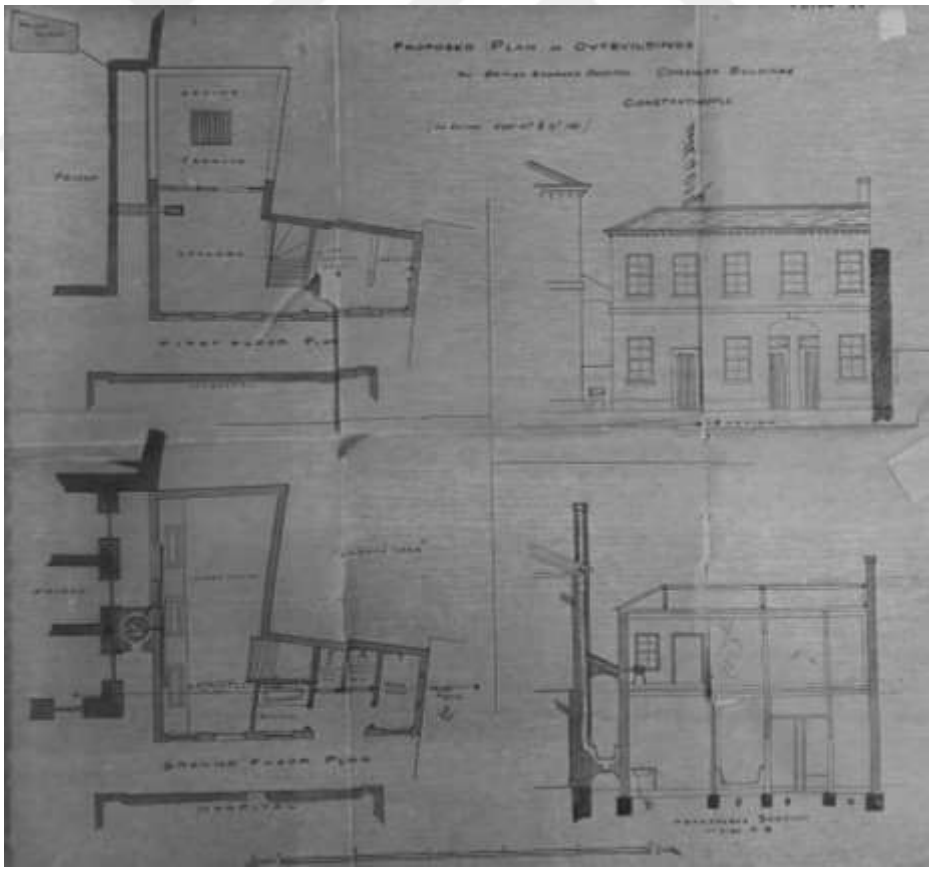

Figure 2.24: Henry Pulman's proposed plans for two outbuildings
Source: The National Archives (U.K.), Work/10/43/2

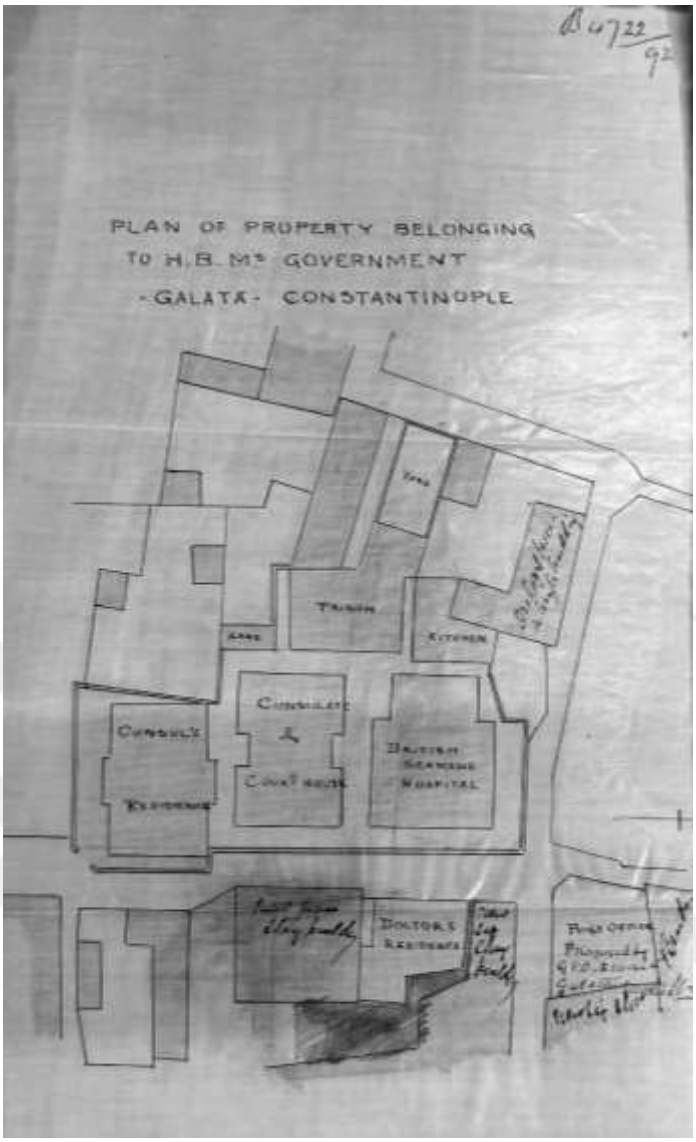

Figure 2.25: Site plan displaying the British property in Galata, Istanbul, 1892
Source: The National Archives (U.K.), Work/10/43/3

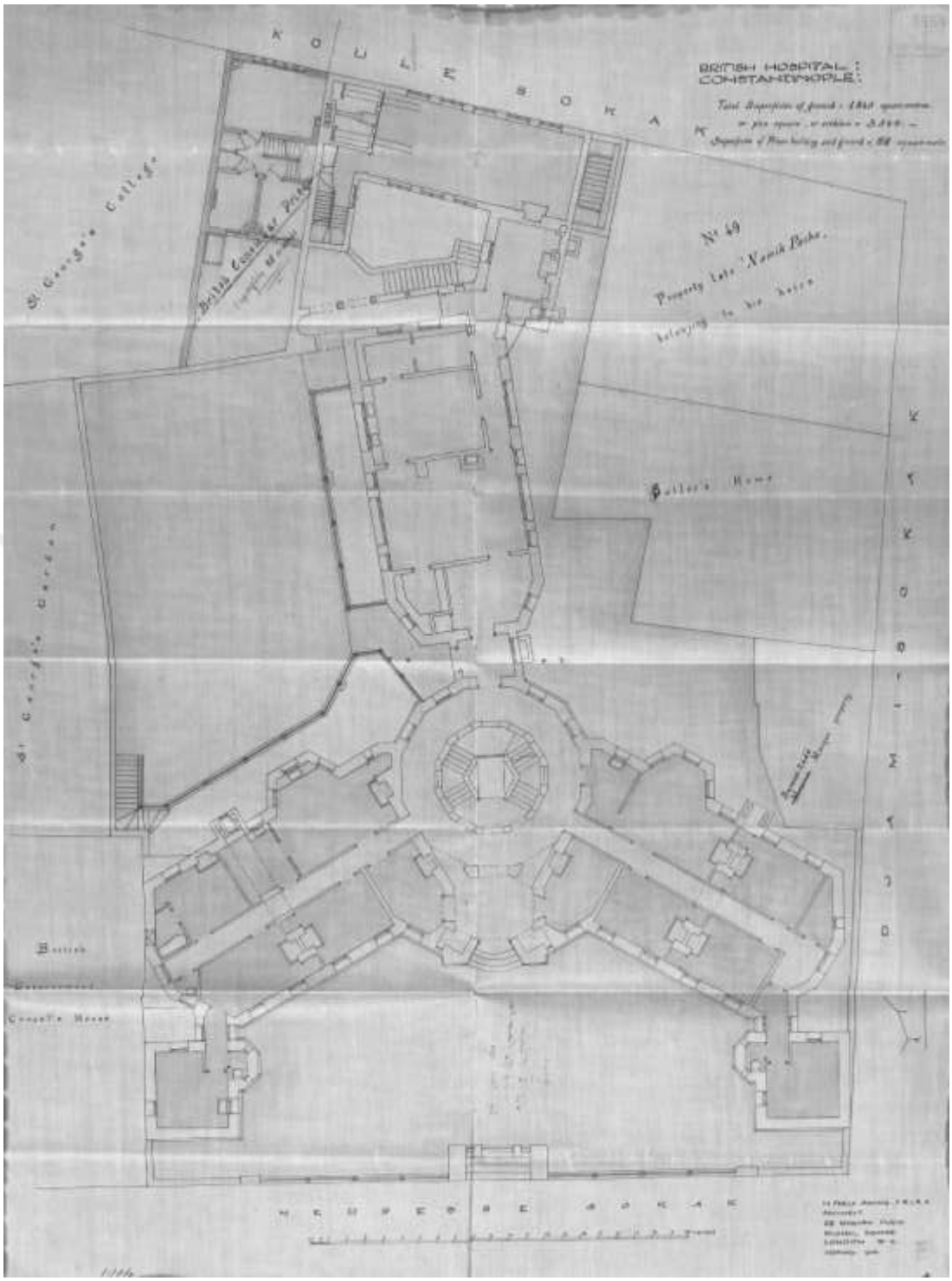

Figure 2. 26: Floor plan displaying the prison building designed by Herbert Willis adjacent to the new BSH Istanbul building
Source: The National Archives (U.K.), Work/10/42/4

Figure 2.27: St. Peter's Hospital on Henrietta Street in Covent Garden, London
Source: *The Building News*, Jun. 24, 1881, n.p

Figure 2.28: Proposal by the firm of H. Percy Adams for the Glasgow Royal Infirmary Competition
Source: *The Building News*, Jan. 18, 1901, n.p.

Figure 2.29: Royal Chelsea Hospital. Engraving dated 1788
Source: Wellcome Collection, Reference: 20603i

Figure 2.30: Norfolk and Norwich Hospital
Source: https://www.geograph.org.uk/photo/84361, Copyright: Katy Walters.

Figure 2.31: Green tiles bordering the doors at the BSH Istanbul
Photograph by Uğurgül Tunç, Mar. 1, 2023.

Figure 2.32: Furnace at the BSH Istanbul
Photograph by Uğurgül Tunç, Mar. 1, 2023.

Figure 2.33: Circular ward in the Great Northern Central Hospital, London, 1912
Source: Wellcome Collection, Reference: 28252i

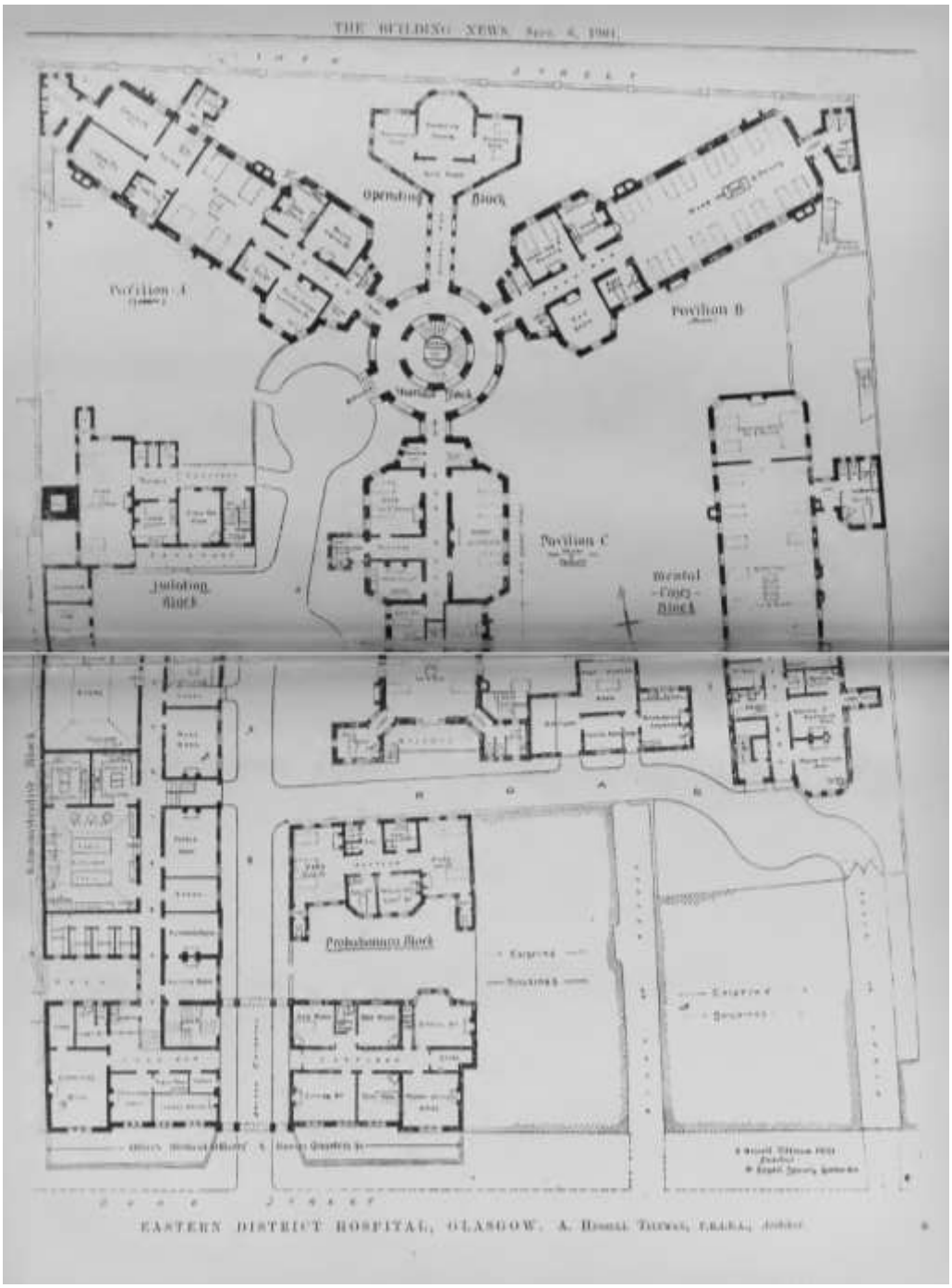

Figure 2.34: Eastern District Hospital, Glasgow
Source: *The Building News*, Sep. 6, 1901, n.p.

Figure 2.35: Salut de Constantinople postcard
Source: Levantine Heritage Foundation.

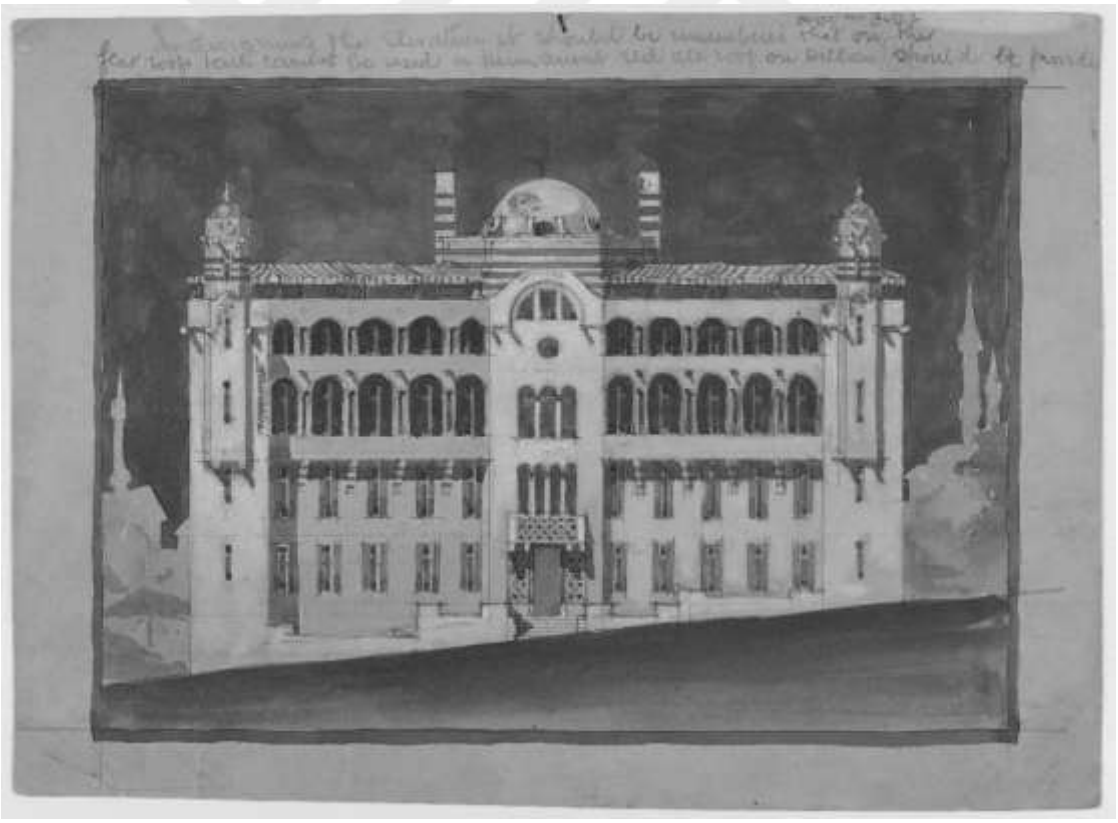
Figure 2.36: Charles Holden's preliminary watercolor drawing for the BSH Istanbul
Source: RIBA, PA1457/AHP[247](1-20)

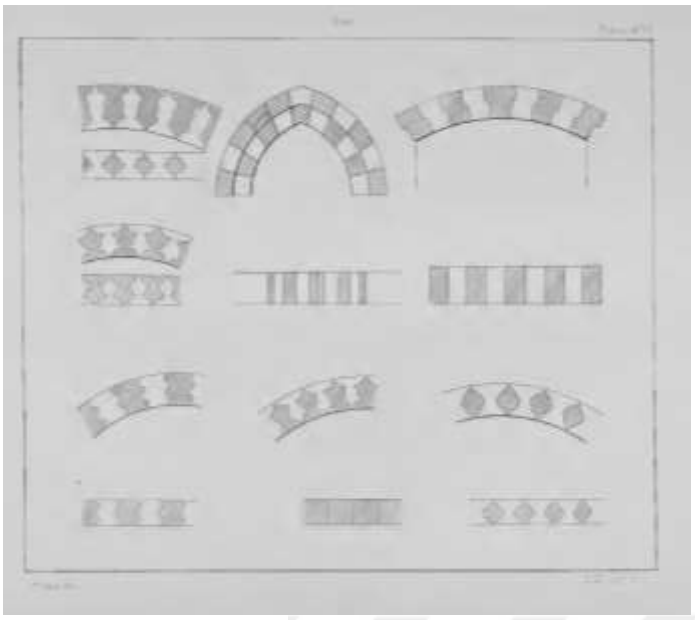

Figure 2.37: Patterns by Eugène Maillard
Source: *Usul-i Mimari-i Osmani* (Istanbul, 1873), plate 16.

Court of a Private House in Cairo.

Figure 2.38: Illustration displaying the court of a private house in Cairo
Source: Edward William Lane, *An account of the manners and customs of the modern Egyptians* (fifth edition) (London: John Murray, 1871), 12.

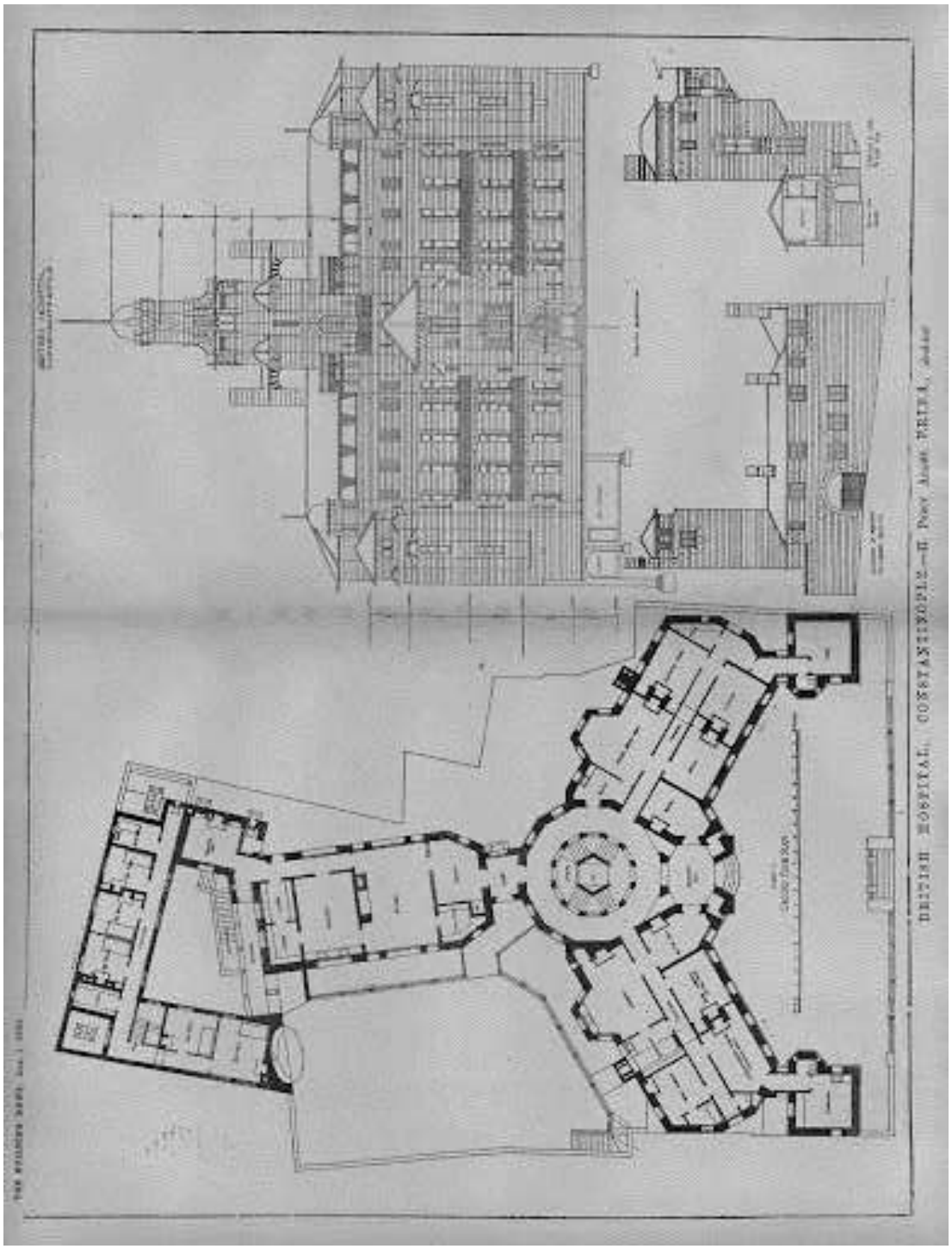

Figure 2.39: Published architectural drawings of the BSH Istanbul
Source: *The Building News*, Aug. 1, 1902, n.p.

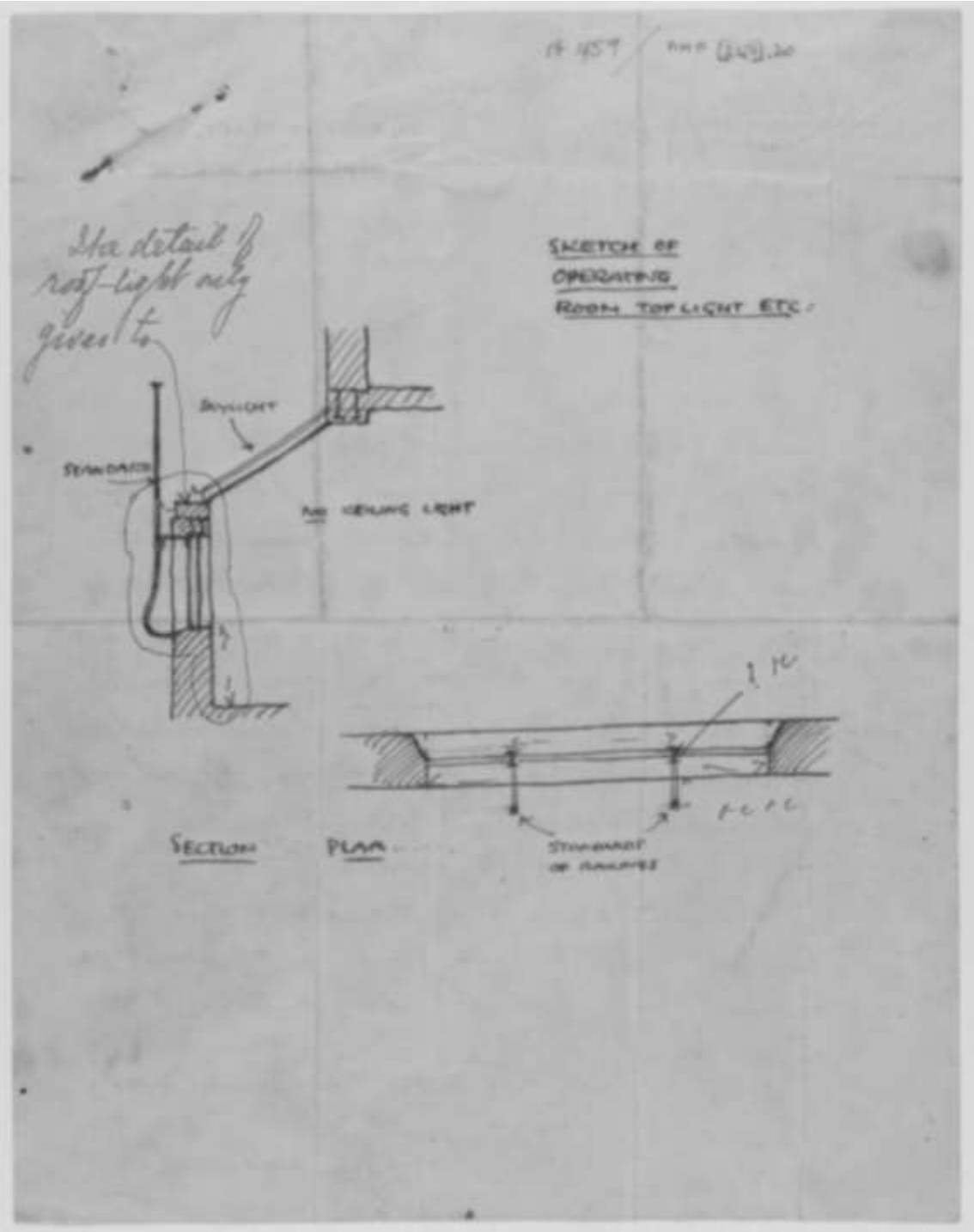

Figure 2.40: Drawing by Charles Holden displaying instructions on how to install the operating room lights
Source: RIBA, PA1457/AHP[247](1-20). Letter dated Feb. 16, 1903, from Holden to Willis.

