The special issue of *Gardens & Landscapes—Ars therapeutica, hortus sanitatem. Gardens and Therapy—*, focuses on the study of gardens and landscapes in the context of therapeutics, diseases and related architecture, arts and culture from diverse societies. This volume approaches this topic with three goals. First, to strengthen the study of historical perspectives on gardening and landscape designing; secondly, to explore the relationship between architectural movements and the construction of therapeutic gardens; and, finally, to promote the imperative role of gardens in future health projects.

Gardens have always been envisioned as healthy places as they are open air areas that offer both shade and sun. Besides providing fresh air, gardens are restful and bountiful places and have therefore the power of healing the spirit. However, since the nineteenth century, and in parallel with urban hygienic measures, gardens have come to be considered for therapeutic purposes. Furthermore, one should bear in mind that the concept of “therapeutic” garden is relatively new, and it is not exclusively connected with the hospital context (KAMP 1997).

However, the gearing effect of the contact with nature, mainly in mental health institutions, assures the need and importance of therapeutic gardens both in the past as well as in the future. The field of landscape architecture was among the most interested in addressing this topic as it embodied many possibilities for the architects’ own work, with special attention to garden design (KEARNEY and WINTERBOTTOM 2005; MARCUS and SACHS 2015), and the choice of species for healing effects (MAI 2012; RIGHETTO et al. 2016).

While landscape architects have been more interested in advising how therapeutic gardens should be laid and how to explore their potential through the study of healing gardens for dementia, children and elderly, the History of Science, Technology and Medicine aims at looking at therapeutic gardens to explore the close connections between scientific developments and how gardens and landscapes were designed to have a positive impact on the sick. In this sense, gardens were among non-drug treatments and, therefore, could be considered as ‘spaces of safeness’. Therapeutic gardens are explored in this special issue both as a way to understand and fulfil a specific need and to incorporate green spaces as sources of healing. These spaces can be built inside or outside the city, they can be either spaces of healing or disease, and be related to medical institutions or city planning, but, in the end, therapy is always present. Nevertheless, this volume follows seminal work by Clare Hickman on Therapeutic Landscapes: *A History of English Hospital Gardens since 1800* (2013), and it is very much focused on therapeutic gardens in Portuguese and Brazilian hospitals. In that sense, three articles cover case-studies of nineteenth- and twentieth-century therapeutic gardens, both in Portugal and Brazil. However, gardens are not always a locus for therapy. They can also be a focus of disease, as it is demonstrated in the article on tea gardens in India.
Therapeutic gardens and their significance in the complex reformulation of Brazil’s health politics at the turn to the twentieth century are studied by Inês Andrade. A series of regulations for hospital architecture were developed in Rio de Janeiro, while the city was the capital of the Portuguese Empire, covering from sanitary improvements to the implementation of urban modifications. The author compares several hospital buildings and their gardens’ configuration in relation to the broader context of hospital construction in this port city, the foundation of inspection organizations and the consolidation of expertise in scientific societies. Furthermore, the author establishes comparisons with international references and includes an explanation for the model replication. Surrounding courtyards, gardens and green spaces are justified by therapeutic programs and modified according to scientific recommendations on everything concerning air circulation and light. Finally, and also of a high significance, the present and the future of hospital architecture are also criticized, especially when historical information is not, unfortunately, taken into consideration.

The second article by Ana Amora covers hospital architecture under the influence of the so-called ‘Carioca School’, which developed in Rio de Janeiro, Brazil, during the first decades of the twentieth century. After Pasteur’s findings, the “modern” hospital of the very first decade of the 20th century had to be shaped by both architects and medical experts, to mitigate contagion and accommodate the bacteriological research discoveries of the time. Stemming from both the classical Tonet models, in which several buildings were separated to allow airflow—thus preventing the disease from spreading—, and the massive vertical model, the author argues hospital architectural configurations of the ‘Carioca School’ were shaped by the garden. Therefore, Ana Amora’s article puts the hospital’s location in perspective, as it became decisive for its consequential spatial configuration. Resorting to the iconography of four case-studies, presented as the frames of a long movie, Amora offers a chronological journey through hospital architecture, from the protective therapeutic garden up to the vertical modernistic vertical garden.