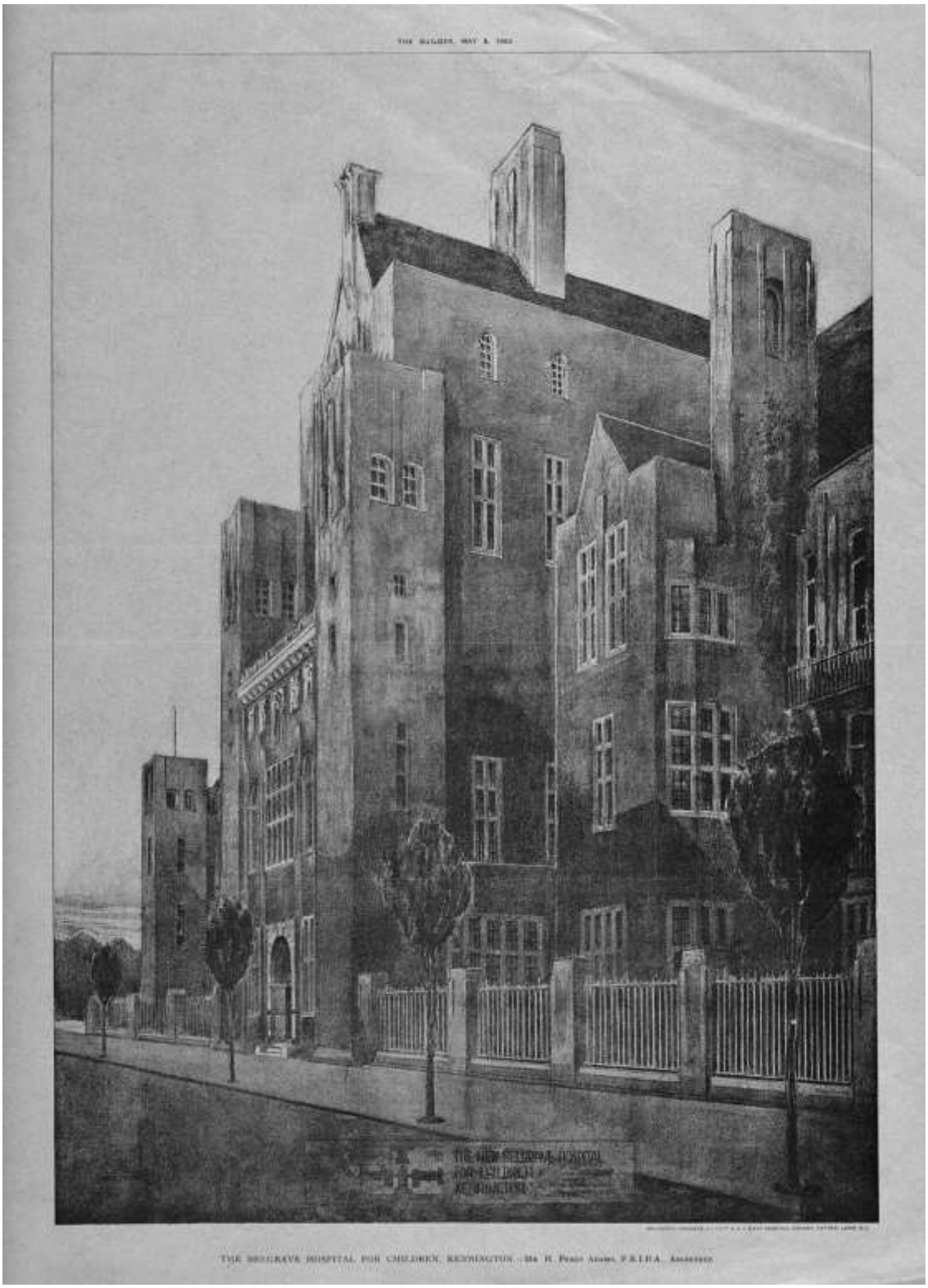

Figure 2.41:The Belgrave Hospital for Children
Source: Wellcome Collection, Reference: 38546i

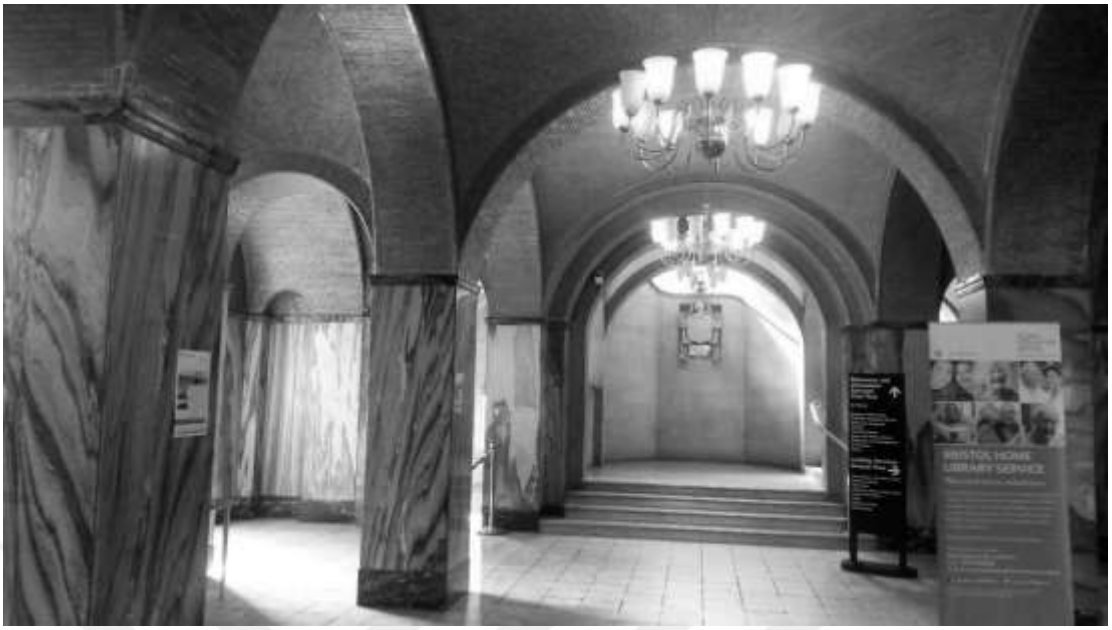

Figure 2.42: Bristol Central Library, entrance hall
Source: Book Birds blog, https://booksbird.files.wordpress.com/2017/01/20160808_104332.jpg.

Figure 2.43: BSH Istanbul, entrance
Source: Scene in *Nereye Bakıyor Bu Adamlar?* (motion picture), director: Osman F. Seden, 1976, https://www.youtube.com/watch?v=ourbGnR-LjY.

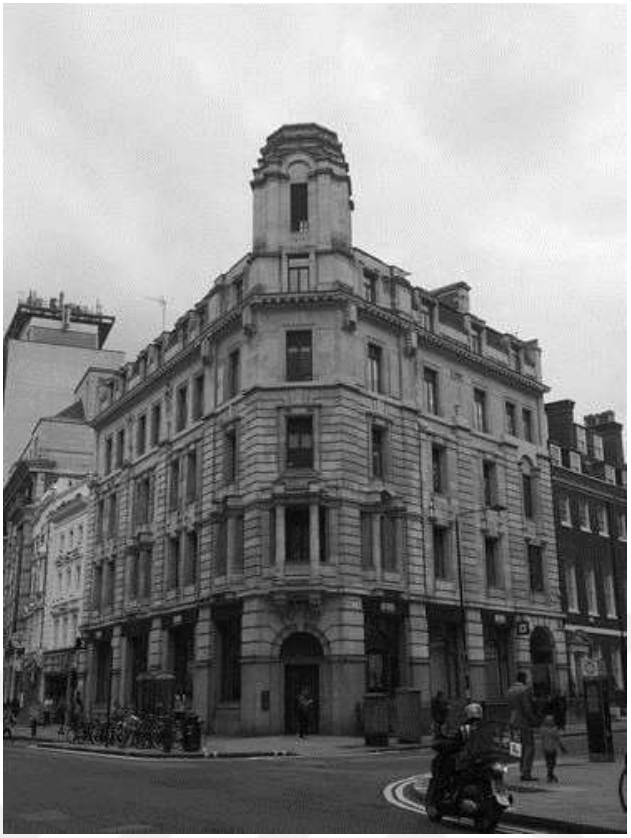

Figure 2.44: High Holborn House
Source: Historic Englad, Photo credit: Dominic Martin, https://historicengland.org.uk/listing/the-list/list-entry/1378879.

Figure 2.45: West Ham Hospital
Source: Karol, *Charles Holden*, 191.

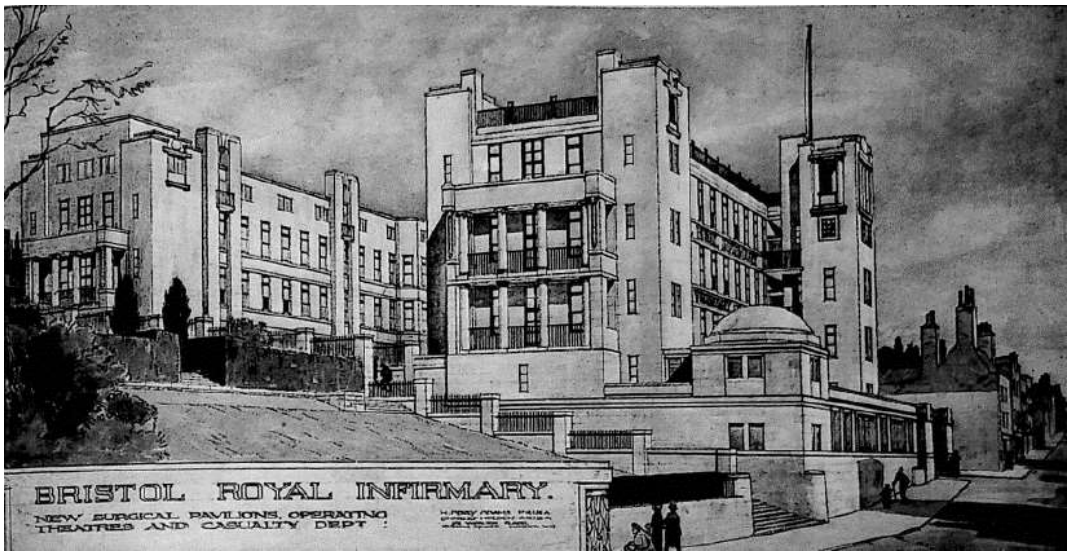

Figure 2.46: Drawing for the Bristol Royal Infirmary
Source: Karol, *Charles Holden*, plate 25, n.p.

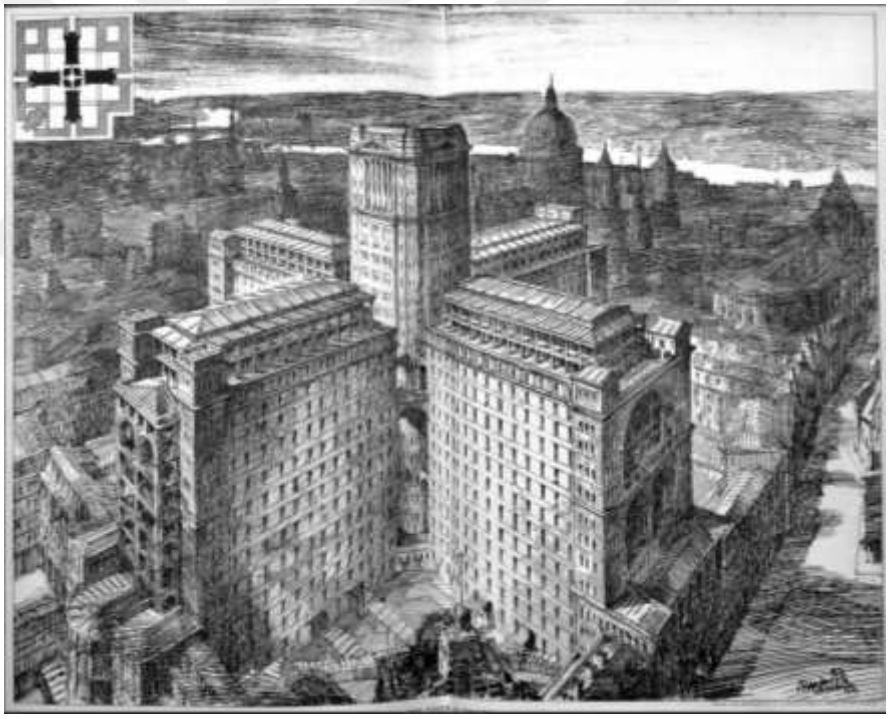

Figure 2.47: "A City Tower of Healing" by Arthur Baresford Pite
Source: *The Builder* 86 (Jun. 11, 1904): 637.

Figure 2.48: Proposed entrances for the Clapham Common Subway Station, Sep. 12, 1922
Source: Drainage Records, ref: 12782, identifier: LBL/DCEPS/DRG/2594, Lambeth Archives.

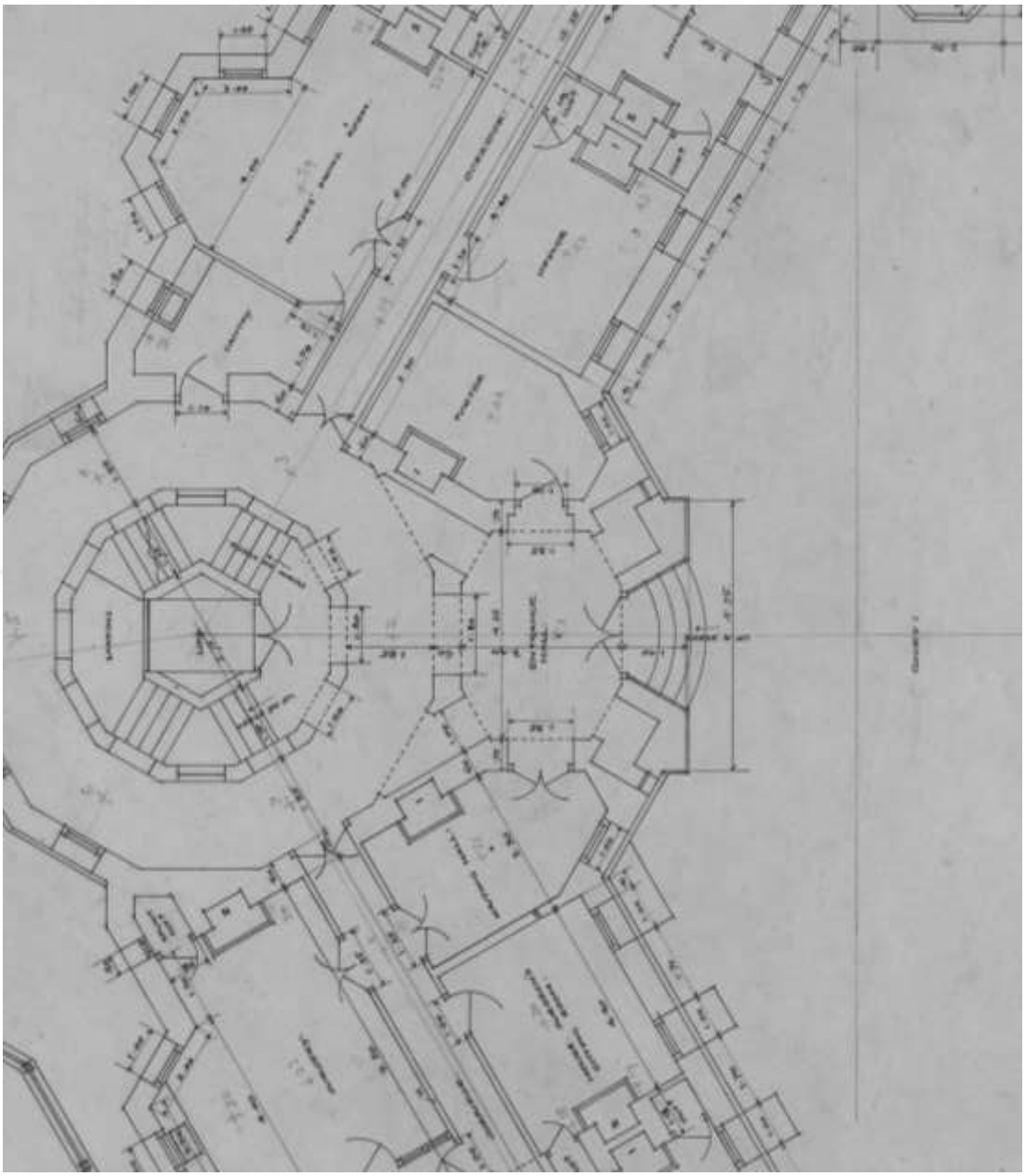

Figure 2.49: BSH Istanbul, detail of the ground floor plan
Source: RIBA, PA1457/AHP[247](1-20).

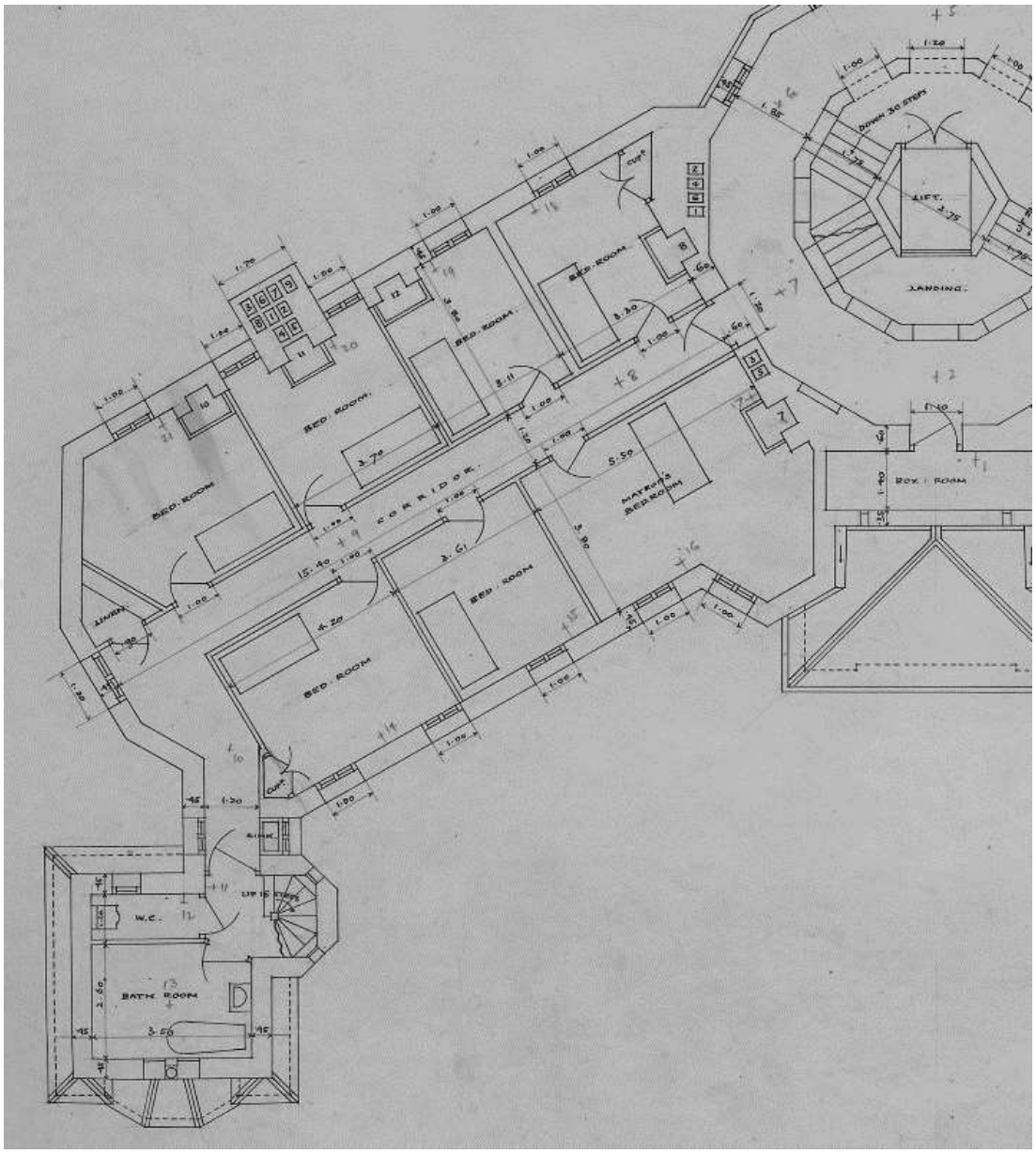

Figure 2.50: BSH Istanbul, detail of the third-floor plan
Source: RIBA, PA1457/AHP[247](1-20).

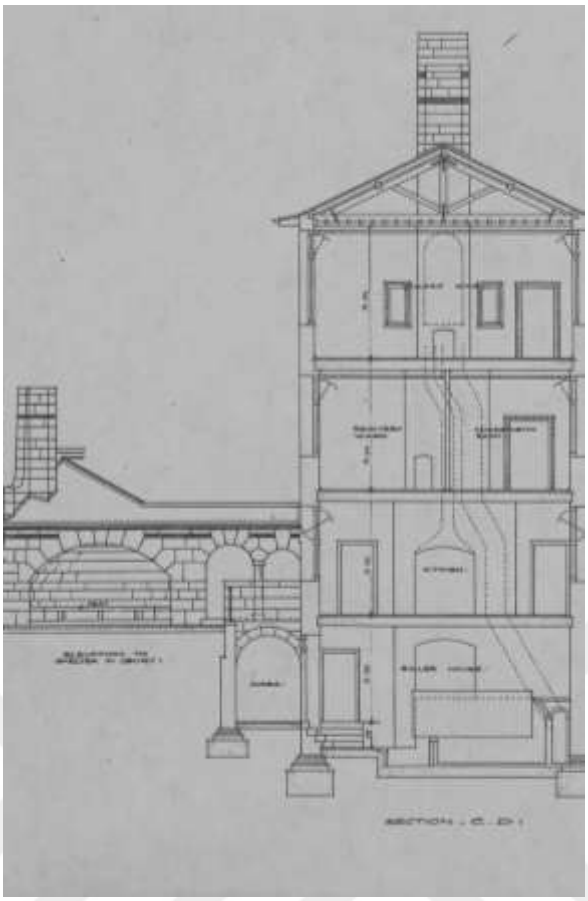

Figure 2.51: BSH Istanbul, section
Source: RIBA, PA1457/AHP[247](1-20).

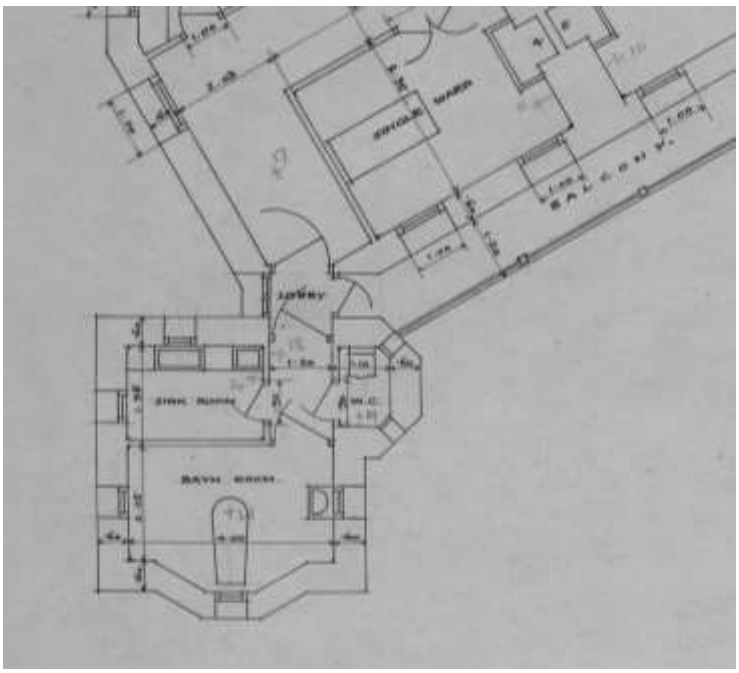

Figure 2.52: Plan of a sanitary tower on the first floor of the BSH Istanbul
Source: RIBA, PA1457/AHP[247](1-20).

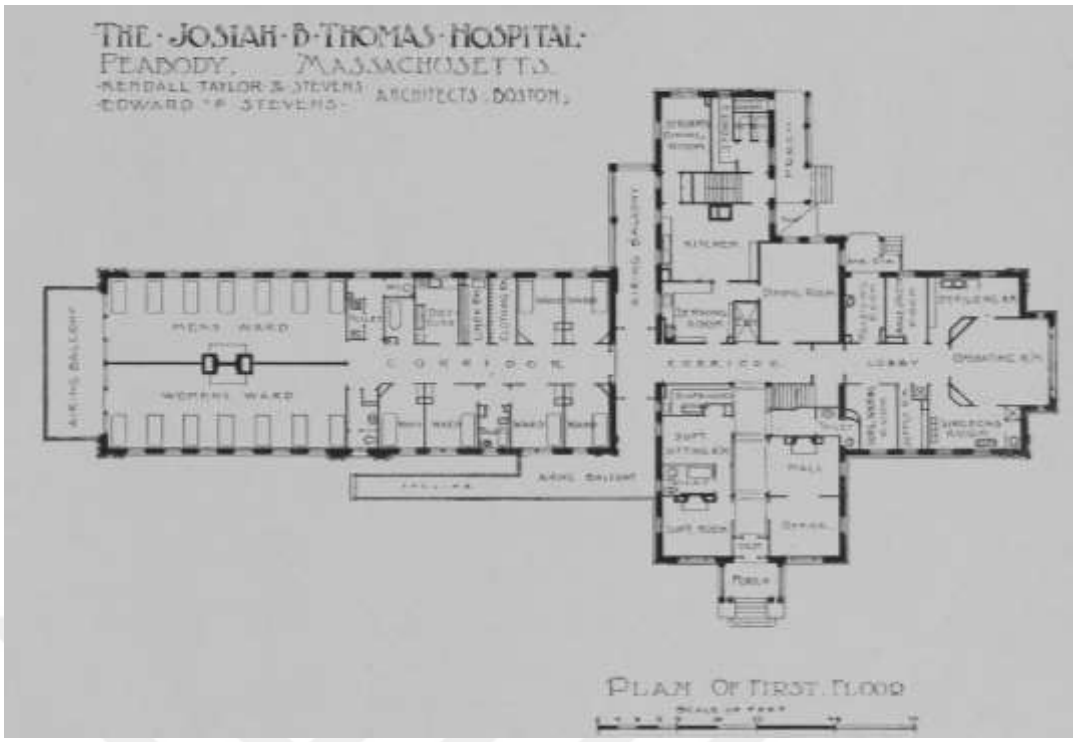

Figure 2.53: First floor plan for the Josiah B. Thomas Hospital in Peabody, MA designed by Kendall, Taylor & Stevens
The sanitary unit is situated right next to the ward without any lobby separating the enclosures.
Source: Stevens, *American Hospital* (1921), 261.

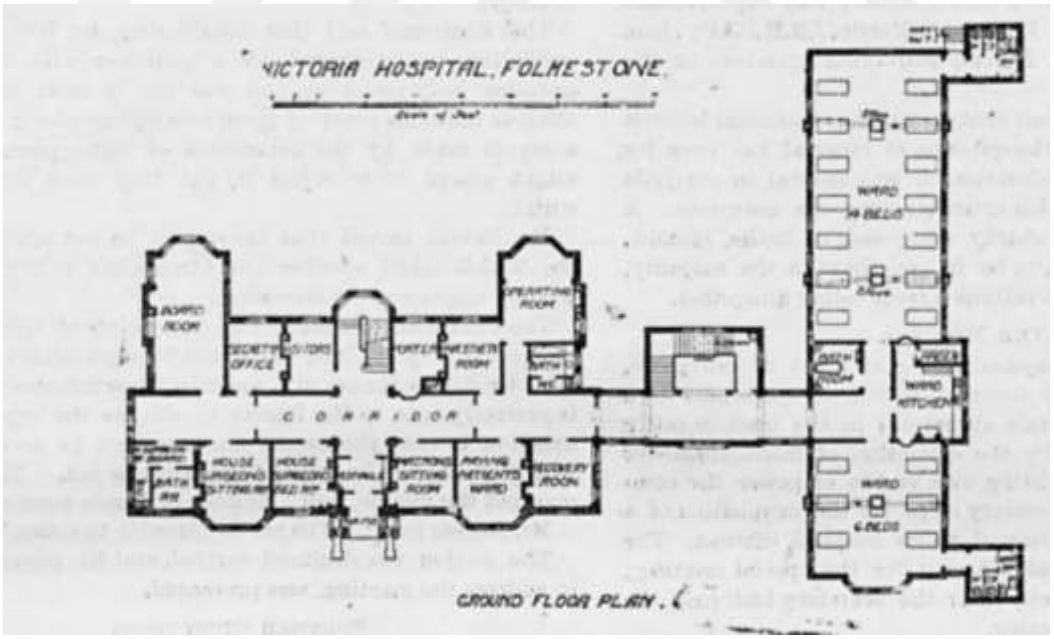

Figure 2.54: Ground floor plan for the Victoria Hospital, Folkestone
Source: *The Hospital* (Apr. 19, 1901): 51.

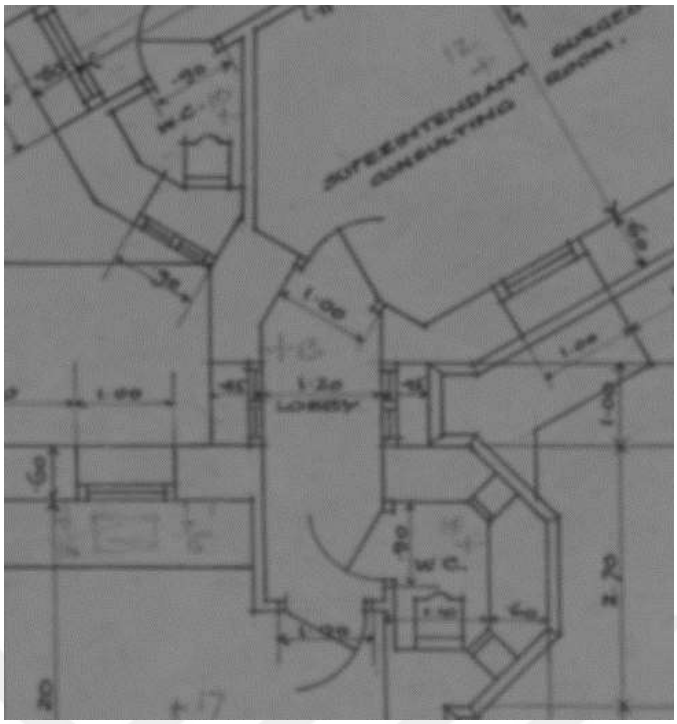

Figure 2.55: Detail of the ground floor plan displaying two separate water closet units
Source: RIBA, PA1457/AHP[247](1-20).

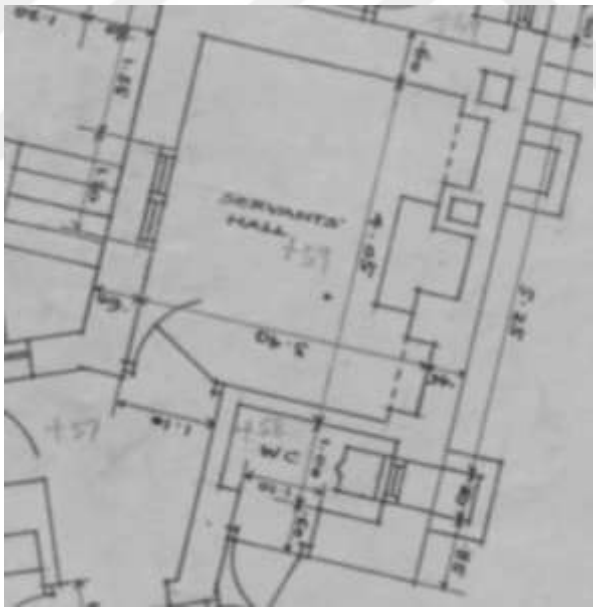

Figure 2.56: Detail of the ground floor plan displaying a water closet unit adjacent to the Servants' Hall
Source: RIBA, PA1457/AHP[247](1-20).

Figure 2.57: Detail of the ground floor plan displaying the house surgeon's bedroom
Source: RIBA, PA1457/AHP[247](1-20).

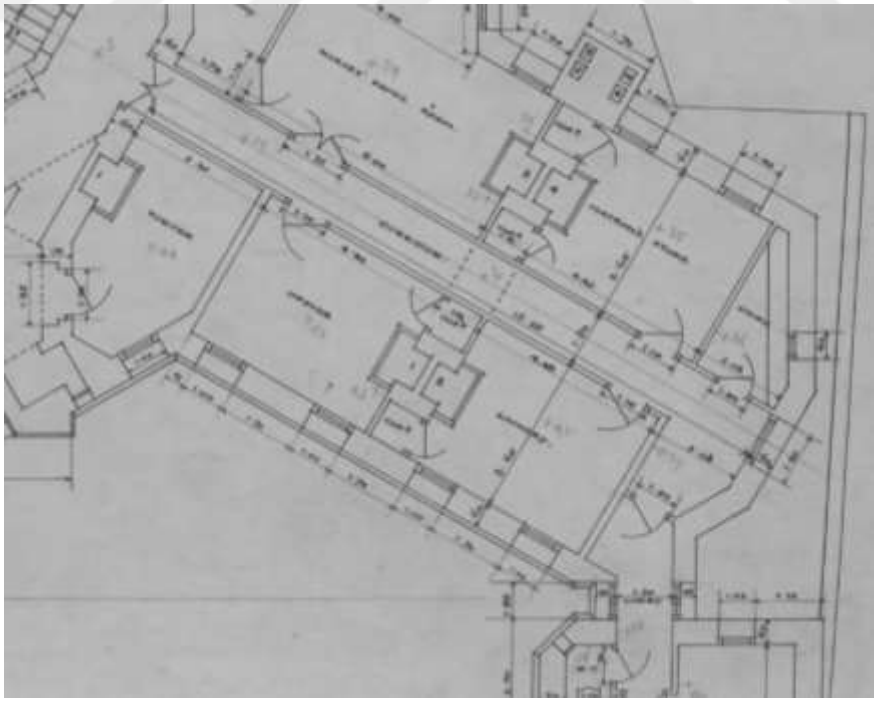

Figure 2.58: Detail of the ground floor plan displaying the matron's store and nurses' dining hall
Source: RIBA, PA1457/AHP[247](1-20).

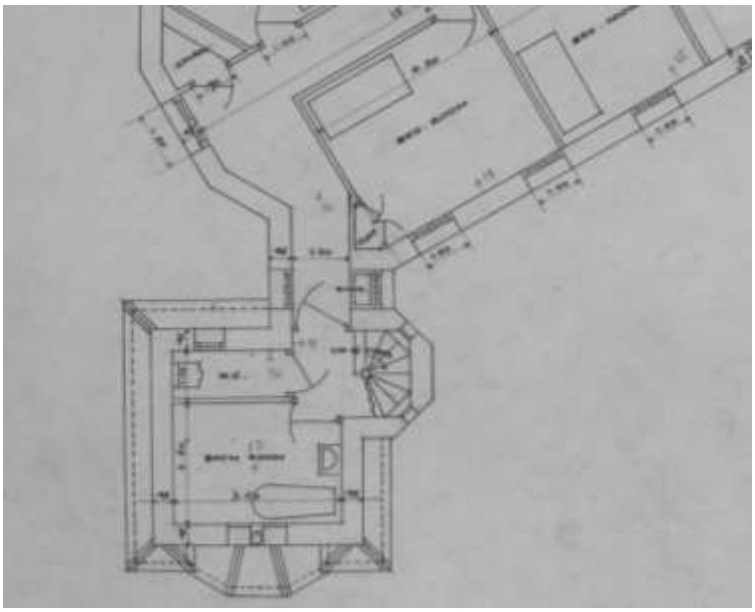

Figure 2.59: Detail of the third-floor plan displaying the direct access stairs to the roof through the sanitary tower
Source: RIBA, PA1457/AHP[247](1-20).

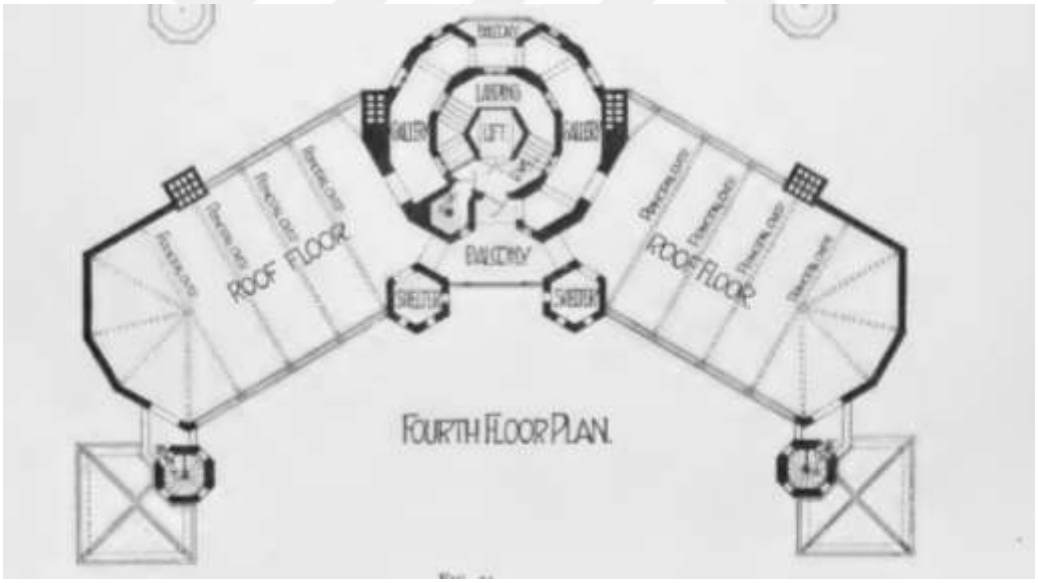

Figure 2.60: The roof floor (fourth floor) plan of the BSH Istanbul
Source: Middleton, *Modern Buildings, vol. 3*, 43.

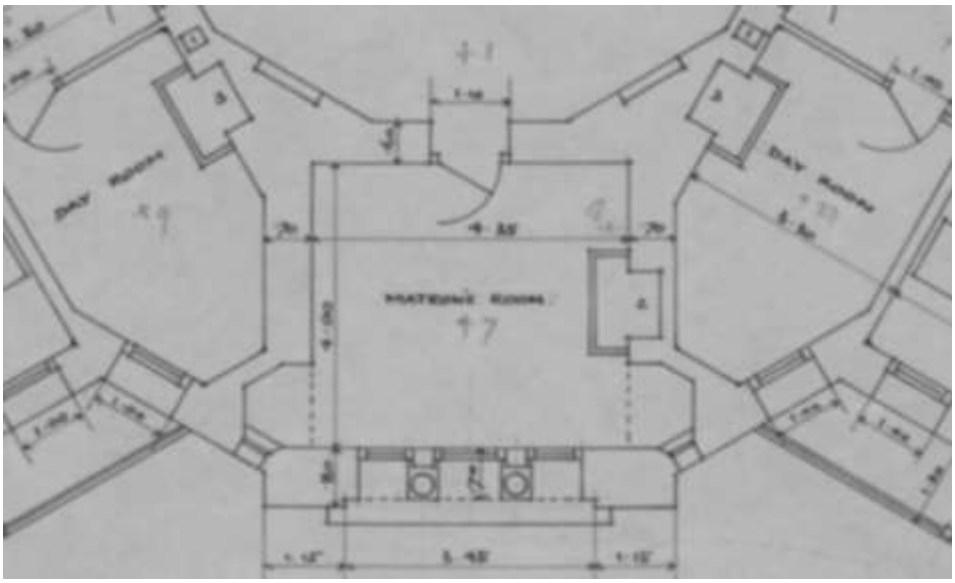

Figure 2.61: Detail of the first-floor plan displaying the day rooms and the matron's room (BSH Istanbul)
Source: RIBA, PA1457/AHP[247](1-20).

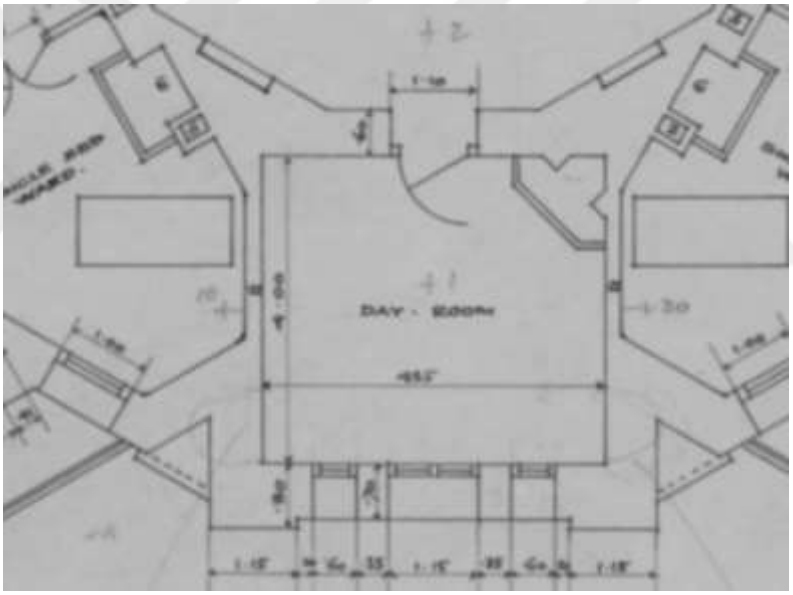

Figure 2.62: Detail of the second-floor plan displaying the day room between single bed wards (BSH Istanbul)
Source: RIBA, PA1457/AHP[247](1-20).

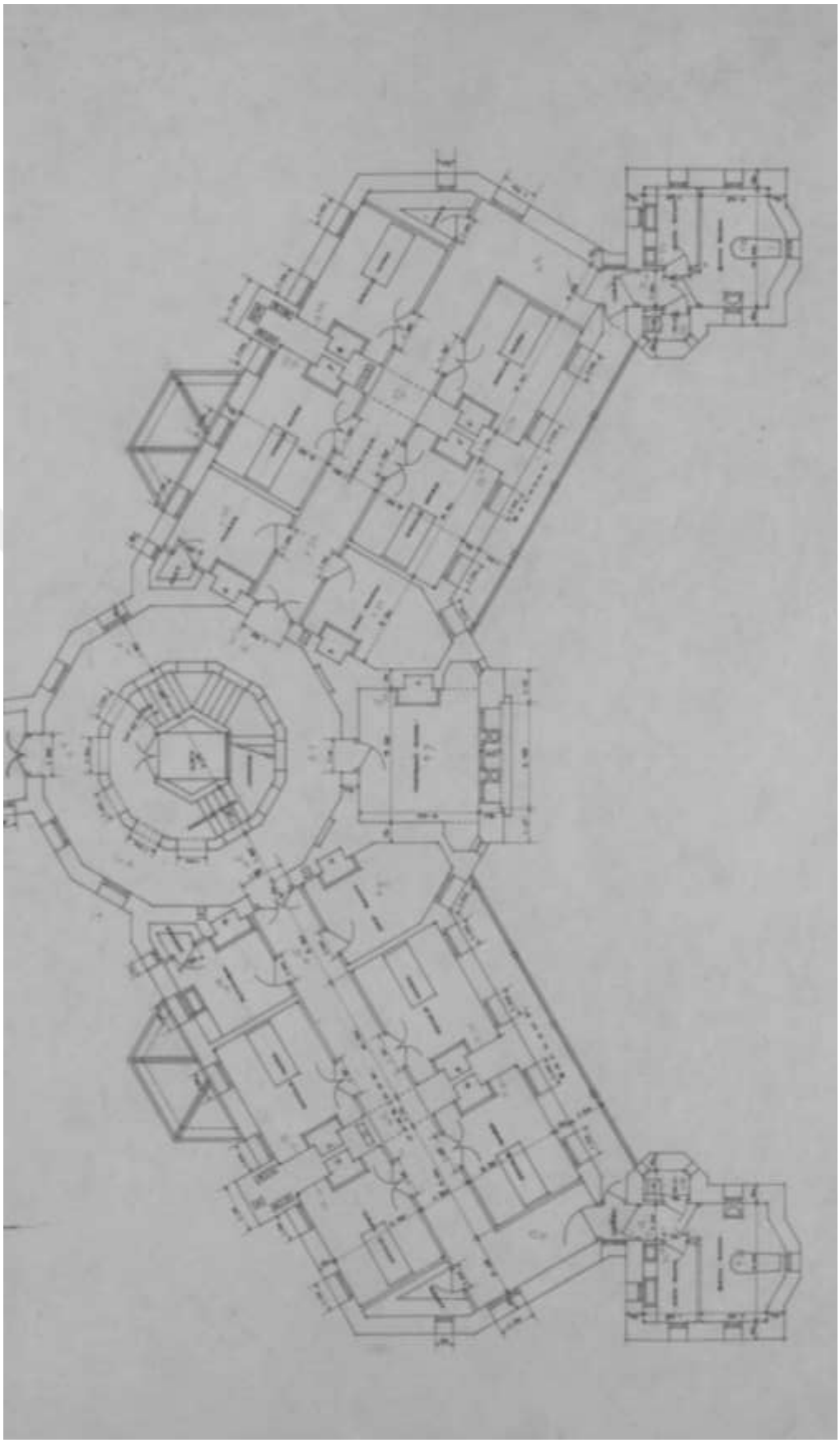

Figure 2.63: Detail of the first-floor plan displaying the single wards (BSH Istanbul)
Source: RIBA, PA1457/AHP[247](1-20).

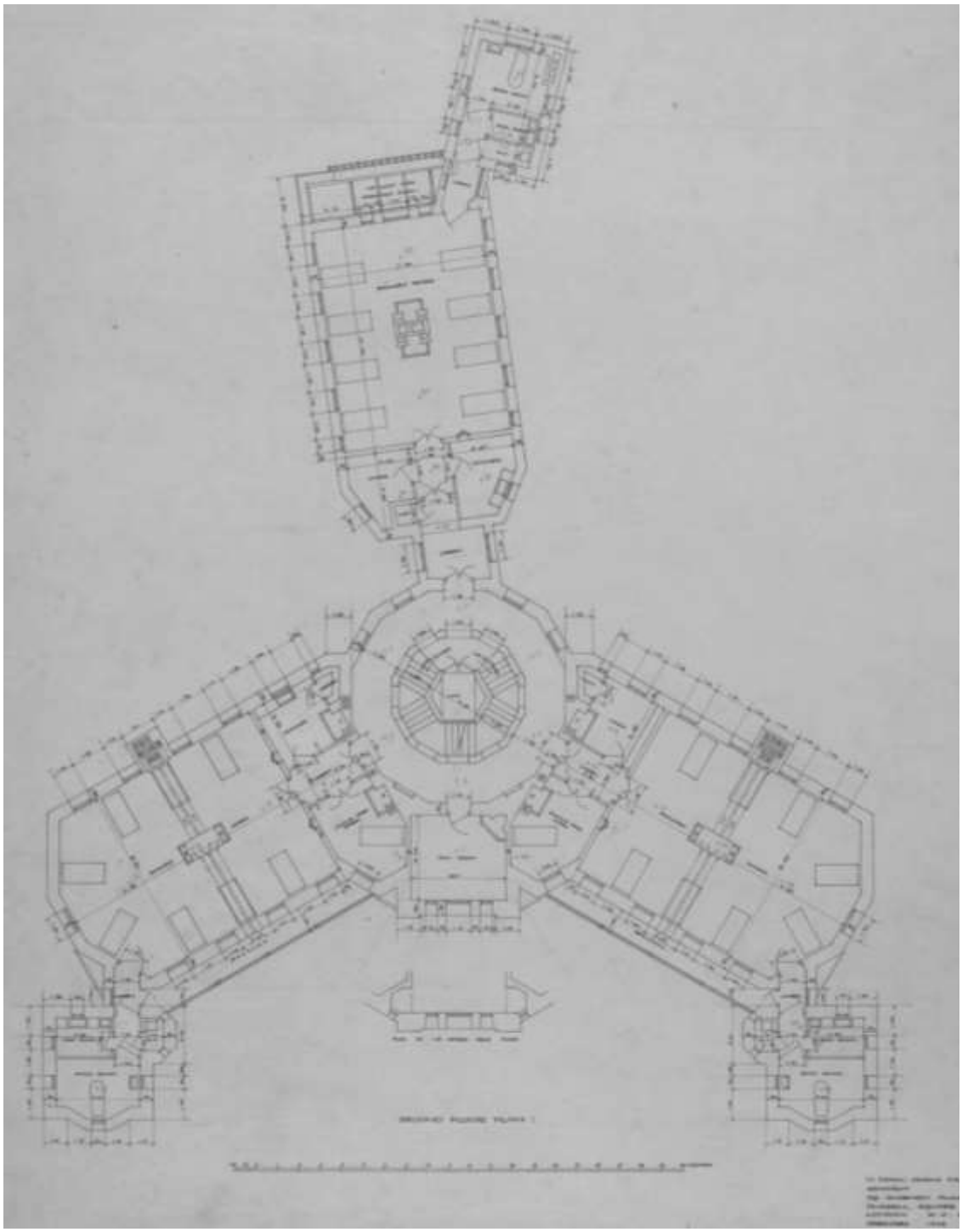

Figure 2.64: Second-floor plan (BSH Istanbul)
Source: RIBA, PA1457/AHP[247](1-20).

Figure 2.65: Detail of the basement floor plan displaying some of the laundry areas and the mortuary (BSH Istanbul)
Source: RIBA, PA1457/AHP[247](1-20).

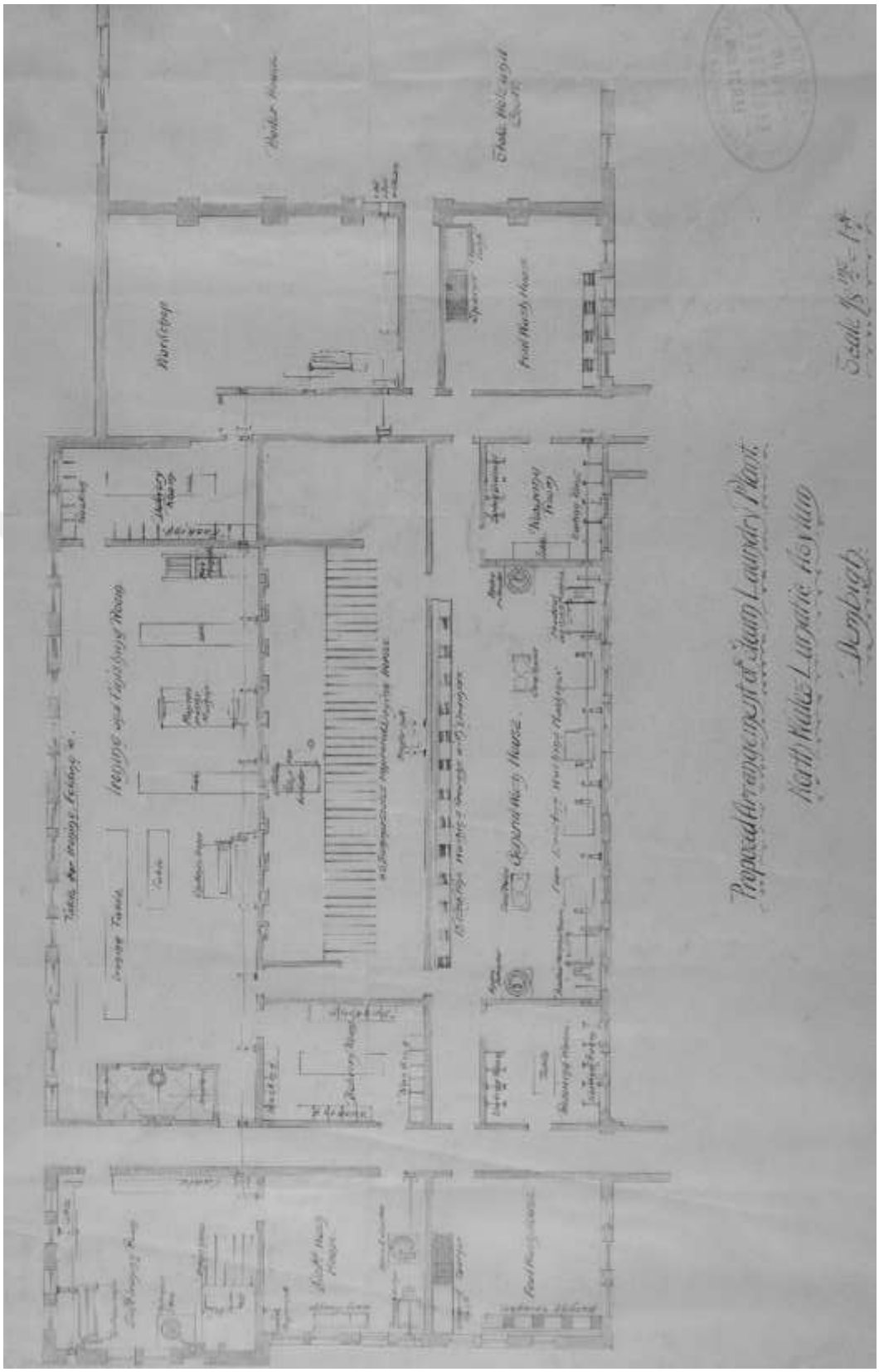

Figure 2.66: Proposal for a steam-powered laundry plant by the W. Summerscales and Sons Limited Engineers for the North Wales Hospital, 1898
Source: North East Wales Archives. Lindsey Sutton, "The Plans of the North Wales Hospital," accessed Feb. 11, 2023, https://denbighshirearchives.wordpress.com/2018/08/07/the-plans-of-the-north-wales-hospital/.

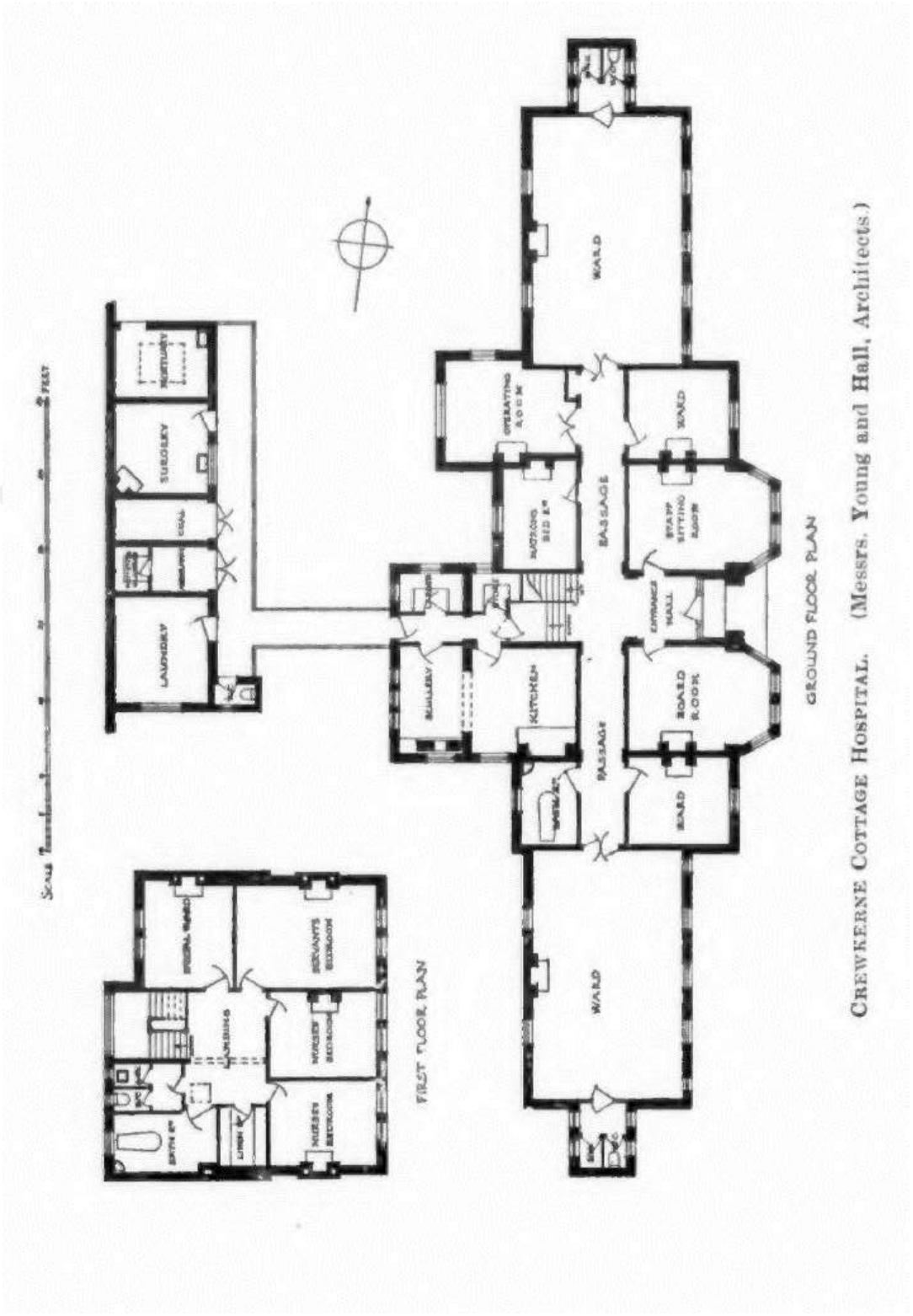

Figure 2.67: Plan for the Crewkerne Cottage Hospital
Source: Adams, “Cottage Hospitals,” 285.

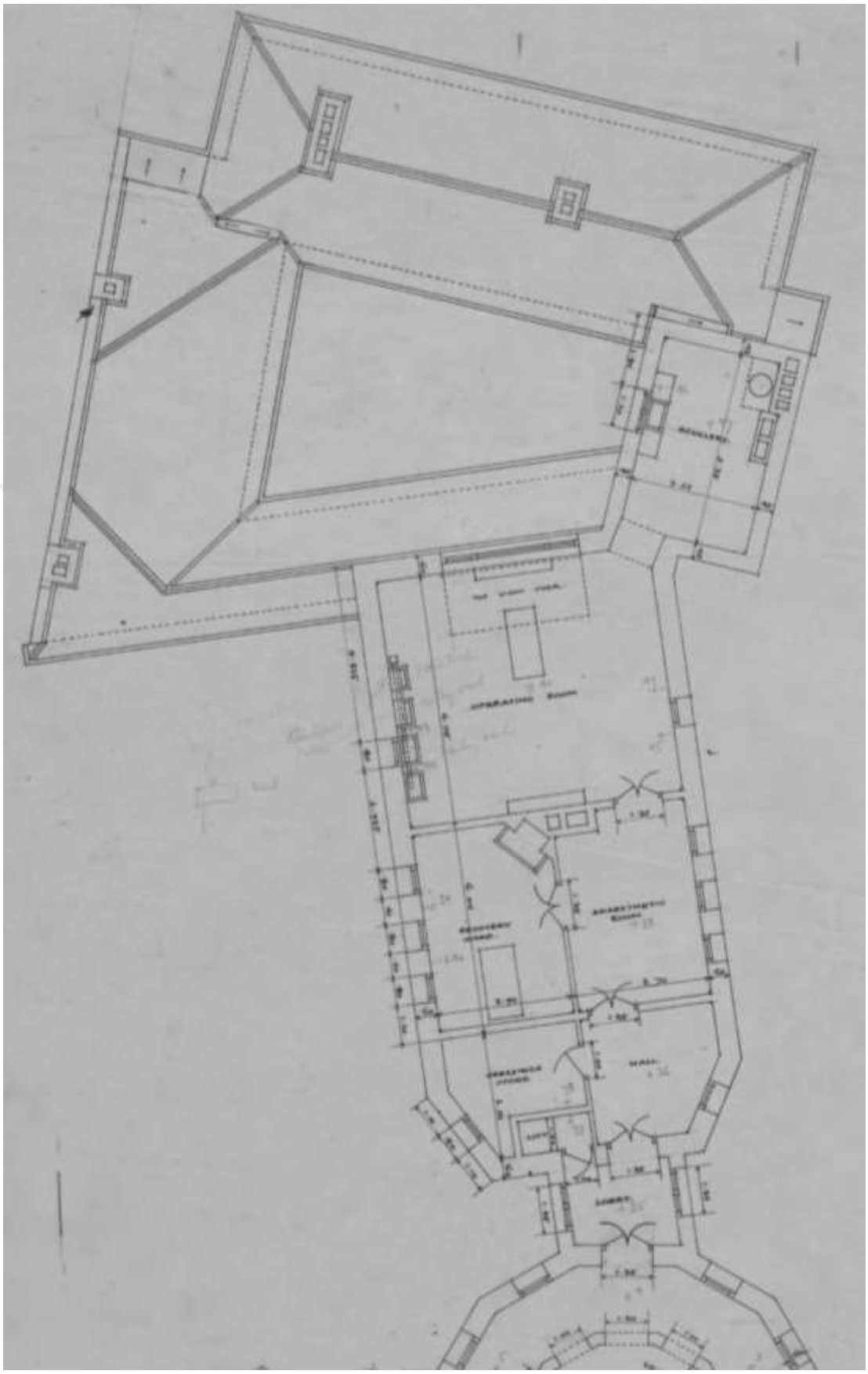

Figure 2.68: Detail of the first-floor plan displaying the areas reserved for surgical purposes
Source: RIBA, PA1457/AHP[247](1-20)

Figure 2.69: Present-day logo of the Prof. Dr. N. Reşat Belger Beyoğlu Ophthalmic Teaching and Research Hospital displaying the iconic massing and tower of the building designed by Charles Holden
Source: Social media channels of the hospital, https://www.facebook.com/beyoglugoz/?locale=tr_TR.