In the third article, José Carlos Avelãs Nunes uses the example of sanatoria to assess the (hidden) connections between tuberculosis architecture and the healing garden. Drawing on paradigmatic examples of several buildings built in Portugal between 1850 and 1900, the author argues that the garden played a crucial role in the healing process, and it was as important as the medicalized architectural space. The green space of the sanatorium was a healing device on its own, allowing tuberculosis patients to experience a curative eye-contact with a representation of the countryside. Therefore, and even before architectural constructions, the garden was the first element to be considered, with its specific and well-defined fauna and flora. At the same time, its configuration was studied to prevent contamination and keep patients, doctors and the inhabitants of nearby city dwellings safe from such a deadly disease.

Therapeutic gardens have already been addressed by historiography and although the concept of ‘therapeutic garden’ is recent, ‘gardens as therapy’ is a common topos in Gardens and Landscape Studies due its connotation with values of well-being. However, what is new about this issue is that gardens are addressed not only as a source of healing, but also as a source of disease and a place of disease and discomfort.

In the fourth article, Suryyia Manzoor and Taniya Iqbal study the Tea Gardens of the Indo-Pak region during the nineteenth century, at a time when they became a place for cholera contamination due to mismanagement and contaminated water. The authors discuss the causes for the spread of cholera further and claims that the major cause for this was the lack of an available appropriate sanitary system for the inhabitants of tea gardens. Moreover, the political turmoil in the region was also another reason for the absence of primary health and sanitation facilities. Tea gardens were thus utilized as scientific laboratories where cholera vaccines were tested for their effectiveness. The article thus unfolds into two untouched dimensions of gardens in the history of medicine – ‘gardens as
disease’ and ‘gardens as laboratories’.

This volume also includes two book reviews, both by the editor-in-chief. One, concerning a forgotten book on Aranjuez by Magdalena Merlos, which played an important role to enhance the site as a Worldwide Cultural Heritage. The other reviews a book by Alex Mexi on a Romanian landscape created in the nineteenth century, which shows strong connections with other European cases, hence highlighting the circulation of models and expertise from European centers to peripheral areas.

In current-times, a strong emphasis has been placed on the use of green spaces in hospitals, fostering the construction of healing-aid spaces. Therapeutic gardens are being built in different places in the world, showing a growing awareness of the gardens’ importance in non-invasive treatments. In Brazil, for example, the network of SARAH hospitals shares gardening knowledge among them to create healing landscapes for their patients. In the UK and Hong Kong, Maggie’s Centers for cancer treatment also pay a lot of attention to hospital green environments. In Milano, Italy, a new project called Policlinico di Milano also stresses the garden’s importance. Operating in protected and historical parts of the city, a therapeutic garden is established alongside two main vertical buildings, with a lower one in the middle. Here, the special garden includes pet zones, resting and meditation areas, among many others.

The history of the ‘garden as therapy’, with a focus on healing processes, is undoubtedly vital to understand, define and even avert mistakes in its future implementation. In view of this, the four articles point out different perspectives but struggle to gather complementary visions. In hospital and tuberculosis architecture of both Brazil and Portugal, or even in the open-air disease gardens of India, the pro and fro movement of the dichotomy “cure-disease” contributes to understand the prevalence and importance of healing gardens. In current historiography of Science, Technology and Medicine, therapeutic gardens are sometimes forgotten or considered as marginal studies but, as demonstrated, the proof of concept of these spaces shows their disruptive and up-to-date compliance with innovations and the transfer of knowledge. Therefore, this special issue is intended to unveil the veil of these very special spaces, like an Alice in Wonderland’s mirror, where the backstage can be more central than the show itself.

REFERENCES