Figure 2.70: Watercolor drawing of the BSH Istanbul
Source: RIBA, AHP\1\15\1

Figure 2.71: Present-day panorama of Galata with the BSH building
Source: Kültür Envanteri, Copyright: Caner Cangül.

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Figure 2.72: The path to the main entrance of the BSH Istanbul
Photograph by Uğurgül Tunç, Mar. 1, 2023.

Figure 3.1: Sketch of hillside houses in Bebek, Istanbul by A.D.F. Hamlin
Source: Avery Architectural and Fine Arts Library, Columbia University, Hamlin collection, box 5, folder 88.

Figure 3.2: Drawing for the *Gureba* Hospital in Istanbul by Mimar Kemalettin, circa 1910-1911
Source: Istanbul University, Faculty of Medicine, donation of Yıldırım Yavuz.

Figure 3.3: Front view of A.D.F. Hamlin's proposal for the American Hospital and Training School for Nurses in Istanbul
Source: Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University.

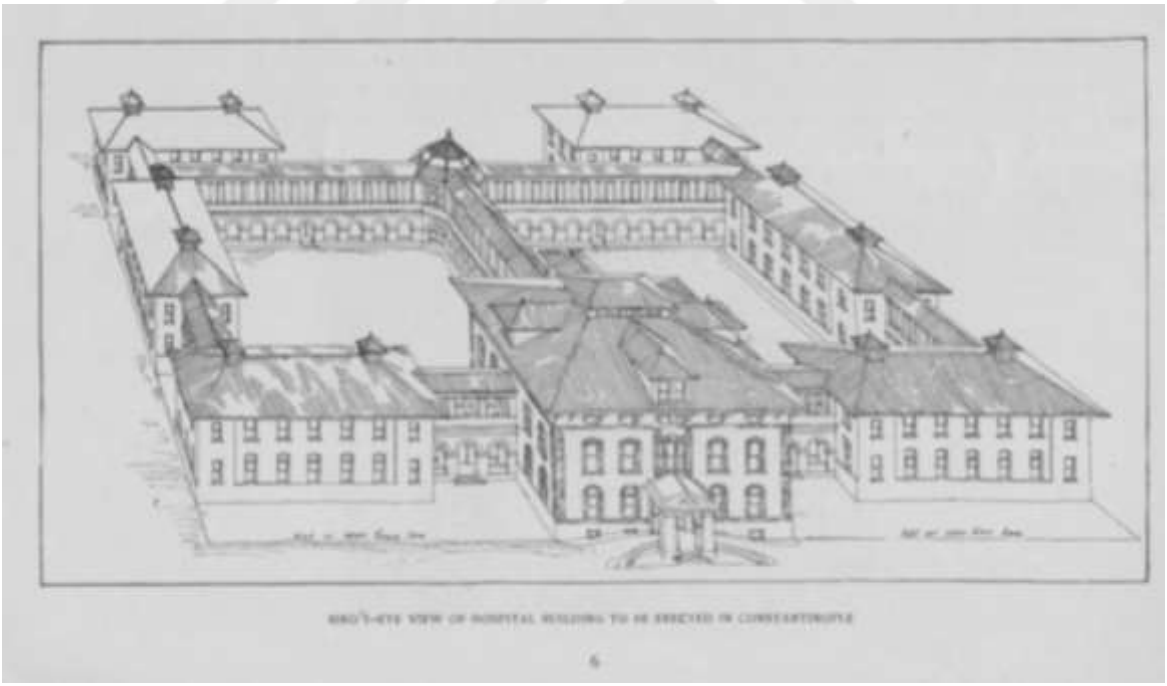

Figure 3.4: Bird's eye view of A.D.F. Hamlin's proposal for the American Hospital and Training School for Nurses in Istanbul
Source: Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University.

Figure 3.5: Patients in the AWH section of the Balıklı Greek Hospital in Yedikule, Istanbul.
Photograph by Jean Weinberg
Source: AWH records, acc144-b07f13 AWH Collection, Drexel Legacy Center Archives, Drexel University.

Figure 3.6: Photograph of the AWH Hospital in Izmit
Source: AWH records, acc144-b07f11, Drexel Legacy Center Archives, Drexel University.

Figure 3.7: Daily lecture to Turkish mothers at the milk station co-organized by philanthropic Turkish women and the AWH
Source: AWH records, acc144-b07f12, Drexel Legacy Center Archives, Drexel University.

Figure 3.8: Pathology Laboratory at the Mary Payne Bingham Medical Building designed by Coolidge and Shattuck Architects
Source: ACG Archives, Box 33, Folder 17, Columbia University RBML.

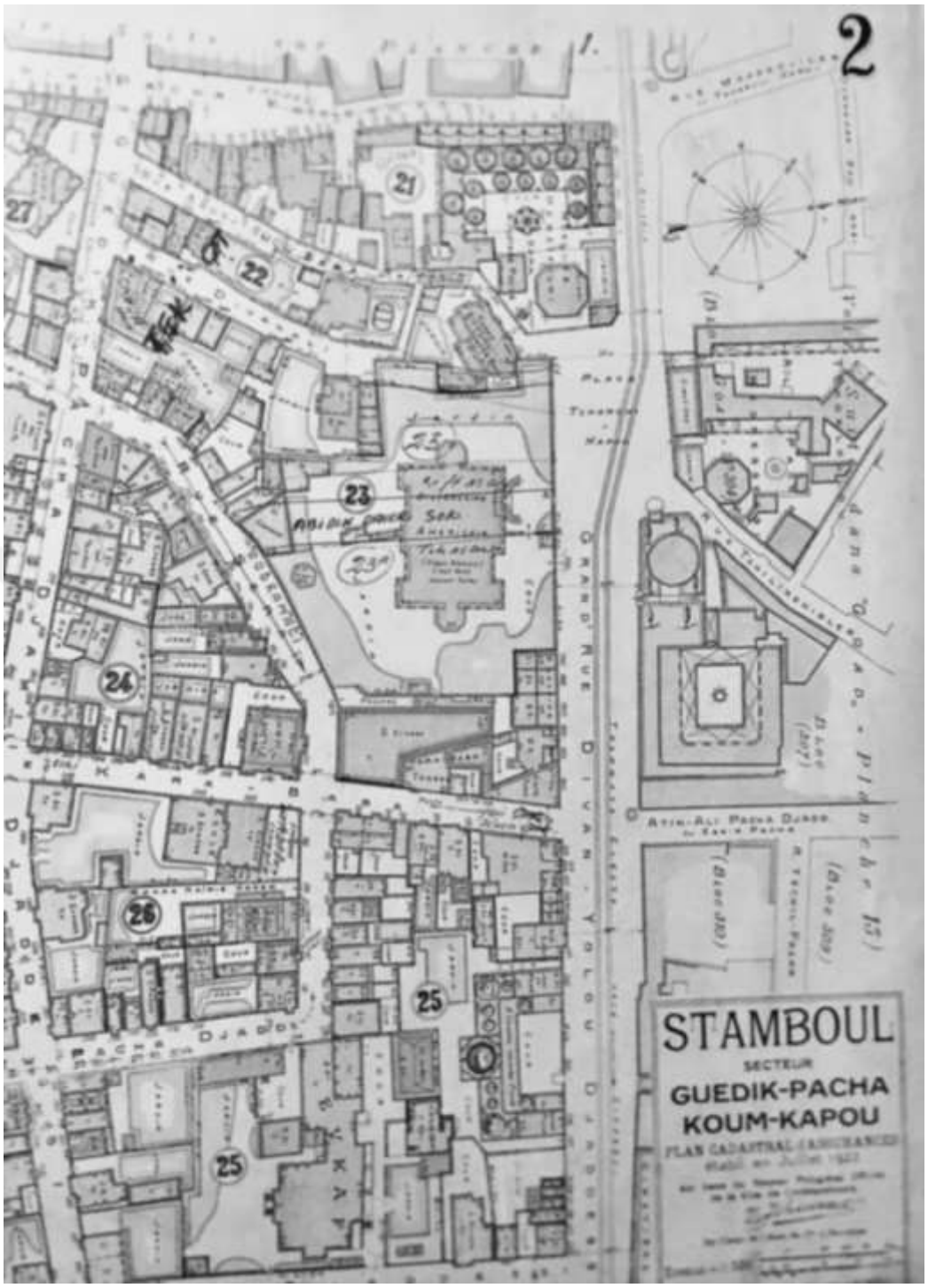

Figure 3.9: Gedikpaşa-Kumkapı district insurance map of Istanbul by Jacques Pervititch, Jul. 1922
Source: Salt Research, APLPESTAM02.

Figure 3.10: Detail of the map of Ankara displaying the New City section and the Central Hygiene Institute by Ahmet Rushti, 1927
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 3.


Figure 3.11: The Ministry of Health/Hygiene Building in Sıhhiye, Ankara, circa 1929
Source: RAC, RF records, Photographs FA003, S805A, box 167, folder 3243.

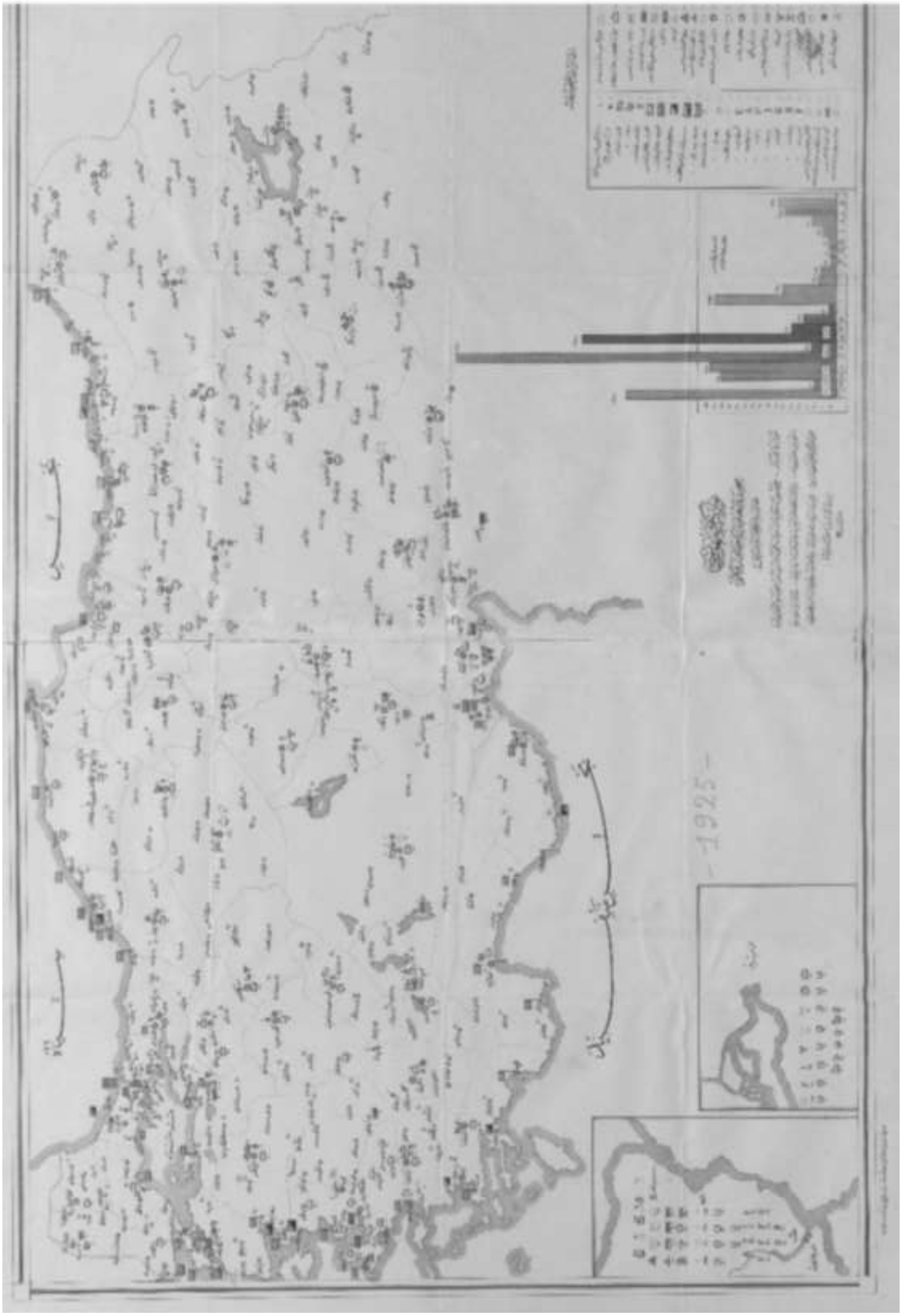

Figure 3.12: 1925 map displaying hospitals, dispensaries, clinics, and public health-related establishments such as laboratories scattered across Anatolia
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 4.

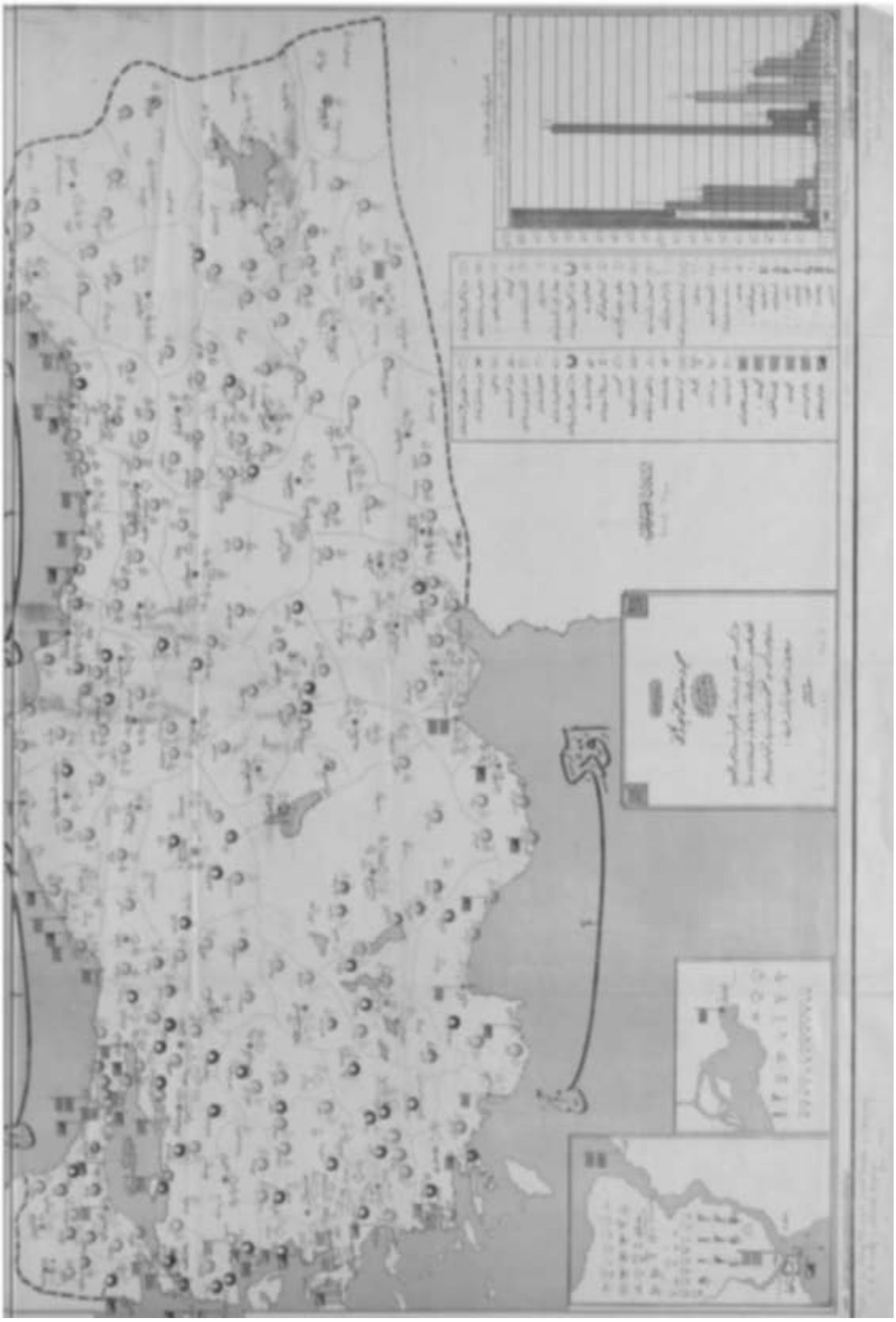

Figure 3.13: 1927 map displaying public health-related establishments planned to be opened by 1929 in the Turkish Republic
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 3.

Figure 3.14: Zonguldak Memleket Hospital designed by Mimar Kemalettin
Source: "Devlet Hastanesi'ni Anasti Boyacıoğlu isimli Rum yaptırdı," *Zonguldak Pusula Gazetesi*, Oct. 16, 2018, https://www.pusulagazetesi.com.tr/devlet-hastanesini-anasti-boyacioglu-isimli-rum-yaptirdi

Figure 3.15: Drawing of the Ankara Numune Hospital designed by Robert Oerley
Source: RAC, RF records, Photographs FA003, S805A, box 167, folder 3243.

Figure 3.16: Ankara Numune Hospital – "The New Model General Hospital," 1932
Source: RAC, RF records, International Health Board/Division records RG5, subseries 3_700, box 237, folder 2881.

Figure 3.17: Dr. İhsan Sami House designed by Seyfettin Erkan (later known as Seyfi Arkan)
Source: Seyfettin Erkan, "Dr. İhsan Sami Evi," *Mimar* 48 (Dec. 1934): 335.

Figure 3.18: Drawing by Robert Oerley showing the positions of the CHI edifices
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 4. (Bacteriology and Chemistry building designed by Theodor Jost is marked as number 5)

Figure 3.19: Construction phase photograph of CHI's Bacteriology and Chemistry building designed by Theodor Jost, 1928
Source: RAC, RF records, Photographs FA003, S805A, box 167, folder 3243.

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Figure 3.20: Article in *Wiener Bilder* featuring the CHI building designed by Theodor Jost
Source: *Österreichische Nationalbibliothek, Wiener Bilder* 47, Nov. 20, 1938, 12-13.

Figure 3.21: Front entrance of the Yalova Gazi *Köşk* (today known as Atatürk Köşkü) designed by Robert Oerley
Source: Turkish Ministry of Culture and Tourism.

Figure 3.22: The CHI school building designed by Robert Oerley
Source: VEKAM Library and Archive, ACF0011

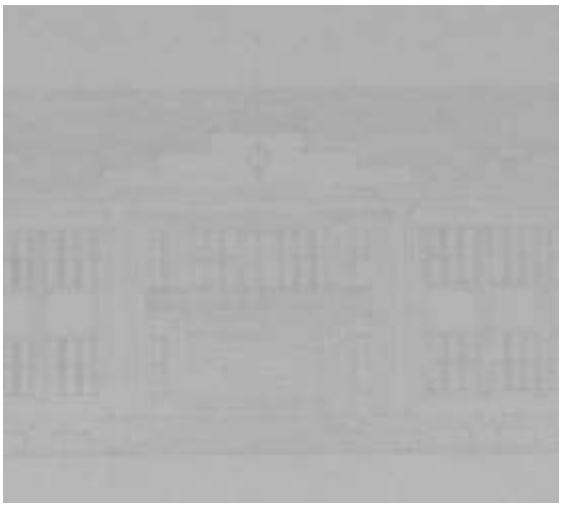

Figure 3.23: Robert Oerley's drawing of the front door of the CHI serum and vaccine production building, 1928
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 3.

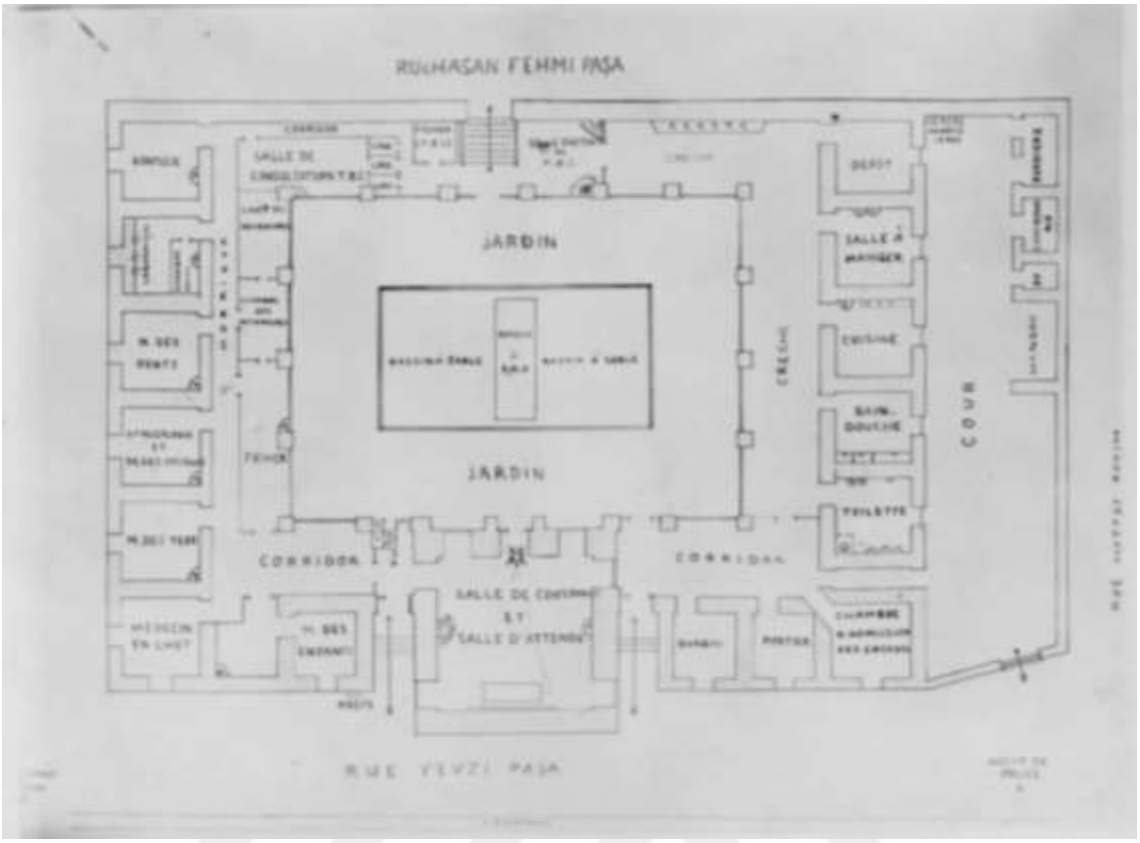

Figure 3.24: Plan of the health center established inside the Semiz Ali Paşa Medresesi in Istanbul
Source: RAC, RF records, International Health Board/Division records RG5, subseries 3_700, box 240, folder 2898.


Figure 3.25: Nurses in the health center established inside the Semiz Ali Paşa Medresesi in Istanbul
Source: RAC, RF records, International Health Board/Division records RG5, subseries 3_700, box 240, folder 2898.

Figure 3.26: Children playing in the courtyard of the health center established inside the *Semiz Ali Paşa Medresesi* in Istanbul, 1935
Source: RAC, RF records, International Health Board/Division records RG5, subseries 3_700, box 240, folder 2898.

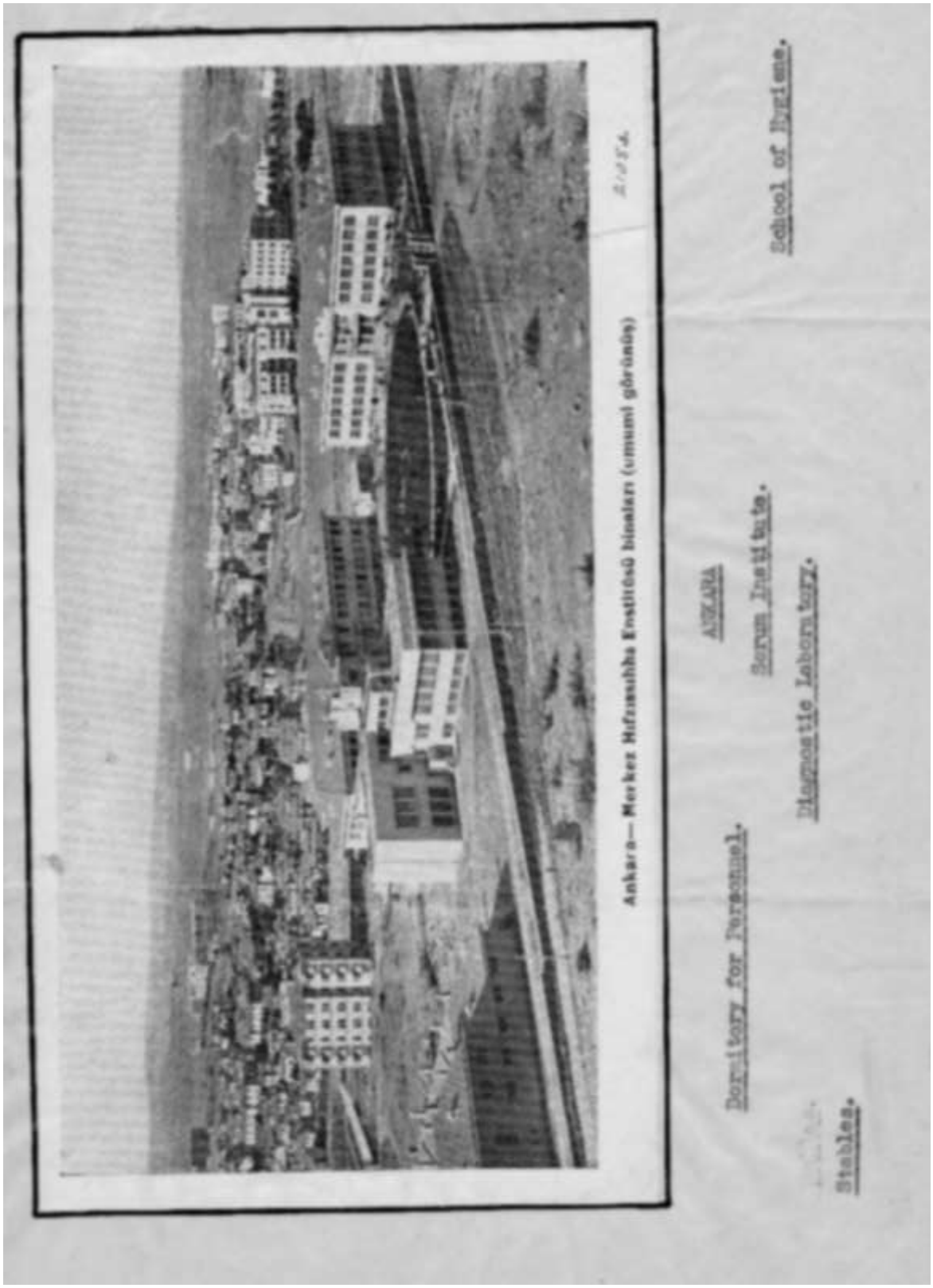

Figure 3.27: Photograph of the CHI buildings in 1933
Source: RAC, RF records, International Health Board/Division records RG5, subseries 3_700, box 238, folder 2887.

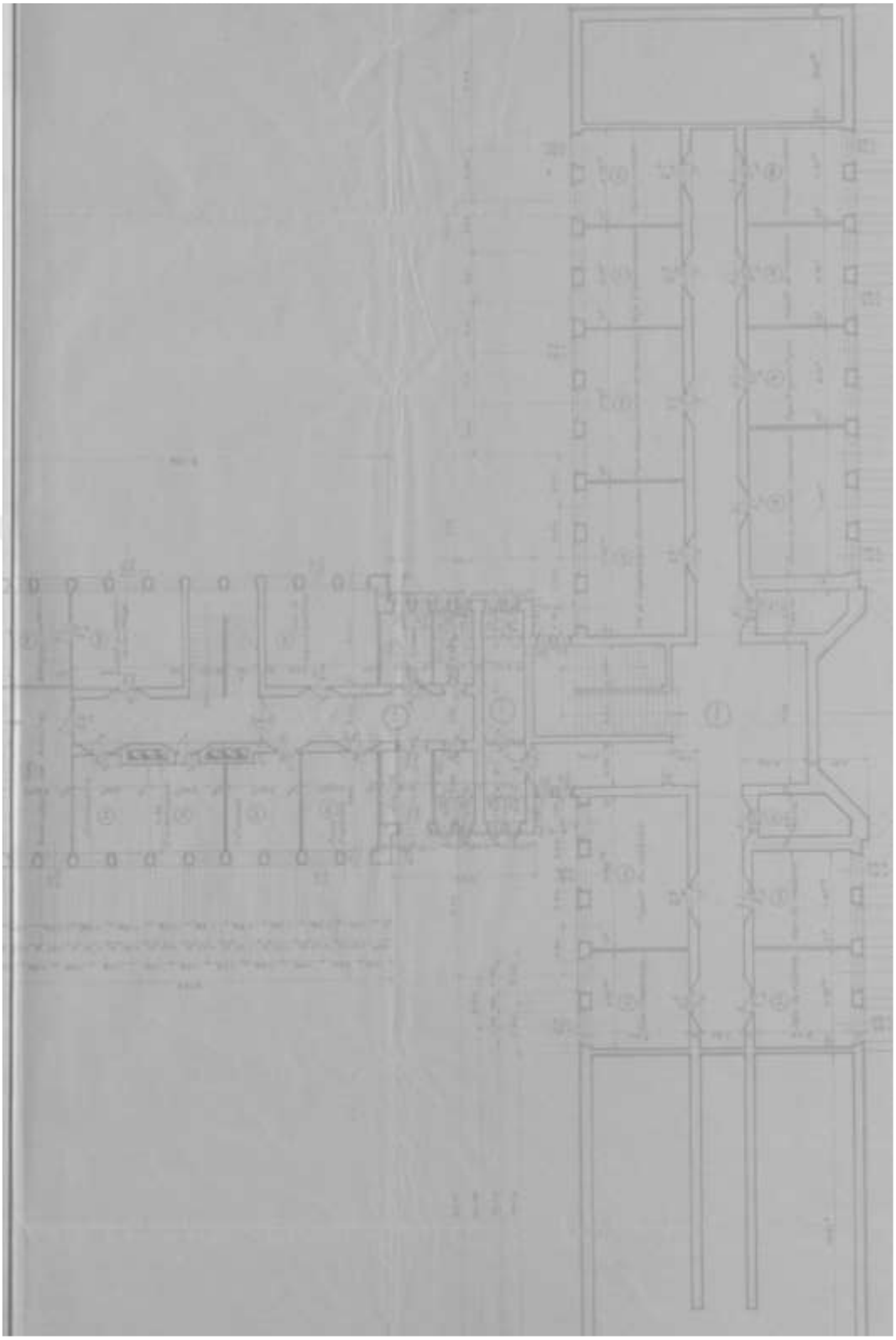

Figure 3.28: Floor plan for the basement of the Serum and Vaccine Production Building (main building) of the CHI by Robert Oerley, 1928
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 4.

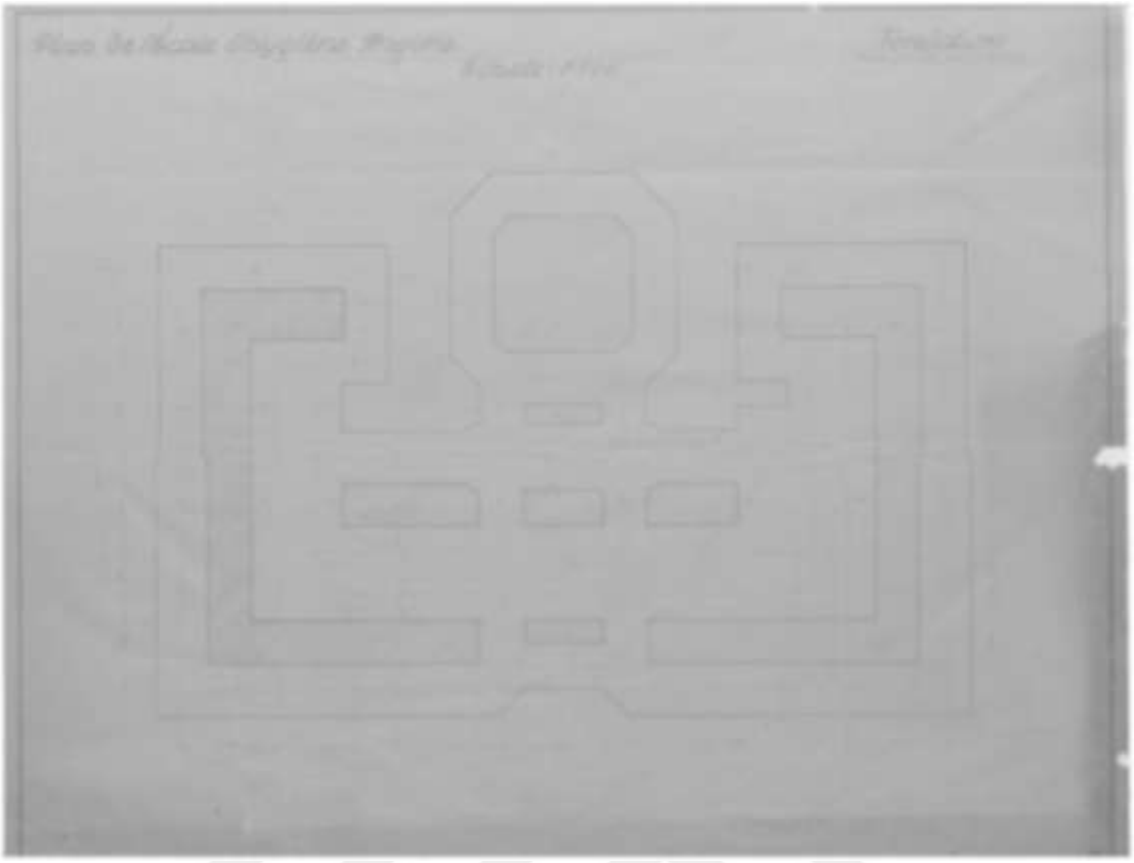

Figure 3.29: Drawing by Robert Oerley for the foundation of the CHI school building, Aug. 1928
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 4.

Figure 3.30: Posterior of the CHI school building, photograph dated 1934
Source: VEKAM Library and Archive, ACF0012.

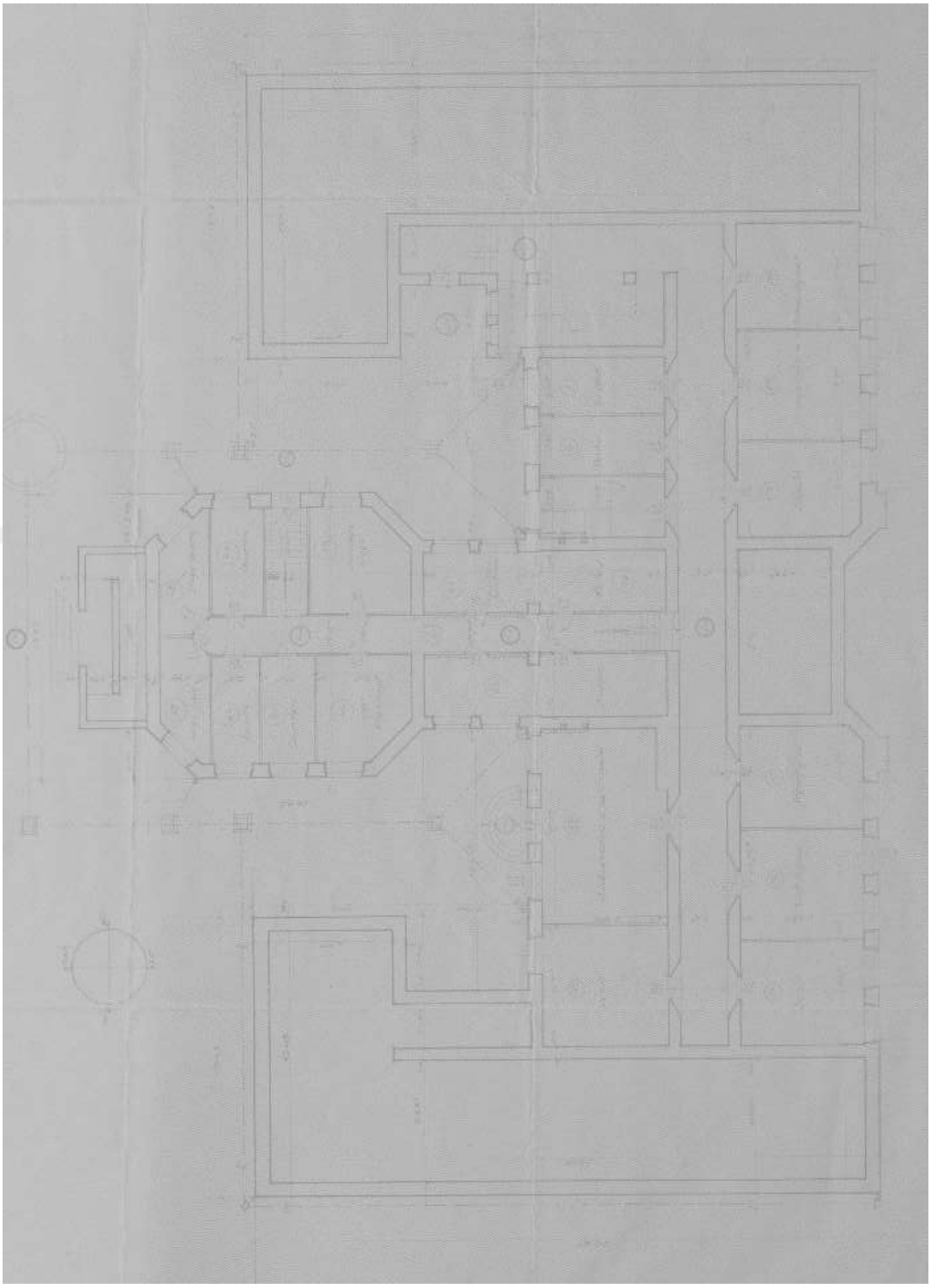

Figure 3.31: Basement floor plan for the CHI school building by Robert Oerley, Aug. 1928
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 4.

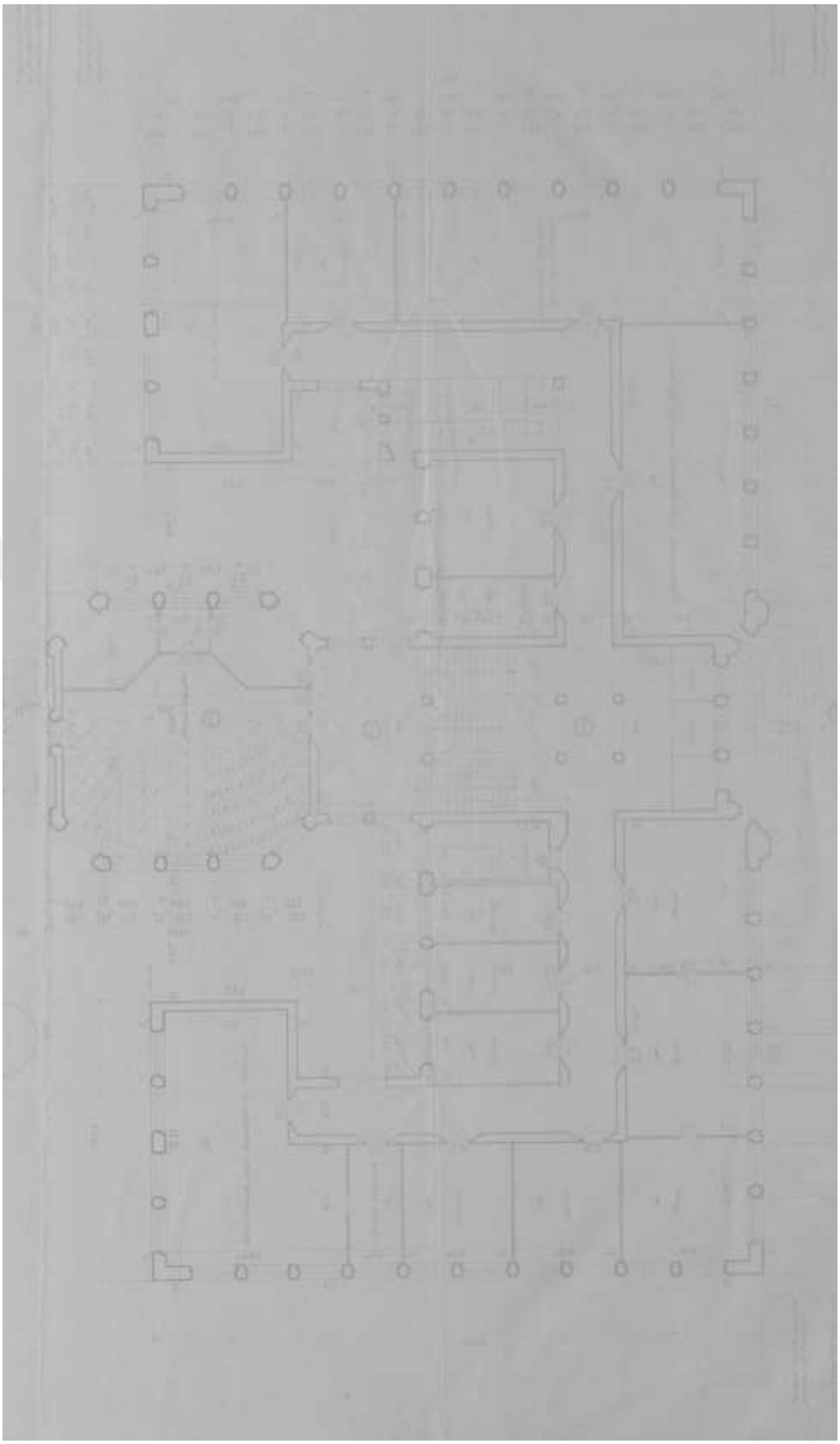

Figure 3.32: Ground floor plan for the CHI school building by Robert Oerley, Aug. 1928
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 4.

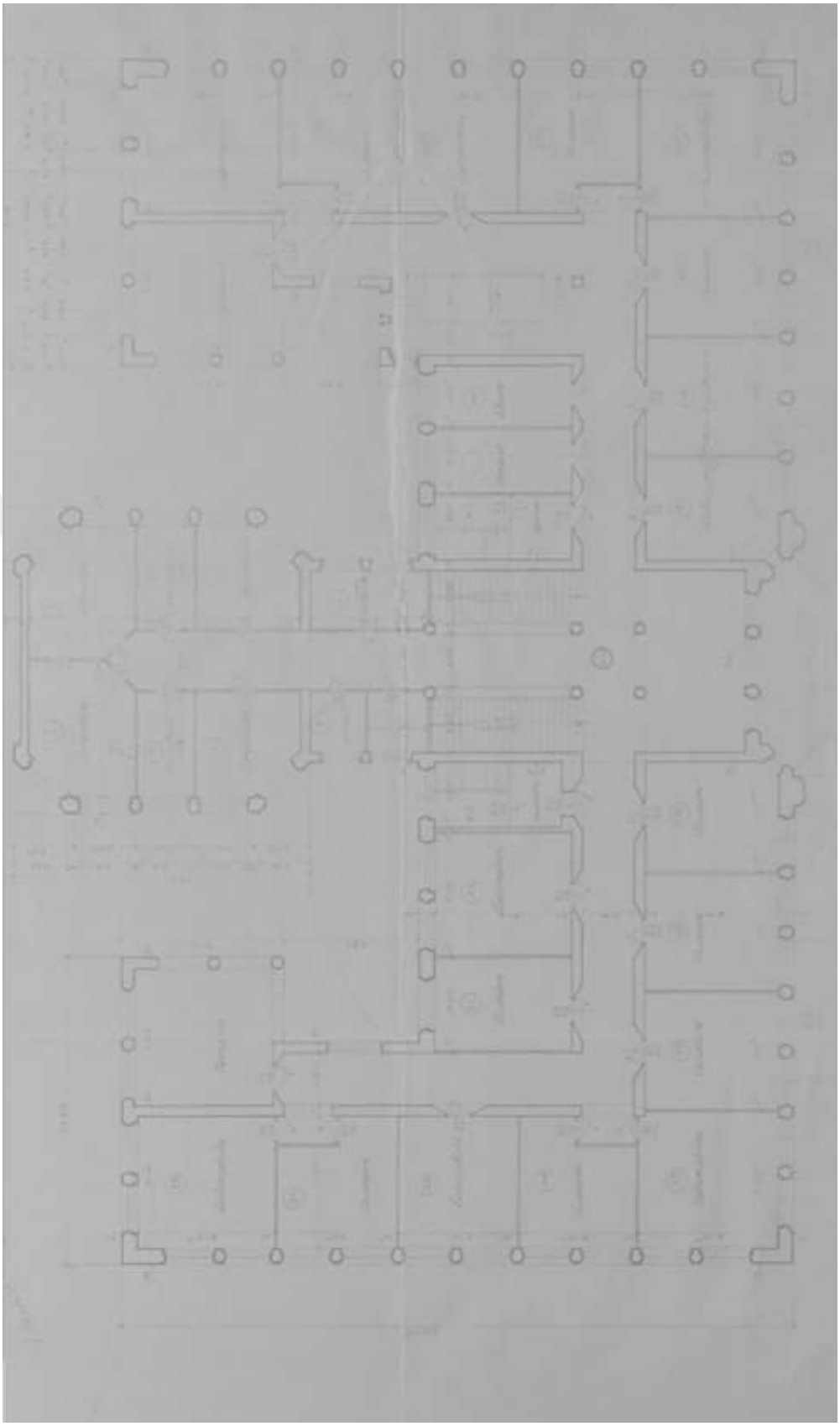

Figure 3.33: First floor plan for the CHI school building by Robert Oerley, Aug. 1928
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 3.

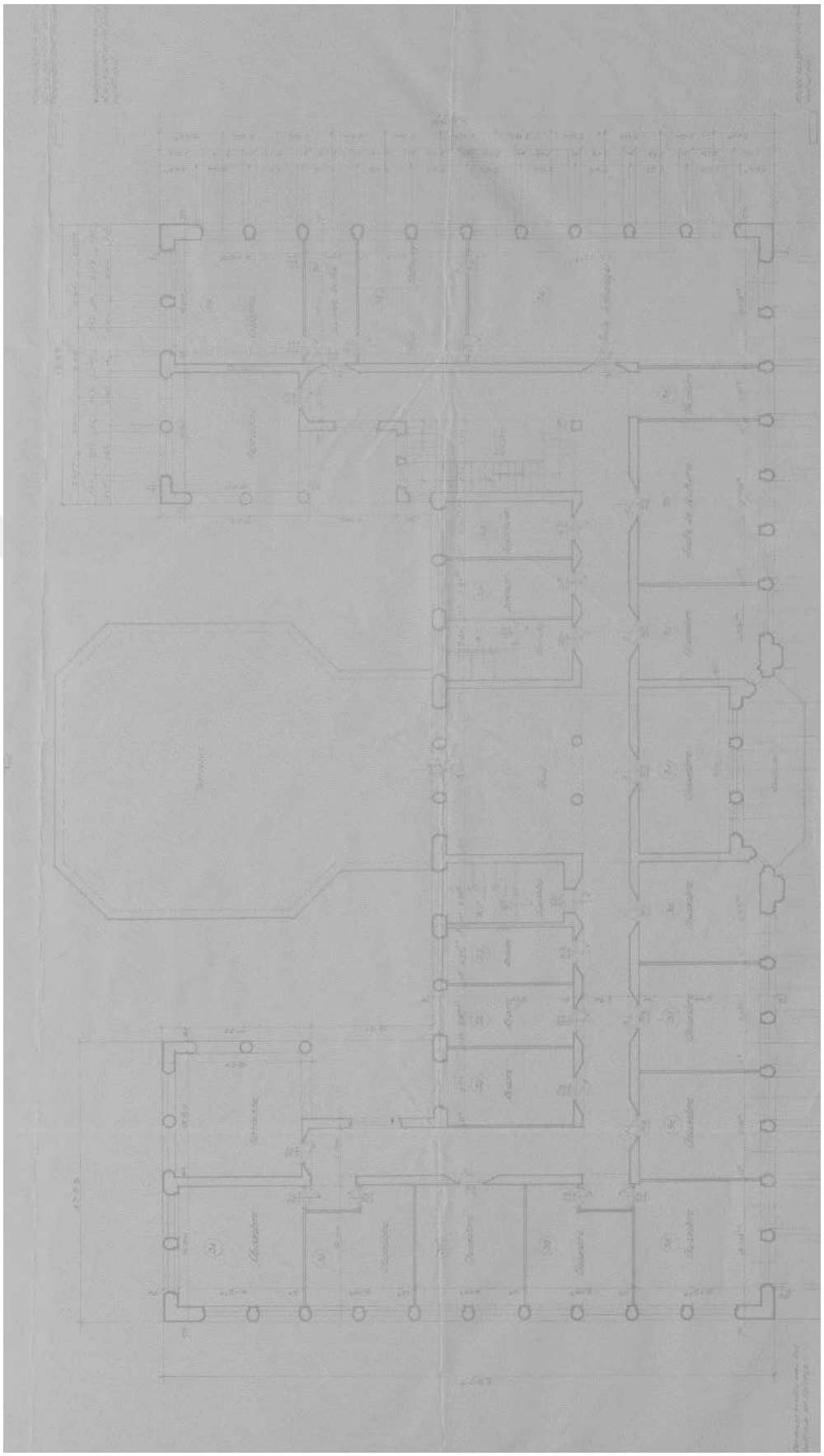

Figure 3.34: Second floor plan for the CHI school building by Robert Oerley, Aug. 1928
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 4.

Figure 3.35: Front elevation for the CHI school building by Robert Oerley, Aug. 1928
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 3.

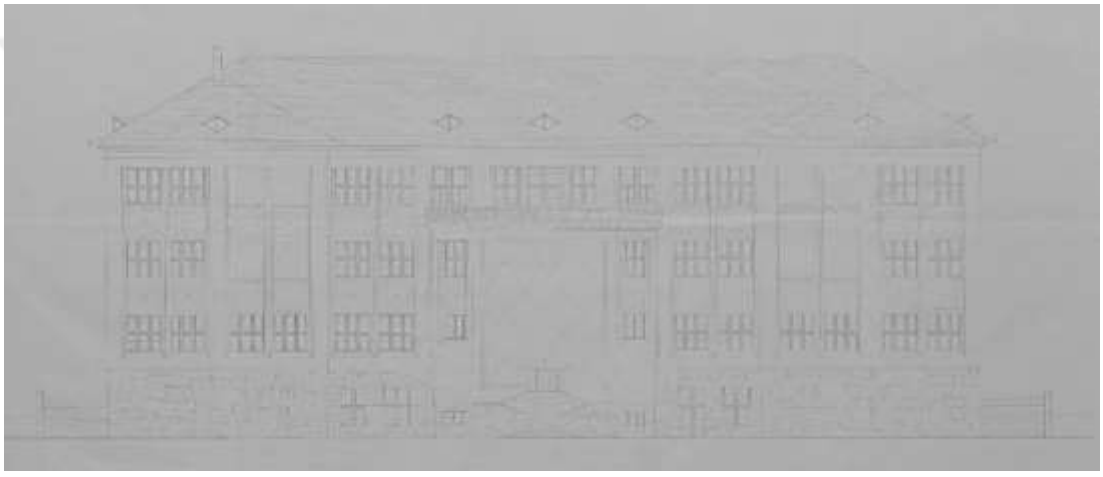

Figure 3.36: Posterior elevation for the CHI school building by Robert Oerley, Aug. 1928
Source: RAC, Maps and Flat Files, FA465, Drawer B 4, Folder 3.

Figure 3.37: The Turkish Red Crescent building in Ankara designed by Robert Oerley
Source: VEKAM Library and Archive, 0894.

Figure 3.38: Undated aerial photograph of the CHI buildings by Cemal Işıksel
Source: VEKAM Library and Archive, ALB_05_Page_38.

Figure 3.39: Postcard featuring one of the buildings of the German Hospital in Istanbul
Source: Istanbul Erkek Liseliler Eğitim Vakfı (Istanbul Boys' Highschool Alumni Foundation for Education)

Figure 3.40: American Hospital Nurse Training School students in front of one of the buildings of the German Hospital complex in Istanbul
Photograph by Jean Weinberg. Source: ABHO_03_01_phg_18, Suna Kıraç Library, Koç University

Figure 3.41: Living room in Nurses' Home, circa 1927
Source: ACG Archives, Box 33, Folder 1, Columbia University RBML.

Figure 3.42: American Hospital building on 91 Teşvikiye Avenue
Source: Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University

Figure 3.43: Hand-drawn map displaying the new location of the American Hospital, 1928
Source: ARIT, Admiral Bristol Hospital 1920-1959 (ARIT Library, 362.11 ARC)

Figure 3.44: Kendall & Taylor drawing of the proposed building for the American Hospital and School of Nursing in Istanbul
Source: Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University

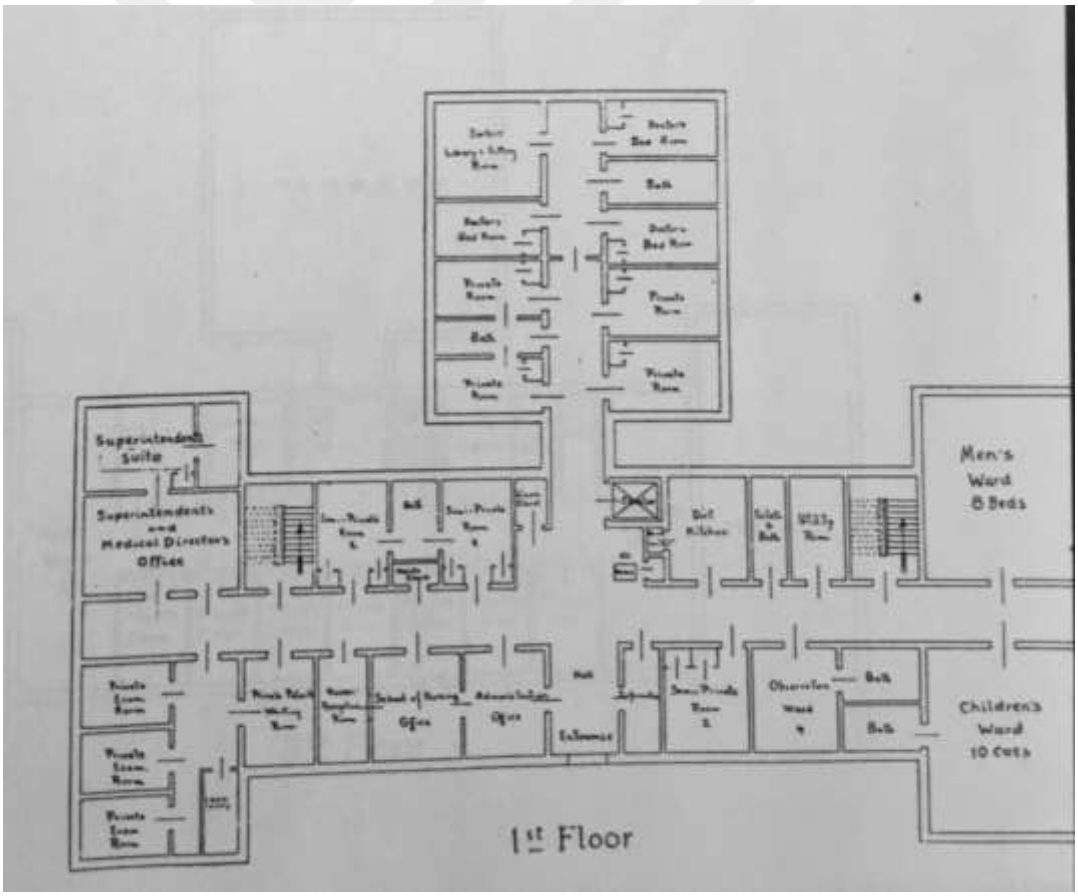

Figure 3.45: First floor plan for the American Hospital and Nursing School building proposed by Kendall & Taylor Architects
Source: ARIT, Admiral Bristol Hospital 1920-1959 (ARIT Library, 362.11 ARC)

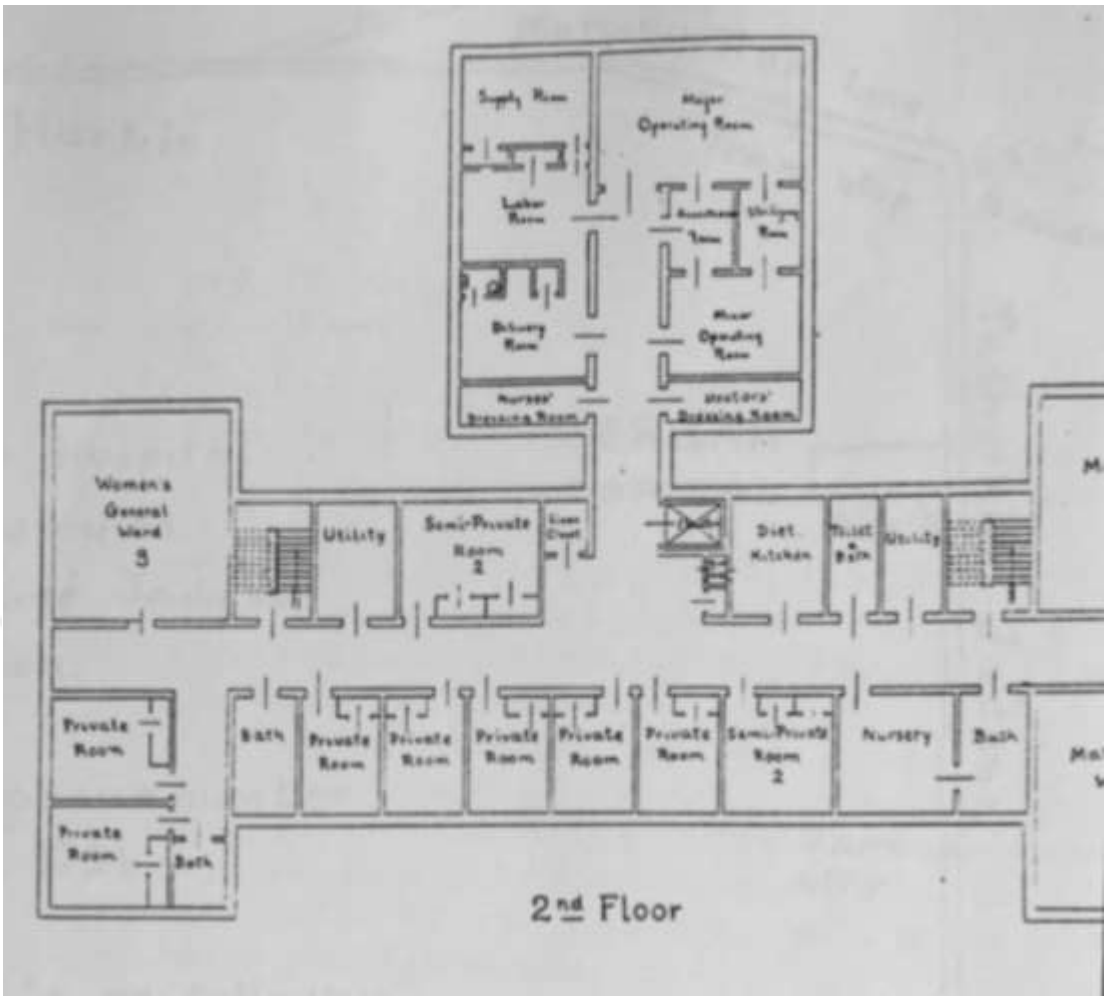

Figure 3.46: Second floor plan for the American Hospital and Nursing School building proposed by Kendall & Taylor Architects
Source: ARIT, Admiral Bristol Hospital 1920-1959 (ARIT Library, 362.11 ARC)

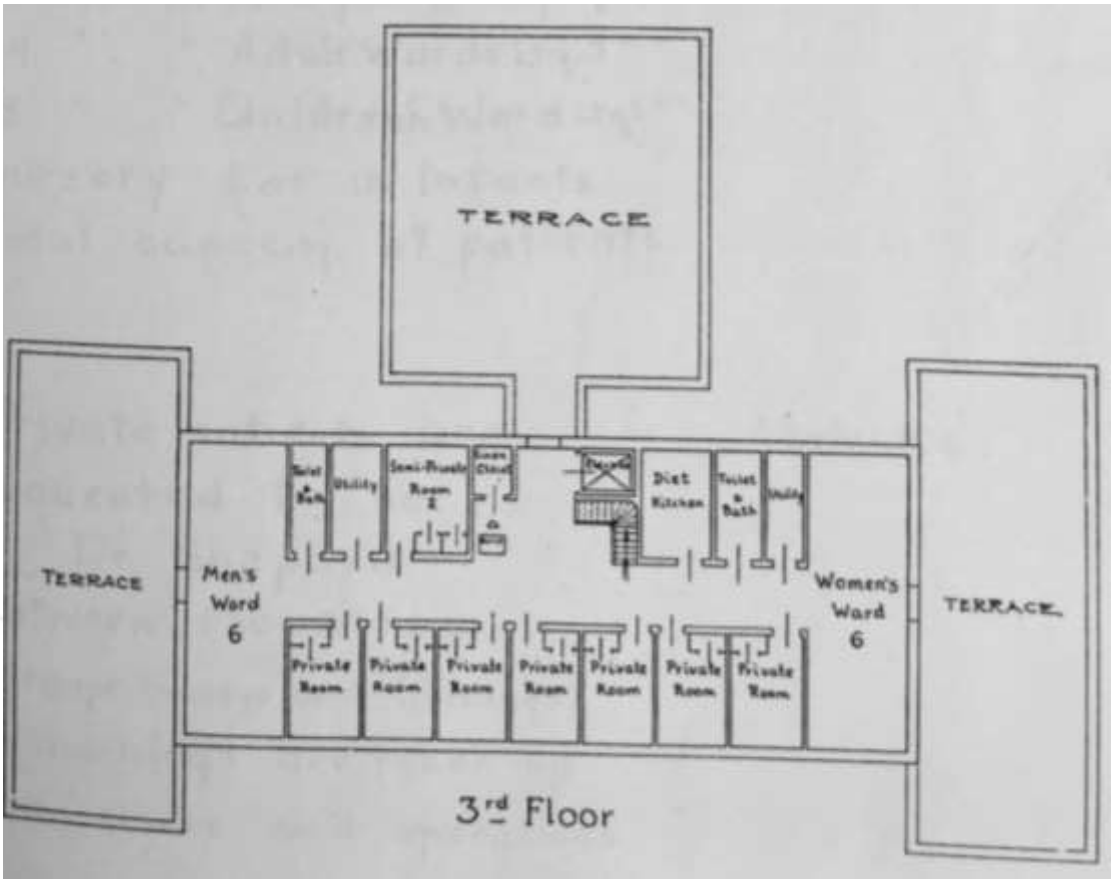

Figure 3.47: Third floor plan for the American Hospital and Nursing School building proposed by Kendall & Taylor Architects
Source: ARIT, Admiral Bristol Hospital 1920-1959 (ARIT Library, 362.11 ARC)

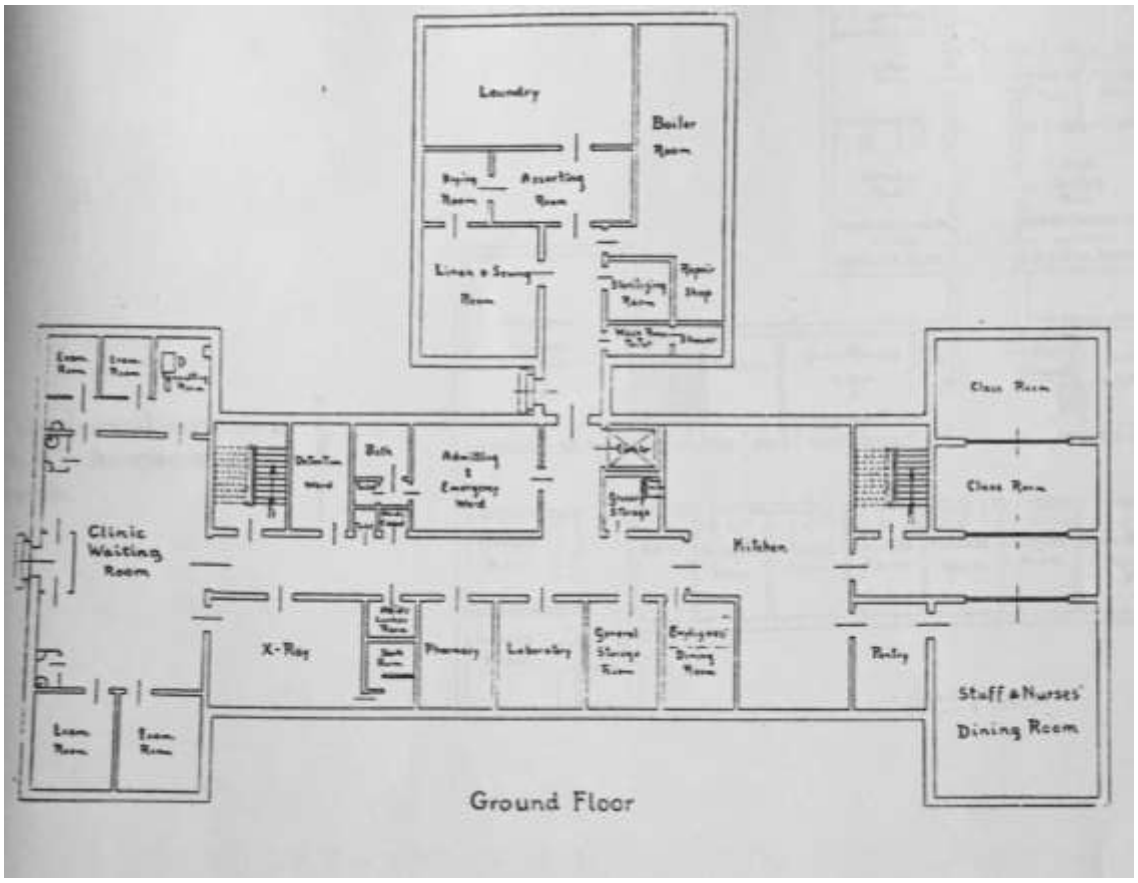

Figure 3.48: Ground floor plan for the American Hospital and Nursing School building proposed by Kendall & Taylor Architects
Source: ARIT, Admiral Bristol Hospital 1920-1959 (ARIT Library, 362.11 ARC)


Figure 3.49: The Archaeological Museum of Lesvos designed by W. Stuart Thompson Photographed by Βασιλείου, 1934. Source: The ASCSA Archives

Figure 3.50: The Archaeological Museum of Corinth designed by W. Stuart Thompson, 1934
Source: Corinth Excavations collection, the ASCSA Archives.

Figure 3.51: Bauhaus-inspired building on Lexington Avenue and 57th Street designed by Thompson and Churchill, 1932
Source: Avery Architectural and Fine Arts Library, Columbia University.

Figure 3.52: Morris Şinasi Memorial Hospital designed by W. Stuart Thompson, Manisa
Source: Erkan Akbalık, "Manisa Devlet Hastanesi ve Morris Şinasi Hastanesi Özelinde Manisalı'nın Vefa İmtihanı," Jun. 21, 2022, accessed Feb. 17, 2024, https://www.tarihistan.org/yazarlar/erkan-akbalik/manisa-devlet-hastanesi-ve-morris-sinasi-hastanesi-ozelinde-manisalinin-vefa-imtihani/10014/.


Figure 3.53: W. Stuart Thompson drawing for the American Hospital in Istanbul
Source: Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University.

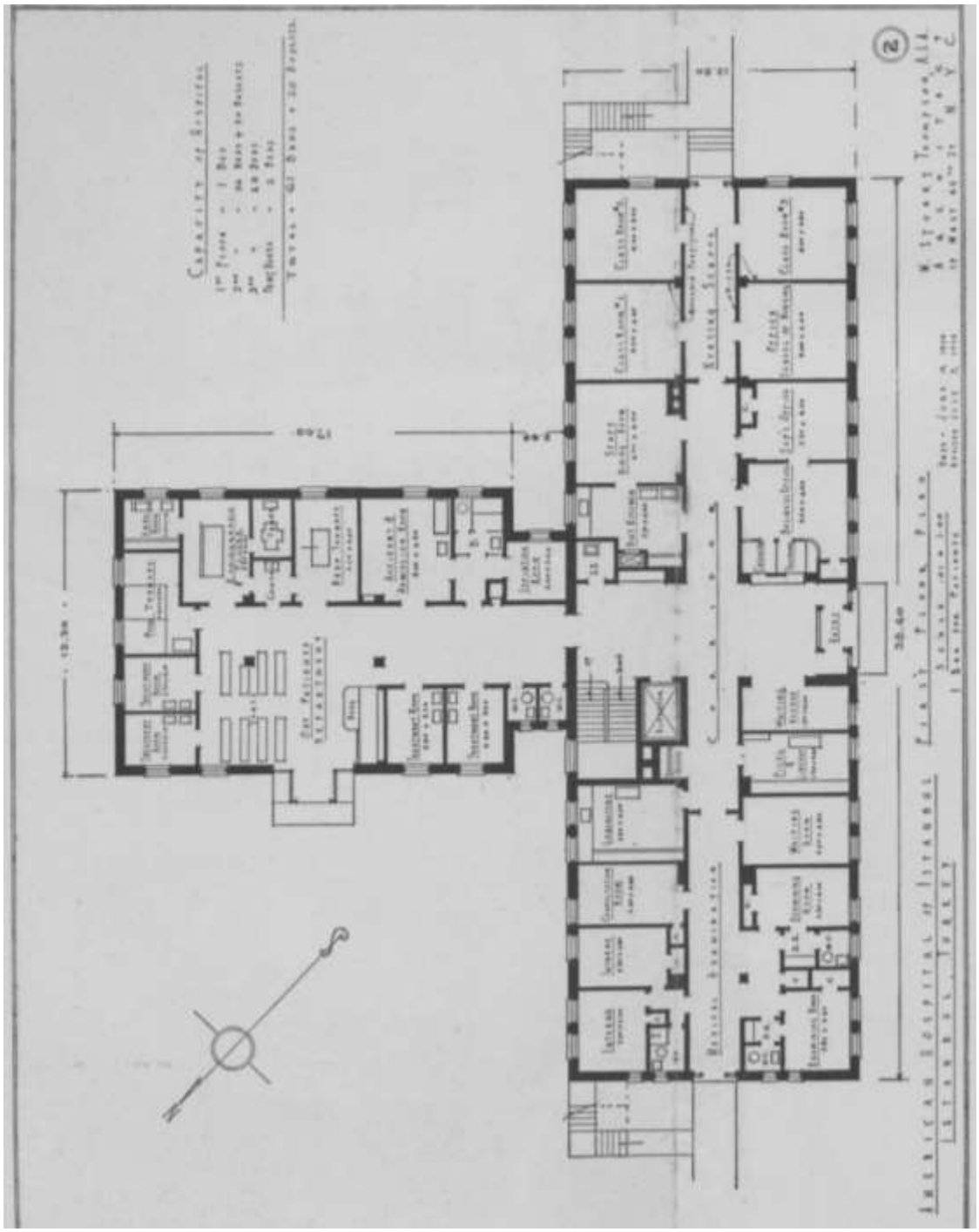

Figure 3.54: First floor plan of the American Hospital in Istanbul by W. Stuart Thompson
Source: Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University.

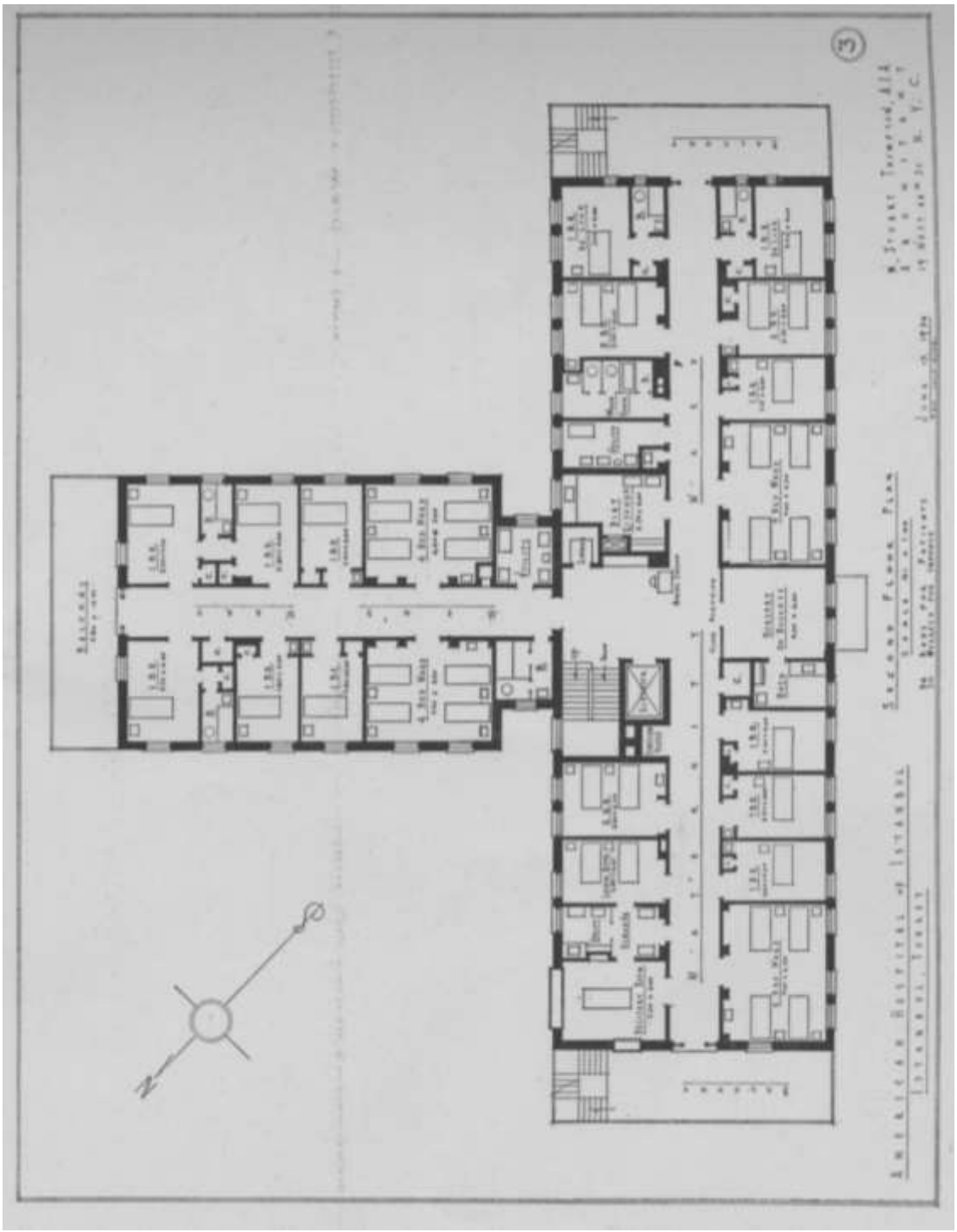

Figure 3.55: Second floor plan of the American Hospital in Istanbul by W. Stuart Thompson
Source: Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University.

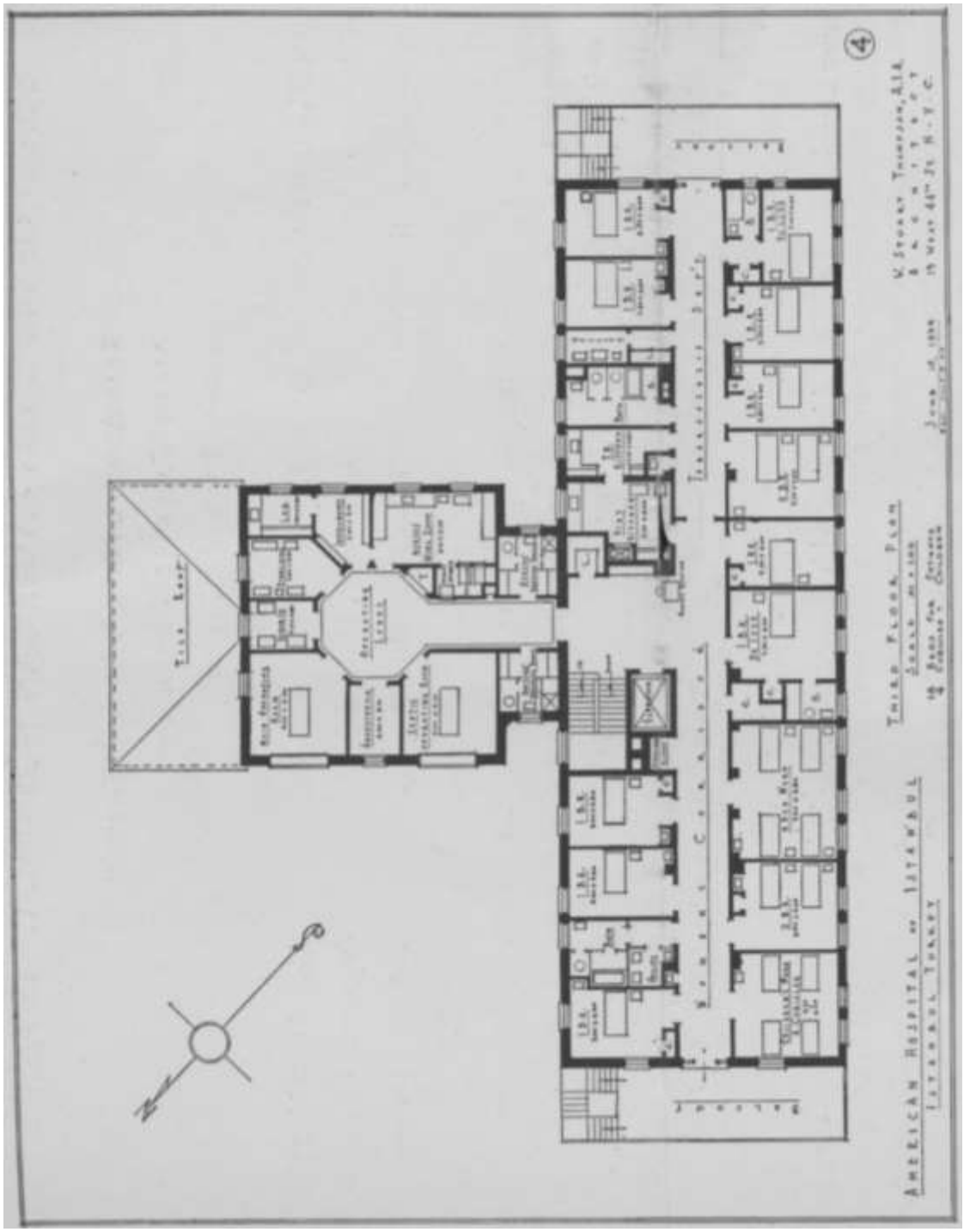

Figure 3.56: Third floor plan of the American Hospital in Istanbul by W. Stuart Thompson
Source: Admiral Bristol Hospital (Istanbul, Turkey). Pamphlets Folio RA 990. T8. Z91. Harvard Divinity School Library, Harvard University.

Figure 3.57: A photograph of the American Hospital in Istanbul designed by W. Stuart Thompson
Source: RAC, RBF, Projects (Grants), RG3, Subgroups 1 and 2 (FA005), Box 78, Folder 529.

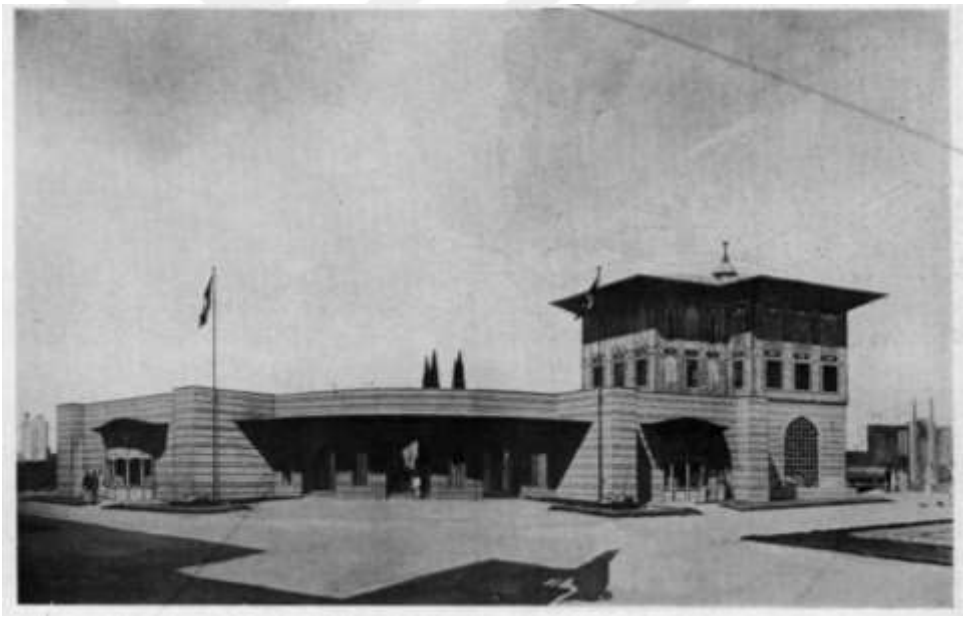

Figure 3.58: A view of the Turkish pavilion designed by Sedad Hakkı Eldem at the 1939 New York World's Fair.
Source: Eldem, "1939 New York Sergisinde Türk Pavyon Projesi," 153.

Figure 3.59: Yalova Thermal Hotel building designed by Sedad Hakkı Eldem
Source: Eldem, "Yalova Termal Oteli," 71.

Figure 3.60: Admiral Bristol School of Nursing building designed by Sedad Hakkı Eldem
Source: ABHO_03_04_phg_05, Suna Kıraç Library, Koç University

Figure 3.61: Watercolor sketch of a house by Sedad Hakkı Eldem, 1926
Source: Bozdoğan, “The Turkish Home Reappraised,” 26.

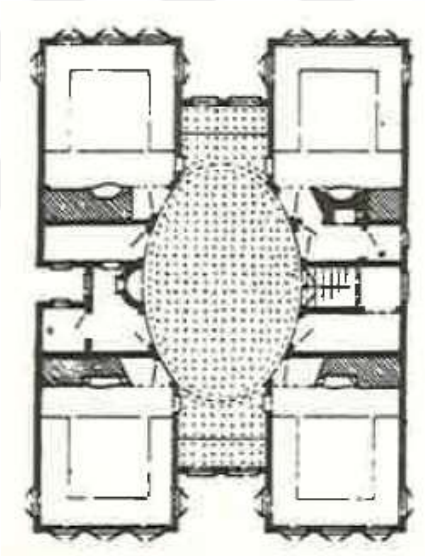

Figure 3.62: Floor plan with an oval sofa, house in Cihangir, Istanbul
Source: Eldem, *Türk Evi: Osmanlı Dönemi I*, 37.

Figure 3.63: The Ağaoğlu House designed by Sedad Hakkı Eldem
Source: Eldem, "Maçkada Prof. A. A. evi," 279.

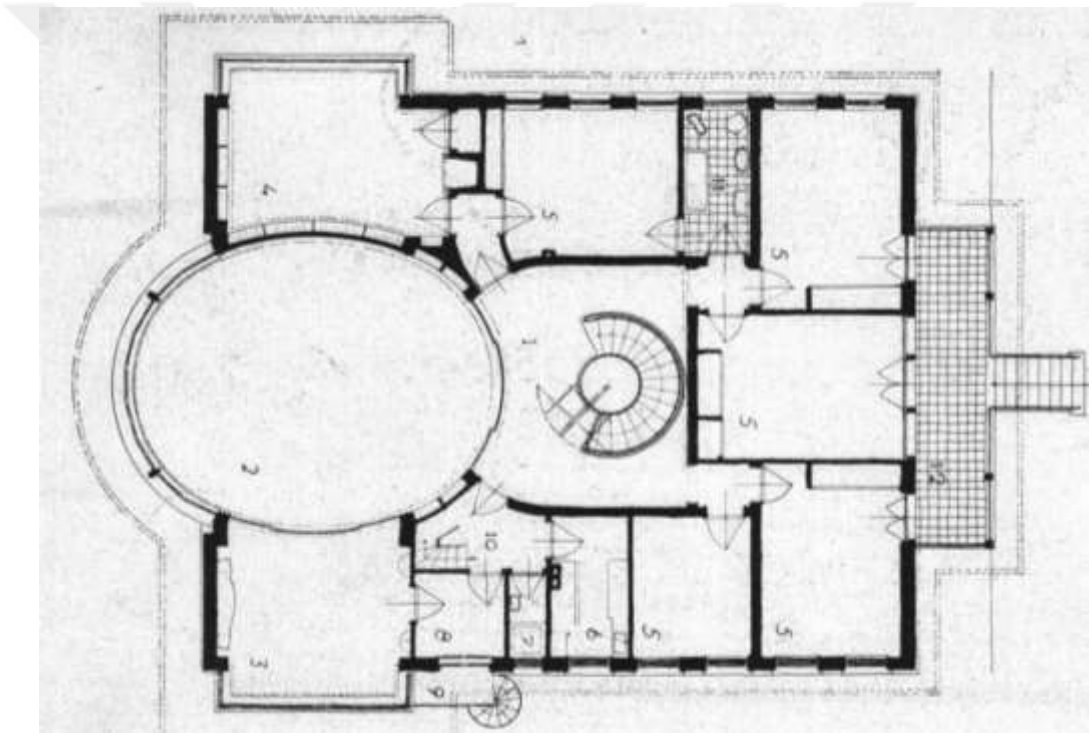

Figure 3.64: The first-floor plan of the Ağaoğlu House designed by Sedad Hakkı Eldem
Area marked as 1 is designated as the *sofa,* area marked as 2 is designated as the living room.
Source: Eldem, "Maçkada Prof. A. A. evi," 278.

Figure 3.65: Marquee of the Hilton Hotel in Istanbul
Source: Salt Research.

Figure 3.66: ABSN Nurses' Home designed by Sedad Hakkı Eldem behind pine trees
Source: ABHO Collection, SKL, Koç University

Figure 3.67: Royal Victoria Hospital Nurses' Home in Montreal
Source: Adams, *Medicine by Design*, 77.

Figure 3.68: Courtyard of the Kirazlıyayla Sanatorium in Bursa designed by Emin Onat and Leman Tomsu
Source: Archives of the Bursa Municipality. Mehmet Atalay Yılmaz, "Uludağ'da Saklanan Eser: Kirazlıyayla Sanatoryumu," *gzt Arkitekt*, Jan. 22, 2022, https://www.gzt.com/arkitekt/uludagda-saklanan-eser-kirazliyayla-sanatoryumu-3602170.

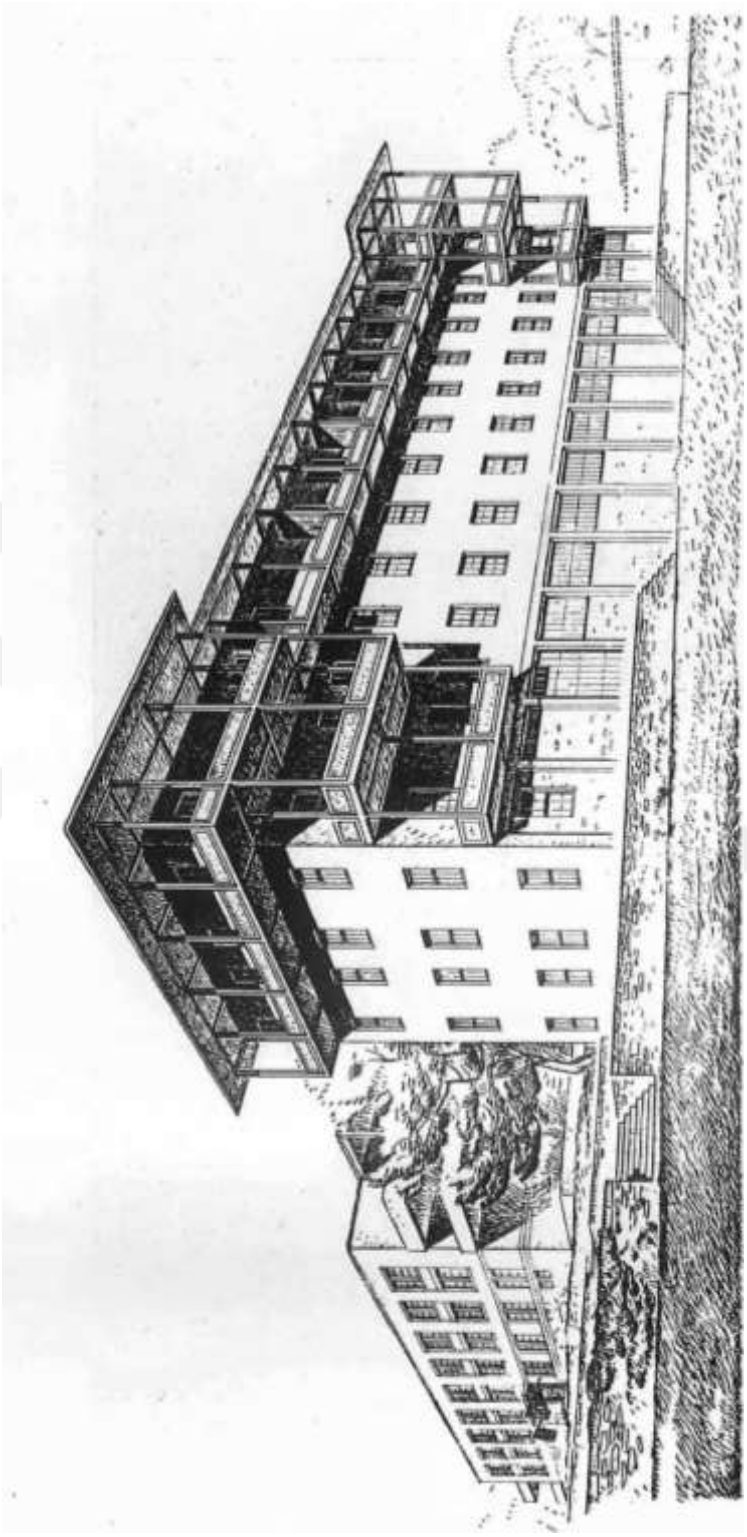

Figure 3.69: Drawing displaying the ABSN Nurses' Home in front of the hospital building
Source: Eldem, "Amiral Bristol Hastahanesi Paviyonu," 55.

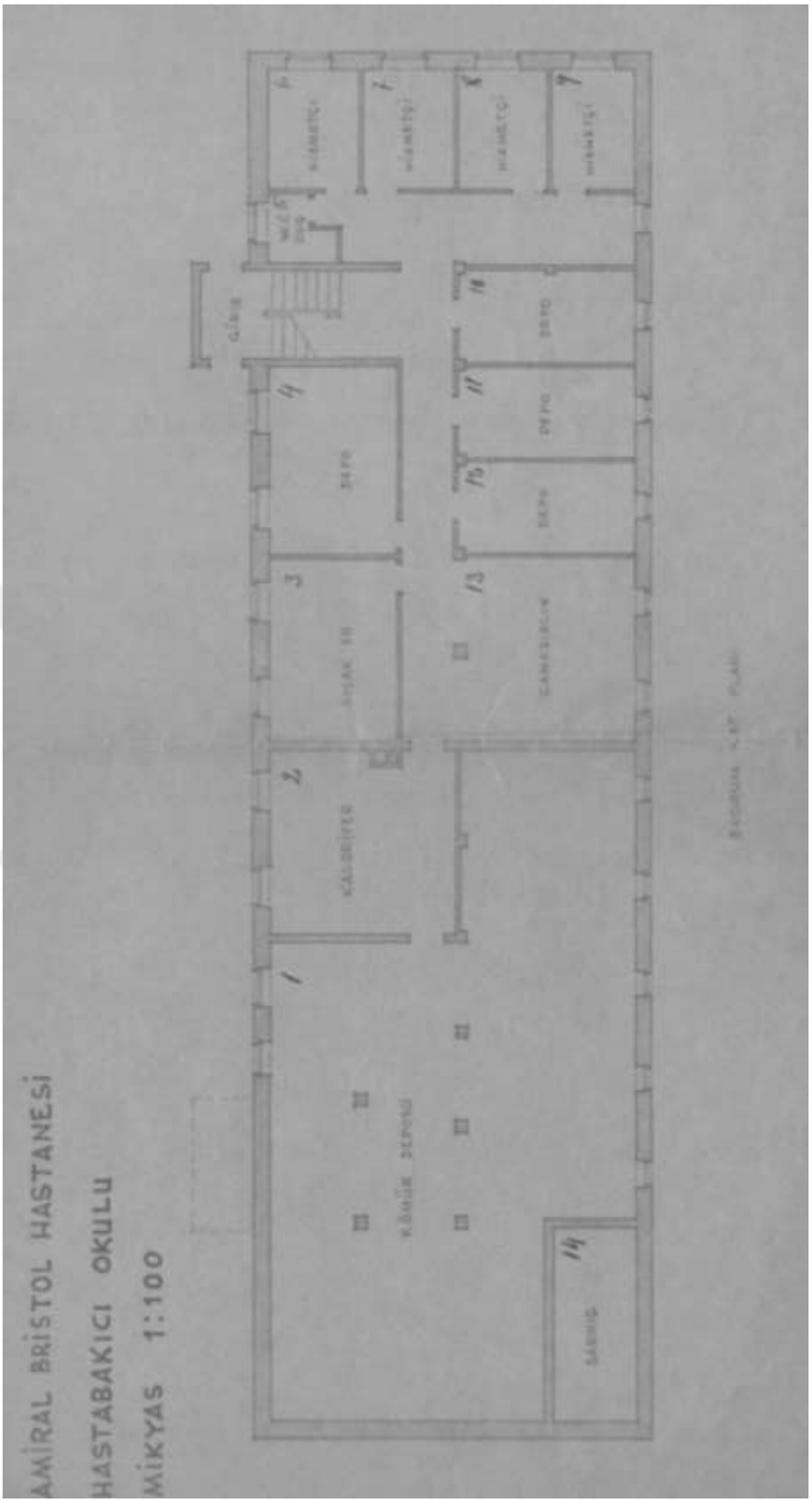

Figure 3.70: Floor plan for the basement of the ABSN building
Source: ABHO_05_dra02, ABHO Collection, SKL, Koç University

Figure 3.71: Students in the laboratory at the ABSN Nurses' Home
Source: ABHO Collection, SKL, Koç University

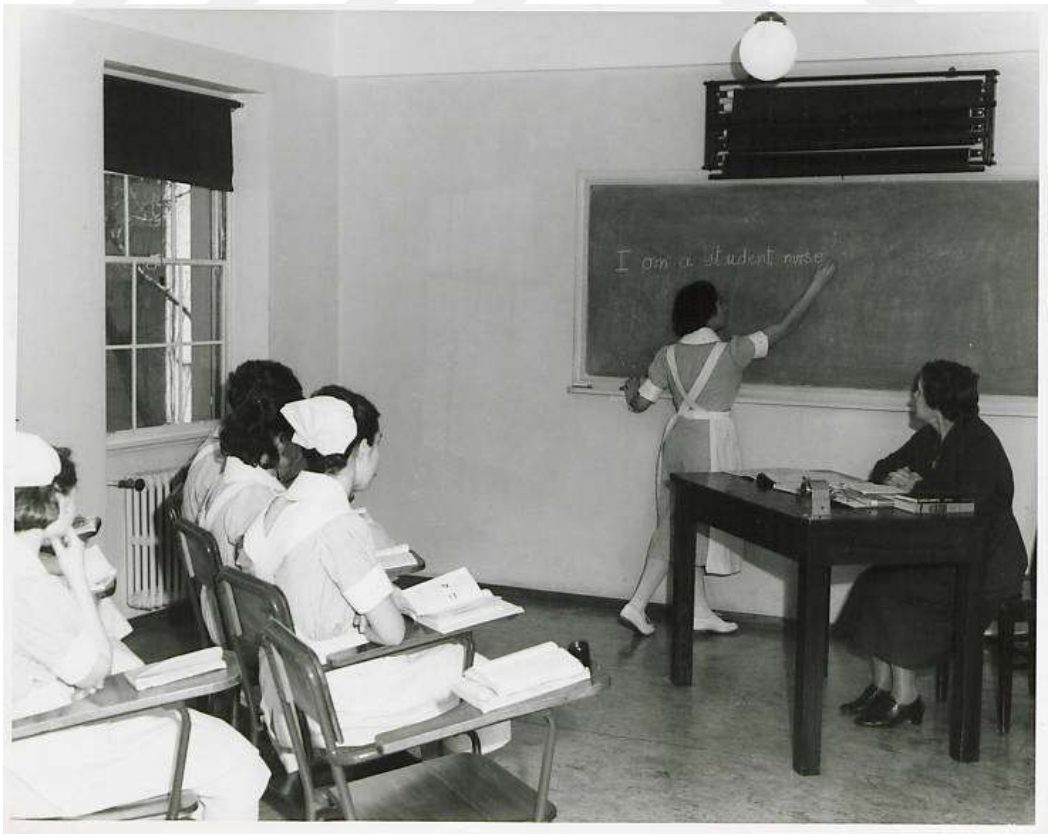

Figure 3.72: Classroom in the ABSN Nurses' Home
Source: ABHO Collection, SKL, Koç University

Figure 3.73: Students practicing their newly acquired skills in the demonstration room of the ABSN Nurses' Home
Source: ABHO Collection, SKL, Koç University

Figure 3.74: Students practicing with figurines in the demonstration room of the ABSN Nurses' Home
Source: ABHO Collection, SKL, Koç University

Figure 3.75: Diet kitchen at the St. Luke's Hospital School of Nursing
Source: "A College of Nursing: St. Luke's International Medical Center, Tokyo," *The American Journal of Nursing* 33, no. 10 (Oct. 1933): 932.

Figure 3.76: Cooking class at the İsmet Paşa Girls' Institute in Ankara
Source: Salt Research, EMH002.

Figure 3.77: Diet kitchen at the ABSN Nurses' Home designed by Sedad Hakkı Eldem
Source: ABHO Collection, SKL, Koç University

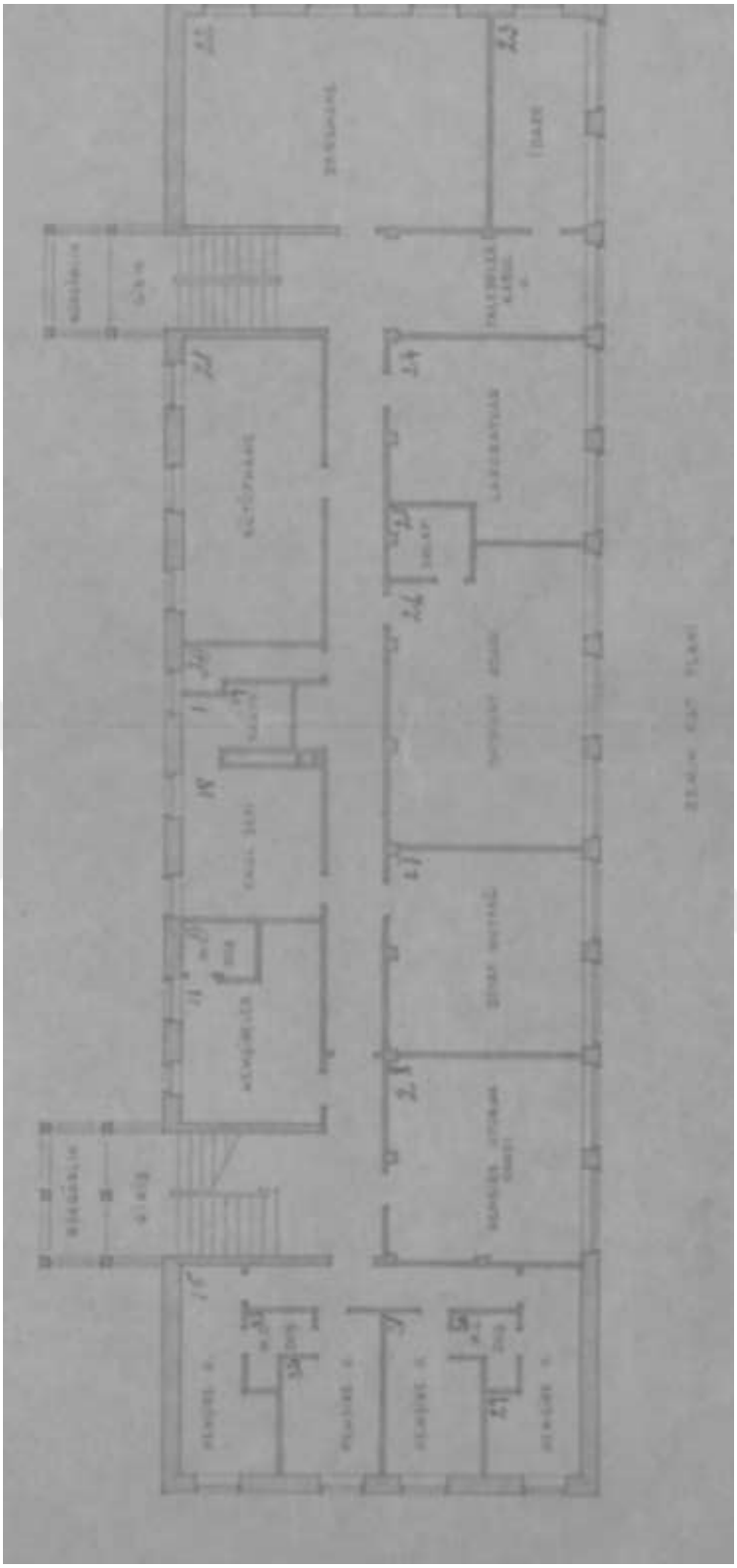

Figure 3.78: Ground floor plan of the ABSN Nurses' Home designed by Sedad Hakkı Eldem
Source: ABHO_05_dra02, ABHO Collection, SKL, Koç University

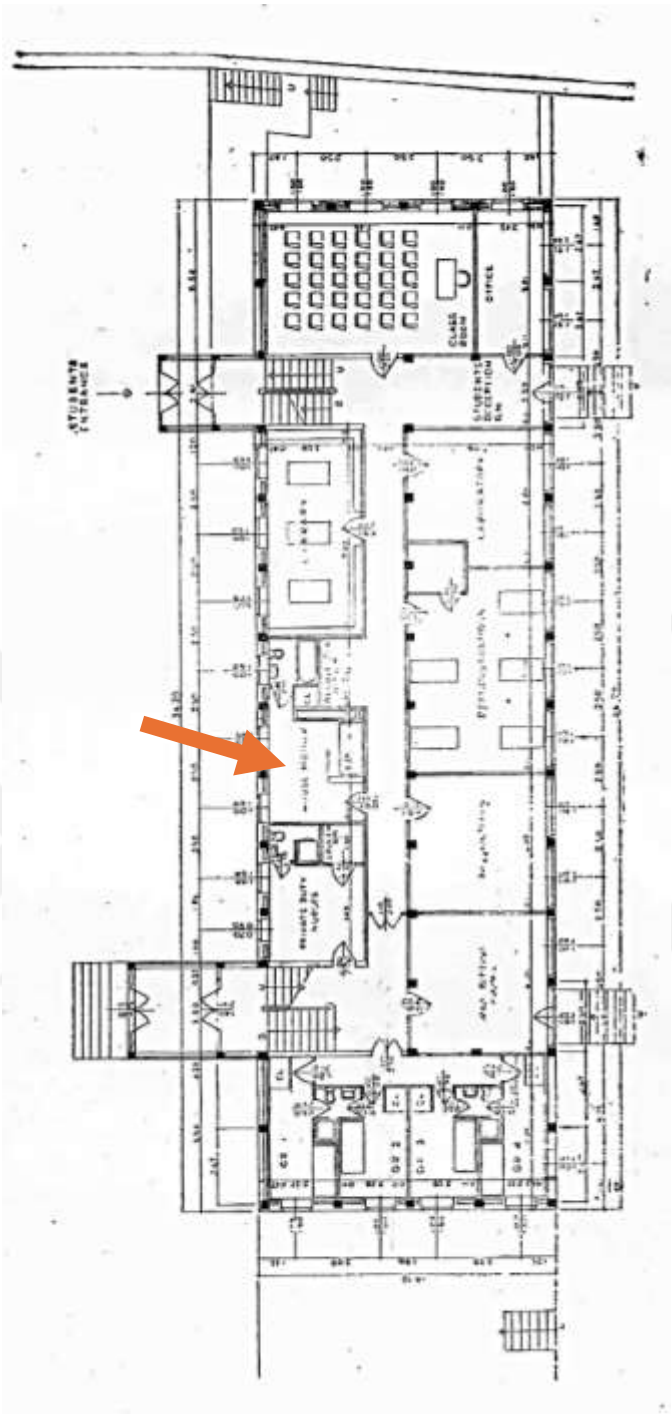

Figure 3.79: English version of the ground floor plan of the ABSN Nurses' Home. Room labelled as "House Mother" marked with an arrow.
Source: Eldem, "Amiral Bristol Hastahanesi Paviyonu," 52.

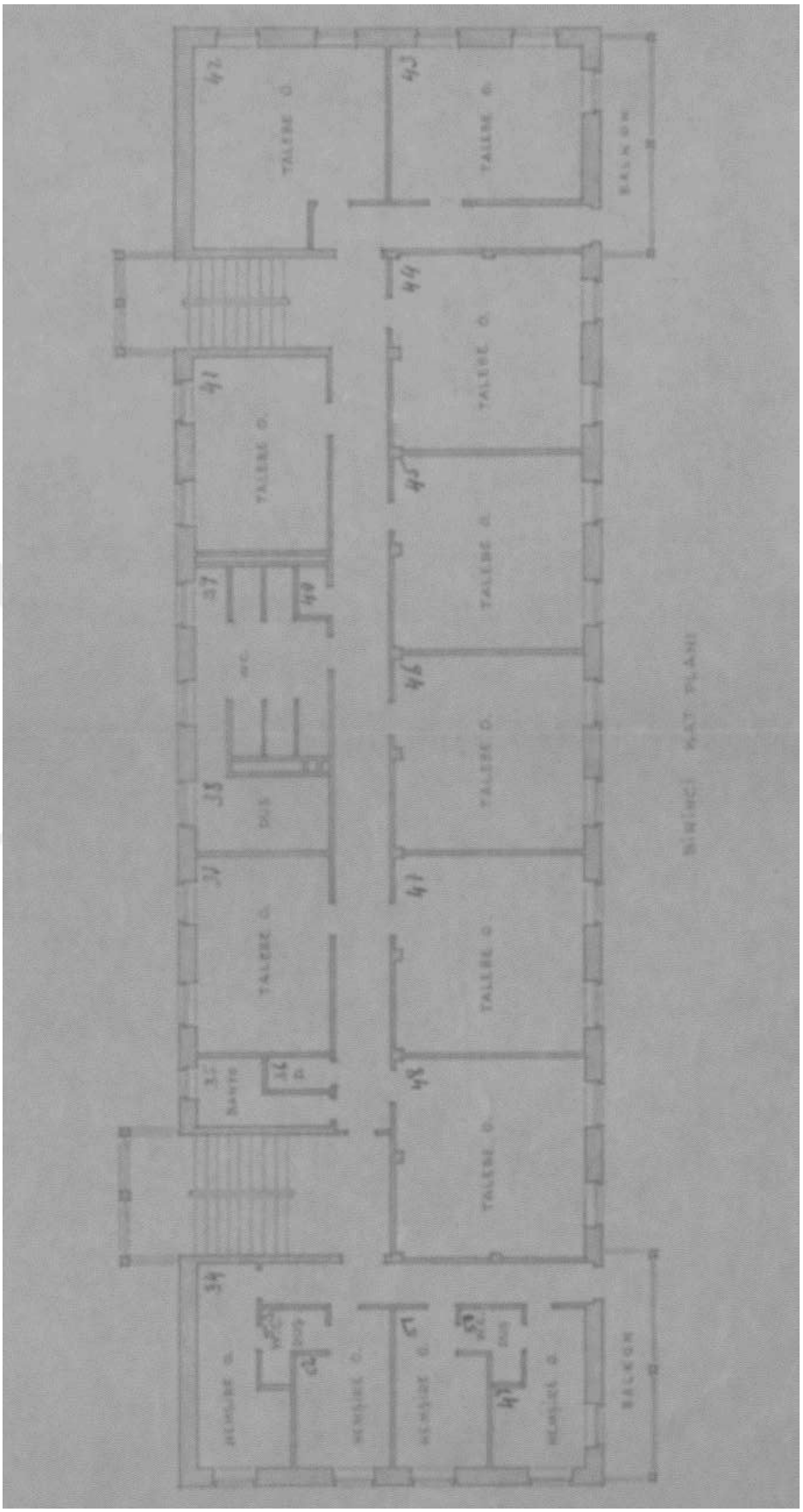

Figure 3.80: First floor plan of the ABSN Nurses' Home designed by Sedad Hakkı Eldem
Source: ABHO_05_dra02, ABHO Collection, SKL, Koç University

Figure 3.81: A bedroom in the ABSN Nurses' Home designed by Sedad Hakkı Eldem.
Source: ABHO Collection, SKL, Koç University

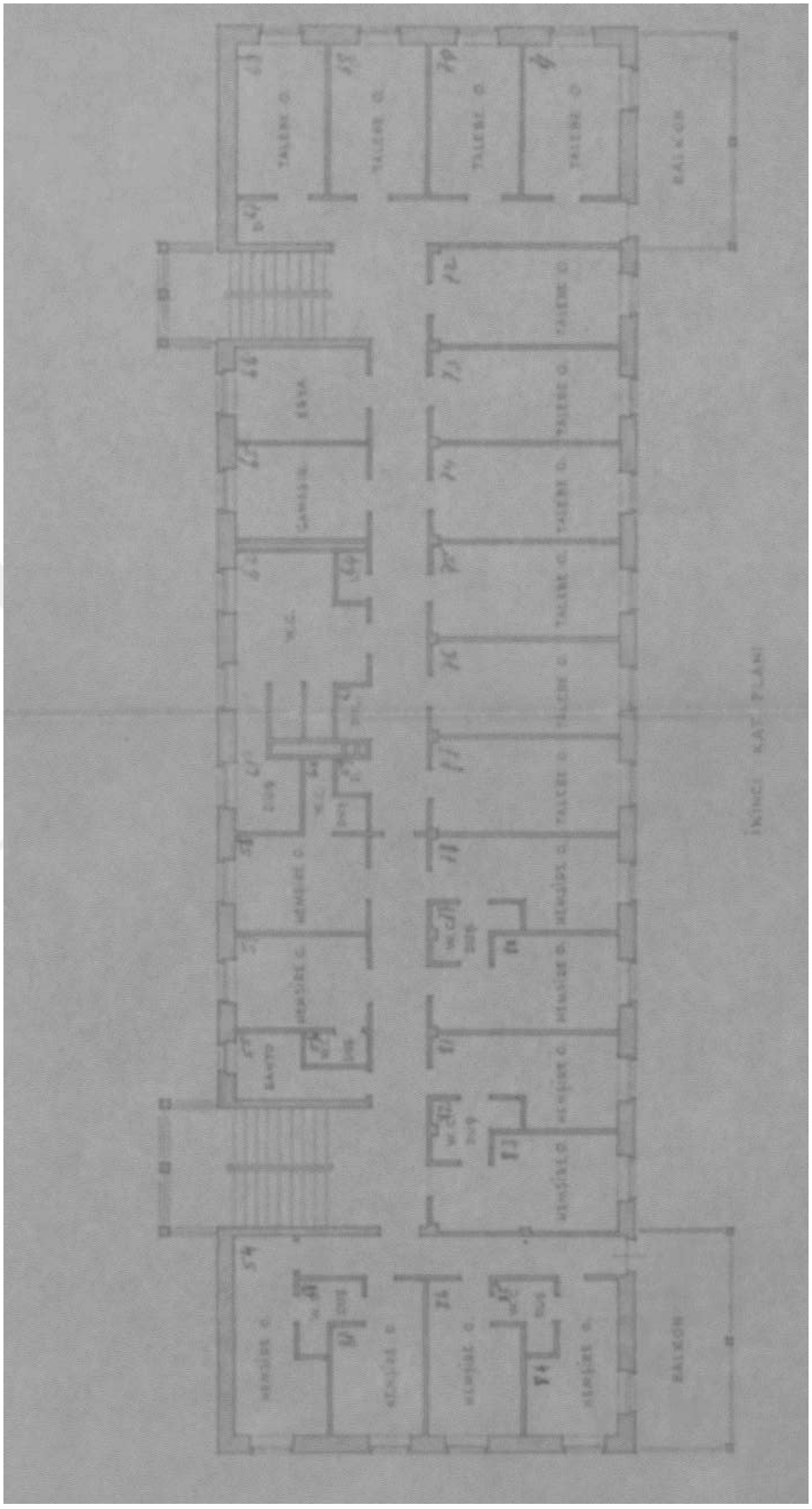

Figure 3.82: Second floor plan of the ABSN Nurses' Home designed by Sedad Hakkı Eldem.
Source: ABHO_05_dra02, ABHO Collection, SKL, Koç University

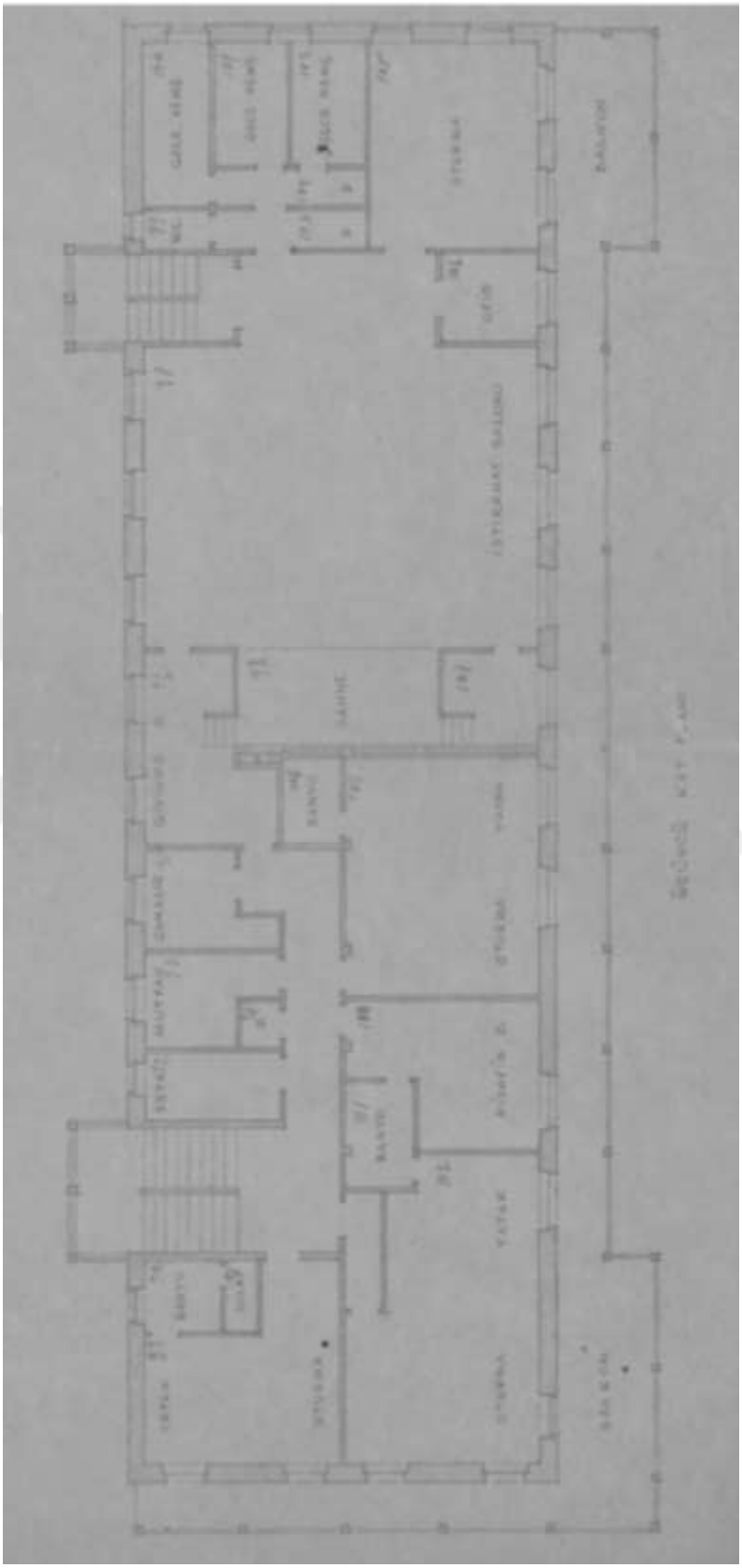

Figure 3.83: Third floor plan of the ABSN Nurses' Home designed by Sedad Hakkı Eldem
Source: ABHO_05_dra02, ABHO Collection, SKL, Koç University

Figure 3.84: A theatrical performance by the ABSN students at the Nurses' Home designed by Sedad Hakkı Eldem
Source: ABHO Collection, SKL, Koç University

Figure 3.85: A sitting room at the ABSN Nurses' Home designed by Sedad Hakkı Eldem
Source: ABHO Collection, SKL, Koç University

Figure 3.86: Enclosed bridge connecting the ABSN Nurses' Home designed by Sedad Hakkı Eldem to the hospital building designed by W. Stuart Thompson
Source: Eldem, "Amiral Bristol Hastahanesi Paviyonu," 54.

Figure 3.87: Students playing ball indoors at the ABSN Nurses' Home designed by Sedad Hakkı Eldem
Source: ABHO Collection, SKL, Koç University

Figure 3.88: Students playing volleyball on the court of the ABSN Nurses' Home designed by Sedad Hakkı Eldem, photographed from inside the building
Source: ABHO Collection, SKL, Koç University

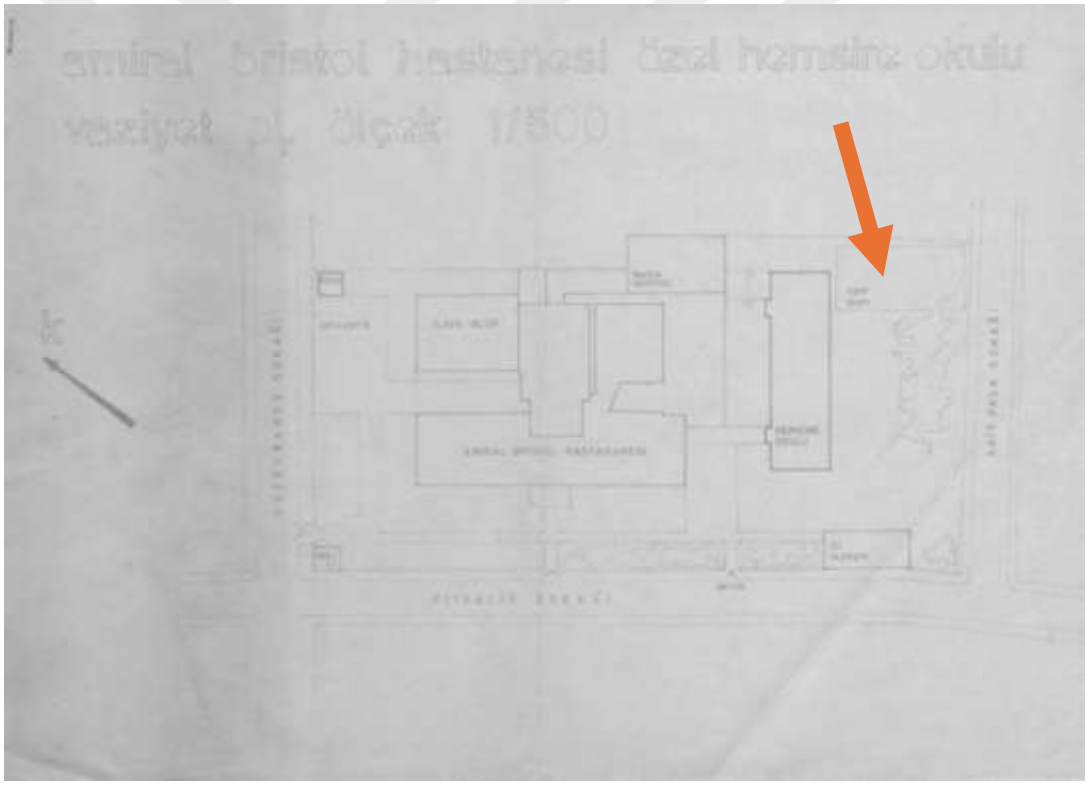

Figure 3.89: Site plan of the Admiral Bristol Hospital complex
The sports court is marked with an arrow.
Source: ABHO 03-dra005, ABHO Collection, SKL, Koç University

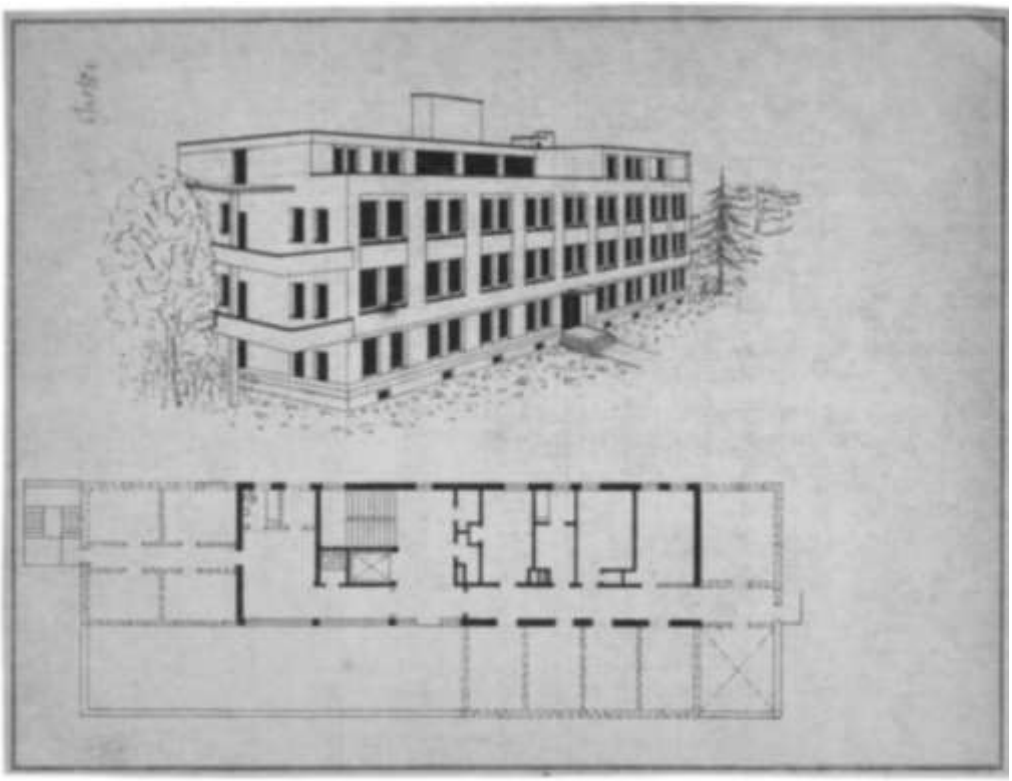

Figure 3.90: Plan for the extension of the penthouse of the Admiral Bristol Hospital (architect unknown)
Source: RAC, RBF, Projects (Grants), RG3, Subgroups 1 and 2 (FA005), Box 78, Folder 529.

Figure 3.91: The American Hospital building designed by W. Stuart Thompson after the penthouse extension was constructed
Source: Winkler and Rountree, *Amerikan Hastanesi*, 129.

Figure 3.92: The American Hospital building designed by W. Stuart Thompson after two additional floors were added to its roof to connect it to the Barclay Acheson building adjacent to it.
Source: Winkler and Rountree, *Amerikan Hastanesi*, 175.

Figure 3.93: The American Hospital building designed by W. Stuart Thompson after the 1983 extensions
Source: Winkler and Rountree, *Amerikan Hastanesi*, 174.

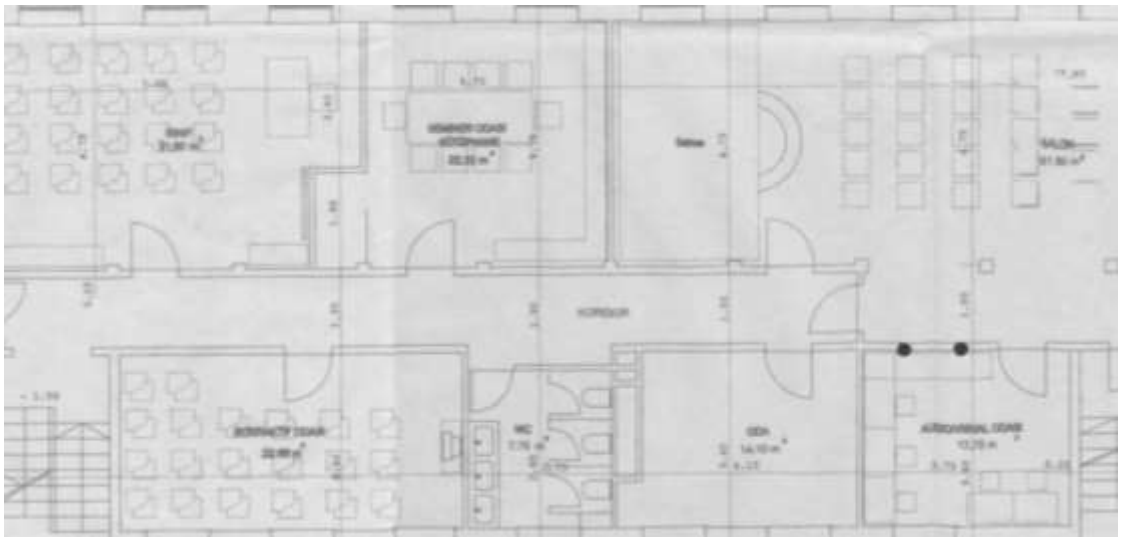

Figure 3.94: Detail of a floor plan dated Jul. 1995 by Can Çakmakçıoğlu for the remodeling of the ground floor of the ABSN Nurses' Home designed by Sedad Hakkı Eldem
Source: ABHO 07 – dra 02, ABHO Collection, SKL, Koç University

Figure 3.95: Detail of a floor plan dated Jul. 1995 by Can Çakmakçıoğlu for the remodeling of the first floor of the ABSN Nurses' Home designed by Sedad Hakkı Eldem
Source: ABHO 07 – dra 02, ABHO Collection, SKL, Koç University

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İ..HR.. 94/4596, H-07-04-1269 (Jan. 18, 1853)

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***Österreichische Nationalbibliothek* (Austrian National Library)**

Wiener Bilder 47, Nov. 20, 1938, 12-13

Rockefeller Archive Center (RAC)

RBF records, RG3, subgroups 1 and 2, box 78, folder 529

RF Annual Report, 1937: 455

RF records, field offices, Paris, record group: 6.1 (FA395), series 01, box 36, folder 451

RF records, field offices, RG 6, series 1, box 37, folder 457

RF records, field offices, RG2, 711, box 20, folder 1437

RF records, general correspondence, RG 2, 1947-1951, General Correspondence, Subgrp 1948, International, Series 1948/100

RF records, IHB/IHD records, RG 5 (FA115), subseries 3_700, box 234, folder 2863

RF records, IHB/IHD records RG5, subseries 3_700, box 237, folder 2881

RF records, IHB/IHD records RG5, subseries 3_700, box 238, folder 2887

RF records, IHB/IHD records, RG5 (FA115), box 240, folder 2898

RF records, Photographs, series 100-1000, Box 167, Folder 3237

RF records, photographs, series 805, box 167, folder 3243

RF records, projects, SG 1.1, series 805, box 1, folders 1, 5, 9, 12

RF records, projects, SG 1.2, box 1, folder 5

RF records, projects, SG 1.2, series 805, box 3, folders 24, 25, 26, 27, 28

RF records, RG 2, 805, box 12, folder 101 (Collins to Strode, Jan. 22, 1928)

RF records, RG2, 1948/805, box 431, folder 2901

RF records, RG2, 1951/805, box 548, folder 3654 (Marshall to Rice, May 31, 1951)

RF records, RG2, 805, box 12, folder 101

RF records, RG5, 3_700, box 242, folder 2925

RF records, RG5, 805, box 148, folder 1942

RF records, RG5, 805, box 207, folder 2652

RF records, RG5, series 1.2, box 17, folder 277

RF records, Staff - International - Varley, Margaret L., 1948

RF, IHB/D records, RG 5, Series 3-700, box 234, folder 2862

RF, maps and flat files, 1/805, Drawer B 4, folders 3, 4

Royal Institute of British Architects (RIBA) Collections

AHP\1\15\1

PA1457/AHP[247](1-20)

PB612/AHP[307](1-2)]

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RIBA21385 - SC64/TEX[46]4

RIBA21386 - SC64/TEX[46]3

RIBA21387 - SC64/TEX[46]23

RIBA21388 - SC64/TEX[46]24

RIBA23637

RIBA61794

RIBA88705

RIBA88706

Salt Research

AHISTEMIN011

AHISTSISL009

AHTUR0121

APLPESTAM02

EMBBII013

EMH002

La Turquie Kemaliste (Feb. 1939).

Near East Relief collection, *The Near East Relief Hand Book* (New York, NY: Near East Relief, 1920).

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***Türkiye Büyük Millet Meclisi* (The Grand National Assembly of Turkey)**

TBMM Tutanak Dergisi (Journal of the registers of the Turkish Parliament), 19th gathering, 26.12.1945, Session 2, Period: VII, vol. 20, Meeting: 3.

TBMM Z.C., Term III, vol. 4 (May 7, 1928): 8-9, 62-3.

TBMM Z.C., Term V, vol. 25 (May 23, 1938): 33-4.

Wellcome Collection

20603i

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38546i

40159i

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Yale University

Yale University Library Collection, Bdc1 F93, Reports and Accounts 1918-1919, "Friends Work at Constantinople," 2-4

Interviews

Koç University IRB approval number: 2021.099.IRB3.060

Interview with a person who gave birth at the American Hospital in the 2000s (Sep. 23, 2021)

Interviews with Can Çakmakçıoğlu (Mar. 7 and 9, 2022)

Interviews with the current staff of the American Hospital (Mar. 16, 2022)

Interview with Ayşe Pişkin (Feb. 21, 2023)

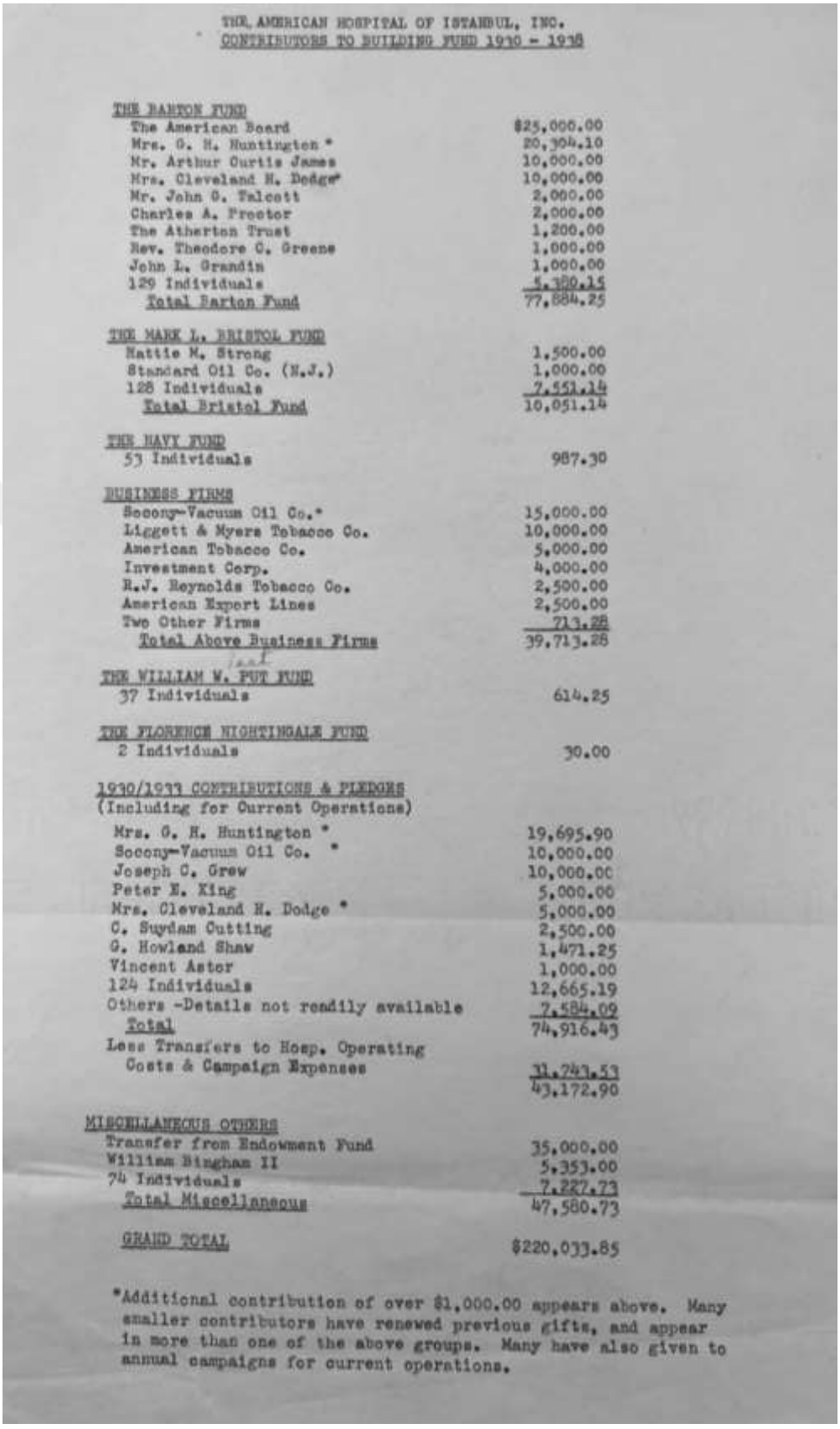
Interview with Ülkü Deniz Özsu (Feb. 28, 2023)

Interviews with current staff of the Prof. Dr. N. Reşat Belger Beyoğlu Ophthalmic Education and Research Hospital (Mar. 1, 2023)

Interviews with Erdinç Kadıoğlu (Mar. 16 and 18, 2022, May 27, 2022, Jun. 6, 2022, Mar. 30, 2024, Apr. 2 and 3, 2024)

Interviews with KUH staff, May 27, 2024.

Appendix A



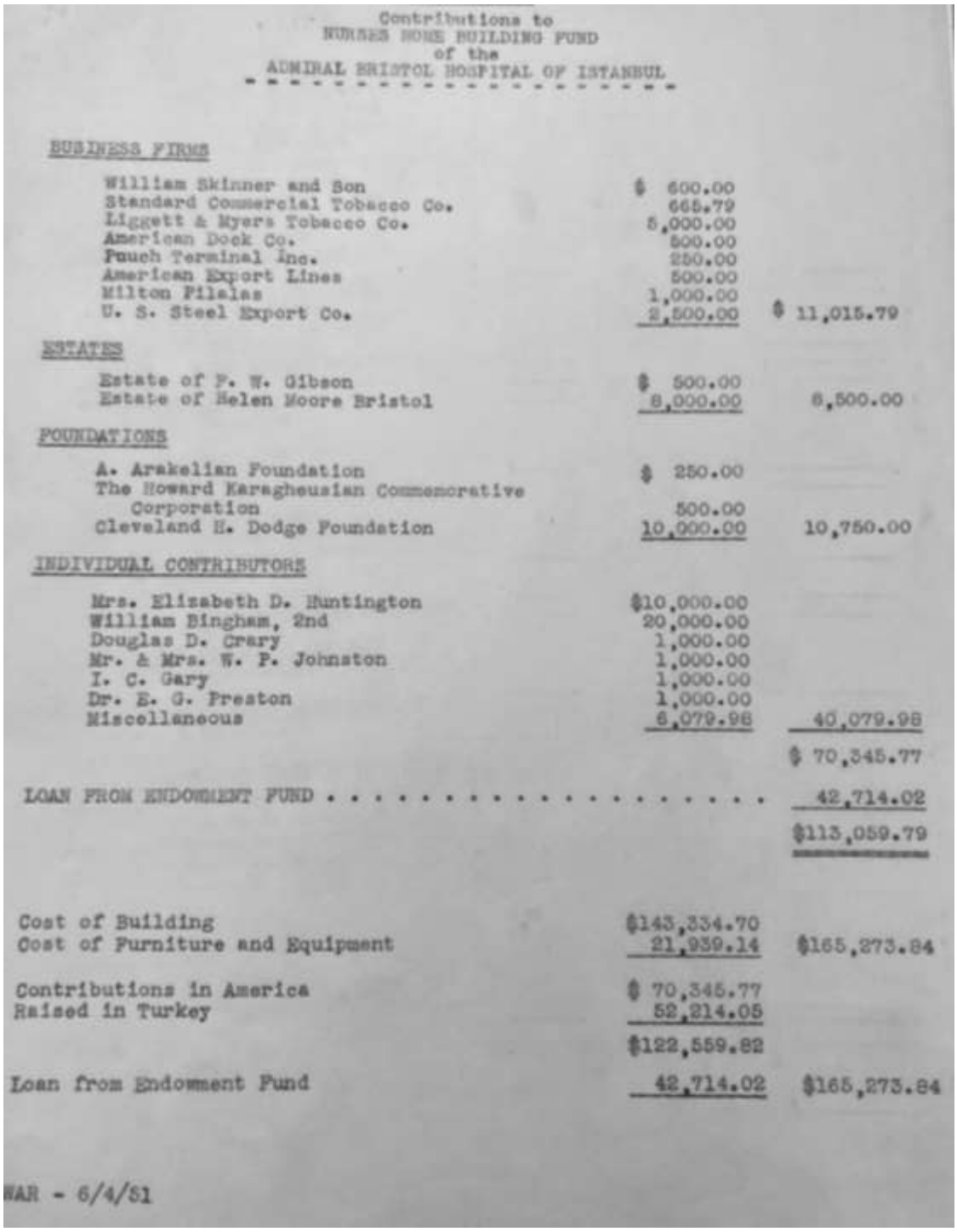
THE AMERICAN HOSPITAL OF ISTANBUL, INC.
CONTRIBUTORS TO BUILDING FUND 1930 - 1938

THE BARTON FUND	
The American Board	$25,000.00
Mrs. G. H. Huntington *	20,304.10
Mr. Arthur Curtis James	10,000.00
Mrs. Cleveland H. Dodge*	10,000.00
Mr. John G. Talcott	2,000.00
Charles A. Proctor	2,000.00
The Atherton Trust	1,200.00
Rev. Theodore C. Greene	1,000.00
John L. Grandin	1,000.00
129 Individuals	5,380.15
Total Barton Fund	77,884.25
THE MARK L. BRISTOL FUND	
Mattie M. Strong	1,500.00
Standard Oil Co. (N.J.)	1,000.00
128 Individuals	7,551.14
Total Bristol Fund	10,051.14
THE NAVY FUND	
53 Individuals	987.30
BUSINESS FIRMS	
Socony-Vacuum Oil Co.*	15,000.00
Liggett & Myers Tobacco Co.	10,000.00
American Tobacco Co.	5,000.00
Investment Corp.	4,000.00
R.J. Reynolds Tobacco Co.	2,500.00
American Expert Lines	2,500.00
Two Other Firms	713.28
Total Above Business Firms	39,713.28
THE WILLIAM W. PUT FUND	
37 Individuals	614.25
THE FLORENCE NIGHTINGALE FUND	
2 Individuals	30.00
1930/1933 CONTRIBUTIONS & PLEDGES (Including for Current Operations)	
Mrs. G. H. Huntington *	19,695.90
Socony-Vacuum Oil Co. *	10,000.00
Joseph C. Grew	10,000.00
Peter E. King	5,000.00
Mrs. Cleveland H. Dodge *	5,000.00
C. Suydam Cutting	2,500.00
G. Howland Shaw	1,471.25
Vincent Astor	1,000.00
124 Individuals	12,665.19
Others -Details not readily available	7,584.09
Total	74,916.43
Less Transfers to Hosp. Operating Costs & Campaign Expenses	31,743.53
	43,172.90
MISCELLANEOUS OTHERS	
Transfer from Endowment Fund	35,000.00
William Bingham II	5,353.00
74 Individuals	7,227.73
Total Miscellaneous	47,580.73
GRAND TOTAL	$220,033.85

*Additional contribution of over $1,000.00 appears above. Many smaller contributors have renewed previous gifts, and appear in more than one of the above groups. Many have also given to annual campaigns for current operations.

List of contributors to the American Hospital building fund (1930-1938). Source: RAC, RBF, Projects (Grants), RG3, Subgroups 1 and 2 (FA005), Box 78, Folder 529.

Appendix B



Contributions to
NURSES HOME BUILDING FUND
of the
ADMIRAL BRISTOL HOSPITAL OF ISTANBUL

BUSINESS FIRMS		
William Skinner and Son	$ 600.00	
Standard Commercial Tobacco Co.	665.79	
Liggett & Myers Tobacco Co.	5,000.00	
American Dock Co.	500.00	
Pauch Terminal Inc.	250.00	
American Export Lines	500.00	
Milton Filalas	1,000.00	
U. S. Steel Export Co.	2,500.00	$ 11,015.79
ESTATES		
Estate of P. W. Gibson	$ 500.00	
Estate of Helen Moore Bristol	8,000.00	8,500.00
FOUNDATIONS		
A. Arakelian Foundation	$ 250.00	
The Howard Karagheusian Commemorative Corporation	500.00	
Cleveland H. Dodge Foundation	10,000.00	10,750.00
INDIVIDUAL CONTRIBUTORS		
Mrs. Elizabeth D. Huntington	$10,000.00	
William Bingham, 2nd	20,000.00	
Douglas D. Crary	1,000.00	
Mr. & Mrs. W. P. Johnston	1,000.00	
I. C. Gary	1,000.00	
Dr. E. G. Preston	1,000.00	
Miscellaneous	6,079.98	40,079.98
		$ 70,345.77
LOAN FROM ENDOWMENT FUND		42,714.02
		$113,059.79

Cost of Building	$143,334.70	
Cost of Furniture and Equipment	21,939.14	$165,273.84
Contributions in America	$ 70,345.77	
Raised in Turkey	52,214.05	
	$122,559.82	
Loan from Endowment Fund	42,714.02	$165,273.84

WAR - 6/4/51

List of contributors to the Nurses' Home building fund
Source: RAC, RBF, Projects (Grants), RG3, Subgroups 1 and 2 (FA005), Box 78, Folder 529.